

BLOGGING TO LET GO: LIFE WRITING, MATERNAL CANCER AND DEATH

ASTRID JOUTSENO

astrid.joutseno@helsinki.fi

Astrid Joutseno is a doctoral student in the Gender, Culture and Society Program of University of Helsinki. Her PhD research is about mothering as a digital phenomenon. Joutseno defends her dissertation in 2021. She is also an established songwriter by the name of Astrid Swan. She won the Teosto Award for songwriting in 2018 and was shortlisted for the Nordic Music Prize the same year for her album *From the Bed and Beyond*. She published a memoir, *Viimeinen kirjani* in 2019.

KEYWORDS

life writing, digital life writing, illness writing, maternal illness, counter-narrative, autothanatology

PUBLICATION DATE

Issue 11, July 30, 2021

HOW TO CITE

Astrid Joutseno. "Blogging to Let Go: Life Writing, Maternal Cancer and Death." *On_Culture: The Open Journal for the Study of Culture* 11 (2021). <<http://geb.uni-giessen.de/geb/volltexte/2021/16169/>>.

Permalink URL: <<http://geb.uni-giessen.de/geb/volltexte/2021/16169/>>

URN: <urn:nbn:de:hebis:26-opus-161690>

DOI: <https://doi.org/10.22029/oc.2021.1212>



Blogging to Let Go: Life Writing, Maternal Cancer and Death

Abstract

Illness memoirs gained popularity in the last decades of the 20th century. From the early 21st century, illness narratives proliferate online. This article examines illness life writing and near-death narratives by mothers living with stage IV cancer. I read two blogs, *Suspicious Country* by Nina Riggs and *Julie Yip-Williams: My Cancer Fighting Journey* by Julie Yip-Williams, and their published memoirs. I draw from life writing studies, motherhood studies, queer death studies, and narrative medicine, analyzing the overlap of mothering and illness in the contexts of life writing and medicine. Working with Eve Sedgwick's reparative practice, I suggest that while illness, dying, and mothering appear incompatible at first, narrating from this position holds the possibility of sustenance and the potential for redefining how stories of ill and dying mothers are told. The blogs and memoirs are counter-narratives to the healing imperatives and closure demanded by the normative cancer narrative. They flesh out an approach to living with illness and dying, while writing about it. The article illustrates how illness blogging constructs an entangled story of grief, loss, and joy which becomes an instrument in living with the acute awareness of dying.

1_Crashing into Cancerland

Ideal mothers are not ill or dying. Yet, some mother children while being terminally ill. The dominant narrative of the ideal mother is one in which the mother is constructed as an ever-present figure who is never sick. Living in the nearness of death is incompatible with the expectation for the ever-present ideal mother.¹ Still, some mothers with stage IV cancer narrate their lives on blogs until they die. This article focuses on two blogs by mothers with metastatic cancer, *Suspicious Country* by Nina Riggs and *Julie Yip-Williams: My Cancer Fighting Journey* by Julie Yip-Williams, and their posthumously published memoirs, *The Unwinding of the Miracle* by Yip-Williams and *The Bright Hour* by Riggs.² The blogs and memoirs³ were written in the 2010s, a time when writing or speaking publicly about maternal death is still rare. Yet, metastatic cancer remains incurable and close to 300,000 deaths of women occurred in 2019 in the USA.⁴ This means that maternal death is not as uncommon as we would like to think. After receiving extensive medical care, the authors of both blogs and memoirs under review died at age 40 and 42.

A good mother in the 21st century USA is often portrayed as a white, middleclass, cis-gendered woman who stays at home attaining both to the intensive parenting ideals and the imperative to remain distinct from her mothering, notes Tasha Dubriwny.⁵ In such a discourse, the successful mother is figured as someone who is not only at home,

but also as an individual with desires and a passion for work (outside home).⁶ The intensification of work and mothering is a result of late capitalism colliding with liberatory interpretations of feminism as a duty to “realize oneself” as an individual.⁷ In the regurgitation of ideal mothering, bad mothering is defined as absence but also as lack of will for self-development.⁸ Normative notions of femininity have a long historical precedent, going as far back as the ancient Greeks. Gloria Filax and Dena Taylor have noted that women have been associated with disability since Aristotle characterized femininity as deviation from male norms. Similarly, Tasha Dubriwny proposes that illness is one of the categories that produce woman as Other. Mothers who fall ill are in danger of becoming ‘bad mothers’ in the late-capitalist discourse of the US terminal illness, which, like disability, lowers the social status of mothers who come to be viewed as less agential in their own lives and less able to take care of their children.⁹ When narratives of cancer are published, media presents and reads them as stories of survival, fight, and growth.¹⁰ In this normative narrative, death is always a tragedy rather than an inevitable part of life.¹¹

I read life writing by ill mothers as counter narratives to the cultural norms that portray them as helpless victims in a tragedy of their own.¹² Cultural rejection intensifies when death is attached to near-future prospects and cancer carries the stigma of death.¹³ During the first half of the 20th century poor mental health, lower class, and femininity were cited as causes of cancer and women with cancer carried the blame.¹⁴ The shift from shame-filled silence to presenting cancer as experience is relatively new.¹⁵ The turn to digital life writing and mothers as subjects of autobiographical acts figure in this development.¹⁶

In the 1980s, Elaine Scarry argued that pain destroys language and therefore scarcity of illness narratives is due to their impossibility.¹⁷ Although Scarry’s idea has been challenged, where this belief is upheld, it breeds silence about dying, demanding the appearance of the compliant patient on the mend. Autothanatography denotes near-death life writing defined by the recognition of a self’s finitude.¹⁸ As Mary K. DeShazer acknowledges, the line between illness life writing and autothanatography is difficult to draw.¹⁹ In my reading of the blogs and memoirs under review in this article, I take their writing to consist of both. Normative expectations rely on a definition of health as the absence of illness or disability.²⁰ As Emilia Nielsen and Hanna Meretoja have noted, this means that cancer patients are expected to heal or at least to remain hopeful.

Acknowledging negative feelings is batted off with claims of disastrous impact on health, thus still blaming the victim.²¹ I read the blogs and memoirs as resistance to cultural expectations for illness life writing and as providers of sustenance. Riggs and Yip-Williams break the “good patient” mold by addressing illness, dying, and separation anxiety directly. I ask, first, *how mothering is constructed in the life writing of women ill with (terminal) cancer and, second, how autothanatography functions in resisting cultural norms of illness narrative and dying?*

This research draws from motherhood and life writing studies,²² conversing also with narrative medicine and queer death studies. I apply the concept of reparative practice as formulated by Eve Sedgwick, which denotes both narrative and criticism as intentional practices of sustenance.²³ In my reading of passages from the blogs and memoirs, I show how life writing operates via reflexive mutability, literary beauty, and the pleasure in the everyday. I suggest that the memoirs and blogs construct continuity which incorporates the dying mothers’ pasts, familial present, and the future, shadowed by their absence. I read maternal illness life writing as counter-narratives to the conventions of closure, death as finality, and illness as failure in mothering. Maternal illness life writing is opposed to instrumentalizing narrative, the healing imperative, and normative mothering.²⁴ Although illness autobiographies on and offline have been studied,²⁵ their intersection with mothering requires scholastic and societal attention. The blogs offer insight into the everyday of the family, medical, and parental care revealing how they interlace during terminal illness. Instead of utilizing patient accounts for the betterment of medical practices I am interested in the process of writing and publishing as reparation.²⁶ These blogs are part of a digital maternal discourse, illustrating both norms and critiques of mothering. Illness blogs constitute mothering differently, because they address the end of life instead of its beginning. In them, mothering is at the heart of letting go of life.

