CANCERTAINMENT: HOW COMICS AND THE INTERNET ARE CHANGING THE FACE OF CANCER

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ABSTRACT

Traditionally, individuals diagnosed with cancer feel stigmatized, victimized and often hopeless -- the very word "cancer" symbolizes a pernicious attack on the body that leads individuals with the disease to succumb to despair, or to play the role of hero or survivor. Rather than remaining silent in the face of this kind of trauma, the ill person who translates her experience into narrative empowers herself by claiming ownership over her story. Recently, the Internet and its complementary new technologies have paved the way for new kinds of expression about cancer for the cancer patient community, enabling individuals with cancer to reinterpret their diagnosis and reclaim authority both over their illness and the medical system. In particular, cancer patients now use the Internet as a safe place to share humor and other forms of entertainment in order to cope with their illness through a number of channels including web comics, blogs, message boards, games and web sites. This project investigates how the Internet and other new technologies enable individuals to use humor and other kinds of "cancertainment" to reclaim authority over their illness, refigure their relationship to those with cancer and those without, and reimagine how society should make meaning from cancer as a disease and as a social and personal experience.
This thesis project is dedicated to my father, Steven Plotnick, who believed in the power of education, continually inspired me to think creatively and taught me how to laugh even in the worst circumstances.
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CHAPTER 1: INTRODUCTION

Cancer and entertainment – an unlikely combination. Society's long-held view of cancer as a disastrous enemy, an insidious crab that grabs hold of its victim and doesn't let go, means that individuals with cancer traditionally read diagnosis either as a war to win or an imminent death sentence. How, then, can entertainment about cancer exist? How do people with late stage diagnoses, mastectomies and bald heads turn from fear and alienation to laughter and joy? Why would someone draw colorful and humorous comics or tell jokes to describe her cancer experience? The answers to these questions lie, in large part, in viewing the Internet and other digital tools as distribution channels for these alternative kinds of expression about cancer within the cancer patient community. This project examines a burgeoning movement towards envisioning the cancer experience through "cancertainment" by exploring web comics, blogs, message boards and jokes.¹

People have used entertainment to cope during times of stress, uncertainty and trauma for centuries; however, in the case of a sensitive and often taboo issue such as cancer, this form of coping traditionally occurs within small communities – either among family and friends or within a close-knit circle of patients. The Internet's ease of use and its powerful tools have profoundly changed the way people with cancer communicate, especially when it comes to alternative or radical forms of self-expression about cancer. Suddenly, the private becomes public; an individual's story

¹ PlanetCancer.org coined the term "cancertainment" to describe books, movies, music and comics about cancer (www.planetcancer.org).
can instantly draw an audience of thousands, propelling anonymous yet intimate communication through diverse channels. In this digital world, individuals with cancer can easily locate others with similar stories, or encounter new and divergent points of view. Coping begins to occur on a mass scale, as the cancer collective defines and shapes the disease through a melding of many unique voices.

Due to the fact that patients often remain silent – rendered powerless by the inexplicable nature of pain and their subordinate role in the medical system – the "cancertainment" movement suggests an important trend of ill people claiming power over their illness. By taking control of their body image through cartoon depictions and jokes about physical abnormalities and side effects of treatment, cancer patients begin to envision a new definition of cancer, one in which ill people do not define themselves as hero or victim. Through humor and low-art genres such as the comic, the cancer patient masks difficult-to-discuss subject matter in innocuous form, expressing the harsh realities of treatment and coping in concert with unexpected pleasures, small triumphs and meaningful moments. What appears to simplistically describe the cancer experience instead dramatizes and depicts the real-life highs and lows of the disease, the complexity of illness and pain.

METHODOLOGY

The examples illustrated throughout the following chapters actively use humor and other forms of entertainment to describe the cancer experience. While I highlight the unique features of different online tools (such as blogs, online communities and web comics), I chose not to focus solely on one type of Internet tool because I hoped to
gain a larger perspective on how the Internet and multimedia tools as a whole foster humorous communication about illness. I also did not choose sites that specifically focus on humor as therapy (or those sites that simply discuss the value of humor as a therapeutic model) because I hoped to understand how humor on the Internet fuels the creation of new communities, reframes individuals' identities and may contribute to a new culture of thinking about cancer.

To maintain the integrity of online authors' work, especially given that most of the texts are created by very ill people, I copied the authors' words, phrasing and grammar exactly as they appear online to preserve the quality and meaning of its authors' words. Additionally, I have added time stamps when possible to individuals' comments from online forums to provide contextual information about the authors' writing. Reading and interpreting the texts generated within online communities requires sensitivity to the nature of speech that occurs there, in which community members share intimate details, thoughts and experiences with others.

LOOKING AT CANCERTAINMENT

The following chapters highlight particularly unique cases of "cancertainment" on the Internet; these examples certainly do not represent all forms of self-expression online today, nor do they suggest the entire range of possible representations. Instead, they provide snapshots of creative works, innovations that have attracted numerous readers and powerfully suggest alternative ways of understanding cancer as disease and social construct. Chapter 3 specifically focuses on humor and its impetus to produce a "hidden transcript" in which marginalized cancer patient groups can engage in an
alternative dialogue about their cancer experiences (Scott xi). Examples include a web site that features humorous cartoons and jokes about cancer (www.cancerisland.com), a site featuring weekly hand-drawn comics about breast cancer (www.miriamengelberg.com) and an online community for young adults with cancer (www.planetcancer.org). In this chapter, I argue that individuals utilize the Internet to safely engage in discussion about what it means to have cancer. Through their creative works, online authors challenge standard definitions of cancer and bond together through humorous expressions about the disease. Humor acts as a means to transgress one's traditional role as a patient and to move from passivity to resistance.

Chapter 4 examines one family's depiction of the cancer experience through a highly detailed web comic, and then juxtaposes this story with an examination of blogs created by members of the family (www.momscancer.com). I argue that this comic, "Mom's Cancer," acts as a counter-narrative of trauma and pain, one that actively redefines what it means to have cancer by using the comic format to describe the other-worldly qualities of illness. Additionally, by reading and interpreting the comic in concert with blogs created by the family, I examine how the Internet can foster an intertextual, polyphonic narrative in which a fuller picture of the illness experience – as perceived uniquely by each member of the family – can be discovered. Chapter 5 proposes how the previous examples can apply to my personal experience in a digital project called "Dad's Cancer: A Multimedia Illness Narrative Experiment." This

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2 Due to the publication of Mom's Cancer's in printed book format, the web version of the comic is no longer available.
digital story explores the intersections of memory, technology and the illness narrative, suggesting that multimedia can provide an outlet for archiving one's experience and making one's voice heard.

For many people with cancer and their family members, a tremendous urge exists to communicate one's story – to connect with others by making one's experience, so intense and other-worldly – real and meaningful. As readers, we must embrace and share these stories, these artifacts rendered in times of great pain and tribulation. Few scholars have examined how new technologies impact the communication of illness narratives or how unique, individual voices can work to change the dominant social and cultural meanings of a disease through artistic self-expression. This project begins to make these voices heard, and to explore how creativity, humor and imagination need not run counter to the gravity of the cancer experience.
EXAMINING THE ILLNESS NARRATIVE

A Brief History

"The ill person who turns illness into story transforms fate into experience; the disease that sets the body apart from others becomes, in the story, the common bond of suffering that joins bodies in their shared vulnerability." – Arthur Frank, The Wounded Storyteller (xi)

In the 21st century, stories of illness – those of tragedy and loss and those of hope and courage – abound. From Lucy Grealy's harrowing tale of surviving Ewing's Sarcoma and undergoing countless reconstructive surgeries in Autobiography of a Face, to Jean-Dominique Bauby's incredible journey to survive a stroke in The Diving Bell and the Butterfly: A Memoir of Life and Death, illness narratives explore transformational life experiences through their intimate portraits of trauma and pain. Individuals of all kinds have tackled the subject of illness through writing, including authors (Marilyn French, John Updike), journalists (John Diamond, Ruth Picardie) and academics (Gwyn 139). Primarily a modern phenomenon, illness narratives were uncommon before 1950 and rare before 1900 (Couser, Recovering bodies 5). For many decades, the medical model dictated that patients read illness as an "invasion" to be fought off by doctors alone; however, scholars note a recent shift to a culture in which ill people recognize the complexity of their experiences that the medical system alone cannot communicate (Herndl 783; Frank, Wounded Storyteller 6). Some scholars attribute the influx of these narratives in recent years to increasing self-reflexivity in western culture, a present-day interpretation of disease as a "metaphysical
condition, a relation to the world" (Gwyn 139). Today, individuals with illness increasingly recognize that they have stories to tell, and narrative offers a mode for representing one's experience in a powerful, provocative and often therapeutic manner. The following review of scholarly work will examine the intersections between numerous fields including sociology, medical anthropology, psychology, literature and culture/media studies to investigate how online illness narratives contribute to the larger cultural and social meanings of cancer for the cancer community.

**Illness Narrative as Empowerment**

In recent years as more people have written illness narratives and more people have read them, so too have scholars lauded narrative creation as a path towards the ill person's healing and empowerment. These scholars believe that narrative attempts to repair the "ruptures between body, self and world by linking-up and interpreting different aspects of biography in order to realign present and past self with society," enabling patients to give voice to their wounded bodies (Williams 209; Frank, *Wounded Storyteller* 2). Autobiographical illness narratives can also empower patients to challenge dehumanizing aspects of medical discourse by "refusing narrative surrender" to the medical system (Couser, *Recovering bodies* 34; Frank, *Wounded Storyteller* 16). Through the act of writing, the ill subject claims power over her illness and identity as she works to restore narrative order to her life. Rather than remaining silent in the face of trauma, the ill person who translates her experience into narrative empowers herself by claiming ownership over her story.
Creating the illness narrative authorizes the writer as a legitimate teller of her story, one who lays claim to her body and experience. The act of writing itself challenges the traditional patient-physician relationship in which doctors dispense knowledge and patients passively accept their treatment. As a result, in her narrative account the ill person must often engage in a struggle between reinforcing her role as patient or transgressing it. The medical system may view writing as a transgressive or deviant act if the patient does not comply with "doctor's orders," and especially if she undermines the physician's authority by claiming power over the body itself (Couser, *Recovering bodies* 19). Patients may not initially set out to challenge the social system that dictates how they understand their illness, but may do so when the process of writing facilitates that change. According to Arthur Frank, "People can move from experience to politics only when their experience is narratable to themselves and others, and thus made legible" ("Why Study" 8). In other words, storytelling begins the process of translating personal experience into the realm of the social and political. By asserting control over the depiction of her body, the ill person challenges her passive role in the medical system and begins to demystify the stigma attached to her disease.

Clearly, the ideologies and practices of medical discourse and the medical system influence and inform how patients make sense of their illness experience – whether patients react against the system or reinforce its norms. Gareth Williams argues that: "With regard to illness, any narrative built around it needs to take account of the medical world within which the official definition of that illness has been
specified" (191). For decades, American society has inextricably linked illness with medicine and the medical world. An ill person swiftly becomes a "patient" and the cure lies in the hands of the all-knowing physician who works a kind of mysterious magic. Foucault would relate this to the concept of "medicalization," a process whereby human behavior, the body and even human existence become understood as medical issues (135). Doctors, x-rays and lab tests not only color the ill person's experience, but they frequently define it. Physicians strive to make the body transparent, to envision a "malleable, perfectible…and fully understood" body, but in fact the body exists at the intersections of medicine, technology and culture, always a social and cultural construct (van Dijck 142). In order for the ill person to make sense of her experience – through writing or otherwise – she must first acknowledge the institutions that produce and inform that experience.

Recently the medical system itself has also begun listening to and recording patient narratives as a means to empower patients and better meet their needs, recognizing medicine's integral role in meaning-making. Examining common themes, metaphors and subtexts of patients' stories during an office visit, physicians learn to read their patients' complaints not as a series of symptoms, but as a story they should read and interpret like any book. Physician/scholar Rita Charon, a pioneer of narrative medicine, argues that: "Given a voice and the power to tell, the sick person need not be the victim but, indeed, becomes, through illness, the healer" (Charon, "Review" 564). In order to move the patient from victim to healer, the physician must actively listen to the symbols and cues at work in a patient's story. For example, by identifying the
metaphors patients use to describe their illness, physicians can decipher language as a tool for understanding. Laurence J. Kirmayer writes that when a patient with a history of migraines describes her head as "made of glass" to her physician, she is "simultaneously revealing something about her body image, her model of migraine, and the way she wishes to be handled by the physician…" (340). By interpreting this and other metaphors, physicians can gain significant insight into the ill person's conception of her body, identity, social context and the essence of her experience.

The key to empowering oneself through narrative, either written or oral, lies in taking control over the way one situates her body and her identity, both within medical discourse and social and cultural context. Couser argues that, "at their best narratives of illness and disability acknowledge that our bodies are not ultimately in our control. At the same time, however, they remind us that we do have considerable influence over the way our bodies, healthy or not, are viewed" (Recovering bodies 289). To begin claiming power over illness, to "influence" the way she depicts her body, the ill person must begin at the root of narrative – at language. By recognizing language's force in shaping meaning, the author of the illness narrative can begin to claim authority as a communicator of her experience.

**The Problem of Language – Speaking Through Pain**

Language and its relationship to illness and the body lie at the heart of the illness narrative. The language of illness narratives often acts as a double-edged sword; socially constructed and determined, language can empower one to challenge dominant discourse, or conversely entrench one further in the patterns of social control.
To fully represent oneself through narrative, the ill person must grasp the nuances of language, recognizing how metaphor, symbolic imagery and culture inform (and at times undermine) her communication. The problem lies in that in times of illness, frequently no words exist to describe pain, and rather than sharing her story when she most needs to tell it, the ill person suffers in silence. In her in-depth analysis of language's relationship to pain and trauma, Elaine Scarry argues that "Whatever pain achieves, it achieves in part through its unsharability, and it ensures this unsharability through its resistance to language" (4). Given that the illness experience resists language, how does the ill person communicate her story in the face of its "unsharability"?

Because literal language often cannot describe pain or trauma, the ill person may rely on the use of metaphor to craft her story. In the case of cancer, these metaphors may cause much greater harm than good, according to Susan Sontag. In her revolutionary Illness as Metaphor (1978), Sontag argues that the very word "cancer," so deeply couched in metaphor and so often treated as an "evil, invincible predator" causes the disease to demoralize and victimize those diagnosed with it (7). Media and medical discourse often describe cancer through military metaphors, touting the "war on cancer," and language attaches violent and virulent meaning to the disease when portrayed as "epidemic" or "plague" (Sontag 71). These connotations mean that cancer patients associate the disease inextricably with the "fantasy of inescapable fatality" (Sontag 87). Until society strips myths and metaphors from cancer as a word and a disease, Sontag writes, patients will read a cancer diagnosis as a death sentence
and language will entrap them (9). In no uncertain terms, Sontag calls for new modes of thinking about cancer that do not require these insidious metaphors.

In the nearly thirty years since Sontag's seminal work, other scholars have investigated the use of metaphor in relationship to cancer's meaning. Some scholars now note a shift in society's view of cancer towards a discourse of "hope" for "survivors" who can "beat" the challenge (Weiss 458). This evolving discourse of progress and hope may in part explain why cancer patients increasingly gravitate towards chronicling their stories of illness, as the individual transitions from the role of patient or "victim" to survivor or "hero." Carola Skott importantly notes that even if patients do use socially constructed metaphors (with all of their positive and negative connotations), metaphors provide meaningful and important avenues of self-expression for patients by providing "the basis for expressing vulnerability and fears. Metaphors in illness narratives make experience intelligible and connect individual illness to collective experience" (234). Due to the fact that metaphors often connect individuals within a particular culture, they may help the ill person – struggling to find meaning in the incomprehensible – to construct her experience through language and to gain strength by sharing commonly understood linguistic models with others.

