Beth Spencer www.bethspencer.com

THE ART OF PEACE

PART 1

Natalie is due back in a few days. She sends me her flight details on the back of a postcard of Horst's famous corsetted woman from 1939. It was the last photograph he took before he fled Paris and the German occupation; taken, apparently, just after midnight, with everyone crying. I run my fingers over the delicate corsetting down her spine, the pearly-whiteness of the fabric; and behind and around, the darkening shadows.

I tuck it into a band on the corkboard in my kitchen, next to some old bra ads, a note about Meg's stays in *Seven Little Australians* (I must remember to look that up), and some other bits and pieces torn from magazines.

*

I smooth the corner of a copy of Nick Ut's famous photo of a group of children and soldiers running down the road in Vietnam in the early 1970s, fleeing a napalm attack; the children with their mouths open in a silent painful scream; the little girl in the centre of the frame with her clothing completely burned off, her arms held out from her sides in a gesture of acute agony and bewilderment.

I can remember coming home from school at the end of first form and seeing the *Sun* newspaper on the kitchen table, with the front page taken up with this photograph: a naked girl, just a few years younger than me, running, with her hands lifted out, away from her body; her face contorted.

To have all your clothes burned off, and for your skin still to keep burning. And then to have someone photograph this and display it to the world.

Somewhere deep beyond thinking was my fear or recognition or questioning (my unknowing) that if something like that happened to me, here: if my house burnt down and I had to run out into the street naked, a twelve year old girl... Would I be on the front page of the newspaper for everyone to see; or would my white skin, my nationality, my belonging to the same group as the readers, would this protect me?

I remember when Cyclone Tracy hit Darwin on Christmas Eve 1974, my Gran, unmoved, as far as I could tell, by disasters many times greater in other parts of the world (where the face of tragedy was too black or golden for her to identify with), was deeply horrified. She immediately wanted to send parcels and money.

'Imagine,' she said, 'having nothing,' (and then in a lower voice) 'not even a change of underwear.'

Back in the kitchen in June 1972 I saw all the things I was meant to see in Nick Ut's photo — how could I not, even in my enormous ignorance? But I also saw just a little girl, close to my own age, completely vulnerable, who was photographed without clothes on and this photograph displayed around the world, and I'd never seen that before either. There were layers to the photo that kept on burning, sensations that were beyond words, impressions that didn't stop even when you tore your eyes away.

*

My brother Bruce keeps ringing me up, wanting to talk about how our aunt Maddie, who has recently been diagnosed with breast cancer, should be having the full treatment regime. I get off the phone feeling shaken by his stark predictions if she doesn't submit to 'best medical practice'.

Surgery, radiotherapy, chemotherapy, the modern day weapons in the war on cancer. Maddie calls it slash, burn and poison. She's asked Bruce to stop ringing her about it, so now he rings me instead.

Somewhere in all this Maddie's breasts have lost their private, sexual nature, and have become a public matter. A place of contamination and contest. Everyone has an opinion. She should be doing this. She should be doing that. Has she tried this? What is she *doing* about it?

I pick my way through this minefield, keeping the lines of communication open.

At the State Library I try to erase it from my mind as I clean up some of my files and download my Dr B research onto discs. There's a computer guy coming today about this Y2K thing. All the computers here have to be checked and the whole system overhauled.

Apparently back in the days when they first starting computer programming, storage space was incredibly expensive, so they saved some by just using the last two digits of the year whenever they put in a date. When you're in the thick of the twentieth century – the greatest, longest, most amazing century of them all – you forget that eventually it too will end. And then 99 becomes 00. Which means to a computer programmed to put an invisible 19 in front of those two digits it becomes 1900 again, and instead of moving forward with us into the new millenium, the computer (bound only to logic and free of any consciousness of time or space) sends every new record, file or notice back in time, downriver, into the logiam of history.

A minor problem (like middle age) that's been on the 'must do something about' list for a long time. But one minute it's 1982 and we're all dancing and singing along to Prince, and the next, here it is. The eve of it all. The global countdown. And in every office around the country, a mad rush for 'compliance', that lovely neutral word for obedience, yielding to command, submission to the established order. In the vast information cataloguing, storage and retrieval system that is the State Library, compliance is what keeps us all running.

And it's not just here, but everywhere: in every computer, all over the world, in every office, bank, corporation, government department, security system, database, transport system, airport, supermarket, warehouse, every high rise elevator and traffic light, every service delivery system, our water, electricity, gas, our salary and social security payments, our medical records... Everything, we are told, could be ticking towards meltdown.

We could wake up in the year 2000 and find that during the night our world has lost it's footing, and we're sliding, diving over that edge.

two thousand: zero zero...

don't you want to know?

Like the maybe time-bomb ticking in Maddie's breast.

Bruce insists we send in the experts. (A simple matter of compliance.)

Maddie has other plans.

She says she wants to explore alternatives. She doesn't see her body as the site of an invasion that needs quelling. She doesn't want a macho oncologist, seeing himself as a commander in a war operation.

In the envelope with the Horst card, Natalie has also sent an old postcard of the famous Atlantic City boardwalk in the U.S.

On the other side I write:

2nd November 1968

Dear Sisters,

Guess what? I've joined an organisation called WITCH. On Halloween we hexed a whole batch of brokerage firms and major banks and trusts and afterwards the stock market slumped five points! And on September 7th I joined the protest outside the Miss America pageant, where I threw my old mascara and lipstick and – dig this! – my *bra* into a giant Freedom Rubbish Bin (called a 'Trash Can' over here). We women are sick of being beasts of buying, sick of our high-heeled low status roles! Sisterhood is powerful!

And then I did a line of xxxx's and signed it 'Wanda'.

Natalie's oldest sister, Wanda, did end up over there around that time. And she did send a postcard that began 'Dear Sisters'. I remember because I felt disappointed to have been left out (she usually included me too) until Natalie explained that this meant 'fellow females'.

I put the postcard in the envelope with the Horst card, wrote 'Dr B, Colbinabin' on the front and popped it in my desk drawer.

February 1969: 'Well, here we go girls,' says Maggie Tabberer, 'into a great big, more beautiful Hickory New Year, and this time it's colour crazy! Not bonkers-in-the-head crazy, mind you, but

beautiful, gorgeous, luscious, super-duper, sensational colour-crazy... with bras, slips, half-slips, panties, girdles, all in Happy New Year Hickory-colours.' (The Melbourne *Sun*.)

Wanda also used to send us updates on the anti-war demonstrations in the US. Back here in Australia the big Moratoriums — with a hundred thousand people lining the streets and filling the Melbourne City Square — didn't begin until May 1971. But looking through old newspapers, I can see how many protests, for years, there were before this. Small groups of slightly scruffy students; pictures of them hauled off by the police with their heels dragging on the ground. Sometimes only a dozen or so.

Last night I dreamed I held up the traffic in my Maidenform bra...

In those days, apart from Wanda, probably my greatest source of information about anything counter-culture was (ironically) reading *Lil Abner* cartoons in the *Sun*.

Once I cut out one of the strips with SWINE – 'Students Wildly Indignent About Nearly Everything' – marching along with their banners and placards and long hair and beads, and sent it to Wanda, thinking she'd be pleased. She wrote back really angry, saying Al Capp was a fascist patriarchal pig.

I blushed with shame, even though I didn't know what 'fascist patriarchal' was, and I didn't know much about pigs either (we only had cows and dogs).

Actually, I only really read *Lil Abner* for the stuff about the Sadie Hawkins Day races. I used to find the thought of them very exciting, although in my fantasies I used to do it the other way around: instead of the women chasing the men to catch and carry them over the finishing line so they could marry them, I had a long continuing saga running at night about racing madly through swamps and jungles and gum trees, my clothes getting ragged and ripped, wearing a shirt tied under my bust like Daisy Mae's, pursued by handsome sexy men...

(Look out for Bottomless Canyon!)

Not that I had a bust like Daisy Mae's, but it was, after all, a dream.

I decided not to mention this to Wanda. Some things it's best just to hold to your chest.

Diana Chose Gaol

(The Melbourne *Sun*, 20th January 1969)

A 20 year old Melbourne University student went to gaol for 48 hours over a protest against the chemical company that makes napalm. She said 'I'm worried about what the people at the Centre For Democratic Action will eat tonight — you see I'm the only one who can cook'...

On the other side of the page is an ad for Exacto skimps -- 'Invigorating support for active men and boys' -- with an illustration of two boys in Y-fronts and singlets flexing their muscles at each other while Dad (also in his undies) looks on indulgently. I make a copy for my collection.

The unnamed chemical company that Diana chose to miss cooking dinner for was probably Dow Chemicals, a major supplier of napalm during the Vietnam war. Also a major supplier of Agent Orange, DDT and a producer of dioxin. These days it's one of the corporations at the heart of the silicone breast implants litigation.

Who knows, maybe it (or one of its subsidiaries) makes the chemicals that Bruce says Maddie needs to start pumping into her veins.

But Maddie has joined the conscientious objectors, the shell-shocked, those disillusioned with the techniques of waging war on disease. An old peace activist from way back; and a student of Aikido, a martial art practice also known as 'the art of peace'. She stakes her life on there being alternatives to both aggression and passivity. She is prepared to demonstrate with her own body.

In 1968, according to the *Herald* fashion writer, transparent chiffon blouses caused 'a storm of controversy'. This year (1969) it's heavy lace see-through blouses. But this time the lingerie industry is ready. These can be worn, she tells her readers, with a vest-like body stocking over your bra, 'so you can be sexy *and* modest.'

In the library I direct a man wearing walk socks and shorts, carrying a neat brown briefcase, to the newspaper holdings, and look up some facts about Australian marsupials for a woman sporting a kookaburra brooch on her cardigan. In a quiet moment between requests I write on a clean white card:

Cairns, August 1971: Girls Hold 'Funeral' For Midis

Fashion chain head, Mrs Pat Washington, lined up her models and salesgirls and had them take off their midis and drop them one by one into a flaming six gallon drum set up in the entrance to the main store. And underneath they had... hot pants!

On another card I write:

Bra Makers Fight Back: Halter Tops Deal a Body Blow to Manufacturers By Pat Von Wolff The Age, 2 October 1972

'It is the most exciting year in bras I have ever seen,' says Mrs Lillian Booth, of Myers. 'We have *halter* bras which are well equipped for all bust sizes, even soft body bras which will support up to a D cup.'

An executive from Hickory says his company became aware of the halter, and the threat, about 5 months ago...But he admits that some women won't take advantage of the new bras and will wear their halters over bare skin.

Miss Val Tresize, buyer at Georges, gives support to this bra-less trend. 'The majority of my customers won't wear a bra,' she says. 'It is such a nice, natural look under the soft knits and jersey. Even the big girls don't have hang-ups, or should I say a hang-down, about going without a bra.'

