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Abstract
Survivorship suggests a temporal relation. It speaks to the endurance of past trauma and looks forward to a future that it wills into being through the overcoming of adversity. This article traces the warped temporalities of cancer survivorship, exploring its queer dimensions by combining theoretical discussions with readings of two lesbian interventions that address normative visions and narrations of healthy/diseased bodies. Cancer survivorship in each case becomes a poetic narration of desire and disease through the queering of temporality. The authors argue that the extent to which cancer's time warp here belongs to queer temporality depends on whether the queerness refers only to the odd, the uncanny, the indeterminate and the undecidable. Or if, instead, cancer's time warp is queer in the sense that sexuality is already present in cancer's disturbance to temporality. In so far as queer carries with it the traces of sexualities deemed undesirable and perverse, then such connections move beyond an analogous and into an ontological register.

Key words bioethics and illness narratives, cancer health disparities, discourse analysis and cancer knowledge, feminist biopolitics, genealogical-phenomenological analysis, sexuality and cancer health, Barbara Hammer, Peggy Shaw

Queering the Temporality of Cancer Survivorship

JACKIE STACEY & MARY BRYSON

> Critical illness not only presents you with issues of finitude, but more importantly, it threatens the very foundation of time structuring by removing you from life's comforting rhythms. It becomes a struggle not to *fall out of time*. (emphasis in original)[1]
>
> A cancer diagnosis changes you in this way: you don't want to be taken for dead. You don't want other people to look at you and read death into you or onto you.[2]
>
> This is a story about time. About coming from the darkness to the light. I always thought time started when I was born and ended when I died. Didn't you? But it all started a long time ago in black and white. And now it's a fact of life. There's no logic here. No beginning, middle or end.
>
> It's a journey through the shadows of a city. A map. The wrinkles on my face are where the map gets folded over and over.[3]

Introduction

Survivorship suggests first and foremost a temporal relation. It speaks back to the endurance of a past trauma and looks forward to a future that it wills into being through the overcoming of adversity. Cancer survivorship is a statement in the present perfect (of having survived) that speaks a desire for the future that it knows is uncertain (when does remission become survival?). To survive is, by way of its etymology, to live above, beyond or beside something; it refers to a 'living longer than' that revises previous expectations of time. The temporality of cancer survivorship is always provisional and contingent, requiring adaptation and improvisation (see Bryson[4]; Bryson & Stacey[5]; Berlant[6]). Time becomes newly relational, undoing the neat sequential flow of past, present and future.

One way to think about cancer survivorship is through the performative scrambling or warping of temporalities that accompany diagnosis, treatment and prognosis. *Contra* the conventions governing modern calendar and clock time

(and the linear teleologies of normative life narratives that flow from time's forward march) cancer introduces a more haphazard mix, deflecting us from any sense of life's proper path. In losing the comfort of time's reassuring illusions, we are confronted with the fragility of a life robbed of these stabilising fictions; we struggle not to feel as if we are 'falling out of time,' to repeat Gunhild Hagestad's phrase with which we began this article.[1 p205] To have the past undone and the future made unpredictable brings with it the unbearable sense of the presence of the present. As Lochlann Jain has put it: 'The biomedical prognosis, as one of these technologies of presencing, stands out in this dispersed set of cancer culture's materializing practices'.[7 p78] The 'living-longer-than' of survivorship demonstrates this warping of time perfectly: in the first instance, the cancer diagnosis presents the shock of 'living-shorter-than' had previously been expected; the temporality of survivorship then replaces the 'shorter-than' with the 'longer-than,' but the one remains embedded within the other. The 'longer-than' following a cancer diagnosis is haunted by 'the living-shorter' than the life imagined before it. For Jain, the term 'cancer survivor' references a 'simultaneous sense of life and death'.[7 p77] The representational space that makes no sense within conventional temporal fields is what Jain refers to as 'living in prognosis',[7 p78] a living in what she calls 'the folds of various representations of time'.[7 p80] We might refer to this as cancer's time warp.

This article traces the warped temporalities of cancer survivorship, exploring its queer dimensions by combining theoretical discussions with readings of two lesbian interventions that speak back to normative visions and narrations of healthy and diseased bodies: Barbara Hammer's 2008 experimental film, *A Horse Is Not A Metaphor* (hereafter *Horse*), and Peggy Shaw's 2008 collaborative performance monologue with Clod Ensemble, *MUST the inside story* (hereafter *MUST*). The former combines documentary and poetic styles to produce a personalized cinematic narration of surviving ovarian cancer; the latter stages a biographical anatomy lesson for the audience through a series of monologues performance accompanied by live music. Each explores survivorship through the intensity of endurance and desire. But if *Horse* moves us between the spaces of anguished torment and serene beauty through the filmic language of bodily presence, *MUST* holds us in the tension between the particular physicality of the body on the stage and a sense of the strata of its accreted histories whose connections to the vitality of the physical world are gradually built up through stories of its illnesses, injuries, loves and losses. In very different ways, both pieces undo any conventional sense of time's linear, causal dynamics, offering instead the perceptual disturbances that mark a body returned to its present through the physical and emotional demands of life-threatening illness. To cite the epigraphs with which we began, the rest of this article traces the coalescence of the unfamiliar contours of the temporality of illness ('falling out of time'), the physical presence of mortality (as others 'read death into you or onto you') and the occluded traces of past histories (as we 'journey through the shadows of a city').