Like metaphors, all forms of language exist as a product of their social, cultural and historical moment. The narratives crafted from language, then, must be analyzed in terms of their social and cultural context - no story exists in a vacuum. Mattingly and Garro argue that the reader or scholar who studies illness narratives must develop an "analytic gaze that reaches beyond the immediate context of performance" in order
to understand how social and cultural contexts produce some stories and exclude others (263). David Morris takes a similar approach in his argument that "postmodern illness" is "fundamentally biocultural…situated at the crossroads of biology and culture" (71). Without understanding how disease operates both on a molecular, cellular level and as a culturally constructed phenomenon with multiple meanings attached to it, the reader of illness narratives cannot fully grasp the implications of an individual's experience with disease. Due to the shifting nature of definition and treatment of cancer in the medical world, this too means that new language – new metaphors and modes of expression – will come to replace the old as society continues to define and redefine the meaning of cancer. By recognizing the particular moment in which they write, authors of illness narratives can gain control over the stories they tell.

The Voice of the Ill Body

Sometimes silent and wounded, other times bold, loud and chaotic, the ill body exists at the heart of both written and oral narratives about illness. Throughout history, scholars and philosophers have described the body as many things: a tomb to Plato, a temple to Saint Paul, a machine to Descartes (Synnott 79). In Being and Nothingness, Sartre writes, "The body is what I immediately am […] I am my body to the extent that I am" (402). According to this philosophy, when illness deals a harsh blow to the body, so too does the ill person's being suffer a devastating break. The writing that stems from this ill body, this ill being, then, often occurs in fragmentary bursts that represent moments of chaos. In many cases, the ill person actively attempts to restore
order to the body and self through narrative by trying to force her experience into a linear account. This tendency, however, contradicts the very point of writing in times of illness, argues Shlomith Rimmon-Kenan. She states that fragmentary narratives give voice to the individual's "disrupted narrative identity" by "lay[ing] bare the ill subject's vulnerability" (19; 22). Rita Charon and Maura Spiegel also point to the distinct nature of fragmentation in illness narratives because these texts are "not restricted to the linear, the orderly, the emplotted, or the clean; these narratives that come from the ill contain unruly fragments, silences, bodily processes rendered in code" (vi). Thus, rather than hindering the illness narrative, a fragmentary, disjointed narrative structure speaks to the essence of the illness experience by giving the body an authentic voice. To be ill means to experience one's world anew – to suffer a break from everything "real" and held true. Writing that describes this experience, then, must also wrestle with chaos and reflect complexity rather than linearity.

**HUMOR, RESISTANCE AND THE ILLNESS NARRATIVE**

Authors of illness narratives rely upon a number of conventions to tell their stories; chief among them, humor affords a unique opportunity to discuss the taboo or painful aspects of illness in a non-threatening manner. One of the major theories of humor, called the incongruity theory, poses this psychological framework for laughter: "We live in an orderly world, where we have come to expect certain patterns among things, their properties, events, etc. We laugh when we experience something that doesn't fit into these patterns" (Morreall 15-16). Thus, to laugh, especially about cancer's severe consequences related to chemotherapy, mastectomy, even the threat of
death, means to recognize this basic incongruity -- that humor and laughter traditionally do not arise from the gravity of illness. To make sense of how authors use humor in their illness narratives requires examining the psychological and sociological mechanisms of humor.

An analysis of humor must certainly take into account the work of Freud, who as early as 1905 mused about the mechanisms of humor, laughter and joke-telling in *Jokes and their relation to the unconscious*, where he argued that jokes safely communicate repressed desires because people interpret jokes as not serious. In 1927, Freud refined his theories on humor in his essay "Humour," in which he argued that "Humour is not resigned it is rebellious," refusing silence or surrender, an articulation of one's repressed emotions (162). This notion, that humor can constitute an act of rebellion by expressing those things that society represses, means that humor can afford an ill person the opportunity to communicate her innermost feelings about her illness in a safe and non-threatening medium.

Related to Freud's concept of humor as release of desire and repressed emotion, Bakhtin's theory of the carnivalesque extends the power of humor even further. In response to Rabelais's writings on the Renaissance carnival, Bakhtin develops his own theory of the carnival as a "temporary suspension of all hierarchic distinctions and barriers among men…and of the prohibitions of usual life" (15). In the carnival, people of all classes coalesce -- and in fact, the lower classes rule -- in a festival of masks, pleasure, parody and utopia. Modern-day humor, Bakhtin argues, develops directly out of the carnival, in which lower-class hedonists, free from pretense or
etiquette, can reign supreme. Humor and joking exist as part of the carnival, the expression of free and true uninhibited speech. James C. Scott reacts to this concept in *Domination and the Arts of Resistance: Hidden Transcripts*, arguing, "If carnival is disorder, it is a disorder within the rules, perhaps even a ritual lesson in the consequences and folly of violating the rules" (181). He urges scholars to read carnival in terms of its political context, in which power plays occur even during, and certainly after, the carnival event. Scott encourages thinking about the carnival as a "privileged place" or "hidden transcript" for marginalized, oppressed groups to engage in normally suppressed, "explosive speech" that dominant groups restrain throughout the rest of the year (176). In both of these analyses, humor acts as a means of resistance, a voicing of the marginalized group's feelings and desires in a perceived non-threatening context.

Scott's theory of the "hidden transcript" offers a useful jumping off point for understanding how authors of illness narratives use humor to communicate. To describe power relations between subordinate and dominate groups, Scott develops his notion of the hidden transcript in which subordinate group members critique those in power through "backstage discourse," such as the slave who engages in desultory speech or practices behind the back of his master and in the company of other slaves, while exercising complete obedience in public in front of his master (in the "public transcript") (xii). This relationship between "hidden transcript" and "public transcript" can apply to the speech communicated within a cancer patient community versus that of the patient's official or public communication with her doctor or the medical system at-large. In the company of other patients, such as in an online forum, the patient can
engage in derogatory and humorous speech about her physician or her treatment process, while in a face-to-face office visit she most likely practices politeness and deference to the physician's authority. Humor and joking occur as part of the subordinate group's ritual or private speech, a means of connecting with members of the group and rising above the constraints of the sick role imposed upon them in everyday interactions.

THINKING CRITICALLY ABOUT COMICS

A Brief History

While comics have enjoyed a long, rich and colorful history, scholars have only begun to closely examine this history in recent years. Though scholars and society alike once considered comic books nothing more than the genre of "brightly-costumed superheroes dispensing two-fisted justice" or "cheap, throw-away periodicals for children" or both, scholars now recognize them for their diverse stories for adults and children alike, tackling an incredible range of topics from war to sex, drugs and even cancer (Sabin 1). The following comic book history will primarily investigate how comic books approach serious subjects intended for a mature, adult audience in order to situate web comics about cancer within their appropriate social and historical context.

Scholars trace the roots of comic books with mature themes and subject matter primarily to underground and alternative comics, often called "comix," born out of the 1960s counterculture movement. Comix centering on taboo topics such as sex and drugs generated wide appeal among adult audiences, and thus the underground
movement virtually defined itself by these subjects for years (Harvey 141). Pushing the boundaries of the comic book medium, underground artists brought to life "the realistic and the fantastic, the potentially violent and comforting discontinuities of ordinary life that often slip by our perception in the blink of the eye" (Ault, "Preludium" par. 9). Underground comix innovator Robert Crumb, author of Zap Comix (1968), emerged during this period. Crumb appeared as a character in his work beginning with the first issue of Zap and believed autobiographical elements in comics could offer a "way of getting to the truth and thereby of achieving authenticity" (Harvey 220). Known for his controversial subjects and sexually explicit material, Crumb pushed the boundaries of underground comix from their inception in the 1960s by exploring shocking and taboo subject matter in the context of his own life.

Things changed, however, in 1973 when the Supreme Court issued a new ruling on obscenity. Giving local governments the authority to define "pornography," the legislation shook the comix industry. Forced to turn to less offensive subject matter, comix authors began to examine "slices of ordinary life, searching for the daily drama of living" through the alternative presses and pursued personal artworks of individual expression in the underground community (Harvey 143-44). During this period, Harvey Pekar, a friend and colleague of Robert Crumb's, left his footprint on the comix industry by taking the autobiographical to the next level. Best known for his comic book series American Splendor (1976), Pekar tapped everyday personal experiences as a viable primary subject matter for comic books, claiming that the "so-called average person often exhibits a great deal of heroism in getting through an
ordinary day, and yet the reading public takes this heroism for granted" (Harvey 235). By detailing the minutiae of his life in each episode of *American Splendor*, Pekar pushed comic authors to reappropriate the medium as a site for self-expression and representation.

Pekar's work took a new turn after doctors diagnosed him with lymphoma. Remaining true to his belief that any subject matter could inspire a comic, he and his wife Joyce Brabner wrote *Our Cancer Year* (1994), the narrative of their experience dealing with Pekar's diagnosis and treatment. The first comic book to examine cancer as its primary subject matter, *Our Cancer Year* explored the drama of living with cancer by focusing on everyday events. According to Robert Harvey, "…the drama of this story has been deliberately crafted by its authors…Again and again, they make the details of everyday life serve their purposes" (236). *Our Cancer Year* certainly paved the way for more recent comic book narratives about cancer, such as Fies's *Mom's Cancer* (2006) and Miriam Engelberg's *Cancer Made Me a Shallower Person* (2006) that similarly translate extremely personal subjects into comic format.

Art Spiegelman's two-volume work, *Maus: A Survivor's Tale: My Father Bleeds History* (1986) and *Maus II: And Here My Troubles Began* (1991) built upon Pekar's work by depicting traumatic autobiographical life events using the comic genre. Many scholars cite the *Maus* series, awarded the Pulitzer Prize in 1992, as the first comic book to advance the comic book medium to "the status of serious literature" that could tell serious stories (Harvey 245). *Maus's* complex narrative focuses on many issues, but primarily traces Spiegelman's father's experience during the
Holocaust and as a Holocaust survivor. Spiegelman interweaves present-day observations about his father throughout the tale, expressing the tension between them as he tries to work through their troubled relationship. According to Joseph Witek, Spiegelman "embarks on a project which ultimately proves that sequential art is a medium whose potential for truth-telling is limited only by the imagination and the honesty of the men and women who use it" (118). Nevertheless, due to extreme controversy about how the Holocaust should be represented, some scholars criticize Maus for its representation of Jews as "weak, passive" mice and Germans as powerful cats in the narrative, and others have questioned whether authors can meaningfully depict the story of the Holocaust in comic book form at all (Halkin 55). While scholars can endlessly argue the appropriateness of representing the Holocaust allegorically and through the comic book medium, it is important to note the wide-reaching impact of Maus after its publication. The awarding of the Pulitzer Prize alone changed how scholars, artists and readers alike understood the comic book genre, arguing that comic books had earned newfound importance and deserved attention after appearing alongside biographies of Chaucer in literary award competitions (Witek 154).

Regardless of its implications as a truth-telling mechanism about the Holocaust, Spiegelman created Maus to translate a tale of horror and trauma into the comic book medium, generating startling and profound results.

Though Maus may have paved the way for an influx of non-fictional and autobiographical and biographical subjects in comic books, Sabin identifies the myth that comics have suddenly matured and captured an adult audience in the past twenty-
five years (101). He argues that the myth of the "new wave" of adult comics beginning in the late 1980s is a "convenient myth for certain interest groups" who want to sell the adult comic book as something new (249). Though perhaps adult comics have gained greater mainstream interest from reading communities and scholars in recent years, scholars can trace the production of creative and influential adult works to the 1960s underground comix era and before. Thus, it is important to recognize that critical successes such as *Maus* have stemmed from years of building interest in the comic book medium as a means for communicating the personal, traumatic and historical.

**Comics as Narrative**

To understand present-day web comics about illness as a unique phenomenon in the canon of illness narratives, one must understand how comic books operate as narratives. Perhaps this knowledge begins first and foremost with defining the "comic book" and its literary mechanisms. Scholars have vigorously pursued this definition, determined to give the medium its identity, and perhaps transitively, to achieve acceptance of comics as serious literary enterprises. The project to define the comic book medium began with Will Eisner, noted cartoonist, in his book *Comics and Sequential Art* (1985). Eisner argues that the format of the comic book:

…Presents a montage of both word and image, and the reader is thus required to exercise both visual and verbal interpretive skills. The regimens of art (eg. perspective, symmetry, brush stroke) and the regimens of literature (eg. grammar, plot, syntax) become superimposed upon each other. The reading of the comic book is an act of both aesthetic perception and intellectual pursuit (8).
Scott McCloud built on Eisner's influential work in *Understanding comics: the invisible art* (1994). Using the comic book format as his platform for exploration about comics, McCloud refines Eisner's definition by classifying comics as "juxtaposed pictorial and other images in deliberate sequence, intended to convey information and/or to produce an aesthetic response in the viewer," arguing that a simpler definition of comics as "juxtaposed words and pictures" may unnecessarily restrict the comic genre (*Understanding comics* 9; 21). For McCloud, comic books' use of space and sequence sets them apart from other mediums, juxtaposing panels to form meaning in the gutter (the space between panels). He argues that the reader's act of meaning-making from one panel to another makes the comic book a "medium where the audience is a willing and conscious collaborator and closure is the agent of change, time and motion" (*Understanding comics* 65). Actively creating meaning by reading word, image and the space between panels in conjunction, the reader plays an essential role in the "magic only comics can create" (*Understanding comics* 92). This relationship between author and reader, who both act as arbiters of meaning, promotes an interactive reading experience, one especially meaningful in the case of comics about illness that expose highly personal and difficult to communicate experiences.

Though many scholars consider McCloud's work the seminal text in the comics field, some have taken issue with his definition and/or attempted to refine or build on his philosophy. For example, Robert Harvey argues that whereas McCloud emphasizes sequence as the "essential character" of the medium, Harvey believes the "ingredients" (verbal content and visual content) lie at the heart of the comic book
medium's uniqueness. He proposes that closure exists between word and picture, rather than between panels (Harvey 246). In his essay "Rhetoric of the Image," Roland Barthes views images and words in comics as part of an inextricable relationship where "the words, in the same way as the images, are fragments of a more general syntagm and the unity of the message is realized at a higher level, that of the story" (38). Thus, for Barthes, the reader cannot understand word or image independently of the other, and together these elements form a larger syntactic unit, a narrative. Roger Sabin takes a simple, middle ground approach by defining the comic as a "narrative in the form of a sequence of pictures – usually, but not always with text" whose language is composed of "narrative, dialogue and sound effects" (5). Though scholars argue about how to make sense of this relationship between word and image, clearly the simultaneity of word and image in comics impacts how readers digest the medium and set comics apart from any other narrative form. To read either component without the other would limit the text's meaning as a whole.