This article is influenced by my personal experience with cancer. In 2014 I was diagnosed with breast cancer at 32. I had a two-year-old child. Three years later I was diagnosed with metastatic breast cancer. Molding myself to maternal ideals, mine or societal, was no longer an option. My encounters with the medical establishment raised awareness of how the coupling of mothering and terminal illness evoked fear, pity, ignorance, and silence. I looked for other stories of mothering in unwanted circumstances, thus finding the blogs of Riggs and Yip-Williams. By researching illness life

writing of mothers, this article hopes to illustrate how maternal illness and dying can occur as part of living. Academically, I wish to contribute to the expansion of knowledge about mothering, the experiences of terminal illness, and life writing as a coping strategy.²⁷

2_Maternal Illness Life Writing

There are tens of thousands of blogs about illness and mothering in English alone. The blogs under review in this article were selected because they are both written at the same time by similar authors: highly educated mothers. Also, both blogs were turned into memoirs. The authors are also different, but comparable: Yip-Williams has colon, Riggs breast cancer, Yip-Williams is an Asian American corporate lawyer in New York, Riggs a white poet and college professor in North Carolina. Together they illustrate shared methods of coping and differences in style.

Both bloggers started blogging straight after their cancer diagnosis. Nina Riggs began her blog *Suspicious Country* upon receiving a diagnosis of triple negative breast cancer. A 38-year-old poet and college lecturer with two children, Riggs chronicled her life and the impact of cancer. The blog archive comprises posts between 2015 to 2017, about two posts per month and 1/3 written by Riggs' husband, John Duberstein.²⁸ Riggs interweaves stories from her childhood and youth into the narrative. Early on she depicts her own mother dying of metastatic cancer. So, while Riggs anticipates her own children's maternal death, she writes about maternal loss from the perspective of an adult. Riggs ties braids of disparate narratives into posts/chapters. Fragmentary paragraphs align weaving singular experiences into a relationship with others, their lives, and past events. An essay titled "When a Couch is More than a Couch" by Riggs was published in the *New York Times* in 2016.²⁹ Later she procured a publishing deal for her memoir *The Bright Hour*. The memoir consists of short chapters of original material and blog posts arranged into chapters titled Stages I-IV (referring to the common diagnostic method of cancer) correlating to the years she lived with cancer.

Julie Yip-Williams published *Julie Yip-Williams: My Cancer Fighting Journey* between 2013 and 2018. The blog begins by describing how Yip-Williams was diagnosed with stage IV colon cancer at the age of 37. The posts expand, describing the life story of an immigrant daughter of Vietnamese parents. Yip-Williams was born blind, gained partial sight in the USA, graduated from Harvard, travelled the world, and became a

successful lawyer, wife, and mother. Yip-Williams too writes about life from childhood to present.³⁰ Since her metastatic diagnosis in 2014 the themes of dying and mothering appear more explicitly together in posts. Also, in compiling a memoir from the blog archive, editors have chosen chapters that address mothering and death. Thus, it becomes a strong theme in Yip-Williams' writing.³¹ Previous research into cancer memoirs suggests that the genre has often employed methods of avoidance or denial so as not to discuss dying.³² This is even when there are no mothering themes in the writing. *Suspicious Country* and *Julie Yip-Williams' Cancer Journey* bring their mothering into narratives of illness.

In studying the blogs and memoirs by Riggs and Yip-Williams, I analyze how these modes of life writing differ: what they make possible and how they coax narratives.³³ Illness narratives on blogs are influenced by the environment of the Internet. Software design, for example, impacts how readers engage with digital narratives.³⁴ Digitality has its own materiality produced in the affordances that cameras, screens, blog templates, and Internet have, as Susanna Paasonen notes.³⁵ Cancer autobiographies have become more visual in the 21st century compared to the 20th century, a time when illness life writing about cancer developed.³⁶ Both blogs *Suspicious Country* and *Julie Yip-Williams' Cancer Journey* lack visual aesthetics, which directs their readers to the textual narrative. Here, despite their topical connection to mommy blogs, they depart from the mommy blog style³⁷ where photographs and web design are part of the storytelling.³⁸ For Riggs and Yip-Williams, blogging is a way to quickly share their experience.

The blogs in this article are representative of illness blogging, but their paths into memoirs are a less common scenario.³⁹ Both authors considered writing their preferred medium to express themselves. Riggs was a literary professional, and Yip-Williams had written a manuscript before her diagnosis.⁴⁰ Yip-Williams was involved in planning the compilation of her memoir *The Unwinding of the Miracle* during her last year.⁴¹ The memoir compiles posts from her blog, some rewritten, expanded or edited, and novel chapters. Yip-Williams died in 2018, a year prior to her book's publication. Her husband, Joshua Williams, explains that 80 percent of the memoir is made up of blogs posts, the rest is from an older manuscript by Yip-Williams and there are a few new chapters.⁴² Riggs' memoir was almost finished when she died in February 2017.⁴³ In the afterword, John Duberstein writes that Riggs finished edits in late January in a rapidly worsening state, dying a month later. The authors, in their writing, and their

husbands, in interviews, underscore the positive impact of life writing and publishing as a near-death process. The memoirs became legacies left to their children and others ill with metastatic cancer.