Cancer's time warp

Anthony Vidler has argued that in the warped spaces of modernity, the subject is caught in 'spatial systems beyond its control […] attempting to make representational and architectural sense of its predicament'.[8 p1] Taking our cue from Vidler, we begin to conceptualise the warped temporalities of cancer survivorship by thinking about how the subject struggles to make sense of a body beyond its control, or, as Jain[7] puts it, what it means 'to live in prognosis'. If the 'spatial system' in question here is the body that now houses malignancy, then cancer warps time in so far as it compresses, as well as extends, our temporal orientations: the future rushes towards us as the present of 'treatment time' seems interminable. Cancer generates an uncanny sense of our bodies that slips between its familiar contours and its newly strange sensations and appearance. Following Vidler, Strathausen[9] suggests that we can only understand warped space through Freud's notion of the uncanny, which captures 'modernity's oscillation between exposure and repression, between location and displacement'.[p15] The feeling of the uncanny, as Donald[10] explains, originates in the 'disquieting slippage' between 'a place where we should feel at home,' the familiar, and 'the sense that it is at some level definitively unhomely' or 'unheimlich'.[p81] This focus on the oscillation between something familiar and something strangely disturbing, and the finding of the latter within the former, prompts us to think about how cancer warps the temporality of the body as we try to hold together that sense of unfamiliar familiarity post-diagnosis, throughout treatment, and into prognosis. Whilst any illness warps time to some extent, cancer does so in particular ways through the combination of its initial hidden presence, its circuitous routes of presentation, its secret mobilities and its uncertain return: healthy bodies secretly housing a deadly disease; the treatment may feel worse than the illness; the sense of health in the future is not to be trusted. In these ways, cancer undermines our sense of time's sequential flow, of the causative agency of prediction and outcome, of genealogical histories of kinship and relatedness, and of

the narrational flows of personal biography. In short, cancer warps our temporal perceptions of our own bodies, which, however illusory, have anchored the modern subject in an anxious desire for certainty and predictability.

As we slip between the spaces of past, present and future, which no longer flow in the direction of our desires or obey the causal sequences of our self-narrations, we may feel that cancer has confused the boundaries between feeling healthy and feeling unwell, between looking well and being ill, and between reading and misreading the signs of our bodies. Jain suggests that 'prognosis affects every dimension of time, not just the future; the past becomes equally mysterious and unknowable'.[7 p83] We should, she argues, replace *the survivor* as the figure of hope or cure and often as the basis for an 'identity formation around cancer' with an *elegiac politics* that makes room for loss, grief, 'contradiction, confusion and betrayal' in a culture that is 'affronted by mortality'.[7 p90][i] To live in prognosis would mean facing cancer's time warp and refusing the normative reassurances of claiming the identity of survivorship.

The C word and the L word revisited

Jain's eloquent critique of the identity of survivorship introduces a number of problems with conventional conceptualization of time which have been at the heart of recent debates about how sexual and temporal norms are mutually constitutive. Our discussion of how recent lesbian work might speak back to the temporal heteronormativities of cancer survivorship revisits the mutual implication of sexuality and illness discussed in Stacey's much earlier cultural study of cancer, *Teratologies*,[11 p65-96] and in Audre Lorde's[12] *The Cancer Journals* before it. Exploring the continuing traces of stigmatisation that brought the C word and the L word into a shared critical frame in Stacey's previous account, we track the double valence of normative discourses upon which it rests. In the last decade, lesbian writing on the subject of cancer, such as Catherine Lord's[13] *The Summer of her Baldness: A Cancer Improvisation* and Mary Cappello's[2] *Called Back: My Reply to Cancer, My Return to Life*, have explored cancer cultures' normativities.[ii] Cappello, for example, narrates an account of being given a Styrofoam cup 'into which was lodged a tiny […] figurine, topped with a rosebud […] from which hung the message in bold black print […] "This Bottle of Hope was made for YOU"".[2 p23] She responds with a mixture of nausea at the 'pinkification', fury at the capitalized second-person address, and fascinated bemusement at the whole concept of someone hand-making this for a person they do not know. Here the imperative to assign hope to futurity is condensed into an infantalising femininity which turns the breast (and its potential loss) into a metonymic sign: the threat of gender disturbance that breast cancer generates is disavowed through an excessive over-presence of feminine clichés.

The cultures of cancer survivorship are saturated in the shaming imperatives of heteronormative discourses, as Jain[14] demonstrates in her article 'Cancer Butch' which describes how the infantalising pink kitsch of breast cancer culture (see Ehrenreich[15]) provides a repeated redoubling of femininity that 'fissures through the entire biomedical complex of cancer treatments'.[15 p504] As Sedgwick[16] writes, spending time as a totally bald woman following chemotherapy is a lesson in the social construction of gender that feels a bit like an 'adventure in applied decontruction'.[p11][iii] When diagnosed with breast cancer, it was the cancer not the breast that offered what Jain[14 p504] calls the 'defining trauma' of gender designation; Sedgwick's first thought was: 'Shit, now I guess I really must be a woman'.[17 p202-3] The trauma of diagnosis here concerns gender and sexual normativites, as well as fears about facing one's mortality. Jain[14] draws on Sedgwick[16,17] to argue that 'at least one aspect of the shame of breast cancer for those who inhabit nonnormative genders lies in the seeming destiny of biological gender'.[14 p505] Cancer survivorship thus becomes a question of not only surviving the illness and its treatments but also of surviving the sudden intensification of normalizing requirements of its anxious cultures.