From A Short Personal History of the Bra & its Contents c. Beth Spencer, 2008 www.bethspencer.com email: beth [at] bethspencer [dot] com Recently I was having breakfast with my downstairs neighbour Gail, and we were talking about the early days of women's lib. Suddenly her son Victor, who was getting ready for school, started to mime dangling a bra by the fastenings and lighting the end. He jumped about as it whooshed into imaginary flames and then began frantically patting up his arm and onto his shoulder and chest, flicking his fingers from the pretend burns.

'Victor—' I was stunned (he's ten years old), 'Where...where did you see that? Where did you learn that?'

He ignored me and ran out of the room, slammed the door and started doing his usual thumpingabout noises.

Gail said, 'He probably saw it on The Simpsons.'

Of course I have also sent Dr B a mini-essay on how bras weren't actually burned at the original 'zap action' at the Miss America Pageant in Atlantic City in 1968. They were trashed, and it was mostly padded bras that were trashed, anyway. But 'bra burning' is part of the culture now, like it or not. Cemented in there with energy cathected across from other images of 60s burnings (draft card burning, the self-immolating monks, the race riots, the napalm in Vietnam.)

So Dr B says wants as much 'memorabilia' as we can find for him, which usually means inventing it (burning a bra in the barbeque out the back, and sending him the singed remains). Or finding other images that were manufactured by journalists and photographers after the event, or photos of women seeking to copy a non-existent original.

Dr B's dream is to create a world-class underwear museum in a small country town in Victoria. Natalie and I are his research team. Or me, mostly, these days; masquerading as Natalie in emails and notes when she's away.

Dear Dr B,

Apparently Dolly Parton claims to have been the first woman to burn her bra. She says it took the fire department four days to put it out.

Regards, Natalie.

For the past few days Maddie has been on a retreat, at a place run by a man who cured himself of 'incurable' cancer about thirty years ago.

Bruce talks of the risks of not acting straight away but Maddie says there are also dangers and risks associated with acting too quickly, rushing in with aggressive measures when her body and mind is in shock, and while she is feeling so deeply depleted and vulnerable.

She wants to act, but her first action, she says, must be to regain her balance.

She says that despite the impression most people have, breast cancer is rarely a medical emergency. In someone her age, for it to be large enough to feel it must have been growing there slowly for many years, so a few weeks is unlikely to make much difference. On the other hand, if it

is a rare 'aggressive' cancer, spreading at such a rate that every minute counts, then it's debatable whether surgery would be much help anyway.

Doing things a bit more slowly and carefully, in a way that feels right for her, is a risk, she says, that she's prepared to take.

Bruce says this is preposterous. 'Well I know what I'd be doing, he says, if it was me staring down the barrel of that gun.'

I say, Shoot first, ask questions later?

Bruce says, Better safe than sorry.

Maddie says, When did having your breast cut off, your lymphatic system reduced, your skin and tissue near your heart irradiated, and your body poisoned become someone's idea of being safe?

But perhaps the biggest danger in waiting a bit (the unspoken one) is that if she asks too many questions, reads too many books, she may never become compliant.

(Maddie is dangerous: a loose cannon.)

I don't know what to think. There are days when everything Maddie says makes sense, and then there are days when I see a woman in the library wearing a scarf to cover her baldness, who looks well and *safe*, or I meet someone who had cancer, and had all the recommended treatments, and it *worked*. Or I hear something on the news (*Breakthrough*: New Cancer Treatment!) and I get a chill in my stomach at Maddie placing herself so outside of all this.

Maddie is stepping off into a limbo land where there is no-one in a white coat with a multi-million dollar institution behind them telling her that she is doing the right thing.

She says, Well, yes, they have might on their side. Which makes it hard.

Then adds, And have you noticed how they never have newspaper headlines that say 'Cancer Breakthrough, Not So Great After All'?

Other times, when Bruce nags at me down the telephone, I am reminded of our father. If we didn't bomb Vietnam, Dad used to say, contain the red menace, then it would spread right through South East Asia and down in to Australia. 'You'll have slanty eyed teachers! How would you like that?'

Fear and Cheer. The staple ingredients of every campaign.

The fear: well, that's obvious.

The cheer?: 'If we send in the troops straight away, we'll be home before Christmas.'

From A Short Personal History of the Bra & its Contents c. Beth Spencer, 2008 www.bethspencer.com email: beth [at] bethspencer [dot] com Gail says, Surely it's Maddie's business what she does.

Maddie says, Unfortunately, cancer's big business these days.

Global Chemotherapy (Or: the war just before the war on cancer)

In Australia and in the West generally, we know it as 'the Vietnam War', but in Vietnam, they call it 'the American War' – those years approximately between 1962 and 1975.

For a long time the US felt they were invincible; all that was needed was to keep the government committed to throwing large amounts of money at the war effort and they would inevitably win. How could they not? The task itself seemed fairly straight-forward: find the enemy and destroy it. To the US military, communism was an alien invasive force within South Vietnam, something to be rooted out and eradicated so as to restore a natural, healthy pro-American capitalism.

But the enemy proved to be hard to clearly identify, and wasn't always foreign.

In the early years, the media reported a steady stream of optimistic breakthroughs and celebrated each small victory. In those days there was little reporting of the side effects, the failures, the recurrences of outbreaks, the downside and costs of each assault. But as the years dragged on this became harder to ignore.

The guns got bigger. And the 'mopping-up exercises' – unable to distinguish between friend and foe — defoliated ancient and intricate jungles, destroying the wildlife habitats of tigers, water buffalo and a range other animals and birdlife in a relentless quest to disarm a mysterious and recalcitrant force that kept spreading along invisible supply lines.

Bombing villages in order to save them from the communist cancer, they often only created a deeper and more entrenched resistance, weakening their support base and leaving a toxic devastation for generations to come.

Defence documents show that over an eight year period the US sprayed more than 65 million litres of chemicals over Vietnam – including Agent Orange, Agent Blue, and Dioxin. It has been estimated that even if the US agreed to pay projected costs of 500 US dollars per hectare, it would still probably take between 100 and 150 years to successfully regenerate the three million hectares that were devastated in this process.

I dreamt I was running through a jungle, with my polkadot shirt tied under my bust like Daisy Mae. I could feel the mud squelching between my toes. I jumped onto a fallen branch and climbed up into a tree, and there were vines that I could swing from. I knew I had to hurry, they weren't far behind. I held on and gave myself a push off into the air and I swung suspended for a long time, and then I was on the ground again. And then I was in the backyard, at Aunty Denise's (Maddie's place) in Ringwood, and right in front of me a white tiger came out from under the foliage of a flowering bush. We looked at each other, its tail gently swaying, testing the air. Then someone came out of the house with a gun (or was it a broomstick?) and said, I'll take care of this...

The new medical-industrial complex

In 1971 — the waning years of the US-Vietnam war, which had become not only unpopular but also seemingly unwinnable – President Nixon confidently declared a new war. This one, though,

was a motherhood and apple pie war, a war no-one could complain about. Although it too in the end would prove to be long and expensive, with few clear gains.

And it too was a war in which the chemical corporations, buoyed by increased government funding, would again be kept busy.

1974 : three years after Nixon declared war on cancer and increased government funding for cancer research, Adriamycin, a highly toxic chemotherapy drug nicknamed 'the Red Killer' hits the market and sells ten million dollars worth in its first year.

In the years between 1983 and 1987, sales of chemotherapy agents nearly double, from 270 million US dollars to 564 million. This is also a period in which directors of several major pharmaceutical companies began to sit on the boards of anti-cancer organisations and of prestigious cancer research institutions such as the Memorial Sloan-Kettering.

By 1997, global sales of chemotherapy drugs are estimated at 30.9 billion dollars annually.

This time, I went to school in my pyjamas (how on earth did I come to forget my clothes?). I ran through the playground and Stephen Riddley from third grade came out of the principal's office and pointed his finger at me, ratta-tat-tat... There was a flash of light. I looked through a window and saw Maddie spread out on a desk. She wore a white hippie gown and there was a red patch that blossomed over her heart and dripped down onto the floor, amongst the chalk dust and banana peels. I got on the floor and cupped my hands underneath and caught the blood, but it was dark blue like the ink in the ceramic inkwells. The teacher came and dipped his pen into my cupped hands and he began to write on Maddie's body... I saw the way it cut her flesh, I saw the way it made her writhe, but she couldn't get up off the table. There were nylon stockings and suspender belts tying her arms to the table-legs. I pulled at them, but it was no good.

I woke up, and I must have jerked or called out because Leo woke up too. He was still half asleep, but he held me. And I told him the dream, and we talked.

He said if it's not a medical emergency, then why do they rush women into surgery the minute they find out?

Bruce says they have to, early detection saves lives.

I tell Leo about the MBA Health Insurance advertisement that Maddie sent me last week. The one where they have the picture of Rembrandt's painting of 'Bathsheba' and then a close up showing the dimpling of her breast tissue.

Bathsheba, already married, but asked by King David in a letter to meet him secretly, has a dilemma, the ad tells us. 'But *the model* has an even more tragic problem. She could not possibly have known about it, nor could Rembrandt, or anyone else on earth at the time. Medical opinion now is that she was in the advanced stages of breast cancer. The classic "*orange peel dimpling*" in her left breast is what happens when the disease is left untreated.'

I couldn't really see why Maddie sent it to me. She rang me the next day and was amazed that I hadn't noticed what to her was a massive contradiction right there in plain sight. I tried to guess what it could be but each time I got it wrong. Finally she told me where to look.

'The model,' the ad continues, 'is Hendrickje Stoffels, Rembrandt's common-law wife. Within a year of the painting, she would give birth to his daughter... and just nine years later, she would die. Then, they thought it was tuberculosis.'

Can't you see? Maddie says. But I still can't. It does sound tragic. (Does she think it's too maudlin?)

The ad, Maddie says, is to encourage women to take out health insurance so as to get regular screening mammograms, so they can have their cancers detected early, unlike poor Hendrickje, and have all the best treatment that modern medicine can provide.

-Right.

—But look at what it says: she lived for another *nine years* – with *advanced* breast cancer! And even then she may well have died of TB and not cancer. Even with modern medical treatment, nine years is pretty good going for advanced breast cancer. And then within a year of sitting for the painting she gave birth to a daughter — that wouldn't have happened if she'd had chemotherapy, in fact she may never have been able to have children at all if she'd had all the advantages of modern medicine, because it can push you into early menopause. So, really I don't think she did too badly for someone with cancer advanced to the stage of breast dimpling (which means she must have had it growing there for a long while already), and without any treatment. And also without all the terror and agonising that goes with early diagnosis.

