Mammographies
DeShazer, Mary K.

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Photographic representations of women living with or beyond breast cancer have gained prominence in recent decades due to increasing incidences and heightened public awareness of this disease. Visual breast cancer narratives constitute both documentary projects and dialogic sites of self-construction, for all “selves” are texts to be deciphered, and breast cancer subjectivities can be especially difficult to articulate and decode, given the psychological and cultural weight of this malady. Because of their painful subject matter and iconic power, photographs of women with breast cancer may evoke ambivalence or controversy, as viewers, some of whom may themselves be ill, confront vivid images of scarred, recovering, or deteriorating bodies. In an essay in *Afterimage* Jean Dykstra claims that “given metaphors of the healthy body as ‘healthy society’ and norms about what is appropriate subject matter for public photographs, autobiographical photographs of bodies marked by disease signify a forceful challenge to codes of representation and cultural ideologies about the female body” (1). Resisting conventional sexualized representations, breast cancer photographs ask readers to reevaluate “standards of beauty and acceptability of images of the female body” and raise important issues of “gender, illness and representation and the construction of the self” (2).

Breast cancer photography made its U.S. mainstream debut on the August 15, 1993, cover of the *New York Times Magazine*, which featured a pale, gaunt woman clad in a striking white dress cut away to reveal the mastectomy scar that dominated her exposed torso. This self-portrait by the photographer and model Matuschka, who was diagnosed with breast cancer in 1991 and underwent a mastectomy that she later deemed unnecessary, was a political gesture that invoked more than a thousand letters to the newspaper, many of them from breast cancer patients (www.matuschka.org). While a majority of these responses were
supportive ("Fantastic! A cover girl who looks like me!"), others were critical or even angry: "It’s embarrassing!"; “Now everyone knows how I look!” (“Why I Did It”). Entitled Beauty Out of Damage, Matuschka’s self-portrait introduced an article by Susan Ferraro accompanied by the headline “You Can’t Look Away Anymore.” This photograph became the most frequently published in the world during 1993 and was nominated for a Pulitzer Prize. “I have always adhered to the philosophy that one should speak and show the truth, because knowledge leads to free will, to choice,” explained Matuschka in her essay “Why I Did It.” “I hope that my image will convey the idea that a woman with one breast or no breasts is entitled to be looked at and approved of. My message is: ‘Don’t wait for society to accept you. Have courage to face yourself—the whole package. You become the role model and society will follow’” (“Why I Did It”).

Society has indeed followed. As Carol Spiro, president of Ottawa, Canada’s branch of Breast Cancer Action (BCA), points out, “Matuschka’s cover did more for breast cancer than anyone else in the last twenty-five years” (www.matuschka.org). Although Matuschka’s injunction to breast cancer patients to speak out may sound familiar to postmillennial readers, given the current prominence of breast cancer movements in the United States and United Kingdom, her New York Times photograph appeared in an era in which activism and research were just beginning to thrive. In 1993 feminist organizations such as the Breast Cancer Fund, the National Breast Cancer Coalition, the Mautner Project, and BCA had recently joined mainstream groups such as Susan G. Komen for the Cure and the American Cancer Society (ACS) in calling for increased research funding and heightened visibility for patients long stigmatized. With the support of the Clinton administration and the U.S. Congress, breast cancer research funding at the National Cancer Institute grew from $155 million in 1992 to $566 million in 2004 (King, ix–xxx). Matuschka’s photographs of her mastectomy scar (including Take This Picture, Like Mother, Like Daughter, and Portrait of the Artist as a One-Breasted Activist) subsequently appeared at breast cancer fund-raising events, and she expressed pride that her self-portraiture broke cultural silence: “If we keep quiet about what cancer does to women’s bodies, if we refuse to accept women’s bodies in whatever condition they are, we are doing a disservice to womankind” (“Why I Did It”).

Since Matuschka was not the first activist to photograph her post-mastectomy body, a brief discussion of earlier representations will contextualize the impact of her New York Times cover image. Most histori-
ans agree that the earliest image of a one-breasted woman to enter U.S. public space was that of poet Deena Metzger, who in 1977 appeared nude from the waist up, smiling and arms outstretched, on a feminist poster featuring a photograph taken by Hella Hammid. This photograph highlights Metzger’s missing right breast, her mastectomy scar covered by a tattooed tree. “There was a fine red line across my chest where a knife entered but now a branch winds about the scar and travels from arm to heart,” claims Metzger in an accompanying prose-poem; “I have the body of a warrior who does not kill or wound” (www.deenametzger.com). Although Metzger’s photograph is not self-portraiture, she conceptualized the representation of her post-operative body and solicited Hammid to capture this positive image.

Lisa Cartwright describes well the differences between the photographic representations of Metzger and Matuschka.

While Metzger’s scar is displayed in a manner that seems to promote its joyous revelation, Matuschka’s is artfully lit and framed to emphasis the role of concealment and display in its disclosure. And whereas “The Warrior” puts forth the post-operative woman as a naturally beautiful figure, “Beauty Out of Damage” suggests a concept of beauty whose aesthetic involves an appreciation of the fashioning of the body.

These photographs depict two different breast cancer aesthetics, political stances, and subject formations: Metzger presents herself as healthy and exuberant, her post-mastectomy breast as natural in its unreconstructed state; Matuschka, in contrast, presents her post-operative body as disfigured yet elegant, deserving to be seen.

Matuschka’s other important predecessor, British photographer Jo Spence, gained public recognition in the United Kingdom during the 1980s for depicting her breasts pressed down during mammograms and Marked Up for Amputation—an ironic photographic title, since she refused the mastectomy her surgeon recommended in favor of lumpectomy. In another photo from this series she wryly labels her left breast Property of Jo Spence? With psychologist Rosie Martin, Spence developed techniques of photo-therapy still used to assist patients struggling to counter traumatic experiences. The emphasis in Spence’s cancer photographs is neither Metzger’s joy nor Matuschka’s sobriety but rather a trenchant critique of a sexist culture that fetishizes breasts and a medical
system that often objectifies patients. Dykstra notes these differences between the self-portraiture of Matuschka and Spence.

Many of Matuschka’s photographs have a polished, fine arts look about them. Despite their subject matter, they are often beautiful to look at. Spence’s photographs, on the other hand, are often snapshot-like, in-your-face documents of her rage and feelings of powerlessness. Matuschka’s images suggest a reevaluation of definitions of a beautiful body, and they radiate a kind of pride in a still-beautiful body. Spence’s photographs and the pointed, articulate text that accompanies them are interrogations not only of conventions of beauty and the female body, but of codes of representation, constructions of disease, and explorations of identity. Perhaps most significantly, they demand that viewers become aware of the visual codes that construct ideas of gender, sexuality, class, illness and the kind of body that is “fit to be seen.”

The Amazonian imagery of Metzger’s photograph and poem, the systemic critique of gender and medicalization by Spence, and the resistant yet “beautiful” aesthetic of Matuschka represent a range of activist approaches to documenting women’s post-operative bodies in the latter decades of the twentieth century.

Breast cancer photography published in the United States since the mid-1990s has veered away from self-portraiture, as documentary narratives created by a photographer-witness have become the dominant mode of representation. Recent projects have focused on the somatic identities of women combating cancer and have constructed discursive “selves” for both photographer and photographic subjects. In what follows I analyze the cultural work and aesthetic reconfigurations that contemporary breast cancer photographs perform as well as effects their accompanying narratives have had on reader-viewers. As Cartwright notes, “The formation of communities and public cultures on the basis of breast cancer politics entails a reconfiguration of the post-operative female body in public space” (125). Moreover, as a public breast cancer culture has developed, feminist scholars have questioned whether its visual representations are sufficiently diverse. Cartwright, for example, has decried mainstream media emphasis on patients who are white, young, and glamorous, and has argued “in favor of representations that take up the complexities of age and beauty as they pertain to specific groups of
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women for whom breast cancer is most immediately a concern (women in their fifties and sixties) as well as those women categorically left out of discussions about breast cancer media (for example, black women)” (131). I share these concerns, and in analyzing what breast cancer photography signifies and accomplishes in postmillennial U.S. culture, I consider not only how women’s post-operative bodies are documented but also which women’s bodies are represented, and why.

