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Life Histories: A Metis Woman and a Breast Cancer Survivor

by

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Dedication

To The Grandmothers
To Mike
To Josie who grew inside me while I wrote

Abstract

Life histories of two women are presented in this thesis. The life histories were collected using oral history methods of individual open-ended interviews. The first was gathered from a Metis woman named Mary L. The second life history was collected from a woman named Mary Holdgrafer. Mary H. is a breast cancer survivor, she used quilting as a means of healing and expression following her diagnosis of breast cancer. Most of the information collected from Mary H. is about her experiences with breast cancer and her healing process. In addition to collecting two life histories I conducted two focus groups with four other women who also used quilting as a way to heal themselves and express their feelings about breast cancer. The focus groups were conducted to investigate the similarities and differences between the experiences of the focus group participants and Mary Holdgrafer. All the stories presented in this thesis are tied together by the fact that the women who were interviewed all had the experience of being marginalized by a western institution.

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Chapter One
Introduction to the Thesis

Until recently the histories that have been written have, in general, been about people who were in the public eye. It is only lately that attention has turned to the everyday lives of ordinary people. My goal for this thesis was to record and write about the lives of ordinary women. To meet this goal I interviewed two women. The first woman is Mary L., a Metis woman from northern Alberta. I chose to interview Mary L. because I wanted to record the life history of a Metis woman from Alberta. I felt that her story had intrinsic value because not many life stories of Metis women have been recorded and written and because I hoped that this woman's story would tell me something about what it is like to be a Metis woman in Alberta. The second woman I interviewed was Mary H., a woman who is a breast cancer survivor. I think her life history has intrinsic value because her stories are about one woman's experiences with a disease that is primarily a woman's disease and because her stories are also about her experiences in western medical institutions.

I was intrigued not only by Mary H.'s stories about her experiences as a breast cancer patient but also by the unique way which Mary H. has chosen to heal herself from the breast cancer diagnosis and treatment. Mary made a series

of quilts which depict what she calls her "Healing Journey". The making of the quilts is a component of and a depiction of the healing process. A large portion of the time I spent interviewing Mary was spent talking about the breast cancer and quilting parts of her life story. My work with Mary H. prompted some further work for this thesis. My interviews with Mary H. were followed by two focus groups with four other women who have made breast cancer quilts. I found that other women also found quilting to be a means of healing and expression following a diagnosis of breast cancer.

My interviews with Mary L. and Mary H. are connected by the fact that both women had experiences of being marginalized by Canadian institutions. In Mary L.'s stories she spoke about being marginalized by the child welfare system, the justice system and the educational system. Mary H. spoke about being marginalized by the systems of western medicine.

The work presented in this thesis fits into the discipline of anthropology as both a reflexive ethnography and as a collaborative oral history. The text is intended to be reflexive as I expect that the reader will interpret the stories according to her or his own life experience and personal context. As an oral history this work is anthropological in it's focus as the stories told by individuals tell us something about their community and

their society. The stories presented here make a contribution to the field of anthropology because they can serve as examples of alternative individual perspectives on Canadian history, those of women, which although not representative or generalizable, has often been overlooked. This is a contribution to anthropology because the individual accounts contain implied information about the social and historic context surrounding the individual.

I believe that this research makes a further contribution to anthropology as, like the work of Sarris (1994) and Cruikshank (1990), it provides a model for research that has been conducted with respect and with an awareness that the stories presented here are not simply data. Rather, they are someone's personal history and as such are highly valued by that person and by their family and friends. In the case of Mary H. her stories are valued also by members of the quilting community and by other breast cancer survivors.

Chapter Two
Theory & Method

In 1992 I was hired to design and carry out a Three-Generation Life History study of Metis women in Alberta. Upon completion of this research project I found myself wanting to do more. One reason for my urge to gather another life history was that I felt that I had learned so much the first time around and that I could significantly improve my work. I wanted to learn more about life history theory and method and I wanted to learn more about women's everyday lives and how and why women tell their stories. My research goals were, first, to answer the questions: what do women say about their own lives? Second, to gather life histories using oral history methods, third, to gather the stories of women and fourth, to gather the stories of Metis women. These goals have been met but not exactly to the extent that I envisioned. I had planned for my research to be entirely about Metis women. I had planned to record an in-depth life history of one Metis woman, maybe two, at the most.

What has instead transpired is something different: I worked with one Metis woman named Mary L. This work was very productive and promising but it has stayed in the preliminary stage. I did gather an in-depth life history

from another woman named Mary Holdgrafer who is not Metis. In addition to and in connection with my work with Mary H. I have also gathered stories from four other women using a focus group data collection technique.

The information that follows in this thesis includes the stories that I gathered from Mary L., Mary H. and the four other women. The research question that structured my work for this thesis was: What do women say when they tell their own stories? In this document I have endeavored to explain the research choices I made. For example, why I chose to include Mary L.'s story despite the fact that I did not do a lot of interviews with her or why, after interviewing Mary H. several times, I decided to interview four other women. Mary L.' story is presented first. Mary H.'s story follows in two chapters, one of which includes the experiences of the four other women. I have provided some conclusions in a final chapter that includes some thematic analysis of Mary H.'s stories and those of the four other women. The discussion of Mary L.'s story appears in the chapter (Four) on Mary L.'s life.

In this research I have been gathering stories for their intrinsic value. I worked intensively with Mary Holdgrafer and, less intensively, with Mary L. collecting and recording their life histories for their intrinsic value as life stories. I collected segments of life stories from four

other women to answer specific questions that arose during interviews with Mary H.

I first tried to contact Mary L. at the start of November 1995. It was not until early in December of that year that we were able to arrange a time to get together. I spent several hours with Mary L. one Friday. I tape recorded Mary while she spoke to me about her life. Mary L. talked about a lot of things. She began with her early childhood memories and continued to speak for a couple of hours about highlights from her whole life. It was a tremendous beginning for my work with Mary L. I came away from our encounter feeling elated and full of ideas. I could hardly wait to meet with her again. Unfortunately, circumstances did not favor another meeting with Mary soon after our first. Events transpired in Mary's life which consumed her attention for the next few months.

It was shortly before my first meeting with Mary L. that I was approached by Mary H. about recording some of her life history and writing a paper that could be presented to the Canadian Quilt Study Group Seminar. At the time I thought that working with Mary H. would be something I would do "on the side" in addition to my thesis. As it turned out I began to work with Mary H. while I was continuing to try to connect with Mary L. By the end of January 1996 I realized that I had enough data from Mary H. to write a thesis and

that time had run out for working with Mary L., for the purposes of my thesis. I do intend to continue my work with Mary L. on a future project, as we had such a productive beginning to our work and she will be available to work with me again.

I have chosen to include a chapter in this thesis in which Mary L.'s life is the subject. When my thesis supervisor and I were reviewing the first draft of my thesis she asked me how the Mary L. chapter fit in with the rest of my thesis. She also told me that she thought my thesis would be fine with or without Mary L.'s story and that it may be something I could leave out and work on as a separate publication. I have thought about whether or not to include Mary L.'s story here and I came to the conclusion that it was important for me to include for three reasons. First, Mary L. took the time to share what she did for the purpose of inclusion in my thesis. Second, Mary L is a First Nations woman and it was my goal originally to gather the life histories of Metis women. It is important for me to include Mary L.'s story as a partial fulfillment of this goal. A third reason for including Mary L.'s story has to do with a desire to learn something about myself. Other anthropologists including Shostak (1983) and Sheridan and Salaff (1984) have given self-inquiry as a reason for collecting life histories. Sheridan and Salaff write that "Like women everywhere, we experience the difficulties of

juggling work and family roles, so we explore the topic of role conflict in our studies" (Sheridan & Salaff 1984:3). Since Mary L. is a First Nations woman I hoped to learn, from her story, something about myself as a Metis woman. Finally, as I will discuss in the final chapter, my work with Mary L. informed my work with Mary H. in that I noticed differences and similarities in my interactions with each woman.