To understand the comic book as a narrative form, one must begin to examine how word, image and space on the page interact to foster the development of the story and spur meaning-making. Comic scholars have touted the genre as an attractive narrative form because of its structure, "much less linear than prose and more simultaneous in the narrative effects that are possible" (Witek 153). By enabling fragmented and interwoven narrative streams rather than strictly sequential ones, comics also use the "self-enclosed containers" of the comic frame as a means for lacing together narrative layers throughout a story (LeGrady 81). A number of threads can
occur within any given comic, as authors juxtapose separate elements through the
proximity of the comic frame. Using Jacques Lacan's theories, Donald Ault identifies
how three structural components come together in comics as the "imaginary" (the
pictorial image on the page), the "symbolic" (the letters, words and syntax on the page)
and the "real" (blank spaces in the body-space of the page – the gutters). Ault argues
that these three orders, "tied together materially and structurally," "arise materially out
of the same medium" – ink on paper ("Imagetextuality" par. 2). The "imaginary," or in
the comic book's case, the image, represents the focal point of the "ego" in Lacan's
mirror stage when a child attempts mastery over his/her body image. In order for a
child to progress, he/she must encounter the "symbolic" (language). In this process,
the "real" is "sacrificed by the intrusion of the symbolic order…[it] always has the
potential to reassert itself as a disruption of the ego's sense of its own self-sufficiency
and completeness…" (Ault, "Imagetextuality" par. 1). Thus, the primary elements of
the comic book page tie fundamentally to how the reader processes his/her identity in
relationship to language and image. To engage in a process of reading the comic
means to participate in a significant act of meaning-making driven by one's connection
to text and image.

If scholars have established one thing about the way comic book narratives
operate, it is that comics rely on images in concert with text to tell their story.
According to McCloud, "the idea that a picture can evoke an emotional or sensual
response in the viewer is vital to the art of comics" (Understanding comics 121).
Pictures add meaning and significance while speaking a language "common to both
creator and audience" (Harvey 3; Eisner 103). Nevertheless, some scholars resist lauding images' praises without recognizing their dangers and/or limitations. In her examination of images' effects on learning and cognitive processes as compared to text, Jennifer Wiley determines that images work best when used in a specific context that enhance and support a text's meaning (such as illustrating events in history), rather than wholly describing an idea or mechanism (as in the case of science) (210). Just as images can elucidate, they can also distract or obscure, she argues. In the case of comics, images lie at the heart of narrative and must communicate meaning independently of and in conjunction with text. Marianne Hirsch describes the work of reading comics as "biocularity," in which the comic calls upon the reader to "read back and forth between images and words...[revealing] the visuality and thus the materiality of words and the discursivity and narrativity of images" (1213). Similarly, Gene Kannenberg, Jr., in his examination of comic book artist Chris Ware's work, calls for scholars to view Ware's work as a "visual-literary totality" which "questions the binary text/image opposition" (175). As comic authors such as Ware blur the boundaries between image and text, readers will develop new theories and practices for reading comics. The special relationship between word and image enables comics to uniquely strive to make events and emotions visible by calling upon the reader to make meaning through two integrated modes of reading.

The comic's frame and panel structure also significantly contribute to the medium's ability to communicate narrative. Comics simulate the dynamism of film through their "energetic figures, dramatically shifting camera angles and bright colors,
spurring the impression of vigorous activity" by using the gaps, or gutters, between panels (Harvey 38). Through their structure, comics can bend, stretch and collapse time and space, building drama, suspending a moment in time or creating tension between two ideas. The spatial nature of comics means that, according to Laurie Taylor, "While the artist tries to dictate the reader's movement through the panels, comic books allow readers the opportunity to read and experience the panels out of sequence, even to retrace through the panels," enabling the reader to travel back and forth in time using peripheral vision (par. 8). Comics reinforce the artificial nature of time, writes Will Eisner, through framing, which "separates the scenes and acts as a punctuator. Once established and set in sequence the box or panel becomes the criterion by which to judge the illusion of time" (28). This structure requires much interpretation on the reader's part, as she must piece together these disparate moments in time to achieve narrative closure. To read comics requires engaging in an active meaning-making role, practicing a highly skilled dance between image and text, time and space.

The comic medium and its reading practices become further complicated in light of increasing publication of comics on the Internet. Responding enthusiastically to the Internet's potential for publishing and distributing comics, McCloud wrote Reinventing comics (2000), arguing that:

We're about to enter a world in which the path from selling ten comics to selling ten thousand comics to selling ten million comics is as smooth as ice. An economy in which consumers' interests are served directly, not merely guessed at, and in which the creator's work can rise or fall on the strength of that interest - and not for any other reason (188).
Unlike the overwhelming praise for *Understanding comics*, *Reinventing comics* received a great deal of criticism by scholars for its oversimplification of the Web as a "cure-all" for the struggles faced by the comic book medium (Groth; Fenty, Houp, and Taylor par. 2). Regardless of whether the Internet will serve as the savior of the industry or not, the Internet offers numerous possibilities as a site for exploration and invention in the comic medium. Underground authors have especially taken to the Internet due to the Web's ease of distribution and lack of regulation and censorship (Fenty, Houp, and Taylor par. 3). Following in the footsteps of 1960s comix that freely explored drugs and sexuality, underground web comics often tend towards "dark and edgy" subjects, taking on political and social topics as well as "geek culture" narratives related to video gaming, computer programming and hacker subculture (Fenty, Houp, and Taylor par. 5). As the definition of the comic continues to shift, authors explore new modes of expression by including interactivity, animation and other forms of multimedia in their works. These features of new technologies mean that authors can reach a wide audience and dispense creative and sophisticated messages with ease.

THE INTERNET, COMMUNICATION AND INTERACTIVITY

Due to its potential as a site for self-expression and instant connectivity to others throughout the world, the Internet enables and fosters unique relationships. According to Shanyang Zhao, "For the first time in history, it has become possible for a human association to emerge among complete strangers in total absence of corporeal..."
copresence" through the power of virtual communities that enable asynchronous and synchronous communication (464). For the comic book medium, this means the possibility of creating communities for fans, artists and scholars of both print and web comics. For people suffering from illness, the Internet provides an especially powerful mode of communication as it fosters "anonymous intimacy" with others online (Zhao 472). The ill person may completely redefine herself in the space of a virtual environment as someone without illness, or conversely feel free enough to express herself honestly with strangers who can understand and appreciate her story. The Internet changes how individuals with sensitive or highly personal issues tell their stories and join communities. No longer must the ill person feel restricted to sharing her experience in a local community or feel silenced if her immediate community rejects her; the Internet may provide a safe haven for the marginalized individual to communicate meaningfully with others on a global scale.

Stemming from this culture of open (and often anonymous) Internet communication, Web logs or "blogs" enable individuals of all kinds to create a digital memoir or archive of their experience. From the highly political to ultra-personal, blogs attract audiences large and small by creating a unique diary structure in which visitors can engage in conversation by leaving comments and interacting with one another. According to James Gillett, who studied the effect of blogs on stimulating activism for SARS (Severe Acute Respiratory Syndrome), blogs "facilitate the mobilization and collaboration of those online toward addressing issues of oppression and injustice" (41). Though little scholarly work exists about blogs used to detail
chronic and/or life-threatening health problems, such as cancer, cancer patients are
developing blogging communities at increasing rates, indicating gravitation towards
this mode of interactive self-expression. Stephen Coleman writes that blogs may
represent the best of democracy, as they "lower the threshold of entry to the global
debate for traditionally unheard or marginalized voices" (277). In the case of people
with cancer, whose voices often remain silent in times of illness, blogging -- and the
Internet as a whole -- offers a significant opportunity to communicate within a
therapeutic community as the participants work to redefine the role of the sick person
or "patient" in society.

As illness narratives continue to grow in popularity, the Internet and its many
tools will pave the way for new kinds of expression about illness. Harnessing the
power of instant connectivity, individuals with stories to tell can find outlets for
communicating their stories that challenge the boundaries of conventional narratives.
Scarce literature on the intersections between illness narratives, technology and
entertainment (humor, comics, etc.) means that this project will examine scholarly
work on each of these areas independently and make connections between them. By
drawing upon the fields of sociology, medical anthropology, psychology, linguistics,
literature and culture/media studies, I investigate how new technologies can give rise to
narratives that empower their authors and redefine the meaning of cancer as social and
cultural construct.
CHAPTER 3:  
LAUGHING BACK: WEB COMICS AND OTHER "CANCERTAINMENT"

While joking, laughing and acting humorously in times of severe trauma and pain may seem contradictory, in fact comedy and tragedy often ally to describe the ironies and injustices of life. In his examination of Jews' use of humor during the Holocaust, Conrad Hyers writes that comedy expresses a "stubborn refusal to give tragedy...the final say" (232). Humor not only facilitates coping, but more importantly, enables marginalized, oppressed or silent voices to speak. To joke about one's dire situation means to rise above it, to become master over it. In the case of cancer, humor provides a mechanism for reframing the illness experience; faced with physical and emotional trauma, alienation from her body and even death, the cancer patient defies hopelessness and victimization through laughter. This individual act of humorous self-expression takes on new meaning when it occurs on a large scale. The convergence of many voices, each engaged in viewing her disease humorously, works to enact significant social and cultural resistance against stigma and marginalization imposed upon the cancer patient.

This convergence occurs on the Internet, where cancer patients can form alternative dialogues about their illness in the safety of cyberspace. In mainstream society, cancer patients often find themselves in a subordinate position – rendered powerless by their doctors, caretakers and society-at-large. On the Internet, however, the cancer patient community can generate what James C. Scott calls a "hidden transcript," in which marginalized or subordinate groups "are likely to create and
defend a social space in which offstage dissent to the official transcript of power relations may be voiced" (xi). The hidden transcript acts as a site of meaning for the voices of the oppressed, an "offstage" dialogue that often enables widespread resistance and change to occur. Humorous expression or the carnivalesque particularly "gives a privileged place to normally suppressed speech and aggression" by masking politically-charged messages in an innocuous forum (Scott 181). Through jokes, drawings, comics, games and other forms of humorous self-expression, cancer patients critique the "official transcript" generated by those in power, and reclaim their illness and identity through the act of laughter as resistance. To make sense of how individuals use humor to redefine and appropriate their experiences with cancer, I begin by exploring how a large community of cancer patients engages in a dialogue about cancer online, and then identify two modes of humor that commonly appear in Internet self-representations – body humor ("tumor humor") and gallows humor. Each mode functions uniquely to empower its author (the cancer patient) while simultaneously affecting the social and cultural meanings of the cancer experience for its readers.

CANCER HUMOR AND ONLINE COMMUNITY

"To laugh with another person for whatever reason, even if only at a piece of absurdity, is to get closer to that person. Indeed, humor can even be directed at the laughers themselves, and still have this unifying effect." -- John Morreall, Taking Laughter Seriously (115)

Using the Internet as a forum for marginalized individuals to speak through humor, PlanetCancer.org strives to create a flourishing community for young adults
with cancer (primarily those aged 25-40). The site's "Cancertainment" section offers visitors humorous content including jokes and cartoons, in addition to other forms of entertainment such as books and movies related to cancer. Humorous slogans also display on the homepage of the site, with new taglines appearing upon each refresh of the page. Phrases such as "Cancer: There are easier ways to build character," "Just like Animal Planet, but with less hair" and "Planet Cancer: The Anti-Inspiration," frame the site as a place where cancer patients can use humor to redefine their experience; not all cancer patients necessarily need "inspiration" to cope with their experience, the slogans say. Planet Cancer's non-apologetic approach to humor makes the site a welcoming place for those who seek an alternative avenue for the construction of their experience with cancer.

PlanetCancer.org's online community (message boards) follows suit by encouraging those who post on the site's forums to engage in conversation about the humorous aspects of cancer. By creating an online group that fosters humor about cancer, patients reclaim authority as tellers of their experience and subsequently reframe how their community understands and accepts the diagnosis. The authors frequently challenge those in power (the medical community and even family and friends), while developing their own discourse that rejects the dominant meaning of cancer as a disease. Through the online community patients become authors of their story, and through postings with other patients, one author becomes exposed to a multitude of stories. The intertextual narrative that results offers patients the opportunity to redefine their experience as part of a larger web of stories among those
in a similar position – a hidden transcript created by individuals who often remain unheard. The following examples from PlanetCancer.org's online community showcase particularly important exchanges on cancer and humor.

One of the main sources of humor on Planet Cancer's online community revolves around cancer patients' real-world interactions with individuals who do not have cancer. In these cases, the cancer patient often feels alienated from friends, family and strangers who say the wrong things, behave awkwardly or do not say anything at all about the person's illness. Where some communities might focus solely on the pain and shame of this experience for cancer patients, in the Planet Cancer community contributors often begin threads discussing the humorous aspects of these situations.

For example, in a thread called "For Some Chuckles," the following exchange takes place (Amandarhiann):

**amandarhiann [Saturday January 21, 2006 7:25pm]:** I had both my breasts removed four months ago, and I didn't get new ones and had never worn my prosthesis.

I went in for a post chemo mugga scan, and i was slated to go see my 5 month old niece after ward. 3 TO double check and make sure I was not radioactive (I turned out to be) I asked the technician if I could hold a young baby.

He looked at me horrified and said "Oh my God, you're not breast feeding are you."

**snowbunny [Sunday January 22, 2006 3:24pm]:** LMAO!! What a fucking dumbass!!!! Excuse the french, but that is just plain hilarious!!!

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3 A "mugga" scan or MUGA scan is "a test that evaluates the Left Ventricle Ejection Fraction (LVEF) which is the percent of blood being pumped from the left ventricle of the heart out to the body. The scan produces a moving image of a beating heart" (Children's Hospital of Philadelphia).
Bubble [Wednesday January 25, 2006 12:02 am]: Oh my god! I can't imagine what your face must have looked like when he said that! That is the funniest and craziest thing I've heard all week!!!

I hope your mugga looked perfect

In this exchange, amandarhiann trusts that other members of the community will interpret her story humorously and thus takes the risk of posting it on the forum. When two others in the forum reply, both reinforce her sense of humor, calling the story "just plain hilarious" and "the funniest and craziest thing I've heard all week!" Here, the forum participants subliminally negotiate how they should understand humor in regards to their cancer experience. Joan Emerson writes that this negotiation "may be regarded as bargaining to make unofficial arrangements about taboo topics" (170). By responding positively to amandarhiann's story, snowbunny and Bubble validate the author's sense of humor, and more importantly, they validate the cancer patient's reality by reinterpreting her body, image and experience in relationship to the rest of the world. By calling the technician a "fucking dumbass," the members of the forum position themselves as a community that knows what it feels like to experience humiliation by the other, those individuals in the non-cancer community who cannot understand the cancer patient's experience. Bubble concludes by supporting the author of the story by saying, "I hope your mugga looked perfect," a recognition of the emotional component of cancer treatment that remains ever-present, despite the patient's ability to frame the experience in a humorous context. Together, the three participants engage in an alternative discussion about cancer – one that does not reinforce pity or shame about the humiliation a cancer patient may experience, but
rather champions her for finding humor in others' insensitivity and ignorance.

Threads in the forum also often focus on interpreting the rest of the world as "other" and cancer patients as normal. In a thread called "sense of humour," a group of cancer patients discuss how cancer humor affects the cancer community versus the non-cancer community (Pumpkin):

pumpkin [Wednesday September 7, 2005 12:06pm]: Hi! I got to the PC home page today and as usual the slogan at the top was different than it was the last time. (I love that it's different every time we access the page.) This time it said "When no one else thinks it's funny, we're here."

For me, that sentence is so true. The only people who tend to understand my sense of humour are people who have also had the pleasure of meeting this lovely disease as it slaps us in the face just as we think life can be somewhat normal again. heehee. My fiance, when we first started dating, used to get so mad at me for things that my friends who have also had cancer, and I would say during some of our conversations.

Does anyone else find that the slogan at the top of the PC home page cracks them up? Does anyone anyone understand healthy people?