This chapter focuses on five collections of breast cancer photographs that narrate their subjects’ experiences of illness, affirm their medicalized bodies, and engage photographer, subjects, and reader-viewers in a complex dialectic of structured looking: Art Myers’s *Winged Victory: Altered Images Transcending Breast Cancer* (1996), Amelia Davis’s *The First Look* (2000), Jila Nikpay’s *Heroines: Transformation in the Face of Breast Cancer* (2006), Amy S. Blackburn’s *Caring for Cynthia: A Caregiver’s Journey through Breast Cancer* (2008), and Charlee Brodsky and Stephanie Byram’s *Knowing Stephanie* (2003). The first three works are anthologies that feature black-and-white images of women of varied ages, races, ethnicities, and body types, identified by either full name or first name. Commentary accompanies the photographs, often the women’s own words but sometimes those of photographers, family members, or medical professionals, which serve as textual frames. These photographic narratives might best be characterized as “imagetexts,” to use W. J. T. Mitchell’s term, collections reliant on “a verbal overlay of relational networks” that inform their cultural inflections (9). In contrast, *Caring for Cynthia* and *Knowing Stephanie* are photo-documentaries, collaborative narratives that trace the illness history of one woman with breast cancer as captured in images taken by her chosen photographer. *Caring for Cynthia* features photographer Amy S. Blackburn’s commentary rather than that of Cynthia Ogden, the woman photographed, while *Knowing Stephanie* highlights the ill subject’s own words but is framed by photographer Charlee Brodsky’s preface and a biographical essay by Jennifer Matesa. These collections bring visibility to breast cancer patients by exploring their post-surgical embodiment and chronicling their hard-won subjectivities. They challenge hegemonic cultural definitions of beauty and femininity, and invite reader-viewers to witness images of women’s somatic suffering, resilience, or resistance. Despite these strengths, however, several of the narratives heterosexualize the breast cancer subject, feature hyperfeminine images, employ sentimental discourses, and/or emphasize a “mindless triumphalism” that risks dishonoring those who...
have died of this disease (Ehrenreich, 53). Since The First Look and Knowing Stephanie avoid these pitfalls, it is instructive to consider how so.

Transcendent Discourses in Winged Victory

In Family Frames: Photography, Narrative, and Postmemory Marianne Hirsch reminds readers that although photography’s primary function since the nineteenth century has been the documentation of family life, “multiple looks circulate in the photograph’s production, reading, and description”; familial photographs made public, that is to say, invite new ideologies of spectatorship (1). The context for Hirsch’s observation is her reflection on Roland Barthes’s analysis in Camera Lucida of his most highly revered family heirloom, the so-called winter garden photograph taken of his recently deceased mother when she was a child. For Barthes, this photograph’s punctum—the sting of recognition, “that accident which pricks me (but also bruises me, is poignant to me)”—lies in the familiar expression on the face of the girl who would later give birth to him (Barthes, 27). This jolt of recognition explains the photograph’s emotional resonance, a resonance that Barthes considered comprehensible only for himself as grieving son; he thus withholds the photograph from his reader’s view. Hirsch extrapolates from Barthes’s analysis to consider familial photographs more broadly through interpretations that rest on what he terms the studium, “the contextual, cultural narrative that helps one read a photograph” (Hirsch, 3). Competing cultural narratives evoke shifting interpretations; hence Hirsch’s claim that whenever photographic portraits are publicly scrutinized, multiple looks circulate.

Hirsch’s caveat is relevant to Art Myers’s Winged Victory because that collection’s stated impetus is familial experience, and one featured subject is the photographer’s wife, Stephanie Myers. As a specialist in preventive medicine, Myers explains in his preface, he has “many times had the sobering responsibility of delivering the news of a cancer diagnosis to patients and their loved ones” (np). Yet when his sister was diagnosed with breast cancer in her thirties (she subsequently died of the disease), and when his wife faced surgery some years later, Myers was “not prepared for the overwhelming effect that breast cancer in two close family members would have on my life” (np). The narrative subjectivity that Myers constructs is thus medically authoritative but experientially naive. A fine-arts photographer as well as a physician, Myers expresses hope
that this project will “show that a woman's fundamental nature is not dependent on anything external; the loss of part or all of her breast is not a threat to her being” (np). Although his assumptions regarding “a woman's fundamental nature” may sound essentialist from a feminist perspective, Myers challenges mainstream U.S. media for “bombard[ing]” viewers with “messages of centerfolds, push-up bras and silicone implants” that contribute to some men’s discomfort with amputated breasts and may exacerbate the fears of women with breast cancer that their “body image, femininity, and sexuality” are at risk (np).

Three photographs in Winged Victory offer images of post-operative women that challenge conventional assumptions of disfiguration or victimization. The first of these, captioned Sisterhood, presents a chain of linked photos in which diverse women display their nude breasts, unreconstructed or reconstructed, and face the camera, hands outstretched toward one another. The accompanying narrative written by one of the subjects, Dani, advances the theme of strength in community: “The gift of a lifetime came to me from the sisterhood of strangers who reached out to share their metamorphic journey from breast cancer victim to woman of substance” (Myers, np). Praising Myers for realizing that if his subjects would “openly expose their scars,” that act would “make acceptance a visible and essential concomitant of beauty,” Dani claims that subjects found common purpose during this project: “One by one we came to see our involvement as a way to change perceptions.” An additional benefit for the women was “an enhanced sense of self-esteem and pride in their bodies” (Myers, np). The punctum of this photograph arguably occurs through paradox: the vulnerability of the women's scarred breasts, the strength of their gazes. The photograph's studium lies in the culturally inflected knowledge that these women—old and young; black, white, and Asian; de-breasted or newly re-breasted—visually instantiate the experiences of thousands of post-operative women. Sisterhood constructs a visible link among breast cancer subjects who implicitly invite reciprocal others to share their illness narratives.

Painted Ladies, the only color image in Winged Victory, portrays three smiling women whose de-breasted or one-breasted chests have been decorated. As revealed in Dani's commentary, the subjects and the artist chose the imagery that would adorn each breast and the pose each woman would assume. Dani, a bodysurfer who enjoys defying the law by surfing topless, chose to pose as “the wink,” her right breast painted as an eye with staring pupil, her breastless left side surrounded by eye-
lashes that give the illusion of winking. Carol, who underwent a bilateral mastectomy, was “transformed into a woman with cleavage in a beautiful blue camisole,” while Susan, “with theatrical flair, became comedy and tragedy, with each intentionally reversed so that the comedy mask appeared over the mastectomy scar” (Myers, np). Post-surgical breasts have sported tattoos and body art for decades, but this photo further subverts the cultural script of breast cancer as tragic by engaging women’s post-operative bodies as humorous artistic canvases. In addition, the photograph and accompanying text pay homage to the women’s bonds: “From Carol to Dani to Susan, we each served as mentor and friend to each other when we were diagnosed. Years later we celebrated our friendships in living color” (Myers, np).

A third photograph, *Lisa with Barbell*, presents in semi-profile a short-haired, bare-breasted woman gazing at the impressively flexed muscle of her right arm while holding an enormous free weight in her left hand. Although her breasts are asymmetrical—the right breast is large and unscarred, the left smaller, scarred, and muscular—her arms
appear symmetrical, their muscles well developed. Lisa's accompanying testimony emphasizes agency and strength, doctor-patient collaboration, and pleasure in her distinctive bodily contours.

