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SANTA CRUZ

TRIAL BY MOUNTAIN:
SUFFERING AND HEALING IN DIFFICULT LANDSCAPES

A dissertation submitted in partial satisfaction
of the requirements for the degree of

DOCTOR OF PHILOSOPHY

in

HISTORY OF CONSCIOUSNESS
with an emphasis in FEMINIST STUDIES

by

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March 2012

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ABSTRACT

Lindsey Collins

Trial by Mountain: Suffering and Healing in Difficult Landscapes

This dissertation addresses the intersection of illness and landscape in metaphors of climbing mountains and cancer. In recovery climbs, events held to raise money and awareness for women’s cancers, climbing mountain peaks and summits figures as a journey similar to a struggle with cancer. For these metaphors to be intelligible as healing and hopeful requires the Euro-American histories of investing in mountains as wild, consecrated, risky places.

To understand the development of recovery climbs, which began in the late 1990s, I first contextualize Western women’s climbing within a larger mountaineering history in which men are the dominant players. By paying attention to the gendered dimensions of mountaineering beginning in the nineteenth century but focusing on the last several decades, I describe what kinds of shifts have taken place in the last 30 years to make recovery climbs possible. I then describe the development of wilderness therapy in the 1990s. A feminist and still-growing therapeutic model, wilderness therapy creates what I call a slow wilderness, in which risk is made manageable and contained, and fast and risky aesthetics, coded as masculine, are traded for ecofeminist tropes of mutuality, nurturing, and femininity.

These climbing practices go beyond metaphor. I argue that recovery climbers actively make permeable bodies and landscapes through their interactions. I examine
several different models of contemporary cancer activism to argue that these different organizations’ embodied practices matter and create ecologies, some of which are more life-sustaining, just, and productive for understanding illness than others.

Finally, I follow events organized by The Breast Cancer Fund and The HERA Women’s Cancer Foundation to explore the ways that metaphors of rocks and climbing inform people’s experiences of cancer and trauma. I use lines, problems, horizons, and pressure as tropes that provide a materially embodied way of engaging cancer climbs. My phenomenological account, informed by queer theory, argues that recovery climbs are embodied practices of resilience and interrelation. I propose oncogeographies as a different ecological model in which we might better relate to illness by working with the limits and obstacles that illness brings, rather than repudiating them in favor of survivorship narratives.
For Adele Cagle, my grandmother
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INTRODUCTION

In “On Being Ill” (1930), Virginia Woolf pondered the absence of sickness, or the “daily drama of the body,” as a great literary theme,

Considering how common illness is, how tremendous the spiritual change that it brings, how astonishing, when the lights of health go down, the undiscovered countries that are then disclosed, what wastes and deserts of the soul a slight attack of influenza brings to view, what precipices and lawns sprinkled with bright flowers a little rise of temperature reveals, what ancient and obdurate oaks are uprooted in us by the act of sickness. (195)

For Woolf, illness is an emergence of new landscapes, the discovery of “wastes and deserts” and “obdurate oaks,” more so than a mere subtraction from or attenuation of life. The uprooting, destructive capabilities of illness do not diminish its powers to generate new geographies. This dissertation grapples with the knotted, tangled relations between sickness and landscapes. Woolf’s landscapes of sickness are metaphoric, in one sense, as are the persistent narratives of cancer in terms of rocks and mountains, and ascending mountains in terms of cancer, in climbs organized to cope with the disease. But in another sense, Woolf’s landscapes are not metaphors. They gesture to different states of being that are quite real to the sick person, but, Woolf argues, due to the poverty of language to express illness, these landscapes remain untranslatable to the world of the healthy. Similarly, for people climbing with and against cancer, stories of rocks and illness are not just metaphors to bridge the gulf between sickness and health. In the worlds I describe, healing and sickness and inner, human and outer, non-human landscapes embrace one another to the point at which they become almost indistinguishable. The connective tissues between
landscapes and sickness are themselves alive and generative. “Metaphor” isn’t quite the right term to describe these relationships.

Two scenes of cancer and what I call “difficult landscapes” provide a way into these geographies. Dr. Jerri Nielsen, an American physician who decided to work at the Amundsen-Scott South Pole Station in Antarctica to cope with a protracted, bitter divorce and custody battle, got breast cancer in the dead of the Antarctic winter. Without any other medical help or adequate medical supplies, or a way to get help in or Nielsen out of Antarctica, Nielsen became the object of media attention in 1998 when she had to perform her own biopsy and give herself chemotherapy treatments. Suddenly, the world of Antarctic extremes that had been the basis of her new life and self became the landscape of her imminent death. In her story, the icy landscape is an intimate part of her cancer itself. As her chemo starts to produce side effects, she writes, "Everywhere I went, I felt like I was walking through neck-deep Jell-O…It was getting hard to tell the difference between fatigue caused by the chemo and what was normal for the Pole at this time of year… Along with the effects of sensory deprivation, we were experiencing physiologic altitudes of more than eleven thousand feet for days at a time…The sensory deprivation and chronic hypoxia were also affecting our vision, and our tempers" (303). But Antarctica’s role as healer, rectifier of wrongs, and terra nullius where one can begin anew isn’t suddenly reversed upon Nielsen’s cancer diagnosis; Antarctica doesn’t become an oppressor. Instead, it becomes an intensified version of itself, an agent of healing with a deadly edge. The Antarctic landscape, like cancer, by virtue of its ability to kill, becomes imbued with
meaning that draws Nielsen’s ailing, human body and the icy, fierce winter landscape into a closer embrace. Nielsen writes, "Every small breath was a triumph against nothingness. You were forced to recreate yourself again and again or risk being swallowed in the emptiness, and to do that you had to know what you were made of.” The landscape’s ferocity and chemotherapy produce similar effects in Nielsen’s body. How does one distinguish between inner and outer landscapes anymore in an environment like this? Nielsen continues, “The route to the Pole was, after all, an inner journey. Antarctica was a blank slate on which you could write your soul" (148).

Antarctica, of course, is far from a blank slate, even in Nielsen’s text. It is instead inhabited by the histories of polar exploration, international competition, and conquest. Nielsen’s heroes are the polar explorers Frederick Cook and Dr. Edward Wilson and Robert Falcon Scott, both of whom perished during their 1912 Antarctic expedition. To comfort her during her chemotherapy, Nielsen’s friend reads her passages from Shackleton's *Endurance*. Nielsen’s intertextual engagement with Antarctic histories positions her as another explorer in the great lineage of Amundsen and Shackleton, a writing practice so common as to be virtually embedded in the Antarctic landscape itself.¹

¹ In *Gender on Ice: American Ideologies of Polar Expeditions*, Lisa Bloom argues that in polar expedition narratives, “Even when blank spaces have been filled, cartographically and discursively, blankness continues to hover” in the form of erasing the labor of nonwhite explorers who accompanied the expeditions (2). Other erasures are common in polar exploration stories, like erasing one’s prior life in order to write a new life story.
But before I describe the dense histories of exploration, conquest, and mapping that make modern recovery climbs possible, I want to put Nielsen’s story alongside another story of suffering and healing in wilderness. Sean Patrick, a successful businesswoman and climber in Aspen, Colorado, founded the HERA Foundation after she was diagnosed with ovarian cancer in 1997. Like Nielsen, Patrick was a highly educated, white, upper middle class woman, by all accounts competitive, willful, vigorous, full of life, and truly inspiring. Like Nielsen, Sean Patrick eventually succumbed to her cancer in 2009. HERA’s website foregrounds Sean’s frequent statement: "When you're out there on a ledge and there's a storm rolling in, you can't just cut the line. You have to keep on going and fighting" (HERAFoundation.org). The ledge of Sean’s beloved climbing crags is the edge upon which, braced, one encounters ovarian cancer, the rolling storm. It is crucial that in Sean’s allegory, this person on a ledge is a climber. One is not caught there in a storm by accident or force. A climber is on a ledge because they want to be, because of the joy, beauty, difficulty, and risk that a ledge presents, and for the view and perspective that it can give. Like the polar explorers for Nielsen, the climber on a ledge encountering an impending storm is a climber exactly because of this willingness to put oneself at risk. HERA’s 2009 poster for its annual Climb4Life event illustrates the power of the mountain precipice as a metaphor for battling illness (Figure 1). A woman stands on a jagged summit, beaming light from her outstretched hand. The woman faces away from us, looking out upon a horizon we can’t see, suggesting that her accomplishment is not standing on top the summit itself. Rather,
Figure 1: The convergence of climbing and claiming in HERA's Climb4Life poster art, 2009
her stance suggests the impetus to move forward, upward, beyond, to see beyond the
summit to different places. And, for this image to be intelligible as healing and
hopeful, for it to articulate so well to ovarian cancer, requires the Euro-American
histories of investing in mountains as wild, consecrated, risky places.

I bring Jerri Nielsen and Sean Patrick’s stories together here for two reasons.
One is that they are both about the synching of healing and suffering, about putting
oneself at risk in order to find a path of coping and recovery. But they are not just
stories about an unbounded merging with nature, or about a simple exchange in which
a mute wilderness comforts the ailing human. These are also stories about significant
constraints, about not being able to just “cut the line,” or hop a plane from a glacier
back to sophisticated medical facilities. They are about not being able to opt out of
feeling badly and having to lose the illusion of a continuous or safe lifeline. As I will
show in Chapter Three on cancer activism, constraints are what make certain ethical,
ecological forms of relation in cancer activist worlds possible, worlds in which it
becomes important to care about how cancer permeates all of us through our
environmental links. A different and opposing model, prevalent in many breast cancer
organizations, promotes a message of no constraint (we can cure cancer, and soon,
and people in remission are “survivors,” not people living with a chronic disease). In
the recovery climbs I describe, constraints and limitations may be continually worked
through or even disavowed—if one can make it up this part of the climb, one can
learn to get through cancer, for example. Nevertheless, constraints as productive
forces that shape situated, naturecultural relations are a vital part of these stories of
cancer and climbing. Constraints, as Maria Puig de la Bellacasa has argued, are “not negative aspects of a practice,” but instead enable practices. Drawing on Isabelle Stengers’ work, Puig de la Bellacasa argues that constraints are what make relations between objects and subjects specific. Thus, “practices develop an ethos relative to material constraints, and these relations create situated possibilities and impossibilities” (162-163). In other words, constraints give shape, direction, and specificity to ethical relations. Drawing on the work of Sara Ahmed, I show in Chapter Four how constraints provide an important foundation for thinking phenomenologically about queer embodiment.

My second reason for bringing together Sean Patrick and Jerri Nielsen is to make the argument for cancer as another kind of difficult landscape. Thinking of cancer geographically, as a landscape as much as a disease, is one major aim of this project. The places where recovery climbs take place—The Breast Cancer Fund’s annual climb of Mt. Shasta in Northern California, a climb to support the HERA Foundation in the Annapurna Range of the Nepal Himalaya, and HERA’s annual Climb4Life around Salt Lake City, Utah—are difficult, to varying degrees. They are places difficult to get to, and once there, minor accidents can mean big problems. Moving in landscapes like this means lots of physical exertion, even when actual movement is incremental. Many people have produced excellent analyses of the history and power of the movement of walking. However, one of my tasks here is to

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differentiate between the fairly gentle, steady rhythm of walking, or a well-regulated event like Susan G. Komen’s Race for the Cure, and the more risky, unsteady movements of mountaineering and climbing. Walking and mountaineering share important histories, particularly pilgrimage traditions. But the recovery climbs that I describe depend upon certain levels of risk, and this difficulty, and the phenomenology of its movements, matters.

I began thinking about landscape and ideology through sites of aberrant nature—nuclear test sites and bombed-out deserts in Nevada. I became interested in nuclear protest movements, and asked why these protests so frequently involved hunger striking to protest environmental degradation. How did the spectacle of self-starvation, especially when the person starving was a woman, interact with a damaged landscape? What kinds of convergences—disturbing or otherwise—do starving women form with nature, especially when women and Nature have such a long history of being equated with one another? Rebecca Solnit’s *Savage Dreams* and *Wanderlust: A History of Walking* have helped me to think through these strange pairings of gender, land, and militarism. Though *Savage Dreams* describes the nuclear landscapes of Nevada and *Wanderlust* focuses on the physical act of walking, stories of landscape and human bodies are linked across Solnit’s texts. Solnit writes of her own introduction to the nuclear protest movement, “that utter abstraction of the Arms Race and its sister the Cold War only became believable for me when they acquired a location, a landscape” (15). Yet in Solnit’s text, nuclear militarism’s reality is not only wed to the Nevada desert’s heavily guarded test sites, but also to
the reality of the human body’s needs and degradations in a militarized desert.
Protesting nuclear militarism at test sites entails thirst, heat exhaustion, exposure to radioactive dust, and difficult travel, all of which illustrate that nuclear test sites are imperial “zones of sacrifice” both in terms of the landscape and the people’s bodies who inhabit or protest in these landscapes (Kuletz 7). I have been interested in how gender changes the valence of these zones of sacrifice, and what calling on the links between nature and femininity (in Mothers’ Day nuclear protests, or in groups like the Princesses of Plutonium) accomplishes.

But perhaps personal tragedy was what turned my work toward wilderness recovery, or traveling through landscapes considered wild to heal from different kinds of trauma. In the fall of 2003, I received a call from a good friend from high school, who told me that her twin sister, who had been bulimic for the last ten years, had died of a heart attack. My friend kept repeating that when she found out her sister had died, she had just crossed the finish line of the Chicago marathon, and that she couldn’t believe her body was at its very limit while her sister’s was, too, hundreds of miles away, at its own limit. This image haunted me: these two bodily experiences, of running to the brink of exhaustion and starving to the point of cardiac failure, resonated disturbingly with one another. I began seeing stories that resonated everywhere: John Muir, the great American naturalist, went on a walk from Indiana to Florida to Yosemite after an accident that left him blind in one eye. Beginning in 1983, Ffyona Campbell, a 16 year-old English woman, walked 20,000 miles in eleven years, in part to cope with her sister’s anorexia. The literature of long treks through
wilderness is full of grief and sadness. Mountains, considered some of earth’s last great perilous and unknown places, are ideal for this kind of emotional workout.

The events I call recovery climbs are climbing and mountaineering events to raise money and awareness for women’s cancers and women survivors of trauma. I have looked at some of the most predominant organizations running courses and events of this nature. Though Outward Bound and NOLS (the National Outdoor Leadership School) are the most well known wilderness course providers in the US, their work overlaps with but doesn’t constitute the kind of healing project I am interested in. Instead, I look at courses that make healing and gender an explicit part of their mission, either by focusing on women’s cancers (The Breast Cancer Fund in San Francisco and HERA in Denver) or women-only cancer and trauma survivors’ courses (The Women’s Wilderness Institute in Boulder, Colorado).³ Understanding recovery climbs, which began in the late 1990s, requires looking into their constituent worlds. I think of this project as an act of assembly, rather than a disentangling of discourses. Bringing together these different worlds has meant working with different sites, in Colorado, California, and Utah, briefly, rather than sustained fieldwork in just one site. I volunteered with staff at The Women’s Wilderness Institute in Boulder one summer. The following year, I accompanied an expedition that had the goal of raising awareness about HERA, from Boulder to Annapurna IV in Nepal as a

³ The Women’s Wilderness Institute uses the word “survivors” in its course titles. In other instances, I use the word “survivor” to reflect the ways people talk about their experiences with cancer, even in the absence of an official course title. Survivorship is a contested term: organizations like Breast Cancer Action point out its connotations of moral victory, in which people who die of cancer become something like the defeated or losers.
scouting trip for a subsequent attempt of Annapura. Most recently, I participated in HERA’s Climb4Life in and around Salt Lake City, Utah. Though I refer to “women’s recovery climbs,” this does not always mean that men are excluded. The Women’s Wilderness Institute’s courses are strictly women-only, but men were well represented in the HERA climb and in Nepal. Also, I use “recovery climbs” to designate events that both do and don’t have people with cancer or trauma survivors participating. The Women’s Wilderness Institute’s breast cancer and trauma survivor’s courses are specifically women-only. But in the Annapurna IV and HERA climbs, none of the women I met had personally had ovarian cancer, but were instead climbing in support of HERA and a friend or family member’s experience with cancer. Thus, the term “women’s recovery climbs” is less concerned with the exact boundaries of disease and recovery and more about the constitution of shared worlds of healing and climbing, relations mediated and invigorated by gendered forms of engaging with wilderness.

In my first chapter, I will contextualize western women’s climbing within a larger mountaineering history in which men are the dominant players. By paying attention to the gendered dimensions of mountaineering beginning in the nineteenth century but focusing on the last several decades, I will frame my discussion of why mountains currently have so much cultural capital, particularly the Himalayan peaks

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4 “Raising awareness” is a term I work through in Chapter Two on cancer activism. It is an expression with limitations. However, it echoes what many cancer climbers say about their purposes and goals, and I use it here to both give a sense of what these groups look like, and also to hold in tension questions about what it is that these climbs actually “do.”
of Nepal and Tibet, and describe what kinds of shifts have taken place in the last 30 years to make the phenomenon of the recovery climb possible. I foreground the category “women” because women climbers themselves use this terminology. In this context, “women” denotes, in part, the unquestioned, stable, unified identity still operating in some aspects of Anglo-American feminist discourse. This is particularly true in the realm of sports and fitness culture, triathlons and marathons organized for women, and businesses like Curves, the all-women fitness centers, to name just a few examples. In these sites, the inherent commonality and power in “women’s experience” is the implicit (and often explicit) rallying cry to inspire physical activity or to celebrate women’s athletic accomplishments. Leading Out (1992), an anthology of women writers’ essays on climbing, demonstrates this effort to celebrate physical strength and build bridges between public and private realms. The introduction reads, “The physical strength, courage and organizational ability needed to bear children and raise a family are similar to those required to orchestrate an expedition to a remote Himalayan peak” (xiv). I use the category “women” both to describe the relatively stable gender identities still at work in mountaineering culture and also to describe the possibility of affinities formed through recovery in/through mountains. Feminist theorists such as Chela Sandoval and Joan Scott have worked to undo a feminist politics based on “experience,” which “reproduces rather than contests given ideological systems” (Scott 400). Part of describing women’s climbing worlds is navigating women’s often essentialist self-designations without affirming stable associations between biology and nature.
These essentialisms, however, cannot be easily dismissed as bad self-knowledge, though feminist theory still doesn’t know quite what to do with women’s public cultures. Beyond mountaineering culture, “women” is still a contentious term, as shown in Susan Faludi’s recent takedown in Harper’s of what she calls “theoretical and consumer-saturated academic feminism” (32). Arguing that younger feminists suffer from the Electra complex and have no respect for the lessons of their feminist foremothers (her familial terms), Faludi cites Judith Jack Halberstam’s theory of “unbecoming women” as an example of the younger generation’s ungrateful disregard for feminist goals in a time of collapsing women’s studies departments, unequal wages between men and women, and continued exposure to violence and discrimination. Faludi’s particular target in this piece is Halberstam’s celebration of Lady Gaga as a feminist figure. Faludi gives us a world of limited, bleak choices, between “real” feminism and neo-academic hogwash, deference to matrilineal descent or silly teenage rebellion against the reality of women’s continued oppression. But as Faludi's essay illustrates, feminist theory has to continue to critically take mainstream feminist narratives seriously, to not decide too quickly what is and isn't feminism. My use of the term “women” engages this ongoing debate around feminist boundary policing by acknowledging that this term still means something for many people, especially in conversation with wilderness.
As in the work of people like Lauren Berlant, I take seriously popular, non-academic forms of feminism. Where I diverge from Berlant, however, is my thinking about how to relate affectively to this material. In *The Female Complaint*, which examines women’s sentimental public culture, Berlant writes, "The optimism of this book, and there's not much of it, is located in the centrality of aesthetics and pedagogy to shaping fantasies, identifications, and attachments to particular identities and life narratives. The frustration accompanying that optimism has to do with the difficulty of inducing structural transformation out of shifts in collective feeling" (xii). Berlant, like Wendy Brown, worries that "the repetition of empathic events does not in itself create change" (Brown 166). Berlant describes public-sphere femininity as "a love affair with conventionality" (2). Berlant argues, "To love a thing is not only to embrace its most banal iconic forms, but to work those forms so that individuals can breathe and thrive in them or in proximity to them" (3).

In what could be called the sentimental public culture of women’s climbing and recovery, there is often a love of conventional narratives about nature, and what constitutes healing and women. When I began writing about The Women’s Wilderness Institute and wilderness therapy in general, I worried about the clichés, the repetitive optimism of girl power. What could I add, other than a critique of these narratives’ shortcomings? Berlant, of course, does quite a bit more than critique, but I am less drawn to Berlant’s limited optimism and more compelled by José Muñoz’s

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5 Incidentally, this is something that Halberstam’s work does very well while simultaneously proposing new ways of thinking about gender, though Faludi misrecognizes and dismisses this.
sense of hope as “a critical affect and a methodology” (Muñoz 4). Where Berlant sees repetitive sentimentality as an impediment to significant action and change, Muñoz uses repetition as proof of queer futurity and utopianism. Queer theorists like Halberstam, Muñoz, and Sara Ahmed offer modes of being and thinking that work and inhabit repetition, which is useful in reading climbing’s repetitive movements. These writers have given me ways of seeing how these recovery climbing worlds are productive and generative, rather than narratives that are ultimately enclosing and limiting, or worlds we have to learn to breathe in even if they are not so great. Writing about queer performers and artists like Andy Warhol and Frank O’Hara, Muñoz argues that they “are able to detect an opening and indeterminacy in what for many people is a locked-down dead commodity” (9). Muñoz locates the hope of queerness in futurity and against the “lull of presentness,” while I foreground the importance of immediacy in my materials. But I share Muñoz’s commitment to seeing “an enduring indeterminacy” in the practices that make up recovery climbs (9).

These climbing events are generative not just in terms of narrative, or of new ways of thinking about what nature and health can be; they are materially productive, as well. Throughout this project, I sustain what Annemarie Mol calls “praxiography,” or the study of practices. For Mol, the term “practices” helps cut through the artificial cordonning off of disease as physicians’ territory, and illness as the proper domain of social scientists. This professional and epistemological territoriality means that illness becomes known as the socially shaped world of sickness, while disease remains a natural category. A praxiographic approach also makes it possible “to
refrain from understanding objects as the central points of focus of different people’s perspectives. It is possible to understand them instead as things manipulated in practices” (5). Foregrounding the practices involved in mountaineering involves a different kind of framing, in which “there is no longer a single passive object in the middle, waiting to be seen from the point of view of seemingly endless series of perspectives” (5). Rather than looking at mountaineering and climbing as an activity that might be explained by digging into the different perspectives of artists, or professional climbers, or women recovering from cancer, praxiography locates knowledge in the physical movements, labor, technologies, and ailments of climbers themselves. Instead of asking how people interpret mountains, praxiography asks how mountains, and how climbers themselves, are “done” in the act of climbing.

In my account, climbers’ bodies are not just inscriptive surfaces upon which power is written, or the stage upon which the real drama of narrative and discourse takes place. They are, literally, guts and bones, microscopic problems with disastrous results (bronchitis, pulmonary and cerebral edema, dehydration and diarrhea), tweaked knees and tendons, burned eyes and skin. All of this becomes more complex when other kinds of bodies enter the picture: the dynamic and lively mountains that regularly shed ice and snow, the sometimes finicky but absolutely necessary ropes, axes, tents, and fuel canisters, which make climbers able to call themselves climbers. To make this claim is not simply to shift the metaphorical location of analysis, to say that bodies are not just skin. Rather, I argue that bodies are dense, complex, and not
reducible to one entity. They are made to fit together through practices, and are made by these fittings.

Recovery climbers are active participants in ongoing projects of interrelatedness, between landscapes, climbers, rocks, sickness, and feelings, or a geography of material presences and practices that are “leaky,” to borrow Tim Ingold’s term. In Being Alive, Ingold cites Gregory Bateson’s idea that “The mental world—the mind—the world of information processing—is not limited by the skin” (Ingold 86). But Ingold argues that even in Bateson’s work, “there remains a presumption that whereas the mind leaks, the organism does not.” Ingold continues, “I want to suggest that as a nexus of life and growth within a meshwork of relations, the organism is not limited by the skin. It, too, leaks” (86). I develop this ecological approach in Chapters Three and Four as a way to produce a queer phenomenology of climbing.

My first chapter is a historical overview of significant trends in Euro-American mountain histories. Most histories of mountaineering have distinguished the sport by its secularism, versus the spiritual aspects of earlier mountain ascents in Europe. I argue that modern mountaineering, and particularly recovery climbs, cannot be understood without linking these forms of travel to pilgrimage traditions. Asceticism, willingly enduring physical pain, and seeking alternate spiritual states are qualities that transcend simplistic distinctions between pilgrimage and climbing. I bring together histories of walking, colonial travel, pilgrimage, and competitive mountain climbing to situate the world of recovery climbs, which emerge from these
non-linear entanglements of spiritual and secular movement.

In my second chapter, “Wilderness Therapy and the Making of a Slow Wilderness,” I describe the rise of wilderness therapy in the US throughout the 1990s. Wilderness therapy is an emergent, somewhat hard to define therapeutic field in which nature and physical activity get put into the service of healing and women’s spirituality. Drawing on professional literature and courses run by The Women’s Wilderness Institute in Boulder, Colorado, I argue that wilderness therapy is an important place to start to work through how wilderness, risk, women, and healing become defined in recovery climbing cultures. Wilderness therapy relies on conscious metaphors of women and nature to accomplish healing, in environments calibrated to provide participants with controlled risk. Unlike the non-recovery mountaineering I describe in Chapter One, in which an ideal wilderness deals out unpredictable risks and unknowable outcomes against which climbers test themselves, wilderness therapy’s moderated wilderness is designed to create empowering relationships between women and nature. In this chapter, I am interested in what these metaphors accomplish, and how women’s relations to wilderness become defined and storied.

Chapter Three, “Of Mountains and Malls: Ecologies of Cancer Activism,” uses an ecological methodology to argue for thinking of cancer and cancer activism as important parts of landscapes. I juxtapose the Komen Foundation, Lance Armstrong’s Livestrong Foundation, and The Breast Cancer Fund and Breast Cancer Action in San Francisco to think about the different ecologies that each organization
helps build. These organizations lie on a spectrum, where Komen works within a corporate cure model and, at the spectrum’s other end, Breast Cancer Action questions notions of survivorship, cures, and corporate and pharmaceutical philanthropy. These organizations also engage with physical movement to varying degrees. Since 1983, Komen has held its Race for the Cure, a prominent and now international run/walk event. Livestrong organizes annual marathons and cycling events, and The Breast Cancer Fund has an annual climb of Mt. Shasta in California. These different kinds of physical activity create affective landscapes that make some forms of engaging illness possible, while curtailing others.

Chapter Four, “Oncogeographies: Living at the Crux,” is a queer phenomenology of climbing that draws on Sara Ahmed’s notion of horizons and Gillian Bird Rose’s idea of resilience to argue that recovery climbers actively create permeable landscapes through their interactions with cancer, rocks, limits, and horizons. In this chapter, I use three tropes, lines, problems, and pressure, to create a materially embodied way of engaging cancer climbs. By inhabiting climbing’s specific movements, this chapter gives an account of how recovery climbs produce healing landscapes.

Virginia Woolf writes that it is unsurprising that so much literature continues to worry only about the crises of the mind, and see the body as “a sheet of plain glass through which the soul looks straight and clear.” To really get at the body’s minutia, Woolf argues, would require “a robust philosophy; a reason rooted in the bowels of the earth” (186). Thinking about how and why people go to mountains to deal with
cancer and trauma means doing away with abstractions of landscape, space, and embodiment, and instead thinking concretely and praxiographically about cancer, rocks, and healing. In this dissertation, metaphors and narratives are often placeholder terms for describing what are, very frequently, discursive acts that link healing to landscapes. But throughout this project, I work toward different ways of conceptualizing these complex material-semiotic worlds that get closer to what they are: practices of interrelation and resilience.
CHAPTER ONE
MOUNTAINS: A TOPOGRAPHY

Many good studies of mountains’ representations in Western imaginations have been made in the last forty years, among them Marjorie Hope Nicolson’s pioneering *Mountain Gloom and Mountain Glory* (1959), Peter Bishop’s *The Myth of Shangri-La* (1989), Simon Schama’s *Landscape and Memory* (1995), and most recently, Robert MacFarlane’s *Mountains of the Mind* (2003). Each text traces the complex histories of mountains’ rise from objects of loathing, superstition and fear to objects of scientific study, reverence, and sites for inner transformation. These cultural histories of mountains cite many shared, distinctive turning points. Two significant shifts happened in scientific and philosophical circles. Theologian Thomas Burnet’s 1681 *Sacred Theory of the Earth*, which sparked a geological and religious fascination with mountains as relics of the earth’s history, and Edmund Burke’s 1757 *Enquiry into the Origin of Our Ideas of the Sublime and Beautiful*, are both notable for their role in linking mountain scenery to Romanticism’s beloved ruin, chaos, and catastrophe (Schama 450). The historical strands in the Western love of mountains are not discontinuous and neatly discernable. Therefore, while I do not isolate one of these strands (literary or artistic Romanticism, for example) as most crucial to my understanding of what informs a modern fascination with mountains, I foreground several important fibers of this history. To illustrate how women’s relatively recent entry into mountaineering diverges from male climbing traditions, I will first provide
a brief overview of men’s climbing history, and then explain how women’s climbs fit into and diverge from male traditions.

Generally, the consensus in most critical histories is that climbing is a modern phenomenon, inaugurated during the 1600s in Europe. Petrarch’s 1336 ascent of Mont Ventoux in southern France has also been called “momentous for the history of height.” However, Robert MacFarlane claims that because Petrarch turns his climb into a religious allegory, “to witness the first flashes of interest in mountain-tops not just as spiritual emblems but as actual physical forms which are affecting to behold, we must look to the 1600s” and the European tradition of the Grand Tour, during which well-to-do young men traveled continental Europe (MacFarlane 147). This critical tradition, in which mountains become interesting only when the learned elite began writing about them in more secularized ways, elides work in mountains based on livelihood rather than recreation. For example, there is rarely any mention of the existence of high altitude farming and shepherding communities in the Alps, Pyrenees, Andes, or Himalayas, or the ways that mountains have been the site of imperial conquests and reconquests, making mountain inhabitants exiles in their own land.\(^6\) This chapter provides inadequate space to redress what is, at the very least, an extremely shortsighted notion that the only people climbing mountains in Europe

\(^6\) Furthermore, claiming Petrarch as the precursor to modern climbing elides rich mountain traditions in other places, such as China and Japan. While Japanese climbing developed in many ways along a similar trajectory to Western climbing, there is no solid evidence to support pointing to Europe as the sole innovator of walking in mountains as a worthwhile pastime for the elite.
before 1600 were elite, literate, and motivated by recreation. Instead, I focus on the implications of MacFarlane’s distinction between religious or allegorical climbs and aesthetic ones.

7 Though issues of class appear less explicitly in this paper than race and gender, future fieldwork will allow me to localize and deepen an explication of how site-specific histories of work and labor in mountain landscapes have been transformed, and how they inform current climbing practices in those locations. Yet though my subject here is primarily visitors to mountain landscapes, I also want to problematize any neat distinction one could make between mountain dwellers/workers and tourists. People’s historical experiences as workers and residents in mountains are by no means unitary. Take, for example, the Western US. Though today, the Rocky and Sierra Nevada ranges are becoming more known for unaffordable housing and tourist economies rather than being a place of hardscrabble lives in ranching or mining, since white colonization, these areas have rarely been only working or only tourist sites. The kinds of experiences, hardships, and pleasures in these places have never been homogenous. Sandra Koelle writes about the fascinating, complex histories of Chinese laborers, Native American conservationists, and African American bicycle corps soldiers, among other things, in Montana and Idaho (see Alexandra Koelle, “Rights of Way: Race, Place, and Nation in the Northern Rockies,” University of California, Santa Cruz, Dissertation (2010)). In opposition to frontier narratives of the Western wilderness as places white women could lead more independent, nature-loving (and hardworking) lives, for some white women settlers during the mid-nineteenth century, mountain landscapes felt oppressive and claustrophobic (Anne LaBastille, Women and Wilderness (San Francisco: Sierra Club, 1980) 14). For women living in the mountainous West today, mountains might be attractive for expansive land, proximity to snow sports, ranching or farming opportunities, and for different kinds of possibility than one might find in a city. Or, they might be places of economic dispossession, of rapidly changing economies, nuclear waste battles, rampant overdevelopment and limited career options. This is to say that though my focus is primarily middle-class white climbing culture, a culture which has been made possible in large part by the transformation and dispossession of Western landscapes and working and indigenous peoples, in my story there will be both poor women who spend all their money to climb in Nepal and choose to live in small mountain towns with lower-paying jobs, and affluent women from San Francisco and Seattle who train in Aspen and Banff before climbs. Mountain landscapes, like the people who seek them out, are complicated, with dense and diverse histories and origins. Thus, rather than writing about a pre-tourism working mountain culture, displaced and overthrown by a tourist/recreation culture, I want to pose mountain settings as more tangled, interwoven, and messy (at least in the Western US. I am not certain that this maps onto the context of Sherpas in the Himalayas.).
Petrarch’s climb may have signaled a different kind of relationship to mountains, most notably because Petrarch didn’t have the option of paying a mountain guide vast sums of money to get him to the top. Undoubtedly, the advent of mountain guiding, of wealthy patrons buying their mountain experience, signals a very different kind of interaction with mountains in which wilderness and athletic endeavor became a commodity and a moral good. Yet I hesitate to overemphasize this shift from sacred premodernity to secular modernity. Mountaineering makes the distinction between sacred and secular hard to grasp: contemporary climbers still invoke heavily spiritual discourse when describing climbs. Climbing both is and isn’t modern: with Michel Serres, I argue that “we are always simultaneously making gestures that are archaic, modern, and futuristic” (60).

While mountains in sixteenth century Europe prompted fear and disgust for elite readers, they gradually became esteemed objects of an aesthetic tradition. At the close of the nineteenth century, recreational climbers had climbed all the Alpine peaks, and as a result, European climbers began venturing farther from home, especially to the Himalaya. This move, of course, was both athletically and geopolitically driven. Accurate cartographic knowledge of the Himalaya became vital to Britain in the 1800s, during the “Great Game” of territorial competition between the British and Russian empires (MacFarlane 186). Scientific and recreational institutions such as the Royal Trigonometrical Society (1817), the Royal Geographic Society (1830), and the Alpine Club (1857) endeavored to map, measure, and name hidden, “undiscovered” peaks in the Himalaya. During the 1800s, the
mapping of and military incursions into mountainous territories were part of a larger schema of environmental imperialism: like Alexander von Humboldt’s quest to rename South American flora and fauna within scientific taxonomy, these early explorers and cartographers of the Himalaya sought what Kären Wigen calls “geographical enlightenment” by assimilating difference into a mappable, nameable terrain.  

But the meteorological and cartographic experiments conducted in the mountains were in no way cold, hard science. The convergence of scientific, spiritual, military, and athletic practice in the Himalaya is marked by physical desire at every turn. Andrea Barrett’s novel Servants of the Map (2002) begins with the story of Max Vigne, a British surveyor and botanist working in the Himalaya during the height of Britain’s 19th century mapping expeditions. Barrett gives us a world in which mountains become seductive, taking people away from their homes and families, and even themselves, in the service of “a great idea…The Survey,” which “looms like a disembodied god” to whom the surveyors are devoted (Barrett 27). Accumulating botanical and geographical knowledge are sensual practices, as are the surveyors’ close brushes with death. Max falls into a glacier while traveling in the Karakorum

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range, and finds the “slim ribs of ice, bulges and swellings” reminiscent of his wife’s back and belly (37). Max survives his fall, but instead of pining for his wife and children in England, he dreams of staying in the glacier, and fantasizes about finding the legendary, mysterious men who travel the Himalaya alone, abandoning society to wander the mountains.

