

ENDURING SELF-HEALTH

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Teratologies: A Cultural Study of Cancer, by Jacky Stacey, London/
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Throughout my highly enjoyable engagement with Jacky Stacey's tour de force, I had to fight to keep the image of Kathy Acker out of my mind. Acker had died of cancer round about the time I heard of the long-awaited publication of Stacey's 'cancer journals', four years after the end of her ordeal. The loss of an admired writer and dear friend on the one hand, and the publication of a successful story of recovery by an admired academic and equally dear friend on the other stood in an uneasy balance in my heart and mind. The real-life event and the textual one struggled—within me—to keep their respective positions. They mostly failed to really keep apart: such is the power of the 'C' word.

'I no longer have cancer' wrote Kathy Acker in January 1997, after a burst of alternative medicine therapy. 'To heal in oneself is to begin to heal the self which is always whole. I have written down some of what happened to me in the past nine months, though I as yet understand little'. By November of the same year she was dead.

Being ill, wanting to understand and yearning to narrate go hand-in-hand. Cancer narratives are an extreme case of writing on and sometimes even beyond the edge. The urge to account for both the heroism and the pathos of having/had cancer is all one with the even more primordial urge to live to tell the tale. Playing for time, cancer narratives are Sheherazade-like displays of admirable rhetorical and imaginative skills, but also of great endurance.

Jacky Stacey endured. I cannot think of a better term to describe the complex, multi-layered and yet surprisingly simple tale she retells in this study. Endurance covers a number of factors that are central to the structure of the book. Endurance has to do with lasting in time, hence duration or sustainability. It also means to put up with

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hardship and tolerate pain, especially in one's flesh. The notion of embodied experience is built into the notion of endurance.

If one reads this notion with the help of Spinoza—or of his modern disciple Deleuze—then endurance is also a process by which negative events or passions get reworked or transformed by the power of the understanding. It is the transformative process of achieving freedom through the understanding of one's bondage, or of that in one's experience which simply cannot be controlled especially when it takes place within one's body. As such, 'endurance' bears a close link to both the notion of a traumatic event and to that of recollection or memory.

A trauma is an event that shatters the boundaries of the subject and blurs his/her sense of identity. Traumas cancel and even suppress memories. As memory is the databank of one's identity, the struggle to remember or retrieve the embodied experiences that are too painful for immediate recollection is a formidable struggle. This book re-tells the tale of this particular struggle, such as it took place in Stacey's corpus.

Jacky Stacey's account of cancer is an example of cultural studies at its best: this is as researched, powerfully argued and elegantly written as a journal of painful events can be. Stacey spells out the genderized aspects of the cultural construction of cancer: the heroic mode of masculine survival and triumph, or the feminine mode of pathetic victimization. Stacey is honest about the appeal of the masculinized heroic narratives of science, which promises to free us from cancer—while never underestimating the resources of the feminized or victims' accounts. With admirable writing skills, she swings between the two modes at different points in time.

■ THE ABJECT

As a leading specialist of the field of cultural studies, Stacey relates the more autobiographical aspects of her book to scholarly analysis. I find her accounts of the teratological nature of the contemporary imagination absolutely striking. Discourses and social practices around cancer share with other aspects of today's culture both a fear of and a fascination with the monstrous. This double meaning is

contained in the concept of 'teratology', which is derived from the Greek word for monster (*teras*) as an object of both adoration and aberration.

Stacey argues that like s/f horror stories, cancer narratives are full of marvels and monsters, of monstrous births and dark enemies within the confines of one's mutating skin. One of the most fascinating chapters in this respect is the analogy between the 'C' word and the 'L' word.

Stacey argues that discourses and social practices about cancer and lesbianism have a lot in common. They both result in civic death, by marginalization or invisibility; they are also the object of intense euphemisms and metaphorization processes: they stand for the unspeakable, the unfathomable, the monstrous and the deviant other. The link between the two has also been strengthened by the spread of HIV and AIDS, which connect death with homosexuality in a new way.

Just like Kristeva's notion of 'the abject' (which also bears a privileged link to the monstrous), cancer and lesbianism are the site of great cultural anxieties. They are the source of disavowals which simultaneously erase and confirm their significance as phenomena. This is due to the fact that they are intimately connected to the bodily self and both have to do with reproduction, in very different ways.

In some of the most interesting sections of this study, Stacey presents a comparative reading of cancer and lesbianism in terms of how they both evoke and challenge images of reproduction. Lesbianism is the site of paradoxical representations of female subjects as simultaneously asexual or sterile and insatiably over-sexual. Cancer is a proliferation of cells that produces death and not life. It 'mimicks cell division with potentially deathly consequences' (p. 81). It thus enacts a painful parody of reproduction, an over-abundance of sterile particles. Chemotherapy extends this confusion further: it destroys as it heals, it both cleanses and pollutes, killing both the good and the bad cells alike. Besides, both cancer and lesbianism cannot be easily expelled or distinguished from the normal self, or not until it is too late. Hence the tendency to become undifferentiated and, being unexpellable, to be represented as the dirty or unclean underside of the self.

■ ILLNESS AS ABJECT

Stacey's study focuses primarily on issues of narrative and representation. Like all life-threatening diseases, nowadays best represented by HIV and AIDS, cancer triggers metaphorical elaborations. The manner depends on whether you listen to mainstream bio-medicine, or to alternative self-health philosophies—two discourses and practices which the author successfully proves to be co-extensive and even complicitous with each other.

It is the manifestation of other problems, which can be external, like pollution, or internal, like bad nutritional habits, alcoholism, overweight, depression, smoking or workholism. The notion of 'lifestyle' is frequently invoked as both the source and the expression of the cancerous self. Stacey turns this point into one of the main threads that run through her study.