*I've made changes, reshaped my body with the use of free weights and aerobics over the last twelve years. And the surgeon made his changes when he removed my breast. A bit odd, perhaps, but I enjoy the change in that when I look at my chest where he removed my breast, I can truly appreciate and enjoy the shape and lines that I have added to my body over the years with the weights. The contrast is appealing to me, a soft breast on one side and a hard “pec” on the other.* (Myers, np)

Lisa’s comments reflect a breast cancer aesthetic that celebrates hybrid embodiment, while the photograph highlights her transgendered appearance. This imagetext challenges the dominant cultural narrative that women who undergo breast cancer surgery inevitably strive to regain their “lost” femininity.

The phrase *altered images*, which appears in the book’s subtitle, addresses an intriguing aspect of several Myers photographs reliant on montage, most notably the untitled cover image of a one-breasted woman whose lower body has become a gnarled tree trunk and whose shoulders and head have morphed into leafy branches. Myers’s use of tree imagery to convey the strength of post-mastectomy women recalls the poem that accompanied publication of the Hammid photograph of Metzger, but his photograph draws upon surrealist traditions to present the breast cancer body as mysterious—a theme reinforced by the talismanic necklace that the woman-tree wears, a bird whose feathers are attached to a wreath of vines and berries. Any potential this image might have to move beyond exoticism is unfortunately diminished by the Maria Marroccchino poem that glosses it, “Sometimes a Leaf Will Fall before Autumn,” which features predictable lines such as “Sometimes true beauty can never be captured” (Myers, np).

Despite many engaging photographs, *Winged Victory* at times romanticizes, sentimentalizes, and heterosexualizes women with breast cancer and thereby undercuts its subversive potential. The tendency to glorify hegemonic femininity appears most notably in *Stephanie*, which features the photographer’s wife clad in a long, sweeping dress that drapes her arms and shoulders, gathers at the waist, and opens to reveal her breasts, which appear at first glance unmarked by surgery. A closer look, however, reveals what the accompanying text confirms, that her right breast is reconstructed; a scar is barely visible, and the right nipple has a slightly different color and texture from the left. “My breast and right arm took quite a beating after the lympectomy, lymphadenectomy, surgery, radiation and radioactive implants,” she explains. “Over time my breast has again become fairly symmetrical” (Myers, np). Although an unsettling medical narrative clearly exists, neither Art nor Stephanie Myers tells that story. Both the studium of this photograph and its subject’s commentary configure breast reconstruction as a means of producing a highly desirable symmetry—a concept reinforced by the photo’s glamour-shot layout and Stephanie’s dramatic pose, head thrown back, cloaked arms outstretched,
bare breasts thrust forward in an unsettling representation of feminine beauty fetishized.

Part of the tension between conventional and subversive representation that characterizes Myers’s photographs lies in his emphasis on the Winged Victory of Samothrace, the famous classical Greek statue of an armless woman with exposed breasts, draped thighs, and wings attached to her shoulders that graces the entry chamber of the Louvre in Paris. The book’s foreword, written by physician David Spiegel, describes this statue as a powerful representation of “female strength transcending the ravages of time,” a strength parallel to that of the women photographed by Myers, who “say ‘Here I am.’ They are redefining their beauty: breasts missing, reconstructed, they present their bodies and themselves with humor, sadness, vulnerability, honesty. . . . They do not hide their loss; they transcend it” (Spiegel in Myers, foreword, np). With the exception of Lisa with Barbell and Painted Ladies, the romantic theme of feminine beauty lost and regained dominates Winged Victory, as exemplified by Dani’s claim that all of the women photographed “retain the classic notion of beauty” despite their “imperfections” (Myers, np). A discourse of transcendence likewise recurs, as the collection’s subtitle and Siegel’s foreword reveal. Such rhetoric also dominates the Marrocchino poems that punctuate the text: in “Venus” she describes a single-breasted woman “who transcends humanity / with magical grace”; in “Transcendence” she rhapsodizes over a photograph of a man’s and a woman’s hands clasped across a scarred breast (Myers, np).

The term transcendence signifies a breast cancer sublime that becomes problematic in Winged Victory by implying that survivors experience rapture in ways that other humans do not. Images that link cancer and its survival to discourses of the sublime occur in many poems by Marrocchino, with their references to the “rainbow gardens,” “golden skies,” “evening vines,” “emerald hands,” “rapturous lands,” and “cosmic wings” that one encounters during or after breast cancer. One romantic lyric even contains the word sublime: the photograph accompanying “My Hands, My Body” shows a woman’s fingers caressing her breasts, celebrating “a body like a sublime cloud that drifts into the cool skies” (Myers, np). At times a triumphalist rhetoric dominates this collection, reinforced by romantic imagery, claims of transcendence, and the word victory in its title. As Barbara Ehrenreich has argued, “mindless triumphalism . . . denigrates the dead and the dying. Did we who
live ‘fight’ harder than those who have died?” (53).8 The triumphant discourse of Winged Victory risks implying that women who live years after having cancer are winners while those who die have lost a macabre competition.

Heterosexual romance sometimes becomes a distracting focus of Myers’s narrative, since six out of twenty photographs present post-mastectomy women posing with their male partners. In these images all of the women bare their chests, as do three of the men (wittily); the other three men are presented as fully clothed companions. Perhaps the most romantic of these photos is Carol and Dick, a portrait of a middle-aged, breastless woman carrying an elegant tray of glowing candles; alongside is her distinguished, white-bearded partner dressed in black. Both subjects gaze soberly at the camera as the accompanying narrative proclaims their mutual devotion; Carol describes Dick as “my soul-mate,” while he calls her “this lean, flat-chested beauty” who “would be my salvation” (Myers, np). Since Myers’s collection depicts no lesbian partners, the effect is to foreground heterosexuality as a normative force that allows cancer to be transcended. Myers’s preface explains this emphasis, since he argues that women’s anxiety at a breast cancer diagnosis quickly transforms into a fear of “diminished femininity,” a concern he seems to view as ubiquitous despite some of his subjects’ claims to the contrary. He describes scenarios he has witnessed as a physician between patients and their male partners—admittedly realistic in some cases, yet unfortunately stereotypical—in which “a partner withdraws a hand to avoid touching a scar where once was a graceful curve”; too often, he suggests, cancer makes “lovers draw apart, an absent breast now a barrier to their intimacy” (Myers, preface, np). To be fair, Myers rightly decries such acts of rejection and celebrates “the persistence of a woman’s beauty, strength and femaleness in all of its complexity, even after the transforming experience of breast cancer”—but the phrase “even after” implies that restoration is hard for a post-operative woman to achieve without an erotic bond with a supportive man (np).

In its emphasis on classical beauty, romantic imagery, transcendence, and heteronormativity, Myers’s photographic documentation of women’s breast cancer bodies can only be interpreted as culturally hegemonic. However, his inclusion of photographs that foreground racial, gender, and age diversity and present women’s post-operative bodies playfully makes Winged Victory an important work of visual testimony.
In viewing photographic representations of women’s breast cancer bodies, both dominant and alternative cultural ideologies inevitably come into play. As Hirsch points out in *Family Frames*, “The structure of looking is reciprocal: photographer and viewer collaborate in the reproduction of ideology. . . . Eye and screen are the very elements of ideology: our expectations circumscribe and determine what we show and what we see” (7). This critical insight provides a useful point of departure for analyzing the ideologies that circulate in representations of women’s post-surgical bodies from Amelia Davis’s *The First Look*. Like Myers, Davis undertook her photographic project for familial reasons; her mother, one of twenty-six featured subjects, was diagnosed with breast cancer at sixty-seven and felt “unprepared for the way she would look after a modified radical mastectomy—her only option—and how she would feel about herself” (xiii). Since the only representations of post-mastectomy women’s bodies that Davis’s mother could locate in 1993 were technical drawings of thin, flat scars, she felt betrayed after surgery when her scars bore no resemblance to those depicted in medical journals. “I decided then that no woman should ever feel this way,” explains Davis in her preface (xiii). For Davis and her collaborators, realistic representation of women’s post-operative bodies takes precedence over altered images; hence the photographer presents her subjects relaxing in their homes rather posing before studio lights. Having rejected a rhetoric of transcendence, Davis features instead a feminist approach to the structure of looking—a reciprocal collaboration among subjects, photographer, and audience.