Leo says, but the ad is saying that if it *was* detected early she might have been able live much longer than nine years. That she might have been cured.

I tell him that Maddie says that we can never really know for sure that early detection results in people living longer, or if it just results in people living longer with the knowledge that they have cancer.

For instance, if Maddie's cancer was detected when she was 50 instead of 54, and she lived five years after detection instead of one year, the survival statistics would show a dramatic benefit, but there's no real benefit to her if either way she still dies at age 55.

-So does Maddie think that we shouldn't be trying to detect cancer early? (Leo sounds shocked.)

—She says it could be helping, but it's not proven. We may never really know for sure. Some people say that if you look at the mortality rates – the number of people dying of cancer each year – then things haven't changed much. Not for breast cancer anyway. The ones where the mortality statistics have really changed over the years are things like lung cancer, and that's more to do with prevention – more people giving up smoking, and better work conditions – than it is about screening and early detection.

Leo doesn't say anything. But I can feel in his body wrapped around mine that he is tense and disapproving of this heresy, but doesn't want to criticise Maddie to me. But even to *say* something like this out loud. The words are like little pricks of ice, falling around us, while we shelter in the bed, safe under the covers.

Mortality statistics. The statistics that Maddie says are the only ones that really matter. But such a brutal phrase. It's understandable that doctors might be uncomfortable mentioning these to people with cancer. So much more cheery and positive to talk about 'response rates', 'recurrence rates', or 'survival rates'.

A glossary of terms, according to Maddie

The 'response rate', Maddie says, refers to the chances of the chemotherapy causing the tumor to shrink a particular percentage. So a '60% response rate' means that in sixty out of a hundred people given that form of chemotherapy the tumor shrank a certain amount.

However this initial shrinkage means little if afterwards it just grows back even more rampantly, which can often happen. And the figures also don't tell you what happened to the other 40%: did the chemotherapy have no effect, or did it perhaps make their cancer worse (and perhaps even hasten their death) by overloading their immune system?

The 'recurrence rate', on the other hand, means the percentage of people who developed a new tumor in the same body site or organ over the specified period (over five years, for example). But the figures don't tell you things like how bad the new tumor was. Fewer recurrences, but more virulent ones (because your immune system has taken a beating from the chemo), could actually mean a higher overall death rate.

'Survival rates' refer to the percentage of people still alive x number of years after diagnosis.

The improvement in long-term survival rates that has been directly attributed to the use of chemotherapy (in the very few random controlled trials done on this) ranges from about five to ten percent (over say, twelve years), depending on the type of cancer and which study you refer to.

Leo: five to ten percent? Is that all?

Bruce says, alright, but the alternative therapies, they can't cure it either, they don't get any better results than this.

Yes, but that's Maddie's point, they get similar results (and sometimes better), but without the toxicity.

Maddie says that even with that five to ten percent statistical gain there are often problems with skewed samples. Sometimes people have to drop out of a treatment group because they can't handle the toxicity, and there are others who die in the middle of treatment (from pneumonia, for instance, due to the lowering of their immune system). If these people get omitted from the results, that means the final 'test' group that persists with the treatment and makes it through was probably healthier overall to begin with, so maybe this is why they have better long term survival rates than the control group. She also says that some have argued that the small gains observed for women with breast cancer are bunched in the pre-menopausal age group, and maybe the effect occurs because the chemotherapy stops their ovaries producing estrogen, rather than from any direct effect on the cancer. (And that's a lot of toxicity just to lower your estrogen levels, and would mean little benefit for older women or women whose cancers weren't estrogen-positive.)

And then there's the placebo effect. This is always the argument levelled at the non-conventional treatments, that they're just the placebo effect, not a 'real' cure. But then why don't they ever factor in the placebo effect for the toxic treatments?

Maddie says the exception to all this is a very small number of rare adult cancers, and childhood cancers, where chemotherapy seems to have a dramatic impact on survival and to be the closest thing to a cure we have. The bad news, though, is that the incidence of childhood cancer (the rate of new cases occurring within the population) has been steadily increasing at about one percent per year.

In the morning I make breakfast in bed for Leo, but the man next door is spraying his weeds, so we have to keep the windows shut.

When I moved here, to this block of flats, we had heaps of blackberries cropping up in the backyard and in the garden bed along the fence. So we had a working bee and cut them down and pulled out what we could, but they just grew back. So I called someone at the local council (this was before Gail moved in) and he put us onto a guy who for a price came and poisoned them for us. It seemed sensible. Who wants to live with blackberries lurking in the bushes and ripping your fingers when you try to pick a flower, spreading their little tentacles everywhere.

But then they grew back again, even after a thorough poisoning. Not all of them, but a lot. And this time they looked even tougher and meaner. So I called the guy to complain and he sent out a young bloke armed with a can of petrol. 'This will do it,' he said. And in my extraordinary naivety I guided him around the garden, pointing to the regrowth, making sure he didn't miss any, while he aimed the nozzle and tipped straight petrol onto the little clusters of dark new leaves and down into the soil.

The petrol worked. The blackberries curled up and died. But so did half the garden plants. Gail was horrified when she moved in and took over the gardening. 'Petrol? You paid someone to put petrol into your garden *soil*?' She poked the dry bones of a once beautiful magnolia. As soon as she pointed it out, it did seem absurd. (But it had seemed so rational at the time, and the guy was so confident that this was the go.)

Gail's approach to blackberries and vicious weeds is to cut them close to the ground and then immediately (within seconds, before they seal over) paint them with a small dab of the least toxic form of weedkiller. She never sprays willy-nilly over a whole batch. And then she concentrates on rebuilding the soil, finding out what is deficient, replanting with a variety of dense groundcovers, and feeding and mulching them to keep them healthy and strong. She spends time in her garden, getting to know all its seasons and quirks and vulnerable spots. (Rather than ignoring it for most of the year like I did and then sending in the hit-man.) She picks the optimum time to deal with each weed – the stage in their growth where their roots are loosening and they are easiest to pull out, or when they have exhausted themselves producing a seedpod and are less likely to survive a slashing on a hot day. And she only uses poison as a last resort, on the very worst of them, and then sparingly. Tiny amounts.

Leo kisses my breasts. Licks the stale tears off my cheek. A plate falls onto the mat with a muffled crash. We hold hands and in the slow early morning hours, while the man next door nukes his weeds, and Gail rattles some pots and pans in the flat below, we make love, and then sticky and replete, drift back to sleep.

When Maddie turned forty, she had a big party in a disused room at the back of an old pub. The room was octagonal, and had two pool tables, a juke box (which she made sure was packed with great dance music and old soul tracks) and a bar where we placed the plates of nibbles and dips we brought along.

The room was full of everyone – all her friends from wayback, most of the people from the improvisation theatre group she worked with (dancing and making a lot of noise around the pool tables, hooting and cheering at every ball sunk), people from her food co-op, neighbours from the street she lived in at the time, and a few family members, like Bruce and me, feeling a little young and out of place. (Forty was very old back then.)

The highlight of the party was when Jude her girlfriend brought out an iced pink cake shaped like a giant single breast, with a trembling chocolate nipple on top.

Before Maddie plunged the knife into the smooth fleshy surface and started cutting off slices, she carried it around the room and invited all the guests to have a lick of the nipple. The last person got to bite it.

Right after surgery I had a sense that I would never be able to bear missing that great well of sexual pleasure that I connected with my right breast. That sense has completely passed away, as I have come to realise that that well of feeling was within me... I can never lose that feeling because I own it, because it comes out of myself. I can attach it anywhere I want to, because my feelings are a part of me, my sorrow and my joy.

- Audre Lorde, from *The Cancer Journals*

Bruce and I have been invited to watch Maddie's grading for her Aikido black belt.

She joined a Dojo up near where she lives about four years ago. She says that in Aikido, a person who reaches their first dan black belt is considered just a beginner. The idea is that once you know enough of the basic structure and movements of Aikido and are thus able to deal with strong techniques by rolling out of them without getting hurt, then you can really begin learning. To symbolise this, for the past few months she has put away her purple belt and has returned to a white one.

Maddie says Aikido is about tuning in to the flow of things, being ready to step in and accept the challenge of the incoming force and move with its energy and learn from it, to create balance and harmony again. This is never something you do just once, but something you keep doing, over and over.

Enter when pulled, turn when pushed.

From A Short Personal History of the Bra & its Contents c. Beth Spencer, 2008 www.bethspencer.com email: beth [at] bethspencer [dot] com Unlike me: I keep putting my foot in the wrong spot (like in my mouth).

Like the day she rings me in tears. Bruce had been over to see her and had spent the whole visit trying to persuade her to do the full surgery, chemotherapy and radiotherapy thing, and to do it now.

I said, He's concerned about you, Maddie. We all are.

There was a silence, and then she said quietly, I'm going to go now, and then I heard the purr of the dial-tone.

I stared at the phone, a deep pit of horror forming in my stomach. I dialled her number but it was busy. I waited a few minutes, my mouth dry but I was too afraid to move away from the phone to get a drink. I dialled again. Busy.

For the next hour I walk around the flat, barely daring to breathe. I dial; but all I get is the dead tone of the busy signal. Eventually I stand at the kitchen sink and force myself to drink a long glass of water, trying to dilute the remorse that fills every cell of my body, until at last I can cry.

When I dial again, this time she answers.

Maddie? I say. I wait for a moment, but when she says nothing I say, I'm sorry.

She sighs, a long exhale, and when she speaks I can hear the exhaustion in her voice: I just couldn't stand it, not you, too.

- I am so sorry. I take a deep breath. - Can we start the conversation again?

She says, not tonight. And I say I understand.

But that night I sleep terribly, haunted by all the ways I could lose her.

At the Library I talk with a woman, Freya, who has had cancer, and she tells me that when someone close to you doubts the way you're doing things, it can feel like betrayal. Or when people keep giving advice and suggestions of what you could do differently, it often just feels like criticism or judgement when that's the last thing you need.

It's hard enough, she says, dealing with cancer, without having to constantly fight a second battle with family and friends.

But what, I said, if you think what they're doing is dangerous? What if what they're doing or being told to do is wrong?

She said, Well, if you're that certain then I guess you'd better make sure you tell her. But I wouldn't mind if you'd give me Saturday's Lotto numbers while you're at it. I could do with a nice win.

She picked up our cups and took them to the sink. A small shaft of light, coming through the barred windows onto the street level, skimmed across the table, blending with the blurry pattern of the laminex.

On her way out she said, Look, everyone's different. But for me, it was so hard to keep believing in myself and my ability to get through it, that sometimes even the slightest suggestion, given at the wrong moment, or in the wrong way, could feel like sabotage.

Well what is the right way? I whispered.