Recent debates about the heteronormativity of temporality in queer theory have suggested that 'queer time' might be contrasted with 'straight time', which is designated problematically normative: 'evolutive, teleological, apocalyptic, paranoid [because anticipatory]'.[18 p231-2][iv] Put simply, straight time is seen to regulate sexual orderings through legitimizing particular social processes which organize how we live and imagine everyday life. Matthew Helmers[19] sums up these debates succinctly as follows:

> Contemporary feminist and queer theorists tend to critique temporal constructions through demonstrating ways of experiencing time that distort regular past-present-future constructions. For example, Elizabeth Freeman slows down normative time through her concept of 'temporal drag'; Heather Love feels the affective pull of history and thus orients her time towards a backwardness; Judith Halberstam presents a compressed time that is, according to her, oppositional to the domestic; Lee Edelman suggests a Lacanian temporality no longer grounded in an investment in a future guaranteed through reproduction and the Child; and José Muñoz emphasizes the future as a unique space of queer

possibility'[p4, unpublished]

Life-threatening illnesses, such as cancer, inevitably interfere more generally with conventional clock time and with normative notions of a progressional life-course in ways that might be read through Martin Heidegger's phenomenology of disjunctive temporalities.[20] But for those whose lives repeatedly placed them on the edge of a sociality organized through heteronormative temporalities there is a further queerness to cancer's time warp. Already out of kilter with time's reassuring deceptions, cancer makes visible (and visceral) for some the structural parameters of time's exclusionary illusions. If cancer makes some people feel as though they are 'falling out of time'[1] – out of the usual rhythms and routines of everyday life – then, for those whose queer lives have already been marked out by some sense of being out of step with the conventional organization of time (what Helmers[19] calls that 'para' or 'beside' of particular queer temporalities), cancer's disturbance to the time of the body may retrace the previous allusiveness of feeling in step with time. As Lee Edelman[21] puts it, writing of queer temporalities, 'we are never at one with our queerness; neither its time nor its subject is ours'. What he refers to as 'the queerness of time's refusal to submit to a temporal logic'[p188] demonstrates how theories of queer temporality share a critical stance with longer philosophical critiques of modern time (Heidegger, Bergson, Lacan, Derrida).

To speak of cancer's queer time warp is both to harness the temporal pull of queer (sub)cultures,[22] the constitutive outside that is also an alongside (or a beside), and to acknowledge that such queerness (re)claims its alterity only to reveal the fictionality of the cohesion and linearity of the normative inside of modern time. Thus, if we should, as Annamarie Jagose, has argued, be wary of reifying queer temporality, by employing that adjectival 'queer' to throw 'a proprietary loop around properties or characteristics that have long been theorized as at the heart of "time" or, for that matter, "history"',[23 p186] then we might be equally intent on exposing the absence of concern with the structuring dynamic of the 'heterosexual/homosexual distinction' in those critiques of the temporality of modernity.[16 p157] The deeply unstable character of modernity's foundational claims about temporal flow is revealed by the uncanny disturbances of the queerness of time and our embodiment of it.

Not a metaphor

In Sontag's books *Illness as Metaphor*[24] and *AIDS and Its Metaphors*[25], she makes clear how stigmatized illnesses (like cancer and HIV and AIDS, and TB before them) are vulnerable to heightened metaphorical designation. She writes:

> […] it is hardly possible to take up one's residence in the kingdom of the ill unprejudiced by the lurid metaphors with which it has been landscaped.[24]
>
> […] some of the onus on cancer has been lifted by the emergence of a disease whose charge of stigmatization, whose capacity to create spoiled identities, is far greater.[25 p101]

What Sontag rightly saw as the power of metaphor in the blame cultures surrounding stigmatized illnesses has had particular resonance for thinking about how cancer affects those with already stigmatized sexualities. As Sontag[24] herself discussed in relation to HIV and AIDS, fear of the disease is articulated through a distancing condemnation of it, sometimes more sometimes less explicit, as self-generated and morally reprehensible. What Judith Butler[26] once referred to as the 'dreaded identification' with 'uninhabitable categories,' those 'abject zones of sociality' which 'threaten the cohesion and integrity of the subject'[p243] captures precisely how 'the charge of stigmatization' with its 'capacity to create spoiled identities' (as Sontag[24,25] puts it above; see also Goffman[27]) brings the shame of non-normative sexualities into the shared frame of the heightened affect generated by the presence of a disease such as cancer.

But, as Cappello's[2] memoir shows, metaphorisation is impossible to resist since the intensity of the cancer diagnosis makes the person read everything as a sign of what is to come:

> Notice, notice, notice a feeling of being bludgeoned, not by the news but by his affect. [p14]
>
> To read or not to read. That is the question.[p14]
>
> In the week of waiting for the news and still hereafter– after "getting" it – my readerly apparatus goes a little crazy. The world suddenly seems full of messages for me. Every sign a harbinger.[p16]

As Cappello[2] suggests, a cancer diagnosis transforms everyday encounters into symbols of the future, producing an investment in reading the signs of one's destiny at the very moment one has been robbed of agency. Cancer's time warp here is reimagined as futurity's desire to reveal itself to us in signs.