In one respect, however, Davis’s photographs are problematic from a feminist perspective, for the subjects in *The First Look* are disturbingly faceless; only their torsos are depicted. To be sure, Davis offers a thoughtful rationale for this decision.

I chose not to include the women’s faces in these photographs for several reasons. In the beginning some women requested that their faces not be shown, and as time went on, I realized that their faces were unnecessary, even an impediment, to this project. The photographs are intended to let women see exactly what mastectomies, various types of reconstructive surgery, and lumpectomies
look like, and I did not want to take the reader’s attention away from that. Because today’s society places so much emphasis on looks, the faces distracted from this purpose. (xiii–xiv)

Despite Davis’s argument that concerns for privacy, aesthetic considerations, and a critique of social norms regarding female beauty informed her choice, the ideological message of faceless images of post-operative women arguably endorses concealment and fragmentation. Without depiction of the eyes through which a subject meets photographer and camera, she cannot participate fully in reciprocal looking. As Matuschka once asked a photographer whom she had refused permission to represent her body without showing her face, “Why can’t you have the head in the picture and still look great, just because part of your body has been removed?” (www.matuschka.org). Although Davis clearly hopes to empower her subjects, her collection risks reproducing the dominant cultural ideology that it is acceptable to show breasts without making visible the whole woman.

That said, The First Look brings many strengths to its representation of women’s breast cancer bodies, especially a diversity of age, race, body type, reconstruction status, and life writing. The women photographed range in age from twenty-five to seventy-six; more than half are over forty-five. Most photographs present the women alone; three appear with a child, one woman with her dog (also a cancer survivor). Although Davis captures no images of women who self-identify as lesbians, neither does she foreground heterosexuality in her collection as Myers does. Five of Davis’s photographic subjects identify themselves as African American and two as Asian American; several comment on their working-class identities. In her preface Davis affirms her commitment to diversity of representation.

It is important to me, not only as a photographer but also as a woman, to try to represent all women in this book because breast cancer does not discriminate. This disease affects women of all ages, all ethnic groups, and all socioeconomic backgrounds. Every woman has a voice and every woman should be heard. (xiv)

The women Davis photographs do offer a remarkable variety of testimonies. Wanda, for example, an African American woman photographed with her young son in the background, reveals that she discovered her
breast tumor at twenty-eight, shortly after the birth of her seventh child, while enrolled in a drug treatment program. Despite having no health insurance, Wanda obtained a mastectomy that was followed by eighteen grueling months of chemotherapy, access to breast cancer support groups that she deemed vital, and a new career as a milliner: “Going through cancer, I had picked up a little skill of making hats—fashion hats. It was something I wanted to give back to the community. I lost all my hair, so I got into hats—I thought I could pass it on to other women” (Davis, 33). Equally memorable is the story of Marleen, a forty-eight-year-old Portuguese Pacific Islander who reports having endured five operations—lumpectomy, modified radical mastectomy, and multiple reconstruction surgeries—and includes in her narrative an excerpt from her poem “Silent Soldier—Invisible Amputee” (Davis, 63). Out of their breast cancer experience Wanda and Marleen construct powerful subjectivities that reader-viewers are invited to witness.

The First Look offers equal representation to reconstructed and unreconstructed breasts; it also depicts women’s arms with and without lymphedema, the debilitating swelling that often accompanies the removal of lymph nodes after breast cancer surgery. Shevra, for instance, a forty-year-old woman pictured with her reconstructed breast grasped by the infant daughter she adopted after treatment rendered her infertile, proffers a tightly bandaged left arm and identifies her lymphedema as chronic. She also conveys her motivation for undergoing reconstruction.

At the time I did not really question having reconstructive surgery, I just assumed I would do it. I went through three operations within the first year because I thought they would put me back together again. They helped me put off my reaction to losing my breast, but eventually that caught up with me. What I have now works fine under clothes and I’m used to it, but it’s not a breast and it doesn’t resemble what I lost. I even had to have cosmetic surgery on my healthy breast so that it would look more like my reconstructed “breast.” If I had it to do over, I don’t know whether I would choose reconstructive surgery. (Davis, 1)

Some of Davis’s photographic subjects affirm their choice of reconstruction, while others recount complications, regret their decision, or report having never considered it. Noemi, twenty-eight, expresses pride in now having “the prettiest breast in the whole world” and relief at not “having
Amelia Davis, _Shevra_. Courtesy of the artist.

to worry anymore about a prosthesis sagging or shifting,” whereas Rachel, also twenty-eight, rejects both prosthesis and reconstruction, lamenting that a “do-nothing’ option is one seldom discussed by doctors” (Davis, 22, 5). Although _The First Look_ endorses neither reconstruction nor its alternative, the unreconstructed breasts on display slightly outnumber the reconstructed; this balance reflects the fact that in 2000, when this book was published, fewer than 40 percent of U.S. women with breast cancer chose reconstruction. The collection does contain a concluding essay by a plastic surgeon, Loren Eshkanazi, who discusses options available to women who choose breast reconstruction, from saline or silicone implants to TRAM flap procedures; also featured is an array of medical photographs of women’s breasts prior to and following reconstructive surgery. A second medically informative essay, written by registered nurse Saskia Thiadens, explains causes and treatments for lymphedema and likewise contains illustrative medical photographs.

Another feminist aspect of Davis’s photographs and her subjects’ testimonies is their representation of post-surgical scars as insignia of resistance. Women who have refused reconstruction are particularly vocal on this topic: Marge, for instance, describes her post-mastectomy scar as a “badge of courage”; for Rachel it represents a “battle wound,” for Ruth a “battle scar” (Davis, 27, 5, 50). This emphasis challenges hegemonic no-
tions of femininity by codifying scars as symbols of strength and affirming their capacity for beauty. As physician Nancy Snyderman claims in her foreword to *The First Look*, “the human body is its own art form,” and “bodies with scars have not left the art behind” (x). Marge endorses this

perspective: “I am a beautiful person inside and out. . . . We all have scars, but some are more visible than others” (Davis, 27). Tattoos and scars converge in some photographic representations, a trend that began in the 1980s, after widespread circulation of the Metzger poster of the tree tattoo that covers her missing breast, and has intensified in postmillennial culture, with its pervasive emphasis on body piercings and artful tattooing. Davis’s photograph of the tattooed breast of her subject Andrée, for example, foregrounds its flowery artistry. As Andrée’s commentary affirms, her tattoo serves as a form of bodily and spiritual affirmation: “My left breast has transformed itself into a red rose—sacred—which grows in my dreams” (Davis, 71). Although several of Davis’s photographic subjects express discomfort with their mastectomy scars, most agree with Snyderman that scars “mark the trail, the passage taken” through the breast cancer continuum (Davis, x).

In her preface Davis states her goal of providing accurate information and feminist support for women facing breast surgery.