She said, Sometimes there's no right way. It depends how you're feeling. It depends who it is.

She said, You know, that was one of the most painful things I ever had to do, having to make a decision to cut off friends that I loved – when I most needed them — simply because I couldn't *trust* them not to undermine me when I was feeling vulnerable.

When she left I nudged my handkerchief out of my pocket and blew my nose. I moved my chair into the little patch of sunlight and warmed my hands for a while before I went back to work.

Late in the afternoon, Freya came over while I was repairing some books and said, I've been thinking about it and sometimes people did have great suggestions or bits of information, and I really appreciated it.

As I turned towards her, the sticky clear sheet I was using to cover a book slipped and buckled. I spent the rest of the conversation trying to peel it off so I could start again.

She said, But to me the golden rule is that you only give your opinion on what they're doing if they ask for it.

She reached over and picked up the amethyst crystal on my desk. Maddie had given it to me last time I visited, because I had admired it. Freya turned it this way and that, watching the light bounce off its many facets.

If you want to offer information, she said, just be sensitive to when's a good time, and offer it as *information*, not advice. You could say, 'this is something that helped me' or 'I have a friend who you could talk with if you wanted' or 'I have some books at home I could bring over if you're interested'. Just make sure, she said, placing the crystal carefully back onto the only clear spot on the desk, that you do it in a way that is totally easy for the person to take or leave. It's when it takes effort to push away people's offers of things – when they bring the books over without asking you first, and then you have to pick a time to give them back and hope to God they don't ask if you read them or what you thought... Or if they keep giving information even though you're obviously not taking it up.

I nod. (Thinking of Bruce, and his campaign of attrition.)

You could look at it this way, she says: only offer something if it's perfectly okay with you if they don't use it. If you are going to get miffed because they don't take up your brilliant suggestion or superior wisdom – or eat your casserole, or return your call saying you're thinking of them — then that's a good sign that you probably shouldn't do it.

I wanted to give Freya a hug, but I didn't know her well enough, and all I could do was nod and say thank-you. And then she gave me another gift.

She said, Look, your heart's obviously in the right place. It's okay to make a mistake. Just swallow your pride and be prepared to learn. It only feels so hard for you because it's a new thing. Just don't *you* start avoiding *her* because you feel like a goof.

It was true, I had been creeping around, too afraid to ring Maddie and hoping I wouldn't run into her somewhere. (Which was extremely paranoid, as she lives in the country.)

So I rang her again, and we had a long talk. I said, if there's any way I can help ..?

She said, Right now, I just need a cheer squad.

(*Cheer squad*, I wrote on my phone notepad, underlining the phrase about ten times and then drawing a little box around it with curly wands coming out of the corners.)

She said, I've got a few people who understand and support my strategy and who I can really talk the issues over with, and I guess I was trying to make you into one of those. I shouldn't have done that. I didn't realise you had such doubts about what I was doing.

-Well... (I started frantically adding little triangles along the sides of the box.)

She said, It's ok for you to have doubts. I can't stop you having doubts. And I know you'll probably need to talk through them with others. But when you're talking to me, I just need a cheer squad. I just need support.

-Okay. (I would have said more, but I felt like I had a small anvil in my throat. I filled in the two 'e's' in 'cheer' and extended the 'r' like a big curly tongue.)

She said, But perhaps if you do have doubts, rather than always just talk about it with someone else who thinks I'm crazy – like Bruce — maybe you might find it useful sometimes to seek out someone who is on my side about this and ask them for more information. Or I could suggest some books if you wanted to read them, so maybe you might trust me more in what I'm doing. And maybe eventually you could be more than just a cheer squad.

That would be great, I started to say, but she cut me off.

No, she said, just go and think about it. I need a cheer squad, and if a cheer squad is all you feel capable of right now, or have time for, then that's fine. Don't do anything to please me, only do it if you want to. If you just do it to please me it's going to go wrong down the track.

After we hung up I noticed that a storm had blown up while we'd been speaking. I sat and listened to the gutters pouring water into a tank up against the downstairs wall, and drew a page of leaf shapes that became paisleys with scalloped edges, and little curly loops and tongues, and spirals connecting them, and down the side of the page, a whole row of pretty raindrops.

Later when I have a talk with Gail and Bob about it, Gail says, I guess it's like being a support person at a birth. You discuss with them a birthplan, and then if you agree to be their support person your job is to do everything to help them achieve this. While they're overwhelmed in labour is not the time to start a discussion on the pros and cons of their choices and options — and its certainly not the time to try to push your own ideas or use emotional blackmail.

Bob says, Yeah, but that only works because you've discussed it fully beforehand, before labour begins. The difference with cancer is that you don't really get that option. Most people don't like talking about cancer when they're well.

Gail says, Well maybe that's exactly when we should be talking more about it.

Zoe disagrees, You can make a decision when you're coldly rational, but then it's a whole different ball game when it actually happens and you're facing a possible death sentence.

Which is why, says Gail, you need your trusted support person to remind you that when you were thinking rationally, this is what you decided. And to help you get calm again, and *then* allow you to change your mind.

Coldly rational. I wonder, when Bruce is getting hot under the collar about these things, if this is how he sees himself?

I ring Jude, Maddie's girlfriend, at a time when I know Maddie won't be home and ask her to recommend some reading. She gives me a list of books and websites.

I asked her what she would do if the position was reversed: what if Bruce had cancer and he was going to have chemo and they were afraid about the information he was trusting?

Jude says, Ooh, yes, have been in that situation, with a friend I loved dearly. And I can tell you it was very hard. But, he's a smart person and that's what he wanted to do, so I zipped up.

— But what if he had bad consequences from it, and then found out afterwards that you always thought it was dangerous and knew of better alternatives and hadn't warned him? Wouldn't a true friend warn him?

She sighed. Look, it was a *really* hard decision. Watching him get sicker and sicker and just hoping he'd be able to pull through. But he did know what I thought about all this generally. If he wanted to talk it over with me he could've. But he didn't. And I trusted his instincts. And he did pull through; he's fine now.

She paused and then said: Look at Susan Sontag – given up for dead by her American doctors so she went to France and had the most full-on chemotherapy she could find, and she lived. Maybe some people need an extreme therapy to give them hope and push them into a healing state. Maybe they need to be taken to the brink.

I could hear a dog barking in the background.

But that's the whole thing, Jude says, it *is* an extreme therapy, with very thin statistical back-up and a dodgey theoretical basis – to me it's just not logical to do that to your body when it's already malfunctioning. But sometimes the illogical works.

I don't say much, trying to take this in.

Gotta go, Babe, she says. Dogs are hankering for a walk. How's that boyfriend of yours?

At work I'm shelving some books when I come across A Cancer Source Book for Nurses and look up chemotherapy.

'Whenever hazardous drugs are handled, care should always be taken to avoid spills and a spill kit should always be available... This includes a gown with long sleeves to the wrist, double gloves, respiratory protection, and an eye shield.'

Further down the writer comments: 'Concern is extended not only to the hazardous drugs but also to the excreta of patients receiving the hazardous drugs. The accepted time frame for special handling of bodily fluids after receiving chemotherapy is 48 hours. This includes urine, feces, emesis, and sweat. Special precautions should be implemented when any of these body fluids are handled.'

Jude says, Where do those 30 billion dollars worth of chemotherapy chemicals go each year? Is this really the best way to make world safe from cancer?

In the small tender hours of the night, I lie curled with my back against Leo, his nose whistling lightly as he sleeps, like a little train engine.

*

A hundred kilometres west, I imagine Maddie curled in a tight ball behind a lightly snoring Jude, clutching to her chest a copy of Ralph Moss's *Questioning Chemotherapy*. Holding it like a talisman, a shield, when doubts ambush her, as all the great and powerful forces of hospital based medicine send out their arrows and knives: it must be right because everyone does it, it must be right because all the best brains, it must be right because everyone knows someone... It must be right because what else is there?

On the bedside table, more books stand guard: Samuel Epstein's *The Politics of Cancer*. Articles by Don Benjamin. A book called *What You Should Know (But May Not Be Told) About Prevention, Diagnosis and Treatment*. Sharon Batt's *Patient No More: The Politics of Breast Cancer*.

On the floor, connecting us up in the dark: Petrea King. Ian Gawler. Grace Gawler. Audre Lorde. And the grandmother of them all, Rachel Carson's *Silent Spring.*

Ralph Moss began his career as an enthusiastic science writer in the Public Affairs Department of Memorial Sloan-Kettering (a famous cancer research institute in the United States) gradually becoming more and more disillusioned as he was asked to write glowing press releases about flawed studies and unwarranted speculation. He writes, 'It amazes me how much of what passes for knowledge in cancer therapy turns out to be incomplete, inadequate, and anecdotal.'

On *Oprah* a prominent woman doctor scoffs about a recent study that concluded that there was no real evidence to show that mammogram screening saved lives, by saying that it wasn't a real study, 'just a review of all the previous studies' (a meta-study – usually regarded as the most reliable type of study), and it was done (she says contemptuously) by *statisticians*

Petrea King says: in the end, it is peace of mind that cures cancer. So if having chemotherapy brings you peace of mind, then do it, but visualise it always as golden healing liquid going into every part of your body...

Jude says: Anyway, Babe, listening is always more important than telling.

She says, the main thing is to listen carefully to make sure they are doing it because they want to, not because they're being bullied into it, or because they're not being offered alternatives.

She says people soon realise if they can express doubts without you shutting them up or saying some kind of rote platitude. She says, being able to sit and hear this is actually a rare thing. So most of the time you don't have to openly say anything but just be honest in your reactions to what they say, and willing to listen, and eventually if they want to know what you think they'll ask. And then you can tell them. But it's up to them what decision they make.

You have to wait till they come to the point, you see, Jude says, where they're ready to hear it. Where it becomes useable to them. It has to be information that empowers, otherwise it's wrong information, no matter how 'true' I think it is.

In my dream, Maddie comes into the room and puts a thought on a small side table: Just in case you ever want it, she says.

*

Bruce hovers over me with his present: Open it, open it! Put it on! Show me!

When it comes to public discourse, however, Maddie and Jude are a lot more forceful.

We never spat on the soldiers, Sweetie, Jude says, no matter what the history books say. But we did voice our opinions loudly, so that those young soldiers might have different options, and perhaps a different fate. Besides, they're not the only ones whose feelings matter.

They invite me to come along one day to a working bee for a group called *Bust Up*.

How are you with an icing bag, Darling? Jude says.

They are planning to make cup-cakes iced to look like breasts, with pamphlets in the bottom of the little patty pans. Then hand them out at a gala charity function later in the year, sponsored by a chemical company. And send preview cup-cakes and pamphlets to the media too, of course.