HipiGuruPunk [Wednesday September 7, 2005 2:59pm]: …I know exactly what you mean about having a weird sense of humor about it all. I still make these little morbid or dark jokes that very few people get. I mean, lighten up dude! It's only Cancer right?

dontbeaschmuck [Wednesday September 7, 2005 4:08pm]: Yeah I agree. A positive and sarcastic attitude with cancer is the way to go.

runnin_donna [Friday September 9, 2005 8:07am]: OMG! I wore my PC T-shirt- the one that says "I had cancer and all I got was this stupid t-shirt." We were at the beach, which is populated by mostly young folk like us.

My friends were not seeing the humor. Some people came up to me
and told me it was horrible. One guy gave me a hug. A wife of a survivor asked me where she could get one for her husband. And I met a few fellow survivors who thought it was great.

I love the shirt. It's so appropriate for how I feel!

In their exchange, these cancer patients try to articulate what it feels like to become a member of the "cancer club" while simultaneously dealing with those on the outside. Pumpkin discusses how only others with cancer understand his sense of humor and the frustration his fiancé felt when she would hear him make jokes about the disease. By asking, "does anyone understand healthy people?" pumpkin likens healthy people to an alternate race, an unintelligible race that he cannot identify with (even though presumably at one time he identified with this group). Runnin_donna describes a similar experience after wearing a cancer t-shirt to the beach; those in the cancer community embrace runnin_donna when they see her and share appreciate the humor, whereas those outside of the community call the shirt "horrible" and runnin_donna's friends "were not seeing" the humor. Similarly, HipiGuruPunk identifies the telling of "morbid or dark jokes that very few people get" as a means to deal with cancer.

In each of these cases, the cancer patient establishes a dichotomous relationship between those with cancer and those without. Sense of humor becomes a characteristic of individuals with cancer, and the cancer patients depict those without cancer as humorless and impossible to understand. As a result, humor empowers these cancer patients by providing them with a community who find humorous aspects of their illness and relate to the world in the same way; they use "othering" to resist against those in power (the healthy community) by positioning themselves as the dominant
group (the cancer community). In their examination of how jokes foster social relationships, Fine and DeSoucy argue that "Joking is reflexive in that it creates comfort in group life and serves to maintain group relationships by building commonalities;" thus the PlanetCancer community – the cancer community – strengthens by telling jokes and sharing humor within the group (1). The forum encourages humor to "normalize" its community members by enabling them to assert control over their reality.

Similarly, cancer patients in the Planet Cancer forum use humor to distance themselves from the pain of treatment and to claim power over the people treating them. In a thread called "The Hospital: Fun Things to Do" a sampling of posts say (Dontbeaschmuck):

**cari [Friday August 5, 2005 10:57pm]**: Leave the door open (if it doesn't need to be closed to prevent infection) and wave and say hi to all the people who walk past your door and pretend like they are not looking in your room. They get that look on their face like "shit I am busted" I had hours of entertainment with that…

**chrisaw [Monday August 8, 2005 7:29am]**: If you have a cathiter in, announce loudly you need to use the bathroom and then sigh and say, "that's better," without ever having to get up- works really well on new visitors

**Ashy Larry [Wednesday August 24, 2005 9:25am]**: Once after my lung surgery, I was a huge smart ass by walking laps around the nurse station as fast as I could go. They kept on telling me that I needed to do a certain number of laps daily, so I would do twice the amount as fast as possible, then go lay back in bed. I dunno, I really got a kick out of it.

**cshell725 [Monday September 19, 2005 10:36pm]**: We used to connect our IVs together in one room and sit around and order pizza and watch funny movies. Whoever's the sickest gets all the
visitors, and everyone has fun. (Especially if someone's on painkillers!)

The first two posts identify a kind of "hazing" for hospital visitors by making them feel embarrassed about their behavior in the hospital or alienated by the patient's situation as a sick person or perceived "victim." These acts establish the hospital as the patient's domain where he/she can assert control over the situation, rather than passively allowing the visitor to gaze and objectify the patient. Ashy Larry describes an act of victimizing the nurses and those who prescribe his treatment. By acting like a "huge smart ass," Ashy Larry tries to exert control over his treatment by reinterpreting the doctor's or nurse's orders. In the fourth post, cshell725 describes a positive bonding experience among patients in the hospital. Here, the patients overcome isolation by banding together in a kind of "celebration" of their treatment. In each case, the cancer patient defines the hospital as a site for control over illness rather than a symbol of defeat and passivity.

In a final example, one cancer patient posts a request for jokes that he can read during recovery from a splenectomy (FlyingTurtle). The author writes,

**FlyingTurtle [Saturday October 23 2004 2:52pm]:** Dear Planet Family,
This free wheeling forum is so therepeutic; both giving and receiving. We can all look these diseases...these thieves square in the lookers and say "You will not take anything more than my health from me..not my laughter,my heart,my imperfections,my freedom,my daily mistakes,my humanity.I do not need to change my life because of you."

I will be laid up for many weeks after having my massive spleen(yuck) removed. I feel in addition to the pain meds..some good jokes would help.Any like-minded souls who can still laugh
please send me some humor…

Flying Turtles's post exemplifies the power of humor as resistance against cancer. According to illness narrative scholar Arthur Frank, the very act of telling of one's story prompts resistance: "In the story, the flow of experience is reflected upon and redirected; resistance through the self-story becomes the remaking of the body-self" (170). Flying Turtle refuses to let the disease or "thief" steal away humanity or humor ("laughter"), and Flying Turtle claims this right through writing, through telling a story. Flying Turtle also equates healing with humor by asking for jokes to read during recovery. Thus, humor becomes a form of resistance and a form of therapeutic control over disease. The power of humor lies in its ability to resist oppression of any kind. According to Morreall, "The person with a sense of humor can never be fully dominated, even by a government which imprisons him, for his ability to laugh at what is incongruous in the political situation will put him above it to some extent, and will preserve a measure of his freedom – if not of movement, at least of thought" (101). In the case of the cancer patient, this means that humor acts as a measure of freedom by allowing the ill person to rise above circumstance – treatment, hospital stays and daily clashes with the world around her – by finding the humiliating humorous in a community of like-minded individuals.

By reinforcing each other's realities while simultaneously redefining the cancer experience, the PlanetCancer community demonstrates how the Internet can foster supportive, dynamic communication that helps to shape meaning for its participants. Because the community allows anonymity and individuals can contribute as much or
as little about themselves as they would like, opportunities for honest and uncensored speech abound. The community acts as a forum for the "hidden transcript" in which the participants, many of them currently undergoing treatment, can speak about humiliation, frustration and alienation from their bodies without fear of violating the "official" speech they engage in with their doctors, families and friends about their illness. In the "real" world, the cancer patient often defines herself as "other," in opposition to healthy individuals, but in the online community she identifies herself as "normal" with others who experience the world in a similar way. Humor about cancer acts as a means for bonding within the community and creates a forum for expressing divergent viewpoints about the illness experience.

**BODY HUMOR OR "TUMOR HUMOR" AND CANCER ISLAND**

In 2002, Buck Cash created CancerIsland.com (www.buckcash.com/cancerisland) to provide a new kind of destination for cancer patients. In the face of his own treatment for non-Hodgkin's lymphoma, Cash began creating and publishing online cartoons called "Toomers" about humiliating and humorous experiences associated with cancer. Many of these works focus on humor related to the body and cancer treatment, positioning the horrific ordeals of treatment including hair loss, surgery, chemotherapy and other side effects as opportunities for laughter. Much like the large-scale resistance enacted by cancer patients on PlanetCancer.org, Cash uses humor to empower himself and his readers in the face of illness. In his essay "Humour," Freud writes,
…Humour has in it a liberating element…It is the triumph of narcissism, the ego's victorious assertion of its own invulnerability. It refuses to be hurt by the arrows of reality or to be compelled to suffer. It insists that it is impervious to wounds dealt by the outside world, in fact that these are merely occasions for affording it pleasure (52).

According to this philosophy, humor acts as a defense mechanism against suffering and humiliation; thus, especially in the case of body alienation/humiliation that results from cancer, humor plays a significant role in turning pain into pleasure while liberating the patient from the social and emotional injuries of illness. Cash also creatively authors alternative illness narratives through his cartoons. The images address how the cancer patient interprets her ill body, deals with the medical system and relates to family members by turning traditional metaphors and social/cultural interpretations of cancer on their heads. Cash resists victimization by redefining what it means to have cancer.

In one cartoon called "Testes," Cash envisions what a cancer cell might look like after someone catches a glimpse of the microbe and photographs it for a newspaper (Figure 3.1).
In simple terms, the cartoon portrays an angry cancer cell parent yelling at her cancer cell child for allowing someone to photograph him, but the meaning here functions on multiple levels. The relationship between the cancer cells in the cartoon acts to reinforce the notion that cancer has an invisible quality to it – impervious to the human eye, elusive to those who suffer from it and to those who study it. Cash depicts cancer as a monster figure, but the dynamic between parent and child seems strikingly human. The visual cartoon medium allows Cash to give cancer a relatable face, and through this process I argue he claims power over his illness. Rather than allowing cancer to remain hidden, mysterious, Cash "publishes" it, both on the Internet and in his fictional newspaper publication. According to Arthur Kleinman, "the plot lines, core metaphors, and rhetorical devices that structure illness narratives are drawn from cultural and personal models for arranging experiences in meaningful ways and for
effectively communicating those meanings…the personal narrative does not merely reflect illness experience, but rather it contributes to the experience of symptoms and suffering" (49). In his cartoon, Cash uses images and mental models familiar to him to construct his illness experience. He envisions cancer as a monster, but one that has similar familial relationships to those of human beings. This depiction makes the cancer experience relatable not only to Cash's readers, but valuable for his own self-construction of his disease process, as he gives a face to his illness that remains hidden in most traditional narratives.

In another cartoon called "Honey, I Shrunk the Tumor," Cash imagines a poster for a movie about killing cancer (Figure 3.2). A militant figure in fatigues holds a giant needle at the ready, shouting, "I'm on a REMISSION MISSION!!" The background of the image resembles clusters of floating red cells about to undergo attack.

**Figure 3.2: Honey, I Shrunk the Tumor**

This humorous rendering focuses this time on the attacker (as opposed to the prey, cancer, depicted in the previous cartoon) who literally wages war on the disease. To a degree, this image reinforces the traditional metaphors associated with cancer – of cancer as "enemy" that must be destroyed, but it simultaneously functions as an empowering act by exploring the absurdity of the metaphor in the first place. According to Susan Sontag, "conventions of treating cancer as no mere disease but a demonic enemy make cancer not just a lethal disease but a shameful one" (57). Cash's cartoon points to the romanticized and pervasive notion of oncology and chemotherapy as a savior for individuals with cancer, thus playing upon the traditional metaphor of good versus evil, predator and prey. By actively recognizing how metaphor can pigeonhole a patient into believing certain myths about her treatment (the very thing that Sontag warns against), Cash overcomes metaphor as he authors his illness experience the way he sees fit.

Cash takes a similar approach to "tumor humor" in his cartoon "WMD" (Figure 3.3). Here, a doctor uses an x-ray to inform a patient that he/she has a mass in his/her abdomen and must go to Iraq to seek out "weapons of MASS destruction."
This juxtaposition of political humor with tumor humor makes a powerful statement. First, Cash depicts the incompetence of the physician, who confuses the word "mass" between a kind of tumor and a kind of weapon. As a result, the reader immediately questions the medical system's perspective about the patient's treatment. Second, if the reader believes that the government's weapons of mass destruction did not exist, the doctor sends the patient on a fruitless mission to locate a treatment that does not exist in a dangerous location to a country at war. Nevertheless, if the treatment did exist, the comic posits that cancer treatment requires a force as tremendous as a bomb to defeat it (once again using the war metaphor). The comic especially makes a statement about the subjectivity of treatment – the image of the tumor, circled to give this amorphous
disease a pictorial representation, becomes as difficult to make sense of as the
ridiculous treatment prescribed. In her examination of medical imaging technologies
and popular culture, van Dijk describes how "the images and text combined produce
the persuasive narrative of a body under siege by foreign armies and protected by the
chemically fortified immune system. Such metaphors and images, in turn, foster a
particular conceptualization of disease, one that may spur the development of new
technologies" (12). Through his comic representation, Cash problematizes the
"metaphors and images" that Van Dijk describes by depicting the subjectivity of the
medical image and the treatment that the medical system prescribes. Cash's cartoon
portrays the x-ray as a false map, and the treatment leads to dangerous, and perhaps
useless, treatment. Rather than making the illness visible, both the doctor and his x-ray
only further convolute the illness experience. Through his comic, Cash takes issue
with the system that often fails its patients by glorifying its new technologies when
cancer remains anything but clear.

Finally, Cash also illustrates how the cancer experience impacts family
relationships. In two cartoons he depicts the alienation between husband and wife that
results from cancer treatment and cancer symptoms. In the first, "Night Sweats" a wife
puts on a full scuba diving suit to combat her husband's night sweats (Figure 3.4).
Figure 3.4: Night Sweats

George's night sweats were getting pretty bad...


In the second, "Comb," a man's wife jumps up onto a chandelier to avoid her husband's comb containing lost hair (which she mistakes for a rat) (Figure 3.5).
In both these instances the wife must guard herself against her husband's disease that destabilizes their ability to relate to each other and makes him appear alien or "other."

In the case of the "Comb," the wife blames chemo for making her husband "lose his mind," rather than considering she made a mistake. Through his images, Cash communicates about highly personal relationships and the strain that cancer puts upon them; humor enables this private dynamic between husband and wife to become public. According to Joan Emerson, "Joking provides a useful channel for covert communications on taboo topics. Normally a person is not held responsible for what he does in jest to the same degree that he would for a serious gesture" (169). As a result, Cash can safely describe the humiliation and alienation a person with cancer may feel from his spouse through joking about a diver's suit or a hairy rat. He
contributes to the hidden transcript formed by the cancer community by using coded images and messages veiled in humor.

The Internet medium offers a unique opportunity for relating the cancer experience in a non-traditional manner. In the case of Cash's cartoons, the hyperbolic narratives neutralize the humiliating and stigmatizing aspects of cancer by enabling the cancer patient to speak their personal truths about cancer diagnosis and treatment without fear of reproach. Though society may still use violent metaphors to describe cancer's hold over the body, despite Sontag's warnings against them, Cash takes a meaningful step towards overcoming and eradicating them by poking fun at the way language defines society's view of cancer. His humorous approach signifies resistance against victimization as he reclaims the body as a site of laughter. By offering visitors to CancerIsland.com a host of visual works that mock the embarrassing and painful aspects of the illness experience, Cash actively defends humor as a means to think alternatively about illness. He encourages visitors to the site to see their experience in a new way, and simultaneously reframes his own experience by imagining cancer as something he controls and defines.

GALLOWS HUMOR AND WWW.MIRIAMENGBELBERG.COM

"We poke fun at that which threatens us. Since our greatest threat is death, there should be no wonder at the popularity and persistence of gallows humor." – James A. Thorson, "Did You Ever See a Hearse Go By? Some Thoughts on Gallows Humor" (23)

People commonly joke about death or use "gallows humor" when faced with the greatest conflicts or trauma that put their mortality in question. According to
Charles R. Gruner, "By telling jokes about death and making fun of those in life-and-death industries of medicine, grave-digging and undertaking, we enable ourselves to momentarily, at least, feel superior to that final process which will take away from us all that we own and all that we have known" (41). Thus, humor affords an illusion of superiority over death, a means to render oneself powerful in the face of the very thing that renders everyone powerless. Individuals may also call upon humor to avoid the humiliation of one's situation and to enable survival in the face of misery and death. Holocaust survivor Viktor Frankl says of his experience with humor in the concentration camps,

Unexpectedly most of us were overcome by a grim sense of humor. We knew we had nothing to lose except our ridiculously naked lives…Humor was another of the soul's weapons in the fight for self-preservation…Humor more than anything else in the human make-up can afford aloofness and an ability to rise above any situation, if only for a few seconds (54-56).