With this book in hand, women can eliminate their preconceived images of what breast cancer looks like and replace them with realities. Having visual representations of these realities removes the mystery and perhaps the fear. When a woman is diagnosed with breast cancer, I hope she will pick up this book . . . and feel comfort in knowing that she is not alone. (xiv–xv)

In the comments that accompany their photographs several participants make explicit the political agenda that led to their appearance in this project. Merijane, for example, whose one-breasted image appears on the book’s cover, challenges environmental myopia.

There is still no cure for breast cancer. All the technology intended to make us “beautiful” after we have been cut, radiated, and filled with toxic chemicals does not alter that fact. Until the real causes of this disease—the human-made, environmental causes—are addressed with commitment and sincerity, the word prevention holds no meaning. (Davis, 60)

Equally outspoken is Raven Light, a San Francisco activist who decided after diagnosis that she would “turn this personal tragedy into public awareness.”
Since then I have bared my de-breast in a fierce political stance. Breast cancer has been hidden under heavy layers of shame, guilt, and puffs of cotton stuffed inside empty bras for too many decades. I choose to use my body to put a face on this hideous disease—to stand tall, placing the humanness of breast cancer in everyone’s line of sight. My breast and de-breast are seen at parades, on postcards, on the walls of museums, in newspapers and magazines across this country and as far as Zaire. (Davis, 53–54)

Overall, *The First Look* challenges viewers to gaze openly at women’s post-operative bodies, bear attentive witness to their narratives of illness and recovery, and consider engaging in breast cancer activism.

**Spiritual Discourses in *Heroines***

An Iranian expatriate photographer, poet, and teacher drawn to the topic of breast cancer through workshops on body image that she led, Jila Nikpay began a collaborative project to document the spiritual journeys of Minneapolis women who had contracted this disease. Between 2002 and 2004 she interviewed twenty-one women from thirty-three to seventy-three—African American, Arab, American Indian, and Caucasian—who were willing to be photographed and share their cancer narratives with viewers. Nikpay’s aesthetic strategy of offering swaths of black-and-white cloth that her photographic subjects could use to wrap, drape, conceal, or reveal their bodies allowed her to “transform the veil from an icon of body repression into an artistic tool” (Klefsted). To complement the photographs in *Heroines*, Nikpay includes prose-poems that capture the emotional flavor of each woman’s cancer experience, as mediated through the lens of the interview. The primary advantages of this methodology are the photographic subjects’ creative use of cloth to conceal or reveal their breast cancer bodies and the vivid imagery that Nikpay’s poetry invokes. Disadvantages include the absence of the women’s own voices and the presence of sentimental discourses of heroism and hope.

In her preface to *Heroines* Nikpay describes her photo-narrative project in spiritual terms: “My subjects have realized that beyond this hinterland of suffering lies a body of water in which the spirit caresses their souls and heals their wounds” (9). Metaphors of geography abound here
alongside religious, mystical, and medical imagery of pain and healing. Such metaphors anticipate the spiritual motifs that Nikpay engages in her poems, in which she represents Islamic, Christian, Native American, and Buddhist imagery. For example, both the beauty of Islamic traditions and the restrictiveness of conservative Arab gender norms are implicit in the photographic representation of Hend Al-Mansour, age forty when she was diagnosed with breast cancer while studying in the United States. In this photograph Al-Mansour uses a white cotton cloth as a form of hijab to wrap her body and head so that only her face is visible; she gazes directly at the photographer with an expression at once melancholy and defiant. Nikpay’s poetic monologue captures the isolation that Al-Mansour experienced in having breast cancer abroad: “Shall I tell my family? / No. For an Arab woman / Body is perfect or else” (49). This poem rejects cultural fetishizing of idealized female embodiment yet depicts its subject’s fear that her cancerous body will be stigmatized. Still, Al-Mansour allows her shrouded body to be revealed, her mediated story told. The final stanza of Nikpay’s poem positions Al-Mansour as a transgressive artist who embraces the vitality and imaginative energy to “build . . . / Imaginary worlds” (49). Together, Nikpay’s poem and the photographic image of Al-Mansour create a narrative of cultural resistance and spiritual transformation.

Christian imagery appears in several poems from Heroines, as Nikpay alludes to God’s work, the children of God, and Christ’s suffering on the cross. The photograph of Betty Sanders, a fifty-year-old African American woman twice diagnosed with breast cancer, recalls the dignified posture of Rosa Parks following her initiation of the Montgomery bus boycotts in 1955. Standing erect in semi-profile, Sanders gazes resolutely toward the heavens, hands spread at her side; she wears a black cloak elegantly as a strapless gown with a shawl covering one shoulder, an improvised garment that partially reveals her breasts. The speaker in Nikpay’s poem admits having changed from her cancer ordeal and alludes to the presence of a tattoo that the image does not reveal: “A big red rose / Hides my scars / And reminds me: / My work is / God’s work” (41). Here Nikpay employs Christian imagery to invest her subject’s body and life purpose with spiritual authority. A related imagery informs the poem for Jymme Golden, diagnosed at thirty-six with breast cancer that required a bilateral mastectomy. Her lower body wrapped in a white toga, Golden poses like a Greek sculpture with head in graceful profile, right arm outstretched, fingertips holding a sheer veil that edges her left shoulder. The
accompanying poem employs Christian imagery to describe Golden’s surgical incision as forming “a memorable cross / Across my chest” (19). After celebrating Golden’s new calling as a massage therapist, the poem ends with images of transfiguration: “In body, mind, and soul, / I am transformed” (19). In this instance Nikpay uses Christian symbolism to depict a subject at peace with her breastlessness.

Native American spirituality occurs in the Nikpay poem that accompanies her photograph of Clara NiiSka, presented in dignified semi-profile—gray hair braided, hands folded across her chest, body draped in a black cloak whose V-shaped neckline reveals a puckered scar where her right breast used to be. Fifty-two when diagnosed with breast cancer, NiiSka initially responded by feeling “exiled from my tribe” and determined to join her late husband: “I lay on my husband’s grave. / I accepted my death” (35). A friend’s gift of poetry inspired NiiSka to move through grief with a renewed purpose: “To guard the oral traditions / Of my people” (35). Nikpay’s poem uses simple diction to depict the speaker’s mission of cultural protection.

Buddhist imagery occurs in Heroines in the first of two photographic portraits of Sarah Wovcha, thirty-two. In the initial image her head is bald, her gaze otherworldly, her body shrouded in a white pleated robe. Wovcha’s hands touch her face and neck protectively; her demeanor recalls that of Zen monks engaged in meditative walking. Nikpay’s poem offers the brevity of haiku: “I closed my eyes to death / Imagining life. / Dreams were my medicine” (13). In a newspaper article about the Heroines project, Wovcha explains that she hesitated to be photographed: “Before the session I was thinking, ‘I can’t tell my story to people. They don’t want to hear.’” But working with Nikpay gave her strength: “The project was an invitation not to hide what was happening, but the opposite: to show people all the pieces of the illness. Not to put a wig on. Not to put on a happy face” (Miller). Wovcha’s emphasis on visibility suggests a feminist element to this project that does not appear in the text of Heroines, which emphasizes spiritual growth over political agency. Nikpay does evince feminist consciousness, however, in interviews in which she discusses problematic attitudes toward embodiment in both Iranian and U.S. societies: “To me, Iranian culture veils the body and American culture veils the soul. I have two different realities, and neither celebrates women” (Miller). The second photograph of Wovcha portrays its subject, pregnant and radiant, curly hair restored, gazing resolutely at the camera. The accompanying poem affirms the power of maternity for a young
woman who feared she might never conceive, yet did: “Against all odds / I gave birth. / We are four now” (15). Wovcha explains in an interview that the Heroines project gave her peace of mind: “Now I don’t care if I have breasts. I don’t care if I have hair. I feel content to move through the world and feel the sunshine and rain. And I feel beautiful if my body can be a recipient of those experiences” (Miller).