Despite new mapping technology, Himalayan countries, such as Tibet, Nepal, and Bhutan, were almost entirely closed to foreign travelers. Thus, the Great Trigonometrical Society set up stone cairns on Indian peaks from which they took measurements of Himalayan mountains. Tibet was the ultimate geographical fantasy: penetrated from a hundred miles’ distance by the disembodied eyes of the Great Trigonometrical Society, the forbidden country could be mapped while retaining its mystery and purity. The GTS, however, did not settle for voyeuristic pleasure alone; it also trained Nepali locals in order to “lift the veil” of secrecy in Nepal, Tibet, and Bhutan (Mason 84). This included disguising Himalayan people as pilgrims, lamas, or Muslim holy men. These men, known as pundits, would conduct undercover surveying work in the guise of religious devotion: “With due piety the lama murmured the Buddhist prayer, *Om mani padme hum*—‘Oh Jewel of the Lotus’—turned his prayer wheel, dropped a bead to count his distance, and was safe from interruption. His notes were kept within the prayer wheel” (Mason 86). Frequently, cartographers and climbers played soldiers en route to their geographical enlightenment: Francis Younghusband, an odd mix of imperialist explorer and mystic who later headed the Royal Geographical Society, was charged with leading an
ostensibly diplomatic mission to Lhasa in 1904, during which he started a series of battles that killed at least 2,000 Tibetans (MacFarlane 232).  

Thus, there are no clean distinctions to be made between mountain traveling for aesthetic, scientific, or military purposes. The more recreationally-based mountaineering that follows this period grows directly out of what Kären Wigen calls “a Western optic that linked climbing with claiming” (5). But neither has mountaineering been thinly veiled bloodlust: in the midst of battles, Francis Younghusband “embraced the immense spaces” of Tibet “and welded such experiences into a unique—almost ecological—mysticism” (Bishop 162); during George Mallory’s 1924 Everest expedition, he and his climbing partners read to each other from Coleridge’s *Kubla Khan*, with its “sunny pleasure dome” and “caves of ice,” and Shelley’s poem *Mont Blanc* (MacFarlane 265). Within the European tradition of the Romantic sublime, the Alps were transformed from Nature’s “boils,” “warts,” and “deserts” into literary, spiritual, and aesthetic inspiration (MacFarlane 15). This accidental geography of mountains, in which mountainous terrain is presumed to have an organic relationship to culture and spirituality, was (and still is) even more pronounced in depictions of Himalayan peaks.  

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9 Younghusband’s incursion continues to have political ramifications to this day. China accuses Britain, who does not recognize Chinese sovereignty in Tibet, of trying to justify its 1904 invasion of Tibet. People within the Free Tibet movement argue that Britain’s invasion left Tibet open to Chinese occupation because, faced with British and Russian competition for influence in Tibet, China felt it necessary to establish control of the region (http://www.freetibet.org).  

10 Nepal and Tibet have figured prominently in mountaineering’s history not only because of the formidable Himalayan mountains, but also because of the cultural mystique each place holds for Westerners. Most notable in Western mythologies of
Climbing in the Himalaya during the 1900s was marked by record-setting ascents: George Mallory possibly summited but disappeared on Everest in 1924, and Sir Edmund Hillary and Tenzing Norgay’s successfully climbed Everest in 1954; in 1950, Maurice Herzog and his French team climbed an 8,000 meter peak for the first time, and during the next fourteen years, all of the fourteen mountains over 8,000 meters were successfully climbed—by Western men. Women have been involved in mountaineering: somewhat unevenly, several notable women climbers were writing and written about in the nineteenth century. But women did not make sustained ascents of big peaks in the way that men did. Arlene Blum, a member of the historic all-women’s expedition to Annapurna in 1979, explains that during the period of groundbreaking Himalayan climbing, the only attempt on an 8,000-meter peak by a women’s team was the ill-fated 1959 International Women’s Expedition to Cho Oyu in Nepal. Four climbers, including the leader, Claude Kogan, died on this attempt. Blum writes, “By 1972, when the idea for our all-woman expedition to Annapurna was originally conceived, no woman from any country had yet reached the summit of an 8,000 meter peak” (Blum xxii). In 1974, a Japanese women’s team climbed Manaslu (26,750 feet), the first women’s ascent of an 8,000-meter peak.

In *Annapurna: A Woman’s Place*, Blum’s account of her successful climb, she cites several important forebears. Marie Paradis, a Frenchwoman who climbed Mont the Himalaya is Shangri-La, an idyllic place epitomized in James Hilton’s 1933 novel *Lost Horizon*. Hilton’s novel, which describes pristine lakes, immense snowfields, and peaceful and eternally youthful Buddhist monks, built on a couple of centuries’ worth of romanticizing Tibet as a sacred place, a history described in detail in Peter Bishop’s *The Myth of Shangri-La*.
Blanc in 1808, was the first woman to do so. However, before Blum, Paradis is most famous for begging her guide, “Throw me in a crevasse and continue yourself” (Blum xix). The earliest Western women traveling in the Himalaya were the American Isabella Bird (1831-1904), and the Frenchwoman Alexandra David-Néel (1868-1969), who disguised herself as a female Tibetan beggar and walked two thousand miles to reach Lhasa, which was forbidden to outsiders. Fanny Bullock Workman, of Massachusetts, traveled in the Himalaya between 1890 and 1915. Blum writes, “Fanny, an ardent suffragette, was once photographed on a high pass…carrying a newspaper bearing the headline ‘Votes for Women’” (Blum xxi). Quests for women’s equality have long been embedded in women’s climbing, although not always as a primary motivation. Blum writes: “Although our expedition was conceived in an atmosphere of ambivalence about whether women could or should climb the highest mountains, Annapurna was for us primarily a personal challenge. Could we raise thousands of dollars, organize tons of food and gear, solve countless logistical problems, and adapt to the thin Himalayan air? If, in addition to all this, our experience helped to break down prejudice against women climbers, so much the better” (xiv). The differences between Fanny Bullock Workman’s suffrage placard and Blum’s insistence on the personal challenge of climbing Annapurna reflect different historical moments in feminist language.

Blum says she avoids “strident statements” when drawn into debates about women’s climbing abilities, for “our achievements in the mountains should speak for themselves” (xiv). Indeed, women’s descriptions of mountaineering in interviews
and their writings do not frequently invoke overtly feminist language or goals.
Feminism, rarely named as such, supplements a more generalized agenda, in which personal achievement, expressed through “experience” in the mountains, overshadows an explicitly gender-specific goal. In her 1998 preface, revised for the climb’s 20th anniversary, Blum situates her ascent of Annapurna within a narrative of women’s progress: “Over the years, I have been told many times that our climb made a difference by dispelling myths about people’s limitations that were prevalent when we climbed Annapurna. At that time, women rarely ran marathons, raced dogsleds, or scaled rock faces… Now the marathon is an Olympic event for women.” She continues, “Annapurna has become for me a metaphor for difficult and important goals…There are still many ‘Annapurnas’ to be climbed in the world—such as protecting our natural environment; decreasing the gap between rich and poor; providing basic necessities for everyone on this planet; and raising our children to live with love and good values” (xiv). Thus, the Annapurna climb is both about individual accomplishment and a marker of achievement in a humanist sense. In other words, what stands out in Blum’s revised preface, as opposed to her 1980 text, is not so much its attention to women’s specific achievement, but how this achievement is just a part of a more general agenda that includes environmentalism and humanitarianism. This is not to say that there aren’t women climbers who contemplate their sport within an explicitly feminist framework, centering women. However, most published, popular accounts of women’s climbing do not take up this position.
One possible explanation for this is that the difficulties women face in organizing commercial sponsorship for big climbs constrict the ways women have been able to narrate their experiences. The story of Alison Hargreaves, an English climber who died when the tent she was sleeping in blew off the side of K2 in high winds in 1995, is instructive. Although Alison Hargreaves never wrote an autobiographical account of her climbs, her story and the controversy following her death give insight into the history of women’s climbing and how all of these anecdotes hang together. Hargreaves, according to her biographers David Rose and Ed Douglas, was “not politically aware,” as other women climbers have been, of being a leading female climber as something “beyond the opportunity to climb a few routes in pleasant female company” (Rose and Douglas 62). Hargreaves was attacked in the media, both prior to and then increasingly viciously after her death, for being irresponsible and self-centered for choosing to climb such dangerous peaks while she had two young children at home. Rather than adopting a feminist stance by pointing out the hypocrisy of this criticism, one hardly ever leveled at male climbers, Hargreaves avoided discussing her gender and climbing. Instead, she “portrayed herself as hard, professional, almost without emotion, dedicated singlemindedly to achieving her goals.” Rose and Douglas suggest that this was a façade Hargreaves developed in order to scrape by in the financially unstable world, especially for women, of mountaineering. What the media didn’t discuss is how Hargreaves felt locked into climbing just one more peak, earning just a little more media recognition and corporate sponsorship, in order to gain enough financial independence to leave an
abusive husband. Rose and Douglas write, “Within a few days of Alison’s death, her memory had become a battleground. The person Alison had really been became irrelevant; she was now a symbol, an icon, to be fought over and discussed… the response to Alison’s death was visceral, and many commentators believed that a mother taking such risks was morally more culpable than a father doing the same” (275-276). Hargreaves’ friends and family held a slideshow and speaking events following her death to defend her decision to climb by resituating her risk-taking as the ultimate sacrifice, to make a new life for her children, rather than a dereliction of maternal duty.

Hargreaves’ story shows that not all women’s climbing stories fall neatly into prescribed narratives. Hargreaves was no avowed feminist, didn’t discuss emotionality and kinship with other women (in fact, she competed quite vigorously with them), and, according to her biography, was not (publicly) self-reflective on her climbing as a way to escape an abusive relationship. Yet her story also makes it clear that women’s climbing narratives and practices have been materially constrained and shaped by gendered ideologies of risk, maternity, interiority, and embodiment. In other words, when women climb, they enter the terrain differently than men, and furthermore, the terrain itself is different.

Discussions of how and why this is true have been surprisingly sparse and unsatisfying. For example, Douglas and Rose end their biography by defending Hargreaves:

In the West, as life expectancy becomes more predictable, premature death seems a greater tragedy than ever and those who take risks are judged to have
behaved not just irresponsibly but immorally. They have broken a modern taboo. But it is precisely because society seems controlled and diluted that people seek out such challenges. Many men and women in society find freedom in the hills, an escape from the mundane, a way to achieve fulfillment. (275)

In Douglas and Rose’s reasoning, Hargreaves was a climber first, and a woman second: because of modern society’s constraints, it is only natural that “men and women in society” seek “as escape from the mundane.” In narratives of women’s climbing, women typically appear as either: a) absorbed into this kind of humanist language, in which gender-neutral climbers are dissatisfied expatriates of modern culture; or, b) in wilderness therapy and recovery literature, as women climbers who illustrate feminine difference by connecting climbing to healing. In the first position, gender difference is effaced by the crisis of modernity, and in the second, gender difference is primary, essential, and marketable.

In mountaineering literature, the historical recurrence of words such as “summiting,” “attacking,” and “assaulting” to describe climbing a mountain is, and not very subtly, either, part and parcel of a Western, male discourse of Nature as female, passive, able to be raped and pillaged.11 Or, when feminine Nature is not being plundered, it has been relegated to the maternal role, a bountiful yet stern mother who tends her male children. This masculinist discourse is still very much in

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11 In his 1955 history of Himalayan climbing, Kenneth Mason writes, for example, “In 1952 Eric Shipton took a party to Cho Oyu and reached a height of 22,500 feet, but this was more of a practice climb for the attack on Everest in 1953, than a serious all-out assault on Cho Oyu” (Mason, *Abode of Snow*) 36. Mason’s text, a canonical one in the history and geography of mountaineering, frequently uses war metaphors to describe a mountain’s “defeat,” the “sacrifice” of lost lives, and the “conquering” of unclimbed mountains.
production. For example, John Krakauer’s best-selling *Into the Wild* (1996), the story of a young man who dies alone in Alaska after eschewing all of human society. Krakauer compares Chris McCandless to great wilderness ascetics like Thoreau and Muir, as well as other eccentric drop-outs. He meditates on McCandless’s seemingly inexplicable desire for suffering, linking it to his own love of extremity. Here gender, implicit throughout the text, makes an explicit appearance. Krakauer says of his own obsession with climbing in his youth, “I was stirred up by the dark mystery of mortality. I couldn’t resist stealing up to the edge of doom and peering over the brink. The hint of what was concealed in those shadows terrified me, but I caught sight of something in the glimpse, some forbidden and elemental riddle that was no less compelling that the sweet, hidden petals of a woman’s sex” (156). Krakauer’s sympathy and fascination with McCandless as an emblem of the solitary American man in nature affirms the tropes so deeply embedded in men’s climbing stories. Krakauer writes, “Starvation is not a pleasant way to expire…Some people who have been brought back from the far edge of starvation, though, report that near the end the hunger vanishes, the terrible pain dissolves, and the suffering is replaced by a sublime euphoria, a sense of calm accompanied by transcendent mental clarity” (198). All the elements are here: disembodied wisdom afforded by starvation, the mind’s triumph over the body/nature, the gruesome fascination with bodily decay, are all things available only to the solitary man. In a woman, this delight in starvation would be labeled anorexia, if such a thing were a publishable feeling to begin with.
Pointing out masculinist tropes in mountaineering is important work. But a feminist critique that stops here is one of two kinds of criticism I strive to complicate. One is an exposure or unveiling of mountain climbing to be all of the things one might expect it to be: militarist, masculinist, imperialist. The other critique is of mountains as cultural representations. Robert MacFarlane writes,

> What we call a mountain is thus in fact a collaboration of the physical forms of the world with the imagination of humans—a mountain of the mind….Mountains are only contingencies of geology. They do not kill deliberately, nor do they deliberately please: any emotional properties which they possess are vested in them by human imaginations. Mountains—like deserts, polar tundra, deep oceans, jungles, and all the other wild landscapes that we have romanticized into being—are simply there, and there they remain, their physical structures rearranged gradually over time by the forces of geology and weather, but continuing to exist over and beyond human perceptions of them. (19)

Critiques of mountains as landscapes “romanticized into being” by egotistical cultural projections, or through masculinist, imperialist tropes, undoubtedly get us somewhere. Histories of the imaginative geography of mountains, such as MacFarlane’s and Simon Schama’s *Landscape and Memory*, richly and provocatively point out the strange attachments people have developed to mountains. Yet these accounts have not taken us quite far enough. In these unveilings, mountains are “simply there,” inert objects to be challenged, fantasized about, and above all *represented* by humans. These critiques, while necessary, keep subjects and objects in their proper domains: subjects, who inhabit the world of feeling, affect, and politics, are able to mark, shape, discuss, and appropriate the objects, which are silent, factual, objective, natural, and universal.
While many histories of mountaineering have ignored the importance of bodies, mountaineering culture’s attention to materiality all too often produces bodies that are uncritically naturalized, gendered, and scripted. Returning to Arlene Blum’s account in *Annapurna: A Woman’s Place*, Blum happily notes upon taking a bath, “As I looked at my body for the first time in weeks, I was delighted to see that I was becoming rather bony... A favorite expedition joke was the ‘fat farm in the sky’” (117). Throughout her account, Blum repeatedly remarks on altitude’s slimming effects. In dominant narratives of mountaineering, climbers’ bodies are frequently described as being most natural, most human, when tested by the extremes of wilderness. The result of this pitting of human against nature is a very often a reaffirmation of health, youth, whiteness, and heterosexuality. In an April, 2005 column in *Outside* magazine called “Babes on Belay,” writer Elizabeth Weil follows a group of twenty-something women climbers on their all-girl trip. Weil writes,

Nothing can compare to being alone or with other girls, sweating the pure, clear sweat of youth, enjoying day after day of adrenaline followed by perfect sleep. For the first time since childhood, your body is fully organized, you feel great about yourself, and you're ensconced in a subculture with a ready-made sense of belonging and a ban on practical thoughts about the future. Your goal for the day is to bag your fourteener, flash your 5.12, beat your own speed record—that's it. (76)

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12 The Annapurna climb’s official t-shirts, made as a fundraiser, are telling in the way they spatialize and naturalize gender relations, even ones with a progressive agenda. The shirts read, “A Woman’s Place is On Top...Annapurna”. The slogan, daring in its time, suggests both women’s bodily right to sit on top of a mountain and, of course, their right to political and sexual dominance, as well. But if this climb demonstrates that a woman’s place is “on top,” then it is on top a naturalized mountain and a heterosexual and masculine body. Fifteen thousand t-shirts were sold (Blum 11).
In the article, gender difference is, above all, a nice perk: the author makes sure we know that although the climbing trip is for the girls only, all of the women on the trip had “simply wanted to train on their own. It wasn't that they didn't have boys to climb with—in truth, three out of the four had strong, young climber boyfriends, one of the small perks and complications of being a contemporary climber girl” (74). Outside is frequently a source of this brand of easily digestible girl power; however, the article’s emphasis on bodily organization, the thrill of “clean,” sweaty, youthful embodiment, is very common to mountaineering and climbing discourse in general. Climbing instructs women in this article in how to be healthy, young, vigorous, feminine, consumerist, and part of a subculture based on affect rather than careerism.

At each historical turn in mountaineering’s past, human bodies have figured importantly, though differently, in ideologies of nature. Hitler’s Tigers, for example, were a group of young men commissioned to climb peaks in the Alps in the 1930s to demonstrate the white, virile body politic of the Reich. Mountaineering, however, often displays another preoccupation besides bodily purity: Reinhold Messner, the legendary Italian climber who first summited all 14 peaks over 8,000 meters in the 1980s, wrote of how physical self-endangerment can be seductive: “Endurance, fear, suffering, cold, and the state between survival and death are such strong experiences that we want them again and again. We become addicted” (Coffey 6). Even medieval European accounts of traveling through mountains associate mountains with grotesque bodies: the Libro del Buen Amor, for example, a series of poems written in 14th-century Spain, tells of enormous, sexually voracious mountain women that dwell
in the Pyrenees who must be tricked (and sexually satisfied) by the savvy traveler. Thus, mountain climbing in Euro-American traditions has always been marked by different, but not necessarily contradictory, modes of desire for bodily purity or a fascination with bodily decline and aberration.

But in the 1980s, amidst the geographical, geological, and technical climbing manuals, the personalized, confessional accounts of near-death experiences and survival on the world’s highest peaks became a very popular genre. These books are often very lucrative, landing their authors movie deals and spots on late-night talk shows. The texts differ in their scope: Aron Ralston, who had to amputate his own arm after he was pinned under a fallen boulder in a Utah canyon in 2004, wrote a memoir detailing his ordeal; in Climb Against the Odds: Celebrating Survival on the Mountain (2003), The Breast Cancer Fund commemorates a series of big peak summits made by women recovering from or battling breast cancer; Rob Schultheis’ Bone Games (1984) tells of Schultheis’ experience almost freezing to death on a Colorado mountain, which bestowed him with what he calls supernatural strength, endurance, and perception that enabled him to get down the mountain safely. The differences between each text interest me less than their cultural resonances and reception, and the startling proliferation of so many texts in the survival/wilderness accomplishment genre during the last 30 years.

However, the appearance of wilderness survival literature does not follow a linear, before and after narrative. In Imperial Eyes, Mary Louise Pratt points out, “Sentimentality and sensibilité began asserting themselves in travel writing about the
same time science did, from the 1760s on.” Pratt points out that “sentimental travel writing drew…on an older tradition of what I have been calling survival literature—first-person stories of shipwrecks, castaways, mutinies, abandonments” popular in Europe since the fifteenth century (Pratt 86). But since women entered the climbing scene as serious participants in the late 1970s, the modes of storytelling and description women climbers have used have focused on different kinds of bodily experiences. While men’s texts describe losing fingers to frostbite, and very often chronicle the fear, loneliness, intense pain and suffering that accompany mountain climbing, the genre maintains masculine valor and fascination with bodily trauma, even if the end result of such harrowing adventures is spiritual rebirth.

Women’s accounts of mountaineering, on the other hand, describe healing in the mountains in a different mode. Most explicitly, women’s climbs are frequently organized around healing from and overcoming trauma such as addiction, cancer, and eating disorders. Male climbers with disabilities, such as Erik Weihenmeyer, the first blind climber to summit Mt. Everest, garner a great deal of media attention and support. Weihenmeyer’s success in 2001 has given him media coverage in National Geographic, spots in inspirational advertisements, and even a meeting with George W. Bush. Yet this kind of individual achievement story is almost completely missing in women’s climbing narratives. Instead, women’s climbing is frequently organized and promoted by nonprofit organizations to inspire personal growth by climbing as a group of women in recovery. The Women’s Wilderness Institute, for example, offers “Transitions” trips “in the spirit of supporting women who are facing a bump in the
trail” (TWWI catalogue). This kind of climbing experience, which privileges group support and recovery based on shared, gendered experience, has not been and is not currently a part of men’s mountaineering narratives. This is partially because in men’s climbing stories, men’s bodies just are: unmarked as male, they are remarkable only for the ways in which they stage the dramas of training, suffering, and overcoming obstacles. But in women’s climbing narratives, women’s bodies are specifically marked as women’s, and their life trails as bumpy. As such, their stories have different narrative modes, possibilities, and constraints. While the goal of summiting peaks may figure as prominently as it does in men’s climbs, the gendered density of women’s bodies makes a difference.

**Suffering in Solidarity: Recovery Climbs and Pilgrimage**

In recovery climbs, addiction, illness, and loss, all of which are typically treated as private, individual phenomena, are made public and collective, visible, and celebratory. Public suffering, to be sure, has long been part of the structure of religious pilgrimages worldwide. But suffering has a long history of political valence, as well. *Climb Against the Odds* (2003), published by The Breast Cancer Fund, follows a group of women recovering from breast cancer as they attempt Mount Aconcagua in the Andes, Denali in Alaska, and Fuji in Japan during the late 1990s. The climbs were organized in part to celebrate individual strength and accomplishment, to recognize women who “have faced an internal mountain—breast cancer—and have gone on to scale formidable peaks” (TBCF 11). The book profiles
the individual climbers on each expedition, their experience with cancer, and their stories of success and continued hardship in both the climb and with cancer. But the book describes something much more than individual struggle and recovery by creating a community based on, above all, the signifier of the cancerous breast. The book explains,

At the time when [the climbs’ organizers] started to organize the Aconcagua climb, “selling” a disease to raise public compassion and funds by capitalizing on the vigor and determination of people with the illness was a completely new phenomenon…The healthy don’t like to be reminded of disease and mutilation, particularly when it comes to something as crucial to the public libido as breasts. Americans like to see their breasts in cleavage, in commercials, TV series, magazines, and films—not in a jar in a pathologist’s lab. (TBCF 21)

This public queasiness became clear when The Breast Cancer Fund launched an ad campaign in 2000 called “Obsessed with Breasts.” The ads, posted in San Francisco and other Bay Area bus shelters, “featured sultry, topless models with cascading curls and come-hither looks. The models had it all…except breasts. Scars across their chests (actually Andrea Ravinett Martin’s [an organizer] mastectomy scars superimposed on the photographs) were apparently too much to bear in a city considered tolerant of nudity in performance art, sex clubs, and parades” (21).

Though this line of campaigning failed, The Breast Cancer Fund had developed another high-publicity tactic in the recovery climb. Following AIDS activists, who introduced physical exercise as a way to raise consciousness and funding in the 1980s, the cancer movement began hosting walkathons, marathons, and climbing expeditions. In the late 1990s, AIDS and cancer activists joined to form Climb for the Cure, a series of fundraising mountaineering expeditions.
Though Expedition Inspiration, the group of women cancer survivors chronicled in the book, inherited a tradition of exercise-oriented fundraising, choosing to climb a mountain, especially when one is recovering from cancer and chemotherapy, requires more commitment, fitness, time, and money than a walkathon or even a marathon. The convergence of AIDS and cancer activists to use mountains as a source of healing and fundraising speaks to both illnesses’ positions as outsiders, as capable of provoking disgust, uneasiness, and fear due to their uncomfortable proximity to sexuality. In the case of breast cancer, however, the cancerous breast signifies more than an object of lust gone awry; it also conjures up women’s maternal (re)productivity in contrast with the hyperproductivity of cancerous cells. In other words, women with breast cancer, potentially “less” (re)productive and female by virtue of mastectomies or infertility, are also productive in “wrong” ways by making too many cancerous cells. If women with breast cancer already embody this contradiction, women who choose to address their cancer by climbing difficult, life-threatening peaks through landscapes described as barren, while turning their bodies into measured, productive climbing machines, make quite a mess out of any distinction one could make between nature and culture, good productivity and bad, health and illness.

Tracing mountaineering’s genealogy back to pilgrimage, rather than later forms of secular tourism, requires reconfiguring both mountain climbing and
Robert MacFarlane claims that Petrarch’s climb of Mont Ventoux in 1336 is less important for a history of climbing than interest in mountains for mountains’ sake because of the insistence with which Petrarch turns his experience into a religious allegory. Nothing in his description—the path he takes up the mountain, the view from the summit, the clothes he wears—can only be itself: rather, all are significant details in an account bristling with symbolism. (147)

MacFarlane’s differentiation between modern mountain travel in pursuit of “actual physical forms” and earlier experiences of mountains as allegorical topography provides a limited framework with which to understand mountaineering as spiritualized travel. First, as Judith Adler points out, separations between medieval, sacred, or religiously motivated travel and modern tourism ignores the spiritual dimension of much modern tourism. Furthermore, claiming modern mountaineers are more invested in the physical versus allegorical experiences that mountain landscapes offer ignores the overwhelmingly spiritualized discourses of modern mountaineering. While travel experiences have been articulated differently throughout the centuries, I suggest that mountains are a place in which the physical and allegorical not only overlap, but actually generate one another. In other words, any study of physical experiences in mountains must take into account the ways in which physical, spiritualized landscapes and bodies become articulated to one another.

13 This genealogy, however, is only part of my framework for understanding mountaineering. Discourses of obsession and disordered eating, which I will address near this chapter’s conclusion, have and continue to inform pilgrims’ and climbers’ experiences. Although this paper only begins to chart the links between obsession, self-starvation, and spiritual enlightenment, these connections are crucial to any study of modern mountaineering as spiritual travel.
Mountaineering is an especially productive activity with which to compare pilgrimage, on both physical and symbolic levels. At the most primary level, pilgrimage has historically often involved a dangerous trek to a mountain summit, such as Buddhist and Hindu pilgrimages to Mount Kailasa, Mount Olympus, Mount Fuji, and Kun Lun in China (Tomasi 11). In such journeys, in which topographical height denotes sacred space, the pilgrim faces starvation, storms, fatigue, hypothermia, and, if all goes well, achieves spiritual enlightenment and transformation. But beyond the structures of traditional religious pilgrimages through and to the tops of mountains, contemporary mountain trekking, while often not for specifically religious purposes, is frequently infused with the language of pilgrimage. Like a pilgrim, the mountain climber is, perhaps above all, an individual seeking self-transformation in the process of physical mobility and exertion; yet the climber is also part of a team of other climbers who identify as nationals and are often sponsored by multinational corporations, as a pilgrim can be both individual and part of a church, nation, or communal body. Climbers, whose lives depend upon one another’s for a successful summit, create the *communitas* Victor and Edith Turner ascribe to pilgrimage, although the extent to which these bonds temporarily alter national, gender, racial, and class hierarchies is debatable. Narratives of mountaineering, like pilgrimage, often focus on bodily experiences of suffering and subsequent healing by attaining the summit and/or sacred center. In addition to the discursive similarities in pilgrims’ and climbers’ stories about healed and suffering bodies, mountaineering and pilgrimage have a common heritage in militarism and science. Much work, such as
Mountains of the Mind, demonstrates that the modern cult of the individual, along with the rise of sciences such as geology and botany, have shaped modern mountain travel materially and discursively.

However, the modernity-as-origin narrative can occlude the important resonances between modern, secular travel and sacred or religious travel of past and present. In histories as diverse as the Crusades and British military incursions into Tibet beginning in the eighteenth century, militarism, religious power, and “moralized mobility” have been inextricably linked in the formation and legitimization of certain places, and the travels to and narratives about such places, as sacred. Simon Coleman and John Elsner write in their introduction to Pilgrimage: Past and Present in the World Religions,

Imagine that reaching the goal of a pilgrimage is like attaining the summit of a mountain. The path of any one pilgrim treads only on a single slope and cannot but exclude the views from the other faces. Nor can the climber be fully aware of the other tracks mapped out in the same terrain by pilgrims of past and future. (6)

Their metaphor illuminates both the seduction and betrayal of unlimited visibility: while there are perhaps universal aspects of pilgrimage, there is no superior vantage point from which to determine pilgrimage’s origin or to account for all its different forms with equal attention to each tradition’s nuances. Therefore, to extend secular travel’s origin into the premodern past is not to lose sight of historical specificity; for even if one looks only within a Christian tradition, there does not appear to be any unified, quintessentially Christian pilgrimage. Centuries of Christian spiritual travel
have proven to be a complexly layered, hybrid process, rather than a continuous linear progression.\(^{14}\)

Pilgrimage’s etymology itself demonstrates its complex historical origins.

James Harpur explains pilgrimage’s etymology: “The word ‘pilgrimage’ is derived from the Latin *peregrinus* (from *per*, ‘through,’ and *ager*, ‘field’ or ‘land’) and clearly suggests the idea of a journey and of a predetermined destination” (Harpur 9). Yet Harpur also describes how Irish monks between the fifth and ninth centuries used the term *peregrinatio* to denote wandering *without* a fixed destination (37). Judith Adler specifies the nationalist and militaristic dimensions of this travel by tracing *peregrinatio* to the Greek word *xeniteia*, which derives from *xenos*, or stranger.

Adler explains that *peregrinatio* “is of military origin, referring to a mercenary’s stay outside his country” (32). Thus, pilgrimage is never only pilgrimage; its meanings have continuously shifted and therefore its forms of travel, as well.

Asceticism, which comes from the Greek term *askesis*, suggests a military/athletic contest; thus,

> early Christian ascetics or ‘athletes of virtue’ were among the most mobile persons of the late Roman empire. Both as attractions and hospitalers, the institutions they developed eventually providing the ancient world with a well-developed travel infrastructure. (Adler 28)

These mobile ascetics frequently created quite a spectacle, and St. Simeon Stylites’ (390-459) is one of the more compelling. Born in northern Syria, Simeon practiced

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\(^{14}\) I focus specifically on Christian pilgrimage traditions here because they have been most relevant to modern, North American climbing practices. However, this could be changing, as climbers engage with Buddhist spirituality in the Himalaya. I am not yet aware of the extent to which Buddhist, Muslim, or Hindu pilgrimage practices shape contemporary climbers’ narratives of travel.
abstinence from food and water and remained standing during Lent, and eventually moved from a remote hut to a small ledge on a mountain. However, he attracted so many pilgrims that he began constructing a series of pillars to escape his followers.

Harpur describes Simeon’s efforts:

For the first few years his pillar was a modest nine feet tall, but the next three grew steadily higher—from eighteen feet to thirty-three feet to a vertiginous sixty feet. Perhaps not surprisingly, Simeon’s aim to escape the crowds backfired. Pilgrims and curious tourists flocked to see him perched on his eyrie, and talismanic statuettes of the saint and medallions depicting him on his column became popular souvenirs. (27)

Rather than reading such bizarre stories as aberrations of traditional pilgrimages, I suggest that these strange configurations of physical height as moral tourist traps can be productively read as the sites at which piety and tourism have always converged. These convergences, of course, are constantly shifting; perhaps in its current configuration, spiritualized travel in the form of mountaineering has become linked to nationalism, obsession, and the aesthetics of self-starvation. Thus, pilgrimage and mountaineering share a form of mobility in which the traveler battles not only the extremities of harsh landscape, but also his or her own internal landscape of fear, doubt, unworthiness, persistence, and purification through self-denial and an obsessive focus on a higher goal.

Authenticating this inner transformation depends greatly upon outward displays of suffering. In mountaineering as in pilgrimage, body politics play a central role in quantifying the sheer torment the mountaineer must undergo to accomplish his
or her goal. A recent column in Alpinist, a technical alpine magazine with stunning color photos and detailed accounts of newly-climbed routes, illuminates the common representation of “real” climbers’ bodies as fit and trim, versus those of lazy, gluttonous tourists. Kelly Cordes, a climber from Estes Park, Colorado, writes about a tourist in a ranger station in Alaska. The brief essay begins, “He glanced at the mountaineering display, then started stabbing questions at the ranger on duty. How many summit? How many die? How many try? He’d seen Vertical Limit.” The tourist marks himself as such by his overweight, lumbering body and his amateur fascination with the act of summiting:

He stood way too close to my chair, catching his wind…His cheeks flushed so red they looked as if they could explode; his gut pushed so hard on his shirt I feared it might burst through and crush me.
“You summit?” he blurted between breaths?
Goddamnit, three weeks in my happy place and now this… What he meant, of course, was had I summited “Mt. McKinley”… We had summited, via a new route on a peak we’d never even heard of before flying into the Ruth; there was also the matter of a ten-kilometer ski approach and 4,300 feet of technical climbing and a whiteout storm near the top that lasted through the descent and a plunge into a crevasse when skiing away afterward. But that’s not what he wanted to hear.
He panted as though he’d just run a marathon. He needed my reply now.
“Nope,” I said.

For an extreme example of this fascination and revulsion with bodily suffering, see Joe Simpson’s Touching the Void (New York: Perennial, 2004), which was made into a motion picture and released in early 2004. The book and film depict Simpson’s climbing disaster in the Peruvian Andes in the 1980s, and narrate, in gruesome detail, Simpson’s terrible leg fracture, a near-deadly fall into a crevasse, loss of one-third of his body weight, and subsequent crawl down a 21,000 foot mountain after being left for dead. The thrill of Simpson’s “miraculous survival” is certainly enhanced by the spectacle of absolute bodily, and thus spiritual, destruction and recovery.
Then, Cordes writes, “His head lurched back a bit… He’d been rooked: he’d come all this way to see a real climber, and this was all he got. ‘Pthhhh,’ he snorted, and waddled away” (Cordes 19). Thus, certain mobile bodies are mobile in the “correct” ways; others just roll out of motor homes and ask insipid questions. Climbing literature is full of these stories that differentiate between tourists, “armchair adventurers,” and real mountaineers. Part of this snobbery is based on a legitimate concern with safety: an overconfident amateur’s lack of skill on a mountain can risk an entire group of people’s lives. Yet such stories also reflect climbers’ concern about outsiders who jeopardize the sport’s status as authentic in its difficulty and danger. Thus, despite the American allure of road trips, in spiritualized, adventure travel narratives, just getting up and going to a far-flung place isn’t enough; movement under physical duress in extreme environments must be undertaken in prescribed ways.