In the process of working with Mary H. I found that most of our conversations focused on the most recent five years of Mary's life. That portion of Mary's life is a time when she was diagnosed with breast cancer and it is the time during which Mary made what she calls her 'healing journey'. Mary attributes part of the healing she experienced to quilting. After working with Mary H. I also found that questions arose about whether other women had similar or different experiences with regard to quilting as a means of healing after a diagnosis of breast cancer. It became clear that I needed to expand the scope of this work to include the lives of other women, and that I could use a life history method in a more focused capacity to address specific questions including "how has quilting contributed to your healing process?" and "how did you decide to make a quilt dealing with breast cancer?" Linde (1993) discusses the life history method as a useful tool to gather information about certain portions of a life. According to Linde,

A cross section of a life story, taken at a single moment in time, contains a large enough number of narratives and their relations to permit us to study the creation of coherence. Because this method of sampling a cross section of a speaker's life story generates a manageable amount of data, it also permits us to consider a number of speakers and to compare the ways in which they handle equivalent problems in constructing similar types of narratives and in creating coherence for similarly problematic chains of events (Linde 1993:52).

The decision to expand the life history research to include the experiences of other women with an interest in breast cancer and quilting grew out of my work with Mary H. This research has continued on, both as a part and apart from this thesis. For this thesis I gathered narratives of the life experiences of four more women who all had some interest in breast cancer and quilting. Tape-recorded focus group interviews were the method used to gather information from these women. It should be mentioned that it is the work that has continued apart from this thesis that was the impetus for Mary H. and I to work together on her life history. Mary H. approached me with a request that I record parts of her life story and write them down. This is an important point to mention because much of the life history literature assumes that life histories are sought out by researchers. This assumption is present in Watson & Watson's definition of life history which is "...the "life history" is any retrospective account by the individual of his life in whole or in part, in written or oral form, that has been elicited or prompted by another person" (1985:21).

While life histories recorded in the social science literature most often are probably sought out (e.g. Nisa (1983), Yaqui Women (1978), Tuhami (1980)) Mary H.'s was not.

Mary H. and I have a relationship. We had a relationship prior to beginning this research and we still have that relationship now although it has been strengthened and deepened through the research process. It is because of this relationship that I feel our work is oral tradition as defined by Julie Cruikshank, a well-known life historian and anthropologist,

Sometimes the term oral tradition identifies a body of material retained from the past. Other times we use it to talk about a process by which information is transmitted from one generation to the next (1994:404).

Cruikshank identifies oral history as something different from oral tradition because "oral history is a more specialized term usually referring to a research method ...[used to gather] first hand experiences occurring during the lifetime of an eyewitness" (1994:404). My work for this thesis is both oral tradition and oral history. I describe my work as oral history because I have tape recorded, in some detail, the lives of two women. As a researcher I am facilitating the hearing of these voices by bringing them together in a written record. In the past women's lives and stories were accessible through the networks in which women lived. Stories could be transmitted orally to friends and

family. Today, however, that audience is not accessible to all of us. This is due to what Przybysz calls "the psychosocial "death" experienced by many women whose marriages separated them from mothers and female support networks" (Przybysz 1993:176).

Mary H. is related to me through marriage. Recording the life histories of mothers, sisters, and grandmothers is well documented in the literature. Christine Welsh (1991) takes a small piece of her own great great great grandmother's life and ties it together with her own experience of gathering history, finding voice, and discovering identity. Elena Georgiou (1993) wrote a paper called "Spoken and Unspoken Words in the Life of a Cypriot Woman: A Life Story by her Granddaughter." Much of Georgiou's article deals with the context of her research. She writes about the process of gathering her grandmother's stories and about her own feelings and those of her grandmother during the process. For example, her grandmother was reticent, she did not want to be recorded and she was pressured by other family members who wanted her history. The reticence and pressure influenced the research, the researcher and the consultant. Because of the relationship between Mary and me, it has been important for both of us to have Mary pass on her experiences and stories from her generation and from the generations of her mother and grandmother to me, her daughter-in-law. Mary L. and I also have begun developing a

relationship. We did not know each other prior to the beginning of this research.

I consider the research I have undertaken to be feminist in that, following Cole (1992), it is an exploration of "the subjective experience of women within...the ideological constructions of dominance and oppression. This exploration is achieved through democratic research and the creation of texts that give women a voice..." (Cole 1992:123) Cole lists two ways that feminist life history has been done. First, researchers have integrated "text and context by presenting narratives within a larger analysis of the social and historical constraints and conditions under which individuals define themselves, their agendas, and their strategies (1992:123). The second way that feminists have approached life history has been to elaborate the nature of the relationship between the anthropologist and the subject of the life story, to incorporate the anthropologist's experiences in the telling of the story, and to make the stories central to the text (1992:123-24).

In the recording of life histories, information such as the time and place of the interview and the nature of the relationship between researcher and participant contribute to the readers' understanding of texts because time, place, and relationship convey something about the material that was shared. Sarris (1993:39) writes that

The transcriptions of American Indian oral literatures, for example, sometimes provide nothing about the context in which the literatures were told and recorded or the manner in which they were translated. In the end we have a story devoid of context that might suggest something about the story beyond our interaction with it as an independent text."

Sheridan and Salaff discuss the importance of including the researcher in the presented material. They

...believe in the importance of the self-discovery that occurs as the researcher is transformed by her work and in turn transforms her subject matter into meaningful communication. We thus encourage our contributors to keep themselves in each account (Sheridan & Salaff 1984:15)

The words of Cole, Sarris, Sheridan and Salaff lead me to believe that data collection context and the nature of the relationship between researcher and consultant are necessary for readers to gain a fuller understanding of the presented material. I have endeavored to provide this kind of information in this thesis.

Cruikshank, a gatherer of life histories, writes that "Storytelling is a universal activity and may well be the oldest of the arts" (1990:ix). Since I was gathering life history experiences I chose to ask questions that would encourage the participant to tell a story. Encouraging the participants to tell stories was particularly appropriate in this study because storytelling is the medium for expressing values, beliefs, and philosophies especially in communities which rely on oral tradition (Cruikshank 1990).

At times in the interviews the participants digressed to telling stories which they were reminded of through the telling of one story. This was encouraged because it revealed information to me about how one story was linked to another in the mind of the consultant. Digressions allowed me to gain some understanding of how the consultant organized narratives of events, people, and places for telling to a listener. Langness and Frank write about this style of open-ended interviewing noting that

...it is wise to encourage spontaneity. This enables you to learn what the subjects themselves regard as important - or at least what they think it is important to tell the interviewer (1981:48).

I was seeking factual information including events, places and dates, but I was also seeking to record the feelings, perceptions and personal definitions of the participants' experiences. I tried not to be overly concerned with dates because although this was my way of organizing the material; it was not the way that Mary L. organized her memories and sometimes it was not the way Mary H. did either. While reviewing the oral history transcripts I hear myself saying "So that would have taken place in..." or "...and that was about a decade..." even though I was trying not to be so concerned with chronology. At times I distracted Mary L. from her reminiscences with my questions about when events occurred.