Not entirely unlike the Holocaust, the experience of cancer causes many individuals to feel demoralized, robbed of their spirit and their identity and forced to face unclear futures with utter powerlessness. Clearly, humor – even the "darkest" humor – can afford a unique coping mechanism in moments of paralyzing fear and uncertainty. According to Morreall, "If humor involves a distancing from life's troubles, then perhaps the highest form of this 'stepping back' is gallows humor, in which a person is able to achieve enough distance from his own situation of impending death to joke about it" (105). Rather than succumb to victimization, despair or powerlessness, cancer patients create space
between themselves and the reality of death through humor. The Internet enables this space by allowing authors to reinterpret cancer and transitorily their identities, as they create meaning without trying to play the role of "survivor" or "hero."

Gallows humor on the Internet abounds, and not surprisingly, cancer patients often fixate on death as they come to terms with their diagnosis. The accessibility and ease of use of online tools means that individuals with cancer can meaningfully contribute to alternative dialogues about illness and death and find others who share their points of view. Miriam Engelberg (www.miriamengelberg.com) takes an especially humorous and visual approach to detailing her experiences with breast cancer, the medical system, her family, work and other day-to-day trials by posting an online "comic of the week" while simultaneously keeping a blog on her site. From the outset, Engelberg establishes herself as an anti-hero, determined to live with cancer as an average person who does not aspire to become a role model for others. Humor plays a central role in her discussions about death and her legacy.

In one comic of the week, " Fight Back," Engelberg directly quarrels with the idea of hero-worshipping individuals with cancer (Figure 3.6). She depicts an ad for a news program on TV that proclaims one man with testicle cancer "decided to fight back," and then questions what "fighting" means given that almost every cancer patient undergoes the same treatment.

Much like Buck Cash's questioning of the effectiveness of chemotherapy in his cartoon "I'm on a Remission Mission," Engelberg's emphasis on the meaninglessness of sick roles and ambiguity of treatment dramatizes how society often pigeonholes patients into categories of either victims or heroes. By challenging these categories, Engelberg contributes to an ongoing dialogue in the cancer community about how patients should define themselves, rather than allowing the healthy community (in this case, a news program) to define them. Engelberg argues with the notion that cancer patients must inevitably read their disease as militant. Yet, according to Sontag, society continues to
link cancer with war metaphors: "with the patient's body considered to be under attack ('invasion'), the only treatment is counterattack" (64). Thus, until the cancer community de-mythicizes the disease, as Engelberg attempts to do in her comic, cancer patients will feel they have no choice but to fight or die.

In another comic called "The FOL Gene," Engelberg actively refuses to play hero or role model in the face of breast cancer (Figure 3.7).

**Figure 3.7: The FOL Gene**

![The FOL Gene comic by Miriam Engelberg](http://www.miriamengelberg.com/comic_of_the_week.htm)


Recognizing that when people die others always comment how the individual loved living, Engelberg stages the cartoon to read like an infomercial, explaining to readers
how they can avoid death through a "modification in lifestyle." She blames the "FOL" or "Full Of Life" personality type for death, and advocates for individuals to become "lackluster" and "blasé" about life. This "negative thinking" presents an alternative approach to the illness experience through the author's refusal to live life to the fullest and her encouragement of others to do the same. By writing the comic in the form of an infomercial where she sells this modified lifestyle, Engelberg also satirizes the many self-help shows and books aimed especially at individuals with cancer to appreciate life and make the most of their time. Through this satirization Engelberg equates life with something that individuals can choose to prolong and death with something that individuals can avoid, simply by willing themselves to do so.

In a third comic called "Last Thoughts," Engelberg worries that when death comes she will see her misplaced wallet, digital watch directions and TV remote flash before her eyes rather than any important life experiences (Figure 3.8). Engelberg's legitimate fears about her legacy and about what she has spent her life doing become benign through her humorous rendering. She chooses human examples that many people experience (losing the remote, trying to pick out an album on her MP3 player), and as a result the reader engages in laughter about death with her rather than feeling sorry for Engelberg or having trouble relating to the subject matter. Engelberg can cope with her anxiety about death through her comic imagery, while also involving the reader as an accomplice who can laugh rather than cry at Miriam's situation.
Engelberg's comic also puts in perspective the significance of an individual life.

Thorson writes that Freud put gallows humor "at the top of the heap of defense mechanisms, as the self-effacing response of one who can laugh at his own frailty. He saw greatness of soul in a humor that smiles through its tears...making fun of ourselves because we must die focuses upon the reality while recognizing our own insignificance" (18). Engelberg's emphasis upon the TV remote and her lost wallet achieve this effect – balancing the reality of the fragility of her life with the triviality of the little things that often consume her.

While psychologists may consider gallows humor a fairly common response to
the crisis of facing one's mortality, the Internet medium offers more than a simple perpetuation of this behavior or self-expression. The Internet narrative in its many forms creates a safe space for individuals with similar coping mechanisms to find each other. It sanctions humor as a legitimate response to cancer, and it often bridges social, cultural and geographic boundaries. Most importantly, the Internet enables new and creative ways of thinking about gallows humor and cancer. Visual and dynamic narratives such as Engelberg's challenge the way cancer patients traditionally describe their experience (through print narratives or even typical Web pages), forcing readers — especially other cancer patients — to approach cancer with a new understanding about the disease. Now, patients need not read cancer diagnosis or prognosis as "implicitly genocidal," but rather may laugh in the face of death through humorous narrative depictions such as Engelberg's (Sontag 84).

CANCER HUMOR AND TABOO

The examples above certainly exemplify some of the most innovative narratives on the Internet about cancer. By challenging the way cancer patients read their disease, these authors work to resist the stereotypes, metaphors and stigmas often attached to cancer by speaking within their marginalized group and engaging in dialogue with dominant discourse. Nevertheless, most authors of humorous web sites continue to express signs of uneasiness about using humor to talk about cancer. In many cases the creator takes a moment to provide a disclaimer or even apology about the humorous content that will follow, as though the author recognizes that jokes about cancer and death do not fit the mainstream coping strategy of someone with cancer.
This anxiety may stem from the authors' recognition of the "official transcript" (dominant discourse) about cancer sanctioned by medical professionals and healthy individuals that treats cancer as a grave, tragic disease that must be fought. The hidden transcript, always in "constant dialogue – more accurately, in argument – with dominant values" necessarily quarrels with its own subversive plot (Scott 135). Thus, it is not surprising to locate moments of uneasiness in the work of online authors who use humor to openly acknowledge the possibility of death, question a doctor's treatment or laugh at a certainly serious condition without any recognition of returning to health. These narratives certainly threaten mainstream coping methods and challenge how the cancer community "reads" the disease. Perhaps this deviant behavior accounts for the fact that some individuals on the Web who create humorous sites about cancer go as far as actually blaming themselves for their aberrant humor.

These disclaimers and anxieties persist throughout humorous cancer web sites. On her site "The Furry Monkey," Karen writes, "Well here are the cancer jokes! I thought they were funny anyway but then I've always had a warped sense of humour so I've been told!" (Theobald) (Emphasis added). In other cases, the cancer patient blames the disease itself for her ability to find humor in cancer jokes. Liz writes on her site "Meningioma Mamas," a site for mothers with brain tumors, "Keep in mind, we also possess a wacky sense of brain tumor humor — the results of our neurosurgeons tightening up the bolts in there!" (Holzemer) In this case, Liz associates her sense of humor with the physical changes resulting from cancer; Liz assuages her apparent guilt over jokes about brain tumors by pinning her taste in humor on the physical effects of
cancer. By contrast, on the Testicular Cancer Resource Center site one man writes, "…for some bizarre reason, a lot of guys with testicular cancer seem to find something funny in their situation…maybe it's just because we're guys, and we've been making jokes about our Nuts and Johnsons all our lives!" (Bank) Here, the author believes that humor about testicular cancer comes naturally because testicular cancer affects men who are socialized to joke about their bodies, unlike Liz and her community who believe their humor must be accounted for by something unnatural -- the "bolts" in their heads.

Others attribute their desire for humor about cancer to its value as a therapeutic tool for coping and support. On her blog "Cancer Comic Strip" about breast cancer Suzan writes, "I find that humor helps me get through my cancer, and from what I understand it helps many others too. This blog is dedicated not to information about the disease, but to cancer warriors and their relatives/friends who just want some cheering chuckles" (St Maur). Suzan equates humor with strength, dedicating her site to "cancer warriors." Humor acts both therapeutically and as a form of empowerment, enabling a fight on the part of "warriors." Similarly, in a an online article called "When is 'tumor humor' appropriate?" on the Colorectal Cancer Coalition site, Elizabeth Parcells writes,

Humor is a vital tool in our survival kit…so I tease my nurses, tease myself, quip with the doctors, smile with my caregivers over the strange predicament in which I find myself, the divine comedy of life…sure, we can laugh over what is happening. It is a source of strength in sharing. Hope and Humor are so divinely Human.

In her statement, Parcells tries to naturalize humor about cancer, defining it as the most human of instincts – "divinely Human" in the "divine comedy of life." Using the word
"divine" she also equates humor with God and spirituality, positioning her humor as a God-given tool for survival that stands beyond judgment or reproach. Like Suzan, she also points to the overall benefit of cancer humor for the *community* or "strength in sharing." On CancerIsland.com, Cash too defends humor and emphasizes the cancer community's right – and need – to defend ownership and meaning-making of the disease.

Cancer Island is a place for cancer patients to let their hair down, if they have any left after chemotherapy, of course! It's a place to make fun of cancer; to laugh at the beast, to kick the monster, and to get away with it… If you don't like it, it's probably because you don't get it. And if you don't get it, it's probably because you don't got it – cancer, that is.

Cash clearly defends humor not only as a therapeutic tool, but he sets up laughter as a combative, oppositional measure against cancer. Cash calls cancer a "monster" or "beast" that's "threatening" him, and then provides humor as an antidote that can fight an ugly predator. He also separates those who have cancer from those who don't, arguing that those offended by the humor probably don't understand it. This technique creates an insular community of those with cancer as opposed to those on the outside who won't – or can't – understand. In this manner Cash claims power over his illness and similarly empowers those in the cancer community by creating a space unique to cancer patients. As more cancer patients begin to take this approach – validating the need for alternative stories and representations about cancer rather than apologizing for them – the more marginalized voices will make themselves heard in the space of dominant discourse.
LAUGHING BACK

The power of humor exists not only its ability to act as a coping mechanism, but more importantly, in its insistence on creating a new kind of meaning for cancer patients. Humor becomes resistance – laughter forms a bond among those who share the cancer diagnosis, while enabling them to band together against those who don't – or can't – understand the disease. The Internet facilitates this resistance on a grand scale, fostering deep relationships through interactive, online communities and blogs, and casual relationships for web surfers who come to the Internet to find a joke or two in a time of crisis. By finding others who share a similar philosophy about dealing with cancer, cancer patients who enjoy humor (or find humor necessary), use the Internet to reach out to others without experiencing fear or guilt often associated with choosing a resistant identity or role. The Internet may also enable individuals with cancer to discover humor about their illness for the first time and to find new means of coping as they uncover ongoing dialogues and creative narrative expressions about cancer on the Web. According to Arthur Asa Berger, "Humor fosters creativity, helps prevent obsessive behavior, encourages playfulness and openness, purges us of violent emotions or feelings of excessive guilt, reveals that authority is often invalid, liberates us, helps promote social cohesion, and provides great pleasure" (162). Thus, through humor, the cancer patient shifts her conception of the disease, and laughter acts as a new means of interpreting cancer. No longer must the cancer patient "fight" or "attack" the disease; instead, she gives herself power over it by laughing back.
For decades, comic book authors have used the word-image medium to tell tales of fantasy and heroism, to provide cultural, social or political critiques and traditionally, to entertain. Though perhaps best known for its superhero adventures, the comic book medium lends itself to narratives of all kinds – from the politically charged *V for Vendetta* to the auto-historical *Maus*. Masked in a tradition of child's play, the comic often tackles the most painful, traumatic, historical or personal events, lending a unique voice to its author through its juxtaposition of word and image in sequence. According to Edward Said in an introduction to the comic *Palestine*, comics "seemed to say what couldn't otherwise be said, perhaps what wasn't permitted to be said or imagined, defying the ordinary processes of thought, which are policed, shaped and re-shaped by all sorts of pedagogical as well as ideological pressures" (ii). The comic book opens doors to new worlds, exposes its readers to alternative ideas and taboo subjects, and especially enables traumatic narratives – those rendered in crisis and pain – to exist and to thrive.

Building on the work of Art Spiegelman's *Maus*, a hallmark example of autobiography about trauma, author Brian Fies created a comic that similarly utilized the comic book medium to render a narrative of pain and survival. Fies's "Mom's Cancer," a serialized digital comic that began in early 2004, gives voice to one family's struggle to survive in the wake of lung cancer diagnosis and treatment ([www.momscancer.com](http://www.momscancer.com)). While no narrative or form of representation could ever truly
portray any traumatic experience, the comic book medium creates new opportunities for self-expression and meaning. In the case of "Mom's Cancer," the Internet (as publication and distribution channel) enables this dynamic and powerful comic to reach a mass audience of readers in the cancer community. I argue that "Mom's Cancer," through its comic book structure and word/image juxtapositions, creates a distinctive "counter-narrative" about cancer that impacts how the cancer community interprets and experiences the disease. In his essay on trauma as it relates to 9/11, Don DeLillo defines a "counter-narrative" as "a narrative that serves to reintroduce trauma into a new network of signification without normalizing or naturalizing the event" (34). By investigating four characteristics of the web comic medium and specific passages from the family's blogs, I will explore how "Mom's Cancer" produces a counter-narrative and creates alternative and/or new meaning for cancer patients and their families.

Defining "Mom's Cancer" as Counter-Narrative

Certainly many kinds of illness narratives about cancer exist, and clearly no one could be read as "traditional." How, then, to define "Mom's Cancer" as a counter-narrative? I argue not that "Mom's Cancer" goes where no comic has gone before; certainly one can trace its influences to previous works such as Maus, American Splendor and earlier "confessional" comics stemming from the underground "comix" movement of the 1960s. Rather, I suggest that "Mom's Cancer" provides a new way – an alternative way – of locating meaning and understanding of the cancer experience for the cancer community (both patients and their family members) through the comic's
imagining of the illness experience as other-worldly. The comic book medium thrives on the fact that it does not depict "real" life; rather, it creates exaggerated and satirized characters, plots and landscapes portrayed through symbols and icons. By imagining cancer in these terms, Fies creates a symbolic world that does not attempt to "normalize" or "naturalize" the experience of cancer, and instead dramatizes its otherness through the language of images, metaphor, hyperbole and the manipulation of time and space. "Cartooning isn't just a way of drawing, it's a way of seeing," writes comics theorist Scott McCloud (31). The reader of the cancer comic must find a new way of seeing too, as she integrates her own experience through the lens of the comic world.