Bearing witness is another key feature of early Christian pilgrimage: early pilgrims are not just “visiting” sites, they are “witnessing”: because “the journey is too arduous and lengthy to be common, …most believers must forego it, substituting for it the vicarious experience of reading” (Campbell 18). This is important because “with Christianity we find at last an audience for the first-person travel account and a metaphysic in which private experience is valued and self-consciousness imperative.” Thus, considerations of audience, vicarious pleasure and education, and self-production in conjunction with allegorized topography are features of spiritualized travel writing that continue to inform modern climbing stories (Campbell 20).
Climbers and pilgrims aren’t the only ones involved in producing the suffering hero. In “The Survivors,” an excerpt of Maria Coffey’s *Where the Mountain Casts Its Shadow* (2003), Coffey describes the women and children left behind when mountaineering men die. After Coffey’s partner and another man are killed on Everest, the women journey to Tibet to follow their route:

That September, Pete Boardman’s widow, Hilary, and I set off on our own journey to Everest. We stayed in the same hotels they had; we crossed the high, dusty plains of Tibet in the back of a truck, as they had. We trekked for ten days across the passes of the Kharta and Karma valleys, on the eastern side of Everest, and up the rough 12-mile trail to the site of their advance base camp. We sat in flattened-out areas where their tents had stood, and we collected relics: an empty whiskey bottle, film cartridges, the tattered remains of a copy of Bruce Chatwin’s *In Patagonia*, which I had given Joe to read on the trip. On our way back down, through the Rongbuk Valley, we left mementos among the stones of Joe and Pete's memorial cairn. (1)

Much as a medieval pilgrim would follow a route to touch a saint’s relics, the two women create a pilgrimage of their grief. In doing so, they illuminate the ways that adventure travel is enmeshed in religious discourse. Calling these women’s journey a pilgrimage is not just a reference to the obvious, pilgrim-like activities in which they engage (such as physically retracing their dead partners’ route, collecting relics, and placing stones on a memorial shrine); rather, this comparison is productive because it illustrates how this grieving ritual is performed and articulated, both physically and in the published excerpt’s narrative, as a spiritual climb. To call this kind of pilgrimage a performance is not to diminish the very real grief and loss these women experience. On the contrary, these stories demonstrate the very real emotional and generative power that these discourses have for climbers and their families. Coffey describes the mystique that surrounds the men who are “called” to the mountains:
A year before Joe died, he and several expedition mates gave a lecture, in London's prestigious Queen Elizabeth Hall, on their first ascent of 25,325-foot Mount Kongur, in China. Standing at the back of the auditorium, I watched Joe cast his spell. As he spoke, pictures were projected on a huge screen behind him. Precipitous snow slopes. Knife-edge ridges. Summits soaring into the sky. Joe stood before us, brimming with hubris, spinning stories of daring and death. By then I knew his faults, the weaknesses behind the image. But like everyone else in the audience, I was enthralled. I envied him the certainty of his calling. He was the hero I could never be, the hero I thought I needed—without any real inkling of what that would cost. (4)

A series of rather strange photos accompany this text. In another context, they would seem ironic; however, given the very serious nature of Coffey’s piece, the photos oddly illustrate the religious iconography that permeates these stories of loss. In one photo, a man wearing nothing but hiking boots and shorts is sprawled out sleeping on a bed; a woman, presumably his wife, is seated next to him, gazing upon him wistfully as she cradles a small child. Like portraits of the Madonna, the woman is bathed in angelic light, suggesting a long-suffering, abandoned mother and wife who must endure her husband’s long and dangerous travels. Thus, abandonment and loss are constitutive parts of the pilgrimage trope, and are performed (with varying degrees of self-consciousness) in accordance with pilgrims’ and mountaineers’ narratives of tragedy and transformation.

The almost joyous threat of bodily destruction as religious fulfillment is especially apparent in stories of near-death experiences. Jane Stevenson writes in “Hunger,” a haunting essay which appeared in the March, 2004 Harper’s, about the Mulrooneys, four Irish sisters who locked themselves in a house in 2001 and starved themselves to death. Stevenson compares the “Death Zone” of mountaineering, or above about 24,000 feet, the altitude at which the body begins to die, to the death
zone of starvation: “What distinguishes the paladins who enter one or another Death Zone is not their suffering but their perception that to do so voluntarily is a triumph of the human will” (14). Stevenson describes the adventure book genre that celebrates these feats of discipline: “With respect to extreme adventure, book after book of tight-lipped prose sets forth the basic tenets of the ultimate test of man against the elements and represents this as a wholly sane extension of normal behaviour, though Himalayan mountaineering bears the same relationship to healthy exercise that anorexia does to healthy weight-watching” (15). There is something particularly spiritualized, Stevenson suggests, about the way that human bodies react to the death zone: at altitude, where temperatures are regularly below-zero, bodies do not decompose; they freeze and blacken in the sun and wind, turning into grisly and shriveled mummies, but they remain intact and largely recognizable. Stevenson writes:

The Death Zone is also the zone of eternal stasis. Those greatly favoured of God, in the Catholic tradition, are spared corruption. This is an extremely strange aspect of a religion which values the body—God incarnate, dwelling among us—as none other in the history of the world. But there is a masculine fear of corruption, the workshop of filthy creation, the rot which generates new life, and Christianity has been overwhelmingly articulated and fleshed out by men. Rob Hall is a saint of the new masculinity, his stone-hard, incorruptible corpse…stands as an icon of sacred individualism. (17)

Stevenson argues that Rob Hall, the great mountaineer who died in the highly publicized Everest disaster of 1996 while trying to help another man down, performs masculine incorruptibility through his body’s refusal to rot; like the Mulrooney sisters’ starvation, Hall’s death is emblematic of the dire lengths to which displaying one’s strength of will can go. These extreme bodily performances make it clear that
drawing connections between spiritual and secular quests is much more than a suggestive exercise: in mountain climbing, Christian ideologies interact with gendered notions of bodily purity in very real and deadly ways.

In connecting pilgrims and mountaineers, it is easy to foreground these obsessive, self-destructive stories shared by both kinds of travel. People willing to suffer so deeply, to forego life itself in pursuit of utter annihilation and potential rebirth, make fascinating stories, after all. Yet it seems that we are quicker to rationalize this kind of devotion when we identify it within religious spheres, and find such determination less comprehensible in things considered purely athletic pursuits, such as mountain climbing. Stevenson writes that the question posed by the Mulrooney sisters’ starvation is, “Is mortal agony too much of a price to pay if you think Heaven is a fact and not a metaphor?” (17) What questions, then, are posed by plummeting thousands of feet or freezing to death alone on a mountainside? In the absence of a direct appeal to Heaven, how far can one take this connection between pilgrimage and mountaineering? Stevenson ends her essay by declaring, “Fasting against God may be humanly deraigned and theologically sinful, but it is not purposeless or neurotic. Less so, perhaps, than the complete and malignant uselessness of Rob Hall’s death on Everest” (18). Yet in the spiritual economy of physical movement, usefulness does not seem to be an applicable category, whether the object of worship is God, death, one’s own body, or extreme danger itself. Despite its divergences from a strictly religious moral economy, climbing a mountain
remains a highly allegorical practice, in which the harsh, dangerous, formidable landscape stands in for the climber/pilgrim’s spiritual and physical struggle.
At the Banff Mountain Film Festival’s debut of the award-winning short film *Cold* (2011), about the first successful winter climb of Gasherbrum II in Pakistan, the camera focuses on a scene of abject misery: a frozen tent zipper in a pitch-black night with howling winds that beat aggravatingly against the tent walls, and heavily frost-covered sleeping bags. Then, one sees that there’s a person huddled inside one of the decidedly un-cozy sleeping bags. A slight movement reassures the audience that the person inside hasn’t succumbed to hypothermia. But is the climber ok? Or are we about to witness the unfolding of another mountaineering tragedy? Will it be cerebral or pulmonary edema, or exposure? The film’s star, co-producer, and alpine climber Cory Richards begins the film with a voice-over: “What the fuck am I doing here?” This is a sentiment hard to imagine being articulated, at least with the same kind of openness, in a women’s mountaineering film, much less a wilderness therapy setting.

In women-specific climbs, emotionally and collectively processing setbacks is expected. But *Cold* demonstrates that men are permitted doubt and existential crises, especially in very dangerous, gutsy first ascents, in ways that women’s expeditions can’t accommodate. For the star of a mountaineering film, Cory Richards is a remarkably humble narrator, expressing doubt about his climbing abilities and remorse for being a “fuck-up” for most of his young adulthood, and sobbing openly into the camera after his party of three barely survives a massive avalanche. Yet
Richards’ difference, his vulnerability, makes the story a compelling one, and is assuredly part of what is winning awards for the film. Mountaineering films’ generic conventions make a space for this kind of masculine rawness, and Richards’ humility only strengthens his role as a new mountaineering star.

It’s true that in mountaineering films and books about women, there is more open emotionality. Crying happens quite a bit while women process tactical decisions or realize they are unable to continue climbing due to poor conditions or illness. Yet this emotionality is contained, framed, restricted. Crying is what women just do naturally, what one expects. It doesn’t have the shocking effect of the tears streaming down Cory Richards’ frozen, distressed face. In mountaineering and climbing worlds, women are often compelled to contain these emotions into a trajectory in which lessons are learned, optimism is maintained, and processing is successful. Crying is par for the course, but ending on a note of uncertainty, as does Cold, isn’t quite possible. Instead of the question, “What the fuck am I doing here?” there is most frequently some version of the same answer: “I’m here to learn more about myself.”

In A Day in the Life: 5 Women Who Climb, a film that profiles professional climbers, the women explain, in addition to giving technical advice and personal histories, how climbing has changed their lives. Their reasons for climbing, and the difficulties it has helped the women navigate, are gendered and intimate: one woman had always felt weak and lost before she found climbing; another suffered from an ongoing battle with bulimia and anorexia. One climber offered advice to viewers, presumably female, to “flow, not force” the climb, and made a point of emphasizing
“calculated risk” in pushing yourself in the sport, two very common tropes in women’s wilderness literature. Wilderness therapy, which has been cultivated from a mix of Outward Bound-style self-reliance philosophies and ecofeminism, is the professionalization of the sentiment common to alpine climbing that wilderness experiences put one in touch with one’s authentic, healthy self. Though *A Day in the Life* doesn’t pitch its content as therapy, it shows the overlap between women’s mountaineering cultures and practices that are specifically labeled wilderness therapy. Ideas about the reciprocal relationship between femininity and nature are what make women’s mountaineering and climbing stories marketable, and wilderness therapy effective.

This chapter bridges the mountains of Cory Richards’ *Cold*, as a place to test oneself and take refuge from civilization in extremely risky conditions, and mountains’ status as places of recovery and healing within therapeutic, gendered parameters. Wilderness therapy, a semi-loose collection of practices with varying degrees of professional licensure, has been a growing field since the early 1990s. Significantly, the vast majority of wilderness therapy practitioners and organizations have focused on adolescents (particularly “at-risk” youth) and adult women. The wilderness encountered in these worlds emerges from the conventions of mountaineering I have outlined, but operates with important differences. For recovery climbs to be possible, mountains have to be dangerous, but simultaneously be made into safe places with managed, acceptable levels of risk. Achieving this requires work, as I will show. If mainstream mountaineering culture is about pushing
oneself up more obscure and dangerous routes on lesser known peaks with as little gear as possible, then the recovery cultures of the women’s-specific wilderness therapy cultures I describe define wilderness as a place in which risk is made manageable. Wilderness becomes therapeutic and safe by working, in self-consciously gendered ways, with metaphors, which are typically structured oppositions such as home/away, nature/culture, risk/safety, and listening/acting.\footnote{There is also a fascinating human/animal metaphor at work in wilderness therapy. Laura Tyson, the former Director of The Women’s Wilderness Institute, told me about theories of learning to discharge fear and trauma in the way that prey animals do in the wild. Rabbits, for example, literally shake off their fear after being chased by a predator, Tyson told me, and thus, the stressful moment doesn’t remain stuck in the body where it turns into trauma, as it does for humans. Tyson was drawing on the work of psychologists Bessel van der Kolk and Peter Levine, who runs a “Somatic Experiencing” program that teaches people to become animal, in a sense, to process traumatic events somatically.} If alpine climbing’s narration can be imagined as always ready for film, with dramatic, hard-driving or sweeping scores, big vistas, bleak, dire predicaments, and some degree of bodily harm, wilderness therapy stories emphasize connection, gender difference, embodied learning, and the gentle, safe testing of boundaries. Wilderness gets made into a naturally healing place.

But this is a particular form of nature, a “slow wilderness” that repudiates fast and risky aesthetics, coded as masculine, and trades them for ecofeminist tropes of mutuality, nurturing, and femininity.\footnote{“Wilderness” in these contexts is different from nature more generally, and hence, the field isn’t “nature therapy,” but wilderness or adventure therapy. In wilderness therapy, nature is used as a kind of raw material, whereas wilderness is more specific, something made and used in particular ways. This runs counter to legal definitions of wilderness in the US, which would define it as something free of human influence and to be best left in an unchanged state. In wilderness therapy, wilderness is the}
industrialized and unjust food production systems by valuing a hands-on, visceral relationship with food, the favored aesthetic and bodily practice is savoring and tasting one’s food, thoughtfully and sensually. The wilderness in wilderness therapy is a similarly paced world: the goals in a wilderness therapy course are not to achieve or win, but to feel, slowly and safely, what wilderness is, and how it corresponds to what is “true” about one’s own nature as a woman.

Ecofeminism’s development is an important backstory to wilderness therapy. In the wilderness therapy literature I describe and in my conversations with wilderness therapy practitioners, ecofeminist language abounds, though ecofeminism is rarely called out directly. Like ecofeminism, wilderness therapy proclaims nature as a common ground and an innately empowering place for women. Wilderness therapy might be thought of as one of ecofeminism’s practical applications, in which women are taught to tap into nature’s power, and by extension, their own. There have been extensive critiques of ecofeminism’s definitions of women and nature, which Noël Sturgeon summarizes in Ecofeminist Natures. I share many of these critics’ concerns about ecofeminism, particularly the way it gets enacted in wilderness therapy contexts: whiteness is a frustratingly under-theorized category, and “women”

distilled version of nature that can be used in metaphorical healing practices. Built into the very definition of wilderness therapy, then, is a sense of how human practices shape and are shaped by nonhuman, natural places.

18 Like wilderness therapy worlds, the slow food movement proceeds by embodied metaphors. One is its emphasis on “clean” food, meaning food that is produced sustainably, but that also feels clean to eat (safer, tastier, more ethical). See Allison Hayes-Conroy and Deborah G. Martin, “Mobilising bodies: visceral identification in the Slow Food movement,” The Transactions of the Institute of British Geographers, April 1, 2010.
and “wilderness” are often naturalized and somewhat simplistic. But in Sturgeon’s thorough account, she argues that ecofeminism has been misunderstood as naively essentialist in its equation of women and nature. She suggests that ecofeminism actually relies on “contingent foundations,” (10) and that “the theoretical inconsistency found in these various ecofeminist positions is a result of the strategic and dynamic qualities of the formation of ecofeminism as a political location within specific historical and political contexts” (58). Rather than “critiquing ecofeminist racial and gender essentialisms simply as theoretical problems,” Sturgeon looks at “their strategic effects in particular historical circumstances” (115). Like Sturgeon, I advocate a reading of wilderness therapy that looks at its strategic effects while acknowledging its contradictions. In wilderness therapy, wilderness is both indescribable and meticulously managed, and its metaphors of slowness, risk, and femininity enact healing practices that shuttle between these two senses of wilderness, wild and controlled.

Lauren Berlant’s work on the “intimate public sphere” is a useful framework and departure point for thinking about women and wilderness as they intersect the therapeutic. In her study of “chick lit” and other forms of sentimental public women’s culture, Berlant claims, “What makes a public sphere intimate is an expectation that the consumers of its particular stuff already share a worldview and emotional knowledge that they have derived from a broadly common historical experience” (viii). To be legible as an intimate dialogue, women’s culture relies on the common ground of “the female complaint” of “thwarted feminine heterosexuality,” that love is
disappointment but must be sought after nonetheless (23). In the intimate public of women’s climbing scenes, narratives of suffering femininity circulate with the deeply held belief that being in the wilderness is healing, particularly for women, and that women are too often kept apart from experiencing wilderness. The history, professionalization, and discourse of wilderness therapy are relevant to women’s sport climbing because of the ways that wilderness therapy is feminized and women’s climbing is traumatized. Trauma and recovery narratives are embedded in women climbers’ stories, as if to be a woman climber is to necessarily and already have to unburden oneself of an emotional difficulty or trauma, even if it’s just an overbearing boyfriend and poor self-esteem.

Berlant incisively describes the tangle of emotional, quasi-feminist cultural productions that both sustain hope in a better world and capitulate to crushing normativity, for such a desire “for there to be a ground to stand on in the world as it exists” that its consumers “remain, on the whole, committed to the normative permission of feminine fantasy as a ground—despite everything” (12). Berlant uses descriptors such as “wobbly” and “jerky” to get at this contradictory state of affairs. But Berlant also admits finding it “depressing” to write about sentimental women’s culture, because it is a case study in what happens when a capitalist culture effectively markets conventionality as the source and solution to the problem of living in worlds that are economically, legally, and normatively not on the side of almost anyone’s survival, let alone flourishing. Nevertheless, flourishing happens. (31)
Like the women’s culture Berlant describes, wilderness therapy worlds could be called “juxtapolitical”: the wilderness is, after all, a respite from the political par excellence, and a belief in its otherness from culture is what often sustains wilderness therapy’s work (10). This view of wilderness, as I have shown, often relies on conventional and seriously limited binaries of nature and culture. But I want to return to Berlant’s sense of women’s culture being “jerky,” “wobbly,” flexible and adaptive, and resist the tendency to close off this narrative too quickly through structural determinations.

In the professional literature, wilderness and women are knitted together in a way that Berlant might argue perpetuates the fantasy of the feminine. “Women’s experience” often seems to be a fairly stable placeholder grounded in a similarly unquestioned notion of what wilderness means. In the special wilderness therapy edition of *Women and Therapy* (1994), one contributor writes, “The wilderness setting allows for a conscious use of the Earth body metaphor as it relates to women’s physical bodies. The technical skills and physical activities allow women to experience their body in an active, functional arena rather than an aesthetic one” (Arnold 44). Furthermore, wilderness is naturalized as a metaphor for women’s lives, as in Irene Powch’s declaration:

The wilderness strikes a deep chord in a woman’s soul…it is a chord that a woman recognizes as vital to her essence as a woman, as the woman she is, not the woman she is forced to be. At some level, we must be aware of the core of our womanly power and yearn to reconnect with it, gravitating to the wilderness where that reconnection becomes possible. (20)
Here, wilderness and women are mutually reinforcing and share some kind of powerful essence; if women are in touch with their “core,” then wilderness is the natural place to which they must gravitate to have their female power mirrored back to them. Wilderness, defined in the anthology’s introduction as “a place where people are visitors and should leave the land in a natural state as it has been for all time,” might be read as just as timeless and ideally unperturbed as one’s feminine essence (2). Yet this pronouncement doesn’t quite match with how a lot of wilderness therapy is actually practiced in the field. The Women’s Wilderness Institute runs their survivor courses at the Blue Moon Ranch in far northern Colorado near the Wyoming border, a place certainly “wild” but also not “left in a natural state for all time”: it is a privately owned parcel of 150 acres and has a compostable toilet and a sun shelter. From here, definitions of wilderness get messier. Though the authors make a distinction between ropes courses and “true” wilderness therapy, the anthology eventually settles on defining wilderness therapy as activities that “transpire in the outdoors and involve taking risks” (2).

Wilderness therapy unfolds from the conventionality of wilderness’ restorative powers, as well as women’s proximity to the therapeutic. It packages the experience of wilderness as a transformational environment in which, properly guided, one learns to take control of one’s own life, recovery, and health. The conventionality of wilderness adventure—the healthy, upwardly-mobile, white, tranquility in nature aesthetics of REI, L.L. Bean, and, on the more adventuresome end of the spectrum, Patagonia catalogues—is part of what undergirds belief in
wilderness therapy’s efficacy in the first place. For organizations like The Women’s Wilderness Institute that offer wilderness therapy as well as non-therapeutic women’s wilderness courses, the outdoor gear industry is the economic and cultural foundation that legitimizes wilderness therapy and ensures the organization’s financial viability. If nature is restorative for everybody, then wilderness therapy is not a strange outlier, a kind of outdoor rehab, but rather just a guided, more intensive version of what everyone in outdoor gear ads is doing anyway.

Nevertheless, wilderness therapy’s metaphors are shifty, and they are hard to assimilate completely with Berlant’s vision of the smooth marketing products of capitalist culture. Wilderness therapy, still unfolding as a practice, has flexible and often contradictory ideas about what constitutes wilderness and, by extension, what exactly constitutes the gendered mind-body interactions one has with this wilderness. It uses the common ground of wilderness and femininity, in ways both conventional and strategic, to emphasize specific kinds of physical experiences to teach women to participate in healing exchanges between the physical, mental, emotional, and environmental. This relay happens through wilderness therapy’s constructed metaphors, which must be seen as always embodied, strategic, performative, and shifting practices, while never fully abandoning the conventions of gender and wilderness narratives. Berlant writes, “The identification of women with affect and emotion is a complex thing, not just a projection of the view that women feel more powerfully than they think, a cliché that can make women seem both trivial and magnificent” (170). Adding “wilderness” to “affect and emotion” in Berlant’s
formulation, I emphasize the complexity of wilderness therapy’s alignment of women
and wilderness.

Though Berlant is less concerned with embodied practices in her account, I
argue that the ways these metaphors get enacted, materially and semiotically, matter.
Queer theorists of performance like Jose Muñoz help me understand wilderness
therapy practices as complexly material, and as generating all kinds of ways of being
with and in wilderness that aren’t explained in any satisfying way through accounts of
capitalism’s voracity. Later in this chapter, I will draw on Muñoz’s idea of queer
ephemera to argue that though wilderness therapy prescribes and manages what
wilderness is, its embodied lessons move across the boundaries between home and
away, nature and culture. We need different analytical tools to get at the
expansiveness of wilderness therapy’s practices, and to map the ways its binaries are
not quite binaries at all.

But first, a note on definitions of the field itself: because wilderness therapy is
still an emerging discipline, there is no consensus on what “it” actually is. The major
wilderness therapy (often called adventure therapy) organization is the Association
for Experiential Education (AEE), based in Boulder, Colorado, which publishes the
*Journal of Experiential Education*. The AEE also provides accreditation for
wilderness therapy programs, one of which is The Women’s Wilderness Institute.
Wilderness therapy practitioners frequently have a Master’s degree in counseling, or
will have been trained as an outdoor learning professional. Wilderness therapy practitioners with The Women’s Wilderness Institute, Jody Radtke, Sandra Gaskill, and founder and Director Laura Tyson, talked to me about the importance of intention in wilderness therapy, and the role of the wilderness itself as an agent and catalyst for healing. But these things, too, can only be defined metaphorically, one thing unfolding into the next, making dense associative webs. Narratives and practices are intermeshed in wilderness therapy, and what emerges looks less like sedimented, professional doctrine, in the way that training to be a psychologist or marriage and family counselor might be, and more like a continually shifting and highly complex way of enacting what women and wilderness are, and how healing takes place.

Wilderness therapy’s status as a still-emerging set of practices does not mean, however, that it is theoretically vague or sloppy, or merely an uncritical, celebratory rehashing of the belief that women are naturally aligned with wilderness. Rather, wilderness therapy practices have as much to do with productively using structure and control as they do with deconstructing boundaries between home and away, nature and culture, and women and wilderness.

**Wilderness and The Therapeutic Boundary**

The Women’s Wilderness Institute occupies an office of three or four rooms, plus one large outdoor gear storage area, in a warehouse/office district on the grittier

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19 In addition to the increasing number of advanced degree offerings in wilderness therapy, many universities now offer undergraduate degrees in adventure education. Some, like Prescott College in Arizona, specialize in programs like this.
edge of East Boulder. The geography of Boulder nonprofits, and industry in general, follows a fairly predictable West-East class pattern. West Boulder sits snugly against the edge of the Front Range, the foothills (which are really mountains in their own right) of the Rocky Mountains. Big, well-financed, and national nonprofits often find space in one of the nice Victorian, Craftsman, or brick buildings of downtown and West Boulder: the Sierra Club, the Nature Conservancy, and the International Mountain Biking Association all have offices there. As you travel up in numbered streets from West Boulder and cross the railroad tracks that semi-officially separate East from West, there are fewer Craftsman and more ranch-style homes. Between 45th and 66th streets, warehouses, car repair shops, the SPCA, a big post office, the manmade Boulder Reservoir, and glass and metal fabricating businesses dominate the landscape, which is flat and open high plains, with great views of 13,000 foot Mt. Audubon that’s obscured by the foothills when you are on the West end of town. When I volunteered there in 2006, The Women’s Wilderness Institute had an office staff of four, not including the field staff, all upbeat, fit, adventurous women whose outdoor activity resumes made me feel like I had barely seen Colorado, my former home of six years, much less the rest of the world.

The published scholarly literature on wilderness therapy is relatively limited: the majority of it focuses on wilderness therapy for adolescent males, and the two major anthologies available that describe adult women’s courses are the wilderness therapy edition of *Women and Therapy* (1994) and an anthology published by the Association for Experiential Education in Boulder, Colorado, *Women’s Voices in*
Experiential Education (1996). Developed in the US in the 1940s and modeled on men’s wilderness training programs such as Outward Bound, wilderness therapy has only recently become popular to treat women survivors of rape, violence, and trauma. Initially, German educator Kurt Hahn developed an Outward Bound course to prepare young British seamen during World War II by teaching them “the validity and utility of values such as tenacity and compassion” (Powch 13). Outward Bound arrived in the US by 1962, and thousands of programs developed using the Outward Bound model. Other accounts, such as environmental writer Gary Ferguson’s narrative of his time spent with a youth wilderness program in Utah, trace the history of experiential education back to “tent therapy” in the early 1900s, designed to recuperate tuberculosis patients by letting them get fresh air and play outdoors (Ferguson 88).²⁰

Outward Bound’s and The Women’s Wilderness Institute’s (TWWI) course offerings are similar, as laid out in their glossy catalogues. Both have stunning photos of mountains, rivers, and red rock canyons; both are filled with happy people in bright outdoor gear in primary colors (there are only women in TWWI’s catalogue, and more teens and twenty-somethings in Outward Bound’s). Many staff have worked for both organizations: Jody Radtke, the Program Director at The Women’s Wilderness Institute, had led courses for Outward Bound, as did Sandra Gaskill, who was planning a trauma survivors course for TWWI. Jody explained some of the

differences between Outward Bound and TWWI: Outward Bound only offers trauma recovery courses on a contractual basis, while TWWI makes them a regular part of the curriculum, such as their Cancer Survivors and Trauma Survivors courses and, new in 2011, courses for military veterans. Outward Bound’s clientele is predominately young people who have just graduated from high school or college, and while TWWI also does a series of girls’ courses, it has a number of courses for adult women, such as backpacking, yoga, and canoeing. In 1998, The Women’s Wilderness Institute became the first organization to offer wilderness courses to women and girls in the Rocky Mountains. Laura Tyson built the organization on the premise that the Outward Bound model of experiential education was “patterned on emotional and educational learning styles of men and boys” (TWWI website). The Women’s Wilderness Institute was not out to just tap into a new market for wilderness education: it was making an argument about the different ways that women need to learn and interact with wilderness, about what women and wilderness are.

Interestingly, the project of staking out a new curriculum for women and recovery has not meant repudiating the Outward Bound model altogether. On the contrary, Laura Tyson talked to me about how it has been important for the organization, which was originally named The Women’s Wilderness Therapy Institute before “therapy” got dropped, to not come across as “too” therapeutic. Laura explained:

Colorado Outward Bound didn’t publicize their survivor courses very much, but now I understand it because the whole image of the organization would
get skewed. They were trying to back away from image of Outward Bound as a tough-kid treatment program. I can understand that now. One of the very first courses we did in 1999 was trauma recovery. We have to be careful of the way people perceive us as a place for kids or women with problems. We’ve had to be careful to keep it proportional so that’s not the main thing people are seeing.

Laura’s concern is about the organization’s financial viability and appeal to broad markets, but it also points to the assumptions about wilderness being a place that naturally gives rise to therapeutic cultures, and the need to carefully manage boundaries around the permeable categories of wilderness therapy and wilderness education.

While leading courses for Outward Bound, Jody got interested in becoming a licensed therapist when she “kept coming across people who were having panic attacks and really intense emotional issues.” She then pursued a master’s in Transpersonal Psychology at Naropa University in Boulder, founded in 1974 by Tibetan Buddhist monk Chogyam Trungpa Rinpoche. Naropa is also where Allen Ginsberg helped found the Jack Kerouac School of Disembodied Poetics. But the therapeutic parts of Outward Bound are incidental to the organization, and not the main goal. Jody said, “There’s a lot of people who go to Outward Bound for a formative life experience. It’s coded as a life-changing experience, that’s how they sell it, and so people come to that with all kinds of motivators underneath for what sort of life transformation they’ve been looking for…Do they expect a life changing experience and personal growth? Absolutely. But it’s not framed in that context of therapy.”
Sandra Gaskill’s account of the differences between her work for TWWI and Outward Bound was much more charged. She referred to “two bad events” working for Outward Bound that led to her take a break from wilderness work until she had healed from her experiences. One was a course she had led for sexual assault survivors: “The survivors of violence course is physical, emotional.” She made a vague reference to her struggle negotiating the course’s “lack of boundaries”: “I still hadn’t learned to set my own boundaries, to take care of myself. I was learning how to not be a therapist on the course.” The other course was in the summer of 1999, and “it was supposed to be a course for ‘good kids.’ I ended up with a juvenile delinquent, a man accused of sexual violence, and a woman survivor of sexual violence. I was trained in therapy, not in the Outward Bound way. We didn’t have enough structure. They did a poor job marketing or screening or both.” For Sandra, structures and training are essential to doing wilderness therapy well. She worried that for Outward Bound, “therapy is definitely not in their mission statement. They sometimes train their guides to do therapy even if they don’t have a therapeutic background.” All of TWWI’s guides doing wilderness therapy courses, on the other hand, have a professional degree in counseling. Outward Bound needed trained therapists but only had guides acting as ad hoc counselors, and this created a messy situation for someone trained to intervene therapeutically but not given the correct environment in which to do it effectively.

The differences that Sandra points to are not just ones of professional networks and credentials. They point to the structures of feeling that inform the
intentions and outcomes of adventure and wilderness therapy courses. Jody’s observations that students expect to have a “life changing experience” in Outward Bound recall the dense histories of hope, self-renewal, and recuperation built into the histories of the American West, embedded in almost every facet of American literary and popular culture. But in wilderness therapy, the life changing experience has a different weight and valence. The difference in wilderness therapy is that history isn’t something you leave behind as you advance into the wilderness. There isn’t the same sense of a frontier of adventure upon which you get to take what you want from a wild place, maybe just new canyoneering or whitewater rafting skills, or a stronger “sense of self”—call it the adventurer’s version of the extractive, dehistoricized frontier in Anna Tsing’s accounts. In wilderness therapy courses, histories of violence and illness are made into a presence, and are often a very active part of coursework.

For survivors of sexual violence, interactions with certain natural elements such as flies and mosquitoes, rain and lightning, dirt, and darkness can trigger sexual abuse memories and feelings, or panic. Invasive insects, such as flies and mosquitoes, can remind survivors of their lack of control over their bodies (Mitten 74). Mitten and Dutton, wilderness therapy practitioners who co-author an article in the Women and Therapy anthology, relate a story from a course in which

Sarah would sometimes have to retire to her tent to get away from the bugs. Even though insect repellent kept most of the insects off her body, the buzzing around her was too much. Once while she was rock climbing, large flies landed all over her legs. She felt an immense lack of control and felt the flies were invading her while she was helpless... She said it took all of her self-control not to scream, fall off the rock and jump around.” (135)
Mitten and Dutton explain, “Rain, like insects, can feel invasive and uncomfortable. Lightning can remind a survivor of ‘the jolt’ her body received in response to being sexually aroused during the abuse or of her world being taken over by a larger force” (135). Eager wilderness therapy counselors who tell their clients, “You can do it—just climb!” can “remind the woman of being raped or coerced against her will” (65).

In this light, wilderness starts to look different. It is still made into metaphor in a wilderness therapy context, but it is no longer just the blank page upon which the athlete/conquerer writes. Wilderness is also capable of writing metaphor upon the visitor’s body, of inhabiting it in ways not always welcome or comforting. In other wilderness education contexts like Outward Bound and NOLS, of course, the relationship between student and wilderness is not unidirectional either: the wilderness teaches you things, if you participate right, and you take home its (high-priced) lessons. But wilderness therapy courses, through their conscious use of metaphors that connect bodily and emotional experiences with landscapes, create productive category confusion between wilderness and culture, internal emotional health and external nature, even as these metaphors make claims on defining what these categories mean.

For all the claims by wilderness therapy practitioners and in the professional literature that wilderness is unrepresentable, unknowable, and inexpressible in conventional language, for wilderness to function as therapy, it must be made approachable, controllable, and broken down into something that can be healing within the parameters and constraints of a course one is paying for. Training oneself
to savor wilderness as therapeutic means getting in touch with one’s discomfort and trauma, but it also often means cordonning off darker histories of wilderness in the West—the Indian wars, ongoing land disputes between the federal government and tribes, and the legacies of mining. In this sense, wilderness therapy always has recourse to the conventional, a reminder that though its metaphors may refigure what kinds of practices and selves are possible for women encountering what counts as nature, the engine of the metaphors’ movement in the first place is the inescapable history of fantasies of wilderness redemption in the West.

I asked Jody Radtke about wilderness when I met her at a new tea café with a very polished ambience in downtown Boulder, in an area that was being redeveloped with two and three-story mixed-use office, living, and retail space. We laughed about the difficulty of the question, what is wilderness therapy? Or, first, what constitutes the wilderness component of this work?

Wow—a big question. Even that small section is a big question. I’d say that wilderness therapy can encompass a lot. It’s such a new field, and it’s almost nothing that happens in the wilderness that you would rule out—well, that’s not true either. Wow. I haven’t practiced this one. What is wilderness therapy?

After thinking for a minute, Jody sidestepped trying to define wilderness, and instead stressed the importance of approaching wilderness in certain ways. She made a distinction, too, between “therapy” and “therapeutic,” terms that also hinge on the intentions and settings in which they’re performed.

For me, wilderness therapy encompasses a more traditional model of one-on-one therapy in a wilderness environment, and you’re really consciously utilizing the wilderness as a tool for therapeutic interactions. And then there’s a broader scope, which would be therapeutic programs that happen in a
wilderness environment, where you’re using the wilderness, you’re doing communication skills, facilitation things that are therapeutic, but it’s not falling under the traditional model of therapy. So for me, those are the primary two things, but it definitely encompasses more traditional things like adventure therapy, but for me there is a distinction between therapy and therapeutic…

I would say that to be a specifically therapy program, it would fall under licensure thing, having a degree in counseling, all of the traditional things you’d need to have a private practice, work for an agency. Those things are new to wilderness therapy. It’s where you’re marketing specifically and saying, this is therapy. You’re working on this issue, great. You can use a therapy model and work. And that’s… I think the intention is the difference.

When I asked her if Outward Bound courses and The Women’s Wilderness Institute’s courses are ever therapeutic in the same ways, Jody made another distinction between adventure and wilderness therapy:

The distinction between wilderness therapy and adventure therapy to me is that in wilderness therapy you’re really focusing on the wilderness as the healing agent, as the catalyst, and with adventure therapy it’s much more about the activity as the catalyst for how you enter it. On a surface level, they look really similar, but on a process level they’re extremely different. You can do ropes course in adventure therapy, you can do a ropes course in wilderness therapy. But the way that it’s processed… is going to be very different.

Beyond the very general definitions in *Women and Therapy*, my conversations with Jody, Laura and Sandra showed me that it is almost impossible to define wilderness without its attachments to other terms like therapy, intention, and process. The problem of nailing down what the wilderness in wilderness therapy means is directly linked to the problem of defining the field itself, and the need for and anxiety of giving these practices a name and stable territory within psychological professions. *Women and Therapy*’s introduction claims that the volume was written to deal with “an obvious gap in the literature: this is the first collection of writings to deal
specifically with wilderness therapy for women and the symbolic value of wilderness accomplishments to women’s mental health” (3). Thus, this edition is framed as both being on the frontier of therapeutic issues—taking a risk to advance women’s health—but also normalizing wilderness therapy, reminding the reader that though wilderness therapies are relatively new, as of 1994 there were 250 organizations internationally that offer wilderness therapy activities (2). However, in “Ethical Considerations in Adventure Therapy: A Feminist Critique,” Denise Mitten suggests that this proliferation of wilderness therapy programs has also led to a somewhat unreliable standard for how these programs operate: “Just as there are no set standards for what the process of adventure therapy involves, there are no set standards for who practices adventure therapy” (58). Mitten also notes, “Other names such as adventure-based counseling, experiential-challenge, outdoor-adventure pursuits, therapeutic camping, and wilderness-adventure therapy are also labeled as psychotherapy. This field suffers from definitional problems and the plethora of terms contributes to the confusion” (56). Interestingly, within the discipline itself, a concern has been raised that wilderness therapy relies too much on vague, undefined metaphors and analogies, rather than solid science and psychology-based theoretical frameworks.