Mary L.'s stories were recorded at her home, in her kitchen. Mary L.'s husband and small daughter were at home but they were not present in the kitchen during our interview. I tape-recorded the interview with Mary L. and she was receptive to being tape-recorded. Similarly, my interviews with Mary H. were conducted in Mary H.'s home, at her dining room table. Mary H. and I were usually alone in the house for the interviews, at one interview her husband was present in the house and he was in the kitchen making supper for part of one interview which was a little distracting to both of us. The focus groups were conducted in my home at my dining room table. At both focus groups pictures of quilts and actual quilts were brought by focus group participants and these were shown, usually toward the end of the focus group. The pictures of quilts and the quilts both seemed to elicit further discussion. Although I had not planned to use quilts to elicit discussion it worked well to have these objects at the focus group and to have to have them brought out at a point at which discussion was waning.

The immediate audience for the stories of these women was me. I may be the only audience for the stories of Mary L. because I do not know what she intends to do with a written copy of her stories. The stories of Mary H. were told with the intention that they would be shared with several audiences. First, they were intended for her family, second they were told to be shared with quilters, breast cancer

survivors, women and members of the medical community. Finally, the stories of Mary H. were shared with me so that they could be a part of my written Master's thesis.

All of the individual interviews were transcribed by me as were the interviews conducted with the first focus group. The second focus group interview was transcribed by someone else. I reviewed the typed transcript myself while listening to the tape and made changes and corrections when necessary.

The transcripts that are presented in the following chapters of this thesis have not been substantially edited. I have taken out repetitions and I have added commas, periods and quotation marks for ease of readability. Mary H. reviewed her own transcripts and made her own changes, mostly for succinctness and style. Mary H. clearly stated at the beginning of our interviews that she wanted to see her transcripts and make any changes that she thought were necessary. It was important to Mary H. that her transcripts convey that she is well-spoken and articulate. Mary L. has not reviewed her own transcripts. Circumstances did not provide us with an opportunity to meet again after our interview was transcribed.

Chapter Three

History of Life History in Anthropology

The definition of life history that I have chosen to guide this research is that life history is "...a mode of investigation that blends history and biography in order to explore the effects of social structures on people and to portray the ways in which people themselves create culture." (Sheridan & Salaff 1984: 1)

Langness and Frank point out that the gathering of life history is not solely an anthropological pursuit, it is a form that crosses various disciplines. Written life histories in anthropology date as early as the 1920s (1981:18). The beginning is marked by the publication of Paul Radin's Crashing Thunder in 1926. There are works before this by Sapir (1921) and Radin (1913) but Crashing Thunder is referred to by Langness & Frank (1981:18) as the "first serious full length" life study. Two trends in the early 1900s were towards getting at the "underlying philosophical and emotional tones of the culture" as seen through the words of the informant and humanizing the materials to present them to a wider audience (Langness & Frank 1981:19).

Life history methods are used to explore aspects of the individual in anthropology, psychology (Senn 1968),

sociology (Harrison & Lyon 1993), and literature (Campbell 1973, M. Scott Momaday 1966, 1989, Vale Allen 1984). The method is used by some researchers to gather life stories because the stories themselves have intrinsic value (e.g. Shostak 1983, Sarris 1994, Myerhoff 1978, Pruitt 1979). Further to life histories having intrinsic value, the stories of women are important and need to be heard. Christine Welsh writes that she had to re-examine her "...conventional notions of what was historically important and to recognize that the everyday lives of women- the unique patterns and rhythms of female experience- are history too" (Welsh 1991:19).

Authors like Welsh (e.g. Ahenakew & Wolfart 1992, Sarris 1994 and Shorten 1991) believe that life histories can stand alone without validation from other sources. According to Welsh

...the fact that much Native oral history cannot be substantiated by documentary evidence is not the most important consideration here: what is essential is the extent to which it is believed by the people themselves (1991:18).

Other researchers use a form of the life history method to supplement other data collection methods like questionnaires, group interviews or participant observations. For example, the anthropologist Faye Ginsburg supplemented her research by using life history methods to "...see how abortion is used as a symbol in the ways that committed activists interpret their behavior and beliefs to

themselves and others as part of an ongoing narrative of their lives" (Ginsburg 1989:59). Other examples of researchers who have used the life history method as supplementary or elicitive are Strobel (1983) and Robertson (1983) who both "[reconceptualize] life history as a method both to shed new light on the lives of slave women and to inform and correct an androcentric historical record of African slavery" (Geiger 1986:340).

Up to the 1930s the anthropologists who had been trained by Boas were concerned more with the recording of ethnography than they were with analysis (Langness & Frank 1981:20). The reason for the emphasis on collection over analysis that prevailed in the early 1900s was the belief that Native American cultures were disappearing, the intention was to gather immediately and analyze later. Krupat (1994:14), like others before him, refers to this practice as 'salvage anthropology.' Rayna Green (1980:249) writes about this trend of the nineteenth century,

Memorialized on stamps and coins like those other threatened creatures, the buffalo, Native American men and women came to be the property (and the reservation, the laboratory) of scholars who measured, tested and speculated on them. And scholar's passions were reserved for the old and dying parts of Native American cultures, just as land-hungry settler's passions were for dead and dying Indians.

The belief that Native American cultures were endangered was not unfounded. The latter part of the 1800s and the early 1900s was a time in which American government policies were

designed to eradicate culture. For example, forced relocation's and legislation such as the Dawes Act, which is mentioned by Krupat (1994), were instruments of cultural disruption. According to Satz (1991:78) the Dawes Act, also known as the General Allotment Act of 1887, "parcelled out reservation lands to individual people" and resulted in a large reduction of Indian held land throughout the United states. The act was "Designed to convert communal tribal property into individually owned lands , [it] was intended to isolate individuals from the tribal community so that they could eventually be absorbed into the larger white society" (Satz 1991:78). However,

live and grow in number Native Americans did, and urban, nonreservation, culturally changed Indians kept later generations of social workers, educators, and psychologists well employed in the twentieth century. For years, studies of cultural dissolution (called change and acculturation studies) predicted Indian demise, though now and again some fleeting positive portrait of living traditions and healthy people was produced (Green 1980:249).

There were some authors and anthropologists who recognized that "salvage anthropology" was not necessary and so produced "positive portrait" (Green 1980:249) life histories and ethnographies. Older life histories that have respect as part of their process of collection and compilation were produced by Black Elk (1932), Walter Dyk (1938), and Ruth Underhill (1979). Some of the more recent life histories and ethnographies that are more symbolic and positive portrayals characterized have been written by Julie

Cruikshank (1990), Greg Sarris (1994), Campbell (1973), and Ahenakew & Wolfart (1992).

In 1935 John Dollard published *Criteria for the Life History*. This was the first work to focus directly on issues of method in life history studies (Langness & Frank 1981:21). Dollard's interest was in life history as a method to discover and record cultural and social facts more so than aspects of the individual. There was in the 1930s and 1940s a general increase in social scientists' self consciousness about use of method, as evidenced by Clyde Kluckhohn's 1947 work entitled *The Personal Document in Anthropological Science*, published by the Social Science Research Council. In this work Kluckhohn reviews the non-professional biographical and autobiographical works from the early 1800s and the professional works from 1908. All the materials he reviews are about Aboriginal people. He provides a list of the limitations he sees with the life history that had been done to 1945. His criticisms of the genre address the sketchiness, uneven representation of age and gender, the lack of basis for comparison within groups, lack of interpretation and analysis and vague data collection techniques. The availability of works concerned with methodological issues in life history has increased with the publication of works from Linde (1993), Geiger (1986), Cole (1992), Cruikshank (1994), Sheridan & Salaff

(1984), Watson & Watson-Franke (1985), Langness & Frank (1981), and The Personal Narratives Group (1989).