EXAMINING THE WEB COMIC, "MOM'S CANCER"

Meaning in the Gutter: Time and Space

The ill person experiences her world, especially when trying to translate it into narrative, as a series of fragments – moments in time that resist closure and continuity. The issue of time may become extremely sensitive, triggering two worlds for the patient: a "before" illness and "after" illness. Conversely, time may lose all meaning as one day bleeds into the next in the chaos of pain and trauma. In either case, the comic genre particularly lends itself to a story about illness because of its ability to bend and manipulate time through the structure inherent to the medium. According to McCloud, "Comic panels fracture both time and space, offering a jagged, staccato rhythm of unconnected moments" (66). Just as the illness experience may occur in chaotic bursts that resist linear narrative, so too does the comic provide a forum for splicing together
seemingly unconnected, fragmentary moments in time, enabling meaning to rise out of chaos.

In the case of "Mom's Cancer," Fies uses the comic book structure to represent his mother's illness experience by interweaving disparate moments in time into a distinct, cohesive narrative. In Chapter 9, "Told You So What," Fies portrays his mother's struggle to accept responsibility for years of smoking and her resulting lung cancer (Figure 4.1).

Figure 4.1: Told You So What


4 Due to the publication of "Mom's Cancer" by Abrams Image in 2006, the comic is no longer available online. Brian Fies permitted me to access a private URL in order to view the comic as it originally appeared online; out of respect to him and to the publisher, I am keeping private record of the URLs used in this project but will not publish them publicly.
In a span of six panels, Fies's mother transitions from having a full head of hair to becoming completely bald. Though the reader does not see the cancer treatment at work, causing Mom's hair to fall out, the act occurs *between* panels in the gutters, allowing the treatment to co-exist silently with the visible, emotional impact of diagnosis. The body speaks without words as it undergoes metamorphosis from one panel to the next. In a sense, the body becomes a teller of the story by refusing silence through its visibility. According to Arthur Frank, "actually hearing traces of the body in the story is not easy. Observing what stories say *about* the body is a familiar sort of listening; describing stories as told *through* the body requires another level of attention" (2). The way Fies lays out the panels not only allows him to span time in his narrative – days, weeks, months, even years in a few simple frames, but he also enables his mother's body to speak through this depiction. The textual narrative occurs on one level as Mom argues and tries to come to terms with her diagnosis, but Fies problematizes this inner dialogue further by allowing Mom's body to visually transform alongside her emotional struggle. This tension, between Mom's rationalizations about her cancer and the physical deterioration occurring in her body, manifests itself because of the comic book structure. The panel format's splicing of unique moments in time enables this rare, counter-narrative to exist in which the empowered body speaks for itself.

Chapter 7, "Impressive Hospitality," depicts the medical system's ability to have the *opposite* effect upon the patient as it silences her ill body (Figure 4.2).
In describing Mom's experience with diagnosis, as doctors of every specialty bombard her with tests, questions and examinations, Fies relies on the comic medium's strengths to tell the story of Mom's fragmentation into a series of body parts rather than a whole person. In a series of fifteen panels, Fies lays out the numerous examinations by drawing a different body part in each frame with one-word descriptions such as "push," "balance," and "follow my finger." This portrayal emphasizes the notion that "illness constitutes a major instance of 'biographical disruption' in which relations between body, mind and everyday life are threatened" (Bury 264). First, it describes the alienation patients often feel from their bodies as their parts are "dissected" and examined as though completely detached from the person. Additionally, the reader
never sees more than a small silhouette of Mom's face; she does not exist as a person, or have an identity, in the examination. Mom becomes a clinical case as doctors put her body parts on display, stripping her of ownership over her body. Not only do the panels condense time to describe the brutal succession of medical examinations, but they also force the reader to use closure to try and put Mom the *person* back in the story, to imagine her as a whole rather than as a series of disconnected parts. Here, fragmentation occurs both visually in a series of boxes and thematically as Fies depicts Mom imprisoned in her own alienated body.

Fies uses the comic book format to voice the unspeakable in Chapter 20, "Just Deserts" (Figure 4.3). The author juxtaposes four completely separate moments in time to describe his overwhelming frustration with people who smoke. In his drawings of a teenage girl, two women in their thirties, the "walking dead" in front of the cancer clinic and his mother, Fies labels each moment as a kind of rite (of passage, friendship or death). Fies acts as observer in the first three panels, watching individuals smoke cigarettes as part of various social rituals or, in the case of the cancer patients, as a last rite in their spiral towards death. In the final passage, no longer an observer, Fies wheels his mother into the radiology office where she will receive her treatment.
The comic book format makes this chilling juxtaposition possible. The reader sees the world through Fies's eyes, a world in which smokers transition from beautiful teenage
girls to dying mothers within the span of a comic book page (or in this case, computer screen). The cigarette, as agent of death, attacks in the gutter, in the space not directly rendered by the author. According to comics scholar Robert Harvey, in comics "the absence of wholly continuous action (the province of film) – the gaps, as it were, between the panels – actually works to create the impression of vigorous activity: the key moments of action that are depicted come at us in explosive bursts" (38). In the case of "Just Deserts," the "vigorous activity" at work occurs in real life over many, many years, its effects often so subtle that often no one notices until it is too late. As a result, the comic book structure brings to life the silent killer by allowing it to speak through its absence while dramatizing its physical effects in the space of a mere few panels.

Finally, in Chapter 29 "We Learn By Doing," Fies depicts a conversation with his estranged father by emphasizing text and subtext that occurs in each panel (Figure 4.4).
Figure 4.4: We Learn By Doing

Fies cleverly draws the actual conversation that takes place in the top half of each panel, while a thread of the "unspoken subtext" appears in the bottom half of each panel. This creates a multi-layered dialogue in which "the discreet nature of the comic frame, where each frame is a self-enclosed container, can also potentially function as a branching or connecting node for additional narrative layers that might run parallel to the main sequence in which the frames are ordered" (LeGrady 81). The narrative threads that run through the story create two narrative worlds: one in which the main action (conversation between father and son) takes place, and the other in which Fies analyzes and reinvents the conversation to voice the unspoken feelings of his father. The reader could strictly read across the top half of the panels and grasp one version of the story, or read only the bottom half of the panels and digest another version. By reading these narrative threads in concert, the three voices (Dad, Brian and Brian's subtext) engage in a complex dialogue. The comic medium enhances this kind of depiction by allowing three separate voices to speak within the same physical space.

In each of these cases, the comic structure gives rise to a component of Fies's complex, emotional narrative by allowing meaning to render itself in between the panels – in the gutters. Perhaps this silent construction affords Fies the greatest opportunity to depict the trauma experienced by his family in the wake of his mother's illness. According to Kristiann Versluys,

Trauma is not transmissible through words or images, except if the representation has a built-in reference to its own inadequacy, self-reflexively meditates on its own problematic status, and/or incorporates traumatic experience not so much thematically (on the surface) as stylistically (deep down in the tensions of style and
Nebulas and Superheroes: Image and Metaphor

"The idea that a picture can evoke an emotional or sensual response in the viewer is vital to the art of comics" – Scott McCloud, Understanding Comics (121)

A discussion of comic books of any kind, especially those related to bodily illness and pain, cannot exclude an examination of the fundamental element of comics – images. From the wildly colorful to the dark and subtle, the visual work of comics develops tone, mood, plot, character development and perhaps most importantly, theme. Comic authors establish themes in numerous ways. In the case of imagining the ill body, the work of visual metaphor sets the stage for the illness narrative. Examining how metaphor impacts all thought processes, Lakoff and Johnson write, "...Metaphor is pervasive in everyday life, not just in language, but in thought and action. Our ordinary conceptual system, in terms of which we both think and act, is fundamentally metaphorical in nature" (454). In the case of the ill person, the challenge lies in finding linguistic and imagistic models to make sense of her ruptured identity and world. Familiar signs and symbols of the past no longer describe
experience for the cancer patient. As a result, emotions and experiences that defy literal language require translation into metaphors and images. Patients construct their metaphors from a wealth of social cues, from family life and language within reach, but the conjured metaphors of illness may differ wildly from those conceived before in "normal" life (Kirmayer 340). The comic medium caters to this kind of self-representation through its reliance upon images – symbols and signs – that create metaphoric worlds. Playing with the notion of the "real," the comic engenders divergent counter-narratives about illness by describing the unspeakable aspects of cancer through metaphor.

Fies devotes much of the visual story of "Mom's Cancer" to depicting how cancer impacts the body. In this case, images especially help to portray the ill body because of pain's resistance to language. "...Physical pain – unlike any other state of consciousness – has no referential content. It is not of or for anything. It is precisely because it takes no object that it, more than any other phenomenon, resists objectification in language" (Scarry 5). Thus, by showing the ill body rather than only describing it, Fies begins to exert control over his mother's image by giving the body a voice visually on the page. In Chapter 27, "A Universe Inside Her Head," Fies uses the image of a nebula in the constellation Lyra to translate the physical world of his mother's shrinking brain tumor (Figure 4.5).
Figure 4.5: A Universe Inside Her Head

He juxtaposes the hazy bubble of gas with another panel that depicts Mom regaining her balance as she recovers from radiation treatment. He writes, "A light re-ignites in her eyes," but the reader cannot see Mom's face, only her partially-shadowed torso. Her walking stick, now no longer needed, rests in the foreground. Though Mom's actual body does not play a strong role in this frame – the viewer cannot see Mom's face in the way that Fies describes it -- the reader understands the inner workings of her body through the nebula metaphor. The two panels juxtaposed also express the relationship between the abstract (medical images, diagnosis) and very concrete (walking sticks and physical impairments) aspects of cancer.

The nebula, an intangible and far-away object of almost mythical proportions, closely aligns with Fies's understanding of his mother's brain tumor – remote, vast and seemingly all-powerful. In reality, the tumor accounts for no more than a few centimeters of Mom's head. According to George LeGrady, "We experience the world through the senses, and the act of seeing is one of giving meaning, taking stock of our environment to counter-balance chaos" (266). By giving the tumor a form that he can identify with and putting it into visual form, Fies makes the remoteness of cancer very near, touchable and visible, while still admitting complete lack of control in the face of something as complex as a constellation in the universe. In this manner, Fies claims ownership over his view of cancer by choosing an image from his own imagination, rather than from dominant medical discourse such as an x-ray or MRI.

In Chapter 5, "A Game of Luck and Skill," Fies uses the metaphor of a board game to describe Mom's treatment and the way doctors (and the medical system at-
large) view her body (Figure 4.6). Because of the incredible nature of chance in all things related to cancer, this game metaphor proves especially effective. Using the game "Operation," a popular culture reference, as his platform, Fies portrays his mother as a helpless piece in a board game called "Inoperable" with a body that doctors will pick apart; at any moment, Mom could receive a "game over."

**Figure 4.6: A Game of Luck and Skill**

The depiction represents the complexity and politically charged nature of Fies's narrative about the medical system and how doctors treat their patients. According to G. Thomas Couser, "…personal narratives – especially autobiographical ones – have been one way in which laypeople have responded to the dehumanizing tendencies of medical discourse…As we have begun to see, the impulse toward illness narrative often addresses precisely those factors that medical discourse – even at its most enlightened and humane – may be impotent to challenge" (Recovering bodies 34). The comic book, which appears neutral at first glance, acts as a powerful means of stimulating discussion about difficult and often taboo subject matter in a safe forum. In this case, Fies hyperbolizes the cancer patient experience as a colorful game in which win/lose equals life/death as doctors hold all the power over a patient's fate.

Drawing again upon a popular culture reference – in this case, one that links directly to the traditional theme of heroism in comic books – Fies satirizes his family's struggle to survive cancer in Chapter 16, "Rx Kryptonite" by imagining his family members as superheroes (Figure 4.7). Fies responds to something his wife tells him: "When people face an emergency, they just become more of what they already are. Like they get superpowers."
Figure 4.7: Rx Kryptonite

I used to wonder how perfectly nice families could disintegrate in a crisis. Now I know.

Everyone is doing everything they can, but some of it conflicts, and none of it is enough. The stakes are too high.

We're impatient, snappy. A two-hour drive to impressive hospital is a trial of tongue-biting stamina and seething tension.

Why don't you just mellow out?

Why? Because I took charge and you didn't?

Zat!

What am I? Invisible?

Took charge? Ha! I'm still the oldest.

took charge?

Which isn't worth spit now, is it?

I've got medical power of attorney! I've got the advance directive!

Hello? I've got to actually live with her!
Rather than depicting these superpowers as something positive, as the plot of most comic books would, Fies identifies the superpowers as evil weapons, a means to wreak
havoc upon other family members. He turns the superhero genre on its head: cancer's power is such that it can destroy the greatest beings, even those with more-than-human abilities. As each shoots a beam at the other, or deals a reeling blow, Fies uses the traditional superhero archetype to make his point about the viciousness of family conflict in times of crisis. According to Betty Davies, "a family which is able to relate with mutuality maintains its composition of membership but changes the form or content of relationships in response to a new situation.\(^5\) Cancer requires the family to revise its ways of relating and, therefore, mutuality is a crucial determinant of the threat to the family life course from cancer" (17). By grounding the scenario in a popular culture metaphor, Fies not only makes the experience accessible to his readers, but also describes the extremity, the other-worldliness of dealing with a family member's serious illness (hence his depiction of the cancer experience through nebula and superhero metaphors) while trying to cope with a shift in roles in the family unit. Rather than use their powers for good, the family collapses under the burden of Mom's cancer. Research shows that family members often try to hide their feelings and remain optimistic for the cancer patient instead of sharing their concerns (Downe-Wamboldt, Butler and Coulter 117). Fies's narrative breaks this silence by dramatizing the difficulty of being a supportive family member of an ill person.

\(^5\) "Mutuality" is the "flexible, adaptive pattern of relational continuity that incorporates change" (Wynne and Wynne 383).
Fies's use of larger-than-life imagery continues in Chapter 21, "P.E." where he portrays Mom as a tightrope walker hovering above a "witch's brew of tongue-tangling trademarks." (Figure 4.8)

Figure 4.8: P.E.
The trademarks (the drugs Procrit, Lovenox, Coumadin) keep Mom in a "spectacular trial-and-error balancing act." This comedic interpretation of the difficulty of managing side effects and treatment enables Fies to depict the frustration he and his mother experience in a powerful, visual way. The scene looks much like a story from a children's book, as Mom must perform her act while trying to avoid the pitfalls surrounding her (including an elephant that clings to her acrobat's pole). Not only does Fies portray the cancer treatment as fickle and flighty, but it also appears to attack Mom – plaguing her at every turn with new obstacles to avoid and laughing at her (as it does in the last panel) when she confronts a new side effect. By anthropomorphizing the invisible cancer treatment with the powers to trick and to deceive as much as it can help, Fies expresses the two-sided coin of cancer treatment in a visual, relatable way.
Image-based metaphor such as tightrope-walking in Fies's comic takes linguistic metaphor to the next level. Richard Moran describes the mechanics of metaphor as "It is almost as if the imagistic 'seeing' of metaphor comprehension really involved one's seeing things that way, that is, believing them to be that way, which would give us no way to distinguish between understanding a metaphorical assertion and believing it. A powerful trope indeed" (91). The visual metaphors in "Mom's Cancer" benefit from this power in which metaphorical and real blend together to tell the story of cancer as an experience larger than life itself.

While visual metaphors effectively portray the other-worldliness of cancer in many cases, Fies recognizes the difficulty of expressing severe pain and trauma through metaphor. As a result, in Chapter 25 "Whose Life Is It Anyway?" Fies allows the stark nature of pain and suffering to speak through very plain and haunting imagery, in the absence of metaphor (Figure 4.9).