Part of this contention is based on safety concerns. While many different wilderness therapy programs spring up all the time, many of them are based in

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21 Mitten chooses to use the term “adventure therapy” rather than wilderness therapy, defined as “a therapy that places the client in activities that challenge dysfunctional behaviors and reward functional change” (56).
questionable, military-style training, particularly those targeting adolescent boys. Sandra Gaskill told me that, unfortunately, most people’s impression is that wilderness therapy is “about teens busting their ass, and the therapy is overcoming adversity.” “Teens busting their ass” can mean the kind of wilderness therapy program where adolescent participants are “kidnapped” from their beds at night, taken out to wilderness areas in Utah, deprived of food and water and, in a few recent disasters, accidentally pushed to death from exhaustion and dehydration. Thus, definitions of wilderness therapy directly affect ethical considerations of how programs get run, what kinds of risk and danger are acceptable, and what a recovery process looks like. The very terms and metaphors that wilderness therapy hinges on—wilderness, women, recovery, risk—are at stake when wilderness therapy gets defined, hence its practitioners’ nervousness about the field’s lack of definition.

Yet even in articles that worry about the field’s definition, there is also a recurrent sense of experience beyond language, of spirituality that exceeds the parameters of therapeutic discourse. Irene Powch writes of her own “transformation” in the Utah desert, “There is something inherent in wilderness experience that goes beyond the benefits that can result from a self-defense class or a climbing class, beyond the benefits of overcoming one’s fears, experiencing fair and equal treatment, or becoming more self-reliant” (19). After climbing to the top of a boulder, Powch writes,

I no longer just felt the warmth of the sun, smelled the scents of earth and sage, saw the rock and sky—these were no longer just sensory experiences—a moment had crept upon me where everything transformed. I was enveloped by a sense of belonging and being “in place” that I had never known before.
There is no comparable experience with which I can describe this except, perhaps, to ask the reader to call up a memory of a person suddenly “opening up” and allowing a deep intimacy to develop. Magnify this a thousand times. Imagine this emanating not from one focus, one person, but from every rock, every breath of air, every pore of earth. Imagine strongly feeling the power of the universe, and taking your place in it, knowing it is within you. Some might call this touching the Earth Mother, the Goddess. I found this experience with wilderness echoed by all of the women with whom I spoke about their wilderness experiences. (9)

Jackie Kiewa ends her essay with, “A final note: I am aware that the ‘Personal Growth Through Adventure’ model neglects an area of importance: the effects of the wilderness environment on the participant. Living and journeying in natural surroundings has in itself a profound significance which lies beyond the scope of this paper” (12). Where language ultimately fails, wilderness therapy suggests, is precisely the place from which wilderness therapy’s practices derive their power. This experience of intense, intimate living, “touching,” and “being” in a place is the most difficult and elusive aspect to capture in language, and yet it is wilderness therapy’s foundation. It then becomes necessary to look beyond critiques of nature/culture binaries and critical discourse analysis to try to understand what makes wilderness therapy speak to and work for its participants.

**New Heroics**

Part of wilderness therapy’s major project is redefining what constitutes a woman’s experience in wilderness. This is not unmediated, unfiltered wilderness experience, a vision of nature laid bare and offering its lessons directly to seekers. Instead, it is a carefully crafted, deliberately structured narrative technique that
translates embodied experience into healing narratives, and back into healthier embodied experience. The narrative arc of these metaphors aims to teach women to trust their body as a source of vital information by emphasizing physical and not just verbally therapeutic experiences.

Making pain and trauma into a narrative is one of wilderness therapy’s primary tools for recovery. Clients are encouraged to journal their experiences, but beyond the physical act of writing, using metaphors to reconstruct a healthy narrative of oneself, achieved through physical interactions with wild places, is a major component of wilderness therapy retreats. Feminist critics of autobiography and life writing, such as Sidonie Smith, have argued that traditional autobiographies celebrate individual, male achievements by drawing on narrative strategies such as crisis/recovery metaphors, which show how the threatened individual regains his wholeness and autonomy. Yet though wilderness therapy often relies on narrative strategies common to traditional autobiographies, it also radically departs from this

22 The Association for Experiential Education in Boulder, the publisher of Women’s Voices in Experiential Education, describes itself as an organization committed to “furthering experiential-based teaching and learning in a culture that is increasingly ‘information-rich but experience poor’” (book jacket). The AEE has also published a volume called Book of Metaphors, which instructs wilderness programmers in how to successfully construct metaphors for wilderness therapy clients. One exercise, called “Climbing Out of Shame,” has participants write down “shame messages” that they have been given over the years. While rock climbing, other participants yell out these triggering statements. The idea is that “when we experience and get triggered by shame, one of the most common reactions is to leave our body, to check out for awhile and let our mind float around somewhere else.” Because “when we leave our bodies, we lose strength,” rock climbing directs the participants’ attention to the moment at which “the strength leaves and we start checking out.” The activity’s goal is to “recognize how [the climber’s] body reacts to shame.” Michael A. Gass, PhD., Book of Metaphors Volume II, Association for Experiential Education, 1995 (120-121).
genre, most notably in its engagement with non-humans. In *Refiguring the Map of Sorrow*, Mark Allister’s study of life narratives that engage with landscapes and places to overcome personal sorrow or trauma, Allister argues that unlike traditional autobiographies, these kinds of “autopathographies” make non-human others the focus of their personal story in relational ways, rather than dramatizing the development and triumph of the individual human self. In Terry Tempest Williams’ *Refuge*, for example, Williams goes to the migratory bird refuge at the Great Salt Lake to help make sense of her mother’s diagnosis with terminal cancer. Birds, disease, water, and desert are as important to Williams’ story as any one individual’s life. Similarly, wilderness courses rely on “neutral others,” as Laura Tyson called them, such as rocks, mountains, and water to facilitate healing in traumatized clients. The “neutral others” that populate landscapes become part of the wilderness therapy recovery narrative, in addition to the individual, human trajectories of pain and healing.\(^{23}\)

\(^{23}\) I understand Laura Tyson’s phrase “neutral others” to mean that in the wilderness, the rocks, trees, and water aren’t actively against you, and aren’t invested in oppressing you because of your gender, bodily abilities, race, or class. This is a sentiment echoed elsewhere in wilderness therapy literature. Irene Powch writes that the wilderness is “inherently empowering for women—as well as other marginalized groups” because of the “even-handedness of consequences” (18). Powch, citing an African American recreational therapist, says, “In dealing with mother nature there’s no favoritism… in cities I feel more subjected to racism and sexism… I feel [wilderness] is a place that I can deal and not expect curve balls…or run up against macho-ism” (18). Citing a 16-year-old participant in a program called Inner City Outings, Powch writes, “Nature’s blind to everything…all it cares about is that you’re a person and that you want to be there and respect it” (18). Reading nature’s “neutrality” beyond this, though, doesn’t work, and nor do I think it matches wilderness therapy’s understanding of nature as an agent. The others in Terry Tempest Williams’ *Refuge*, for example, facilitate Williams’ grieving process, but
Wilderness therapists not only use narrative structures to facilitate their clients’ dialogue with their environment, they also make claims about the radical potential inherent in narrative itself. Karen Warren, who writes on ecofeminism and wilderness therapy, argues that narrative is “an invaluable vehicle for revealing what is ethically significant in human interactions with humans and the nonhuman world” (Warren, *Ecofeminism* 102). Warren relates her own rock climbing experience, during which she learns to be “in relationship with the natural environment… I felt myself *caring* about this rock and feeling thankful that climbing provided the opportunity for me to know it and myself in this new way” (103). Warren claims, “Narrative is a modality that *takes relationships seriously*… A climber’s relationship with the rock is itself a locus of value, in addition to and independent of whatever moral status she or the rock may have.” Narrative can bring forth different kinds of relations that humans can have toward a rock—being someone who cares about and for a rock, for example, rather than someone who must conquer the rock. Narrative also “provides a way of conceiving of ethics and ethical meaning as *emerging out of* particular situations… rather than as being *imposed* on those situations as a derivation from some predetermined, abstract rule or principle” (103). Thus, “not only are there very different ways to climb a mountain; how one climbs it and how one narrates the experience of climbing it matter ethically… Because the dismantling of patriarchal they could hardly be called neutral. The birds she describes are deeply invested and implicated in Williams’ story of generational cancer legacies because they share a toxic, fragile environment, a point Williams makes forcefully.
conceptual frameworks is a feminist issue, how one climbs a mountain and how one
tells the story about the experience of climbing are also feminist issues” (105).

Women’s Voices, which Warren edited, is written as a feminist corrective to
traditional wilderness therapy models. The anthology’s contributors typically don’t
make calls to radically alter the precepts of wilderness therapy, but rather to revise
them to accommodate women’s underrepresented experiences, and to take care to use
the right kind of metaphor in courses. In Warren’s critique of “the myth of the heroic
quest” so prevalent in adventure programs, she argues, “the heroic quest is a
metaphor that has little meaning to women. Each stage of a woman’s journey in the
wilderness is a direct contradiction of the popular quest model.” Wilderness therapy
needs instead “to inspire a new heroic for adventure programming. A heroic based on
bonding with the natural world rather than conquering it” (16). Warren doesn’t
question the need for a set of structuring metaphors or a “heroic.” Instead, she
advocates metaphors that better address women’s experiences and realities. Part of
this new heroic, Warren implies, means emphasizing women’s different-but-equal
physical capabilities (“grace” rather than upper body strength) and emotional
tendencies (bonding with nature rather than conquering it).

Notions of women’s difference but equality (if not superiority) are common to
both rock climbing and wilderness therapy worlds. What women lack in upper body
strength and arm reach, the story goes, they make up for with a lower center of
gravity and naturally graceful climbing. Female climbers are said to be more
balanced, more “in their bodies,” their movements more harmonious with the rock,
whereas men are “in their heads,” logically planning their next moves and concerned only with strength and speed. Is all of this another version of Berlant’s “female complaint”—perhaps “the female boast”—in women’s athletic cultures? This recourse to women’s different embodiment and physical capabilities walks the fine line between trivialization and fetishization that Berlant demarcates. Yet Warren isn’t proposing a wilderness therapy model that molds itself to the pregiven elements of a woman’s essence. In quest narratives, both the traditional heroic versions and Warren’s, leaving home is a boundary-crossing moment where struggles become defined. Warren’s concern is that these struggles, and the wilderness one travels in to encounter them, get framed appropriately for women’s experiences. It’s a subtle but important difference. Gender and the quest narrative make one another, rather than acting (only) as stable, grounding terrain to which one can always return. Home and wilderness remain foundational categories in wilderness therapy. But what’s most interesting is the ways these categories get crossed in the project of making healthy femininity.

Looking more closely at this distinction between wilderness and domestic, daily life, the introduction to *Women and Therapy’s* wilderness therapy edition begins,

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24 Women’s supposed physical harmony with rocks makes some strange book projects popular, like Dean Fidelman’s *Stone Nudes*, a series of calendars and now a coffee table book of black and white photography of naked women climbers on boulders and rock faces. The Stone Nudes website claims, “these images do not seek to sell or promote anything beyond the experience” and “the essence of the climbing spirit.” There are some photos of men, but not many. www.stonenudes.com.
For too long, women have been isolated from nature. Whether because of social norms that do not reward women for adventure pursuits or because of a fear of the wilds, women have not been “at home” in the outdoors. (Cole, Erdman, Rothblum 1)

This statement encapsulates many of wilderness therapy’s central tenets: women suffer due to an artificial, enforced distance from nature, and something intrinsically therapeutic happens when women interact with wilderness. Being “at home” is an interesting and complicated term here. Leaving home, which gets figured in the essays in *Women and Therapy* as the domestic, civilization, and “the real world,” is a crucial part of wilderness therapy. But though wilderness therapy is designed to address all these crises and violations women experience at home by taking them out of the domestic and into the wild, it is unclear what happens to the category of “home” during and after a wilderness therapy event. If wilderness therapy presumes both home and wilderness to be stable, separate categories, and both are sites of safety and risk, differently configured, why the assumption that the lessons learned in wilderness therapy will translate efficiently into one’s “home” life? To borrow a recurrent question in *Women and Therapy*, in what terms can women who have experienced rape, illness, and violence, who may feel afraid of wilderness, reclaim risk in the outdoors?

I have argued that the way wilderness therapy metaphors get enacted matters, and that rather than seeing these practices as rehashing smooth nature/culture divisions, we can see them as a learned, narrativized form of embodied relatedness, with oneself and human and nonhuman others. This embodied relatedness happens through constructing boundaries—wilderness as a place of manageable, slow risk, for
example—and then internalizing those boundaries by making oneself available to an exchange with wilderness. Home, nature, inside, and outside become permeable to one another. Though wilderness therapy relies on wilderness’ spatial and discursive difference from “home” or culture to demarcate a space of healing, home often gets configured as a place within oneself and wilderness.

In an article about wilderness therapy for women survivors of sexual abuse, Denise Mitten and Rosalind Dutton explain that “coming home” in wilderness may be more difficult for someone who has been sexually abused, and may not be the linear, growing process it’s assumed to be in non-therapeutic outdoor courses. In this article, “coming home” signifies being comfortable in the wilderness but also, and more importantly, in one’s own body. Mitten and Dutton claim, “Survivors often inaccurately assess their physical abilities, their stamina, what is dangerous, and how to be safe,” as a result of sexual abuse. “In order to survive, women had to tune out the pain their bodies were experiencing” (133). But “seeing others work in harmony in nature and experiencing it herself can help a survivor to gain positive memories through her body, which was often experienced as a source of pain” (138). To “come home” in wilderness, in this case, requires teaching a survivor that she can “set clear limits and boundaries, and still experience a oneness with nature,” and that she may experience her “traumatized body as powerful, supportive, and full of vital information” (130).

In this formulation, wilderness is no static, passive material. More significantly, it’s not the same kind of wilderness for everyone, just as home or one’s
own body can be sites of pain just as they can be places of comfort. Narratives of
overcoming adversity and using wilderness as a healing agent are meaningless
without this learned, embodied experience of one’s body as “full of vital
information.” Women’s bodies become informative by encountering “good” risk, or
risk that is manageable. Healing, then, is not wilderness’s property, a pure antidote
for women’s culturally imposed suffering. Healing comes from the movement across
carefully constructed boundaries with/in wilderness.

Jose Muñoz’s account of ephemera and queer utopic spaces gives me a way of
generatively and queerly reading wilderness therapy’s most seemingly naturalistic
metaphors of crossing the threshold from home to wilderness and back again. In
_Cruising Utopias_, Muñoz thinks about how queer performance helps create utopic
spaces. Why do the queer/drag performances of Kevin Aviance and Justin Vivian
Bond, which are over when the clubs close on the weekends, matter beyond the
moment of the queer performance itself? After all, Muñoz notes, “It has been
somewhat axiomatic within the field of performance studies that the act exists only
during its actual duration” (71). Yet Muñoz argues, “We must understand that after
the gesture expires, its materiality has transformed into ephemera that are utterly
necessary” (81). Muñoz continues,

I have been making a case for a hermeneutics of residue that looks to
understand the wake of performance. What is left? What remains? Ephemera
remain. They are absent and they are present, disrupting a predictable
metaphysics of presence. The actual act is only a stage in the game; it is a
moment, pure and simple. There is a deductive element to performance that
has everything to do with its conditions of possibility, and there is much that
follows. (71)
Muñoz’s ideas about queer ephemera have much to offer a reading of wilderness therapy’s translations from wilderness to home. In Muñoz’s account, ephemera are fundamentally embodied. They are “the remains that are often embedded in queer acts, in both stories we tell one another and communicative hand gestures such as the cool look of a street cruise, a lingering handshake between recent acquaintances, or the mannish strut of a particularly confident woman” (65). The ephemera of wilderness therapy, of learning to relate to one’s body differently and listening to one’s body as full of vital information in the midst of nonhuman otherness, are hard to quantify, but change what we think of as “wilderness” in the first place. Following Muñoz, we can see that traveling from home to wilderness depends on categorical oppositions (home/culture to wilderness/nature), as does the queer performance space (dance floor/queer space to “regular”/hetero space). Yet if the queer performance continues through its ephemera, these spatial distinctions are entirely destabilized. As Muñoz argues, “The dance is over and seemingly gone, but it lives as an ephemeral happening that we remember, something that fuels anecdotes we tell one another… It lives, then, after its dematerializations as a transformed materiality, circulating in queer realms of loving and becoming” (70).

Muñoz’s emphasis on the ephemeral, embodied practices of queer performance offers a way to think about what wilderness therapy metaphors actually do, and in what ways they can be transformative. Wilderness therapy’s distinction between home and wilderness is not, then, just based on some vague idea of the “natural” at all. Instead, it defines these categories only through articulation to other
metaphors, which are themselves always joined to the possibility of participants becoming new and healthy. The categories of home and wilderness can never be truly stable, wilderness therapy argues, especially when being at home becomes particularly fraught for women who have experienced sexual violence. Wilderness therapy’s practices enact a world of possibility for reaching health and empowerment, but it is also a world that acknowledges that struggle is not universal, that gender, race, class, and histories of trauma always mediate one’s experience of wilderness. Women are no more natural or comfortable at home than they are the “angel in the ecosystem.”25 Rather, the embodied traces that accompany one’s movements from wilderness courses back to daily life create the conditions of possibility for producing femininity and healing. As Muñoz argues, ephemera are both present and absent. In the case of wilderness therapy, the ephemera of wilderness, women, and healing move around, illustrating their categorical shiftiness. Yet their movement does not mean they are insubstantial. On the contrary, as Muñoz reminds us, these ephemera are “utterly necessary.”

Part of doing the heroic quest differently is practicing slowness, in which the participant listens to herself and her environment as full of vital information. This is a model of a non-antagonistic wilderness, an informative place to be sensed fully. In feminist wilderness therapy, stress and adversity are not virtues in and of themselves. Denise Mitten criticizes the traditional Outward Bound, adventure therapy model for making this presupposition. She cites another professional review about the supposed

25 Val Plumwood, cited in Stacy Alaimo’s Undomesticated Ground (13).
“positive gains of power through an adventure therapy experience,” and quotes a young man’s summary of his course. He advises future students that through the course,

you will despise the weight of the pack, curse every rock and every dirt mound, condemn every speck of dust, spit at every dirty mud puddle, and snarl at every ridge. You will push yourself, and be pushed, both mentally and physically further than you ever imagined possible, you will endure the seemingly unendurable. And as mad as it may sound, when it’s all over…you will think back over those things, all of them, and you will feel this incredible surge of power over yourself…You will feel the power overcome you…You will feel the limitation of all the things you once thought impossible for you to do to slip away from your mind and you will reach the ultimate realization that there are no limits to the things you are capable of accomplishing. That will be the supreme rush. (70-71)

While “this young man learned to increase his domination over nature in order to feel more powerful,” Mitten advocates a much more subtle, relational way for clients to experience wilderness. She cites the story of a woman returning from a trip, who describes the journey from wilderness to home by talking about her sadness while driving back to the city, her eagerness to be back home but reluctance to leave the plants, water, and birds she’d been surrounded by on her trip. In non-feminist wilderness or adventure therapy, the wilderness is hard on you for your own good. Instead of promoting the belief that stress enables one’s true self to emerge, Mitten and other wilderness therapy professionals argue that bonding through stress and fear, especially for traumatized women, “may teach individuals to create a stressful environment when they want to feel close” (67). Instead, the therapist needs to “contrive a situation where the perceived risks are greater than the objective risks”
and “teach the client how to use her own judgment as to which risks to undertake. This allows the client to be proactive in her healing” (64).

Rather than a “no isn’t an option” model, which encourages people to push through stress and fear, feminist wilderness therapy emphasizes slowness, rest, and reflection to better assess the difference between actual and perceived risk. Sandra Gaskill talked about the power that her realization about the need for slowness had had in her life and career. Working as a river guide while a student at the University of Idaho, Sandra realized the potential for therapy that a river and its metaphors offer: “I grew up on the East coast, and it was go, go, go. I played soccer in college—it was a culture of high energy. What I got from rivers in Idaho was go with the flow. Trusting nature, trusting myself.” She talked about watching one overweight woman on an empowerment for women course learn to take the course’s climbing portion at her own pace.

She could just go with the flow—there’s the river analogy for me. It’s really obvious with the river—you can get stuck in the eddy. Is it ok to get stuck in the eddy? If you try to force things, the water’s pretty powerful. Rapids are sometimes exciting and scary. Sometimes there are calm spots. Do you always need the adrenaline, or can you enjoy the calm? It’s the lesson of slowing down—you know, let’s go hang out in this eddy. I think why I’m so passionate about that is I see so many people pushing so hard and not having any energy or time for themselves.

Jody, too, described the value of slowness in TWWI courses. Compared to Outward Bound, she said, “The pacing is also very different. Outward Bound tends to be go, go, go. There’s very little downtime. And at Women’s Wilderness we definitely honor downtime and create more space for that.”
Sandra and Jody both tied this different pace to feminist, non-Western-influenced psychological philosophies. Sandra is a certified Hakomi practitioner, and assistant in training for people going through the Hakomi method. Sandra described Hakomi as “a body centered therapy. Holism, unity, nonviolence, mindfulness, organicity are the five principles.” Jody described her background in transpersonal psychology as taking

a broader perspective than wilderness therapy. It’s fairly similar to humanistic therapeutic approaches in that one of the aspects of transpersonal psych is that people are seen as whole. They’re not broken. They might be dealing with certain issues, but on a core level, a person has within them everything that they need. And they are—good.

Like wilderness therapy, Jody explained, transpersonal psychology promotes a client’s “connection to something greater to themselves…There is something greater than me, and it’s the natural world. In building relationship and connection to the natural world is a direct link to something larger than myself.” She contrasted this model to a Freudian approach, which she characterized as “an outside expert who’s going to do the healing,” and “almost a masculine model, more of that, ‘I’m going to fix you.’ It’s more of a Western model.” The Women’s Wilderness Institute connects with transpersonal psychology, Jody said, because “we’re definitely coming from a more relational model, absolutely hands down. It’s the inherent value in relationships—it’s a really feminist model. Not that that’s not true at Outward Bound, it’s just a different emphasis. At Outward Bound the experience is very dictated by the activity.”
When I asked Sandra to explain more about how the Hakomi method influences her work with survivors’ courses, I found myself suddenly in the middle of a Hakomi therapy session in miniature. She asked me to think about something that scares or frustrates me. I immediately recalled a mountain bike ride I had been on with a friend earlier in the week. I had been coming down with a bad cold, felt off-balance and overly cautious of riding through rocky, technical sessions, and had been frustrated with my timidity as I watched my friend cruise easily through sections I had to walk. Sandra asked me to visualize that bad feeling I’d had, to feel where it was resting in my body. My arms, I thought. She then asked me to think about when I feel like I am riding well and uninhibited, where does that feeling live? I told her that even when I felt like I was riding well, I didn’t know if that good feeling always translated into the rest of my day, but I was pretty sure riding poorly did. Sandra urged me to go back to the physical sensations of riding well versus riding poorly.

In Hakomi, when someone has that experience of wow, that feels great, we encourage people to soak that up. So how did you feel when you mountain bike? I’d encourage you to smile, really feel how your body fills up. Seeing yourself do it, visualizing it, feeling, and saying ok, there’s this other scary situation. I can feel in my body, what happens when I look at this other thing. Trying to ground this feeling in your body. In Hakomi, we’d say, how do you know you don’t want to do it? Is it ok to listen to your intuition and say ok, your friend did that part of the ride, we’re just different?

From a neurological perspective, you’re strengthening this pathway. You have to practice with your mind as much as you have to practice physically. In your mind to get the confidence, you have to practice. What you’re practicing is visualizing success. You still may not choose to do what your friend does, but that’s ok. It’s working with changing that internal belief. In Hakomi that’s called a barrier—you have to take many steps until you cross it. I visualize it like a big wall. If I get slammed again, well I’ll try again. And if you cross the whole thing, it’s really feeling something different. That’s a
different experience. That’s a Hakomi experience, and it applies to wilderness because you have different experiences out there.

Sandra said that returning from a wilderness therapy course is like learning to practice crossing the barrier in Hakomi: “The challenge is getting people to have support once they return from wilderness therapy. That reintegration—they need to come back and know, ok here’s the support.” But she argued that the reason wilderness therapy and Hakomi work is that it “lands in your body”: “In Landmark courses, people have intense experiences and six months later it doesn’t stick. I think that’s because they haven’t felt that in their body. But then you go back to your life and it really hasn’t landed in your body. In wilderness you are having a physical experience.”

The unfamiliarity of wilderness evokes a particularly physical response, Sandra argued, that must be listened to. A big part of tuning into this, Sandra suggested, is leaving behind the technological distractions at home:

The other thing I found on river trips that has untapped potential, by day two or three people have almost totally left their life behind. The stress of planning was able to just drop. There’s something powerful about being outside your experience—no cellphones, no computer, no TV, no distractions. They can just take in the power of the stars, the immensity, the solitude. I think the noise of the river is soothing, the animals, the crickets, the chirping, the sleeping on the ground. What are the animals going to do to me? There are all these things that are unknown. I think we’re so disconnected from the earth. We walk on concrete. I think we’ve forgotten the power of just feeling the earth. It’s gonna bring up things you’re not used to, whether it’s boredom—where’s my computer, where’s my cell phone?

The physical registers of risk and unfamiliarity, Sandra argues, are essential in getting women to re-adapt to the rest of their lives.

Wilderness can evoke experience because often times it’s new. Climbing is a new thing and it’s scary. Often times people approach it like, there’s no way I can do this. That evokes something right there. It’s a powerful, emotional
experience on the rock, whether it is...one woman I talked to got stuck, she froze. Then she could complete the climb and I think for her that was a major—she got stuck. Unfreezing and then being able to come down was huge. That evokes an experience. What a huge emotional confidence or joy or whatever it evokes in that person. I think there’s a power in groups, too. I think a wilderness experience with just one other person is going to be different that with a big group. Rock climbing has that potential.

Being “in your body” is a way through overwhelming feelings of panic that sexual assault and violence survivors face, Sandra said.

Survivors...have panic attacks and can disassociate, can check out of their bodies. One thing is to feel the ground, to stay grounded. It’s literal, it’s not figurative anymore. When I put my feet in the grass, I can feel grounded. Another thing is feeling alone, and I’m the only one who feels this. When you get a group of people who have a similar situation, they get to see, holy cow, I’m not the only one who feels crazy, or gets triggered going out of my house. I think you can use the wilderness to evoke that experience, but it’s also the processing of that experience.

In Hakomi, she explained,

You’re literally informed by the body. You had this experience, and then words came. If you hadn’t paid attention to your body, the words might not have come. With wilderness, you are in your body. It’s hard to be out of your body when you have a backpack on. Nobody else can climb for you. You have to be there. You physically have to be there. It would be hard to dissociate and climb. Some people probably can. But I think you’re really invited—you have to cook your own meal, boil the water, get the water. You’re having to do all this stuff, and it’s new. The newness invites you to do different things. You may not be able to stay with your body, you may go to your brain—this backpack’s heavy. But you’re in your body for the moment.

Sandra and Jody’s stories are about movement and stillness, both of which are intentional and deliberate, and always in relationship with one another. In wilderness therapy, healing happens at sites of slow movement—bodily movement, and the flow of information—across constructed boundaries. Staying grounded, letting things land in one’s body, are points at which materiality and figuration wind around one another.
In these therapeutic practices, wilderness and its healing properties are neither truly outside or inside oneself, but are instead produced at the points where one’s body contacts and engages with landscapes. Movements, done in particular ways with specific intentions, matter very much to wilderness therapy. In the following chapter, I describe how different tropes of movement produce varied kinds of cancer activism. The ways movements are made produce different affective worlds in which health and illness get worked out. Some of these worlds, as I will show, are more sustainable and conducive to building good, compassionate health care advocacy than others.
CHAPTER THREE

OF MOUNTAINS AND MALLS: ECOLOGIES OF CANCER ACTIVISM

When my friend Ann was diagnosed with breast cancer at age 46 a few years ago, she brought me an informational binder that she’d been given at one of her first oncology appointments. The cover read, “Breast Cancer: Your Personal Journey.” Not amused by what she perceived as a sentimentalization of her diagnosis, Ann said, “I’m not on a fucking journey—it’s more like I just ran into a log that just got thrown down in front of me and I have to jump over.” We talked about how giving this binder to every new breast cancer patient was a bizarre ritual invitation to come along on this journey with/through/to cancer, as if now the task was to load up your backpack and set out into the unknown, expecting to come back having learned something and grateful for the trip. Several months later, when I asked Ann in an e-mail to remind me what she had said that day about journeying with breast cancer, Ann wrote,

I mean I do stuff with my friends, I don’t do stuff with breast cancer—the concept of “journeying with” gives BC way too much significance and power in the scheme of life in my opinion.

It also brings with it some weird idea that this is an identity you now have – a breast cancer person—a survivor...but surviving...I guess...surviving life is even a bad concept, breast cancer is a piece of part of what you encounter in life, nothing more—try living life.

Maybe that's part of it that BC becomes the thing and perceptively more significant than life—it grandstands in the journey model—fuck it.... and herpes, and rotten knees, and depression, and cholesterol, and a broken tooth... and all other physical failings that can happen.

The journey model signifies a melodramatic “grandstanding” in which breast cancer becomes the actor, agent, and master plot for all of the rest of life, overshadowing all
other physical and emotional setbacks.

Throughout this project, I have struggled with how to address the insistent drone of metaphor: mountains, cancer, survival, climbing, journey, feminine empowerment. When I began thinking about these things, I tried, for awhile, to look for meaning beyond these metaphors, hoping that these organizations and events would eventually say something else outside these familiar narrative paths. Many recovery climbs’ metaphors of onward, upward, to healing, resonated too well, to me, with the journey of Ann’s cancer journal. In The Breast Cancer Fund’s book, *Climb Against the Odds* (2003), which commemorates their first series of international climbs, climbing is compared to cancer: both are “uphill battles in every way,” but also the chance for “resurrection and revelation” (21). I wanted, I think, some better, smarter critique of the journey model to emerge organically from these worlds, especially from the same organization that had staged an edgy ad campaign on San Francisco bus shelters in 2000. The campaign, which showed nude models in the style of Calvin Klein’s “Obsession” ads, were called “Obsessed with Breasts,” and showed women in the same black and white, seductively reclining poses, but with mastectomies instead. I was instead struck, repeatedly, by the inescapability of the journey trope, and the way it saturates cancer recovery language, even in organizations like The Breast Cancer Fund that are critical of mainstream cancer organizations.

Yet these metaphors’ repetition is precisely what matters about these worlds, and the repetitions must be looked at carefully for their nuance and for how they get
put into practice spatially, textually, and physically. There are important differences between the various cancer activism organizations and their activities, and paying attention to the diverse articulations matters. In this chapter, the ones I am primarily concerned with are the Susan G. Komen Foundation, the Livestrong Foundation, the HERA Foundation, The Breast Cancer Fund, and Breast Cancer Action. But the repetition of metaphors across these different sites constitutes worlds. It creates them, like scaling a rock or a mountain or invoking its metaphoric power constitutes these places as significant, challenging, and worthy of grappling with.

In *Ordinary Affects*, Kathleen Stewart draws on a Wallace Stevens poem to understand how the repetitions of sensory, affective lists come to exert a pull on one’s life, a process she calls “the making of a live cliché.” In Stevens’ “July Mountain,” he writes,

> We live in a constellation  
> Of patches and pitches,  
> Not in a single world…  
> The way, when we climb a mountain,  
> Vermont throws itself together. (29)

“The question,” Stewart explains, “is not where, exactly, this Vermontness came from”—its maple syrup, fall leaves, its dairy industry and the fight over gay marriage—“its ‘social construction,’ strictly speaking—but the moment when a list of incommensurate but mapped elements throws itself together into something” (30). When we imagine Vermont, or a mountain, or cancer, “Disparate things come together differently in each instance, and yet the repetition leaves a residue like a track or a habit—the making of a live cliché” (30). The “live cliché” is a wonderful
term for thinking of how repetitions of journey metaphors “throw together” mountains and cancer worlds, but also always hold open the possibilities of new ones. Stewart calls this “the poetics of an incipient universe” (29).

Annemarie Mol’s notion of the “praxiographic,” or the study of how practices constitute worlds, also guides my thinking about cancer activism’s landscapes. Mol writes about how atherosclerosis gets enacted in different sites, from the laboratory to the outpatient clinic to patients’ accounts of their pain. When arteries are looked at under microscopes, Mol argues, “atherosclerosis is an encroachment of the vessel lumen and a thickening of the vessel wall,” but when surgeons consider options for their patients, “atherosclerosis is something else. It is pain that occurs after a certain amount of exercise, pain when walking” (54). Mol’s praxiographic approach understands that “the praxiographic ‘is’ is not universal, it is local. It requires a spatial specification” (54). Mol’s point, and mine, is that praxiography, or paying attention to the way practices constitute objects and especially bodies, changes how we look at objects themselves. In a praxiographic approach, atherosclerosis is no longer “a single passive object in the middle, waiting to be seen from the point of view of seemingly endless series of perspectives” (5). Similarly, mountains—and bodies doing mountains—are made and shaped by the practices with which we engage them. As Mol argues, “ontology is not given in the order of things, but that, instead, ontologies are brought into being, sustained, or allowed to wither away in common, day-to-day, sociomaterial practices” (6). Attending to the practices that shape cancer activism means always engaging with their locations and their particular ecologies.
Despite the journey and quest tropes that so often, as in my friend Ann’s case, try to mollify and sugarcoat feelings of dread, sickness, and fear, I argue that these tropes must be read for their different instantiations. Such tropes have much to offer in the way of thinking ecologically about health activism, experiences of illness, and landscapes. The particular journey bestowed upon Ann that day was one of bodily and linguistic inevitability: Ann was now on a journey because her body’s biomedical truth, spelled out by that pamphlet, said so. Possession of the binder proved it just as much as the cancer cells. The binder’s contents presented the trip’s itinerary: what to expect with radiation, chemo, how to feel attractive, resources for reconstruction and psychological services. But though this trip is ostensibly about bodily experience at its core, about how to cope with this diagnosis, its emplotment within neat biomedical narratives is not the kind of journey I hope to use for ecological thinking.

Thinking ecologically about cancer worlds means paying attention to cartographies, both of the disease itself and the organizations that have sprung up to fight it. Who gets sick with cancer, and where? How does geography structure people’s experience of their illness, their proximity to or alienation from care and support? Ecological thinking is a geographic practice; ecology’s roots as a science come from colonial mapping projects (Worster 193). Cancer, and breast cancer especially, requires ecological thinking to understand the dramatically rising incidence rates in the U.S. within the last several decades. I draw on “ecology” not in the sense of a deterministic, holistic system with discrete boundaries, but rather as a way of deeply describing how environments and bodies shape one another (Barad
170). The ways we map and narrate cancer matter, because they bring things into relationship with one another and tell us what should matter.

Rachel Carson’s work teaches us to care about beluga whales in the St. Lawrence estuary as co-sufferers of rising cancer rates due to industrial pollution. Lance Armstrong, on the other hand, maps cancer in terms of battle casualties. While speaking before the Senate on behalf of his Livestrong Foundation, Armstrong asserted, “This year, 560,000 Americans will die from cancer...(close to the human loss suffered in the entire Civil War)” (Brinkley 2). Armstrong’s battle ecology rubs shoulders with Komen’s individualizing etiology and survival strategy for breast cancer, which pours financial and affective resources into individual and corporate empowerment. These ecologies are also necessarily maps of affect, of how we relate to the uncertain terrain of illness. Cancer might not be a living entity that humans want such close relations of interdependence with. Nevertheless, we exist in an ecological relationship with cancer, and it is one marked by affect—fear of dying, pain, suffering, and healing.

Thinking ecologically is also to think praxiographically because attention to actual practices gets us out of abstractions and into thinking about specific forms of relation. Maria Puig de la Bellacasa makes a similar argument about the importance of thinking about “the ethical not as an abstract sphere but as embedded in actual practices,” so that “when dealing with the organic and the animal we enter a world marked by concerns of, for instance, animal rights and ecological movements,” and “also we touch affective spheres associated with living beings such as suffering,
loving, caring” (159). As I will show, what constitutes “care,” and what matters enough to care about, looks very different in organizations like Breast Cancer Action and Komen. As I have learned in my own work with Breast Cancer Action, it is not enough to declare Komen’s aims and methods as shortsighted or even greedy. To understand why Komen is so compelling to so many people, we have to look more carefully at what kind of practices Komen participates in, what these practices care about and make legible, what kinds of affect are legitimized, and thus what kind of cancer world is being created.