The title of Barbara Hammer's 2008 film (*A Horse is Not a Metaphor*)[v] speaks directly to Sontag's[24,25] refusal of the metaphorical that gives force to the stigmatisation of both sexuality and illness. An experimental film about this lesbian filmmaker's diagnosis of and treatment for stage three ovarian cancer, *Horse* combines poetic and documentary styles with

music by experimental vocal artist Meredith Monk. The film's title references Sontag but its diegesis moves the problem of metaphor into the materiality of embodiment to which we are returned by both illness and sexuality: a horse is not a metaphor in that it does not represent something other than itself; it is not a metaphor in that it does not stand in for the expression of something already known about the human; and it is not a metaphor in that it does not follow the logic of substitution. The horse in question here draws us instead into a sense of the materiality of being alive. Just as Sontag urged us to undercut the damaging power of metaphorical thinking about illness, which blamed particular personality types or sexual subcultures for the onset of disease, so *Horse* reconfigures the dynamic vitalities of human and horse in ways that echo Donna Haraway's[28] notion of 'companion species' – those entanglements which are 'knotted from human beings, animals and other organisms, landscapes and technologies'.[back cover] Like Sontag[24,25], whose own writing on illness is of course full of metaphors, Hammer's filmmaking both deploys and deconstructs symbolic connections and poetic associations between the diseased body and the desiring body, and between the terror of diagnosis and the will to survive. Her title, perhaps like Sontag's[24,25] original intervention, speaks a refusal that is also an enactment of the impossibility of stripping illness of its symbolic force: disavowal is always also an instantiation. *Horse* creates the imaginative space that holds us in the tension of this paradox: cancer and its treatments may reduce us to the physicality of the present that generates an urgent tendency towards compulsive over-reading. Using the materiality of film (as in much of her previous work, see Dyer[29]) to push towards a spectatorship constituted through an intensified sense of presence and a longing for signs of survival, Hammer immerses her audience in the dilemmas of which Sontag[24,25] wrote so eloquently.

Combining a relatively conventional narrative structure that moves from diagnosis and the first of several rounds of chemotherapy through to an extended eighteen-month remission with a more characteristic experimental aesthetic of repetition, slow motion, superimposition and extreme close-up, the film both offers a story of hope based on sequential direction and undoes any certainty of predictive futurity.[vi] The documentary sections of the film set in the hospital during chemotherapy treatments are filmed by Hammer and her partner of twenty plus years, Florrie. Their relationship functions as both foreground and background in the film's structure and project. The conventional singular point of view of the invisible documentary filmmaker is transformed into a lesbian collaboration, mediated through the spectator who registers the intimate distance of their shared fear in superimposed close-ups of their faces (Figure 1), or of Hammer's ghostly figure passing across Florrie's direct look to camera (Figure 2).

The more experimental shot sequences using Hammer's (sometimes naked) body placed in natural landscapes (woods, lakes, mountains), echoes its trademark use in some of her early work which explored the pleasures and problems of representing lesbian sexuality on the screen (see Dyer[29]); it resurfaces here both to trace the contours of a survivorship haunted by loss, death and bereavement and to celebrate the physical joys of vitality and of desire in those spaces of remission (see Figure 3). These sequences are combined with documentary footage of Hammer riding horses in the Catskill Mountains of Woodstock, New York, in New Mexico at Georgia O'Keefe's Ghost Ranch and in the Big Horn Mountains at Red Reflet Ranch in Wyoming.[vii] Reminiscent of her earlier search in previous work for another vision of Nature, one which might yield a queerer dynamic of body, desire and natural landscape, these scenes of Hammer's sheer pleasure in riding and filming horses in these magnificent settings both deliver the hope of a personal futurity and remind us of the chemotherapy scenes (discussed below) where the figure of the horse inspired the requisite mental endurance for the procedures and treatment.

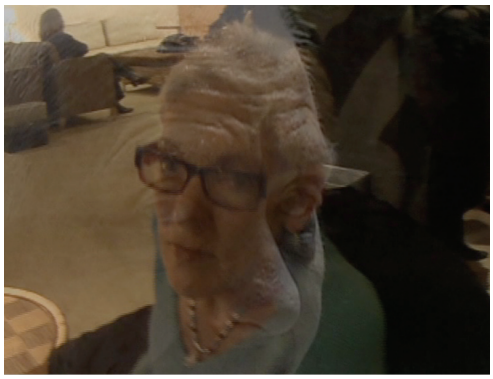
Figure 1


Figure 2

Figure 3

Figure 4

The desire for cancer survivorship makes it hard to resist the reassurance of narrative structures that flow from past to present to future (as in the heroism of the clichéd triumph-over-tragedy genre, see Stacey[11]) but the visceral and psychic disturbances incurred through cancer diagnosis and treatment implode conventional temporalities, turning reassuring formal progression into a partial comfort. *Horse* brings together both modes of time within the same frame: cancer generates the need for narration (a progress narrative is always preferable); treatment warps the time of the body, moving the patient into the uncanny sense of its simultaneous familiarity and strangeness, or into the disturbing feeling of slipping between the two orientations.