Meanwhile I plough my way through Jude's reading list, finding it shocking but fascinating.

I read about how chemotherapy has its origins in mustard gas from World War One. The art of surgery was honed in the American Civil War. And radiation, of course, is one of the legacies of the atom bomb. Ironic that we use something that is a known cause of cancer as a standard treatment for it.

I learn that there are no real alternatives to chemotherapy and radiotherapy offered to people with breast cancer for much the same reasons that we aren't offered alternatives to using fossil fuels for powering our cars. And few alternatives are explored when acute international conflicts emerge, except to use 'massive doses of violence' as Martin Luther King once put it.

Now I have many roles. Maddie talks things over with me. I am part of her cheer squad. And I think about her a lot. I try to find time once a day to sit with my body very still and my thoughts focussed and calm, and beam her my energy.

And I've also found a role as the buffer between her and Bruce. A kind of cancer door-bitch. Sometimes my role is simply to keep him away. And other times, like today, to let him in if he has a good enough attitude.

- Bruce, we're going as her cheer squad. You mustn't talk about her therapy.
- What therapy? Chanting and herbs?
- Ok. Maybe we should just turn around right now..

Maddie has a new doctor, who uses non-toxic methods to treat cancer.

Dr Megan says that some of her patients die, and some live, in around the same proportions as for doctors who use conventional toxic treatments. The main difference is in how her patients die. She says that depending on the kind of cancer and where it has spread to, her patients usually have a good quality of life right up until a few days or weeks before they go, and they usually die fairly peacefully.

To Bruce anyone working outside the system, or counter to the system in such a way is no longer a 'real' doctor, and has forfeited any social authority. (Catch 22.)

Herbs! he scoffed when I told him (as we sat drinking short blacks in Lygon Street). As if I'd said that Maddie was putting a four leaf clover under her pillow and trusting in that to kill off some cancer cells. I think that was the first time I'd realised that Bruce was still back in the days of the *Tarzan* movies, where the witch doctor sprinkled powders and potions around which we educated little white children knew were totally fraudulent. As if a little powder or a potion could do anything... that is, unless it had the name of a pharmaceutical company stamped on the bottle.

(Those same pharmaceutical companies busy nowadays mining the knowledge of tribal people, scouring the rainforests in a rush to patent as many phytochemicals as they can.)

When I told Gail she said (as she picked a mouldy orange out of the fruit basket), Doesn't he know about the history of medicine? Where does he think drugs originally came from?

Bob said (pouring another cup of tea and popping an aspirin out of a bubble pack), Wasn't he the one you smoked your first joint with?

But Bruce has his own mantra: *Treatments are getting better* all *the time*.

He uses this whenever I relay back to him Maddie's statistics and objections: the long list of toxic side-effects and the consequent increased death rates from other causes, such as heart disease, that offset the small gains.

Yes, Bruce says, yes *but treatments have got better* since those statistics were collected. It's totally different now.

Maddie says — And what if they're wrong this time too? What if the next batch of statistics, in ten years time, show that there is still minimal benefit? Or no benefit?

Well, treatments are improving *all* the time. (In ten years time, this too will be the old days: inbuilt statistical obsolescence.)

Maddie says — so all they are offering in effect is their belief that this treatment is better now than it used to be and that good statistics will eventually prove this. If I want faith-healing, she says, at least let me choose my faith.

But these days it's precision bombing. Lumpectomies rather than mastectomies. Focussed laser radiation. High tech. Teams of experts to debate strategy. Minimal losses. Anti-nausea drugs to lessen the side effects (or at least the more obvious effects of the side effects). Brilliant methods of reconstruction.

It's a winnable war again. Fear and cheer. You'd be mad not to take advantage of it.

And Bruce's other mantra: Early detection saves lives

Maddie says — Sometimes only a very few lives, at great emotional cost to large numbers of people who end up having unnecessary treatments or never-ending tests and anxiety. *Prevention* saves lives. So why aren't we lobbying to reduce the number of carcinogens we keep pumping out into our air and water and loading into our food -- instead of putting the bulk of research money into ever-new combinations and types of poison?

Bruce and I arrive a little late to the RSL hall where Maddie's grading is taking place. So we've missed the warm-up exercises and the introduction. We grab some brochures and handouts at the front desk and tip-toe our way to some seats in the upstairs viewing gallery and try to locate Maddie in the sea of white gi clad bodies on the mats below, now facing each other in pairs.

The grading is for all levels of experience, from people going for their first belt through to those going for a black belt like Maddie; all ages from ten year olds up; all shapes and sizes.

At one end of the room, ceremonial swords are placed below a framed photograph of Morihei Ueshiba, the founder of Aikido who died in 1969; referred to as O Sensei, 'The Great Teacher'. It is said that even as old man in his eighties, O Sensei could disarm any foe, down any number of attackers, and pin an opponent with a single finger.

Maddie, wearing her white gi and purple belt, bows to her opponent (who also bows) — palms meeting, her thumbs lightly touch her heart centre, then she brings her forehead to brush the tips of her fingers (left and right, head and heart) — and steps onto the mat.

In Aikido the person doing the throwing is called the Nage (Nah-gay); the person thrown is the Uke (Ook-ay).

Bruce and I nudge each other and give approving nods when Maddie throws the senior student she is partnered with, a tall wirey guy a grade above her. Her movement looks so effortless. We're not sure if we're allowed to clap, so we do tiny fingertip ones. Until we see someone watching us with a faint look of disapproval, after which we sit on our hands and watch quietly. Although sometimes he whispers a question and I whisper back.

Maddie says that in Aikido, the first thing you do with an incoming threat is to move in and make firm contact, embrace it to you and move along side it. (*When an opponent comes forward, move in and greet him.*) This is the decisive moment. Only in this way can you get an understanding of what it is, what kind of thing it is, where it wants to take you. At the same time, this way you know precisely where it is, so as to be able to keep moving out of its direct path, and prevent it from doing you harm.

If you try to knock it away, or counter force with force, all that will happen is that the strongest will win for now (and that may or may not be you). You won't know where it will come from next time, or anything more about it (why it attacked you). Even in you win in this instance, you have become more vulnerable.

If you try to stand your ground, defending a fixed position, you will either be defeated, or have to fight over and over again.

Maddie's partner grabs her wrist, and instead of pulling away, she extends her fingers, steps in, turns and rolls around beside him (out of the line of the attack and into a place where she could easily deliver a punch or push to his face if needed); with the weight of her body, and the awkward twist this puts on his wrist, she effortlessly breaks his balance and positions herself strongly.

Maddie is not passive in the face of her cancer – she is already moving. Already different to who she was two weeks ago, already thinking differently, acting differently; different priorities and habits.

The way she looks at it, the cancer gets its strength from her stress and imbalance. If she moves away from that position she can weaken its ability to attack, and start to dissipate its energy. From her new position she can begin to apply immobilising techniques, to neutralise the harmful quality of its energy, and to redirect it towards creating healthy cells.

Maddie says she wants to respond energetically to the cancer, but it is important that she keep opening herself up – to change, to lessons, to greater flexibility – rather than shut down, put up inflexible barriers and take a rigid position. She doesn't want to go into siege mode. Such a fine line between aggression and fear; each one can flip so quickly into the other.

Seeing me before him, The enemy attacks, But by that time I am already standing Safely behind him. — O Sensei

In the next technique, as the Uke throws his punch she moves in towards him, connecting, in such a way that it is as if she was the one touching him rather than the other way around. Then she turns so that her body moves alongside his, gently shifting him off balance and taking control of their now combined energy force. Finally with a flowing circular step the Uke's hand is forced down and he is flipped into a diving forward roll in order to untwist the lock on his wrist and prevent it being broken.

Maddie says the idea is to move in such a way that your opponent has three choices: he can let go (stop attacking); he can come with you (allowing his energy to be redirected); or he can persist in his attack, in which case he could get badly hurt. But the choice is always his.

When I think how strong Maddie is, and how courageous, it hurts me to hear people say to her, Come on, be *brave*, have the treatment.

But without a headscarf covering baldness how are people to gauge her courage? How is anyone to identify her as a trooper, or to know to stop her in the street and wish her well? (To be reminded every time they see her at the supermarket to say that silent prayer?) There is no roster of people calling in to take her in to hospital treatments. And the get well phone calls have dropped off because... is she really getting well? It's all so unfocussed, without those D-Days and regular test results. And she doesn't *look* sick. (She looks healthier than I've ever seen her actually.) Neighbours don't deposit casseroles on her doorstep. Why should they? She is perfectly able to cook for herself and Jude. (And how would they know what to cook, anyway, that funny health food she eats...)

From A Short Personal History of the Bra & its Contents c. Beth Spencer, 2008 www.bethspencer.com email: beth [at] bethspencer [dot] com She steps, pivots, graceful and precise, moving always from her centre, using her entire body in every technique.

*

I remember about a year ago I had some peculiar and annoying symptoms and I looked them up in a medical book at work and read that one of the possibilities was cancer. As I read the words I felt my knees turn to water and there was a rushing sound in my ears.

I had the same feeling five years ago when I rang my father in hospital to wish him happy father's day and was told that he had just passed away – a matter of minutes.

When Maddie first told me she had cancer, I couldn't find my voice. It was like I'd forgotten how it worked.

I wonder if she felt that rushing in her ears, felt her limbs and joints dissolve? A breeze blows the curtain aside and for a moment we have a little glimpse.

When being pushed, turn, when pulled, enter...

Maddie and her partner bow to each other and then move to retrieve their bokken (wooden swords) that have been placed at the edge of the mat. Aikido techniques have their deep origins in the sword practice of the Samurai's – as do most forms of Budo (martial arts), so using the swords correctly is a part of the training and part of the grading process. Feeling the weight in your hands, the power of the sword extending out from your centre, the correct posture and balance that comes with precise flowing movements, a strong grip, and a narrow profile; and learning to sense where the opponent's sword will move next.

She holds the wooden sword as if it is a part of her. Her movements become deeper, more sweeping, the sword carving circles in the air that her body follows.

Budo means 'stop the spear'. To defend her body from the cancer Maddie must overcome the fear within herself – for this fear is the opening that allows the cancer to be destructive (allows the spear to enter).

Fear, Maddie says, feeds the *flight* response, and when there is nowhere to flee to, it just feeds the cells' confusion and disarray.

(Thus the koan: how do you defeat the enemy in the mirror?)

Or you could go further than that: fear is that which contracts and separates (the opposite to love, which embraces and joins), so fear is what creates the spear in the world, as well as that which makes it potent.

The wooden 'clunks' as the swords connect and are deflected has an almost musical quality as it is played out across the room.

I have noticed that my ears have become more attuned to the words death, dying, dead, died.