There are other ecological models I feel an affinity with, like Sandra Steingraber’s in *Living Downstream*. A biologist and poet, Steingraber draws on Rachel Carson’s *Silent Spring* to link increased human cancers with abuses of air, water, and earth. Steingraber writes about how the unexceptional ecology of her native central Illinois can be sensed with bodily movements: “Out of the car and walking, I encourage you to feel, as we traverse land that appears to be utterly level, the slight tautness in the thighs that comes with ascending a long grade versus the looseness in our feet that indicates descent” (2). Steingraber’s invitation to sense the subtleties in Illinois’ seemingly flat, homogenous terrain is critical for understanding that humans, cancer, toxins, and agriculture share a dangerous ecology. This ecology of cancer, pesticides, water supplies, and corn must be felt, walked, and sensed, she argues. A cancer diagnosis, Steingraber writes, catapults one into an “unfamiliar country,” a “new territory” (31). Steingraber describes the journey, however, as “unplanned and unchosen,” in contrast to the personal journey of the cancer center’s
binder. Steingraber’s sensitivity to cancer activism and landscape is a good model for calling on touch and physical sensation, rather than just relying on vision and intellect, to understand landscapes and to see difference and nuance in the landscapes that seem most static. Following Steingraber, I describe the ways women’s cancer activism engages landscapes through diverse practices of moving. This is easier to see in events such as HERA’s Climb4Life, where rocks and cliffs are metaphors for empowerment. But even the widely publicized, corporatized national events such as Komen’s Race for the Cure have ecologies worth investigating.

In *An Archive of Feelings*, Ann Cvetkovich writes compellingly about Jan Zita Grover’s memoir *North Enough*, another text that does the kind of work I want to describe. Cvetkovich describes that Grover “imagines a language for the trauma of AIDS by writing about Minnesota’s geographic traumas, which include the colonization of indigenous peoples, natural disasters, and generations of European settlement that have been economically marginal and environmentally invasive” (214). Grover quotes from Aldo Leopold, “one of the penalties of an ecological education is that one lives alone in a world of wounds,” trained to see its destruction. But Grover claims, “the charm lies in finding ways to live with such loss and pull from it what beauties remain” (215). By being “intrigued by less spectacular attractions, preferring the more ordinary and everyday world,” Grover avoids a

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pastoral and sentimentalized nature (216). Grover’s particular way into thinking about trauma, sickness, and ravaged, ordinary landscapes is an important and insightful model.

What to do, then, with all of the people at cancer organizations with whom I sympathize but who so persistently pastoralize and sentimentalize nature, who do enlist spectacular, rather than Grover’s ordinary, landscapes—mountains and rock faces—into stories of cancer survival? Despite the distressing heritage of tropes like journeying, climbing, conquering, and surviving, I want to see what work these tropes are doing, to reallocate and appropriate rather than just condemn them. Mary Louise Pratt argues about ethnographic writing that one must “recognize that one’s tropes are neither natural nor, in many cases, native to the discipline. Then it becomes possible, if one wishes, to liberate oneself from them, not by doing away with tropes (which is not possible) but by appropriating and inventing new ones (which is)” (50).

The political and geographical landscapes in which an organization grows and thrives matter, from Colorado’s HERA Foundation and Women’s Wilderness Foundation, the Livestrong Foundation in Austin, to Susan G. Komen in Dallas, to the Bay Area’s Breast Cancer Fund and Breast Cancer Action. It matters that Komen started as a run around a mall in Dallas, versus The Breast Cancer Fund’s annual climb of Mt. Shasta. Each landscape forms a different constituency and a different politics, but it also creates a different interaction with landscapes. Jackie Orr argues that there is always something that disease is, outside (or in addition to) the constitutive medical gaze: "This 'thingness' of disease is not its natural or biological
features but its particular relations to the scene in which it materializes as a form, a cultural, economic, symbolic, and gendered scene that includes, but is never restricted to the site of medical practices" (Orr 452). Even as I think about the differences between these cancer activisms, I also engage with cancer activism as a whole to think about how cancer climbs emerge in relation to all of these organizations. I describe the different cancer activisms to argue two things: one, that contemporary women’s cancer climbs grow out of particular kinds of feminist environmentalism, as well as influences from what I call new western spiritualism; and two, that these climbs encourage a redefinition of selfhood, survivorship, and politics.

I use the term new western spiritualism, though I can only provide a general sketch here, to talk about the environmental, economic, sociocultural, and aesthetic differences that produce such different effects on material and semiotic landscapes in places like Dallas and San Francisco. One probably doesn’t need to have been to either of these places to recognize that they are very dissimilar. Dallas is enamored with sub-developments and ostentatious displays of private property. The nicer strip malls, for example, have entry signs that look like small stone fortresses that one could actually live in, and their parking lots take up lots of labyrinthine space because they can. San Francisco, at least in the story it tells of itself, is committed to preserving public open space, and has a spirited, oppositional relationship to the Los Angeles and Dallas version of urban planning (a spirit helped along, no doubt, by San Francisco being crammed into a narrow peninsula). What I am proposing is a nuanced way of describing the ways landscapes affect people, and the ways people
engage in politics around landscape and health. I want my description to avoid seeing these geographies as either accidental or deterministic. This means seeing histories of health activism through places. Rebecca Solnit has written, “Places matter. Their rules, their scale, their design include or exclude civil society, pedestrianism, equality, diversity (economic and otherwise), understanding of where water comes from and garbage goes, consumption or conservation. They map our lives” (Solnit, *Storming the Gates of Paradise* 9). Much like James Scott’s claim, that states make places legible and organized to better manage their citizens, Solnit points to the ways that terrain informs the potential shapes that politics can take.27

Moving through terrain is another way of understanding landscapes cartographically. Rather than “the isotropic, planar surface that, in the traditions of Western navigation and cartography, has been projected by way of an imaginary ‘bird’s eye view’,” understanding cartography through movement gives a very different sense of an “ever-variegated, textured ground” (Vergunst 114). Jo Lee Vergunst, writing about the ways different kinds of movement through places necessarily creates different maps of these places, argues, “A tired walker during a long hike is more likely to trip over loose rocks or tree roots. The intrinsic properties of the environment or the person are therefore only important in so far as they become part of a textural interaction, which then affords or hinders various kinds of movement.” This is the kind of cartography I remain attentive to, one attuned to

physical textures and embodied movements, to help understand why different ways of dealing with cancer arise, and thrive, in some places rather than others.

In work on Western culture and history, regionalism falls in and out of favor. Most recently, Western studies have taken a post-regional turn and focus instead on how Western places have become deterritorialized flows of global capital in ways that have eroded boundaries between cities and rural places. In the anthology *Postwestern Cultures* (2007), Stephen Tatum suggests that the new, globalized West is characterized by “the emergent dream of ‘becoming electronic,’” which “starkly contrasts with the perennial western American cultural dream of becoming ‘authentic’ by reverting to the aboriginal or the animal primitive or the ecological or natural” (18). Tatum points to this dream’s manifestation in western biotech and medical research labs, California’s animatronics and entertainment sectors, and tracking and surveillance technologies for illegal immigrants, parolees and endangered animals throughout the West, among other things. Though Tatum urges a view of the West as a place of “postregional spectrality,” it doesn’t seem necessary to throw out the notion of regionalism altogether in order to think about the conglomeration of rural, metropolitan, global, suburban places we call the West. One need only look at the advertisements and cultures of West’s thriving outdoor gear industries, such as bicycles, climbing gear, and skiing, to see how well the traditional western pursuit of authenticity fits with global technology networks.

The kind of regionalism I am proposing here can explore the nuances of places loosely grouped as the Western or Southwestern US, like Texas and California,
places that share many similar, overlapping histories. Both are iconic and exceptionalist American places, and part of American frontier mythology; both are lands stolen from Mexico, and yet they have diverged in ways that continue to produce significantly different forms for local political activism. Regions can perhaps best be thought of as convergences, or an “intersection of forces coming from many directions and distances” (Solnit, Storming the Gates 1). It helps that Yosemite’s stunning vistas are within a day’s trip of the San Francisco Bay Area, in terms of forming an environmental ethos, while Dallas has only gently rolling plains, which have been set aside only for agriculture and now housing and commercial developments. It is hard to imagine John Muir speaking of hail and dust storms on the North Texas plains with the same reverence he reserved for the Hetch Hetchy Valley, for example, given the way landscape tastes and aesthetics have developed in modern Euro-American cultures. But these differences, physical, political, and everything in between, don’t mean that this is how things had to be, or that these are the only trajectories that can exist. California’s retraction of state park funding may very well make significant differences in the way Californians imagine themselves as people who pride themselves on public recreational space. The need and desire for nature might give way to other needs and desires, while Dallas, in the midst of a home foreclosure crisis, may rethink its enslavement to private property after all. Keeping in mind the open-endedness of regional convergences and their uncertain possible futures, we can describe the way terrain has shaped the different kinds of
movements we see at work in the Komen, Livestrong, and The Breast Cancer Fund campaigns.

I will first describe the rise of Komen and the Livestrong Foundation, and then discuss The Breast Cancer Fund and its annual Climb Against the Odds and the Hera Foundation’s Climb for Life event. Even though the organizations I describe are in different places—Austin, Dallas, Colorado, and San Francisco—there are overlaps in terms of political affiliations that influence cancer climbs. I describe Livestrong and Komen even though they don’t sponsor their own climbs because I think their rhetoric, and the kinds of cultures of action they participate in, are important in understanding the recovery climbing phenomenon.

Komen and the Straight Path of Survival

Several years ago, as I lay on the couch trying to engage my brain for a moment while recovering from having my wisdom teeth removed the day before, I picked up a copy of O, Oprah’s magazine, left behind from a recent parental visit. It would be, I suspected, mostly forgettable reading, as it’s not really my scene and I was pretty far gone on painkillers anyway. But magazines aimed toward hetero women, like this one and Good Housekeeping, Redbook, and Southern Living, remind me of my mother’s reading tables by her bed and living room chair. So with me in California and Mom in Texas, Oprah was as good an intermediary as I could expect.

As I flipped through its contents, which were mostly ads, I realized that probably a quarter of these ads pertained to breast cancer: OPI nail polish, festooned
with a pink ribbon, had a special polish out for Breast Cancer Awareness Month, with a donation to the Susan G. Komen Foundation. Something called DVDs for the Cure and Nautica were giving money to Komen, as well, if you rented a movie or bought a pink bathrobe. Target advertised its donation to the Breast Cancer Research Foundation (founded by Evelyn Lauder, of Estee Lauder cosmetics). Os “love that!” feature page was filled with things—purses, iPod cases, tea kettles, rain galoshes—whose (very partial) proceeds would go to various breast cancer organizations. Ford had a very busy ad featuring a Mustang convertible, former American Idol star Kelly Clarkson, and pink clothing that read “Warriors in Pink.” In an ad that struck me as particularly ridiculous, Lee Jeans proclaimed October 5th “National Denim Day,” calling readers to support the “fight against breast cancer by wearing denim.” O wasn’t all shopping advice; there were at least two articles dedicated to breast cancer, one about a different, more lethal form appearing primarily in African American women.

Here in Oprah’s magazine, ground zero for all things feminine, was plenty of material evidence for what Breast Cancer Action, a San Francisco-based nonprofit that launched a campaign called “Think Before You Pink,” has called the “breast cancer growth industry.” I am hardly the first person to notice this material-semiotic coagulation of pinkness, hetero-femininity, consumerism, and corporate philanthropy since the early 1990s.28 And yet I could not help but be stunned, again, by the

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28 Samantha King, Barbara Ehrenreich, S. Lochlann Jain, and Breast Cancer Action have all been very articulate critics of what Breast Cancer Action calls “pinkwashing.” See Ehrenreich’s “Welcome to Cancerland,” Harper’s November
ubiquity of pinkness. With full-page images of women, black and white, in various states of undress and various angles of repose, asking the reader to think about bodily and psychic wholeness, positive attitudes, celebration, and taking action by funding a search for a cure, O magazine is fulfilling its own prescription for the ultimate holy war against breast cancer: awareness, consumption, and optimism. All in pink.

Samantha King’s Pink Ribbons, Inc. is an excellent assessment and critique of exactly these tactics. King makes short work of eviscerating mainstream breast cancer movements, such as the Komen Foundation and its troubling complicity with pharmaceutical profiteering and, in events such as Race for the Cure, its culture of survivorship that privileges narratives of white heterofemininity and faith in the imperial and capitalist march of progress: of medicine, of the triumph of the human spirit, in the restoration of normative physicality, of technoscientific advancement. I particularly appreciate King’s expression, “the tyranny of cheerfulness,” which she claims characterizes dominant forms of breast cancer activism. One of King's main arguments is that "breast cancer became the 'biggest disease on the cultural map,' in Barbara Ehrenreich's words, not simply because of effective political organizing during the 1980s and 1990s, but because of an informal alliance of large corporations (particularly pharmaceutical companies, mammography equipment manufacturers, and cosmetics producers), major cancer charities, the state, and the media that emerged at around the same time" (xx). The breast cancer industry has produced ideal citizens who, rather than being atomized and selfish players in the free market,
are understood to be “responsible to themselves and for others in their 'community'” (xxvii). But this form of pink ribbon community, sustained by making a difference through purchasing power, is hardly a rosy alliance around women’s health issues. On the contrary, King claims that the lessons of AIDS activism have shown that "the deployment of positive images of disease raises complex political questions... overly bright and hopeful configurations of the disease and of survivorship had the capacity both to undermine demands that the syndrome be taken seriously and to dissipate the rage of activists that was so crucial to sustaining the AIDS movement." At the Race for the Cure, "the resulting rhetoric is so upbeat and politically optimistic that it is possible to deduce from these events that breast cancer is a fully curable disease from which people no longer die" (36).

But despite all of this, I want to tell a different story of this movement and how climbing for causes fits into it. I have never had cancer, though my grandmother died of what was at first mistaken for breast cancer that actually turned out to be metastasized from somewhere else. But you don't spend time with women with cancer, women who have had cancer, or whose friends, partners, mothers, and daughters have died without it affecting you profoundly. Mainstream cancer activism’s enmeshment within white empowerment and capitalist definitions of politics and citizenship is not, for me, up for debate: people like King and organizations such as Breast Cancer Action have done excellent work pointing out these facts. But in reading King, I am struck by her relentless tone of distance and critique of sites of “survivorship,” such as Race for the Cure. It is not that I want
King to prove a certain kind of affective relationship to her work, but the lack of ambivalence in her writing troubles me. I don’t want to put people’s pain, fear, and hopefulness in quotes: these are not “touching” stories or “emotional”. Cordoning off these experiences by distancing oneself through the hard glare of academic critique is not something I am interested in.

I write about cancer climbing as a supplement to this history because it connects concerns with women’s health and bodies with actively performed and enacted landscapes of health and risk. By paying attention to this phenomenon, we can also reassess cancer activism’s history in terms of its close relationship to environmental justice movements, inaugurated in large part by Rachel Carson’s *Silent Spring*. Recovery climbs’ lineage includes ecofeminism and environmental justice movements, as much as it includes quest narratives, colonial origins of mountaineering, and OncoMouse. Although their terms are often problematic, I argue that the participants in these movements form powerful, potentially life-altering relationships with dynamic landscapes that are themselves players in this praxiography.

Even an organization like Komen, which thinks feebly if at all about breast cancer’s ecological links between humans and nonhumans, can be seen as constructing an ecology, or a material-semiotic world of affect that, in Komen’s case, almost completely disavows environmental concerns. If Komen’s ecology is insufficient and mostly about individual cures and corporate research, then why use the term ecology at all to describe Komen’s practices? I use ecology as a term that is
able to register the geographical, affective, and praxiographic nature of these worlds build by cancer activism, in ways that Samantha King’s critique cannot. Komen’s goals can be maddening: it recently released “Promise Me,” a perfume to raise money for breast cancer research that contains cancer-causing agents.29 But as duplicitous as Komen’s actions seem, a critique of this kind of cancer activism must try to understand the world created that remains so appealing and life-sustaining to so many people. Theories of false consciousness or duped consumerism won’t get us there.

My ecological approach to thinking about recovery climbs’ development draws on Anna Tsing’s notion of contingent lineages, or “shards of genealogies through which present forms have emerged,” and Rosi Braidotti’s cartographic, nomadic methodologies.30 Tsing and Braidotti help me understand why Samantha King’s arguments or Ellen Leopold’s critiques of contemporary breast cancer culture in A Darker Ribbon (2002) are ultimately unsatisfactory places to land. What is at stake in telling breast cancer history stories differently is what gets to count as survivable, what counts as meaningful. King and Leopold, in the tradition of Susan

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29 Promise Me is also the name of Komen founder Nancy Brinker’s memoir, about the promise she made to her sister, Susan G. Komen, to find a cure for breast cancer. And so, to anoint oneself in this promise, Komen supporters literally bathe themselves in hazardous chemicals.

30 Anna Tsing, Friction (127). Rosi Braidotti writes in Metamorphoses: Towards a Materialist Theory of Becoming, “A cartographic approach fulfils the function of providing both exegetical tools and creative theoretical alternatives” and allows ways “to account for one’s locations in terms both of space (geo-political or ecological dimension) and time (historical and genealogical dimension), and to provide alternative figurations of schemes of representation for these locations, in terms of power as restrictive (potestas) but also as empowering or affirmative (potentia). I consider this cartographic gesture as the first move toward an account of nomadic subjectivity as ethically accountable and politically empowering” (2).
Sontag’s critique in *AIDS and its Metaphors* and *Illness as Metaphor*, are justifiably concerned about the tendency of metaphors about cancer to shift the blame from corporations and governments onto cancer patients themselves. “Prevention,” Leopold writes, “has been privatized” (258). Using metaphors, then, is a slippery slope, because it can lead to “New Age tyranny” (257) and assumptions about the underlying emotional deficiencies that could cause cancer. Leopold writes of contemporary breast cancer literature’s tendency to be “bullish if not downright Pollyanna-ish,” “the newly diagnosed patient (in a specialized reading market that grows by 180,000 every year) desperately needs proof that survival is possible. The more the better” (256). Leopold continues, “Even Gloria Steinem, whose *Ms.* Magazine has done so much to open up the discussion of breast cancer, treated her own bout with the disease more as a welcome corrective to her denial of aging than the straightforward invasion of a potentially lethal disease” (257). But what counts as “straightforward” here is, strangely enough, another version of masculinist repudiations of styles of affect, language, and embodiment coded as feminine.

Leopold suggests that while Betty Ford’s intervention caused a problematic

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31 In *Teratologies: A Cultural Study of Cancer*, Jackie Stacey describes the metaphorization of cancer from the perspective of having a negative experience with a Reiki practitioner who told her, in effect, that her being both a lesbian and academic had caused her to have a deficit of femininity, and that her ovary was crying out in protest through cancer. Though this is Stacey’s genealogy, the cancer communities I’m describing do not necessarily partake of this. So, even though cancer activism may make some universal claims—such as, environmental toxins are bad and cause cancer, and women can show their empowerment through climbing/walking/running far distances—I want to show that cancer, though lumped together in its scariness and mythology, is not just one thing. Its genealogies and the communities organized around it are diverse, and not all metaphors are universalizing and tyrannical.
overemphasis on research, that angry, feminist texts such as Audre Lorde’s *The Cancer Journals* “could not, on their own, survive. The flurry of interest and activity—and yes, anger—that cropped up in the 1970s did not provoke a groundswell of breast cancer activism. And with the return of a Republican administration in 1980, the incipient sense of shared responsibility for social ills, with its promise of remedial action, lost its welcome in the culture” (251). Thus, Leopold argues, breast cancer literature since the 1970s has “turned inward, becoming ever more introspective and idiosyncratic. Connecting with a long-established tradition of ‘women’s’ literature, it holds the world at bay, while exploring in minute detail the emotional reverberations of a life-threatening illness” (251). Though *A Darker Ribbon* makes many important contributions to a feminist rendering of breast cancer’s history, Leopold’s account still remains invested in a Great Person model of history, to some extent: there is breast cancer before/after Betty Ford, etc. This model tends to reify the exclusions it complains about: Audre Lorde’s story isn’t “survivable” because white, conservative, gender normative models were more appealing.

I want to challenge this way of positioning texts and also of reifying the binary between normative “women’s” literature and “angry” feminist literature. In my ecological reading, there is a much messier interplay between introspection, emotionality, gender normativity and non-normativity, and, in general, a less clean-cut sense of which kinds of breast cancer narratives take root where and for what reasons.

This is not to deny the importance of the ways regions and places shape
people and institutions. For an organization like Komen with such international reach, Dallas is still very much a part of Komen’s story. Komen’s first Race for the Cure was 800 people running around the Galleria, a high-end, towering mall in a middle to upper middle-class area of North Dallas, in 1983. Nancy Brinker, Komen’s founder (and Susan G. Komen’s sister), is a Dallas socialite who got her start as a sales trainee at Neiman Marcus, the luxury department store. When I was a child growing up in Dallas, my mother would take my brother and me to the Galleria and let us ice skate while she shopped. At Christmas, my family would go to the lovely, extravagant Neiman Marcus flagship store in a beautiful old brick building in an otherwise mostly decrepit downtown Dallas, just to look at the things that the Dallas elite could buy one another—beautiful, handmade, drivable trucks for children for tens of thousands of dollars, for example. I remember walking past stores in the Galleria, and being in awe as Neiman Marcus salespeople approached to offer us coffee and take our jackets, as my mom would say, “People come from all over the world to shop here.” At those times, it felt like we were at the epicenter of something big and glamorous.

For Nancy Brinker, a Dallas lady par excellence, that epicenter is built on big consumerism, carried out with Dallas flair and a limited sense of modesty. Brinker is also the wife of Norman Brinker, who runs the profitable Brinker Group, of the Chili’s and Bennigan’s restaurant franchise chain. This year, the Komen Foundation partnered with the Dallas Cowboys football team. During October, the team wore pink cleats (as many other NFL teams do as well), and at one game, Nancy Brinker
joined the team before the coin toss. The Cowboys’ new stadium, the butt of many NFL commentators’ jokes for its monumental (and glitchy) video screens, was festooned in pink. The stadium, with its massive retractable ceiling that usually remains closed, despite Dallas’ generally balmy weather, was the perfect showcase for Dallas’ and Komen’s mutual love of grandiosity. Southern Methodist University in Dallas, the repository of the Bush Presidential archives, also welcomed the Komen Foundation’s archives this year. It is fascinating to see, especially from the perspective of someone who tried to get away as soon as I could from what I saw as Dallas’ strange provincialisms, how an organization that feels so very Dallas down to its core, has been able to insinuate itself so effectively into every corner of breast cancer advocacy. Komen apparently pushed a bit too far in its effort to be the standard bearer for women’s health, judging by the recent backlash against the organization in the wake of its decision to defund Planned Parenthood. Komen may now be forced to distance itself from its Dallas-based anti-choice politics if it wants to retain its image as a mainstream cancer organization.

The Komen Foundation helped transform breast cancer "from a hidden and unspeakable disease into a household word, a corporate language, a social problem and a legislatable issue" (Klawiter 70). Komen is responsible for making breast cancer a national experience, though it’s still framed very much as the personal writ large on a national stage. According to Komen’s website, the Race for the Cure is the world’s largest 5k run/walk series, and they have had over one million participants since 2005. In the website’s “About Us” section, Komen positions itself as a global
force founded upon and fueled by a personal story:

Susan G. Komen fought breast cancer with her heart, body and soul. Throughout her diagnosis, treatments, and endless days in the hospital, she spent her time thinking of ways to make life better for other women battling breast cancer instead of worrying about her own situation. That concern for others continued even as Susan neared the end of her fight. Moved by Susan’s compassion for others and committed to making a difference, Nancy G. Brinker promised her sister that she would do everything in her power to end breast cancer forever.

That promise is now Susan G. Komen for the Cure, the global leader of the breast cancer movement, having invested nearly $1.5 billion since inception in 1982. As the world’s largest grassroots network of breast cancer survivors and activists, we’re working together to save lives, empower people, ensure quality care for all and energize science to find the cures. (Komen)

Komen’s vision of a cancer-free world is a markedly disembodied one: all difference is subsumed in a pursuit of a cure that is simultaneously global and intensely personal, emotional, and feminine. Susan Komen’s fight, with “heart, body and soul,” and her sister Nancy Brinker’s promise to end cancer forever merge seamlessly with Komen as global entity. In this staging of a heroic, epic, global struggle, there is little room for embodied experience, in human bodies or local places. Even where a Komen group highlights its local affiliation, it gets subsumed into the global promise of a cure. An ad for Komen’s Denver Race for the Cure in 2009 in Women’s Adventure magazine reads, “I am Denver. I am the change I want to see. I am… the CURE.” Komen’s web page makes opaque references to their mission: “Our education outreach targets the different ethnicities and other groups who are at a high risk of getting breast cancer” (Komen Denver). Komen calls forth domesticity and feminine health, a vague, immaterial sense of the actual people and
increased disease risks alluded to with the phrase “different ethnicities and other groups.” Komen participants are all Susan Komen; we are all “the CURE.”

If Komen is the biggest player in contemporary breast cancer activism, both symbolically and monetarily, and thus sets the tone for a national conversation about cancer, the parameters of this conversation were established in the late 1930s. Ellen Leopold argues in *A Darker Ribbon* that Franklin Roosevelt’s polio ushered in a national conversation about disease, including cancer, but one that maintained physician-patient hierarchies and gendered divisions of labor. In 1937, FDR signed the National Cancer Institute Act, which helped establish the Women’s Field Army in 1938 (244-245). Leopold argues that because the American Society for the Control of Cancer (forerunner to the American Cancer Society) was dominated by male physicians, “from its inception, then, the federal cancer infrastructure incorporated both the disdain of medical professionals for the laity and a male chauvinism that… paired the skilled and well-paid work of men with the unskilled and unpaid work of women” (246). The ASCC’s early outreach efforts were northeastern, and its priorities were research, not access to treatment. This established the entrenched separation of government provision of health care and private entities. Leopold says that Betty Ford made her diagnosis public, which was a substantial difference. However, “It did not imply any change in the interaction between a patient and her physician… Her open acknowledgement betrayed no hint of anger on behalf of others suffering along with her and certainly no finger-pointing. It reinforced the experience of the disease as an essentially private affair” (248). Leopold continues, “The rise of
a national breast cancer consciousness, in other words, occurred, for the most part, outside the progressive feminist tradition… For Betty Ford, breast cancer remained a force of nature, beyond the reach of human intervention” (248).

Komen’s overwhelming achievement has been to publicize and help destigmatize breast cancer, shifts that were undoubtedly needed. Now that breast cancer is a permanent media fixture, Komen’s events still raise vast sums of money and bring people together, but it seems that their model of breast cancer has changed very little. The picture Komen presents is of a fairly static or unidirectional disease, one always on the trajectory of hope and the cure (or death, its tragic deviation, that only justifies and intensifies the pursuit of the cure). In this model, there is little room for a complex ecology: the terrain is already known, stable, and if the cure is its highest end, then any means are justified. “Cure” is usually singular in these formulations, as well: the cure, a cure must be found, further flattening the disease’s complexity. Perhaps the run/walk format is the ideal physical expression of these kinds of politics. In the Komen event, there is a preordained start and finish line. Running and walking, wearing pink Komen gear, is a physical challenge, more so for some than others, but one that is circumscribed, delimited. If Komen does continue to generate new awareness, however one defines that, then it does so by retreating into the safe entrenchments of gender norms, the bland sentimentality of purchasing one’s way to a disease-free world, and a limited palate of appropriate feelings.
“Game on”: The Livestrong Challenge

The Livestrong Foundation uses very different emotional registers, ones that deploy anger and a more physically demanding ideal of self-sacrifice. Like Komen, Livestrong is a multi-million dollar nonprofit powerhouse with a celebrity personal story at its foundation, and it also uses the yellow bracelet as a branding icon, like the pink ribbon. Founded by Lance Armstrong in 1997, a year after he was diagnosed with testicular cancer, Livestrong’s primary activities are giving grants to cancer survivor outreach programs, maintaining a cancer information blog and website, as well as general health and medical information, and policy advocacy for cancer research. Livestrong’s story is intimately tied to Armstrong’s personal triumph over cancer, and to his cycling accomplishments, as well. While Komen promotes athletic activity through their Race for the Cure, Nancy Brinker isn’t a dynamic celebrity spokesperson in the same register as a cycling superstar. Armstrong is a superhuman Everyman, someone both gifted and burdened with stepping up to win cycling tours and eradicate cancer. The message is that if Lance can come back from cancer and win multiple Tours de France, then anyone can participate in a Livestrong ride, and anyone can take power over cancer. Livestrong’s message of hope, like Komen’s, carries with it the discomforting embrace of toxicity, such as Armstrong’s alleged performance-enhancing drug use and Komen’s carcinogenic perfume.

Like Komen, Livestrong is very active in the media, through their highly visible yellow wristband campaign launched in 2004, to the many Livestrong commercials, to Lance’s well-publicized decision to return to professional racing in
Martha Stoddard Holmes argues,

the pink and yellow campaigns are still problematic in their purposeful
indirection. They are visually metonymic, as opposed to metaphoric: there is
nothing about a ribbon or a bracelet that reminds us particularly of a cancer
cell, a breast, or a testicle. Indeed, it is their displacement from the human
body, and more specifically from parts of the body that are coded for both sex
and disease, that has allowed these objects to become fashionable accessories
for children of all ages. (480)

These artifacts generate attention and money for cancer research, Holmes argues, by
displacing cancer’s uglier images—photos of lesions, patients in treatment, etc.—with
more soothing and positive metonymic devices. “Further,” Holmes writes, “in giving
the public a way to picture cancer without actually picturing cancer—or even a way
to actively not-think cancer—the ribbons and bracelets may effectively neutralize the
stigma of the person with cancer and return him or her to the human circle” (481).
Holmes remains concerned about “the very separation between bracelets and breasts,
testicles, and ovaries” that “make it harder to connect concern for cancer
research/patients with the care of one's own body or receptiveness to its signs of
illness (481). The human circle, in both Komen and Livestrong’s discourses, is one
without markers of inequality. The emphasis in on awareness and self-knowledge:
the more you know (breast self-exams) the more empowered you are. Komen,
though, encourages survivorship as a happy place. Livestrong’s approach is more
aggressive, angry, confrontational.

It is worth looking at Livestrong’s commercials and website at some length
because of their tremendous success in creating a visual and physical, athletic culture
of survivorship. In one particularly savvy commercial co-produced by Nike that aired during the 2009 Tour de France, Armstrong promoted Livestrong while also answering critics who were skeptical about his return to cycling amidst recurrent allegations of his doping. The commercial opens with a black and white shot of a CAT scan machine enclosing someone, and then cuts to a color shot of a man on a bike zooming by in dappled early morning light, passing cars, the bike casting a shadow on a sunlit street. As a deliberate, simple, mid-tempo piano soundtrack plays, the montage continues of a sunlit bike ride and black and white cancer patients: a man wearing an oxygen mask in a gown in a hospital room with the curtain partially drawn; masked doctors performing surgery; a doctor or nurse helping a bald, emaciated man out of his bed and to his walker. As Armstrong’s voice over begins, we see that this cyclist is Armstrong himself (Figure 2). As Armstrong rides, his face set in determination and dismissal of the pain he must be experiencing in his exertion (a face Armstrong is famous for while competing), Armstrong says, “The critics say I’m arrogant. A doper. Washed up. A fraud. That I couldn’t let it go. They can say whatever they want. I’m not back on my bike for them.” The piano soundtrack has become more insistent, and builds to a steady pounding drum solo, a close up of Armstrong’s face, and the screen goes black: in rhythm with the drum, the Nike swoosh and slogan, “Just do it,” appear in yellow (“Driven”).

The montage contrasts inaction and action, slowness and speed, inside and outside, patient and athlete, being acted upon and acting, illness and health, bodily breakdown and physical power. For every appearance of a patient—a man whose
shoulder has been mostly cut away, slowly pedaling an arm-powered stationary bicycle with the encouragement of a physical therapist—there is a corresponding scene of Armstrong in action, his muscled arms gripping his handlebars. The visceral technologies of cancer—the beeps of hospital instruments, the imaging devices, prosthetic limbs, recumbent bikes for therapy—are juxtaposed with Lance, an industry and technology unto himself. His bike’s hub whirs as he pedals, the wind rushes by, and we briefly hear the noise of a helicopter, used to follow the racers for television footage in the professional tours. Lance is an icon, but more than that, he is messianic. He hears the suffering of others and transforms it. Ridiculed and scorned, he persists, and with the same stony face. He rides fast for the woman just learning to ride a stationary bike again. Armstrong turns his individual cycling achievement into a universal one; his suffering on the bike is the suffering and healing of all people afflicted with cancer.

On Livestrong’s website, the yellow wristband, turned on its side next to the site’s address, looks like a shining halo. The main page’s text reads like the creeds we used to say in my parents’ Methodist church: “We believe in life. Your life. We believe in living every minute of it with every ounce of your being. And that you must not let cancer take control of it. We believe in energy: channeled and fierce. We believe in focus: getting smart and living strong. Unity is strength. Knowledge is

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32 Lance Armstrong-endorsed or affiliated products are very popular in the cycling world, such as Armstrong’s Trek bike, mass produced for amateur cyclists, or Armstrong’s team cycling clothing. Armstrong’s trainer, Chris Carmichael, also has a very high profile industry including cycling videos, seminars, and articles in several magazines.
Figure 2: Still images from Nike/Livestrong's ad, “Driven”
power. Attitude is everything” (Livestrong). In many ways, this recalls the history of mountain climbing: Leslie Stephens’ mountaineering accomplishments were individual but always for a greater good, the triumph of British Victorian masculinity. The greater good is vested in and borne by the lone male sufferer.

Another series of Livestrong ads interview various cancer survivors. In the middle of these monologues about personal experiences of diagnosis and survival, the words “It’s about you,” or “It’s about creating your own luck” appear. For Sean Swarner, a Colorado-based mountaineer who climbed Everest after his diagnosis, the text reads, “It’s about screaming hope at 29,000 feet.” In another intense and somewhat unsettling ad, called “Challenge Cancer,” people take turns talking into the camera at cancer: “You have a lot of nerve standing there in front of me.” “I think you’re pathetic.” “You’re a small, sad, pathetic, little loser.” “What I want to say to you, Cancer, is…” “You’re the worst thing that ever happened in my life.” “I’m going to tell you what I had to go through and you’re going to listen.” “You’re a murderer” (Livestrong). Toward the end of the ad, one woman asserts, “I can ride, I can walk, and I can run.” A man then says, “I walked in a Livestrong Challenge”; another says, “I’m going to ride my bike 70 miles.” The ad ends with more trash-talking: “Game on.” “You’re gonna regret messing with me.” These portraits of confrontational, angry people personifying and yelling at cancer are a far cry from Samantha King’s complaints about breast cancer culture’s tyranny of cheerfulness. The sentiment is much more aligned with Barbara Ehrenreich’s anger in “Welcome to Cancerland”.

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The Christian and New Age elements of “screaming hope” from the mountaintops are sustained in Livestrong’s materials. The mountains themselves are key figures in these scenes of redemption. But instead of shouting the gospel and giving one’s trials and tribulations over to Christ, the message is New Age self-empowerment through the Christ-like sufferings of Armstrong. During the 2010 Tour de France, Livestrong released another ad in which Lance climbs alone up Mont Ventoux, one of the legendary climbs in the Tour. Sweat drips from his nose, he breathes heavily, and as he ascends the hill, we hear voices talking about their experiences with cancer: "I was diagnosed when I was 12", "I was so afraid," "I decided to get in shape" ("Engine"). Like prayers ascending to heaven, Lance carries the prayers on his bike.