Horse delivers a certain over-presence of vital bodies in the temporal present of the film's diegesis, both in Hammer's own body and in those of the horses on the screen. In the rehearsal of diagnosis, an extended cry of terror carries across cuts between shots of Hammer's naked body curling (fetally) toward an elemental vortex of light and water (Figure 4) and the spirit of the refusal caught in the eye of the rearing horse (Figure 5).[viii] In the sequence of the insertion of the needle in preparation for chemotherapy, shots of Hammer reluctantly acquiescing and submitting to the next round of poison that might heal her body (Figure 6) are intercut with slow motion shots of the beauty and pain of the untamable force of rodeo horses (Figures 7 and 8).[ix] In the midpoint sequence (after

Figure 5

Figure 6

Figure 7

Figure 8

Figure 9

Figure 10

nine chemotherapy treatments), a close-up shot of Hammer's regrowing fine white hair is multiplied into nine shimmering almost bald heads, as the sound of effortful breath and female vocalise lead us from the textures of the human body into a superimposed shot of a single horse galloping across an open landscape: a vision of distinct capacities to thrive (Figures 7 and 10).[x] As Hammer says in one interview, '"Survivor" has never seemed to me to be the right word for a person who lives with cancer. I would choose a word that signifies flourishing, a sense of well-being, exaltation and love of life. The horse is not a metaphor, but a living, breathing creature of power and pride that I join in this moment-by-moment living'.[xi]

This desire to dwell in the present, and to generate a spectatorship that is also of this present, arguably defines the film's aesthetic project.[xii] As *Horse* moves the spectator through the cycles of chemotherapy and out into the hopeful space of remission, it also holds us in the materiality of present time through its exploration of cinema's formal temporalities. Shifting between Hammer's documentary desire to record her experience in this lesbian collaboration and her deconstructive reassemblage of shots exploring the beauty of both horse and human moving through landscapes, *Horse* becomes the occasion not merely to place the spectator in the present but also to turn spectatorship into an encounter with the presence of the present. Through this technology of presence, it is not that we are made aware that we are in time, but rather that we are of time, as it is of us.

Being of time, horse and human vitalities become the filmmaker's sustenance throughout the emotional turmoil of the treatment. Drawing on memories of wanting to own horses from childhood onwards, Hammer describes the horse as the figure of freedom and beauty. Throughout the film, the co-presence of human and horse is repeatedly brought into close alignment through superimposed close-up shots of hair, eyes, profiles and through a mimicry of posture and stance. A co-presence of form and movement emerge in echoed posture, gesture, (see Figures 11, 12, and 13). But this is not a vision of co-presence based on identification with what the human imagines the animal's incomplete subjectivity to represent,[30,31] but rather, the film's deconstructive strategies *put in process* a connection between the shared liveliness of the two based on the halting flow and repetition of the music and images. Hammer's films have always flirted with the possibility of moving beyond cliché in a turn to Nature to provide visions for living otherwise, and most especially to find images of lesbian desire and sexuality (see Dyer[29]). But here, as elsewhere in her work, in so far as Nature provides the space for utopian fantasies of escape and recovery, the deconstructive formal moves undercut any

Figure 11

Figure 12

Figure 13

Figure 14

lingering romantic notions of Nature's essence. Instead, we see and hear fragments and repetitions that disturb temporal continuity and linearity even as they increase the intensity of vitality.

The close-up shots of the fingers feeling the texture of Hammer's own regrowing white hair after chemotherapy and of the equine grey mane are the best example of this (Figure 14). In *Horse*, extreme close-up shots of the death and regrowth of the grey human hair and eyebrows of Hammer as chemotherapy patient are followed by those of the grey coat of the horse.[xiii] It is the texture of each that lingers as much as the visual matching, or even yearning for regrowth. The film moves beyond an aesthetics of identification, taking us into the sensuous spaces of the materiality of all life forms through its insistence on formal experimentation with the particularity of film as matter. The cinematic alignments of human and horse also expose the desire behind such a visual rhyming through techniques that both declare their artifice (see Figure 15), and leave the audience with the pleasurable sense of the textures of the 'companion species', as Haraway[28] puts it.

In exploring the survivorship of cancer, *Horse* places the spectator within what Laura Marks has called a haptic visuality, 'the way vision itself can be tactile, as though one were touching a film with one's eyes';[32 p.xi] as put succinctly by Marks, this might be thought of as a 'visuality that functions like a sense of touch' which enables the viewer to 'experience the cinema as multi-sensory'.[32 p22-3] Emphasising the embodied perception of the spectator, this way of thinking about film allows us to reconsider how the relationship between self and other might be one based less one based on identification than on co-presence. Haptic cinema 'encourages a bodily relationship between viewer and image'.[32 p164] Whereas Marks[32] takes as her corpus what she calls 'intercultural films,' those which use formal experimentation to explore their politics of displacement, hybridity, diaspora and the memory of home (even one never lived in), *Horse* works through the temporal disturbance of illness by bringing the force and relationality of the body into a sensuous present. In *Horse*, the deconstructive styles of sound and image reveal the deceptions of time's predictive promises. As the conventional contours of sequence and flow unravel through the temporal swerves of diagnosis and treatment, so the cancer patient's body is immersed more deeply in the materiality of its own present. The repetitive chemotherapies become the technologies through which the patient's body must submit to the present through the promise of the future. Survivorship is the reward. And yet, healing the body with its poisons, the treatment also transforms it

Figure 15

and demonstrates its unstable and ever-changing cellular composition, making the present an impossible object that is by definition always already lost.