Audio and videotaped memoirs were used as early as the 1950s (Langness & Frank 1981:10). In the 1960s there was interest in life histories related to civil rights and liberation movements, for example, *The Autobiography of Malcolm X* (1966). Works like Malcolm X's and Lewis' *Children of Sanchez* (1961) were read by a great many non-anthropologists. The works from Malcolm X and Lewis were, in part, responsible for the popularization of anthropological life histories. Lewis is credited by Langness and Frank (1981:24) with bringing the life history to recognition as a distinctive literary genre. In the Introduction to this study Lewis describes what was then the new technique of interviewing each family member, having them tell their own life story and compiling them in a single document. He lists a few advantages of the method such as the fact that independent versions of the same event provide a built in check for reliability and validity. In previous life history work that I have done I have not used independent versions of the same event told by individual family members as a way to check for validity and reliability. My reasoning for this was that each individual's version is real and correct to that person, that is the way the event occurred for them, despite the

fact that each family member's version of the same event may differ.

During the 1960s and 70s drawing on the medical use of life histories to understand something of a patient's history of illness and health, psychological anthropologists produced such works as *Hysterical Psychosis in the New Guinea Highlands: A Bena Bena Example* (Langness 1965). Langness and Frank (1981:24) list some other applications of the Life History in anthropology, including the illustration of some aspect of culture not usually portrayed by other means: women's views, (Shostak 1981, Atiya 1982, Cruikshank 1990), to communicate something not otherwise communicated (e.g., the humanistic side of anthropology), for literary purposes, and finally, to look at deviants or unusual cases. For example, in Tuhami (1980), Crapanzano writes that his collection of Tuhami's life history and the presentation of it is "an experiment" (Crapanzano 1980:ix).

Recently, feminist authors have found ways to bring together ethnography and the analysis of life history materials. Cole writes about the integration of life history within ethnography,

Feminists, however, early recognized the life history to be central to the conduct of their research and have employed two approaches to integrating life writing in their ethnography. The first and most common approach has been to integrate text and context by presenting narratives within a larger analysis of the social and historical constraints and conditions...The second approach has been, like Shostak and Myerhoff, to elaborate the nature of the relationship between the anthropologist and the subject of the life story...(Cole 1992:123-124).

Sarris' work with Mabel Mackay (1994) is a recent example of life writing as described by Cole. Sarris has included his relationship with Mabel Mackay as part of the narrative and he has explored his own cultural background, and the social context of their relationship as these relate to Mabel's narrative.

Chapter Four

Mary L.

In this chapter I will introduce some issues related to the collection and presentation of Aboriginal women's history and biography. This is followed by pieces of a life history from Mary L., a Cree Metis from far northern Alberta. In a summary at the end of the chapter I discuss how Mary's story illuminates these broad issues.

I will consider several issues which relate to Aboriginal women's history and Aboriginal women's biography. These are pointed out here and discussed at the end of the chapter in light of Mary L.'s life story:

1. Everyday life is important.
2. Not enough information is written from female sources.
3. The life stories of Aboriginal women have much to say about Canadian history.
4. The life histories that are done with Aboriginal women, are, at times lacking in details about the context in which the information was gathered.
5. Many works on Aboriginal women are dated; the women are made to fit a stereotype.
6. Aboriginal women tell sacred stories.
7. Historic and social context are intrinsic.
8. Aboriginal narrators voices are often lost in biographical accounts.

There are three reasons for choosing Mary L. as someone to work with for my thesis. The first comes from Jennifer Brown:

...it is all too easy to learn more about the men than the women; but new kinds of systematic study can redress the balance contributing richer perspectives not only on individuals and families but on Metis social history in its broadest sense (1983:45).

Brown's statement provides one general reason for gathering the life stories of a Metis woman rather than a Metis man. The reason I chose to work specifically with Mary L. was that she came highly recommended to me as a woman "who knows things" and who "knows how to live in the bush." The third reason that I had for gathering Mary's life experiences was that she chose to share them with me.

My work with Mary stayed in the preliminary stages as we did not have a lot of time together before circumstances postponed our work to a future date. According to Linde "A life story is also a discontinuous unit, told in separate pieces over a long period of time" (1993:4). Although I have only worked with Mary for a short time I expect that I will continue to gather her stories over time. This chapter will serve as an examination of a few of these "separate pieces," and as with life, the life history we intend to work on together will extend beyond this written document.

I have chosen to present Mary's stories in the order that they were told to me. I do this because when I met with Mary to talk to her, all I did was give her an initial starting point. Specifically, I said,

C - O.K. I don't know anything about you [M - You don't know anything about me] not really, like where you were born, so you could start there.

After that initial prompting, I did not refer to my question list again until towards the end of the interview. Mary spoke spontaneously about the topics that were of importance to her and she organized the discussion. That is, all of her stories seemed to lead from one to another unprompted by my questions and instead led by connections which I have tried to point out in the text. It is for these reasons that I have chosen to write her stories in the order they were told. Mary may have thought ahead of time about some of the things she wanted to talk about, and if she did, her choices may have been influenced by what she knew about me. As far as I know, Mary knew only that I was her cousin's wife's daughter who was a university student writing a paper about Metis women.

According to Christine Welsh (1991:18) when one looks at Metis history we must be prepared to give up "...our pre-conceived notions of the very nature of history - that it is linear, progressive, date and event oriented" and further, we must adapt "...our thinking to a fundamentally different aboriginal world view which is cyclical and ultimately

timeless." In my work with Mary I found this to be true. Mary sorted her own topics for discussion. One story led into another without my seeking out the next topic. That is not to say that Mary's life experiences were never presented in chronological order, but rather that they were tied together principally by topic rather than time. One caveat to this is that I am not including here everything she said or every topic we discussed. The stories that do appear here are presented in the order that she told them.

Mary talked to me about where she was born and where she grew up as well as her memories of learning to trap and tan hides as a little girl. Her stories of growing up are characterized by a lot of movement. Although in her stories she moves from place to place, the theme of family holds constant. Except for the one year Mary spent in a convent, in her stories there is always a family member to look after Mary and to teach her things; most often it is her parents, but when it cannot be her mother or father there is always some other family member available.

M - I wasn't really born in Fort Chip. There is an island there called Ghost Island. That's where my parents, they used to have a place. That's where they used to live at first when we moved from Fort chip and that's where we were raised, up in Ghost Island. [C - Oh OK] But like I said, my parents, they move around and we had another trap line by Big Point. I guess you heard about Big Point. [C - no] Then we had a trapline there called Old Fort. [C -oh] About ten of us, like we had my sister M, she's the baby, and I'm the next, then my brother W, and E, H, and my mom and dad and we didn't have a place to live. Like a home, a proper home, but my dad built a teepee. [C- oh yeah] That's where we lived for a year till we have a proper home, like log house. [C - oh OK] That's where my dad used to trap all the time. We used help him go trapping when we

were kids. I was about, I'll say I was about seven years old and I used to go with my dad with the dog sled and he taught me how to set rabbit snares and how to shoot chickens. That's where I learn all these things. Like all the family when we come home then we help my dad to stretch beavers and rats. We do all these things with our parents.

C- Stretch them?

M- Yeah you know, we stretch them.