3 Approaching Good/Bad Mothers & Sick/Dead Women

Motherhood studies defines mothering as care untied from the gender binary or heterosexuality yet arranged societally according to patriarchal norms.⁴⁴ The institutional arrangement of motherhood in the west continues to propel those who mother to societal inequality.⁴⁵ Andrea O'Reilly has coined *matricentric feminism* as the focus on maternal experience. It is this matrifocal perspective that defines my approach. Life writing emerges as literary genre (memoir), or a set of activities (online) where maternal subjectivity is altered or studied.⁴⁶ Heather Hewett notes that research into motherhood memoirs has uncovered “matrifocal narratives” that portray the experience and perspective of mothers focusing on situated knowledges and experiences that arise.⁴⁷ As stated in the introduction, I read maternal illness narratives as counter-narratives to the normative storylines of mothering. The two blogs also exemplify counter-narratives to the dominant discourse of illness.⁴⁸ In addition to feminist life writing, motherhood studies, and narrative medicine, I produce this reading in the folds of queer death studies, as introduced by Radomska, Mehrabi, and Lykke,⁴⁹ in order to view the structures that govern dying through a norm-critical lens.⁵⁰ Queer death studies and narrative medicine resonate with Eve Sedgwick’s reparative practice. My reading is an alternative to what Sedgwick termed “paranoid reading”, a kind of critical theory which predicates on doubt, mistrust, and exposure.⁵¹ Her project was to queer knowledge production. Sedgwick developed her practice after receiving a diagnosis of breast cancer and in the wake of the AIDS crisis of the 1980s USA.⁵² Ann Jurecic has described Sedgwick’s motivation to create alternatives to paranoid reading as “desire to give sustenance to individuals, communities, and cultures” and as opposition to “what paranoia does not know,” suffering and fragility.⁵³ From a queer feminist disability studies perspective, the disabled, chronically ill, impaired or otherwise non-normative can be positions approached “in terms of disability politics.”⁵⁴ In this framework, I understand life writing about terminal cancer (and mothering) to produce a particular epistemology. What I present in my analysis of the blogs and memoirs, I name *illness as ability*.⁵⁵ In my application of reparative practice, I view the strategies of [not] life writing as

processes of reflective assemblance, adjustment, resistance, and healing. In reparative practice, like in narrative medicine, health is defined by the experiencing person, not by health institutions.⁵⁶ In this way, a counter-narrative becomes tellable and it becomes possible to view life with terminal illness as meaningful and satisfying.⁵⁷

In my reading and thematical arrangement of the blogs and memoirs, I follow feminist literary and digital life writing studies practices.⁵⁸ I look for thematic overlaps, occurrences, and absence.⁵⁹ I perform a comparative analysis of the posts, which I have organized into the three themes of mothering, dying, and writing/blogging. A small corpus facilitates engagement with complete archives of materials that intersect across mothering, illness and dying.⁶⁰ My approach is related to the autotheoretical approaches of motherhood studies scholars in whose works their experiences of mothering become part of research.⁶¹ The research material occurs in the context of North American culture I am familiar with as a scholar of American literature.⁶²

4_Mothering through Cancer

The proximity of diagnosis and death define how the authors present their relationship to their children. Diagnosis and death also impact the strategies the bloggers choose in their parenting. I have identified three strategies of mothering present in both blogs: *1) controlling distance, 2) normalizing by making illness part of everyday life, 3) placing hope in motherless futures*⁶³ *by constructing connections over generations and times as well as making material preparations.* These define success at mothering as the continuation of children's lives as *normal* despite maternal illness or death.

Not long after receiving her diagnosis, Yip-Williams writes how in the first twenty-four hours after hearing she had cancer, her body would be racked with unrelenting sobs every time she thought about her children.⁶⁴ Yip-William's first instinct is avoidance because thinking of her children makes her ache with loss. Discharged from the hospital, she sees their pain: Belle, Yip-Williams' three-year-old daughter, sees ghosts and is afraid of the dark.⁶⁵ Children become part of the illness narrative slowly. On Riggs' blog too, focus is first on the vast quantities of novel medical information, but over time both authors describe their children more. Yip-Williams' style punctures directly to anger and sadness, confronting dying head-on. She refuses the compulsory positivity, describing instead preparation for her absence by renovating a habitable apartment. Riggs addresses her experience using metaphoric and poetic language. Both

styles regulate distance to children via narrative conventions while also becoming descriptions of how mothers adjust.

The most prevalent strategy in the example writing was normalizing illness. The post “My Lucky” by Riggs, which describes her illness, her mother’s dying, and her son’s birthday, illustrates how cancer becomes mundane as six-year-old Benny’s birthday wishes show:

Benny whispered to me that his birthday wishes had been that he could be a toll-booth operator when he gets older and that my breast would grow back someday without any cancer in it. [...] But I’m glad these are his wishes. [...] Just as we were sitting down to the chicken wing birthday dinner (a lovely night, my mom strong enough to come to the table, the kids happy and excited), my phone rang.⁶⁶

The post continues by Riggs sharing the latest news in treatment: reintroduction of chemo. She imagines her oncologist outside the hospital, feeling gratitude in an unclear medical situation. Illness is ever-present: a phone call from the doctor interrupts birthday festivities, the weakening figure of the grandmother is a sign of nearing death, but these events are commonplace. The post shows how families adjust, using strategies that vary between adaptation and resistance. Although Riggs wants to protect her children, she does not hide illness or its impacts.⁶⁷ Parents involve children emotionally and physically. In analyzing life writing by cancer survivors, Suvi Holmberg has found that the repeating of everyday activities builds continuity against rupture by illness.⁶⁸ On both blogs autobiography becomes a central coping and normalizing technique.

In studying maternal strategies, Heather Campbell-Enns and Roberta Woodgate found that mothers have different strategies for disclosing information about their illness. “Cancer communication” depends on the needs and emotional states of the mothers. The decision to (not) communicate is steered by a need for normalcy and prioritizing the emotional stability of mothers, especially in relation to anticipatory grief.⁶⁹ In “The Walking Wounded” Riggs employs a normalization strategy finding out that tackling fear with knowledge doesn’t always work. Riggs describes a family visit to see the radiation machine: “In retrospect it was perhaps not my best-conceived plan [...] but it’s so hard to know what will spark their malleable little minds and inspire them to be the doctors and scientists and poets of the future.”⁷⁰ Before the visit, the children wonder if their mother will get to keep her hair, demonstrating attachment to physical appearance. Upon arrival to the hospital, they look startled, quickly expressing they’ve had enough:

My first spidey [sic] sense that there might be some sound reason to why teachers don't regularly take their eager elementary schoolers to tour hospital radiation facilities came just as we stepped foot into the waiting room [...] Suddenly I was aware of so many wheelchairs. So many unsteady steppers. So many pale faces and thin wisps of hair and ghostly bodies slumped in chairs. Angry, papery skin. Half-healed wounds. Growths and disfigurements straight out of the Brothers Grimm. So many heads held up by hands.⁷¹

The children want to rush off asking no questions. The post ends with the children and father admitting that the visit scared them. The next morning the younger son, Benny, tells his mother not to be afraid at that day's appointment. Freddy, the older son, mentions that he knows what he'll become when he grows up: a playwright. In the memoir this same narrative is told in chapter 18, "The Machine." In this version of the narrative Freddy's future vocation has become "a writer."⁷² In a circular motion, the traumatic, which couldn't be tamed by presenting it as interesting, is repaired in the last sentence of the chapter: the son, like the mother will approach life through storytelling. The support system—writing and telling stories—is found closer to home.