Horse brings us into proximity with our embodiment of the uncanny nature of time through its instantiation of cinema's particular temporal relations. For Strathausen, the uncanny is present in the cinema since it is premised on something presumed dead being 'brought back to life' and beginning 'to haunt the living'.[9 p15-17] As Laura Mulvey[33] suggests, cinema 'combines, perhaps more perfectly than any other medium, two human fascinations: one with the boundary between life and death and the other with the mechanical animation of the inanimate, particularly the human figure'.[p11] Photography shares with cinema that sense of preserving past time, but while the single image of the photograph 'relates exclusively to its moment of registration,' the film strip has 'an aesthetic structure that (almost always) has a temporal dynamic imposed on it ultimately by editing'.[33 p13). It is this particular combination of the still and the moving image, of the 'now-ness' and 'then-ness,' that makes the cinema so uniquely compelling as a technology of hidden stillness.[33] Through its exploration of the temporal relationalities of still and moving images, and of the shifting histories of black-and-white and colour sequences, and of the vital infectiousness of human and non-human materialities, *Horse* brings to the surface the secret stillness of cinema's animating capacity, generating a haptic visuality full of both the pleasure and pain of troubling ontological insecurities.

Anatomic time

MUST is collaboration between performance artist Peggy Shaw (well known for her work as part of the lesbian duo Split Britches)[xiv] and Suzy Willson, artistic director of the Clod Ensemble[xv]. The live performance comprises music by the Clod Ensemble, back projected magnified visual slides of microscopic cells, organs, nerves, bones and muscles, and Shaw's one-woman performance of eleven short monologues (published as a text subtitled: *a Journey through the Shadows of a City, a Pound of Flesh, a Book of Love*.[34][xvi] The monologues are sometime more narrative, sometimes more poetic, and mostly use the first-person voice in such a way as to undercut our expectations of any straightforwardly autobiographical mode of presenting the history of one's body. The visual slides are all transparent images of microscopic enlargements from the Wellcome Library, such as the cells of the upper respiratory tract and the nerves and hair cells in the vestibular (organ of balance in the inner ear) (Figure 16). The vastly magnified scale of these images, together with their contrasting colouration, brings to the stage (and to the book that now accompanies the CD of the performance) an aestheticised sense of the body's interiors. This sequence of slides appears on the back of stage screen, as the music is played live from the side to accompany Shaw's narration of her own 'inside story'. The title promise of revelation (confession even) is undercut by Shaw's stylized butch performance in her 1940s noirish suit and tie (Figure 17), with a suitably generic voice-over retrospection, which imitates a Hollywood masculinity characterised by surface play and the absence of interior insight. If the generic pastiche of masculine disclosure suggests butch interiority might be equally unavailable, *MUST* complicates such alignments by moving us into the affective spaces of poetic narration of this queer body's desires and diseases, its abnormal growths and its injuries, its treatments and its surgeries, its birthing and its aging.

Unlike *Horse*, which foregrounds cancer diagnosis and treatment, *MUST* embeds cancer survivorship in the multiplicity of survivorships of butch life. Cancer is one amongst many of the events that have made this particular life precarious (see Butler[35]). Time is multiple and illusory, the queer body an uncanny record of its passing. One critic called *MUST* 'an exquisite lesson in anatomy, a journey underneath the skin, a mapping of the human body in which

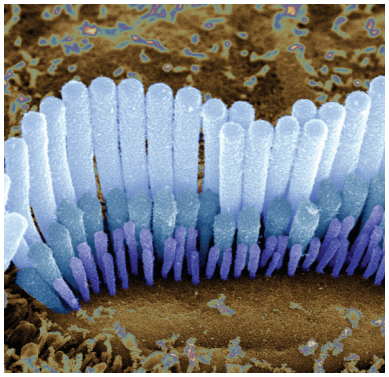

Figure 16
image courtesy of the Wellcome Trust Image Library
Photographer: Dr. David Furness

Figure 17
image by Manuel Vason
www.ManuelVason.com/Commissions

Figure 18[xvii]

sites of love and loss are placed under the microscope and analysed with a forensic gaze'.[36][xviii]

The whole performance turns the stage into a medical school and the audience into Shaw's students. Like the Elephant Man before her, she takes to the stage to turn her medical history into a show. The imperative of the show's title, which appears also as a tattoo on Shaw's naked shoulder on the book's cover (see Figure 18), remains ambiguous: it signals a command (to live, to desire, to survive), a compulsion (to have, to control, to return to) and a necessity (to perform, to become, to continue). 'Must' is also a word that refers to the damp, stale smell of mould and decay; it is the odour of age and endurance. And it is an alternative spelling of 'musth,' that annual period of heightened sexual excitement in certain large, male mammals (especially elephants), during which violent frenzies can occur. In Monologue 5, the smell of her rough elephant skin plays perceptions of the butch body back to the audience:

> Can you smell the years of sun on my skin making it rough like an elephant's hide, or are you too busy thinking I look like Marilyn Monroe?

But if this is 'open-heart surgery of the artistic kind, performed without anaesthetic',[36] the revelatory promise of the confessional first person genre is transformed into a poetic journey into the strange sense of connection and disconnection between the performing body's surface and depth. Known for her butch stage presence in previous shows such as *You're Just Like My Father* and *Menopausal Gentleman*, Shaw turns autobiographical revelation into the seductive refusal of gender intransigence.