C- Oh the, the hides

M-The hides

C- Mmm

M- We make stretchers for muskrats, and we had to stretch muskrats for my dad, like weasels and all these animals they catch. [C - hmm] It was pretty hard, like our family it was really poor we didn't have enough money and things like that. But that's how my dad make our living, with trapping. In summer time they go fishing, that's how they make money too. My mom used to do a lot of sewing and that's how she earned her money for our schooling, clothing, things like that. We don't hardly have any food at the house but we used to be happy. Like what we had in there at home, we eat fish, we eat moosemeat and things like that, wild meat. And we don't hardly have anything but we were still happy the way we were brought up, you know, because we have a home. [C- mm hmm] Then we moved to Fort Chip and we go to school. I was in convent with the nuns. I was there for about a year with the nuns to go to school. My sister, and me and my brother went. Three of us were in the convent because my dad couldn't support us all.

C- Oh, like you actually lived there

M - Yeah we stayed there. [C - oh OK] The nuns looked after us and a year after I came, my mom got me out, got me out of the convent. Then I went and stay with my Granny, my mom's mom. She had raised me too. [C - Oh that's nice] Yeah and then after that I came back to Fort Chip then I moved to, I used to live with Castors. Then I moved from there. Then I lived with *Kawi*, they call him *Kawi*. I don't know his real name, he was a chief. With M and *Kawi*, I used to live with them. I lived there for awhile. Then I moved to my auntie, Mrs. L. [C - oh] Frank L.'s mom [C - oh OK] in Jackfish Lake. That's where I used to live with my auntie and she raised me half the time. Her too, she looked after me. And when I came back to Fort chip I used to go and live with L and them, F.L. and them [C - oh OK] So I've been moving a lot.

C- It sounds like it

M- Yeah yeah. I Stay with them for {2 words}.¹ Lena and I when we were young girls we get along so good. Her mom taught us how to work, do washing, haul water, iron clothes, go to school. It was a good home where I was. That's the last time I was there when I was young. Then I moved, when I was about twelve years old, I moved to Fort Smith and put myself in a home. [C - oh] I was in ah teenagers, what you call that now? Well, they look after teenagers there anyways [C - like a group home?] Yeah, group home, that's where I put myself.

Mary's telling of "the learning to trap and tan as a young girl stories"² led Mary to talking about herself as a young woman with small children and a baby and having to trap food to feed her children. I think the stories are tied together by the fact that trapping is central to both narratives.

M - I traveled to Fort McMurray. Then, when I was eighteen years old I met this guy. His name was E.C. Then I live with him and we had five kids. [C- oh wow] We were always in the trapline when I was eighteen and I trapped till I was about, I'll say I was twenty years old. I'm on the trapline all the time. But he was a drunkard and we never had nothing to eat. [C- oh] I earn money for trapping. I used to walk so far, maybe sometimes I walk fifty miles like that in the cold weather. And no dogs I used to walk and carry the pack sack, try to make money for myself. You put traps for beavers, squirrels and things like that. It was really rough life I had when I was young. I thought I had a husband but I didn't have a good husband because he was an alcoholic.

Another theme that comes up over and over in Mary's stories is dogs, or the absence of dogs. Mary was always around dogs. Today she has two dogs that are companions but when she was a little girl and a young woman the dogs were both companions and workers.

C- Where were the kids?

M- The kids

C- When you would do the trapping?

¹ These brackets indicate that two words were spoken by Mary that I was unable to transcribe.

² This is a title that I have applied to the stories.

M- I lost two oldest ones. [C - ohh] And I had R and I had a husky dog. The husky dog used to look after my girl while I was going and visiting the traps. [C- yeah] The dog was there and R was in a swing and I taught the dog to pull the string so when the baby cries he could pull the string. [C - you're kidding] So the dog used to do that for me. And I make a fire and I used to put a chicken wire in case the baby goes down so she won't burn. So I put the chicken wire around the heater and cut wood and make big fire so the fire stays on. I put green wood so the baby will get warm.

Mary's story about the husky dog that looked after the baby led Mary to speak about losing her children.

M - ...after that I moved to Lac La Biche with my kid, with R. Then I stayed with my dad's brother, his name is S.C. I live with them there for awhile. When R was about a year old I moved back to Fort McMurray. Then I was back with him again, then I had J. I had two boys for him but I didn't live with him. I lived by myself, and I was working. I used to work with V.H. in Fort McMurray cleaning up the new homes when they were building the new homes. [C - oh yeah] Townhouses they call them. That's where I was working, cleaning up and I supported my kids. I had a nice home and my kids never used to starve because I buy groceries all the time. I was on the welfare same time and I always had food for the kids. The only thing that I don't really have are clothing for them, but I used to do a lot of sewing. [C- oh yeah] I make overalls for them and things like that, you know, I sew so they have clothes. [C- yeah] One day my sister came in from Fort Chip and I had a room, enough room for my children to live in. She brought her two kids and her boyfriend. So they asked me if they could live at my place, stay at my place till they find a place. I never used to drink. Never, I never had booze in my mouth that time when I had my kids. [C - yeah] So I let them stay there and then she said "Would you baby-sit for me?" and I said "Sure I'll baby-sit the two girls." So I give the kids a bath, that's by the washtub, I didn't have a bathroom or anything. Then feed them and put them to bed. Then about midnight they were at the house fighting outside. [C- yeah] So I tried to stop them but I was the one, I got hurt, they break my ribs. [C - oh no] Yeah, this guy shut the door by the truck, and slam the door on ribs so they break my three ribs and I land up in the hospital. The old hospital in Fort McMurray. So, my kids are there, my three kids and I don't know what to do. I don't really know how to talk English that time, I only talk my language that time. [C - That's Cree?] In Cree, yeah. So anyways, when I was in the hospital they brought all the kids in the hospital, like my kids and my sister's two kids, but on the way it turns the other way. I got my kids taken away instead of her. An the welfare came she said "Well, we come and get your kids." I said "What for?" She said "We have to take them" and this social worker

was really terrible that long time ago. She told me there was a party for the kids and they were going to take my kids there. And I believed them. I let my kids go and since then I never seen them. They drop my kids all over the place. I went to the court but I couldn't find anybody to help me. To, I could say it in Cree what happened, to explain everything what happened but nobody helps me. It was really hard for me and I couldn't talk English, I don't understand what they're talking about. [C -yeah] So anyways, my kids were taken away.

After this story about losing her kids, Mary turned back to dog stories. Before the next dog story Mary talked a little bit about how her life changed once she lost her children. She left Fort McMurray, met her second husband, the man she is still married to today and she had three more children. She speaks with obvious pleasure about memories of teaching her second husband, a non-Native, to trap and set snares for rabbits. Mary talked about how her second husband was away a lot because his job required him to travel. While he was away Mary sewed to make her own spending money. She spoke of making moccasins, hide jackets and doing beadwork. While telling me about her mother teaching her to do the beadwork and the hidework she was reminded of a dog story. This time, her story was not about a helpful dog. Mary still carries the scar that reminds her of the story.

M - ...I used to use a dog team to go and cut wood. That's how we sell our wood, me and my mom too. [C- oh] Yeah, but after the dogs bit me I never do that anymore because the dogs bit me. Mary shows me the scar³ [C - ohh] There were four dogs there. The leader jump on my face and bit my face, my mouth, my lips off. [C - oh gosh] They were jumping all over me when I move and my mom wasn't there because she was taking a different trail and I take the dogs back trail. [C - oh] I tried to get the leader to go to the trail I want but he just turned around and jump on my face and the whole dogs jump on me.

³ The use of an underline in the transcript is to indicate that a specific body movement or gesture accompanied the words.

C - How old were you?

M - I was about, let's see, I'll say I was about ten years old.

C - You were just a little kid

M - Yeah

C - All by yourself?