The third strategy that I identify, placing hope in motherless futures, is the mothers' preparation for maternal death by imagining scenarios, describing renovations, and connecting the stories of the past to the present. In "Bright Spots" Riggs pictures the worst outcomes she can imagine: her children suffering drug addiction. She counters the negative forecast by describing an acquaintance who survived maternal loss and was still raised well.⁷³ In "Life"/"A Dying Mother's Letter to Her Daughters"⁷⁴ Yip-Williams frames her memoir as preparation for maternal absence and a love letter to her children. The chapter is located at the beginning, as part of the preface to her memoir. It was written while compiling the memoir, when Yip-Williams knew she would not witness her children grow much longer.⁷⁵ Her motivation to write is easing her children's suffering:

I realized that I would have failed you greatly as your mother if I did not try to ease your pain from my loss, if I didn't at least attempt to address what will likely be the greatest question of your young lives. You will forever be the kids whose mother died of cancer, have people looking at you with some combination of sympathy and pity (which you will no doubt resent, even if everyone means well). That fact of your mother dying will weave into the fabric of your lives like a glaring stain on an otherwise pristine tableau.⁷⁶

With these words Yip-Williams moves from normalizing illness to facing mortality. Her preparation is for imminent parental loss. Yip-Williams does not construct support from easy answers, she does not ask for belief or avoidance. Instead, she tries to relate

to her children's loss by describing her experiences of difference and loss. She suggests that a loss makes one stronger, concluding: "Know that your mother lived an incredible life that was filled with more than her 'fair' share of pain and suffering, first with her blindness and then with cancer. And I allowed that pain and suffering to define me, to change me, but for the better."⁷⁷ Here she presents suffering as a path to good. Allowing suffering to change you, she suggests, opens up the possibility of a self which incorporates misfortunes and good experiences. Therefore, a life does not have to be defined by tragedy despite its ending. I understand this potential for redefinition as the core function of reparative writing.

Yip-Williams finishes the post by saying that her children are never alone; they have each other, their father, and their relatives. In the end she imagines her girls practicing violin: "Sometimes, when you practice your instruments, I close my eyes so I can hear better. And when I do, I am often overcome with this absolute knowing that whenever you play the violin or the piano, when you play it with passion and commitment, the music with its special power will beckon me and I will be there."⁷⁸ Yip-Williams extends her impact through reparative writing. She argues for reconceptualizing suffering so that it does not obliterate subjectivity but births a self that contains the sorrow of loss and joy of living. Death becomes a formative moment in the lives of the children that live on, as well as for the mother whose presence transforms.⁷⁹ This is a refiguring of the death narrative. Reparation for the mothers resides in their imagining of their children living on. Yip-Williams constructs a future by presenting loss as wisdom to be gleaned through sadness. She resists death as a pity-producing, destructive occurrence. Yip-Williams does not offer false hope or consolation. The story she tells connects her family forever. Publishing online and in book-form can be an act of controlling a narrative, countering the stereotype of a cancer patient or her relatives as victims. It is also a strategy of making the narrative count.

5_Storying Maternal Endings

A heightened awareness of death marks early cancer diagnosis and cancer life writing even without apprehension of terminal disease.⁸⁰ Blogging involves an intensified relationship between experience, narration, and publication.⁸¹ The conventions of narrating illness and blogging create a set of expectations. These factors lead to stylistic

choices, omissions or gaps. Terminal illness stories are told against the normative cancer story as healing self-reconstruction narratives.⁸² Emphasis on the present moment and the joy of telling a story are qualities of autothanatography and reparative writing. The pleasure of recalling something enjoyable or painful becomes reparation: the narrative stitches together seemingly disparate threads, making space for dying as part of life. Sedgwick emphasized pleasure as the aim of reparative practice, or writing as a source of joy. Jurecic explains that “the reparative writer [...] does not strive to restore the past or stabilize the present, but rather to perform repair in the moment.”⁸³ In what follows, I show how Riggs and Yip-Williams present life writing as ways to *1) minimize damage done to their loved ones while ill or dying; 2) experience joy; 3) express, examine, store, and communicate feelings, practices, possible outcomes, and strategies when death is near. Also, 4) I address their struggle against conventions of life writing, when their narratives do not conform to the norm.*

While Riggs portrayed an interrupted ability to write her story when her feelings did not match the expected narrative arch, Yip-Williams found solace in blogging. The post “Invincibility” by Yip-Williams exemplifies the reparation of autothanatography when the preparation to die is difficult to communicate to loved ones. After writing the post Yip-Williams lived for many years with metastatic cancer and her writing began to address dying more often. Yip-Williams spares her family from her most difficult feelings by positing them on the blog. She traces her shifting feelings about medicine, revealing juxtaposed personal expectations as a mother and a cancer patient. She wonders what drives people to chemo when it no longer works. Facing mortality serenely is her focus. Yip-Williams describes practical and emotional preparation, explaining that others close to her have noted a changed tone, which they perceive as resignation, a lack of will to fight the illness.⁸⁴ She calls it a better focus on living in the present. Yip-Williams addresses a conflict between the dying and those who remain:

When I went to see Dr. A.C. to discuss the possibility of changing treatment (i.e., switching to something more aggressive that might actually shrink my tumors (as opposed to just maintaining the status quo) at the cost of my quality of life), without Josh present, I expressed to him my wishes. “I want to be clear that I am not one of those people who wants to cling to life by a fingernail, that I will always choose quality over quantity, that facing death with dignity and grace means more to me than adding days to my life on this planet,” I declared. But then I paused. I voiced next what I had not verbalized before. “But in telling you this, I feel like I am betraying my husband and little girls, that for them I should choose to live as long as possible at any cost to myself, that time with them is priceless.”⁸⁵

Publishing online what she cannot tell at home, Yip-Williams allows friction and conflict into her story while attempting to protect her family from the pain of her nearing death. The chapter ends with a Mother's Day card depicting a golden butterfly and the line "everything is better when mother is here." Again, mothering and dying are in conflict, because mothers are not supposed to leave. Yip-Williams employs life writing in re-signifying illness the meaning of mothering. In a chapter titled "Living," she comes home from an oncologist appointment with more bad news to a daughter who asks how old she is. Yip-Williams replies 40, but that some people live to be 80 or 90. Without much concern, the daughter exclaims: "Mommy, you are not gone yet!"⁸⁶ This too describes her gnawing separation from the ones around her, and the adjustments that family members make when they are having to live harmoniously in an unideal present. They make do with the present.

A similar separation is depicted in Riggs' writing. In memoir chapter "Dispatch from the Dark," Riggs describes a conflict with her husband who expresses a wish to "get back to normal." Riggs needs her cancer to become a facet that adds value to life or else her whole existence is unbearable. The husband's perspective threatens marital connection. Riggs explains: "I have to love these days in the same way I love any other. There might not be a 'normal' from here on out."⁸⁷ The demand for enjoying each day comes from awareness of mortality. The chapter ends in fear and anger. In one of the many literary references both on the blog and in the memoir, Riggs quotes Michel de Montaigne on living in uncertainty, deprecatingly commenting on how she and her husband are getting everything wrong from arguing to child rearing.