> Would you like to see my body?
>
> I'm sixty-four and I'm lucky:
> I have both my breasts still,
> safe, inside my suit.
>
> I can't lie down to be examined; it makes me feel like I will die. It scares me to expose the front of my chest without my arms covering it. I am feeling foolish in your room–like in the ladies room–a bull in a china shop […]
>
> The reason I get mistaken for a man is my neck. It's my Adam's apple that's throwing you off. My Adam's apple combined with my suit and tie is what's confusing you. My thyroid cartilage and my cricoid cartilage combine to challenge you. (Monologue 5)

Addressing the audience through this anticipatory mode which redirects the voyeuristic desire to other the butch body, Shaw performs herself through an intimate knowledge of the codes of gender and sexuality which work to depersonalise her own story, even as we may invest it with the thrill of live confession. Finding the spaces in between the biological and the cultural, the performance draws out how other people's readings of this body have formed it as much as its own desires, or rather, how the two fold back onto each other.

Performing a narration of her own medical history through shifting generic registers that move us from family sagas and sexual histories to poetic remembrance and scientific description, Shaw's cancer is only one small part of a much longer story. Cancer survivorship here is inextricable from surviving not only other serious medical traumas but also from surviving in a normative culture that has yet to accommodate the butch lesbian. Since we are told at the beginning that this is a story about time, we wonder what kind of 'inside story' can be told if there is no beginning, middle or end? Inviting us to take a close look at the body, its scars, its folds, its wrinkles, its skin, its asymmetries, Shaw enacts the perceptual problems of apprehending the totality of the body's history as a linear temporality. Biographical narrations help to defend against the body's unfamiliar turns, those interferences or interruptions that introduce an uncanny sense that our body is only partly our own. Even though the body seems to be a continuous physicality in one sense – we can point to the scars and feel the joint pain – in another, these traces of its history can feel like fictional narrations of someone else's life as they solidify through repetition. What does it mean to think of our bodies in the singular? Is the body that endured childhood injury the same as the one that had cancer? Is the body that yearned for sex with women the same as the one that gave birth to a daughter? Is the body that died for a few moments the same as the one that now performs on stage? Monologue 5 rehearses a biographical narration of 'the body multiple' that turns the uncanny of discontinuous temporality into a comic condensation.[xix]

> I have been thirteen bodies in my life.
>
> This is only one of them.
>
> I cracked my pelvis. I broke my heels. I smashed my knuckles on my right hand. I smashed my knees in the woods. I fell off the porch and got a stick in my eye. The wind was knocked out of me when I smashed into a tree. I cut open my hand when my grandma died. I was on crutches for six months when I jumped off a fence. I had fourteen spinal taps curled up in a ball like a fetus. I was born with broken clavicles. I broke both heels. I got pneumococcal meningitis when I slept with a woman for the first time. I died for three minutes. I was in a coma for two weeks. I had mononucleosis and couldn't kiss a boy for a year. I had cancer on my face and got twenty-eight stitches. I had a lump removed from my breast. I have lumps on my forearms and the front of my thighs where I store my original thoughts. I smashed out my two front teeth on the ice fighting over a girl. I had a baby.

The coloured slides (projected onto Shaw's body on stage and as monologue markers in the book) become the landscapes of interiority that accompany our journey inside these bodies; but they also take us further away from human physiology, out into other landscapes of texture, pattern and formation. Magnified to this point of abstraction, the slides are as much an artistic, as they are a medical presence. Taking us into the body and out beyond it into the associated world of natural forms, the images remind us of rocks, of plants, of fibres and of textures. The body's presence as blood, bones, skins, organs is made present to us only through injury, breakage, illness or disease, and yet it bears the traces that should remind us we are part of the materiality of the world.

> A couple of hundred million years ago, before you were born, my body was joined together to form one land mass. Slowly my twelve plates started moving away from each other. My continents were dancing to the music of deep time. A dance of incredible slowness. Powerful enough to throw up the mountains and pour away the oceans.
>
> My tectonic plates have always rubbed and exploded next to each other. Their edges are sites of intense geologic activity. The doctors gave me beta-blockers so I wouldn't cause a volcano or an earthquake. […]
>
> Sshh. You can hear the plates of my skull moving as I talk and the plates of my hips moving as I walk. Can you hear all my bones fitting together as I keep living? (Monologue 10)

If the body performed on stage has a history that cannot be captured in time, it has a materiality that is hard for all of us to grasp: the uncanny sense of the embodiment of time. Through the performance of its material histories *MUST* returns the body to time.

Finalities

Both *Horse* and *MUST* present us with ways of thinking about the C word and the L word beyond the heightened metaphorical spaces opened up by the stigmatization criticized by Sontag. Each speaks back to the normativities governing gender and sexuality that intensify with illness by offering a poetics of materiality through which to explore the proximity of desire and disease in one particular body. Pushing beyond the body's limits and out into the imaginative spaces of the physical world from which it becomes inextricable in the face of mortality, each work returns us to the ways illness insists upon the impossibility of halting time: the absent presence of the filmed body which was once in front of (and here also behind) the camera and now appears on the screen before us; the rehearsed liveness of the performing body which presents itself on stage but cannot be captured except in ways that transform it.