M - With my mom [C - oh yeah] but my mom took a different trail. My mom always liked saying her rosaries and she said she'll take the small trail. And I went to the dog team trail coming home. And I want them to turn left towards my mom but the dog didn't listen to me. He just jumped, turned around and just bit me, the whole works, dogs, jump on me, except the back dog couldn't do anything. It was just those three was jumping all over me. Then my mom figure out those dogs killed me and then she come running. I could hear my mom, she said, "Oh the dogs are killing my girl, they killed my girl." I could hear mom. She had an ax with her and then she chopped those three dogs heads off.

After hearing this story I wondered how Mary was healed, did she get stitches? My asking about this led Mary to talk about being healed with roots and about how Mary herself learned to heal others using roots and plants.

M - ...Then they took me to the convent. The nuns tried to fix my lips but they couldn't do anything. They couldn't even sew it. [C - really] They couldn't because they bit a big piece of my lip off. [C - oh] Mary shows the place where the dogs bit her The one that healed me is my auntie, I's grandmother healed my lips. [C - oh] She was using some roots [C - oh yeah] Yeah, she was picking the roots that time. You know the old days we used to have all these roots, medicine, when we get sick, that's what we use. We don't go to the doctors. [C - no?] We use all these, all kinds of roots from the ground.

C - Did you learn those things?

M - Mm, hmm

C - So you still do that now?

M - Mm hmm

C - oh

M - Like the one that, I don't know how you call that, you could see them out in , when you go out in the bush. You see the little red berries, like small little bunch of little red berries. That root is good for the lady when you flow a lot. [C - oh] When you flow a lot, you just boil that, the root. You always offer tobacco before you take things out. [C -oh] That's how my mom taught me. And you make that, you boil it and in a pot but not a steel pot. It's a different kind of pot.

You have to use a special pot to make medicine in. and you drink that three times. You drink in the morning and when you have that medicine you can't blow it, never blow the medicine. Mary blows on her coffee cup to show me When you get it out from the ground, from Mother Earth, you can never blow it when you are going to drink it. You just leave it like that and drink it. [C -oh] You drink about three times of that anyway and you just go normal again. [C - oh] There's all kinds, I can't name them in English. I got lots of them here, I pick some up...

The talk of roots and the proper way to pick them led into a discussion of some aspects of Mary's personal spiritual beliefs. Actually, first there was a brief digression into a conversation about genealogy followed by me asking about Mary's mother saying the rosary. Mary spoke of many things in our discussion of spirituality but the things that stood out as very important to her, and to be mentioned here are the eagle, the drum, a few words about songs and Mary's view on the mixing of Christianity and Native spirituality. I ask readers to read this section with the respect one would accord any sacred text.

M - I always dream about the eagle. [C - oh really?] Yes, the time before I went to North Dakota, this surprised me, I dreamt about flying with an eagle. I see all these. Mary waves in the air When I went to North Dakota, that's what I see, on my dreams. [C - really] Yes

C - I notice you have the eagle on your shirt.

M - Yes, I just love an eagle. I do see lots of visions too.

C - Oh really

M- Yeah, like when I start going out there and I go to sweats and I go to pray and offer tobacco. One day I was sitting, I was with L, I went and cut wood and I heard a voice. It said Mary, now its time for you to go to follow the good road and start working for yourself. I heard that voice and that's when the eagle was flying around there. Pointing up in the air and circling with her finger [C-wow] Then when I came back from L's place and I have an eagle feather.

Mary has certain songs that are sacred to her and she explained to me that she cannot just sing them when she wants to, she waits until they come to her.

M - ...he used to sing a song for me. When I go to the sweat it comes to me but I can't sing it. {c- no?} No, that was given to me like when I go to the sweat to sing the song comes to me. [C - yeah] There's two that were given to me. My Dad's song and Michel's song. See I can't sing it. [C - yeah] I could sit here all day and try to sing these songs and it will never come to me but when I go to the sweats the song comes through to me.

Mary shared with me a very personal story about her drum. Ridington's discussion of the thoughtworld speaks to this drum story. Ridington describes the difference between aboriginal and non-aboriginal thoughtworlds,

In our [Ridington's] thoughtworld, myth and reality are opposites. Unless we can find some way to understand the reality of mythic thinking, we will remain prisoners of our own language, our own thoughtworld. In this world one story is real, the other fantasy. In the Indian way of thinking both stories are true because they describe personal experience. Their truths are complimentary (1990: 10).

Mary's drum is very important to her. In Mary's account she tells me about the importance of the drum, how she came to have the drum,

I was just praying and I heard the drums just comin, you know, real beautiful music. You know, like drummers, just coming slowly, and slowly getting louder and louder. But I think, what it is, because that drum was given to me by M. G. [C - oh yeah] and C. G. is my first cousin too. [C - oh] Because her mom and my dad are brother and sister too. M & C laugh So, like, Mrs. L, [C - mm hmm] like L and Mrs. P, those two are sisters, [C - oh OK] so those are first cousins too [C-OK] and I always call him my brother, M. And, I always want to drum. And one day he brought the drum, he came from Fort McMurray, he came to Edmonton and he brought me this drum. He made that drum and he died. [C - really] Yeah, not very long after, he died. Not even a week after. He died. He brought this drum to me. [C- wow] He made that drum for me, and that drum I

always keep. And my drum had ripped around and I didn't have a drum for a year. I cried for that drum. I cried that I didn't have a drum, but I had the frame. [C - yeah] So I went to school in Ben Calf Robe. [C - oh yeah, up here] And guess what? One day I was thinking 'Gee how can I make my drum, I don't have no hide or anything rawhide'. I was sitting down outside, and I said "Grandfathers" I said "Would you help me to have a new drum because I have the frame of my brother's?" I called my brother's name. I said "My brother, would you help me to have the drum back?" And it was OK like that. So I went to school the next day again and I was sitting down on the picnic table and I was praying. I always pray to my brother M to help me, my dad and them to help me you know. And I seen something rolling towards me, a round thing, you know, comes rolling from the corner and rolls to me where I sit. It goes right here Points in front of her so I kicked it, with my leg, I just kicked it like this. Kicks out in front It was at ten o'clock, we always have a coffee break, so I went back in. So, three o'clock we go and we have a smoke. So I went out and I sit the same place in the picnic table. I was sitting on top. It was snowing, you know, and that thing rolls again, towards to me, so I got up and I picked it up and I put it in my pocket. I came home, I open it, and guess what? It just fits with my drum, the hide. [C - whoa, your kidding] Yes, just fits! It's all just round, it just fits. That hide was cut, it's a rawhide and it's still wet and it just fits my drum.

C - That's very special

M- Mm hmm, and since then I had my drum made again and never let nobody touch my drum. [C - no, no] No, I smudge it and that night I tell my husband, I said, "Well, I guess I have a drum." And I fixed my drum and I made it and I start singing and that night my brother was singing a song for me. [C - oh my gosh] Yeah, so that was him Mary taps the table that give me the hide to fix my drum.

Mary used to take her drum into the Catholic church but she no longer does that, she explained to me why she does not take her drum to church.

M - ...You don't take the drum in the church. [C- no?] The drum don't belong in the Catholic church, that wasn't never, I never see a drum in the Catholic church. I used to sing [C - yeah] four directions in the church but something tells me not to take my drum there anymore. [C - really?] Yes, like the sweetgrass. They have sweetgrass in the church, they never do that before. Now they try to do these things like we do, but why in the Catholic church?

C - Have you gone to Sacred Heart?