Nikpay’s collection can be critiqued for its engagement of sentimental discourses of “caressing the soul” and “creating a chorus of hope” (9). Although an emphasis on hope may appeal to reader-viewers, as S. Lochlann Jain argues in “Be Prepared,” such sentimental discourses risk marginalizing patients who cannot face cancer hopefully.

Tropes of hope, survivorship, battling, and positive attitude are fed to people post-diagnosis as if they were at the helm of a ship in known waters, not along stormy and uncharted shores. And yet, so little of cancer science, patient experience, or survival statistics seems to provide backing for the ubiquitous calls for hope in the popular cultures of cancer. . . . Such cultural venues as marches for hope, research funding and directions, pharmaceutical interests, survivor rhetoric, and hospital ads constitute not distinct cultural phenomena, but overlap to form a broad hegemony of ways that cancer is talked about and that in turn diminish the ways that cancer culture can be inhabited and spoken about. (170–71)

Jain’s argument is useful for evaluating Nikpay’s discourse, which moves from suffering to hope without always acknowledging the costs of this disease. In addition, discourses of hope can merge into triumphalist rhetoric. While Nikpay claims in interviews to dislike the term survivor, and indeed the word does not appear in Heroines, she at times implies that her photographic subjects have triumphed: “We’re not saying, ‘You survived.’ No! You are a heroine. You went beyond” (Miller). Although may be true that the Heroines subjects are exceptional women engaged in what Ehrenreich wryly terms “spiritual upward mobility,” the implication of Nikpay’s rhetoric is that heroines trump terrified women with breast cancer, not to mention those who have died of it (Ehrenreich, 49).

To be sure, the problems suggested by Nikpay’s discourses of heroism and hope arise in many other forms of breast cancer culture. As Jackie Stacey notes in Teratologies, “masculine” cancer narratives often deify male oncologists and surgeons as “heroic men of medicine” who
“save women from the horrors of their own bodies” (11). Stacey also critiques alternative discourses that represent patients as required to heal themselves, thus “generating fantasies of heroic recoveries and miracle cures” that fail to challenge master narratives but instead reposition an ill woman as “masculinised hero” (10–11). Stacey’s theory clarifies that heroic cancer discourses such as Nikpay’s risk privileging triumphant quest myths while disregarding unsuccessful questers.

Despite these problems, Heroines affirms its subjects’ post-operative bodies in compelling ways. Participants have testified as to the project’s power in their lives; in Wovcha’s words, “Cancer can close people down or open them up. . . . I was moving down the path of it closing me down until I met with Jila. That day in front of the camera, I found that I didn’t have any fear” (Miller). In addition, several Heroines exhibitions, along with related workshops held in Minnesota between 2006 and 2008, initiated community conversations about breast cancer. Nikpay argues that such dialogues foster intercultural exchange. As an Iranian who now lives in America, she explains, she has often “walked a tightrope” in her life and art: “Dialogue is essential for this type of work because it needs to be decoded and in that process a deeper understanding of cultures can take place” (Klefsted).

Caregiving Discourses in Caring for Cynthia

The most engaging aspect of Caring for Cynthia might likewise be viewed as a limitation: while its photographs depict the struggles of Cynthia Ogden, the focal breast cancer patient, its narrative is written by photographer Amy S. Blackburn, Cynthia’s best friend and primary caregiver. Although Blackburn’s approach brings attention to the strains and rewards of care providers, readers might wish that Cynthia’s words had been included. Blackburn’s approach raises the question of effects on readers-viewers when the visual post-operative “self” differs from the narrative subjectivity that a text constructs. Do we see Cynthia through her own eyes, Amy’s, both women’s? Blackburn presents this project as collaborative, explaining that it began on the evening of Cynthia’s diagnosis, when she tearfully asked Blackburn, “Can you take a picture of me tonight—just the way I am right now?” (2). Blackburn did so, and this photograph inaugurated their documentary exploration. Early in her narrative Blackburn describes that initial photograph: “I saw a stoic woman in a
black sports bra and polyester running pants, void of expression. Cynthia cried, then regained her composure. In the seven exposures I created that evening, there was already evidence of Cynthia's courage surfacing” (2). Subsequent photographs document her vulnerability as well as strength, especially images that expose her post-mastectomy chest in a manner resistant to “discourses that constitute the diseased body as ‘other’” (Dykstra, 4).

Empathy, immediacy, and awareness lie at the heart of this photographic documentary, which offers neither an homage to the beauty of women's post-operative bodies (as *Winged Victory* does), a celebration of bodily diversity (as *The First Look* does), nor a narrative of spiritual transformation (as *Heroines* does). Instead, Blackburn's color photographs and self-reflective commentary lend an intimate quality to her documentation. Her subject, Cynthia Ogden, is white, middle-class, blonde, young, athletic, Christian, and successful, characteristics that describe Amy Blackburn as well; hence no racial-ethnic nor age diversity is evident, and neither marital status nor sexual orientation is mentioned. In her narrative Blackburn foregrounds the need for heightened breast cancer awareness: even though Cynthia was a physician specializing in internal medicine and Amy a registered nurse, neither felt prepared to confront this disease personally. Blackburn explains in her preface that despite years of nursing, she did not recognize the depth of patient anxiety or the centrality of familial support until she accompanied Cynthia through cancer. While Cynthia's story is the narrative's focus, Blackburn makes an admission about herself.

Another—unexpected—narrative developed during Cynthia's journey, a narrative pertinent to a caregiver: I, the caregiver, changed through my caring for Cynthia.

Breast cancer affected me. It scared me. I developed sympathetic symptoms in response to what Cynthia was physically experiencing: I felt a heavy ache in my chest after the mastectomy and an intermittent low level of nausea in the months that I cared for her. (Preface)

Although Blackburn praises the caregiving community that sustained Cynthia and herself, her narrative remains dyadic—or triadic, since reader-viewers come to feel that we too know Amy and Cynthia.

This perception is rooted in the sense of immediacy that accompanies photographs taken during Ogden's diagnostic, surgical, and post-
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operative procedures. Blackburn’s narrative positions reader-viewers as attentive witnesses to the process that breast cancer catalyzes, not merely to its aftermath. Organized chronologically, Caring for Cynthia follows its subject’s medical trajectory in a linear fashion, beginning with “She Told Me,” a chapter that presents the results of Cynthia’s biopsy. Subsequent chapters document her decision to undergo a bilateral mastectomy due to family history (her mother is a breast cancer survivor), her consultation with a plastic surgeon about breast reconstruction (which she subsequently rejects), and Amy’s account of Cynthia’s surgery and recovery. The hospital narrative is accompanied by a melancholy photo of the gowned patient in bed and holding a medical chart labeled “Ogden, Cynthia. NUC. MED.”; a later grim photograph depicts Cynthia sleeping after surgery, swollen and drugged. In this instance Blackburn’s narrative presents her own emotional landscape, however, not that of Cynthia: “Did I answer her questions correctly? Do we have everything we will need at the hospital? Am I doing everything right? Is there something I should say?” (18).