Despite the focus on illness and dying, humor is present in both Yip-Williams' and Riggs' style of writing. I understand its role in making the absurdity and cruelty of life with terminal illness livable, as part of reparation.⁸⁸ Whereas Yip-Williams addresses her mortality explicitly,⁸⁹ Riggs maps the ground as an adult daughter losing her mother before connecting it to her own death. In her case, the entrance to describe the truth of experience is poetic. This is apparent in her references to literature and her style.⁹⁰ She applies literature similarly to the way Paul Kalanithi did in his memoir, *When Breath Becomes Air*,⁹¹ referring to literature as manuals for survival.

Autothanatography is a reckoning with dying and the conventions of telling. In the memoir chapter "Vigipirate," Riggs narrates her final trip abroad soon after being told her cancer has spread. She spends a week in Paris in celebration of her husband's 40th

birthday. She contrasts the vacation to a time of living in Paris as a young couple, anticipating his changes over the years, past her death. Paris grows into a metaphor for the distance she has to assume. Riggs links her life writing to the concept of the abject: “We contain things and give shape to things in order to be less afraid of them. Yes. The crafted idea does this. It’s why I write. The metaphor does this. The intact body does this too. Sometimes I worry I do this instead of allowing myself to feel things.”⁹² She shows that writing can become hiding; constructing order around that which is difficult to feel. The relation to her illness and nearing death fluctuates as it is both the story and the metanarrative of its telling. The purposes of the reparative life writing entwine and separate depending on the wording of diagnosis and distance from death. On her blog, Riggs discussed their trip to Paris in “Heads of Kings, Heads of Angels.” Narrative breaks when a story is not about healing:

That there are darker, rawer things that I am scribbling down and not posting on this blog is something I confess to John and to Tita & Drew — who are both writers — at dinner after martinis and wine and a perfect piece of salmon. That sometimes I do not post here unless I can pull the threads together somehow, unless there is a graceful metaphor in which to seek refuge and shape for this mess. That sometimes I worry that I function more like the PR team for Nina Riggs, Cancer Patient, rather than a terrified set of eyes staring into an unlit room. That there are rough, ugly thoughts and scraps of prose that don’t fit. Where do I put them?⁹³

In blogging about illness, the act of narration and the construction of a voice as an ill mother overlap with the medium and conventions. Riggs knows that the medium directs toward styles, practices, omissions and revelations alike and that narrative approaches can shift or be coaxed by various motivations.⁹⁴ Because experience of illness is entangled in its narrative becoming, the writing and posting of a blog post becomes part of a process of getting to know how one feels. This is known as the interdependency between the medium and the subject.⁹⁵ Riggs evokes the discrepancies between living with and writing about end-stage cancer:

In Paris it seemed like every single woman had two perfect breasts, each unscathed and rightfully hers, and no one else was just wandering about like a marked person with a time bomb strapped to her body (Je suis une terroriste I thought more than once, and every time I heard the wail of a siren I imagined it coming for me — or in my wake.) [...] Here’s another: I hardly remember how romance works.⁹⁶

Acknowledging the losses caused by metastatic cancer is dangerous because they point to a disconnection between the ill and previous self. The reader imagines the embodiment even when writing vocalizes emotional impact. There is a disconnection between

the lived self, the narrator, and the narrated self (the blog-self).⁹⁷ This lost/split self is associated with the body and its transformations because of treatments that disfigure the bodies of ill women.⁹⁸ Both facing and omitting this discrepancy is troubling. I think it is because while blogging hinges on the availability of the narrator's vulnerability and requires the coherence of the author, autothanatography is an unravelling of both. In these examples nearness of death produces two responses: preparative writing focused on organizing thoughts, feelings, words and worlds so that fear will not silence, and loss will not hurt too much. Another consequence of nearing death was that both authors stopped blogging months before dying. This can be seen as both due to illness progression, but also since they spent their final months on finalizing their memoir manuscripts.

6_Matters of Continuation

It matters what thoughts think thoughts, what stories tell stories, what knowledges know knowledges.⁹⁹

Ill mothers engaged in autobiographical acts bear the burden of nearing death by storytelling. Maternal illness life writing can become a process of redefining mothering goals. Life writing sustains and creates connections thus offering variation to the cultural narrative of parental cancer and death. Posthumous memoirs grow into literary legacies that confirm longevity of mattering. Life writing becomes part of survival and healing, not through overcoming illness but by confirming it as living. As concluding remarks, I want to propose four functions of maternal illness life writing that show why these stories matter.

First, it redefines *mothering goals*. While at first, diagnosis with terminal illness appeared incompatible with mothering, in time, the authors adjusted their practices and goals so that being an ill/dying mother was a livable, and narratable reality. Life writing minimizes the damaging effects of maternal illness. By discussing illness online, the digital "space" of blogging prioritized their experiences, sparing energy for engaging with the feelings of others at home. The act of narration itself turned into a self-healing practice, allowing for resistances and ruptures to the normative way of narrating a life story or an illness story.

Second, their illnesses, and their writing of illness *redefined normality for the family*. Both Riggs and Yip-Williams normalized their illness and treatments, side effects, and

dying. Mothers prioritized wellness of family members aspiring for a continued “normalcy” by adjusting its meaning. Reparation in the act of life writing occurred in the form of imagining children living a good life despite maternal absence. Life writing brought pleasure and constructed the possibility of presence after death. The beauty of the everyday became eloquent literary language. Adverse life experiences and affects entangled to the narrative and were stored in the acts of autobiography.

Third, maternal illness life writing *constructs and maintains connections*. By preparing for a future without them, the authors fixed a broken present and criticized the maternal ideal by which ill mothers become failures. As death became an approaching reality, Yip-Williams prepared her children by talking with them, and by decorating a home to match their long-term needs. Life writing helps in connecting the now into a past and future, incorporating terminal illness into the story of the mothers. This process aimed at helping the children cope. For Riggs, storytelling was incorporated into the everyday and passed to the children as a way of managing feelings and seeing a future. The creation of digital narratives facilitates the incorporation of the changed conditions into the everyday. For both authors life writing entwined with the idea of leaving a legacy, an archive through which their children can later get to know them as mothers.

And fourth, their illness narratives redefined a cultural narrative of cancer, in the sense that these examples *disrupt the expected cancer narrative*. They show that in blogging about cancer, personal stories can form a counterbalance against dominant cultural narratives of ever-present mothers, showing that dying too, is part of mothering and part of life. The authors construct futures without hope of healing. The narratives are picked up by the mainstream in the publication of both their memoirs. It is a sign of the evocative power of these narratives and signifies a movement between digital and traditional publishing channels.

Reparative writing is both the repository of pain and suffering and the cauldron in which the ingredients alchemize into a medicinal broth. In the course of blogging and becoming a memoirist, life writing is about making connections to the past and present. The result is a narrative reparation of the future: in the blogs and memoirs adverse experience becomes part of familial every day, reaching past maternal death. Maternal illness life writing resists victimhood making illnesses teachable moments to assure the best possible lives for children. It makes it imaginable that children and partners live

on. It becomes possible to be gone, yet to continue to matter, continue to materialize and to mother.¹⁰⁰ So that dying is not the end of the story, but its transformation.