For Armstrong’s 2009 return from retirement to compete in the Tour de France, Livestrong developed their "Chalkbot," a machine that chalks inspirational messages people could submit online all throughout the route of the Tour. This is a national project that marks the Tour and cancer as an international project, but done through the rubric of American masculinity. As the cycling peloton passed through France, the pavement was marked with bright yellow chalk: "With every pedal stroke, cancer loses" (Figure 3). There is a direct energetic link between Lance's pedaling and everyman's. Movement through space is what's important, not necessarily Armstrong’s finish in Paris. Sometimes, of course, movement fails. In the 2009 Tour, Armstrong suffered bad luck and repeated crashes, something he’d amazingly been able to avoid throughout his winning career. He was, for the first time in the past
Figure 3: The Nike Chalkbot, 2009 Tour de France

WITH EVERY
PEDAL
STROKE
CANCER
LOSES
decade, not a serious contender for winning the Tour. Yet Livestrong’s tropes of movement are not based on victory, but rather on a triumph of the spirit over cancer’s slowing, stagnating forces. Movement itself constitutes “beating” cancer, through vitality, anger, and self-actualization. Armstrong and his mountain is the master trope that participants in Livestrong culture and events can approximate in their own lives.

Martha Stoddard Holmes worries about the use of metonymy in the pink ribbon and yellow wristband campaigns, and the way that this may create a disconnect for people that actually makes them non-receptive to the experiences in their own bodies. But I argue that there is more to either of these campaigns than just a one-dimensional metonymic device. Especially with Livestrong, we can see a merging of spirituality, the valorization of anger and suffering and struggle, with physicality, the importance of being active. In climbing sites, this becomes even more important, and Chapter Four will argue that climbing puts receptivity into practice. One has to learn to read the rock, the mountain, the landscape and its conditions as a whole, and this creates a different kind of understanding of what a sick or healthy body is.

**Between Victory, Revelation, and the Suckiness of Cancer: The Different Movements of the Breast Cancer Fund and Breast Cancer Action**

A couple of months after attending The Breast Cancer Fund’s training climb on Mt. Tamalpais just north of San Francisco, I received a postcard in the mail advertising an Anthony Robbins’ event called “Life Mastery: join the masters of our time to perfect the life of your dreams.” The front of the card shows a white, affluent
man in a small, presumably private or corporate jet, hard at work on some documents in a leather folder. The text reads, “This man is a successful attorney, competitive athlete and energetic father of three…and he was just diagnosed with terminal lung cancer.” The back reads, “Even people who appear to be in good physical shape sometimes get a major wake-up call; they are fit but unhealthy. At Life Mastery, you will unleash your body’s natural vitality to create the strong and healthy body you deserve.” Included in the seminar is “complete physical testing, including live blood and body fat analyses,” “advanced tools” to “detoxify your system,” strategies for “vanquishing unhealthy cravings,” “eliminating pain and stress,” and creating a “compelling vision for your future and an actionable life plan.” A customer testimonial explicitly connects the language of choice, success, action, and health: “After my mother died of breast cancer, I knew I had to get healthy.”

Recovery climbs join, probably in ways Anthony Robbins would approve of, discourses of fitness and freedom from cancer. No Mountain Too High, which chronicles The Breast Cancer Fund's first Expedition Inspiration (later changed to Climb Against the Odds), proves as much when it asks, in an off-handed way, "And why not climb a mountain? Other fundraising organizations held bike rides, runs, golf tournaments, triathlons--any number of activities to attract attention, participation and donations" (xiii). Though here, The Breast Cancer Fund links itself to the world of charitable sports and “a-thons,” this is only one part of the story about how cancer and climbing became entangled.

The Robbins postcard exemplifies cancer-fighting progress narratives: pay
your dues, get the corporate jet, but also pay attention to your “vitality”. In the same
way that you might manage your stock portfolio, balance risk with risk-prevention.
Robert Proctor has used the terms "body machismo" and "body victimology" to
describe different affects in relation to a cancer diagnosis (Klawiter/Potts 89). The
"macho body" is the conceptualization of the human body as "able to withstand
repeated environmental insults, detoxify potential carcinogens and repair genetic
damage" (89). Body machismo is evident in Komen’s Race for the Cure, which
promotes

a feminized and domesticated version of this 'macho body' and connect[s] it to
medical technologies rather than environmental carcinogens. In Race for the
Cure the macho body morphed into the heterofeminine, resilient body: the
repaired, reconstructed body beautiful, responsive to medical treatment and
safe from the spectre of recurrence. The corporeal styles that were produced
and promoted at the Race were those that represented and reinforced this
corporeal model: unmarred bodies, fitness activities, visually marked survivor
identities and the reassertion of heteronormative femininities. (89)

As much as recovery climbs may be cut from the same cloth as these kinds of
corporate wellness seminars and Komen’s macho resilience, recovery climbers’
stories also exceed these narrative paths by producing constantly changing definitions
of self, bodily health, and survival, which pushes us to continually re-engage what
these categories mean. When I waited at Mt. Shasta’s basecamp for The Breast
Cancer Fund climbers to return, I talked with Sue Anne, a climber who had
participated in the early Aconcagua expedition, about my interest in the climb. Sue
Anne told me that she’d knocked her teeth out while walking down Aconcagua, but
that she had realized "her body is not her," a lesson learned after losing her breasts,
hair, and teeth. This is not phallic fantasy of escape from bodily constraints, but something else entirely: an extension of a human body, while at the same time a limiting of its significance. This is a subtle but important difference from Livestrong’s messages, in which one’s feeble human body is transmuted through Armstrong’s noble suffering. In a Livestrong context, Sue Anne’s comment isn’t quite possible. Perhaps it could be adjusted to “my cancer is not me,” and one’s body is the tool through which one becomes *most* oneself, vital, healthy, victorious. In both cases, cancer is externalized as “not me,” but differently. Livestrong kicks cancer out with force, whereas Sue Anne’s formulation is a way of pulling cancer close, reckoning with infirmity, and then depersonalizing it.

The Breast Cancer Fund was founded in 1992 by Andrea Ravinett Martin, an attorney in San Francisco who was diagnosed with breast cancer twice before age 45. The Susan G. Komen Foundation existed at the time, though its focus was low-cost mammography. After returning from climbing Aconcagua with a group of other breast cancer survivors in 1995, Martin started the Bay Area Breast Cancer Study Group, and later started The Breast Cancer Fund. After the 1995 Aconcagua climb in Argentina, Martin and others began an annual Climb Against the Odds which has taken place on Denali in Alaska in 1998, Mt. Fuji, Japan in 2000, and Mt. Shasta in Northern California in the years since. Climbers chosen to participate on the Mt. Shasta climbs must commit to raising a minimum of $6000, which helps fund The

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33 Martin cites Susan Claymon, who was a co-founder of Breast Cancer Action, and Bella Abzug, a New York congresswoman, with starting the movement.
Breast Cancer Fund’s work. In *Climb Against the Odds: Celebrating Survival on the Mountain*, a photographic memoir of The Breast Cancer Fund’s climbs, founder Andrea Martin writes, “Because of its many breakthroughs in raising hope, awareness, and funding for the fight against breast cancer around America and abroad, and because women shouting from a mountaintop are heard, climbing expeditions became a hallmark of The Breast Cancer Fund” (13). For climbers, the expeditions were to be a resurrection and a revelation, a way to meet what they were made of. These were intended to be comeback climbs, where women with breast cancer could shout victory from the world’s highest peaks. But the climbs would bear startling similarities to the battle against breast cancer itself. They would be grueling ordeals overcome with support. They would be inspiring as well as terrifying, both hopeful and devastating—uphill battles in every way. (21)

Resurrection, revelation, ordeals to overcome: here again is the familiar mixture of Christian and New Age warrior and quest metaphors. But influenced by AIDS activism in the Bay Area, The Breast Cancer Fund has been much edgier than Komen with its advertisements and messaging, as evident in its “Obsessed with Breasts” campaign. The Breast Cancer Fund said of the images, “The ads challenge the obsession with the female breast as an object—in the belief that until our culture more appropriately honors women and their bodies, we will never defeat a disease that attacks its most profound symbol of sexuality and nurture” (The Breast Cancer Fund).

The Breast Cancer Fund’s story is intertwined with another Bay Area breast cancer organization, Breast Cancer Action, whose Board of Directors I have served

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34 The work listed for this year’s climb is the Fund’s effort to remove BPA from cans, the Safe Cosmetics Campaign, and the annual State of the Evidence report. http://www.breastcancerfund.org/assets/pdfs/events/climb-against-the-odds-2012.pdf
on for the past three years. Both The Breast Cancer Fund and BCAction work on environmental causes, emphasizing prevention rather than cures, though BCAction prioritizes eradicating inequities in diagnosis and access to treatment. In the past, The Breast Cancer Fund and BCAction have worked together intimately to produce documents such as “The State of the Evidence,” a scientific report about environmental causes of breast cancer whose fifth edition was published in 2008, which The Breast Cancer Fund now does alone.

Maren Klawiter has described the different “cultures of action” in Bay Area cancer activism, and focuses specifically on the differences between Komen’s Race for the Cure, the Women & Cancer Walk (1992), and the Toxic Tour of the Cancer Industry (1994). Breast Cancer Action took part in both the Women & Cancer Walk and the Toxic Tour while collaborating with The Breast Cancer Fund on other projects. But these cultures of action in Bay Area breast cancer activism, even when seemingly connected by compatible goals, are often marked by rifts, disagreements, and tensions. One major difference between The Breast Cancer Fund and Breast Cancer Action, which collaborated so often in the past, is the way they each talk about their organizations’ histories. The Breast Cancer Fund’s website’s history of the organization has changed in the past two years: now, the organization’s history is routed through founder Andrea Martin’s personal history with breast cancer, and there is no sense of The Breast Cancer Fund’s work with other Bay Area organizations like BCAction. Instead, The Breast Cancer Fund’s mission and evolution are narrated, not unlike Komen’s, as a story of one woman’s struggle with
cancer and decision to do something about it, even amidst the demands of career and marriage obligations. In contrast, even though Breast Cancer Action’s founder and director for 20 years, Barbara Brenner, has been iconic to the organization’s history, BCAction doesn’t position her as the organization’s reason for being. Instead, it foregrounds the communities for whom BCAction works.35

When Barbara and I met at BCAction’s office near San Francisco’s Union Square in 2011, Barbara kindly slowed down her typically powerful gait to walk with me around the corner to a café for lunch—I had fallen off my bike the week before and had a stiff, swollen knee. Barbara’s walk and movements are impressive, and you can easily miss the fact that she’s not much over five feet tall. With close-clipped black hair and round black glasses, Barbara exudes great competence and intensity.36

Barbara was wearing the “Cancer Sucks” pin she’s always exhorting us as board members to wear because it starts conversations with people you’d otherwise never talk to about our work, she says. And, sure enough, the man behind the counter asked Barbara about her button. She unclipped it from her shirt and handed it to him, along

35 Breast Cancer Action has often described its mission as “carrying the voices” of people with breast cancer—especially those too disempowered to receive adequate care or have political voices. While one can make a donation to BCAction in honor of an individual, the emphasis has always been on communities at large. This is different from climbing or running in the name of one’s sister or friend. Though BCAction doesn’t discount the importance of personal connections in activism, it prioritizes the way we are all bound together in struggle against toxicity and injustice. 36 Since this conversation in 2011, Barbara has been diagnosed with ALS, a condition that has altered her gait and speech, but has not diminished in any way her forcefulness, clarity, and deep commitment to activism around complex health issues. Following her retirement as Breast Cancer Action’s Executive Director, Barbara now writes an important blog about the issues affecting both breast cancer and ALS worlds: barbarabrenner.net.
with a BCAction card. After placing our order and finding a table, Barbara said that she hoped he’d make a donation sometime or donate food. Barbara is a shrewd networker and always looking for ways to connect to people about our work, but network sounds too frivolous for what Barbara does. It’s not “my people should meet your people.” It’s more, “Cancer sucks. What are we going to do about this?”

When I asked Barbara about BCAction’s connections with and separation from The Breast Cancer Fund, she described the rift between the two organizations as a tragic story in many ways. When Barbara got involved with BCAction, it was only a five-year-old organization in an office by the Embarcadero near The Breast Cancer Fund, which was founded by Andrea Martin two years after BCAction. Since The Breast Cancer Fund didn’t really have an advocacy arm, BCAction worked with Andrea Martin to fill this role. But there were a couple of fallouts that hurt the organizations’ abilities to continue to work together. First was the prayer flag story.

BCAction came up with the prayer flag idea, which The Breast Cancer Fund uses on their annual climb of Mt. Shasta, through Hannah Klein Connely. The climbers take the prayer flags with them on their climbs, modeled after the Tibetan prayer flags found all over the Himalayas (and hippies’ front porches all across the US). The flags read, “The wind carries our prayers of love, healing and remembrance. May we all be well.” People can “buy” a flag and have a loved one’s name written upon it, to be unfurled at Mt. Shasta. BCAction partnered with The Breast Cancer Fund, Barbara explained: “They’d do the climbs, we’d share money by asking them for a grant. But the last time we partnered with them was with the Annapurna climb.
The Breast Cancer Fund declined making this a business relationship and rejected the contract, and they wouldn’t return Hannah Klein Connely’s artwork or return phone calls. Hannah has since been diagnosed with breast cancer. The spiral image is important to a lot of people.”

Then there was the fallout over corporate donations. Judy Brady, an activist, wrote a Cash in Cancer column in 1998 for BCAction’s website for the Women’s Cancer Resource Center. This column angered Andrea Martin because it implicated The Breast Cancer Fund for not refusing corporate money. The well-known biologist and poet Sandra Steingraber then wrote a letter declining to attend the luncheon The Breast Cancer Fund was holding in her honor. The letter was called, “Silence is the sound of money talking.” Barbara explained that this moment redefined cancer organizations, and lines were drawn about corporate donation policies: “We invited The Breast Cancer Fund to have a public discussion and they declined. We’ve since collaborated in State of the Evidence. We opened the door for the cosmetics challenge and The Breast Cancer Fund took over. People who work with The Breast Cancer Fund are caught—they want to be more critical but can’t.”

The tense history between The Breast Cancer Fund and Breast Cancer Action that Barbara described is more than nonprofit gossip. It points to the ways that organizational differences produce ecologies that, in this case, give rise to movements, both physical and political. During the 1990s, BCAction held the annual, 5k Women & Cancer Walk, which benefited BCAction and other breast cancer nonprofits. The $100,000 raised was split eleven ways. But Barbara
explained that this walk was eclipsed when Komen and Avon came to town, raised money, and took the money away, out of Bay Area communities. Barbara argued that any athletic event that raises money for a disease is almost always better for the people doing it than for the issue. “No one looks at the class issues. If you’re doing the Komen Race for the Cure, it’s a nominal cost to run. You don’t need insurance. It’s not exclusive in the ways other events are. Those exclusions convey something about the way people see breast cancer. Komen and Avon both do two to three day walks. They’re punishing, and they all cost money. They don’t provide health insurance.” I mentioned the AIDS LifeCycle bike ride, from San Francisco to Los Angeles, which I had participated in twice. “It’s a whole god damn industry. Doesn’t anyone walk just to walk anymore?”

But in addition to the corporatization of cancer walks and runs, Barbara disliked the implications of climbing in the name of cancer, and what it means about being a survivor or winner. “Most cancer activists are about control—I’ve lost control of my health, so I’m trying to get control, myself included. So climbing a mountain—you can’t control the disease, but if you trump a mountain, I can say I can do anything. Are you using nature to shore up confidence?” Barbara brought up Jerri Nielsen, the doctor with breast cancer trapped in Antarctica, who never talked about all of the resources necessary to get her out and back to the US. Barbara pointed out, “The press release just said she beat cancer,” as if her access to care and major resources had nothing to do with it. “Think about the word ‘beat’. I think of rhythm. Being pummeled to death. We talk about beating breast cancer, besting something
that’s really nature. They call it sporadic—it can happen to anybody. It’s this dance we do. Our language reflects it.” I suggested the competitive meaning of “beat.” Barbara said the thing that drives her nuts is that “If you peak the mountain, you’re ‘that’ kind of person. The power of words is something people never think about… The stuff we do around illness keeps people from doing what they need to do as members of a common society to make everyone’s life better. We’re not citizens, we’re consumers, whether that’s a consumer of mountain climbing or whatever.”

For Barbara, to vow to beat cancer is automatically to individualize and commoditize the experience of illness. “Winning,” or surviving, via a mountain or a 10k run, is a way to try to control essentially uncontrollable forces, or trying to control these forces through the wrong channels, choosing consumption over demanding change. As people like Maren Klawiter, Samantha King, and Lochlann Jain have argued, consumption is a crucial part of this process. Jain describes the consumption chain that allows cancer to be “the perfect capitalist disease” (507): people purchase products that actually increase their risk of getting breast cancer, proceeds from these products go to toxic industries and Komen for breast cancer cure research, breast cancer rates rise, and because cancer takes a long time to manifest and is hard to track across populations, the profit, cancer, and feel-good consumption cycle continues.37 Yet in The Breast Cancer Fund’s climbing event, consumption

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37 Sandra Steingraber argues that cancer is hard to track in relation to geography and environmental causes because we choose to let it be so. In Living Downstream, Steingraber describes the patchwork of state cancer registries and the difficulties in making solid claims about who gets cancer, when, and why (see pages 32-38 in particular).
isn’t the only story, and neither is a desire to control oneself or nature. While The Breast Cancer Fund’s events are decidedly more oriented toward consumption and individualized survivorship than the Women & Cancer Walks or Toxic Tours were, their metaphors and movements still generate ways of being with illness not yet accounted for in other scholarship on cancer activism.

Anna Tsing talks about the limitations and necessities of globalizing fictions:

We quickly ascend to a world of fantasy every time we imagine tribal survival or spirituality, or wild nature’s competitive struggle or harmonious stability. These categories have a limited usefulness in helping us understand the idiosyncratic histories of particular social and natural landscapes. Yet it seems to me that we cannot give up these fantastical categories. It is only because of the protest embedded in them that some conservationists even imagine collaboration across cultures to preserve the variety of nature. The alternative fantasy—a falsely uniform modernism—is much worse. (127)

Metaphors are necessary: it may be fantasy to imagine healing yourself by climbing, that the mountain really cares about your plight, or even that it’s indifferent, or knowable, or that it helps you tame something like the proliferation of cancer cells. But people need the metaphor, not need in a palliative sense, or as an anesthetic, but need it in the sense that it continues life. It is part of an ecology that makes continued living possible. This hope and investment in movement and tiredness is an investment in vitality. And vitality is about a plant growing in an ugly, weeded lot where it shouldn’t be because there’s trash and the air quality is poor but the plant is thriving anyway. The boulder might peel off the top of the mountain and crush you all and create a very ironic story; but it didn’t (Figure 3). And there you are, still climbing. It’s about contingency and chance and trying to stick it out in less than ideal conditions. Not affirming some empty model of hope, necessarily. What do you do
in a crushing situation? You deny its processes of totalization by being near mountains. It is both communal and individual and it is at its core an ecological act that reaffirms mutual dependence, unfairness, chance, and luck.

The Breast Cancer Fund’s group in training to climb Mt. Shasta, assembled at the Mt. Tamalpais trailhead in Marin for their last pre-climb training hike, was all women and all white, and judging by the cars they departed in, the majority were middle to upper class. They ranged in age from mid-20s to late 50s, and seemed generally fit, well-heeled for a hike, and jovial. While we were waiting for one more woman to show up, a woman with a beautiful, big Golden Retriever walked by. I was startled to notice that the entire left side of this dog's face was gone: eye, fur, whiskers were all carved away, and all that was left was speckled, smooth, dark gray flesh. Connie, who had just had a mastectomy 6 months prior, asked the woman what had happened. "Cancer," she replied. Connie turned back to me: "God, everyone has cancer." In Marin County, which has one of the highest rates of breast cancer in the US, cancer did seem at that moment to be everywhere—even embedded in the trails of Mt. Tam itself.38

As people continued to chat while waiting for some late group members, several women started complimenting each other's donated hiking poles, part of the climb’s corporate sponsorship loot. I was disappointed to see that the poles, like so

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38 Cancer is also the leading cause of death for dogs over age seven in the US. Research into cancer treatments and clinical practice join people and dogs in complex ways.
Figure 4: Ice axes and aluminum hiking poles broken and crushed by a bus-sized boulder that fell from Mt. Shasta during 2009's Climb Against the Odds. Though the women had to ditch their packs and take cover, amazingly, only the gear was hurt.

much of the outdoor apparel marketed specifically to women, were adorned with flowers. The women at the trailhead referred to them as cute, feminine: someone said, "Yeah, we gotta have flowers!" This insistence on plastering heterofeminine floral prints and pastels on women's bikes, skis, and exercise clothing has always raised my hackles. I thought that because The Breast Cancer Fund was opposed in so
many ways to organizations like the Komen Foundation, this would be evident all the way through, even down to the climbers’ apparel. I immediately chastised myself for thinking this—do flowers on a trekking pole really have to signify hegemonic femininity? Do they have to mean reigning in women's embodied dwelling in the world in a realm that's supposed to be already outside normative femininity? I had become deeply sensitive to the way that feminine gendering permeates every aspect of breast cancer worlds, and I was hoping that this one would be an exception.

After thinking about my discomfort and disappointment in the way heterofeminine norms saturated this hike, however, I realized that it wasn’t that it turned out that The Breast Cancer Fund climb was just like a Komen event or even closer than I wanted it to be, ideally. This moment, and the Golden Retriever’s reminder that cancer saturates our ecology, alerted me to the fact that even the best analyses of the contemporary cancer activism landscape, including my own at the time, have tended to obscure the texture of these worlds.

This is partially the fault of these organizations’ own narratives, which inundate their consumer with platitudes. In The Breast Cancer Fund’s literature, it is often hard to find a space not overburdened by warrior metaphors, like this one in Climb Against the Odds: “These weren’t women wasting away in hospital beds. These were warrior survivors climbing mountains” (24). In “Cancer Butch,” Jain points out that the US doesn’t allow images of PTSD but shows amputated veterans, and in a similar way, cancer images “are sterilized of the mess and complications of illness” (512). In Climb Against the Odds, “wasting away in hospital beds” is
something that happens, off-screen, in some sad, depressing place, *in opposition to* being “warrior survivors climbing mountains.” Wasting away is another, incompatible path, one from which a warrior can opt out. Jain asks, “if we are to be warriors, who are we fighting? What is our mode of violence? Who is to be protected? How might breast cancer culture be understood in relation to—and against—singular normative ideals of femininity, but in a way that does not take on a militarized masculinity?” (522)

Jain argues that Audre Lorde’s formulation of the woman warrior needs to be updated and rethought. To this important point I would add the question, are war and warrior metaphors always the same thing? Given the long entangled histories of militarism, cancer, and cancer activism, histories Lorde was certainly aware of, it is possible to read each instantiation of the warrior metaphor for its nuance—mired in problematic histories, to be sure, but nevertheless producing effects that must be read

39 Breast Cancer Action has never had much use for war or warrior metaphors. Barbara Brenner wrote in a piece called “Waging War, Making Connections,” in the BCAction newsletter in 2003,

In both cancer and foreign policy, we refuse to examine root causes, so that preventing cancer or keeping the international situation from developing into a crisis is impossible. In cancer, when we demand prevention, we are offered powerful pills, the long-term consequences of which are unknown. In foreign policy, when we call for an examination of the behavior that might have led to the terrorist attack on the World Trade Center, we’re told that even posing the question is unpatriotic…

These parallels are important because they help me reframe how I think about connections in the world…By framing things in this context, we help to reframe the conversation about breast cancer. We don’t need more war analogies about cancer. Let’s talk about breast cancer as a human problem instead and start thinking about the human impacts of how we approach the disease ([www.bcaction.org](http://www.bcaction.org)).
textually, affectively, and physically. War metaphors matter because they stage a contest between who has power. For Audre Lorde, this was a struggle between doctor and patient, patriarchal medical authority and active, feminist agent. Claiming warrior status meant renouncing silence in the face of heteronormative assumptions about what happens to women during treatment. For Livestrong, it’s something else. The warrior quest is vested in one man’s Christ-like suffering, the yellow wristband a proxy for the cross. For Armstrong, unlike Lorde, the warrior is marketable, a figure that inspires people to be active, physically and financially, and kick cancer’s ass. In The Breast Cancer Fund climbs, being a warrior is quieter, more serious. *Climb Against the Odds*, the commemorative book, tells stories of triumph. But *Climb*

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40 Militaristic metaphors and cancer have been around a long time, well before Nixon officially declared war on cancer in 1973. The Women’s Field Army, developed in the 1930s by The American Society for the Control of Cancer, enlisted thousands of white, middle-class women volunteers to leaflet about early detection of breast cancer. Though “The Army’s work was conceived as a military operation,” complete with posters depicting battles between St. George and the dragon to symbolize the crusade against cancer, but the leaflets softened the military imagery by “conjur[ing] up women’s role as nurses rather than soldiers” (Leopold, *A Darker Ribbon* 165). The medical profession reacted negatively to the WFA because they saw them as encroaching on the proper boundaries of physicians’ knowledge and power. The WFA also had to defend itself against accusations that it was pursuing a socialist health care system, reassuring medical professionals that they had demonstrated their “faith in the American way” and that “individual responsibility has been the keynote of the movement, as it is the keynote of democracy” (Leopold 168-169). Self-reliance has been the historic cornerstone of the breast cancer movement, both within the medical establishment and early women’s health activism.

Military metaphors, war, and breasts are historically entangled: Leopold argues that with WWII, there was an “American breast fetish of the war” (Yalom’s *History of the Breast*) in which breast enhancement became popular, bosoms decorated warplanes, etc. (Leopold 180). Femininity, then and now, becomes co-opted and put to the service of military and pharmaceutical masculinism. This resonates with Komen’s Race for the Cure and Passionately Pink for the Cure campaign, in which buying pink things fetishizes the female breast—in tact, healthy, in some post-cure future space.
Against the Odds (1999), the documentary of just a single climb, on Denali, shows defeat, women, ravaged by chemotherapy, going home after they get too sick to continue climbing, tearful goodbyes beside airplanes, fears of imminent death from cancer, the mountain, or some terrible combination of the two. On the Mt. Tamalpais hike and the hike back from the Mt. Shasta basecamp with the returning climbers, I didn’t see militaristic masculinity. There was no chest thumping or celebration of battling an external enemy. There was a lot of exhaustion, nerves and emotions right at the surface, and something present in the air, a quiet demand made with gritted teeth: I want to live, on this mountain and through this disease, god dammit.

As Anna Tsing notes, big metaphors and universalizing fictions are not so useful for understanding the finer shades of things. It’s necessary to accept that these fictions do important work, at some level, but to also ask if these fictions are the only story to be told. In Teratologies, Jackie Stacey describes how "illnesses become narratives very rapidly… Only a little information and the narrative structuring begins: linearity, cause and effect and possible closures present themselves almost automatically… Indeed, the genres of medical knowledge are organized around just such temporal trajectories: diagnosis, treatment and prognosis are in some ways just other names for the different stages of the story" (5). This is why Lochlann Jain argues for “living in prognosis,” refusing these linear narratives and instead finding a way of being in the midst of limitation, pain, and death.

Climbing (and cycling, and running too), as I will show in my next chapter, is not a linear practice. The story about it may be, as seen in its often too smoothly
rendered metaphors of mountains and survival. Nevertheless, movements vary, pavement becomes uneven, rocks move and crumble. People slip and fall and crash. These interruptions form the basis of queering survivorship and illness. Like Judith Halberstam in *The Queer Art of Failure*, I am interested in the way limits “speak to queer temporality and a queer spatiality.” Climbing for cancer isn’t necessarily or desirably a going beyond illness, but about embracing and dwelling in “the narrowness of the future, the weightiness of the past, and the urgency of the present” (106). In a recovery climb, moments of healing happen under conditions of constraint and limitation, dealt out by the specific ecologies of diseases and landscapes.
CHAPTER FOUR
ONCOGEOGRAPHIES: LIVING AT THE CRUX

I. Lines, Problems, Pressure: Sensory Theories

This project has attempted to answer, what are the effects of repetition, of metaphor, cliché, tropes of landscape and healing and femininity? What do all of these discursive and physical movements create in people's bodies, bodies with cancer or in support of loved ones? I continue to return to Rebecca Solnit's evocative description of nuclear test sites in Nevada in her haunting book *Savage Dreams*. Solnit describes how different kinds of geographies may be looked at next to one another because of the way that they are bound together through metaphor and meaning. She explains that an obsession with a "voyage into the new" binds together the different landscapes of militarized Nevada desert and preserved Yosemite wilderness:

> Though you may be the first to climb a peak in the Sierra and your foot may touch a place no human foot has touched, you are covering cultural territory covered by great mountaineers from Clarence King and John Muir onward. And the actual act of climbing a mountain depends for its meaning on the romantic cult of mountains, and so even if you have never read Shelley's "Mont Blanc," you have inherited it, and when you step on that piece of ground, you step where Shelley went, and where a wide road of meaning has been worn since… New or old, it seems you should know where you came from to understand where you are, and only a true and absolute amnesiac could come from nowhere in arriving somewhere. (25)

Solnit's "wide roads of meaning" provide a way of thinking about the convergence of complex histories I have outlined in my previous chapters, of pilgrimage and
competitive mountaineering, of wilderness therapy and women's cancer activism.

But Solnit's perspective is primarily backwards-looking: while Solnit asks us to "open the suitcases" of "the burden of history and desire," my aim in this chapter is to instead chart a way forward into thinking about how we might create new roads or walk these historical roads differently. This does not mean abandoning or ignoring the burdened paths that got us to think about rocks, healing, women, and illness in the first place. On the contrary, it requires an even more careful engagement with all of these histories. But rather than simply disentangle and map those histories, I propose new metaphors and ways of thinking through these tropes.

The tropes I use here are lines, problems, and pressure. These are all technical terms used to describe actual elements of climbing, and I call on them to do the work of illustrating the embodied power, the possibility of creating worlds otherwise, of these recovery climbs. My hermeneutic is praxiographic: I am interested not just in the shuttling of meaning between the term and its comparative object, but how these metaphors are real, living embodiments, and how and what they do. I take the metaphors of climbing and cancer seriously, not just as literary devices but as practices that create, reshape, and orient bodies in the world. To think through these metaphors, I need more metaphors, thus lines, problems, and pressure.

I have described the ways that mountain climbing cultures are replete with tropes, particularly in writing about climbing. *No Mountain Too High*, the first book to chronicle The Breast Cancer Fund’s Expedition Inspiration (which later became Climb Against the Odds) uses some of the more common mountaineering metaphors
to organize the book’s chapters: Part One: First Steps, describes the climb’s organization; Part Two: The Inward Journey, outlines each team member’s personal history of breast cancer diagnosis and treatment, and Part Three: The Outward Journey, has chapters titled The Ascent, Winds of Healing, and Mountain of Hope, which details the “assault” on Aconcagua and the resulting lessons the women climbers learn. My use of tropes here inhabits this long history in the alpine writing genre, though I hope by using this language my metaphors illustrate a lively, complex world, rather than the flatly literal, neatly moralistic mantras all too common in alpine literature classics.

Another reason to use lines, pressure, and problems is because these tropes are, from a phenomenological perspective, "near to hand," and thus function here as orientation devices, or a particular way of situating and doing work with my objects (Ahmed 2-3). In her queer reading of phenomenology, Sara Ahmed explains that Husserl uses the philosopher's writing table as a metaphor to work out a phenomenological approach, and that the stuff on the writing table—pens, papers, photos—are not coincidental objects of secondary importance, but in fact their nearness to the table and Husserl illuminate Husserl's activity as a philosopher:

The action (writing) is dependent on the nearness of things. What is at stake here is not only the relation between the body and "what" is near, but also the relation between the things that are near…The nearness of the objects to each other is because they tend toward a shared action…Orientations are binding as they bind objects together. The move from object to object is shaped by perception—the gaze that turns to an object, brings other objects into view, even if they are only dimly perceived—as well as by how orientations make things clear, which affects what can be perceived. (88)
In her project of queering phenomenology and bringing a phenomenological approach to queer theory, Ahmed wants to draw attention to the work that goes into making objects near to hand, especially because this closeness "come[s] to be lived as what is already given, as a matter of how the domestic is arranged," for "what puts objects near depends on histories, on how ‘things’ arrive, and on how they gather in their very availability as things to ‘do things’ with" (88).

Rather than reflecting upon the histories of how the writing table came to be a domain for uninterrupted scholarship, however, Husserl ignores the rest of the house to focus on his writing table, which is, Ahmed argues, a necessary elision:

If the objects of phenomenology are domesticated objects—that is, objects one imagines as ‘being available’ within the familiar space provided by the home—then the domesticity of the setting is not allowed to reveal itself. Or, if signs of domesticity appear then, they also quickly disappear, and seemingly must do so if phenomenology is to do its work. (33)

Ahmed invokes Virginia Woolf’s challenge to “imagine a room, like many thousands, with a window looking across people’s hats and vans and motor-cars to other windows, and on the table inside the room a blank sheet of paper on which was written in large letters Women and Fiction and no more” (61). Woolf’s table evokes a different scene than Husserl’s philosopher’s table: the nearness of the writing table for Woolf’s female writer is not at all a given. And when the table, the woman writer’s space, does become near, it may be that women writers have finally occupied the male writing table. But it also may be that the table, the object itself, and the writer’s way of relating and being oriented to it, are made different. Climbers are similarly oriented to their objects: sometimes, of course, climbing tropes are dense
with historical meaning that seems to provide little room for change. But sometimes these tropes get reconfigured, or done differently.

I go to lines, problems, and pressure as available tropes to illustrate the work I do in using them, as well as the work that I believe climbing and cancer metaphors do for participants in recovery climbs. Phenomenology, and particularly the way Ahmed queers it by reminding us that the “I” of phenomenology is not a universal subject, helps orient me toward the interactions of bodies and landscapes, and to make clear exactly what my orientation is toward these chosen tropes. The task is not to figure out what's "really" going on in these climbs, but to see the ontological choreography of these objects: how do cancer and climbers and mountains get put together, and to what ends? And what is my particular orientation that draws me to certain tropes, to certain ways of making things near one another? I draw on climbing terminology as metaphors to work more carefully with the climbing-cancer metaphors. Using metaphors to understand metaphors is a reiterative project, one that illustrates that while generating metaphors is an act of repetition, it can undo and recreate things from moment to moment.

Part of the work of remaking tropes, of showing the labor that goes into something becoming near, is to defamiliarize what it is to climb, or to set out on a

41 Charis Thompson defines ontological choreography as a "process of forging a functional zone of compatibility that maintains a referential power between things of different kinds." This "coordinated action of many ontologically heterogenous things and people in the service of a long-range self" speaks to the experience of recovery climbing, in which illness, rocks, athleticism, and gender are some of the parts that help produce a sense of a recovering self (204). Choreography is also a very apt descriptor of my site: many of the women I interviewed describe climbing as a dance.
mountain ascent. To do that, I am strategically exceptionalist about what climbing means, versus walking, dancing, or other kinds of physical movement. To be sure, there are shared qualities across different forms of human physical expression. The ones I know about best are surfing and cycling. Riding a bike makes you start to look at landscapes differently, to imagine the pleasure of getting from someplace you usually travel to by car by bike instead. You start unfolding maps, looking for new ways of getting somewhere, ones that might be more challenging or interesting than the last time you rode that way. Surfing teaches you to see the movement of water in its smallest increments on a human scale: you stand on a cliff and watch how a wave breaks, which direction, how fast or tall or thick the water is. Does it peel gradually from right to left? Does it scoop up suddenly, hollow itself out and dump all its weight upon itself? Could I surf that wave? How would those particular waves feel as they punch me when I paddle out? Similarly, rock climbing makes you start scanning the landscape with different eyes, at crags on hillsides, even at the sides of buildings. You begin to see your environment differently, but it affects more than just your sense of vision. Feeling the rock is of course tactile, but it also touches your taste, smell, and something not quite in between and not quite the total of all your senses.

You could say that climbing, cycling, surfing, running, and dancing are linked because they involve lots of repetitive movement, that they are rhythmic, that they involve muscle memory and complex interactions between breathing and blood circulation and adrenaline and split second bodily reactions that aren’t true for activities like sitting or brushing your teeth. All of these movements lead to a
different way of inhabiting and traveling through a place. With new physical skills and capabilities come new extensions of purpose and desire. But as many similarities as one can point out—all of it is exercise, after all—there are thousands of differences that matter, and some are more difficult to register than others. There is a particular economy of movement and affect that belongs to climbing, rather than walking or cycling. Your whole being becomes focused on reading rock, rather than scanning for different textures of dirt or gradients of the road. And then, within each activity, the differences multiply: how do you feel that day? Are your legs tingly with fear today on a technical maneuver that you usually make effortlessly and without thought? Does everything move fluidly, letting you feel like you were born to do this and have never felt more complete? To look at the specifics of rock climbing more than its similarities to other kinds of movement isn’t to try to chase down some kind of essence. Instead, to know how these tropes work, why they are repeated, how they work for people, we have to become intimate with what is near, concrete, and useful in these stories of climbing with and for cancer.