Politically, as Stacey argues, the concept of 'illness as metaphor', was promoted by Sontag and others in the 1970s as a subversive practice of politicizing one's lived experienced and defusing the stigma attached to some illnesses. By the 1990s, however, it has become so accepted in mainstream culture that it has begun to acquire more conservative connotations, e.g. in suggesting that the manifestations of the disease are related to its causes. Thus, one's eating habits, or lifestyle, are held 'responsible' for one's diseases.

With the help of Foucault's notion of 'biopower', Stacey argues that the emphasis nowadays has shifted onto an extreme form of individualism which places the responsibility for one's well-being squarely into one's own hands and own bank account. In the post-Thatcherite 1990s, a link can be traced between the interiorization of illness, through hyper-individualism and the privatization of health practices, with the subsequent destruction of welfare provisions. Tony Blair's New Labour is certainly no exception to this trend.

This has two effects. Firstly, it personifies the cell so that it becomes a metaphor for (or a microcosm of) the self. This means that one is severely encouraged by the current social regime of discipline of the body to 'take responsibility' for one's body. Secondly, this emphasis on the micro-management of one's health alters the doctor-patient relation.

■ CONSUMERS AND PROFESSIONALS

One's lifestyle now becomes the main area of judgement of one's sense of 'responsibility'. Health has become a major indicator of one's general lifestyle and moral standing, much as sex used to be. By implication, the wrong emotional 'programmes' can have an adverse effect upon one's self, with disastrous consequences for one's state of health. A reliable and cost-effective manager of his/her body, the cancer patient who recovers is today's hero.

Hence the emphasis on prevention, in both bio-medicine and alternative healing practices. 'Working on oneself' as a way of achieving authenticity, harmony, in-depth wholeness are the key terms in this new religion of bodily and spiritual health. Developing a relationship with oneself is not only a dominant narrative that locates 'responsibility' solely within the confines of the individual citizen. Kathy Acker noted this as well: 'My leap of faith was to believe that ... I could be responsible for myself. ... I thought I was, unwillingly, confronting cancer; instead I was confronting myself'.

There is another side to Acker's tale, of course, and it has everything to do with mainstream bio-medicine. Acker states that she had no medical insurance; radiation therapy cost \$20,000, as did chemotherapy; a single mastectomy \$4000 and a double \$7000. Kathy opted for the latter, as it seemed the most efficient and it was also affordable. She was no victim, not the Kathy Acker I knew: not once in her adventurous life was she ever victim to circumstances. She just could not afford proper medical care in the liberal, 'personalized' 1990s. Only afterwards did she turn to alternative self-health practices.

In the USA, as in Blair's New Labour society, patients turn into consumers of the health industry, instead of being users of services. The medical profession is not safe, either. Stacey argues that we are witnessing the deprofessionalization of the doctors and the erosion of their cultural authority. As the duty to be healthy becomes the burden of each privately insured customer, the role of the professional has to change accordingly. The demise of the expertise of the medical professionals is, to use Lyotard's terminology, a crisis of legitimation of the bio-medical master narratives. The micro-management of one's well-being by each individual relocates the master narratives of health and medicine within the customer him/her-self.

Stacey does not spare criticism of the male medical profession, whose depersonalized, business-like style is the object of 'a view from below' by the patients. The objectifying medical gaze is alienating and it alone justifies trying alternative medicine. In keeping with her reputation as a film and media specialist, Stacey provides an interesting survey of the visual medical technologies and of their effects on the representation of the bodily self. The author also tracks down the extent to which these technologies, and scientific discourses like molecular biology, overlap both with corporate investments and with military concerns.

The alternative health industry, however, does not fare much better. The therapists stress the patient's guilt for the wrong or irresponsible lifestyle. In self-health philosophies, bodies are 'cultural maps of the psyche' which allegedly react to traumas or stress by somatizing. A popularized version of psychoanalysis ascribes pathogenic qualities to unresolved conflicts or emotional situations. In fact, argues Stacey, Freud's work proves the opposite: there is no direct or somatic translation of affective or libidinal sources. The unconscious stands even for the untranslatability of one into the other. In what Stacey rightly describes as a distorted and opportunistic reappropriation of psychoanalysis, a one-to-one relationship is established between the way we live and the illnesses we get. New Age therapies link negative emotions to the production of disease: emotional disorder leads to cellular mismanagement. Both official and alternative medicine enforce the same kind of hyper-individualism.

In this context, the notion of 'responsibility' is a neoliberal solution to the crisis of values because it restores lost certainties and promises and asserts new universals. In modernity the dominant discourse was the legitimation of science as rational control. In late postmodernity it is the heroic tale of self-health. Stacey counterposes an alternative feminist ethics that would be collectively agreed and negotiated, and based on sustainability and socially shared or community-based responsibilities.

This book is autobiographical without ever getting uncomfortably personal. Stacey has been able to turn a taboo topic, which affects almost everyone today, into a lucid theme of research. It is a way of exorcizing fear and panic; it displays of her skills a cultural analyst.

This is an in-depth analysis of contemporary cultures of health,

while being a poignant physiological and emotional diary of a trip of recovery. I would call it an embodied genealogy. The body in this study is the site of a narrative of progress that is inspiring and even uplifting at times, while remaining secularized, deeply sane and unromantic. It is a manual for how to become 'body-literate' and to learn how to read corporeal codes.

It also instructs us on how to avoid the pitfall of late post-modern practices of the body and thus resist turning into corporate managers of our corporeal capital. This kind of endurance is encouraged in everyone who lives to read the tale.