Two early chapters foreground the alienation from their post-operative bodies that many women feel. In “Seeing Her Body for the First Time” Blackburn chronicles Cynthia’s examination of her post-surgical body, a bandage covering her incisions. Blackburn’s photograph of the patient’s tentative unwrapping of surgical tape, entitled Bandage, reveals Ogden’s anxious expression. Amy’s narrative and Cynthia’s concave chest may create in reader-viewers a sense of bearing uneasy witness to an intimate moment: “Each layer of wrapping had more dried blood the closer she got to the incision. Once the incision was exposed, she looked up to the mirror and then turned to me. There was silence. There were no tears” (30). In a subsequent chapter, “The Drains,” Blackburn depicts the complications with fluid release that delay removal of Ogden’s post-operative drains, “one of the most intolerable aspects of breast cancer for Cynthia,” who eventually insists that doctors remove the drains prematurely (32). This removal causes chest pain due to internal fluid accumulation; hence Cynthia must visit her surgeon’s office every few days to have the fluid removed by needle, a process documented photographically in a gruesome shot of her scarred torso from which a bulbous tube snakes, as a technician’s gloved hands insert a needle into her flesh. As the collection’s most medically graphic images, these two photographs raise important somatic and psychological issues of how women confront their post-operative bodies.
Amy S. Blackburn, *Torso in the Mirror.* © Amy S. Blackburn.
Blackburn also documents Ogden’s hair loss and her quest for the right prosthesis. In one photograph viewers witness the haircut that chemo necessitates and Cynthia’s wistful expression as blond curls fall to the floor; a subsequent image depicts her mother’s impassive expression as she shaves her daughter’s head. Another photograph, *Torso in the Mirror*, shows Cynthia looking in a bathroom mirror, examining her bald head with clinical detachment, her de-breasted chest visible in the mirror’s reflection (51). Subsequent photos and Blackburn’s narrative highlight Cynthia’s struggle to achieve full range of motion in her shoulder and her confrontations with nausea, dehydration, blood transfusion, and memory loss—debilitating cycles for both patient and caregiver. Such indexical photographs contain ontological significance along with referential force: as Ulrich Baer notes, “the medium of photography always raises the question of the relationship between seeing and knowing” (1).

Despite its powerful photographs and thoughtful narrative, *Caring for Cynthia* at times employs a triumphant discourse that may risk disavowing the dead. This discursive maneuver occurs primarily in Blackburn’s preface, where she praises Cynthia’s “will to survive,” and in the afterword, where the photographer asserts that a year after surgery, “Cynthia is a breast cancer survivor. . . . She’s unstoppable in achieving the goals that she sets for herself” (82). Although Blackburn includes photos of Cynthia’s participation in a race sponsored by Susan G. Komen for the Cure and explains that this event honored the living and “memorialize[d] those who had not survived,” the textual use of survivor discourse implies that survival is willed and praiseworthy, even regal. One unsettling photograph presents Cynthia looking pensively at the camera and wearing a tiara; in the accompanying narrative Blackburn calls Cynthia “a queen of endurance” (62). A less exotic but equally triumphant photo of a white bra hanging on a chain-link fence conveys a similar message: inscribed in blue magic marker on the right cup is “You can beat this” (80–81). Like the emphasis on victory in Myers’s collection and on heroism in Nikpay’s, the focus on triumph in *Caring for Cynthia* could alienate reader-viewers whose loved ones have died of breast cancer or who themselves are facing death. At its best, however, Blackburn’s photo-documentary presents with sensitivity and compassion the breast cancer experiences of patient and care provider.
Memorial Discourses in Knowing Stephanie

Knowing Stephanie is the only photographic collection under consideration that is not only collaborative but coauthored. Stephanie Byram, its breast cancer subject, and Charlee Brodsky, her photographer, enjoyed a working relationship whose every aspect was mutually determined, from deciding what to photograph to correlating words and images to curating gallery exhibitions and developing websites. Establishing coauthorship is important because, as Brodsky notes in her preface, Byram died two years before the book was published; hence this collection has an elegiac dimension. As Susan Sontag has argued, “all photographs are *memento mori*” in their representation of “lives hurtling toward their own destruction”; mortality gives life meaning, and any photograph documents the living while reinforcing the inevitability of death (*On Photography*, 3–4). Yet some photographs gesture more poignantly toward their subjects’ mortality than others, and the images in Knowing Stephanie accrue power through the reader-viewer’s awareness of the death of Byram, whose images portray a vibrant presence.

The fact that Knowing Stephanie was coauthored might also reassure reader-viewers that Stephanie gave this narrative her informed consent, since coauthorship is arguably one way of determining ethical efficacy. As Couser explains in *Vulnerable Subjects*, intimate biographical representations of subjects whose trust might easily be violated raise complex questions.

Under what circumstances do life writers have ethical obligations to those they portray? More specifically, how does a cooperative relationship between subject and writer, such as authorization, affect the ethics of the project? . . . If life writing entails potential harms, such as violation of privacy, are they, can they, be offset by countervailing benefits? What good does life writing do, and whose interests does it finally serve—the subjects’, the writers’, or the readers’? (10)

Couser’s questions help reader-viewers assess Byram and Brodsky’s photo-documentary as ethical, given Byram’s role as cocreator and adjudicator of her imagetext. Still, it is instructive to consider images that do not appear in Knowing Stephanie: photographs of Byram dying or
deceased. Brodsky explains in her preface why she did not photograph Stephanie during her final days, “fragile, slight, recumbent” yet “a riveting presence.”

While looking at her, I saw many pictures and compositions. Many arrangements of her features through my camera’s viewfinder would have been intensely melancholy and moving photographs. . . . But I never thought of bringing out my camera. Stephanie and I had always decided together when, where, and how to make our photographs—but while she was dying, she could not let me know what she wanted. Stephanie had been my subject, but she was also my collaborator. In this, our last experience together, I took her silence to be an invitation to leave my camera aside and to be present with her. I’m glad that there wasn’t a camera between us. (Preface)

Brodsky honors discretion over revelation, unmediated closeness over camera-generated distance—and, arguably, ethics over aesthetics, since the vulnerable subject could not articulate her wishes. Yet vexed considerations of informed consent are rarely simple, as Brodsky acknowledges: “I don’t know if Stephanie would have wanted me to photograph her that day. I made the decision not to on my own” (preface). From that moment forward the photo-documentary became a project of autothanatology and memorialization.16

Knowing Stephanie consists of eight sections whose titles convey its primary themes. “Diagnosis” depicts Byram’s confrontation at thirty with a highly aggressive breast cancer, her subsequent bilateral mastectomy, and her frightening prognosis: “The doctors gave me a 50 percent chance of surviving five years and a 40 percent chance of surviving ten years” (12). Stephanie’s narrative, however, emphasizes her subjectivity as well as her disease: “This is me. This image tells a lot about me, but what it doesn’t say is that I’ve had cancer” (12). Here Byram authorizes the initial photographic image of her face; only later does she reveal her breastless chest, acknowledging in her commentary a sense of bodily betrayal: “My body . . . could no longer be trusted, especially since I had treated it so well, with a nutritious diet and regular exercise. . . . I was no longer whole” (20). This stark self-assessment is represented visually through a collage of Byram’s body in pieces as the photographic subject lies prone, eyes tightly shut as if to avoid confronting her fragmentation. Yet her grief over what
she perceives as lost—“Womanhood / Sexuality / Motherhood”—is eventually transformed into an appreciation of who she is becoming. The catalyst for this ontological transformation, a photograph of Byram’s post-mastectomy chest that Brodsky entitles Venus, reframes disfigurement as beauty, the fractured self as its own aesthetic: “Like a Michelangelo sculpture with the arms knocked off, I now see my torso as a work of art. Although I’m missing some pieces, I no longer feel disfigured. This image was a turning point for me” (26). The photograph’s lighting draws attention to the taut musculature of Stephanie’s chest, while its framing moves the viewer’s eye both vertically, from the subject’s strong shoulder to her narrow waist, and horizontally, from the smooth mastectomy scar on the right to its symmetrical counterpart on the left. “Venus caused a stir wherever it went,” explains Jennifer Matesa in the biographical profile

Charlee Brodsky, Venus. Courtesy of the artist.
of Byram that concludes this collection; “survivors of mastectomy, on seeing Venus, told Stephanie that they never imagined they could see themselves as beautiful” (122). For some viewers the exhibition of Venus offered a powerful mirror; as Byram explains, “One woman, who also had bilateral mastectomies, had never seen another body like hers” (122). As Brodsky notes, Byram herself found in Venus not only a breast cancer aesthetic but also a source of rejuvenation: “Because of this photograph, I believe Stephanie was able to visualize herself differently and therefore was able to live differently” (11).