Fies suspends Mom's body in air on a completely black background as she writhes in pain. The text surrounding her states, "Each round of chemo is a breath-taking punch to the gut[…] it's a grinding battle of endurance now…all the tougher because Mom knows she can walk away. Anytime she wants, she can go home to die." Mom's face grimaces, her knuckles clench, and the expression of pain seems especially striking in its plain white against a black background. The juxtaposition of word and image in this panel contribute to the force and impact of Fies's narrative. The reader must choose whether to look at the image (to act as witness to Mom's ill body) or read the text (to "clinically" assess the situation from the point of view of the narrator/author);
as is the case in all comics, the reader cannot complete these actions at the same time.

Ronald Schmitt writes of this narrative structure,

…signification and stable meaning is continually deferred as the eye, instead of scanning left to right in even, linear patterns, jumps between words and pictures, spiraling, zig-zagging and often interrupting the entire process to scan the information in a new way. Rather than two 'stable' texts (words and pictures) juxtaposed, the comic book is a form of self-inflicted 'double writing,' collapsing traditional strategies for reading word and picture texts (158-9).

By looking at or "reading" the image of Mom, the reader becomes witness to Mom's suffering, rendered helpless by her inability to treat or relieve the ill body. Fies further problematizes this relationship between reader and image through the addition of text that destabilizes the reading process. Like the illness experience, reading occurs in "zig-zagging," fragmented moments rather than linearly, causing the reader to digest the narrative perhaps more authentically than she would a traditional print narrative about illness.

**The Voice of the Comic Illness Narrative**

Through its blend of word and image and complex use of space and time, the comic book renders narratives that pose questions, interrogate meaning and expose taboo issues and themes that may otherwise remain silent in traditional narrative forms. Autobiographical comics certainly cannot tell every story, or claim "truth." In fact, the very promise of truth in autobiography conflicts with the nature of the comic book medium, according to Charles Hatfield: "Autobiography has become a distinct, indeed crucial, genre in today's comic books – despite the troublesome fact that comics, with their hybrid, visual-verbal nature, pose an immediate and obvious challenge to the idea
of "nonfiction" (112). Every narrative, regardless of its aspirations toward essential "truth," tells a version, a representation of that truth. Thus, I argue that the "hybrid, visual-verbal nature" Hatfield describes only strengthens the autobiographical narrative representation made in the comic book by using images, highly coded and socially constructed symbols, to tell its story.

Just as an ill person understands her experience through the lens of her social and cultural context, so too does the representation that stems from that experience make meaning through social and cultural objects. Images are, like all representations, deceptive. Writes W.J.T. Mitchell, "Instead of providing a transparent window on the world, images are now regarded as the sort of sign that presents a deceptive appearance of naturalness and transparence concealing an opaque, distorting, arbitrary mechanism of representation, a process of ideological mystification" (504). The comic book offers an alternative platform to the printed book or other traditional narrative format by harnessing the power of images and socially/culturally-ingrained metaphors. Rather than seeking to describe the illness experience "photographically," or as an exact likeness, the comic dramatizes and hyperbolizes that experience by imagining it through the colorfulfulness of the cartoon. In doing so, the comic voices untold stories about illness and trauma -- bringing the ill body to life, taking issue with the medical system and dramatizing strain upon the family unit. These stories provide readers with a new means of understanding the illness experience by exposing its complexity, conflict and fragmentation.
THE DIGITAL DIALOGIC FAMILY

Though certainly a noteworthy text in its own right, "Mom's Cancer" represents a particularly striking example of the family illness narrative because other members of the Fies family engaged in an online dialogue through blogging after the online publication of "Mom's Cancer." The numerous readings of "Mom's Cancer" the web comic extend when compared intertextually with these blogs, as the family begins a conversation about their experience and includes readers, both known and anonymous, in the dialogue. Mikhael Bakhtin wrote extensively on dialogism, or the notion of a polyphonic text in which main characters claim as much authority as does the narrator's own voice (Dentith 41). While Fies's role as narrator perhaps dominates "Mom's Cancer," the blog texts open up the possibility for a polyphonic text as Bakhtin describes it. Through blogging, members of the Fies Family ("Mom" and "Kid Sis") write back to the comic, to each other and to their readers, creating a fascinating, multi-layered narrative of unique voices. I argue that the Fies family uses the Internet medium to engage in an alternative dialogue about illness, one that recognizes the intersections of multiple voices and stories within a family.

More than just witnesses to the ill person's crisis and metamorphosis, family members often experience a rupture in their own lives as they negotiate a break in the structure of the most basic social unit – the family. Andrew Weigert and Ross Hastings call the family a "world', albeit a little one, in which selves emerge, act, and acquire a stable sense of identity and reality" (1172). Thus, in the face of a family member's illness, the whole family must work to repair the ensuing rupture and restore
order to this "world." In recent years, scholars such as Arthur Frank have advocated for people with serious illness to tell their stories, to heal their ill bodies through narrative. Yet because of the profound and often inexplicable nature of pain, writing on behalf of someone may offer the only opportunity to make the ill person's story heard. In her close examination of pain and trauma Elaine Scarry writes that "Because the person in pain is ordinarily so bereft of the resources of speech, it is not surprising that the language for pain should sometimes be brought into being by those who are not themselves in pain but who speak on behalf of those who are" (6). Thus, family members often step forward to represent the illness experience because of their close relationship to the ill person and because of the rupture they feel occurring in their own lives. The narrative written by a "well" family member may not only help to give voice to the ill body in question, but may also work to restore balance to the individual's "world" as a result of the family unit's trauma.

"Mom's Cancer" acts as an impetus for the family to begin writing in blog format. Mom admits to this in the first post on her blog on January 22, 2005:

Hi!
I'm the Mom from MomsCancer.com. My son developed the comic strip as we went along in my treatment process. I, on the other hand, never made a note. I'm not one to journal or even write dates on the calendar with any clarity. So this will be a wonderful free-form of old thoughts, events, ideas, experiences mixed in with today's adventures. Whew - I'm off and running for now. More when I catch my breathe.

Interestingly, Mom describes herself as "the Mom from MomsCancer.com." Though in reality she is the real person – the person that inspired "Mom's Cancer" in the first place – she uses the comic to identify herself. This identification creates an odd blend
of truth and fiction as Mom comes to write both as the character "Mom" and as herself. Her awareness of her public, both her blog-reading and comic-reading public, seems palpable.

In Mom's case, "Mom's Cancer" empowers her to have a voice when in the past she "never made a note" about her life or her experience with cancer. In Kid Sis's case, the pressure to act as the character "Kid Sis" and the real-life Kid Sis at the same time in her blog narrative causes conflict for her. When the comic becomes tremendously popular and the family learns that a publisher will publish it, Kid Sis writes in her blog:

…But then readers come to this blog, and suddenly I have an overabundance of personality and views that aren't my brother's or the book's.

What troubles me is, perhaps my life belongs on my own personal blog available just to friends, and the Kid Sis entity should either be taken apart or kept exclusively for occasional, innocuous cancer postings. Or hell, maybe I shouldn't be writing anything at all anywhere on the web.

Mom's Cancer readers who find out who I am aren't going to be able to project their needs on the character as a blank slate anymore, so how does that serve them? And how does it serve my family if my beliefs open us up to danger?

Again, "Mom's Cancer" influences how the real-life family members act and think. Kid Sis worries her own beliefs, unrepresented in the comic, will affect the comic and its success. Expressing her opinions by molding a two-dimensional character into a three-dimensional one sparks fear in her that she will betray the character and the book, or even worse, her family. Mom expresses hesitation too at the prospect of becoming noticed as a result of the blog and comic. On Brian's birthday she writes,
Yesterday my little Blog site made a not-so-quiet entrance into your world. geez...it was bad enough being a barely 20 year old Mom not knowing where to put the powder, or how much - now, at my ripe old age, I have to worry about comas, and run on sentences, and my public, and YOUR public, and how I can't spell for beans, and how - now - for the first time, everyone will know my dirty little secret about being a life-time smoker who couldn't quite quit in time.

Here, Brian's work pushes Mom's personal – and painful – story out into the world, and she accepts it, despite hesitation. In many ways the comic helps (and forces) Mom to come to terms with her life and her decisions, and the act of blogging represents her willingness to enter the conversation that "Mom's Cancer" begins. Whereas previously Mom might have felt ashamed about smoking or marginalized because of cancer, the blog creates a safe space for her. "Like forms of cultural resistance generally, the Internet gives a forum for those who are silenced or marginalized to express their views publicly in ways that would not otherwise be available" (Gillett 30). Though in part Mom blogs for personal and familial reasons, she also asserts herself to her readers and establishes a voice that might have remained unheard were it not for the platform provided by her son on the Internet.

The act of blogging also enables Mom and Kid Sis to actively contribute to their family narrative. As they negotiate how much they should act as themselves (rather than their "Mom's Cancer" characters) in their blogs, they begin to reappropriate their identities by writing back to the comic. On February 23, 2005 Kid Sis writes:

My POV is definitely different than Big Bro and Mom. And I tend to be brutally honest, often to my detriment. For instance, Terry
wrote me a wonderful email about how great it was for Mom to have a supportive family--and we are--but we're no angels.

It would be a disservice for everyone reading this and experiencing this to pretend that things are rosy all the time. Sometimes Mom wonders if it wouldn't be easier on us if she had died, and sometimes I'm so angry and tired I tell her to drop dead. That's life, and that's living, and that's living with and supporting somebody in a great deal of uncertainty and fear and pain.

In "Mom's Cancer" the comic, this clash among family members rarely appears, and certainly not as strongly as Kid Sis describes it. Her words acknowledge that "Big Bro" and Mom own their parts of the story, but that she owns another part that deserves representation. By describing the harsh reality of acting as a caretaker for one's parent, Kid Sis breathes a full picture of life into "Mom's Cancer" and makes herself, and the story, more human. The reader no longer reads "Mom's Cancer" as the only story, or the final word, but as an important thread in a complex weave of stories, emotions and experiences. Bakhtin identifies this dialogic narrative as one in which "the hero's attitude toward himself is inseparably bound up with his attitude toward another, and with the attitude of another toward him. His consciousness of self is constantly perceived against the background of the other's consciousness of him…" (Bakhtin qtd. in Dentith 161). In this case, Kid Sis (or the "hero") consistently identifies herself in opposition to "Big Bro" and "Mom." She crafts herself in relationship to these other voices; her identity, rather than fixed, evolves along with her own text and that of her family's as she represents her point of view. The Internet enables this significant meaning-making to occur fluidly and constantly. Not only can Kid Sis write her own
narrative for others to read, but she can also respond to the narratives her family creates simultaneously.

Mom, too, engages in a dialogue with the text "Mom's Cancer" in her blog. On January 28, 2005 she writes:

In Chapter 11, of mom's cancer, Son shows a sleeping me (cute, eh?). What he doesn't know about that morning is that before I fell asleep I had meditated for maybe ten or fifteen minutes. I had my "Chemo Control" system well in place and could trust it enough that I could nap.

Here, Mom provides a back-story to the drawing that even her own son "doesn't know," describing her meditation process during chemotherapy that she calls "Chemo Control" (Figure 4.10).

**Figure 4.10: Arrangement in Grey and Black**

![Arrangement in Grey and Black](http://www.momscancer.com)

The blog acts as a catalyst for another version, or a fuller version, of the story to come to light, while it also enables the family to talk about the illness experience in a new and honest way. "Without narrative, there simply is no way of emphasizing some events, marginalizing others, and at the same time relating all in a significant whole…part of our fascination with narrative is its flexibility. It can take indefinitely many forms, and so allows its authors considerable scope for their own inventiveness" (Novitz 147). Just as Brian picks and chooses the events he represents in "Mom's Cancer," so too does Mom invent her narrative based upon her perception of her experience. The intersection of these narratives creates a third, higher level of meaning through which the experience of illness for the family unit as a whole becomes clearer.

Over time, blogging becomes part of the family's coping mechanism, and the narrative becomes less of a reaction to what came before and more an active engagement with current life events. As a result, the blogs provide a means to connect with the world (readers) as the family experiences the pain of dealing with ongoing illness. After Mom goes in the hospital Kid Sis writes, "Mom has asked me to post something for her on her blog, so please check that out. She's having a reaaaal rough time right now, if you want to comment to her there. Hint hint." Kid Sis believes that comments from readers (both anonymous and known) will help keep Mom's spirits high. As a result, the blog texts engage multiple authors as readers begin to enter the family dialogue by leaving comments on Mom's blog. Real-life events motivated the creation of "Mom's Cancer" in the first place, and "Mom's Cancer" and its subsequent
blog texts inform and act upon real-life for the Fies family as the textual interactions become a significant aspect of Mom's treatment and coping process.

Due to health issues, Mom stops writing on her blog after July 4, 2005, and from that time up until her death in October 2005, Fies or Kid Sis fill in to give updates. Fies primarily takes over writing on Mom's blog as he provides general updates about her care and often posts dictations from Mom, while Kid Sis writes more specifically about Mom's health, the family's fears and her own role as a caretaker. Juxtaposing these two texts, a pattern emerges: Mom's blog (maintained by Brian), attempts to stay general and vague to respect Mom's privacy, while Kid Sis's blog exposes an intimate portrait of a family's daily tribulations with illness. On August 2nd Brian writes,

Mom made it very clear to me that she wants her privacy and, most important, her dignity. With that in mind, with all gratitude and appreciation for anyone reading this and thinking of her, I'm not going to post every detail of her travails. She's exhausted and her body chemistry is out of whack, partly due to the medications she's been taking. *She's pretty sick and anything could happen...* but her doctors seem to see a clear path to resolving her problems and, I hope, turning things around for her quickly.

Realistic optimism.

That same day Kid Sis posts on her blog:

As you know from my resistance to the passing of my cat Calliope, life transitions knot my stomach into little clenched baby fists, stabbing at my innards. Not so fun.

Mom is in the middle of one right now [a transition], spiritually deciding should she stay or should she go. As hard as Nurse Sis and I have fought to keep her on the planet, maybe she's done here. It's up to her, and I fully acknowledge the last two months
(at least) have not been the lifestyle she was sticking around to enjoy and participate in.

In these two posts, not only do Brian and Kid Sis express strikingly different viewpoints about Mom's health and her fate, but they also do so in two extremely different manners. Brian vows to respect Mom's privacy, refusing to "post every detail of her travails." He then goes on to write that while Mom is very sick, the doctors feel optimistic about her care and "anything could happen." Meanwhile, Kid Sis talks about life transitions in her post – acknowledging that if Mom feels ready to go, she and her sister Nurse Sis will let go and respect whatever Mom chooses. These variations in opinion do not mean, I argue, that Brian chooses life and Kid Sis chooses death for their mother. Rather, they reflect uneasiness about the ownership of the blogging space. According to Couser, "such representation poses ethical problems, especially when the conditions in question render the subjects unable to represent themselves or even to collaborate in an informed way with others who undertake to represent them…" ("Paradigms' Cost" 20). The posts each represent a different tack in approaching this ethical problem of speaking for someone who cannot. Brian's post reflects the responsibility he feels to give his mother her dignity and to respect the space of her blog as a place that she continues to define (whereas he created the text "Mom's Cancer" as his own space); on the other hand, Kid Sis uses the space of her own blog to share her very real feelings about her mother's nearness to death, and she honestly describes how, as a caretaker and daughter, she must respect her mother's battle over the past months.
This struggle to describe Mom's experience – while both remaining true to the family's wishes, Mom's wishes and the readers' rights to or desire for information – continues into the last month of Mom's life. On September 5 Kid Sis writes:

I keep getting in trouble for what I post about Mom's health, or getting other family members in trouble (which of you lovely readers sent hatemail to my brother? I wonder...)