The extent to which cancer's time warp here belongs to queer temporality depends upon whether the queerness refers *only* to the odd, the uncanny, the indeterminate and the undecidable (in which case, any connection between the strangeness of modern time and lesbian sexuality that resurfaces with cancer may remain incidental and contingent) or, if, instead, cancer's time warp in *Horse* and in *MUST* is queer in the sense that sexuality is already present in this disturbance to temporality. In so far as queer always carries with it the traces of sexualities deemed undesirable and perverse (though these may be not be determining in predictable ways), then such connections move beyond an analogous and into an ontological register. Cancer's queer time warp in *Horse* returns the lesbian body, marked by its previous sexual audacities on the screen, to the sign of disturbed temporality through malignant illness. Given Hammer's prominence as a lesbian filmmaker whose work has carved out experimental spaces for a poetics of lesbian desire for nearly 40 years, it is impossible not to read the temporality of her body's agony and ecstasy as defined by its battle against its sexual disqualifications. Shaw's butch presence in both her performance style and her live physicality supply queerness to the biographical disclosures that structure the piece and belie the apparently incidental mention of her desire for women in a long history of accidental and unexpected encounters with illness, doctors and hospitals in *MUST*. Here, as in her foundational contribution to queer performance work with Split Britches, the sexuality of temporality is constitutive.

Cancer in both cases warps a time already unsettled by sexual illegitimacies. Just as *Horse* exposes the underside of the filmic image to celebrate our vital placement in the materiality of the present, so *MUST* reads the archaeology of the performer's body to trace its part in multiple scales of history. Cancer survivorship in each case becomes a poetic narration of desire and disease through the queering of temporality. To cite one of Hammer's previous films, 'bent time' is both general and particular: cancer warps time but in so doing reveals time's false promise of linear sequentiality or of the predictability of futurity. Queering time shifts presence into a disjunctive register. But in so doing, perhaps all it can show us is the problem of apprehending time's uncanny unknowability and of coming into proximity with our own materiality and thus, of course, our own mortality.

Notes

[i] For a discussion of the conventional triumph-over-tragedy confessional memoir, see Gilmore[37].

[ii] For a discussion of Lord's experimental memoir, see Bryson and Stacey (forthcoming).

[iii] This phrase was reworked / adopted by Mary Bryson as the name of her blog written during her own experience of cancer in 2008: 'Adventures in Deconstruction, Field Notes from a Cancer Battle Ground Where Queer Life Meets Precarious Life Head On'. See: http://brys.wordpress.com/, (last accessed 21.11.11).

[iv] As we go on to discuss, there may be problems with setting 'straight time' and 'queer time' as oppositions to each other, as is argued in the 2007 GLQ journal roundtable on queer temporalities: 'I wonder about the ease with which we reify queer temporality, that adjectival "queer" throwing a proprietary loop around properties or characteristics that have long been theorized as at the heart of "time" or, for that matter, "history." [….] Acknowledging these [Derridean, Lacanian] and other intellectual traditions might make us hesitate to annex the queerness of time for ourselves. Rather than invoke as our straight guy a version of time that is always linear, teleological, reproductive, future oriented, what difference might it make to acknowledge the intellectual traditions in which time has also been influentially thought and experienced as cyclical, interrupted, multi-layered, reversible, stalled–and not always in contexts easily recuperated as queer?' (Jagose, in Edelman et al.[23p186-7]).

[v] Hammer B. A Horse is Not a Metaphor. http://www.barbarahammer.com, (last accessed 21.11.11).

[vi] To view 3 excerpts from the film (with filmmaker's permission): http://www.youtube.com/watch?v=_tbT89S6TAw;http://www.youtube.com/watch?v=Q22nK1NY-e0; http://www.youtube.com/watch?v=oT2UP5N_C1Y

[vii] The details of these locations are taken from: www.babarahammer.com/archives/155 (last accessed 21/11/2011)

[viii] An extract from the diagnosis sequence is available at the first of the web addresses cited above in footnote vi.

[ix] An extract from this scene of the insertion of needle at the beginning of a chemotherapy treatment can be seen at the second of the web addresses above.

[x] An extract from this midpoint in treatment sequence can be seen at the third of the web addresses given above.

[xi] Quotation from: barbarahammer.com/archives/155, (last accessed 29/5/11).

[xii] For a discussion of the 'structure of feeling' of Horse, see Bryson M, Stacey J.[5]

[xiii] The problem with hair loss following chemotherapy is not only the baldness but the presence of dead hair before it falls: its surprising volume, the labour of gathering it up, the chill of its absence, the insects that can enter ear, nose and eyes without it.[11 p84]

[xiv] See: http://www.splitbritches.com/ (last accessed 21.11.11).

[xv] The music was composed by Paul Clark. The piece was performed with live music at the Wellcome Collection, London November 2008. MUST was commissioned for the Art Injections series, the performance platform for the Clod Ensemble's Performing Medicine project. This project provides training to medical students and healthcare practitioners using the performing and visual arts.

[xvi] These monologues are also available with the music as a CD (Clod Ensemble 2009).

[xvii] MUST the inside, Peggy Shaw in collaboration with Clod Ensemble. Image by Eva Weiss.

[xviii]http://www.guardian.co.uk/culture/2009/aug/24/must-the-inside-story-review, (last accessed, 10.06.1).

[xix] This refers to the title of Annemarie Mol's[38] book, The Body Multiple: Ontology in Medical Practice.

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