M - I used to go in Sacred Heart. That's where I used to sing. [C - oh] I used to drum there. [C - oh, OK] Yeah, but I don't do that anymore, I just quit. I rather stick with my, you know, the way I pray. It's more powerful. But I'm still praying for the God anyways. [C - yeah] You know I'm still praying for him. I feel more at, safe like, [C - It feels right?] Yeah [C - to you] feel right for me. When I go to church there's so many hypocrites in the church. They talk about themselves and they laugh at you. They ask me to do the drumming for them and after awhile they laugh at me about it. [C - That's awful] It is. And NO WAY, no way nobody's going to do these things to me. I'd rather bring my drum home and leave my drum out of the church. [C - yeah] I always tell me that. She said "Why Mary, take your drum in?" She said "It don't belong there." I said "No, I know" because the spirits told me not to take my drum in there anymore.

Mary's discussion about her drum and the church leads her to talk about her parents' religious and spiritual beliefs and that led Mary to speaking about her grandmother. Specifically, she talked about berry-picking with her grandmother and about the importance of respect for the earth and nature. Out of this discussion came a story about the birth of one of Mary's children. Mary was out trapping by herself when she went into labour. Mary delivered her own baby, by herself, in the bush.

M- ...R, I had her in the bush without people, without anybody. There was trappers there but I had her in the bush. I delivered my own baby.

C- You delivered your own baby?

M- So, it was pretty hard, There was trappers there but [C- that is amazing] I couldn't do anything. Then, we land up in Lac La Biche hospital, so we had to stay in the hospital [C-oh] an that's where Rose was in hospital for awhile, just check how the baby was. [C-yeah] Cause it was hard for me when I delivered her. [C- I guess, like,] Yes [C- you were alone [M- alone] outside] in a cabin yeah, [C- in the cabin, in the bush]. Then I called Grandpa X.C. from a mile and seventy four. He had horses, I was riding on a horse to go to Lac La Biche to the hospital and we land up in a hospital, both of us.

C- Was she OK?

M- Everything was normal, everything, I did everything right.

C- You did a good job

M- Yeah, She stays in the hospital for awhile. So I do really good.

C- So you're out on the trapline, [M- mm hmm] you're nine months pregnant, [M - yeah] and you're [M-mm hmm] you're walking [M- six miles like that I walked [C-oh my] yeah, carrying a big packsack.] And then you just knew it was time

M- mm hmm, I start to have a labour pains and I know right away.

Mary spoke about the fact that she knew what to do because her mother had prepared her. She had been told what to expect when she got married and what to do when it was time to give birth. At this point Mary spoke some more about learning to tan and scrape hides. I asked Mary how old she was when she went to the convent to go to school. In response Mary told me some stories about what it was like for her to be in the residential school.

M- I don't really like it because, it was pretty hard for me because the nuns there were really mean, [C- oh] REALLY MEAN.⁴ One time I was in the class and I was sick. The nun got me and she put me back up upstairs and tied me up there

C- ahh

M- That was really, it's not, [C- that's horrible] it is horrible. I was calling my sister L. The nuns weren't very good to look after kids. They do all kinds of things to you. We're having a meal, we having a fish, there were about fifty of us hundred and fifty small girls and we're having our breakfast and they they used to give us that oil ah what do y...[C- cod liver oil] by spoon an I couldn't

⁴ Where I use all capital letters in the transcript, it is to indicate that these words were spoken louder or with more emphasis than the rest of the text.

take it. I was sick so the other girl was sick. You know what they do? They just take her head dump her face in there [C- aw] That's how bad the nuns were. An if you do something little bit wrong thing you got to go stay upstairs and stay in bed or you have to say your prayers and kneel down all day to say your prayers [C- geez] yes

C- Like, so what year is this like around 1940 or something or...

M- See I'm 53, I was born in 1943

C- 1943 OK, so it's 1949 or something, so that isn't even that long ago [M- no]

M-They always say that Catholic Priests are really good. Fathers or something, they supposed to teach you how to pray an to do [C- yeah] these things but, it's terrible, used to be one father used to bother us there too, Father, [C- geez] Father D was bad for girls too he used to make us sit down on, make us sit. You know all these things I know, I remember all these an I used to hate that priest [C- yeah] and he tried to teach us about God when I was six years old but I know, and I used to tell my mom [C-yeah] about what he's doin [C- yeah] that's a terrible thing to do

We shut the tape off while Mary speaks to her husband for a minute

M - ...the Catholics, [C- yeah] , they cut our hair too you know, the nuns cut. Every one little girls had the same haircut I don't know why they cut our hair. but like I said when catechism, you know like to learn how to pray. Father used to be there all the time and and sometimes there about maybe twelve girls we'd be sitting down all in benches. [C-yeah] If we don't do anything right, if we don't say things right that Father used to make us sit on his lap and do these things you know [C- oh my] and one time I turned around an I hit him with a ruler and the nun take me, just grab me by the hair and take me back upstairs, [C- geez] and tell me "you're not supposed to treat the fathers like that" and I told the sister but sisters don't believe me

C- It's a wonder you kept going to church [M-mm hmm] you know after that kind of a thing

M-Yeah but, you know it hits me in my head when I go to to the Catholic church and it just come, brings my memories back what I used to see when I was a kid what the nuns and the priests's do.

At the start of this chapter I listed some of the broader oral history issues related to Aboriginal women's history

and biography. This was followed by my presentation of Mary's life history as it was told to me. In the following summary I will examine how parts from Mary's story illuminate some of the broader points.

Stories of Everyday Life are Important

Welsh makes the point that she had to

...re-examine my conventional notions of what was historically important and to recognize that the everyday lives of women - the unique patterns and rhythms of female experience - are history too (1991:19).

The stories I gathered from Mary are her accounts of her own everyday life. Although Mary's everyday experiences are similar to those of people she knows, they are uniquely hers and they are different from my everyday experiences and those of many Metis women living in urban centers.

Not Enough Information is Written from Female Sources

Even today, books like Sylvia Van Kirk's, Many Tender Ties, which was researched and written by a woman, are still based on male generated written sources. Christine Welsh, a Metis author, writes about this problem, "For it was in working with the native oral tradition that I first discovered that we as native women have a unique history and discourse of our own but being both women and native we have been doubly silenced" (Welsh 1991:15). Working with Mary has produced a body of text that is from the woman herself. It is her recollections of her own life.

Many Works on Aboriginal Women are Dated; the Women are Made to Fit a Stereotype

The problem is not a void in the literature, but rather, the problem is the way that Aboriginal women have been presented. In choosing women as a focus, particularly Metis women, I originally thought I would be filling a void in literature. However, Rayna Green's (1980) essay leads me to believe not that women have been neglected in the literature but that the problem has been in the depiction. Green (1980:257) points out that in many works about the lives of Aboriginal women they are portrayed as stereotypes. For example, she notes that works from the period 1900 to 1920 are typically "custom studies" about topics like menstruation and marriage. In writings from the 1960s "Indian women have to be exotic, wild, collaborationist, crazy, or "white" to qualify for white attention" (Green 1980:257). Green asks the question

Where are the scholars who will give the modern versions of quilling and beading societies - The North American Indian Women's Association, The Alaskan and Canadian Native Sisterhoods, ...the attention they ought to have? (Green 1980: 266-267)

At the time Green (1980) was writing she found that

No study yet deals with the resilient intratribal and pan-Indian networks formed largely by women on and off reservation, networks which keep migratory and urban Indians working, educated, and in touch with their Indian identities (Green 1980:266).