Endnotes

- ¹ Linda Rose Ennis, ed. *Intensive Mothering: The Cultural Contradiction of Modern Motherhood*. (Toronto: Demeter Press, 2014).
- ² Nina Riggs, *Suspicious Country*, accessed December 15th, 2020, <<https://suspiciouscountry.wordpress.com/>>; Julie Yip-Williams, *Julie Yip-Williams: My Cancer Fighting Journey*, accessed December 16th, 2020, <<https://julieyipwilliams.wordpress.com/>>; Nina Riggs, *The Bright Hour: A Memoir of Living and Dying* (New York: Simon & Shuster, 2017); Julie Yip-Williams, *The Unwinding of the Miracle: A Memoir of Life, Death and Everything That Comes After* (New York: Random House Books, 2019).
- ³ I quote from Nina Riggs' blog and book with the permission of her widower, John Duberstein. Because I have not been able to confirm permission to quote the blog of Julie Yip-Williams, I quote from her published memoir, which in the case of Yip-Williams is 80% same as the blog.
- ⁴ American Cancer Society, "Cancer Facts and Figures 2019," (2020), accessed November 13, 2020, <<https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2019/cancer-facts-and-figures-2019.pdf>>.
- ⁵ Tasha N. Dubriwny, *The Vulnerable Empowered Woman: Feminism, Postfeminism, and Women's Health* (New Brunswick: Rutgers University Press, 2012).
- ⁶ Ennis, *Intensive Mothering*; Lynn O'Brien Hallstein, Andrea O'Reilly, Melinda Vandenbelt Giles, eds., *The Routledge Companion to Motherhood* (New York: Routledge 2020); Tasha N. Dubriwny, *The Vulnerable Empowered Woman: Feminism, Postfeminism, and Women's Health* (New Brunswick: Rutgers University Press, 2012).
- ⁷ For example, Ennis, *Intensive Mothering*; Andrea O'Reilly, *Matricentric Feminism: Theory, Activism and Practice* (Toronto: Demeter Press, 2016).
- ⁸ Petra Bueskens, "Mothers Reproducing the Social: Chodorow and Beyond," in *Nancy Chodorow and the Reproduction of Mothering – Forty Years On*, ed. Petra Bueskens (Melbourne: Palgrave Macmillan, 2021), 265–300.
- ⁹ Alison Kafer, *Feminist, Queer, Crip* (Indiana: Indiana University Press, 2013).
- ¹⁰ Emilia Nielsen, *Disrupting Breast Cancer Narratives: Stories of Rage and Repair* (Toronto: University of Toronto Press, 2020).
- ¹¹ Anne Boyer, *The Undying: A Meditation of Modern Illness* (London: Penguin Books, 2019).
- ¹² Gloria Filax and Dena Taylor "Disabled Mothers," in *The Routledge Companion to Motherhood* eds. Lynn O'Brien Hallstein, Andrea O'Reilly, and Melinda Giles, (New York: Routledge, 2019), here: 77–87; also, Kafer, *Feminist, Queer, Crip*.
- ¹³ Susan Sontag, *Illness as Metaphor & Aids and its Metaphors* (London: Penguin Books Classics, 2002).
- ¹⁴ DeShazer, *Fractured Borders: Reading Women's Cancer Literature* (Ann Arbor: University of Michigan Press, 2005), here: 262.
- ¹⁵ Mary K. DeShazer, *Mammographies: Cultural Discourses of Breast Cancer Narratives* (Ann Arbor: University of Michigan Press, 2013), here: 9–11.

- 16 See May Friedman, *Mommyblogs and the Changing Face of Motherhood* (Toronto: University of Toronto Press, 2013); Anna Poletti and Julie Rak, eds., *Identity Technologies: Constructing the Self Online* (Wisconsin: University of Wisconsin Publishing, 2014); Sidonie Smith and Julia Watson, “Autobiographical Acts” in *Reading Autobiography: A Guide for Interpreting Life Narratives* eds. Sidonie Smith and Julia Watson (Minneapolis: Minnesota University Press, 2010), 63–102.
- 17 Elaine Scarry, *The Body in Pain: The Making and Unmaking of the World* (New York: Oxford University Press, 1985); Ann Jurecic, *Illness as Narrative* (Pittsburgh: University of Pittsburgh Press, 2012), here: 55.
- 18 DeShazer, *Mammographies*.
- 19 DeShazer, *Mammographies*, here: 175.
- 20 Matti Hyvärinen, “Kertomus ja kertomuksen rajat,” in *Puhe Ja Kieli*, 27.3, (2007), here: 131–132, <<https://www.yumpu.com/fi/document/read/8059566/kertomus-ja-kertomuksen-rajat-hyvarinenin>>.
- 21 See Nielsen, *Disrupting Breast Cancer Narratives*; Hanna Meretoja, “Narrative Agency, Life Writing and the Experience of Illness,” accessed January 7, 2021, <https://www.youtube.com/watch?v=QgCdKgNPcyI&ab_channel=TORCH%7CTheOxfordResearchCentreintheHumanities>.
- 22 Hallstein, O’Reilly, and Giles, eds., *The Routledge Companion to Motherhood*; Sidonie Smith and Julia Watson, *Reading Autobiography*.
- 23 Eve Kosofsky Sedgwick, *Touching Feeling: Affect, Pedagogy, Performativity* (Durham and London: Duke University Press 2003).
- 24 See Klarissa Lueg and Marianne Lundholt Wolff, eds., *The Routledge Handbook of Counter-Narratives*, (London: Routledge, 2020); and Maria Mäkelä, “Lessons from the Dangers of Narrative Project: Toward a Story-Critical Narratology,” *Tekstualia* 4 (2018), 175–86.
- 25 For example, Anne Hunsaker Hawkins has studied illness life writing as pathography or auto-pathography in *Reconstructing Illness. Studies in Pathographies* (Indiana: Purdue University Press, 1999) and more recently Linda Nesby and Anita Salamonsen have researched this in the context of blogging in “Youth Blogging and Serious Illness” in *Medical Humanities* 42.1 (2016), 46–51.
- 26 For example, Martin Evans, “Medical Humanities and the Place of Wonder,” in *The Edinburgh Companion to Critical Medical Humanities*, eds. Anne Whitehead et al. (Edinburgh: Edinburgh University Press, 2016), 339–355.
- 27 This article is part of my PhD research into maternal online life writing. So far, I have published the following articles as part of the research: Astrid Joutseno, “Cyber Labour: Birth Stories on Mommyblogs as Narrative Gateways into Maternal Thinking,” in *Journal of the Motherhood Initiative for Research and Community Involvement* 9.2, 2018, 75–87 and Astrid Joutseno, “Becoming D/other: Life Writing as a Transmuting Device,” in *a/b: Auto/Biography Studies* 35.1, 2020, 81–96.
- 28 I focus on writing authored by Riggs, because of the focus on mothering and illness experience.
- 29 Nina Riggs, “When a Couch Is More Than a Couch,” *The New York Times*, September 25, 2016.
- 30 Both bloggers published posthumous memoirs: Yip-Williams, *The Unwinding of the Miracle*; and Nina Riggs, *The Bright Hour: A Memoir of Living and Dying* (New York: Simon & Shuster 2017) Yip-William’s memoir is largely based on the posts on her blog, while Riggs’ memoir is mostly new writing which she completed before her death and while blogging.