Anyhoo, Mom's on yet another rollercoaster. Because it wouldn't be a holiday without an ER visit. If you want to keep up with her, please check her site for updates.

Kid Sis describes here a frustration about what to post and what not to post; she gets "in trouble" and gets family members in trouble for what she writes. Kid Sis doesn't specifically explain what she wrote that sparks these problems, but clearly tensions run high among the family about how to depict their mother's illness. Kid Sis concludes with a note that sounds sad, tired and sarcastic, pointing readers to her mother's site rather than providing the update herself. The next day, Brian does provide an update on Mom's blog:

Sigh. Mom is back in the hospital again, never really getting a chance to just rest and recover her strength. Understand that it's hard for me to keep everyone who cares about Mom updated while still respecting her privacy, being appropriately optimistic but honest, etc.

Again, Brian expresses the difficulty of writing honestly. Whereas "Mom's Cancer" acted as his platform to express his feelings about Mom's illness as truthfully as he could, Mom's blog becomes a site of conflict and confusion as he tries to remain in touch with Mom's readers while respecting her wishes to maintain a certain level of privacy. In this manner, the silence and frustration in Brian's post comes through as
much as the meaning of the actual words he writes. Mom's blog becomes a destabilized space – Mom still exists, but she cannot continuing writing in it; as her children try to fill the void represented by her textual absence, they naturally convey their uneasiness. This transition, in which the children move towards textually representing their mother in her blog, symbolizes their major life transition from children to caretakers. Weigert and Hastings describe this family process in which "the child begins powerless and relatively passive in relation to its parents but becomes powerful and relatively active…The child becomes a witness and marker of declining power and activity in those selves who originally invested him or her with the primary sense of identity" (1176). Brian and Kid Sis struggle with the ethical and emotional implications of taking over their mother's role, both as bloggers and as heads of the family unit. Through blogging, they are forced to reevaluate their identities and responsibilities while dealing with the daily realities of caring for their ill mother.

Mom's last post actually written by her occurs on July 4, 2005. From the hospital she writes in a post called, "From Mom,"

Dear Friends old & new, known and not yet introduced:

Thank you. I feel all of your lifting up and energy coming my way. It's working!

It has been really rough but today (4th of July) it is 4 am and I awake feeling much better (I'm not wanting to go back to sleep!).

Today I get moved to a rehab facility. Counting on it to be tough. I want to literally WALK out of there. They will have 3 hours a day of training - I HOPE it is like Boot Camp. Please help me hold that thought.
I feel honored to be called "Mom."

Noteworthy on a number of levels, Mom's final post expresses her optimism, hope and above all, her kinship to her readers (both those of the blog and of "Mom's Cancer"). By writing, "I feel honored to be called 'Mom,'" she not only acknowledges her dedication to her children, but also to the character "Mom" and what it has come to symbolize in her journey. The character "Mom" has garnered friends "old and new" and has enabled her to share her story in a way she might not have otherwise. It inspired her to discover her own voice through blogging, and to receive strength from other people who have endured similar experiences. Mom's narrative also reinforces her identity and purpose in the world: "The individual's narrative has to be reconstructed both in order to understand the illness in terms of past social experience and to reaffirm the impression that life has a course and the self has a purpose or telos" (Williams 189). Mom's purpose, ultimately, was to be "Mom" in her many forms, envisioned through the eyes of her son, daughter, readers and herself. Not only does the Internet provide a forum for this exploration and representation, but it allows the family to find its voice through intersecting texts.

THE INTERNET AND THE ILLNESS COUNTER-NARRATIVE

Both "Mom's Cancer" and the family's blog narratives exist because of the Internet. By creating a safe, open space for communication, representation and dialogue, the Internet fosters a culture in which divergent opinions, marginalized stories and counter-narratives can exist. According to Sherry Turkle, "At each point in
our lives, we seek to project ourselves into the world. The child will eagerly pick up crayons and modeling clay. We paint, we keep journals, we start companies, we build things that express the diversity of our personal and intellectual sensibilities. Yet the computer offers us new opportunities as a medium that embodies our ideas and express our diversity” (31). In the case of representing oneself in a time of trauma and/or pain, when identity becomes most unstable and fragile, the Internet provides a canvas for self-expression and representation. The blogger can instantly find a group of readers to reinforce, challenge or develop her notion of self, while the artist can construct a comic narrative that pushes the boundaries of the traditional illness narrative without limiting himself to physical space on a piece of paper. Similarly, readers can find and access these narratives when they most need them. They can join communities, identify with characters and learn about new aspects of their own experience through the sharing of Internet space. Together, this collaboration between author and reader within the cancer community can work to produce new narratives about illness -- stories that create and shape meaning out of chaos and pain.

Juxtaposing "Mom's Cancer" the comic with the family's blogs produces fascinating results. In the comic, the reader witnesses a portrait of a family through the eyes of a son, a world rich with images and metaphor. In this world Fies likens the cancer experience to a high-stakes game, an outer space trip, a clash among superheroes. By contrast, the blogging world emphasizes the stark, daily realities of illness – conflicts among caretakers and family members, up-to-the-minute frustrations about hospital visits and pain from watching a parent slip away. Viewed
independently, the comic and blogs each represent a slice of experience, a window into the family's struggle to make meaning out of cancer. Viewed together, they begin to speak back to each other, to create a larger, ongoing narrative about the complicated nature of illness. The Internet facilitates this multi-faceted, polyphonic narrative in which family members each experience the pain of cancer through their own unique lens. The cancer experience is all at once larger than life, described through the most grandiose and hyperbolic of images, while simultaneously dark, simple and sad and filled with painful realities.
CHAPTER 5:
ARTIST'S STATEMENT –
DAD'S CANCER: A MULTIMEDIA ILLNESS NARRATIVE EXPERIMENT

"The truth is that when it comes to the most meaningful of our memories – those that constitute the nodal points of our autobiographies -- we tend to make up our own photographs, which we end up coloring by hand, as it were, adding a measure of fantasy here, a special emphasis there, and sometimes even rearticulating them around a symbolic knot." -- Evelyne Ender, Architexts of memory: literature, science, and technology (237)

After losing my father to cancer only eight months ago, I looked to the Internet to find solace and to gain insight from others' stories. Unexpectedly, I stumbled onto "Mom's Cancer." To my surprise, not only did the family's story closely mirror my own family's experience, but I laughed and smiled at the creative, imaginative and heartfelt story rendered in comic format. After I had spent months of reading articles online that quoted the same ominous prognoses, "Mom's Cancer" offered a fresh perspective and enabled me to understand my father's experience in a new way. I began seeking out other stories like this, and again, with much surprise, discovered that many individuals had manipulated technology to tell unique, original stories about illness. Following many months of research on the project, and after having gained some distance from my own experience with my father's illness, I, like many others, felt the need to share my story. I could not imagine a better way to do so than to engage some of the very same tools I studied – those tools that enabled patients and their families to find their voices in the midst of pain and chaos. My digital story project attempts to take my research one step further, to examine how thinking
imaginatively with the use of technology can personally impact an individual
struggling to make sense of an illness experience.

"Dad's Cancer: A Multimedia Illness Narrative Experiment" specifically
explores how one expresses memories – and remembers someone – through the telling
of an illness narrative. The need to tell one's story occurs for many reasons, including,
I contend, the desire to preserve one's memory, to create a living record that someone
existed and to archive the experience. Not only does this cathartically impact the
person who survives, but it also acts as a means of resistance. To forget enables
passivity, victimization, while to remember means to survive, to overcome. Emphasis
on this kind of remembering perhaps began in the years following the Holocaust, and
outspoken survivors have continued to reinforce the importance of telling one's story as
a form of resistance and as a measure against a similar atrocity occurring again.
Though in the case of cancer sharing one's story may have less political implications,
the act of empowering a marginalized patient (or anyone suffering from trauma or
pain) to speak, provides a new way of understanding one's role in the face of trauma.
Weaving together scholarly work on memory and technology with my own story, my
project emphasizes the need for voice, for unique, individual stories that may take a
multitude of forms.

The digital project outlines the basic premise that remembering enables
resistance, and that speaking, writing or in any way communicating one's memories
take resistance one step further by allowing the marginalized or suppressed voice to
speak. Because illness often creates a silencing effect upon those who suffer from it,
many stories go untold and many individuals become demoralized. As a result, family members and those close to the ill often take up their stories, recognizing the need for telling (Couer, "Paradigms' Cost" 20). Family members are particularly apt to tell their ill family member's story because each family builds an "archive" of memories, developed over years. According to Andrew Weigert and Ross Hastings, the family archive informs and preserves individual identity within the family: "The family's archival function is a major reason why family identities and relationships are central for an individual's biography...How else can an individual sustain a uniquely personal living memory of who he or she was and is?" (1175). This concept directly allies with the purpose of my project – to discover how my own memories "sustain a uniquely personal living memory" in the absence of my father – to shape my own identity through the telling of his story.

Figure 5.1: Page One of Comic
After giving much thought to what form or genre my story would take, I decided upon the cartoon or comic as a basis for exploration. I did so because in my research I had uncovered a number of people using the comic in innovative, challenging and unique ways to tell their cancer stories. Having previously attempted to translate my story solely into prose, I quickly discovered that so much of the illness experience lies in the realm of the visual, and that much of the force behind my story existed in showing, as much as telling, my last months with my father. By blending word and image, the comic requires significant effort from its readers, a "silent dance of the seen and unseen," as meaning occurs on three levels – between word and image in each frame, between panels (in the gutters) and as a cohesive narrative whole (McCloud 92). Because I then translated my project into movie format, I added elements of sound and movement to the narrative, significantly altering its structure. Thus, though my project cannot be analyzed as a traditional comic, it mimics and adapts features unique to the comic medium to express the larger-than-life or other-worldly qualities of illness while dramatizing the interplay between text and image.

The animated drawings of each panel act as a key feature of the digital project. I chose to essentially reenact the drawing of the comic in order to demonstrate the subjectivity of memory and self-expression (just as I draw the story one way I could just as easily draw it another way), and also to make myself as author a constant and identifiable force in the text. This technique emphasizes that all stories have owners, creators, and that these creators have unique vantage points from which they craft their stories. I animated the drawings also in response to a chapter by Evelyne Ender, "The
Colors of the Past: A Postscript" in her book Architexts of memory: literature, science and technology (2005). Ender wrestles with one of the fundamental questions of autobiography - how do we reconcile the fact that autobiography simultaneously represents both truth and fiction? She recounts a story of a soldier who writes his autobiography and mis-remembers a red beret he recalls seeing while in combat. The red beret becomes a symbol for a life threatening experience for the solider and thus a focal point of his narrative; only later does he discover that the red beret never actually existed. Ender uses this vignette to explore the notion that everyone constructs memory, interweaving moments of lived experience with sensations, emotions and imagination – no "real" memory of an event exists. In this imagining of memory – rather than a mechanical or robotic spitting back of facts -- lies humanity, according to Ender. I embrace this perspective in order to share my story; just as I told one account, one slice of Dad's illness experience, so too could I have colored numerous other stories with equal force and weight.
Not only does the digital project examine the creation of *personal* stories through memory and technology, but it also explores the implications for memory and technology on a large-scale cultural and social level. Drawing upon two authors who have closely explored this issue, Marita Sturken and Alison Landsberg, I identify how technology can enable cultural memory to exist and persist. In the case of illness and the body (specifically AIDS and HIV), writes Sturken, the human body is a "vehicle for remembrance," a "social text" that speaks of "suffering, anger, resilience, protest" (220). In the midst of any illness, especially one such as cancer that takes a significant and often permanent toll upon the body, the body archives its suffering through
wounds, scars and permanent physical transformation. To enable the body's remembrance to occur as a movement, works of art – such as the AIDS quilt – bring together grieving bodies to collectively share the weight of memory and of loss. As technology, especially interactive technology, becomes more sophisticated, new ways of sharing loss and translating memory will surely become available to those with illness and those close to them. Already, writes Landsberg, technology forges a unique kind of memory transference among diverse groups. Examining historical events and acts with far-reaching impact and trauma such as the Holocaust and slavery, Landsberg writes that "if the mass media and mass cultural sites and events can become transferential arenas in which we learn to wear the memories of such traumas so that they become imaginable, thinkable, and speakable to us, then these mass cultural technologies of memory deserve our serious consideration" (139). To witness the memories of others is one thing – to actually embody the memories of someone else is quite another. To imagine technologies that could help a doctor to incorporate the memory of his patient's ill body into his own memory, a "prosthetic memory," termed by Landsberg, would certainly change medicine irreparably. Technology not only carries the power to communicate, but to enact widespread social change.

In the face of any kind of trauma – personal, social or cultural, the search for meaning takes many paths. To voice one's memories and experiences to a community of any kind means to not only share one's vulnerability with others, but to gain strength through telling. Though cancer and many other kinds of trauma can take the people we love most in the world, our voices remain. To be a witness is one's duty (Frank 17).
As witnesses of illness, as the wounded from our losses, we must continue to tell stories, to remember. This project begins to make my own experience visual and relatable, contributing not only to my personal archive of memories, but to the larger collective of voices that explore what it means to have cancer and to make meaning in the face of loss.

Figure 5.3: Page Six of Comic
CHAPTER 6: CONCLUSION

The stories we tell, from those that express the littlest moments to the largest, life-changing events, shape us in profound and inexplicable ways. Especially in times of trauma and pain, the ability to speak, to voice one's experience in any way, liberates and empowers. Arthur Frank writes that wounded storytellers, at their best, not only gain the power to tell, but to heal (Wounded Storyteller, 182). The alternative narratives described throughout this project – those stories that actively imagine, challenge and redefine what cancer means – begin the process of healing for their authors and their readers. To envision cancer as something silly, wild, colorful or surprising means to resist the dominant social meanings of cancer as insidious, lethal, violent and painful. The Internet brings together these resistant voices, enabling them not only to cope better, but to rewrite the cancer story. As the tools and culture of the Internet progress, so too will the cancer community come to tell new stories, alternative stories about illness.

This project has attempted to explore a limited number of online narratives that challenge the dominant meanings of cancer through entertainment. The possibility for future research in this area is great, especially in the case of examining how readers interact with these narratives. Readers make significant contributions, especially online when interactive communication becomes possible. By talking with authors online, readers can contribute to and even reappropriate digital narratives. Additionally, this project has not examined synchronous communication online, and
subsequent research could explore how chat rooms and "live" communication impact cancer narratives. Additionally, though illness narratives abound, little research exists on what happens when authors translate their stories on the Internet. Blogging, hypertext and multimedia narratives all offer significant promise for communicating the illness experience, and certainly researchers will find a virtually untapped world to explore in these areas.

By investigating the creative works that emerge when technology and illness narratives collide, this project demarcates intersections between numerous fields including sociology, psychology, medical anthropology and culture/media studies. Rather than viewing online narratives about cancer as single instances of creativity or solely as coping mechanisms, I posit that they represent a larger movement towards thinking about disease in all its complexity. To laugh at one's trials with cancer – to smile in the face of trauma – means to resist victimization and to begin claiming ownership over one's experience. The Internet medium offers the opportunity to take this kind of resistance even further, as individuals with illness come together to challenge and inspire each other, to engage in a dialogue about their experience. As readers and authors interact with these texts, they begin to reimagine the disease not as a pre-ordained death sentence struck down upon them, but rather as an opportunity for significant meaning-making through creative self-expression.
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i Due to the publication of "Mom's Cancer" by Random House in 2006, the comic is no longer available online. Brian Fies permitted me to access a private URL in order to view the comic as it originally appeared online; out of respect to him and the publisher, I am keeping private record of the URLs used in this project but will not publish them publicly.