In September of 2009, I participated in HERA’s annual Climb4Life event in Salt Lake City. HERA is an organization dedicated to educating women about ovarian cancer and is based in Denver, but the Salt Lake City climb is one of its biggest fundraisers. I arrived at the event’s tents, which were in the parking lot behind the offices of climbing gear manufacturer Black Diamond. I had arrived at the end of the flurry of activity, and as I registered, I was handed a nice Patagonia cloth grocery bag filled with running socks, an event t-shirt, a portable latrine for
backcountry travel, all kinds of coupons, several "how to tell if you have ovarian cancer" cards printed by HERA, and a big Climb4Life poster, all pretty standard fare for a sporting event like this. On my online registration form, I had checked that I was an intermediate climber, a fact that had been giving me a fair amount of anxiety. When I lived in Colorado, I had climbed fairly often, mostly because I was always surrounded by people with extensive gear and knowledge who were willing to teach me. But since being in California, where climbing was phenomenal, as well, but a much farther drive away, I had played around in the local climbing gym, but that was about it. I wasn't entirely sure I remembered how to even tie a figure eight knot, the one that secures your rope to your climbing harness and ensures your belayer can stop you if you start to fall. But I figured I wouldn't get to climb anyway, and that I would just sort of sit around and watch other people.

When I got to the intermediate climbing site, in American Fork Canyon about an hour south of Salt Lake City, I hiked up to the base of the routes, which were visible from the parking lot below but were still a good five minute stair-step hike to reach the bottom of the cliffs. I shyly introduced myself, reminded the climbing professional assigned to help set up these routes, Alli Rainey, about who I was and why I was there, and sat down on a pile of uneven rocks. I was struck by how quiet it was at the site. I had gotten there a little later than everyone, so people were already well into their climbs, focused on either climbing or belaying, and had finished with their own introductions. Eventually, someone asked if I wanted to climb. I said sure, though I wasn't overwhelmed with confidence when I found out that the easiest climb
where we were was a 5.10b.\textsuperscript{42} I hadn't felt so exposed, both out of my element and nervous to climb in front of clearly capable, fit climbers. I felt scared and unprepared and silly, not things I enjoy feeling when it comes to physical capability. It is not, of course, that I am comfortable in all athletic pursuits—just that when I am doing something I am either new at or uncomfortable with, I like to make sure the person accompanying me—and in this case, the person my life literally depended upon—knows the score.

Many people of the ten or so of us at the climbing site seemed to know each other already, and there were two or three straight, married couples. No one I spoke to was an ovarian cancer survivor, but all had experienced it directly, either through a mother’s diagnosis, or the recent death of HERA’s founder, Sean Patrick, who had died after a ten-year struggle with ovarian cancer. Sean’s loss was palpable, both during the climbing events and the film and discussions that followed later that night back in town. Even as a mediocre, out of shape climber, a first-timer at a HERA event, and someone who had never gotten to meet Sean Patrick in person, I felt embraced by the other climbers in a way that was more than about encouraging each other up the climbing routes. I was pulled into a community in which mutual trust and shared suffering are the foundations, and pulled not by verbal invitations or some specific action that I could pinpoint now. Climbing, framed by the shared encounter

\textsuperscript{42} A note on climbing ratings: a route that is essentially just walking a flat surface is grade 1, while scrambling up some rocks without the need of a rope earns a ranking of grade 2 or 3. When unroped falls mean serious injury or death, grade 5 classifications begin. The easiest beginner climbs are usually around 5.4, and the hardest routes currently (they keep adding more numbers as climbers take on harder routes) are 5.14d, with a-d designating increasing difficulty.
with illness, shaped our interactions that day as about both individual and shared
movements, and shared commitments: to health and life, playing on rocks, to quietly
witnessing the ways cancer intertwines itself into our lives, and to figuring out ways
to react to this reality.

**Lines**

In mountaineering and climbing, lines mean a couple of things: a line can be a
rope that ties two climbing partners together for safety to ascend a rock face or
mountain, and line can also describe the route a climber decides to use to ascend.
Rope lines are established for safety, but their security can vary. In expedition-style
mountaineering, with multiple people climbing a route and carrying gear over the
course of many days or even weeks, climbers often use fixed lines, or ropes anchored
into the mountain itself by burying things called "deadman" anchors deep under the
snow, screwing a bolt into an ice wall, or attaching the rope to climbing tools called
pitons in a rock outcropping. Fixed lines allow people to ascend individually using
devices known as jumars, metal clamps that grab the rope and create enough friction
to stop you if you were to suddenly slip.

The first time I used a jumar was in Nepal, practicing before attempting to
climb Chula West. I was there on a scouting trip with a group of climbers from
Boulder, Colorado. Tonya Riggs, an accomplished climber who had successfully
climbed Mt. Everest the previous year, had planned the expedition to Annapurna IV
and some smaller nearby peaks to help her team prepare for climbing Annapurna the
following year, a climb dedicated to raising awareness and money for HERA. I loved the security of walking up a steep, rocky hillside, occasionally fake falling to put my entire weight on the rope and learn to trust the device. Despite my nervousness—was it actually reasonable that this was the \textit{first} time I was using this device, and I was supposed to climb \textit{that} mountain, not this nice little hillside where we were practicing?—it was a wonderful feeling to feel trust grow between the weight of my body and this metal clamp. Fixed lines are the cushiest form of safety in mountaineering, but even they are precarious—an avalanche can rip a seemingly bomb-proof anchor out of a mountainside in seconds. Even more precarious are the ropes that tether climbing partners together on an alpine ascent. The idea is that if one person falls and starts sliding down the mountain, which is never a good scenario, the other person can use their ice axe to "self-arrest," bringing both themselves and their partner to a stop. Ice axe training on self-arrest techniques is one of the more satisfying afternoons I have had. In one of the most sketchy but giddy fun techniques we practiced, your instructor holds your feet while you lie on your back with your head pointed down a snowy mountain slope. Then, release: as you slide downhill backwards, you have to do a kind of sit-up maneuver, and simultaneously swing your weight around so that you are facing uphill, feet below, which is the only position you can be in to safely stop yourself, and drive the pointy end of the axe into the snow, hard, taking care to not gouge yourself in the process. Fun as this was, it lost some luster when I imagined the more realistic scenario in which self-arrest techniques
would be handy: slipping on a sheet of blue ice, loaded down with a heavy pack, and having to drive my axe in a much less forgiving surface at a much higher speed.

As solid as lines might seem, in the sense of either the climb’s route or the physical line that anchors you to it, rocks move and crumble, and routes turn out to be less climbable than they seem. In climbing, ropes are a strange hybrid of security and anxiety. In his essay “Roping Up,” climbing writer David Roberts describes how the lines of a route and the safety rope call for complex navigation: “The climbing rope is indeed a symbol of the relationship. But it adumbrates no mere homily of teamwork and moral uplift. It plays a subtler and more interesting role than that” (232). On one trip into the Canadian Rockies, Roberts describes the terror of climbing attached to someone he doesn’t know or trust:

Had he been an old partner, I could have contented myself with the Braille of inch-long jiggles of the rope. But Derek’s rope I could not “read.” He seemed, moreover, a dogged and stubborn fellow, the sort who poorly tolerated ambiguity, preferring instead to push ahead with some fixed idea of what to do and where to go. (233)

Because he can’t “read” Derek’s rope’s movements, the steep terrain, which is avalanching once every few minutes, becomes not a blank writing tablet for conquest and achievement, but instead a bad script that will most likely lead to their deaths. The rope plays a central role in the failed relationship between the climbers and the mountain, and without the rope working as an object of connection, Roberts becomes alienated from the route and his partner. Roberts argues with Derek to choose a safer route:

I was violating a cardinal rule of climbing, by second-guessing the man who was first on the rope. But it seemed so obvious that I was right. I began to see
that because this was Derek’s route, because he had stared at the pictures for months beforehand, telling himself it was going to be a classic, he could not give up the idea of the straight line on the photo even when his life was at stake. We screamed on. Hank tried to mediate. Derek seemed intransigent. (234)

The lines of ropes and routes are never solid or guaranteed: become too attached to the false security of a rope or the lure of a route and you may never finish the climb at all. A bad reading and bad writing of the route is one that only draws on photos and guidebooks. To climb with success and intelligence, one has to remain alert to change, constantly re-reading your route for how it unfolds every minute. The best kinds of lines, Roberts’ writing suggests, are viewed as tentative but committed to anyway, and they remain flexible, scriptable. Movement is essential: the movement back and forth of “messages” along a climbing rope, signaling when one climber is ready to move forward and thus the belayer needs to take up the rope’s slack, or conversely that your partner is struggling or stuck; the careful movement back and forth between risk and security; and the movement with and along the rock or mountainside.

To the two senses in which I have been describing lines I want to add a third: lines as orientation devices. Lines are moveable, flexible, and often scary, but committing to them is what orients a climber: to the rock, the route, to her own limits.

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43 In climbing, there are all kinds of implicit and explicit rules about ropes: you don’t ask to borrow someone’s rope, for fear you might nick it or get it dirty, causing premature wear and tear; you trust your partner’s belay skills; and you don’t unhook from the rope while climbing. Cutting your partner’s rope is such an unthinkable act that it has been the subject of the controversial book and subsequent BBC film *Touching the Void* (2003), which tells the story Joe Simpson and Simon Yates’ climbing accident in the Andes in which Simon does the unthinkable to preserve his own life by cutting the rope that connects him to Joe.
of acceptable risk, to a climbing partner. These commitments are not just interpersonal and spatial, but also temporal: engaging in climbing establishes one on time lines, either of training for certain routes, or of developing strength and health during illness. At HERA’s film festival after the first day’s climbs during Climb4Life, HERA founder Sean Patrick talked in a film about her experience with cancer. It was a very emotional moment: coming on the heels of other lighthearted, funny, and/or daredevil climbing films, Sean’s words charged the air in the room. HERA had been very identified with Sean, and it was evident throughout the Climb4Life event that many people got involved with the organization because of Sean’s charisma and ability to powerfully communicate her story and get people interested in HERA’s work. She described why climbing was so important to her and why she started HERA, the importance of trusting your instincts and taking charge of your own health care, threads I will pick up again later. But in the midst of positive stories of climbing as giving lessons that can help women deal with ovarian cancer, Sean said something that illustrates how lines, even though they must be committed to, are always temporally and spatially tenuous: “In the world of the living and the healthy, you think that being alive is unavoidable and that somehow death is avoidable. But when you are diagnosed with cancer or a catastrophic illness you sort of get put into this limbo land, and you live from test to test. And if your test is in three months, then the most future you're willing to plan for is three months out.” (Climb for Life). Read carefully, this is not (just) a narrative of progress, climbing as healing, and individual empowerment. Sean’s experience shows how difficult it is to
plan a future when your concept of life span changes dramatically, when lifelines and the ability to enjoy climbing are no longer givens. “Living in prognosis” re-orient you to what climbing and healing mean. Other scripts, other forms of orientation, emerge when lifelines become short and interrupted.

In *Queer Phenomenology*, Ahmed offers “a model of how bodies become orientated by how they take up time and space” (5). Ahmed’s sense of orientation is animated and alive, and it becomes important to look at how and why space matters through the repeated bodily movements and labor that produce it, which are the very things, Ahmed argues, most often concealed and taken for granted when we think of how bodies move in space. In other words, “if space is always orientated, as Lefebvre argues, then inhabiting spaces ‘decides’ what comes into view,” though we often “take what is given as simply a matter of what happens to be ‘in front’ of us” (14).

For Ahmed, “the lines that allow us to find our way, those that are ‘in front’ of us, also make certain things, and not others, available” (14). This point is crucial, that the lines we take, which can mean everything from life paths to ropes used for climbing particular ways of dressing, moving, and feeling comfortable or limited in certain kinds of spaces, generate new lines, orientations, ways of being in the world. Ahmed’s queer phenomenology of lines helps frame the performative nature of these climbs in ways that Solnit’s “wide roads of meaning” do not quite capture. The climbs repeat generic norms and stylistic conventions, both in deed and alpine

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writing. However, Ahmed’s notion of lines reminds us that performativity means that the work that goes into creating these norms must continually be dealt with:

Following a line is not disinterested: to follow a line takes time, energy, and resources, which means that the 'line' one takes does not stay apart from the line of one's life, as the very shape of how one moves through time and space...So we follow the lines, and in following them we become committed to "what" they lead us to as well as "where" they take us. (17)

The lines I describe in my climbs are commitments, though not immovable and fortified. They rely on work, often hidden from view, but the work itself isn’t stable or homogenous.

Lines, whether on a mountain climbing route or one’s way through a cancer diagnosis, aren’t laid out beforehand in clear, legible ways, no matter how much one studies the route and makes plans. Sometimes, lines have to be broken down into fragments, either by choice or because that’s all one has to work with. In Nepal, as our climbing group reached the base camp for our attempt on Chulu East, a 21,000 foot peak, I was struck with terrible altitude sickness somewhere around 17,000 feet. The day before, I had had a severe allergic reaction to Diamox, the drug people take to help alleviate the negative effects of altitude, so that option was out as a way to feel better. I must have looked awful as I stumbled into base camp, supported by two Sherpas, because several people rushed to my side, helped take my sweaty clothes off and put me in more warm layers, handed me soup and sat me down in a tent. I tried to write that night about how I was feeling, but the slightest movements of my eyes exacerbated already vicious headaches. My thoughts didn’t make much sense, anyway, and my handwriting is almost unreadable now. My hands and face were
bloated and distorted; I was confused, groggy, nauseated. The rest of the team debated whether or not to take me down to another camp, wait it out, or give me Decadron, another altitude drug for people with Diamox allergies, and which is also given to cancer patients, incidentally. Cindy Gagnon, a very accomplished ski mountaineer who let me stay with her in Boulder the previous summer while I did research, kindly looked after me all night, checking my vital signs with Vern, the team medic, made me drink black tea to get rid of some of the water retention, and talked with me about her experiences climbing.

Cindy told me story after story of climbing successes and failures, of male teammates being jealous and passive aggressive when she and another woman had summited Ama Dablam without them a couple of years ago, of how being roped into a line is an experience always profoundly individual and deeply indebted to others. If you go up a mountain when others are afraid or unwell, you feel guilty leaving them behind, she explained, and if you’re the one who doesn’t want to go on, you feel guilty about slowing down others’ progress. If the others are men, Cindy said, good luck dealing with the fallout, either way. Cindy talked about learning to block out all the strain of the route as a whole, all the expectations laid upon her by others and herself, a skill she learned doing long-distance sports like triathlons. Cindy said that while climbing a scary route on Ama Dablam,

All I would ever say was, I need to make it to the next anchor, and I will make my decision at the next anchor, like I did in a marathon. I will make it to the next aid station, then I'll decide, do I want to go another mile? I look at the next piece. I can't look at the summit because it's too far away. I can't get there. So I go to the next anchor, and I'm like, can I feel my hands? Can I feel my feet? Do I need to eat? And I would talk out loud to myself—it's time to
eat, it's time to drink. Wiggle your hands, wiggle your feet. Ok, clip in, let's move to the next anchor. And that's how I get up that peak… If I look at the summit, it's too far away.

I agreed with her strategy. My limp into base camp was certainly no route up Ama Dablam, but that was what had worked for me when I was feeling so weak and miserable. I had just looked at my feet, focusing on each step as if it were really the only thing worth looking at. Cindy agreed, “Yeah, get to that next rock. Set little goals, and then it's like, good job, ok! I was literally talking to myself out loud, because that way I'd go through the whole scenario of what I needed to worry about.”

Lines can and indeed often must be incremental. For climbers, and particularly for climbers with cancer, taking note of one’s bodily interactions with one’s surroundings helps unfold and direct these lines, determining their shape.

**Problems**

There are substantial differences, stylistically and phenomenologically, within different forms of climbing. Alpine-style climbing, or light and fast climbs with minimal gear and without fixed lines, is currently most popular in mountaineering. A recent spread in National Geographic profiling Yosemite's big wall free solo climbers (without the use of ropes at all, where one misstep means a fatal fall) is another example of the trend toward more dangerous, but more "pure" forms of climbing. Bouldering is like a condensed form of free climbing, done without ropes on shorter pitches of rock where falling is less likely to be deadly, though a 20 foot fall certainly can do plenty of damage. Though the routes, known as "problems," are shorter, they
are often more intense and require quick bursts of power. In "Bouldering: A Mystical Art Form," John Gill, a mathematician credited with starting bouldering as a sport in its own right in the 1960s, explains that the word "problem"

emphasiz[es] the necessity of intellectual analysis as a prelude to physical gymnastics. However, the intellect is bound inseparably with instinct and physical skill, and cannot operate in arid academic isolation...A primordial interplay of these characteristics is reestablished through accumulated experience, as the artificial barriers between them melt away. We find ourselves inspecting a potential route intellectually, and then suddenly "feeling" the climb in its entirety—not following through in an exhaustive formal analysis. (140)

Even if you repeat a route, "a bouldering problem has a fluctuating nature and is more alive as a shifting and illusory conceptual image than as a fixed physical pattern" (140).

The tension between the physical and mental aspects of climbing is carried over in climbers’ language about cancer and climbing, in the ways people process a diagnosis, a difficult part of a climb, or its “crux,” mentally and physically and in-between. “Problems” is a generative term for wrestling with this productive back-and-forth between notions of self and non-self that characterizes almost every conversation I have had with climbers, especially with climbers about cancer climbs. As Gill points out, you have an objective, physical problem in front of you, made of rock. In that sense, the problem is other than you. But you cannot just intellectualize this other entity and think your way through it: “feeling,” “instinct,” and something “primordial” are what dissolve the “artificial barriers” between intellect and physicality. The rock, then, isn’t quite other at all.
Problems are roughly the equivalent of routes in a roped climb. However, I use problems as a metaphor for cancer climbs, which are not typically just bouldering events, for a couple of other reasons. One is the way that “problem” distills and concentrates what is most difficult in sport (roped) climbing (and, if you are an infrequent and average climber like me, many places on a route can feel like super-concentrated problems anyway). John Gill describes the joy of finding patterns in the rock, much like a mathematical proof: “There is something there that can be created, possibly, if one uses insight and intuition to make this quantum jump. One discovers that a bouldering route can be accomplished not by looking at each minute hold, foot by foot, but by looking at the overall problem” (Krakauer, *Eiger Dreams* 17). Gill describes his experience while climbing as feeling as though he is “weaving in and out of the rock,” and being “sewn into the rock” (Krakauer 24-25).

Problems describe the shifting senses of scale one needs to climb. When you are on a rock, you can’t “see” your route as a whole. Your whole body becomes the sensory apparatus that allows you to progress towards the top, and eyes become only partially useful. The rock’s variations, its potential holds and not so easily climbed spots, can be seen to a limited extent, but being right against the rock means that you can’t rely on vision to give you a clear sense of linear spatial progression from bottom to top. You can size up a route from the bottom (and much more easily if it is a shorter bouldering problem), but things always feel different than they look from the bottom of a climb. As Roberts attests, intuition and sensing patterns, becoming attuned to your body’s capabilities becomes more important than vision. Committing
to decisions that might pan out or may result in downclimbing or a fall is also a crucial aspect of a problem. The term also gets at some of the shifting scales of time and space one deals with in a cancer diagnosis. A problem is not the journey of my friend Ann’s unwelcome gift from her oncologist, the “Your Journey with Breast Cancer” informational binder. A journey implies linearity, possibly with some meandering, but primarily a more-or-less defined path upon which the quest’s hero meets obstacles. A problem, on the other hand, can be linear, from bottom to top, but just as often requires moving in almost every possible direction until the problem is worked through, or not.

If lines in climbing provide a sense of orientation, equally important is a climb’s ability to disorient. Part of this is the nature of the sport itself, the way that your sense of horizon gets changed on a mountain or up close to a rock face, and the ever-present danger of falling or losing your sense of bearings. In "Places for Fun and Games," landscape theorist John Brinkerhoff Jackson writes about French psychologist Jean Casaneuve's theories of what he calls "helix games". In these games, Jackson explains, "The organs of balance, particularly in the inner ear, are momentarily disturbed by unusual movements and the result is a modification of the way we perceive our surroundings. Our relation to the world around us takes on a strange quality, and our self-awareness undergoes change" (14). Jackson identifies surfing, mountain climbing, sailing, skateboarding and motorcycle racing as a few examples of helix sports. They share a rejection of traditional techniques and equipment, despite their historical origins; they avoid the "beaten track"; and none of
these sports are highly competitive. Though each of these sports has gotten quite commercialized in its own right, Jackson points to some interesting qualities that apply to climbing:

What the participant sets out to do is not to follow a well-defined course; he simply heads toward some remote destination: a new experience, a new environment, a dehumanized, abstract world of snow or water or sky or desert, where there are no familiar guidelines…We note how we tend to revive an intuitive awareness of our surroundings, reacting to textures, currents, tides, temperatures, slopes, lights, and clouds and winds, even directions. The essential value of these sports seems to lie in a fresh contact with the environment and a new sense of our identity. Even if briefly, there ensues a temporary reshaping of our being. (15)

In an earlier essay, "The Abstract World of the Hot-Rodder," Jackson calls mountaineering a new type of sport made possible by the automobile's new sense of mobility, which made possible a new kind of experience of the landscape in which the view is no longer static; it is a revolving, uninterrupted panorama of 360 degrees. In short, the traditional perspective, the traditional way of seeing and experiencing the world is abandoned; in its stead we become active participants, the shifting focus of a moving, abstract world; our nerves and muscles are all of them brought into play. To the perceptive individual, there can be an almost mystical quality to the experience; his identity seems for the moment to be transmuted. (205)

Jackson’s interest in the way “helix sports” shift one’s horizon and make one attuned to “textures, currents, tides,” and the changes this kind of awareness produce in one’s sense of self, speak to another important element of the climbing problem: they make one available to suffering in very interesting ways. Unlike sports where there is a clear winner or loser, climbing is measured more in the interplay between physical power, grace, aesthetics, and mental acuity. I suggest that this particular form of interaction with landscapes produces in the interstices of the mind and body a
mode of engagement that is very difficult to reconcile with heroic, individualistic quest narratives. It is not that atomistic, triumphant machismo doesn’t exist in climbing worlds: open any climbing magazine or read an alpine literature classic and it is nearly impossible to avoid. But probing what emerges in these bodily and mental movements when one encounters problems, one can see the subtle ways that suffering figures, or has the potential to figure, not as necessary enemy to be conquered, as in the heroic quest, but as something that just is.

Alli, the climbing professional assigned to set up the climbs at our site in American Fork Canyon for HERA’s Climb4Life, talked to me after the climb about the way that climbing turns around what a problem really means. Instead of being something external that causes frustration, problems bring one into a closer relationship with the rock, with one’s own capacities. Alli explained:

When I am climbing at my limit, there actually is no "me." I cease to be a self-aware self-conscious being. I am a being in motion, executing movements with precision timing (or failing to execute them, if I fall). When redpointing, I've rehearsed the movements many times, so now it's just a question of turning all extraneous mental chatter off completely and staying in the moment, doing each movement perfectly. If anything, I draw on mantras like "Breathe, relax," and "Strong, strong, strong," for words in my head. But when trying the actual hard movements, there are no words. As for frustration, it's useless and inane, and the more a person can escape from it or remove it, the better. It helps nothing in climbing—it’s better to stay calm and focused. I don't really experience frustration any more. I used to, but the only way to deal with it is to reason through it and continue trying, or to give up, and frustration takes the pleasure out of climbing. Since climbing's supposed to be fun, skipping the frustration part is the best way to handle it. Just being happy with the effort and the process is the best way to be. It's always an individual thing, never something shared with others, for me. Only I know what's going on inside my body-being, and while others can watch and encourage, it's really all about the actual climbing experience for me. Not the end result.
Alli’s account of how she copes with frustration during climbing isn’t a call to just stop complaining and enjoy the climb. Rather, her experience of climbing is one of being deeply attuned to movement. It is a mode of being both deeply personal—only she knows what is actually happening in her body—but also non-individualistic. At the limit of her capacities, there is no “me,” only “a being in motion.” Alli describes a responsive, attuned kind of embodiment. The moments in which one’s body is most itself and most not-itself are connected by a body’s movement, making itself vulnerable. Ahmed writes, "The 'here' of bodily dwelling is thus what takes the body outside of itself, as it is affected and shaped by its surroundings… Bodies may become orientated in this responsiveness to the world around them, given this capacity to be affected" (8-9).

Problems connote mental difficulty, but they also involve the aesthetics of learning one’s bodily capacities and incapacities. In conversations I had with climbers both in Nepal and Climb4Life, extending one’s bodily capacities is intertwined with the deeply felt importance of climbing with and learning from other women. Both Tonya in Nepal and Twyla, a teacher from Grand Junction, Colorado who climbed with me at Climb4Life in Salt Lake City, described climbing as dancing with rock. As we sat around our camp site in Humde, Nepal, a small village at around 13,000 feet, before hiking up to Chula East, I asked Tonya and Brad, her expedition photographer fiancée, how coming to climb Annapurna IV would help prepare her for the next year’s attempt on Annapurna. Tonya responded,

This is gonna sound either funny or stupid, one or the other. Brad laughs every time I say it, but I really mean it. Every big mountain I’ve done, I don't just go
do it. I go and I visit it and I just kind of walk around it. I know this is an interview so I'm kind of embarrassed to say it, but I feel like you kind of have to get to know it. Before climbing Everest I went to Everest Base Camp. Before climbing Ama Dablam I sat for six hours on the deck of a hotel and stared at it. It's just kind of a courtesy. It's kind of like you go and dance with her before you marry her. You don't just jump on her and climb her. You know, you come and you walk around... when you come back to do it, it's just not as high anxiety. The weather here is very different from the Khumbu. The terrain is very different. And so it's like a courtship.

Tonya describes the courteous, formal courtship one should participate in before climbing a mountain. The mountain must be treated like a lady, not just “jumped on.”

For Tonya, being a female climber means respecting the mountains as feminine entities, as they are in local Himalayan customs—Tonya explained that the name “Ama Dablam” means “the jewel around mother’s neck.” But it also means relating gently and carefully to the mountain: listening, watching, dancing, courting. Tonya’s insistence on courtesy is less about embodying the ideal of heterosexual chivalry and more about participating in a communion with mountains: just watching Ama Dablam for six hours before attempting a climbing route, inviting a response, dancing, mutually engaged with one another. Erin Manning has argued that in dance, touch between partners illuminates what is actually a "processual body," (xiii) and that touch creates time and space. When we think of bodies as moving, we can't decide that a body is this or that—it is always changing, provisional, relational.

After Climb4Life, Twyla, too, wrote about dancing with rocks:

I think part of what I experience in climbing does have to do with the rock. The feel of it, figuring out how to work with what the rock offers, knowing I can't change the rock to fit what I want. Along with that, being able to work out a series of moves that can be challenging, but when it works it feels more like I'm dancing up the rock. I enjoy trad climbing because it feels like almost
a secret I have with the rock and my partner that we climbed a route and left no traces of that experience (other than the occasional chalk mark). I have felt empowered because climbing is something my girlfriends and I did together. We relied on each other and trusted each other to get up the rock. We all worked through doubts and fears instead of letting someone else do it for us, specifically a male. Some of my most satisfying moments in climbing was working through a route that a male climbing partner had doubted my ability. Nadine and Lauren never doubted my abilities.

This language of dancing and one’s bodily capacities is entangled with the importance of climbing with other women, as well as the givenness of rock: the rock just presents you with what it is, and you have to adjust to and cope with it. Part of Tonya’s “dance” is just watching Ama Dablam, seeing what she does and how she moves. These modes of relating to mountains and rocks speak to how climbers engage with cancer. Illness becomes something to watch, to know intimately, to sense as it moves or changes within one’s body, rather than something to just beat, in the Livestrong model, or to trump with machismo and positivity.

Learning and practicing climbing among women was a matter of pride for the women I talked to. It designates safety, support, and empowerment. Twyla wrote in an email:

Climbing has played a major role in developing my self-confidence, body awareness, and understanding of myself. I learned to climb with two other women, which was such a supportive and amazing experience. We taught ourselves everything and always had a fun time. I feel like women who are recovering or living with cancer have just or are going through an experience that they learn a lot about what they and their bodies are capable of enduring. This is a difficult experience and I feel like climbing is a way to see the positives of what they are capable of, both their body and mind. HERA is such a supportive, nurturing environment to experience this while raising money to help other women in the future. Climbing is also very symbolic of working through a difficult time (the crux) and an upward movement that symbolizes overcoming and being in a successful space.
To approach a route wisely and respectfully, they suggest, means taking up the heritage lines of women who have climbed before you. Tonya talked about planning the Annapurna climb as a tribute to Arlene Blum’s first all-female ascent of Annapurna in 1979. Tonya described how her obsession with Annapurna started when she read Blum’s account of the climb, *A Woman’s Place*:

I just bonded with her. Everything she went through to get accepted into mountaineering clubs, business, doctoral programs, all that stuff… I had felt it in business. And then she was raised by her mom and didn't have her dad in her life, all that little stuff was just a parallel for me. I just really like what she did and what it represented, the climb.

Tonya’s shared histories with Arlene Blum corresponded with a feeling for Tonya of a natural unfolding of events, of an almost destined lineage between Arlene Blum, Sean Patrick, and Tonya.

I went on a hike with [Arlene Blum] in Boulder… While that was happening, simultaneously, I met Sean Patrick of HERA. The way I met Sean was, I fell in an accident, and the girl belaying me who caught my fall, basically saved my life, was doing a climb for HERA and asked me to come to her presentation. So I went to her presentation at Outdoor Divas and Sean Patrick was there speaking, too. It's just weird how everything happened. So this was three years read the book, two and a half years had a bad fall, go to the HERA thing and meet Sean, and fall in love with Sean, too, as a woman. These two women have to meet, Arlene and Sean Patrick, at some point. I felt Arlene's climb in the grand scheme of mountaineering was a blip on the screen. It never really got the notoriety or the word out to what they did. It was a really powerful thing, what they did. And I think Sean is trying the same thing, to get the word out on HERA and to save women's lives through ovarian cancer. So it just was a natural blend to mirror the two.

Then the coincidences continued: after she met Brad, her husband, on a climb on Mt. Everest, Tonya told him about wanting to do Annapurna, and told him she wanted to read *A Woman's Place*. To buy a book for the plane ride back to the US, they went
into an old, disorganized, used bookstore on an island in Thailand. Just before they left, they looked up to see on top shelf a copy of *A Woman's Place*. To Tonya, "The signals keep coming. It's fun."

HERA’s participants suggest that being part of a women’s climbing lineage, learning one’s bodily capacities in a supportive environment, is an important part of taking control over one’s health, to knowing when something is wrong and seeking medical help. But no one pretends that claiming feminine power and self-knowledge through climbing means that all obstacles are surmountable. Objective dangers, of both mountain climbing and cancer, are still very real. Arlene Blum asked Tonya to not climb Annapurna in her honor because the mountain is too dangerous: two of Blum’s climbing partners died in a fall on the 1979 expedition. Ovarian cancer, known as “the silent killer,” often defies efforts to track and detect it. On HERA’s information card given in the climbers’ packages, the symptoms listed are much like other illnesses or minor conditions: bloating, weight loss, bowel changes. A major part of HERA’s work is to get women to read their body’s signs and trust their instincts about what could be wrong. Sean Patrick frequently talked about how she had to pressure doctors to give her blood tests after being brushed off many times. She just didn’t feel like herself, she said: something was off. Sean, a self-described “type A,” had been a corporate executive in Denver but had relocated to the posh mountain town of Aspen, where she could focus on climbing. Her doctor told her to relax and get a hobby.
Sean’s story points to the difficulties involved in reading one’s body, of trusting one’s intuitions: are they bodily or mental or both? What does the knowing? How to account for the back and forth between mind and body, action and reaction? Sean talks about how climbing gave her the tools to be able to confront doctors who didn’t believe she was really sick, and to persist from moment to moment, both accepting the limitations of a situation and going further than she thought she could. After her diagnosis in 1997, she "clipped into type A, go for it, you know, research it, if I can control it I'll be just fine mode. That was my kind of response and my defense mechanism for being able to deal with it." For Sean, the “type A” personality, corporate background, and educational and class privileges were both the thing that prevented an earlier diagnosis, because her doctors read her as overly intense and needing to “kick back,” and at the same time, gave her the ability to research her own treatment options and find the best care. Though she was given four to six weeks to live, Sean claimed, "If I had believed my prognosis, I wouldn't be here." So, mind over matter/a strong will/positive outlook/being a fighter will help you beat cancer. But for every statement like this, there is one about a much more tentative kind of movement, one that strikes a feeling of indebtedness to climbing for its gifts that transcend any clear-cut sense of mind-body division: “Climbing is sort of a metaphor for what I have gone through with my cancer diagnosis. That when situations have seemed extremely bleak and extremely grim, that I have been able to call on the inner resources I learned when climbing and you know, get to the other side.” (Climb4Life film).
Sean talked about how climbing, like cancer, is a constant interplay between orientation and disorientation. Sean described both the grounding and freeing effects of climbing: "Climbing always brought me back to a sense of who I really was at my core. It was very grounding for me… you learn skills of testing your limits, and you realize you can go a whole lot farther than you think you can go.” Disorientation can be productive. Cancer is disorientating, despite even well intentioned attempts to give it structure and order, as in my friend Ann’s “Journey With Cancer” binder. Climbing involves finding groundedness while dangling high above the ground, finding one’s orientation in the face of constantly changing and often hard to read horizons. Disorientation is queer, and produces a feeling of being out of time and place, in which one has to be resourceful and figure out the next move. Ahmed asks,

What does it mean to be orientated? How do we begin to know or to feel where we are, or even where we are going, by lining ourselves up with the features of the grounds we inhabit, the sky that surrounds us, or the imaginary lines that cut through maps? How do we know which way to turn to reach our destination? It is by understanding how we become orientated in moments of disorientation that we might learn what it means to be orientated in the first place. (6)

There isn’t a clear, linear narrative one can hold on to at the beginning of a climb. Even if you try to impose one, it doesn’t match what happens phenomenologically. Climbing problems don’t always produce smooth lines to which one can easily commit. However, engaging with what is given, as it comes, is what constitutes the problem itself, and the joy of figuring it out. Alli, the climbing professional assigned to lead our site’s climbs at Climb4Life, wrote in her personal
blog last year about the push and pull of mortality, limitations, and otherworldliness in climbing:

Climbing is really so personal, so individual, so isolated, despite our need (if we climb with ropes, as I always do) for a partner to catch us when we fall. And when I’m up there just living in my body in the moment, breathing and resting and regulating my movement and letting my body just climb like it knows how to climb, well, that’s what I live for. That IS living. It is being so alive as a human machine, integrated and operating at its highest level of complete functioning, drawing on mental, physical, and emotional resources to perform at its peak.

Nothing for me quite compares…it’s almost otherworldly, at least until something malfunctions and the trapdoor opens and there I am, laughing and dangling at the end of the rope again, playing along in this weird adult-playground circus game called sport climbing where the penalty involves a contrived fear of plummeting through space when you mess up. How fun is that? SO MUCH FUN. (Rainey)

One aspect of climbing that always startles me when I have been away from it for any period of time is how forcefully the edges of my own comfort and trust appear, in my body’s skills, my equipment, and the outcome of the climb. When I started up the route, which was a little too difficult for me, in American Fork Canyon after not climbing for at least a year and a half, my body remembered the motions of tying a figure eight knot into my harness, of how to look for moves, of the feel of the rock against my woefully tender fingertips, of how to belay other people while they climbed. What my body had forgotten was how to keep moving, to trust that I would most likely stay on the rock, even if I just tried something without knowing its outcome. Alli describes the “contrived fear” of falling off a rock, knowing that a rope and a climbing partner will catch you. The threat of mortality in cancer is certainly not contrived. But letting one’s body “just climb like it knows how to climb,” Alli
points out, is living. This is what Sean Patrick described lies at the heart of the climbing problem, and what makes climbing so useful for encountering illness: problems are complex, and working through them is less about achieving a planned outcome and more about trusting one’s own capacities.