- 31 Both bloggers had insured access to the best cancer care available in the US. They do not address financial issues related to care, such as the discontinuation of treatment for monetary reasons, which is common for patients with MC.
- 32 DeShazer, *Fractured Borders*, here: 227–228.
- 33 Smith and Watson, “Autobiographical Acts.”
- 34 Sidonie Smith and Julia Watson, “Virtually Me: A Toolbox about Online Self-Presentation,” in *Identity Technologies*, eds. Anna Poletti and Julie Rak (Madison: Wisconsin University Press, 2014), here: 70–95; Sarah Brophy, “Studying Visual Autobiographies in the Post-Digital Era,” in *Research Methodologies for Auto/Biography Studies*, eds. Kate Douglas and Ashley Barnwell (New York: Routledge, 2019), 49–60.
- 35 Susanna Paasonen, “Ihmisiä, kuvia, tekstejä ja teknologioita,” in *Otteita verkosta: Verkon ja sosiaalisen median tutkimusmenetelmät*, eds. Salla-Maaria Laaksonen, Janne Matikainen, and Minttu Tikka (Tampere: Vastapaino, 2013), accessed May 15th, 2021, <<https://www.ellibslibrary.com/reader/9789517685115>> (no page numbers provided on the e-reader).
- 36 DeShazer, *Mammographies*, here: 7–8.
- 37 Mommy blogs are a genre of blogs written by mothers about mothering-related issues. They became one of the most popular blogging genres in the early 2000s. See May Friedman, *Mommyblogs and the Changing Face of Motherhood* (Toronto: University of Toronto Press, 2013).
- 38 Joutseno, “Cyber Labour.”
- 39 I recognize a pattern of becoming a published author after blogging and discuss this further in my upcoming book chapter “Making Space and Time: Digital/Material Divisions & Maternal Life Writing,” to be published in eds. *Parenting/Internet/Kids*, Fiona Green and Jaqueline McLeod Rogers (Toronto: Demeter Press, 2022).
- 40 See for example Yip-William’s post “Complete” in which Yip-Williams tells how she met her agent and editor and how her dream of becoming a published author became true, accessed December 18th, 2020, <<https://julieyipwilliams.wordpress.com/2017/10/16/complete/>>.
- 41 Yip-Williams, *The Unwinding*.
- 42 Hillary Kelly, “How It Feels to Publish Your Wife’s Memoir about Dying.” (2019), accessed December 5th, 2020, <<https://www.vulture.com/2019/02/josh-williams-on-his-wifes-posthumous-cancer-memoir.html>>. The older manuscript Williams refers to was written before she was diagnosed with MC. It narrated her experiences as the blind child of asylum seekers from Vietnam to America.
- 43 Riggs, *The Bright Hour*.
- 44 For example, Hallstein, O’Reilly, and Giles, *The Routledge Companion to Motherhood*.
- 45 O’Reilly, *Matricentric Feminism*; Hallstein, O’Reilly, and Giles, *The Routledge Companion to Motherhood*.
- 46 Justine Dymond and Nicole Willey, eds., *Motherhood Memoirs: Mothers Creating/Writing Lives* (Toronto: Demeter Press, 2013); Heather Hewett, “Motherhood Memoirs,” in *The Routledge Companion to Motherhood*, eds. Lynn O’Brien Hallstein, Andrea O’Reilly, and Melinda Vandenberg Giles (New York: Routledge, 2020), 191–201.
- 47 Hewett, “Motherhood Memoirs,” here: 194–195.
- 48 Hanna Meteroja “A Dialogics of Counter-Narratives,” in *The Routledge Handbook of Counter-Narratives*, eds. Klarissa Lueg and Marianne Lundholt Wolff (London: Routledge, 2020), 30–42.

- 49 Marietta Radomska, Tara Mehrabi, and Nina Lykke, “Queer Death Studies: Coming to Terms with Death, Dying and Mourning Differently – An Introduction,” in *Women, Gender and Research* 3–4 (2019), 3–14.
- 50 Radomska, Mehrabi, and Lykke, “Queer Death Studies,” here: 5–6.
- 51 Sedgwick, *Touching Feeling*, here: 123–151.
- 52 Eve Kosofsky Sedgwick, *A Dialogue on Love* (Boston: Beacon Press, 2006).
- 53 Jurecic, *Illness as Narrative*, here: 113.
- 54 Kafer, *Feminist, Queer, Crip*, here: 10–14.
- 55 I am thankful to Eva Korsisaari for responding to reading a draft of this article by formulating that “illness as ability” is what this article proposes.
- 56 Sedgwick, *Touching Feeling*; Rita Charon et al., *The Principles and Practices of Narrative Medicine* (Oxford: Oxford University press, 2017).
- 57 James Brennan, “Transitions in Health and Illness: Realist and Phenomenological Accounts of Adjustment to Cancer,” in *Health, Illness and Disease: Philosophical Essays*, eds. Havi Carel and Rachel Cooper (London: Routledge, 2014), 129–142.
- 58 Aimée Morrison, “Social Media, Life Writing: Online Lives at Scale, Up Close and in Context,” in *Research Methodologies for Auto/biography Studies*, eds. Kate Douglas and Ashley Barnwell (New York: Routledge, 2019); Annette Federico, *Engagements with Close Reading* (New York: Routledge, 2016); Rita Felski, *Uses of Literature* (New Jersey: Wiley, 2008); Anna Ovaska, “Close Reading and Illness Narratives,” (2021), accessed March 30th, 2021, <<https://fb.watch/3ZIRvsdxGY/>>.
- 59 The blogs and memoirs are not explicitly about these themes but include strands of narrative that address for example friendships, relations with relatives, histories of childhood and youth, and in the case of Riggs, material written by her husband, all of which I chose to leave outside of this analysis.
- 60 Amanda Woods, “Beyond the Wounded Storyteller: Rethinking Narrativity, Illness and Embodied Self-Experience,” in *Health, Illness and Disease: Philosophical Essays*, eds. Rachel Cooper and Carel Havi (London: Routledge, 2014), 113–128, here: 113–114.
- 61 Dymond and Willey, *Motherhood Memoirs*, here: 14; Hewett, “Motherhood Memoirs,” here: 195–196.
- 62 My focus in BA and MA are American Literature and Gender Studies. I have also spent extensive periods in the US since 1999.
- 63 ‘Motherless futures’ refers to the normative idea that the death of the mother is the end of maternal influence, but with this article as well as my previous work (Joutseno, “Becoming D/Other: Life as a Transmuting Device,” in *a/b Auto/Biography Studies* 35.1 [2020], 81–96.) I propose that the depicted mothers extend their presence via writing blogs, publishing memoirs, and other preparative ways which become available for the living children after the death of their mothers.
- 64 Yip-Williams, *The Unwinding*, here: 20–23.
- 65 “Seeing Ghosts” Yip-Williams, *The Unwinding*, here: 20–23.
- 66 Nina Riggs, “My Lucky,” (2015), *Suspicious Country*, accessed November 23rd, 2020, <<https://suspiciouscountry.wordpress.com/2015/07/21/my-lucky/>>.
- 67 Juxtaposed to this post, John Duberstein told in a podcast interview that as parents Riggs and Duberstein were not always forthcoming about the illness progression with their children, wanting to shield them from hurt. Duberstein says that there were times when they thought they had been