Subsequent sections of Knowing Stephanie document Byram’s process of reconstructing her private and public selves. In “Searching for Balance” she narrates explicitly her efforts to “piece together a new self, unified and wonderfully alive” and to reclaim her sexuality. Two photographs that depict Stephanie embracing a male lover, both subjects nude from the waist up, are accompanied by a forthright claim and a troubled question: “Without breasts, my sexuality unalterably changed. As an unmarried woman, would men still be attracted to me?” Yet Byram goes on to trace her process of self-acceptance.

Later I discovered that I still lusted after the same men who were attractive to me before my diagnosis. Unexpectedly acting on those feelings, I experienced an awakening that liberated me from the stereotypes and fears of owning a “mutilated” body. My flat torso simply didn’t matter; the chemistry and the intense passion were the same. (39)

Unlike Winged Victory, in which romantic love is presented as transcendent, Knowing Stephanie foregrounds its subject’s shifting awareness of the force of her eroticism. In addition, Byram refutes the notion that a sexual partner is necessary for a post-mastectomy woman, although having one can be pleasurable. “A woman doesn’t need a man,” reads the narrative that accompanies two additional photographs of Stephanie and her male companion, “but having you is awfully nice. Ours is a relationship of tenderness, trust, intimacy, and relaxed togetherness, signs of security in our familiarity” (70). One untitled rearview photograph depicts the upper body of Stephanie, bald and clad in a tank top, beside a shirtless male companion whose arm is comfortably thrown around her shoulder. Brodsky has acknowledged this untitled image as one of her favorites from the collection: “For me, it’s about human closeness, with
Knowing Stephanie clearly gestures toward feminism in its celebration of women’s erotic desire and its honoring of the power of human touch.

Byram and Brodsky’s commitment to cancer activism is the subject of “Finding My Place,” which highlights Stephanie’s decision to run in thirty of the Komen Foundation’s annual Races for the Cure. Several photographs present her in shorts and T-shirt looking gleeful: “My goals are to raise one hundred thousand dollars for breast cancer research and to raise awareness of breast cancer” (44). Also noteworthy from a feminist perspective are Byram’s verbal challenge to patriarchal society’s breast fetish—“Clothes don’t make a man. And breasts don’t make a woman”—and her refusal to consider reconstruction (55). As Matesa
notes, “Choosing not to reconstruct her breasts was perhaps the pivotal
decision Stephanie made during her experience with cancer” because “it
is clear from her writings that Stephanie perceived a great deal of pres-
sure from the medical community and the culture at large to rebuild the
body parts that had been taken by cancer” (114). As Byram explains in
her commentary, this decision was nonnegotiable: “Breast reconstruc-
tion never seemed like the right choice to me. . . . The more I learned
about it, the more it turned me off. . . . If women want to have recon-
struction, if they want to have implants, if they want to wear prostheses,
great. But I think they should be given some information about not hav-
ing reconstruction, as well” (114, 116). Like Audre Lorde in The Cancer
Journals, Byram considers her decision against reconstruction not only
principled but necessary for her well-being: “If I reconstruct my body, I
will not be able to reconstruct my life” (117). In addition, she claims hair-
lessness and breastlessness as beautiful; one photograph of her bald head
is accompanied by an impassioned defense of nonconformity: “Why is
it that I never see anyone without hair? Why is it that my doctor insisted
that I would want to ‘reconstruct’ my breasts? Is it so important to hide
our appearances, to hide our cancers? Why should I feel ashamed? Is it so
important to conform, to avert the stares and whispers?” (86). In such pas-
sages Byram critiques breast cancer cultural hegemony and dissects the
politics of appearance.

An unflinching emphasis on multiple recurrences distinguishes this
photo-documentary from the other visual narratives under consider-
ation here, as reader-viewers witness Stephanie’s confrontation with lym-
phatic tumors two years after her diagnosis, with bone, liver, and brain
metastases in the years to follow. The haunting photograph that Byram
and Brodsky chose to inaugurate this section of the narrative, entitled
Recurrence, was taken on Stephanie’s thirty-second birthday shortly after
cancer had returned in her left armpit; in it she strolls through a bar-
ren forest in a trench coat, bald and visible only from behind. Stephanie
knew the seriousness of this development, Brodsky explains in the nar-
rative; for this reason the photograph resembled for both photographer
and subject “a World War II image. Very grim and ominous, with a deso-
late landscape” (121). For Matesa, however, this image presents Byram
“treading a path. Her head is up; she is stepping over the obstacles in her
way; she is wearing protective clothing; she is holding onto a tree for sup-
port; she is going somewhere. She is moving into the unfamiliar” (121).
Stephanie exudes a quiet strength in this photograph and in other final portraits, a quality evident in the accompanying narratives: “Struggling for a sense of balance, I now live with an emotional intensity, full of spirit and hope” (96). This discourse of hope differs from that of Heroines, for Stephanie acknowledges without self-pity that she will soon die of her disease; until then, however, she is determined to live. Toward the end of Knowing Stephanie reader-viewers witness Byram in calm repose, arm thrown casually over her bald head as she sleeps. This intimate photograph seizes power through its capacity, in Barthes’s words, to convey “at the same time ‘this will be’ and ‘this has been’ . . . an anterior future of which death is the stake” (96). It signals the irreplaceable loss of Stephanie that is to come.
Transformational Encounters with Breast Cancer Photographs

How might readers and viewers best assess the aesthetic, documentary, and ethical dimensions of postmillennial breast cancer photo-narratives? What forms of spectatorial engagement do visual and verbal representations of women’s post-operative, scarred, and recovering or dying bodies invite? As Timothy Dow Adams points out in *Life Writing/Light Writing*, in autobiography, photographic image and text function as interactive and mutually reflective; they complement rather than supplement one another. Although conventional autobiographical theory has sometimes considered photographs merely as visual tools corroborating a written text, Adams rightly counters that “both media are highly self-conscious, and combining them may intensify rather than reduce the complexity and ambiguity of each taken separately” (xx). Such is the case in the breast cancer photo-narratives examined in this chapter.

Griselda Pollock has argued persuasively that photographic narratives that inscribe traumatic occurrences have the capacity to lead viewers toward “transformational encounters that can be processed without [the] usual risks of Orphic voyeurism, inured familiarity, or sublime pathos” (“Dying, Seeing, Feeling,” 231). Such encounters are by no means guaranteed, for “as a created borderspace, art is neither pure content nor image nor mere expression. It creates an occasion for subjectivity to be affected along strings or cords that run through an object or a process of creation” (231). For visually and emotionally empathic encounters to occur, photographs of women suffering or recovering from breast cancer must “bring into view both the ethical, the relationship or openness to the Other, and the aesthetic, as an instance of a noncognitive transferential possibility of changing the inner world of another” (231). One strategy for approaching breast cancer photographs transferentially involves what Kaja Silverman has termed “productive looking”: “The ethical becomes operative not at the moment when unconscious desire and phobias assume possession of our look, but in a subsequent moment, when we take stock of what we have just ‘seen’ and attempt . . . to look again, differently” (173). Unlike spectatorial gazes in which a subject objectifies an Other through attempts at visual mastery, productive looking requires active identification with whoever is beheld, as well as vigilant self-monitoring, which Silverman describes as “a constant, conscious
reworking of the terms under which we unconsciously look at the objects that people our visual landscape” (184). If we as reader-viewers engage in productive looking and openly encounter photographic images of women traumatized by breast cancer, our inner and intersubjective landscapes can be transformed.