Eventually, with a decent amount of self-consciousness in front of very skilled climbers I didn’t know, I scraped my way up the route that day. My mouth was parched at the top—I don’t think I had remembered to swallow once—and my legs were doing what climbers call the “sewing machine,” twitching from the constant and unfamiliar exertion. My sense of accomplishment was really not about completing the climb, especially since I had not done so with any grace or beauty. This is not why other climbers cheer you on from the bottom of the route, either. In the end, what stays with you is just your own tenacity, the fact that you just kept moving until you couldn’t anymore.

Pressure

For some time now I have been acutely aware of each crack in the plated granite, of the grain of the rock under my fingers—and of little else in the universe. On the one hand, it is all so familiar; on the other, utterly new. This is the way the Romantic poets saw the world, it seems to me; no wonder mountains were for them so primeval a presence, comparable only to the open sea.

But just as Keats could not see a nightingale without seeing a Dryad, so, on a climb, it is almost impossible for us to encounter nature directly. We dare not descend to the simplicity, the banality of rock itself: we keep those touchstones of sanity safely packed in our minds—the awareness of time, and the abstract thread of a route. What becomes precious to us on a climb is not the mountain itself, in all its bewildering intricacy, but the things we bring to it, the cheese and the candy bars in our pack, the invaluable metal things
dangling under our arms, the quarter-inch of rubber under our feet. More than fear, more than self-consciousness, it is thirty centuries of acquisitive, aesthetic Western culture that stand between us and any unfiltered contact with what is there.

David Roberts, “Shot Tower, Arrigetch” (Moments of Doubt 13)

In my deliberate misreading of this passage, I put aside Roberts’ frustration with the mediating, distancing effects of Western cultural baggage, and instead draw out Roberts’ attention to the material artifacts that make a climb matter: cheese and candy bars, ropes and pitons and carabiners. The different tools one uses to climb, the routes and moves chosen or not chosen, are what comprise what kind of climb one has, the intention and affect one carries in the process of climbing. In cancer climbs, there is a continual shifting between grandiosity and banality, claims of surpassing illness and simply learning to place one foot in front of another and move to a different place.

Ahmed's idea of spaces and bodies extending into and shaping one another helps me think about the repetition of metaphors in cancer recovery climbs, as well as the repetitive movements that climbing requires: before you climb, you put on your harness. You tie your figure eight knot, checking it twice and doubling the loose end of the rope back to tie in a knot against the rope. If you are on belay, you check your partner's figure eight knot, checking for symmetry and tautness. You check to make sure your harness is clipped in to the belay device properly. You gather up rope as your partner ascends, taking up slack and never taking a hand away from the rope in case there's a sudden fall; if you are climbing, you scan the rock, move your feet onto
ledges, if there are any, or try jamming your rubber-encased toes into tiny protrusions or gouges in the rock's face. You use your toes as leverage, push up on your legs, find a place for your fingers to grip, always scanning using your whole body. No two moves are alike, even in an indoor climbing setting—every hold is unique and requires different bodily positioning, different turns of the hips this way or that, different amounts of downward or sideways pressure on the fingertips or balls of the feet or big toes. Nevertheless, it becomes rhythmic, this scanning and movement.

But I have argued this repetitive rhythm is unlike other kinds of physical repetition. In running and cycling too, if you're lucky and it's a good day, your physical movements—legs swinging out in front of you striking the ground and pushing off again, turning the cranks of the bike smoothly and quickly even going uphill—feel effortless and peacefully repetitive. Climbing can put you into that mode too, but it's never the same, just as it's never the same even between cycling and running. The different micro-ecologies of these activities matter.

Climbing a rock or mountain depends very literally on pressure, on putting weight on feet and fingertips at the right angle at the right time. Alongside the pressure of rock, and touching rock, there is pressure of the kind Ahmed describes to convert cancer into some other experience, some line or trajectory of healing and not despair. In response to these compulsory relationships to cancer, Lochlann Jain has called for elegiac politics, or modes of engagement that are not simply celebratory but grapple with the less joyous parts of being sick and dying. Drawing on Ahmed’s insights, I suggest the pressure exerted by a difficult climb or a cancer diagnosis
shows that in moments of disorientation, the pressure is not linear and unidirectional: the rock also pushes back. Newtonian physics tells us that you don't just propel yourself, because movement requires something pushing back on you. When you acknowledge the rock pushing back, the climb can’t be about conquering. Instead, it is about losing the illusion that we are all free to move through space, as masculinist geography imagines its universal subject to be capable of doing, or free to move on an ever-upward trajectory of healing and hope in a cancer journey. Acknowledging the constraining and empowering force of pressure is about going into a situation compromised—bodies aren't whole, indivisible, free, or immortal, and the rock or mountain is not passive, inert matter. Bodies and landscapes are permeable and interpenetrating.

This is what Deborah Bird Rose calls an “emplaced ecological self” (Rose, “Dialogue” 312). In her essay on the language of permeability inherent in white Australian pastoralist descriptions of the land, how it “gets under your skin” or you become “married” to it, Rose asks, “If we were to re-imagine ourselves as doors or thresholds, what implications of time and place would we encounter? Permeability would open us to dialogue not only with place, but with the history of the place” (321). This resonates with Ahmed’s “model of affect as contact: we are affected by 'what' we come into contact with” (2). The pressure of climbing isn't triumphal or survivalist. Its repetitions invite a continuous mutual contact between skin and muscles and rock, and being intensely engaged with difficult moments.
Pressure, then, is not quite the sum of lines and problems, but it is the force that is generated when the two meet. Ahmed recalls the multiple meanings of “pressure”: “the social pressure to follow a certain course, to live a certain kind of life, and even to reproduce that life can feel like a physical ‘press’ on the surface of the body” (17). Pressure happens in moments of disorientation: returning to Fanon, it is the moment a child passing on the street hatefully hails him as black. But crucially, this pressure and disorientation do not only mean immobility, though this is certainly part of it. “Bodies that do not follow the line of whiteness, for instance, might be ‘stopped’ in their tracks, which does not simply stop one from getting somewhere, but changes one’s relation to what is ‘here’” (160). Disorientation and the sense of pressure that accompanies it are mobile and queer, or what Ahmed describes as “the ‘becoming oblique’ of the world” (162).

If our bodies become stuck in certain alignments, in the case of these climbs, they produce certain orientations to objects that, if examined closely, illuminate all the history and work that goes into producing these orientations in the first place: living in the West, imaginations about exercise and climbing as liberatory, and women supporting women in physically daunting activities, to name just a few. But despite the alignments and repetition of metaphors, the micro-movements of climbing and mountaineering are also producing new, ever-changing compositions of self and environment. These amalgamations change from one moment to the next, and the stasis produced cannot be seen as permanent and timeless.
To pressure, then, I add the important trope of horizons. Pressure creates different possible futures, in which different things become immediate and important. In Nepal, Tonya Riggs asserted that anyone could climb Annapurna if they worked at it, using her life as an example. But instead of reading her statement literally, as a claim for boundaries as made to be broken and surpassed, we can read it as actually marking the importance of boundaries and their semi-permeability. In reality, of course, not everyone can successfully climb Annapurna, though probably a good number of people, given the right resources, could make a surprisingly decent go at it. Even Arlene Blum herself, the paragon of feminism in climbing whose team led the first women’s ascent of Annapurna in 1979, asked Tonya to not attempt the mountain because of its inordinate danger. A better reading is to see Annapurna as a boundary, as a goal to reach toward, which can be productive even in the way it turns you back and repels you. In phenomenological traditions, this could be called a horizon. For Husserl, the horizon is what is around the philosopher’s writing table, what surrounds the philosopher as he goes about his work. Ahmed explains that a horizon “gives objects their contours, and it even allows such objects to be reached… The bodily horizon shows what bodies can reach by establishing a line beyond which they cannot reach; the horizon marks the edge of what can be reached by the body. The body becomes present as a body, with surfaces and boundaries, in showing the 'limits' of what it can do” (55).

Very commonly in alpine literature, and illness recovery literature in general, limits are narrative devices set up to exceed: the mountain/cancer is difficult, but I
will overcome. I, the individual achiever, will muster up my will and fortitude and triumph over this obstacle. However, I want to bring back in limits, barriers, and horizons, and not just as a symbolic point in the heroic quest. Reading these limits and obstacles against the grain can bring us to a concept of horizons that can be productive failures and in their very failure sharpen the contours of what it means to have a body with cancer. This is not an argument for a limit’s cheerful recuperation. Rather, it is a way to face the fact, productively, that some bodies might extend less easily into space, as a result of being queer, racialized, disabled, or ill. Horizons look different for different people, and space can inhibit some bodies even as it extends others (Ahmed 102).

Under conditions of pressure, lifelines change or become shortened, and the landscapes that comprise these horizons become places sometimes marked by difficulty and impasse. Rather than always being metaphors for survival, some mountains remain unclimbed, some routes too exhausting to figure out that particular day. In Reports from a Wild Country, Deborah Bird Rose describes wounded Aboriginal Australian landscapes. Rose charts a course for healing Aboriginal landscapes that have become colonized and degraded, and thus “wild.” Rose writes, “Places marked by loss, by the absent ones whose presence is now only memory, are sites of wounding” or “traumascapes” (49). According to Rose’s Aboriginal friends, “Wild people (colonizers) make wild country (degrading, failing)” (4). This stands in contrast to “quiet country,” in which the care of past generations is evident. The wild is “a place where the life of the country was falling down into the gullies and washing
away with the rains” (4). The sites where these climbs take place—Colorado, Utah, the Nepal Himalayas—share with postcolonial Australia the covered-over histories of violence and conquest, with some differences. These crags and mountains where the climbs take place are preserved and protected, and are visited by people who generate tourism money for local economies. Looking at the rock towers in American Fork Canyon is not the same as looking out upon degraded, deadened Aboriginal land, places Rose describes “where life has been irretrievably killed,” shared legacies of colonialism notwithstanding.

To what extent, then, is cancer trauma? Making the claim that living with cancer is inhabiting a kind of “wounded space” makes it possible to cast aside a survivorship model and instead commit to an ecology in which bodies and landscapes inhabit one another in anti-colonial, non-dualistic ways that are both deeply historical and always in process, material and incipient. Conditions of pressure, and the particular horizons that accompany them, cannot always be chosen. Cancer cannot be wished away or made into a rewarding journey. Minds, bodies, and landscapes have limitations. What is required, then, is a different way of naming and finding routes in these difficult landscapes.

II. Oncogeographies

At Breast Cancer Action's 20th anniversary celebration, guest speaker and honoree Barbara Ehrenreich gave a typically incisive and rousing talk about how
Breast Cancer Action has distinguished itself from other breast cancer organizations that comfortably live in the good graces of cancer-causing corporations and the pharmaceutical industry. Toward the end of her speech, Ehrenreich said to a big round of applause, "We're not asking you to run a marathon or climb a mountain."

Breast Cancer Action’s dramatic differences from even the more progressive organizations like The Breast Cancer Fund are a big part of BCAction’s culture and outreach, so no one missed the dig at Komen’s, Avon’s and The Breast Cancer Fund’s annual events. But this applause stuck with me, because it suggested that for more radical kinds of breast cancer activism, these climbs and runs are lumped together as frivolous distractions from the real, nitty gritty work of politics. In conversations with fellow board member and medical sociologist Tracy Weitz, we have pondered the persistence of the “run/hike/swim for a cure” model, and how BCAction just won’t play that game. But Barbara Ehrenreich’s zinger aside, events in this model are the most dominant and define what counts as inspirational in cancer activism right now, and this trend does not show signs of abating anytime soon.

Read in another way, Ehrenreich’s comment has distancing effects that are troubling. Many of the participants (and all of the ones I met at HERA’s event in Salt Lake City) have not had cancer themselves, but are there because of a loved one. Plenty of people are also there simply because they don’t like the idea of their wife, sister, daughter, or partner getting a women’s-specific cancer, and they want to feel useful and proactive in raising money for someone doing prevention work. “We’re not asking you to run a marathon or climb a mountain”: it gets into tricky territory
when you start weighing, even subtly, the seriousness and suffering, the realness, of people’s experiences of cancer. But this is the messy business of talking about scary diagnoses, how to exist in the midst of overwhelming and conflicting information, how to carve out a sense of futurity in the midst of grim and painful realities, and affective ties to landscapes and to bodily movement.

BCAction’s distancing from Komen’s runs and their ilk is extremely useful as a rhetorical strategy. But to understand what is so powerful about climbing mountains and running marathons for/with cancer, we have to do something different, something that might well completely undermine this rhetorical strategy, even as we keep using it. Moving past the survivorship paradigm is a persistently thorny enterprise, and we need good tools to do it. Along with Lochlann Jain’s elegiac ethics, or a politics of mourning that deals with the grief of cancer head-on, I add the tactile, sensory activity of dealing with cancer and its potential to radically re-orient us to and with landscapes.

I argue that seeing cancer as trauma can generate a sensibility for the shared “geography of exposure” that we all must inhabit, some to more extreme degrees than others (Ley 8). As Ann Cvetkovich has argued, if we think of trauma as residing in the individual, the individual can go to therapy and be rehabilitated. If trauma’s locus is in a more messy cultural body, then people can be re-traumatized, again and again: if one person’s chemotherapy treatments work, their personal trauma may be coming to an end, but what about the hundreds of thousands of others getting diagnosed, or being unwittingly exposed to toxins that will eventually turn into a diagnosis? Or the
children of people whose careers were spent in toxic agricultural or manufacturing industries, who watch uneasily for this possible lifeline to appear? By using the label “trauma,” following Cvetkovitch, we have to look at the bigger picture, the conditions that produce the trauma in the first place. It takes us back into the mess, to a place of interdependence and mutual risk and responsibility.

Though our geographies of exposure are better or worse according to race, class, age, sexuality, we remain exposed. Rather than conscript nature into a bland play in which colonialism, violence, death, fear, and ugliness are not a part of the landscape, we can reject survivorship and instead use an ecological concept: resilience. Rose describes that in ecology, resilience is “attuned to the instability of living systems” and that “the will to flourish brings every living thing into relationship with other living and non-living parts of its environment” (7). For humans, resilience means finding ways to cope with catastrophe and to continue. Rose explains that in Christian and post-Enlightenment discourses, the belief in a progressive, linear, emancipatory future, which survivorship discourses participate in as well, “enables us to turn our backs on current social facts of pain, damage, destruction and despair which exist in the present, but which we will only acknowledge as our past” (17). Thus, “the ‘now’ becomes a site of such alienation that it hardly bears thinking about… We are suspended in a bereft and hapless moment” (18). To address what can be done in a decolonizing context to bridge tremendous gulfs of violence and alienation, Rose proposes “recuperation”, rather than recovery or restoration, because “there is no former time/space of wholeness to
which we might return or which we might resurrect for ourselves. Nor is there a
posited future wholeness which may yet save us.” Recuperation instead seeks
“glimpses of illumination” and engagement (25).

If Western culture makes life at war with death, and hence the battle with
cancer, then “The dismantling of the warlike theory of ‘self’ is a necessary step in
moving towards decolonization” (Rose 21, 26). In her argument for an ecological
body, Rose claims, “Far from being distanced from our histories of violence,
dialogical interpenetration means that we are intimately and physically connected” to
the “pollution, poisons, and death work of ecological damage” (“Dialogue” 322).
“Resilience works with connectivity and commitment. It acknowledges the force, or
desire, of living things to flourish, to be in connection, to find their mutually
beneficial patterns, and to restore in the world the power of life which is always in
delicate relationship with death” (49).

Susan Sontag wrote about the dual citizenship we all share in “the kingdom of
the well and the kingdom of the sick” (3). There is a place of illness, and we need to
map it differently. Oncogeographies are geographical practices, and this project
stakes out this geography and draws speculative maps. This geography is committed
to certain lines, to drawing out the potentials embedded in healing practices. It
commits itself to Freya Mathews’ question, “What is nature, and how are we to live
with it rather than against it?” (“Letting the World Grow Old” 119).
Oncogeographies make a claim for the importance of gendered embodiments in space
that aren't about visuality, about trying to map certainty onto the future. One can't
always see one’s cancer, one’s prognosis, or the contours, affects, and outcomes of the ways one’s life and illness intersect one another. Other senses and qualities, like tactility, come into play. Orientations in this geography are queer: a queer phenomenology gets us to look at how orientation puts us close to some things and not others, how "the bodily direction "toward" objects shapes the surfaces of bodily and social space" (68). This has serious implications for one's lived experience, but also the kinds of politics one engages in, and how one shapes a world for oneself and others. Oncogeographies care about “glimpses of illumination.” Their practices are the minutia of repeated movements that can generate different ways of being, and embracing difficulty without being enthralled by grand narratives of survivorship or embattlement.
CONCLUSION

I have described this project as an act of assemblage. Rather than a tying up of loose ends, I use this space to gesture outward to even more matters that this work will inform. The image of amalgamation is fitting: if this project could be cast in a film, its stars would be part Frankenstein, seeking to penetrate the secrets of nature, and chasing down its hodge-podge creation to the Arctic ends of the earth, discovering self-knowledge on the way; and part seeking avenger, searching for her own voice, from Maxine Hong Kingston’s *The Woman Warrior*. This story winds its way through upper-middle-class, white, outdoorsy communities in the West, and quests through biomedical cancer worlds, while drawing on strands of Romantic fascination with mountain landscapes, colonial histories of climbing as claiming territory, and ecofeminist beliefs in women and wilderness’ mutual sustenance.

But part of my effort here has been to disrupt lineages of all kinds, from the normative masculinism of wilderness and outdoor adventure’s histories and theories of landscape, to the too-frequently disembodied concerns of theories of affect, and queer and feminist theories’ skepticism toward the category of nature. I have tried to reassemble these disruptions in ways that are always embodied, clued in to spatiality, ecologies, and landscapes, and praxiographic. In *Cruel Optimism*, Lauren Berlant asks, “There is an orientation toward interiority in much queer theory that brings me up short and makes me wonder: must the project of queerness start “inside” of the subject and spread out from there?” (125). Queer theoretical projects have also
remained, by and large, uninterested in the status of nature and wilderness. Using queer theory as a mode of engagement with the world, rather than a self-reflective project of individual queer subjectivity, can invite wilderness to become a matter of concern for queer theory, and also brings about a much-needed queering of nature and how we engage with it.

How we know wilderness and nature, and how we know ourselves in this thing called wilderness, has been a central question in this project. Taking up Lauren Berlant’s challenge, via Marx, to think about what it would look like to have the senses become theoreticians, I have shown that tactility and movement are crucial tools for thinking about bodily capacities for healing in nature. Touching, sensing, and moving in certain ways rather than others, form one’s relationship to interior and exterior landscapes (Berlant 31). These pathways by which one experiences healing, and the ways we come to feel, sense, and know things about ourselves and the nature and wilderness, have much to say about where we draw the boundaries between sickness and health.

This is partially because, as I have shown, Euro-American narratives of traveling in wilderness are so often suffused with the language of health, both the landscape’s and its salubrious or disastrous effects on human bodies. The inverse is also true, that illness gets described as a wilderness, or striving for the summit of a treacherous mountain. In both cases, these metaphors work because of the ongoing narrative tension between the unknowable sublime and the mapped, tamed landscape. To summit a mountain and beat cancer, one must tackle something much bigger than
oneself, something unpredictable and wild. Yet at the same time, there must be at least a hope of mapping disease in some way to make the going easier. I have shown how different these maps can look: some put their faith in better maps of the BRCA1 and BRCA2 genes for breast cancer, some map out survival in terms of cures, and others find pathways of finding power in their own bodily movements, and the way that this can provide a sense of groundedness in a crisis.

Technologies of vision comprise part of the glue that holds these metaphors of wilderness and health together. Wilderness, as I have shown, becomes a place in Euro-American stories in which one can see and know oneself best. Free of the distractions and clutter of civilization, wild places can supposedly offer an unobstructed line of sight into the distance and, by extension, into the nature of one’s truest self. Clear vision is equally important in medical realms. Emily Martin and Jackie Stacey have described the ways that medical technologies, in both traditional and alternative therapies, emphasize visualization as the pathway to self-understanding and health. Stacey writes,

Through new forms of technological and imaginative visualizability, an intensified significance has been afforded to the emotional, psychic and psychological meanings of illness. If the body can be read as an informational text, then the “imprints of emotions” on its cells can be translated (with the help of a native speaker). *Insight* into the body’s secret places can offer *insight* into the personality. (175)

In both Western and holistic/non-Western medicine, inner landscapes are often subjected to the same “compulsive search for truth through the power of vision” (Stacey 155). Jackie Stacey gives a rather harrowing account of her encounter with
such therapies during her cancer diagnosis: one holistic practitioner insinuated that
Stacey’s cancer might be because she was a lesbian, and thus had a deficit of male
energy in her life. Stacey describes how the search for the causes of cancer in holistic
treatments can often quickly slide into a search for fault—did my stressful
relationship cause this? Did I work too much and sleep too little?—which eerily
replicates neoconservative demands for personal responsibility. Making the body’s
interior visible, Stacey argues, facilitates an “autopathogenic view of cancer” (Stacey
191). Stacey argues that tropes of self-visioning and medical imaging technologies
work together to produce “accounts of the self-generation of disease” that “map out
clear trajectories: rediscover your ‘true’ self and find the path towards liberation”
(236).

Yet as I have tried to show here, vision is often obscured, or just plain wrong.
Much work on biomedicine has argued that medical practices continue the
Enlightenment project of making visible the body’s “occluded spaces” to bring them
under further control (Barbara Stafford, Stacey 169). Yet visualization as a pathway
to healing isn’t such a simple process: even as the body is rendered transparent, is it
never flattened and evacuated of dense meaning. Outside/inside, self/other
distinctions are never stable or given, even in the most traditional medical narratives.
If visualization successfully penetrated the body’s occluded spaces, then metaphors of
wilderness as healing, and illness as surviving the wilderness, wouldn’t work.
Perhaps for visualization to be such a potent and pervasive trope, the blank spot on
the map needs to be preserved, the mystery of virgin territory uncharted. These appeals to know oneself through vision and/or visualization, to get to the bottom of either the lifestyle choices that led one to a diagnosis, or the emotional stifling that caused toxins to accumulate in one’s cells, or to take back power from medical experts, inevitably skirt the edges of questions about what illness and nature are. Is illness an aberration of nature, or nature’s very essence itself?

To grapple with these questions required being attuned to the complex ways bodies, landscapes, and stories intersect and shape one another. This might mean rethinking the ways we have come to understand what illness is and how it might be lived with more agency and dignity. This, in turn, means giving a hard look at our conceptions and critiques of nature. Jackie Stacey argues that the linear, vision-intensive modes in which biomedicine works are to blame for the ways we perpetuate harmful mind/body dualities, which ultimately make illness an unkind, isolating experience. The drive to impose linearity and lucid vision are certainly a big part of the story of cancer diagnoses, in which patients are asked or compelled to envision a clear, straight path to survivorhood, one which requires their compliance and cheerfulness. Tim Ingold argues that linearity has come to be associated with Western imperialism, and thus anything smacking of linearity means rationalization, imposed order, and blind faith in Enlightenment progress narratives. As Ingold puts it, “Alterity, we are told, is non-linear” (Ingold 2).

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45 Ella Shohat has observed that medical imaging grafts scientific discovery onto “a discourse of technological expansion into the ‘virgin land’ of the female body” (Shohat 70,78 in Stacey 154).
Yet what if illness is rethought spatially? Illness can bring all kinds of lines into play—lifelines and storylines, to name a couple—but these lines are not necessarily linear in the oppressive, imperializing fashion in which Western culture is said to participate. Like Tim Ingold, Sandra Koelle has argued that life is lived along lines, pathways, and routes. In her study of forgotten histories of Chinese laborers and African American bicycle corps soldiers in Montana and Idaho in the late 19th century, as well as contemporary animal travels over and under major roads in the Northern Rockies, Koelle asks us to consider corridors, or lines of travel, as lively sites for analysis that are just as important as static dwelling places. Drawing on Koelle’s emphasis on lines of travel, I argue that thinking of illness spatially, as a practice of traveling, begins to open up the ways we theorize what health and illness are, of how one envisions one’s illness or potential pathways to comfort or health. Just as all vision isn’t clear and penetrating, not all lines are truly linear, and walking is not just rhythmic and smooth repetitive movements. Mishaps, errors in map-reading, and tripping are constitutive parts of walking, and in fact “become part of the rhythm of walking itself” (Vergunst 120). Traveling along lines, too, can involve doubling back and fragmentation.

Ingold proposes that instead of dismissing lines as the straight lines of modernity, we might see our lives as lived along lines that produce “a manifold woven from the countless threads spun by beings of all sorts, both human and non-human, as they find their ways through the tangle of relationships in which they are enmeshed” (Ingold 3). Ingold reworks lines as a gathering up of interconnected paths
and a tangled meshwork of relations, rather than the domineering imposition of
linerarity on fundamentally non-linear things.

Rethinking lines in this way, as moving and relational, can shift the ways we
think about experiences of illness. I have argued that illness has a place, a spatially
embodied presence that is often overlooked. It is often mapped along lines with
progress narratives, where survivorship or a cure is the end point. However, despite
the pervasive force of this narrative, illness is rarely actually lived this way. It
meanders, gathers momentum suddenly or dissipates; it can bring one into community
with others who would otherwise remain strangers, while it can also isolate one from
close relationships. To say illness proceeds along paths does not mean it follows
linear trajectories in the way we are accustomed to thinking about what linearity
means. The lines of illness can be radically disorienting, rearranging one’s entire
daily movements, thoughts, feelings. There is no reason, Ingold argues, that lines
should be thought of as straight and singular. Illness can be thought of as relations
of movement. Experiences of illness create maps. These are not just verbal or
narrative maps, but tactile and felt, a “way of knowing” that “is itself a path of
movement through the world” (Ingold 89).

Ingold has a detailed argument about how this came to be in a chapter called “How
the Line Became Straight.” To summarize broadly, Ingold argues that “the hegemony
of the straight line is a phenomenon of modernity, not of culture in general” (154-155).
This is because, Ingold writes, “the line, in the course of its history, has been
gradually shorn of the movement that gave rise to it. Once the trace of a continuous
gesture, the line has been fragmented—under the sway of modernity—into a
succession of points or dots” (75). With modernity, lines become artificially fixed and
immobile, and “the modern maker or author envisions himself as though he were
confronting a blank surface, like an empty page or a wasteland” (155).
Foregrounding the ways illness is experienced spatially helps situate the study of illness within ecologies. Ingold defines ecology as “the study of the life of lines” and argues that in the ecology of one’s life and, I would add, experiences of illness, for inhabitants… the environment does not consist of the surroundings of a bounded place but of a zone in which their several pathways are thoroughly entangled. In this zone of entanglement—the meshwork of interwoven lines—there are no insides or outsides, only openings and ways through. (Ingold 103-104)

Thinking of illness ecologically requires us to consider illness as not just something that happens to an individual, but something much more fluid, tangling humans, non-humans, and landscapes together.

The ways that conceptualizations of illness and non-human nature circle one another are evident in how we name and categorize diseases: cancer, for example, named for the way it approximates the movements and appearance of the crab. At a luncheon last year for Breast Cancer Action, board member and medical sociologist Tracy Weitz gave a talk about how we know when breast cancer is really breast cancer, the serious kind that requires chemotherapy, or the scary but ultimately not life-threatening form with which people can just coexist somewhat peacefully. Tracy described breast cancers as falling into three general categories: bears, birds, and turtles. The bears are the aggressive, deadly forms, birds are cancers that may stay in place or may fly erratically and spread quickly at any moment, and the turtles are the cancers that will just stay put without posing much of a threat. Tracy’s point was that we must pay attention to cancer’s multiple expressions and movements: mistaking turtles for bears can turn otherwise healthy people into cancer patients. Overtreatment
is a big problem for breast cancer patients, Tracy explained, and we must pursue more nuanced ways of understanding the disease, rather than being wed to a model in which one is either sick or not.

Part of being more attuned to the animal-like shuffling, fluttering, or slashing of cancer cells is moving away from an unquestioning reliance on pharmaceutical protocols for what treatments are good and life-saving. But Tracy’s breast cancer metaphor points out the vague line, which undergirds stories of wilderness as much as stories of diagnosis, between health and illness. What is the moment, the speech act, the bad feeling in the stomach that turns someone into a patient, or distinguishes a state of health from one of illness? What is the landscape of the body’s interior, where health and illness reside? What do these landscapes look like? What do they do?

My dissertation has argued for thinking ecologically about illness and nature, which means thinking of humans as permeable. Tim Ingold cites Gregory Bateson’s claim that “the mental world—the mind—the world of information processing—is not limited by the skin” (Ingold, *Being Alive* 86). Yet, Ingold claims, even in Bateson’s work, “there remains a presumption that whereas the mind leaks, the organism does not.” Ingold proposes instead “that as a nexus of life and growth within a meshwork of relations, *the organism is not limited by the skin*. It, too, leaks” (86). Thinking with tropes of meshwork and leakiness may produce very difficult categories of illness and health, non-human and human natures.

This also has implications for the ways we conceptualize how one’s mind recognizes one’s bodily discomfort and illness. In public and private health
narratives, there is much emphasis on knowing one’s body or the moment one becomes sick, the bundle of causes and conditions that bring one to the point of a diagnosis. When people talk about getting sick, there’s often a moment of nonverbal, tacit knowledge before the illness is confirmed by a medical professional: “I knew something was wrong when… I should’ve listened to my body… I think I knew before I knew.” This self-knowledge is championed, on the one hand, in medical worlds, where early diagnosis, more screening, like mammograms, are said to be one’s best defense against serious disease. Early detection is the best protection, so the saying goes about breast cancer. On the other hand, self-knowledge is devalued, particularly when it comes to women-specific diseases like ovarian cancer, especially in young women, and medical authority often identifies vague symptoms as a patient’s overreaction. Nevertheless, knowledge, with vision as its proxy, is still an unquestioned good, even when patients’ efforts to know themselves cause a power struggle between patients’ intuition and common sense and a physician’s knowledge.

Jackie Stacey describes how the compulsion to know one’s interior haunted her own cancer diagnosis. Stacey asks, “What kind of person does not know they have cancer? What kind of body hides the evidence so effectively? And what kind of disease could disguise itself so skillfully?” (5-6). Stacey writes, “I had assumed that I could read the corporeal codes. I was body-literate… I had learnt to ‘listen to my body.’” But the shock of this diagnosis suggested that all was not what it seemed: the healthy body that hosted deadly disease, the smooth surface that concealed a malignant tumour” (6).
Stacey works through the frustration of her body’s opacity, its ability to scramble codes and conceal deadly evidence. Yet while Stacey argues against the medical world’s vision-seeking practices, I suggest that we might take up these instances of not knowing, of the missed cues, misrecognitions, and misdirection one inhabits in the course of an illness, as a methodology. In *Epistemology of the Closet*, Eve Sedgwick argues that we should ask questions about the “plethora of ignorances” and “the labor, erotics, and economics of their human production and distribution” (8). Attention to ignorances also brings into focus the spatiality of knowledge, health, and illness. If health is about getting in touch with, seeing, or sensing one’s inner landscape, then what are contours of all the ways we misrecognize and misapprehend what’s happening in our own bodies?

It also becomes necessary to ask questions about the ways that spatiality, racialization, and health are joined. Who can see and sense one’s own interior? Who is attuned to one’s own bodily processes? Who is ignorant, and what do these different forms of knowing and not-knowing say about the ways we experience health and illness? Sara Ahmed’s work on racialization and bodily capabilities has been very productive in thinking of my project’s next incarnations. The spatiality of whiteness and heteronormativity can be characterized by its unboundedness, its ability for lines to extend—its prerogative to have health, to have a long life, to travel into wild places and be restored, and to have those wild places be healthy themselves. Queer, racialized space is limited and stifling, as is what one can do with one’s body in these spaces. Ahmed, drawing on Fanon, argues that “racism 'interrupts' the
corporeal schema. Or we could say that 'the corporeal schema' is already racialized; in other words, race does not just interrupt such a schema but structures its mode of operation. The corporeal schema is of a 'body at home.' If the world is made white, then the body at home is one that can inhabit whiteness" (110). To think about definitions of sickness and health means working at the ways that race produces bodily capacities and possibilities.

Healing through sensory means, by climbing or some other physically engaging activity, relies on a belief in one’s capacity for change as a body in a landscape. If blackness produces a no longer active body, but "one that is negated or 'stopped' in its tracks," then one’s body’s capacity for healing must be tied to the project of whiteness, of bodily expansiveness and unboundedness (Ahmed 110). Being sick and gendered female, becoming an object of clinical scrutiny, certainly mediates unboundedness, and causes one’s body to engage in space differently than the presumed universal, invisible male subject’s does. Even so, whiteness needs investigating for the ways it defines the horizons of health and the possibility of recovery.

One story has stuck with and troubled me, and shows the shared terrain of health, wilderness, and the unmarked race of bodily capacities. I returned to The Women’s Wilderness Institute after Laura Tyson retired as Executive Director to meet the new Director, a friend of Cindy Gagnon, who I had traveled with to Nepal as she attempted to climb Annapurna IV. We began talking about my work, and a new staff person talked a bit about their survivors’ courses. I mentioned that some people
object to the term “survivor,” since it can privilege just making it through illness, which is sometimes just luck and not so much a moral victory or proof of unblemished character. The staff person remarked, “Yes, but I would just define survivor as anyone who has a smile on their face.” It is not about declaring the living victors and the dead losers, then, it is about one’s attitude—in wilderness and in illness.

Her comment, nestled between our discussions of the wilderness courses and what it means to be a survivor, spoke volumes about the ways that entering challenging wilderness places and the frightening landscape of illness are seen as best tackled with a smile. Barbara Ehrenreich chronicles this well in “Welcome to Cancerland” and Brightsided, and Samantha King has given us the excellent term “the tyranny of cheerfulness” to describe abusive demands for positivity in cancer worlds. But my point goes beyond an argument with what kinds of affect are appropriate when confronting illness. Wilderness and illness both act as spaces in which people claim to be most human, most connected to their inner self or essence, while simultaneously expressing a (contradictory?) feeling of going beyond oneself, of merging with something non-human. They can both also induce feelings of becoming animal-like, in the sense of being forced into a hard spot: almost freezing or starving and being forced to eat unsavory things in the wild, for example, or feeling so debased in one’s sickness that one begins to feel not human at all. Wild places and experiences of sickness are boundary markers for what it means to be
human, and are typically narrated as offering specific lessons for what kind of human one should be.

Where cancer and climbing meet one another, being human and healthy, as defined by the climbers who participate in these events, are states of being that rely upon movement. These movements are about pushing against the boundaries of illness, health, and what it means to be human. Movement is a trope for living at one’s limit in productive ways that forestall the stagnation of physicality and affect—the injunction to always smile, to remain positive, to leave medical authority unquestioned. The climbing events I have followed here specifically engage with rocks and mountains, but beyond this context, they speak to how movement and engaged physicality define and redefine people’s experiences of illness, and can bring different horizons into being.

Ingold recalls philosopher Henri Bergson’s claim that “the living being is, above all, a thoroughfare,” meaning that we mistakenly treat organisms as things rather than processes (Ingold 116). Climbers with and for cancer tell us about the importance of thinking ecologically, of recognizing how illness and health are not preexisting states of being, but get constituted, along with the people who experience them, along routes through particular landscapes. Understanding how these landscapes work is the first task. The next is to work toward sustaining landscapes in

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Ingold notes that Bergson’s ideas in Creative Evolution (1911) were discredited in favor of Darwin’s account of the evolutionary process. The “flowing, growing line…had finally been expelled by the point-to-point connector” of the genealogical descent line, an ontological shift with implications that are hard to overestimate, Ingold argues. (117).
which responsiveness, resilience, and the joy found in movement are put to the service of helping people live and die better.
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