- sharing more than had been told in words. So they realized that the presence of illness alone is not enough of a ‘communication’ if there is no explicit discussion about the details and phases as they unfold. Death by Design – podcast by Kimberly C. Paul, “John Duberstein, The Bright Hour – Nina Riggs,” Episode 18.1.2018, accessed June 21st, 2021, <<https://shows.acast.com/death-by-design/episodes/john-duberstein-the-bright-hour-nina-riggs>>.
- 68 Suvi Holmberg, *Arki ei pysähdy: tutkimus elämästä rinta- ja eturauhassyövän kanssa* (Tampere: Tampereen yliopisto, 2020). For the everyday and mothering in diary writing see also, Eeva Jokinen, *Väsnynt äiti: äitiyden omaelämäkerrallisia esityksiä* (Helsinki: Gaudeamus, 1996).
- 69 Heather J. Campbell-Enns and Roberta L. Woodgate, “Decision Making for Mothers with Cancer: Maintaining the Mother-Child Bond,” in *European Journal of Oncology Nursing* 17.3 (2013), here: 265–266.
- 70 Riggs, “The Walking Wounded” in *Suspicious Country* accessed November 23, 2020, <<https://suspiciouscountry.wordpress.com/2015/11/22/the-walking-wounded/>>.
- 71 Riggs, “The Walking Wounded.”
- 72 Riggs, *The Bright Hour*, here: 183–188.
- 73 Riggs, *The Bright Hour*, here: 217–218.
- 74 First is from *The Unwinding* by Yip-Williams, the second a blog post version of the text published on the popular blog/site *Cup of Jo* by Joanna Goddard when the memoir was about to be published in 2019. Last accessed June 21st, 2021, <<https://cupofjo.com/2019/02/julie-yip-williams-letter-to-her-daughters/>>.
- 75 This letter can be found on both the blog *Cup of Jo*, where it was published as an excerpt from her memoir *The Unwinding of a Miracle* and in the memoir itself.
- 76 Yip-Williams, *The Unwinding*, here: 6.
- 77 Yip-Williams, *The Unwinding*, here: 9.
- 78 Yip-Williams, *The Unwinding*, here: 10.
- 79 I have presented the possibility of conceptualizing death as a transformation of the “I” in my article “Becoming D/other.”
- 80 Nielsen, *Disrupting Breast Cancer Narratives*.
- 81 Poletti and Rak, *Identity Technologies*.
- 82 Woods, “Beyond the Wounded Storyteller,” here: 121–122.
- 83 Jurecic, *Illness as Narrative*, here: 106.
- 84 Fighting is another metaphor often attached to cancer patients and the ideal of how they should position themselves towards illness. See for example Hanna Meretoja, “Narrative Agency, Life Writing and the Experience of Illness,” The Oxford Research Center in the Humanities, accessed May 16, 2021, <www.youtube.com/watch?v=QgCdKgNPcYI&ab_channel=TORCH%7CTheOxfordResearchCentreintheHumanities>.
- 85 Yip-Williams, *The Unwinding*, here: 176–177.
- 86 Yip-Williams, *The Unwinding*, here: 214.
- 87 Riggs, *The Bright Hour*, here: 73. Also, Duberstein discusses this passage in an interview with Francesca Rheannon “Writer’s Voice – Podcast interview with John Duberstein,” (2017), accessed January 3rd, 2021, <<https://www.writersvoice.net/2017/10/john-duberstein-bright-hour-nina-riggs-joseph-luzzi-dark-wood/>>.

- 88 These examples mark the territory where the priorities of the terminally ill separate from those closest to her. The authors write to assemble perspectives, tracing the fractures that form separating the terminally ill and her kin. The authors allocate their agency in dying, even when it denotes conflict. I have named this preparation “leaving”, underlining the agency of the dying and the need to find acceptance and to control the narrative of life’s transmutation. See Joutseno, “Becoming D/Other,” 2020.
- 89 See Yip-Williams, *The Unwinding*, here: 44–60.
- 90 For example, Riggs references Jorie Graham’s poem in her blog post “The Beastie Cats at the End of the Path,” (2015), accessed November 11th, 2020, <<https://suspiciouscountry.wordpress.com/2015/04/15/the-beastie-cats-at-the-end-of-the-path/>> and a reference of Anne Bradstreet in “Pilgrim-ish,” (2015), accessed November 11th, 2020, <<https://suspiciouscountry.wordpress.com/2015/05/06/pilgrim-ish/>>.
- 91 Paul Kalanithi, *When Breath Becomes Air*, (London: The Bodley Head, 2016). In crisis, literature becomes a structuring method. It touches on the beauty and the absurdity of pain. For these authors literature fosters a sense of belonging by presenting suffering as a necessary part of being human. Writers such as Ralph Waldo Emerson, whom Riggs quotes often, presented both nature and humanity as part of a vulnerable order in which death is part of life.
- 92 Riggs, *The Bright Hour*, here: 232.
- 93 Riggs, “Heads of Kings, Heads of Angels,” in *Suspicious Country* (2016), accessed April 15, 2020, <<https://suspiciouscountry.wordpress.com/2016/02/15/heads-of-kings-heads-of-angels/>>.
- 94 See Poletti and Rak, *Identity Technologies*; Paasonen, “Ihmisiä, kuvia, tekstejä ja teknologioita;” and Marjolein de Boer and Jenny Slatman, “Blogging and Breast Cancer: Narrating One’s Life, Body and Self on the Internet,” in *Women’s Studies International Forum* 44 (2014), here: 23. For the necessity of coherence in narratives: Hyvärinen, “Kertomus ja kertomuksen rajat,” 127–140.
- 95 Douglas and Barnwell, *Research Methodologies*; Poletti and Rak, *Identity Technologies*.
- 96 Riggs, “Heads of Kings, Heads of Angels.”
- 97 Smith and Watson, *Reading Autobiography*, here: 72–76.
- 98 DeShazer, *Mammographies*, here: 177–178.
- 99 Donna J. Haraway, “It Matters What Stories Tell Stories; It Matters Whose Stories Tell Stories,” in *A/b Auto/Biography Studies* 34.3 (2019), 565–575, here: 570.
- 100 Thank you to Eva Korsisaari for pointing out that mattering, materializing and mothering all apply here. I make this connection in Joutseno, “Becoming D/Other” and “Cyber Labour.”