I hear Gail talking about something in the garden and my heart flutters. The newsreaders use it every night on the news. It leaps out at me from the covers of books. Song titles. When I walk past the cemetery I cross to the other side of the street. And the Italian women in black who carry flowers and small vases, when I pass them there is a part of me that reaches out, and another part that speeds up: quick, create distance, in a moment they will be out of sight.

Maddie says that the problem with the way we usually think of cancer is that it sets up a notion of it as something Other to yourself, an alien invading enemy, taking over and destroying you if you don't root it out and kill it. A foreign evil taking up residence in your body.

She says, but the way I understand it, the cancer is simply one of your own cells that has lost the plot, mutated, and is now replicating itself and crowding out the healthy cells, messing up the system.

Normally, in a healthy body, individual cells that are damaged or mutated are quickly cleaned up and neutralised by the immune system. But in an overloaded body, one too stressed from constantly dealing with toxins and not getting steady proper nourishment, or a body-system energetically weakened by an emotional blow (or series of blows), the cancered cell is overlooked. And so it starts to replicate. Gradually becoming, as it divides and replicates (each cell dividing and reproducing again, and each of those cells...), too much for the already stressed immune system to deal with. And things begin to get out of control.

It divides over and over until it gradually forms a tumor. And then if something happens so that one of those cells breaks off, and if it travels through the blood stream without the immune system catching it and cleaning it up, it can lodge somewhere new and then it too starts to reproduce and form another tumor.

When they finish with the swords, they come back to the hand to hand techniques again, although this time she performs one while on her knees, with the Uke standing. Toes flexed under her, she moves even from this position with a sureness and grace, and within a few seconds the Uke is diving forward into a roll to escape injury.

Maddie says, if you see it as a contest, there is the possibility of defeat. If there is the possibility of defeat, then you've already lost in a way, in some part of your mind. That is, if you have a deep attachment to not losing, you have a fear of losing – of being *lost*, and this is a fear that weakens your ability to recreate harmony.

Maddie wants to find a way to view her cancer so that there is no 'defeat' no matter what happens. No 'losing the battle after a long struggle'. No 'succumbing'. Just transition and flow.

A little girl sitting next to me gently prises open an old ice-cream container to fish out some crayons, and begins colouring in a book she has brought with her.

In a suburb just across from this one, I spent a summer many years ago working night shift in an ice-cream factory. The machine I was employed on was called the Vita-Line. There were six of us, and we'd be switched around every half hour onto different aspects of the production line. There would be two people loading the sticks into the stick-inserter as the liquid ice-creams in their moulds started chugging past underneath; one checking their wrappers as they plonked in two neat rows into the cutter; two more packing them into metal frames in four lots of eight so they

From A Short Personal History of the Bra & its Contents c. Beth Spencer, 2008 www.bethspencer.com email: beth [at] bethspencer [dot] com could be boxed; and one strapping down the boxes and loading them onto a skiff for the guys to come and take them to the freezer.

The thing about the job was that if everything was working well, and if everyone was doing their part efficiently, it all functioned beautifully and was guite a pleasant job with time to chat or just get into the rhythm. But if anything was out of balance - if the temperature wasn't set quite right or if the mix was a little wrong, so that the ice-creams froze a fraction too early or too late (so the sticks broke, or tipped and tilted); if the volume of the ice-cream was a little over so it split the wrappers slightly; or if the guys running the machine speeded it up a smidgen to try to increase production, then there would be a cascading effect of stress all down the line. The stick-filler might need to rush about manually fixing the sticks, so then she'd get behind with her job and it was always ten times harder to fill the stick-machine if it was down low than if it was kept topped up. And if things went wrong up that end then the checker would be working furiously to whip out the empty wrappers or the split bags (and watch those fingers!) before they headed up the line to the packers. And if the checker made errors, so that the ice-creams didn't tip and fold to arrive neatly dovetailed for the packers to pick up, then they'd have to frantically work double-time trying to correct this and still get them packed into the metal frames. And if they messed up, then the boxmachine would jam, or the boxes would come out bumpy and hard to strap down and then they too would start to pile up and push against each other while the strapper was trying to squash them into order. With both the packing and the box-checking, like the stick-filling, it was always heaps easier to keep up if you always began with a clean slate, but as soon as things started to pile up, it became harder and harder to fix.

Until I learnt how to become a super-packer (a little trick taught to me by a beautiful calm Japanese student who worked the midnight shift with me), I used to have nightmares of those icecreams inching their way up the slide towards me, becoming less compact and harder to deal with every second that I struggled to cram their slightly mal-adjusted brothers into the box-frame; overwhelming anything I could do until I had to yell for a tub and someone to help clear them out so I could start afresh. Which was always just a temporary solution (creating another chore for later), especially if the real problem was the machine settings in the first place...

Deepak Chopra says that greed is the mistake made by cancer cells. This, and the mistake of thinking they can go off on their own, that they're not part of the whole.

O Sensei says: Opponents confront us continually, but actually there is no opponent. Enter deeply into an attack and neutralise it as you draw that misdirected force into your own sphere.

She steps in, connects, and pivots, so for a moment she is facing in the same direction as the Uke, seeing as he sees.

Her extended fingers interlock with the energy of the air, curling it in towards her navel centre (her Hara), and enclosing and locking the Uke's wrist with it so that when she pivots to continue her journey he is drawn along like a rag doll.

Maddie says the key to this movement is to imagine the ki flowing from your centre and along your arm and extending out through your fingers in a stream, like water in a fire hose, or a mighty river, and to keep moving in the direction of this flow

Maddie is engaging with the problem of her cancering cells on a number of levels. She is using cancer-targeting herbs to reduce their amount and free up her immune system from being

overwhelmed by this; she is juicing to detox her body from years of chemical overload and nutritional abuse; while boosting her immune system so it becomes the equivalent of a superpacker. And she is working at resetting and fine-tuning her overall body-mind, reducing her stress, clearing emotional problems and energy-blocks, and bringing it all back into balance.

(How do you defeat the enemy in the mirror?)

Do not stare into the eyes of your opponent: he may mesmerize you. Do not fix your gaze on his sword: he may intimidate you. Do not focus on your opponent at all: he may absorb your energy. The essence of training is to bring your opponent completely into your sphere. Then you can stand where you like.

As the Uke throws a punch she steps decisively in and to the side, grasping his wrist with first one then both of her hands, and as she pivots his arm is swung down, around and then up into the air, pushing him back off balance; and as she continues to move in a circular step she brings her hands down with the energy of her whole body, like an axe falling and, already off balance, the Uke is propelled forward into a fall. He tucks his head under and rolls out of it and away from her, ending in squat, ready to rise and begin again, from a new position.

*

They bow to each other, and it begins again.

Within the philosophy of Aikido, every conflict is an invitation to movement and change.

Maddie's task is to honor, receive and redirect the opponent's energy – turning it from a negative into a positive. Accepting it as an opportunity to explore and learn.

Thus the focus is on yourself, rather than your opponent, who is regarded as a teacher rather than an enemy. The assumption is that your original position must have been a vulnerable one, in relation to the overall situation, if it left you open to attack, and so you use the energy of the incoming force to move to a new and better position.

Acceptance, here, is an active not a passive attitude, an embracing and harnessing of the potential in the situation, rather than a resistance to it, and nostalgia for the past.

In Aikido, which draws on Eastern spiritual traditions such as Shinto, we are all ultimately one, with no concept of an exterior Other: thus surrender is to the forces of life. A powerful movement.

Maddie says that negative emotions are both caused by and in turn cause energy disruptions in the body, which can contribute to ill health or prevent healing from taking place. So although working on these (with kinesiology, gestalt therapy, journal writing, meditation and so on) is the most challenging and time consuming part of her strategy, she sees it as essential.

And anyway, she says, if I want to get the most out of having cancer, then it's good to use it as a catalyst for spending time on myself in this way – guilt free time, when this kind of thing is usually pushed to the back as a luxury.

She says this is also one of the benefits of using herbs (rather than chemotherapy) because a good formula can work on a number of levels and have complex physical actions while also supporting your emotional growth.

For Maddie being healed from cancer is not about returning to her 'old self', but moving on and creating a new self, a sharper, clearer, better model. Shedding the things that were weighing her down.

She steps around firmly in a flowing circular move, and her body weight cascades over the fulcrum of his twisted wrist like a wave. The Uke crumples to his knees and slaps the mat hard with his free hand.

Maddie says that when a technique is applied correctly, the muscular effort involved in redirecting the Uke's energy so he is thrown (even someone tall and strong) is about the same as required to pick up a house brick.

Bruce is getting a bit restless. He whispers in my ear, 'This looks more like a dance than a martial art.'

Aikido can look deceptively tame at times, or at first. Too slow and polite to be of any use in the real world. Real attackers don't stand just where you want them to stand, or move in predictable ways. But Maddie says that what it does is gradually retrain your whole self – your body, mind and spirit (your attitude, every muscle in your body, your nervous system) – to respond in these flowing, harmonising, but powerful ways whatever the conflict, whatever form it comes in.

She says it develops your sixth sense, so you become aware of the difference between a situation that is flowing and one that has the potential to turn into harm, and can act decisively right at the beginning, rather than after it has escalated or become entrenched.

Maddie also says that her partner might look like he is being a bit pooncey in his attack, but if he is breathing right and centred, he is standing and holding extremely firmly. It would take a great deal of physical strength to push him off balance by normal means.

She slides her hands to grasp the back of the Uke's arm so that her thumbs push neatly into two pressure points, steering him over and down. Another time when he is on his knees with one hand on the mat, she nudges her thigh into a trigger point at the side of his chest and he arcs forward and across onto his stomach as if a secret switch had been flicked.

There are about a hundred students altogether, spread throughout the hall. The only sound they make as they move is a 'Hai' ('Ha-ee') — not like the loud high 'khiaps', of some of the more spectacular martial arts – but a sound from the Hara (the navel centre, or solar plexus), full of breath and body.

I start to feel some of the peaceful pleasure Maddie says she gets from her Aikido practice. Not just an absence of tension, but a positive feeling. A deep grounding. Like walking with your feet in the ocean, or standing on rocks in a flowing stream. Or touching the foliage of a deeply rooted tree.

Maddie says that Aikido, like meditation, is a psychophysiological practice, which changes the *substance* of the body, by changing its connection with everything around it, making it harder to displace, making it more 'solid'.

Each time she completes a technique and before beginning the next, she pauses, breathes, calms and connects herself with her energy again.

Maddie says that you can't simply wish your opponent's or the incoming threat's energy to evaporate or disappear. It exists, and has to be directed —either by you, or by them. Just as cancer can't be *wished* away; it has to be shifted.

I think the first time I saw Aikido being demonstrated was in a park in Bondi, at a peace rally at the start of the Gulf War in 1991. I remember thinking it looked all very well for the Sensei, standing talking to us while effortlessly moving and throwing students left and right as they came at him in various ways, but it didn't seem much fun for the poor guys being thrown over and over again.

As if reading my thoughts, the Sensei said that for the students (or Ukes), once they accept the situation — stop attacking and stop resisting — the sense of being thrown can be exhilarating, like rolling with a wave in the surf on the ocean and standing up again at the end.

Maddie says that taking the part of the Uke is an important part of practice. It allows you to incorporate through your body the lesson of the self-defeating nature of aggressiveness, how much more energy it takes to resist the flow of life, and how vulnerable to injury it makes you. It teaches the importance of knowing when and how to let go completely and surrender, to accept one's mistakes and learn from them. And how much safer and stronger it feels to return to harmony and balance.

The other night Leo and I watched a drama about Napoleon. And later, while I was brushing my teeth, a man on the radio said, 'Battle is always an incoherent state'.

Perhaps this is why it is so important that armies have all that order and precision and uniforms and gloss — a kind of mirage or desperate attempt at making something so disorderly and chaotic and uncertain into something that seems, at least on the surface, to be so controlled and neat and precise and scientific. The beautiful clean public face of militarism. And below this, under this, inside, the crazy mess of lines of men walking towards lines of men each holding out a gun with a bayonet fixed to it. Orderly and precise, right up to the moment when they clash...

Maddie says no-one really knows anything for sure about cancer treatments. All you can do is read the evidence and ask questions, weigh up the options, and then in the end you just have to make the final decision yourself by following your gut instinct, your values and your past experience. You have to use your head as your heart's companion, and then you do what feels right.

The grading challenges are coming to an end. The senior students who have been wandering around, observing carefully, have moved up to join the Sensei at the front of the dojo to confer about the results.

Maddie and her partner bow to one another, then kneel at the side of the mat to await the assessment.

She says above all Aikido is about being flexible – about not ruling out any option.

The best strategy relies upon an unlimited set of responses.

She has decided for the moment to say no to chemotherapy in order to explore her options, because as long as it's on the table it dominates and contaminates all other possibilities. But she sees this as a strategic decision, not a law that she must now be bound to forever. She says that down the track if chemotherapy *felt* right, she would certainly consider it. And then adds (before Bruce can start to look too hopeful), just as she might also consider bloodletting, if that was still in practice.

Best medical practice. What is routine and considered essential in one era is deemed barbaric in another. How do we know that this love-affair with chemicals and poisons, this fashion for waging war on the body in the name of health, won't likewise pass away one day?

Maddie makes her way to the front. When her turn comes she steps forward and bows (left and right palms joined, heart and head) and receives her black belt.

I touch Bruce's hand, and his fingers curl around and enclose mine. His hand is so warm, and comforting. I feel awash with him in a sea of pride and emotion, and helpless: the watchers on the benches, the family and friends.

Notes on the text of 'The Art of Peace'

The photograph by **Horst** is called 'Mainbocher Corset', 1939. (Mainbocher was the designer, and it was photographed in Vogue's studios in Paris.)

The quote from **Audre Lorde** is from *The Cancer Journals* (San Francisco: Spinsters Ink, 1980) page 77.

The Pulitzer Prize winning photograph by **Huynh Cong (Nick) Ut** is of Kim Phuc Phan Thi and others running down a road near Trang Bang after an ARVN napalm attack on villages suspected of harboring NLF fighters in June 1972.

Regarding **the WITCH actions**, see the selection of leaflets and hexes in Robyn Morgan, ed. *Sisterhood is Powerful: An Anthology of Writings From the Women's Liberation Movement* (NY: Vintage, 1970), 538-540. Also see the press release '**No More Miss America**: August 1968' in the same publication (521-524) regarding the 1968 protest in Atlantic City and the Freedom Trash Can where bras were trashed.

Prince's song '1999' was from the album 1999 released in 1982.

The **Cairns Midi-burning event** was cited in Alexandra Joel, *Best Dressed* (Sydney: Collins, 1984) p 176.

'Last night I dreamed...' was a series of Maidenform foundation-wear advertisements from 1949-1969. There were over 200 'I dreamed' themes, including two shot by Richard Avendon (the most famous of which is the 'I dreamed I was Wanted' poster). The series was judged by *Fortune* magazine as one of the top five classic ad campaigns of all time. See Tom Reichert, *The Erotic History of Advertising* (NY: Prometheus Books, 2003) 142.

Regarding the chemical legacy of the Vietnam War, see *Battle's Poison Cloud* [documentary] Directed and produced by Cecile Trijssenaar, Tambuti Films, 2003.

For **Dow's history of manufacturing chemicals used in war**, see for instance: 'Dow: Pesticide Action Network North America World Bank Accountability Project.' Report at *PANNA: Pesticide Action Network North America* website. 2 Mar. 2006

<http://www.panna.org/resources/documents/dow.dv.html>. This extensively referenced article states: 'Some estimates have put the number of dioxin-related deformities of Vietnamese children related to spraying of Agent Orange at 500,000.' Also see 'Dirty Dow', *Students for Bhopal* website. 2 Mar. 2006 http://www.studentsforbhopal.org/DirtyDow.htm

For a **history of chemotherapy and a critique of its routine use** without evidence of effectiveness (as in the case of most solid tumor adult cancers, including breast cancer), see for instance: Samuel Epstein, *The Politics of Cancer Revisited* (NY: East Ridge Press, 1998); Ralph Moss, *Questioning Chemotherapy: A Critique of the Use of Toxic Drugs in the Treatment of Cancer* (NY: Equinox Press, 1995); Don Benjamin, 'The Efficacy of Chemotherapy for Cancer.' *Cancer Information Support Society* website. 23 Oct. 2001.

<http://www.webone.com.au/~maxwell/ciss/documents/chemo2.html>; Sharon Batt, Patient No More: The Politics of Breast Cancer (Original publication, Canada 1994; Australian edition with additional commentary by BCAG [Aust.], Melbourne: Spinifex, 1996), Part 2, 'Chemotherapy: Poison', 95-114; 'Cancer : Chemo Therapy? What doctors say about Chemo Therapy ' excerpts from World Without Cancer by Edward G. Griffin. Curezone, The Cancer Homepage. 10 Oct. 2003 < http://www.curezone.com/diseases/cancer/chemo_therapy_facts.asp>; and Fenella Souter, 'Desperate Measures: We're forever reading about "advances" in cancer drugs, and Big Pharma grows fat on the profits, yet cancer mortality rates have changed little over time. Just what is the truth about conventional treatments like chemotherapy?' *The Good Weekend*, (magazine supplement to *The Sydney Morning Herald* & *The Age*) Oct. 15, 2005.

David Greenberg's 1975 articles in the *Columbia Journalism Review* and the *New England Journal of Medicine* first used a comparison between **the war on cancer** and the Vietnam War in terms of the 'light at the end of the tunnel' claims (see in Moss, *Questioning Chemotherapy*, 29-30). Moss uses an analogy to the way chemotherapy risks 'destroying the village in order to save it' on page 23. Irwin Boss (cited by Moss, page 22) referred to the 'macho' nature of the profession of oncology. Sharon Batt (1994/1996, passim) also explores the use of **war metaphors** in cancer therapy. Also see my article 'Policing AIDS: Social Control and Sexual Disease' *New Doctor* No. 46 (Dec. 1987), for an analysis of the use of war metaphors in infectious diseases epidemiology and the effects of this metaphor on health policy.

Figures for sales of Adriamycin in 1974 and chemotherapy agent sales figures for 1983-7 cited by Batt (1994/1995 as above), 252. The global sales figure for 1997 cited by Kenny Ausubel, 'When Healing Becomes a Crime' *Tikkun Magazine*, 12 Jun. 2001. 6 Jul. 2005 http://curezone.com/art/read.asp?ID=91&db=5&C0=779>

For information about the 'revolving door' between the cancer institutions and the pharmaceutical corporations, see Epstein (1998 and 2000, as above).

Regarding the strategy of '**Fear and Cheer**' and media reporting of cancer research, see Sharon Batt's chapter on this in *Patient No More* (1994/6) Part 3, 'Scoops', 268ff.

For specific **criticisms of study protocols for chemotherapy**, see Ralph Moss (1995). The quote from Moss that begins, '**It amazes me...**' is from page 9.

The **increased death rates** from non-cancer causes such as heart disease on overall mortality rates after cancer treatments is raised by Don Benjamin (various articles available at the CISS website, see above.)

German statistician **Ulrich Abel's** conclusion that any efficacy of chemotherapy for breast cancer, which is evident mainly in premenopausal women, could be due to its destructive effects on ovarian function is cited by Sharon Batt (1994/1996) 106.

Regarding **the allocation of funding for prevention**, Epstein stated in 2000 that 'The NCI [National Cancer Institute] currently allocates less than 3% of its budget to primary prevention, while the ACS [American Cancer Society] allocates less than 0.2%.' Samuel Epstein, 'Letter to the Editor', *Journal of the American Medical Association* Vol. 284 No. 4 (July 26, 2000).

Regarding **the rising incidence of childhood cancers**, Bette Hileman states, 'According to a recent study from the National Institute of Environmental Health Sciences (NIEHS), childhood cancer incidence has risen 1% a year since the early 1970s.' From 'Children's Health' originally published in *Chemical & Engineering News*, 7 Apr. 2003, 23-26. 11 Nov. 2004 http://www.awakenedwoman.com/childrens_health.htm>.

Regarding **environmental factors** in the development of cancer, see for instance, Epstein, *The Politics of Cancer Revisited* (1998, as above), and his extract 'Richard Doll, An Epidemiologist Gone Awry', from *Stop Cancer Before It Starts: How to Win the War On Cancer, Cancer Prevention Coalition Website*.17 Feb. 2006

<http://www.preventcancer.com/losing/other/doll.htm>. Richard Doll is the epidemiologist responsible for the often quoted '4%' figure regarding environmental and occupational causes of cancer. In this article Epstein examines a recent statement in which Doll admitted that apart from cancers principally caused by hormones, 'Most of the other cancers throughout the body are induced by exposure to chemicals, often environmental ones' – a statement that Epstein says has been 'ignored by cancer establishments worldwide'. Also see: 'Examining the Environmental Links to Breast Cancer: Frequently Asked Questions' *The Breast Cancer Fund*, 1999. 10 Oct. 2000 http://breastcancerfund.org/faqs.html; Alle C. Halle, 'There is No Cure for Cancer,' from an article published by *The Stranger* in May 1996. *Feminist Women's Health Centre* website. 4 Sept. 2000 http://www.fwhc.org/nocure.htm; Megan Williams, 'Breast Cancer and the Environment: The Chlorine Connection', reprinted from *Toronto Now*, 26 Nov.1992. 4 Sept. 2000

<http://www.voiceofwomen.com/articles/breastcancer.html>; Sharon Batt, 'They make the chemicals, they run the treatment centers, and they're still looking for "the cure" -- no wonder they won't tell you about breast cancer prevention.' Sierra Magazine. 4 Oct. 1999. Posted to the Breast Implants Support Email List <ilena@san.rr.com>; and various documents at *The Cancer Prevention Coalition Website* <http://www.preventcancer.com>.

For example, Halle (above) states that 'In 1964, the World Health Organization concluded that 80% of cancers were due to human-produced carcinogens; in 1979, the National Institutes of Health identified environmental factors as the major cause of most cancers.' While Megan Williams (above) cites a recent study carried out in Hartford, Connecticut that 'found women with breast cancer to have 50 to 60 percent higher levels of organochlorines, including PCBs, in their breast tissue than women without breast cancer'.

Regarding **non-toxic therapies**, see for instance, Ralph Moss, *Cancer Therapy: The Independent Consumer's Guide to Non-Toxic Treatment and Prevention*. NY: Equinox Press, 1992/1996; Don Benjamin, 'Evaluating Cancer Therapies and Developing a Cancer Program', Extracts from a presentation at the *Annual Cancer Seminar* organised by the Cancer Support Association of WA Inc., Cottesloe, WA, Saturday 3 May 2003. 15 Feb. 2005 http://www.ciss.org.au/documents/Evaluating%20Therapies%20Developing%20a%20Program0 31b2.rtf>; and Ian Gawler, *You Can Conquer Cancer* (Melbourne: Hill of Content, 1984 / 1991).

Regarding **conflict of interest** and sponsorship by chemical companies of **Breast Cancer Awareness Week**, see Sharon Batt's 1999 article ('They Make the Chemicals...' as above).

Petrea King's book, written with Wendie Batho, is *Spirited Women: Journeys with Breast Cancer* (Sydney: Random House, 1995).

The quotes from *A Cancer Source Book for Nurses*, edited by Claudette V. Varricchio (Eight edition, Mass: Jones & Bartlett Publishers, 2004) are from page 126.

On **whether breast cancer is a medical emergency**: see ABC Radio National's *The Health Report* and *Life Matters* 'Breast cancer special' broadcast 3 May 1999, with interviews with Dr. John Forbes, Professor of Surgical Oncology, University of Newcastle and Professor Sally Redman, Director, National Breast Cancer Centre and others. Forbes, for instance, commented how the notion of 'emergency' in relation to breast cancer is unhelpful and creates anxiety, while Redman said that 'The guidelines, NH&MRC guidelines, suggest that if you wait for a couple of weeks, that won't be a problem, and I think it is really important that women take the time to make a decision that they're happy with.'

Regarding **cancer screening and the complex issues surrounding early detection**, see 'Cancer Screening: Benefits and Harms', a three-part series produced by Dr Alex Barratt, Associate Professor of Epidemiology at the University of Sydney for *The Health Report* and *Life Matters*, ABC Radio National, broadcast on 22 & 29 Aug. and 5 Sept. 2005. Transcripts (accessed 26 Aug. 2005) are also available at

http://www.abc.net.au/rn/talks/8.30/helthrpt/stories/s1440410.htm>. Also see journal articles by Prof. Gil Welch, author of *Should I Be Tested for Cancer? Maybe Not and Here's Why* at his homepage (accessed 18 Nov. 2005) at http://www.vaoutcomes.org/welch.php>.

For an example of the 'getting better all the time' mantra, see Susan M. Love with Karen Lindsay, *Dr Susan Love's Breast Book* (Original edition, 1990, Mass: Perseus Books, 2nd revised edition, 1995). In her chapter on Radiation therapy (402-415) the only references she cites are

two studies, one showing an increased incidence of death from heart disease following radiation therapy, and another showing a higher incidence of other kinds of cancer after five years. However she then says 'We've come a long way since those days', and proceeds to describe how the treatments have been refined, concluding by the end of the chapter that 'radiation remains one of our most valuable tools in the treatment of local breast cancer.' She doesn't, however, cite any studies or figures to support this statement.

The prominent doctor who made the disparaging comment on Oprah about **the mammogram metastudy** not being a 'real study' and conducted by statisticians (not doctors), was Dr Susan Love.

The **retreat** Maddie goes on is at the Gawler Foundation. If she was in NSW, she would probably go to one run by Petrea King.

The **doctor** Maddie sees who makes the comment about the main difference being in the way her patients die, is modelled on Dr Megan Mathews, whose practise is in the Blue Mountains in Sydney. (Personal telephone interviews, 1 Nov. 1999, and 6 Mar. 2006.)

Maddie's rationale for giving high priority to working on her **emotional issues** is adapted from Gary Craig's notion that 'The cause of ALL negative emotions is a disruption in the body's energy system.' See 'Emotional Freedom Technique', information and free downloadable manual available from <http://www.emofree.com>. Also see the landmark study by D Spiegel, et al, 'Effect of psychosocial treatment on survival of patients with metastatic breast cancer,' *The Lancet*, Oct. 14, 1989. For more about the physiological basis of emotion, see for instance the work of Silvan Tomkins in Eve Kosofsky Sedgwick and Adam Frank, *Shame and Its Sisters: A Silvan Tomkins Reader* (Durham: Duke University Press, 1995), and Candace Pert in *Molecules of Emotion: Why You Feel the Way You Feel* (original publication 1997, NY: Scribner, 2003), as discussed in chapter 3 of my PhD exegesis *The Body as Fiction/Fiction as a Way of Thinking* (University of Ballarat, Australia, 2006) and available on my website at http://www.bethspencer.com/body-as-fiction.html.

Deepak Chopra's comments about **cancer as a 'mistake' of cells** are from *The Book of Secrets: Unlocking the Hidden Dimensions of Your Life* (NY: Three Rivers Press, 2004). 'Why is greed good for us and yet spells destruction at the level of our cells, where greed is the basic mistake made by cancer cells?' (11) and 'The choice to live in separation -- a choice no cell ever makes unless it is cancerous...' (25). Also see, for instance, Grace Gawler, *Women of Silence: the Emotional Healing of Breast Cancer* (Melbourne: Hill of Content publishing, 1994). Gawler writes, 'Remember cancer is not a foreign invader; it is the body's own cells that have grown out of control so they are not replicating to the body's blueprint' (72).

Martin Luther King Jr.'s comment regarding the use of '**massive doses of violence**' comes from his speech 'Beyond Vietnam,' *Address delivered to the Clergy and Laymen Concerned about Vietnam*, Riverside Church, New York City, 4 Apr.1967. 2 Nov. 2005 <http://www.vietnamwar.com/beyondvietnammlk.htm>.

The man on the radio saying 'Battle is always an incoherent state' was Robert Shwartz, in an interview with Michael Toms for *New Dimensions*, PBS, California, broadcast on ABC Radio National, Feb 2006.

The comparison between chemotherapy and **bloodletting** was first raised by J. Cairns in his 1985 article in *Scientific American*, cited by Moss, *Questioning Chemotherapy*, 47. Cairns noted that studies are conducted comparing different combinations of chemotherapy drugs, or drugs given at different stages of the disease, or in different doses, but rarely ever conducted with controls who are not given any form of chemotherapy – this being similar to what happened with the practice of bloodletting in the 19th century, where no-one in the orthodox medical community 'suggested that these patients might actually have done better if they had been left alone.'

The direct quotes from Morihei Ueshiba (O Sensei), the founder of **Aikido**, are taken from the selection of quotes from John Stevens, *The Art of Peace* that is available at <http://www-cse.ucsd.edu/users/paloma/Aikido/artpeace.html> (accessed 15 Nov. 2005). During the scenes of the Aikido grading, lines in italics are also from O Sensei and this source, with the exception of the story re the student asking O Sensei how he never loses his balance, which comes from Douglas Stone, et al, *Difficult Conversations: How to Discuss What Matters Most* (London: Michael Joseph, 1999) 122.

The description of **O Sensei** as able to 'disarm any foe, down any number of attackers, and pin an opponent with a single finger' comes from the introduction to *The Art of Peace*, by John Stevens, reproduced at *Aikido Information Page* (accessed 6 Nov. 2005) http://www-cse.ucsd.edu/users/paloma/Aikido/morihei.html.

The comment Maddie makes about the amount of muscular strength required being equivalent to picking up a housebrick is from the brochure for Iwama Ryu Aikido Australia, written by Michael Field Sensei.

The definition of **Budo** comes from Shiro Matsuoka, 'Dietary Life of "Do" *Aikido Doshinokai Dojo website* (accessed 5 Feb. 2006) <http://www.doshinokai.com/macroarticle1.htm>.

Other sources include Thomas Crum, *The Magic of Conflict: Turning a Life of Work into a Work of Art* (NY: Touchstone, 1987); Claude St Dennis, *The Power of Aikido* (NY: Lancer Books, 1965); Ullana Twahn, 'The Field Aikido Centre promises a solution for Women looking for true Self-Defence' (accessed 4 Nov. 2005) http://www.martial.com.au/aikido/articles/women.html and various other articles available from <www.martial.com.au>.

Thanks also to Sensei Damian Crowley for an introduction to Aikido in 1997; and to Chris Noller for his comments on the draft of this chapter, and to Scott, Susie, Gillian, Zeb, Dave and Mark from the Ballarat (Grampians) Aikido Dojo for discussion and demonstration.

Thanks to Angelo Druda and Peter Zhang, TCM (**Traditional Chinese Medicine**) practitioners for discussions about herbs and the use of both herbs and chemotherapy in Chinese hospitals. Also see the comment by Alan Bensoussan, a Chinese doctor who does research at the University of Western Sydney Macarthur in Australia: 'You must remember these [herbs] are routine medicines used in very large public hospitals in China and Korea at least. Western medicos would prefer to wait and see until the "active ingredient" has been found, isolated, concentrated and standardized, but I suspect they'll be waiting a long time to find any single pharmaceutical agent that matches the benefit of a whole, albeit complex, Chinese formula. We don't really have good models in pharmacology to explore the interaction of a large number of potentially active substances. Yet in traditional terms these formulas are designed on the basis that, for example, one herb will support the action of another whilst detoxifying a third.' 'Alternative Medicine,' *The Why Files, Science Behind the News*, 1998, University of Wisconsin, Board of Regents, accessed 6 Mar. 2006 <htps://whyfiles.org/076alt_med/6.html>.

Thanks also to the many people who have discussed these issues with me over the past ten years, or whose writing or stories have in some way influenced and inspired this narrative.