In Mary's life story there are a number of narratives that concern the things Mary does to promote First Nations

education and identity, including her stories about losing her drum and finding a new skin for the drum while she was at Ben Calf Robe school. Ben Calf Robe is an elementary school in Edmonton that has an emphasis on Aboriginal culture. Mary was helping out at the school at the time of the story about finding her new drum skin. Another example can be found in her stories about her involvement in Sacred Heart Church. Although Mary has now made a decision to keep her drum out of the church, she was at one time very active in promoting Cree traditions in the church. Her decision to keep her drum out of the church represents another kind of contribution to Aboriginal identity in that Mary is moving towards a type of spirituality that does not encompass any organized Christian or Western religious system.

The life stories of Metis women have much to say about Canadian history

Mary's life story presents us with an alternative account of Canadian history. She presents it from the perspective of a Canadian Aboriginal woman. Mary's stories about life in the residential school, her experiences with the child welfare system and its workers and her recollections of her experiences as an adult in the Roman Catholic church all tell the reader something about an Aboriginal woman's experiences with Western institutions. We learn that Mary did not receive fair, honest or respectful treatment from the child welfare system. We find out that some Aboriginal

children, including Mary, had very bad experiences in residential schools. All of these stories tell us that there is a period in recent Canadian history that saw Aboriginal women mistreated by our institutions. Until quite recently such stories were not part of the written history of Canada. Stories such as Mary's, compellingly told in the first person, are now appearing in social science literature, the arts and in newspapers and are changing the Canadian conception of history. First person accounts, when written, are powerful conveyors of history to a literate Canadian audience.

The Life Histories that are Done with Aboriginal Women, are, at Times Lacking in Details about the Context in Which the Information was Gathered

Information about the length and location of interviews, editorial decisions such as what information was left out or kept in, and who made those decisions, are not always found in the works that have been published. An example of this lack can be found in Linda Shorten's Without Reserve, an interesting collection of stories from Urban Aboriginal people living in Edmonton during the late 1980s. As I read it I wondered how Shorten found the people she worked with and how decisions about what was included and what was not were made. In the work Mary and I did I have tried to include answers to questions like these. That is why the

reader is told about my relationship to Mary, and how I came to do life history work with her.

Aboriginal Women Tell Sacred Stories

In his work on Mabel Mackay, a Pomo basket-weaver, Greg Sarris tells us that Mabel challenges the assumption that people can take information without having to account for it. Sarris writes that,

The students were prepared to take notes and get answers, but could they say what those answers meant, as Mabel understood them and wanted them understood? Here she interrupted the classic participant-observation method (Sarris 1993:18).

In my work with Mary she told several sacred stories. When she spoke of her drum and the eagle she was discussing what I have considered in this thesis as a sacred text.

A seventh oral history issue related to the biographical and historical work on Aboriginal women is that historic and social context are intrinsic to the stories told by the women. While writing about a story told by Mabel Mackay, Sarris points out how the stories open an historic context:

"The story opened onto a broader historic context. The earlier stages of European civilization affected, directly and indirectly the lives of the women in the story and Mabel" (Sarris 1993:29).

The story to which Sarris refers is about a community divided by soldiers moving people and some women were moved to one place and others to another so that people were separated. I chose this reference for a twofold purpose:

It demonstrates the point that social and historic context are imbedded in the stories of Aboriginal women and although it is an example taken from American Indian experience but it speaks also about the Canadian Aboriginal woman's experience.

Mary's story of having her children taken away provides an example of the family being split apart by the powers of a Western institution. In Mary's story about losing her children, the social context is implied. For example, we learn that language was a barrier for Mary, and perhaps for other Aboriginal women. Mary was unable to tell her story to the court because the court did not provide a Cree translator and Mary did not speak English well enough to be listened to. We learn also that Mary was not dealt with honestly by the child welfare worker, as Mary was told her children were going to a kids' party and not that they were being taken into government custody.

Social and historic context are also apparent in many of Mary's stories that are about Mary and her parents or Mary and her children are living more traditionally or more on the land. In these stories they are happy, fed, together and their basic needs are met. When Mary talks about her parents way of life she says:

like our family it was really poor we didn't have enough money and things like that. But that's how my dad make our living, with trapping. In summer time

they go fishing, that's how they make money too. My mom used to do a lot of sewing and that's how she earned her money for our schooling, clothing, things like that. We don't hardly have any food at the house but we used to be happy. Like what we had in there at home, we eat fish, we eat moosemeat and things like that, wild meat. And we don't hardly have anything but we were still happy the way we were brought up, you know, because we have a home (p.24).

It is when Mary and her family have to deal with outsiders such as the nuns, the priesthood, the hospital staff, and the child welfare workers that Mary is led to unhappiness and reliance on outsiders and their systems. An example of the traditional way of life being better for Mary than the ways of outsiders is her story about being attacked by the dogs. She tells us that "The nuns tried to fix my lips but they couldn't do anything. They couldn't even sew it....The one that healed me is my auntie, I's grandmother healed my lips. She was using some roots" (p.28). It was someone from Mary's own community who was able to look after Mary's wounds.

Not only was Mary's family usually better able to look after their own needs but Mary's stories also reflect the fact that Mary learned more when she was with her family than when she was with others. When Mary talks about her time in the convent or the group home she does not say anything about learning things but when she talks about time spent with her family she usually includes some reference to

learning something. For example, when Mary speaks about staying with her cousin's family, she remembers "Her mom taught us how to work, do washing, haul water, iron clothes..." (p.24). When Mary spoke about her life with her parents she talked about the things she learned from them: "I used to go with my dad with the dog sled and he taught me how to set rabbit snares and how to shoot chickens. That's where I learn all these things" (p.23). In Mary's stories about attending residential school there are no references to learning things.

Aboriginal Narrators Voices are Often Lost in Biographical Accounts.

A number of writers (Cruikshank 1994, Welsh 1991, Green 1980, Alcoff 1991) address the issue of voice, as it relates to Aboriginal people and especially to Aboriginal women. Welsh writes that

... the native oral tradition is also a form of discourse that has been ignored and often deliberately suppressed by the dominant society. The attempts to silence the native voice have had far-reaching consequences, not the least of which has been the erosion of cultural identity among generations of native people" (Welsh 1991:15).

Cruikshank points out that there is an increasing awareness

...in Canada about the need to re-evaluate the history of native-White relations, [although] it is clear that Aboriginal People's views of their own history rarely appears in academic literature (Cruikshank 1994:403).

I would like to think that the work Mary L. and I have done so far and the presentation of it in my thesis will play a

tiny part in rectifying the situation pointed out by Cruikshank.

Chapter Five

An Introduction to Mary Holdgrafer's Life

This chapter of the thesis is designed to share the life history of Mary H. Once our interviews began it became clear that the breast cancer chapter of Mary's life history would be very much the focus of our interviews. Breast cancer became a focus of my thesis research because it was the topic of importance for Mary H. According to Degh, one can expect the unexpected in terms of modern life history content as,

In modern urban society specific narrational exchanges have been reported from occupational, religious, social, and political action support groups oriented toward particular goals. As byproducts of these associations, the most varied materials have been collected: conversion stories of new-born Christians; birthing stories of expectant parents, narratives of consciousness-raising rap sessions of gays and lesbians, and of women; victims of crime and urban violence; therapeutic confessional products of people in interactional analysis (Degh 1985:105).

Life history has been an appropriate method for working with Mary H. There are two reasons for this: Firstly, many of the stories about breast cancer and quilting have to do with Mary's sense of self as she saw it prior to diagnosis. Secondly, Mary's stories focus on what Mary calls her "healing journey," which has involved rediscovery of previously hidden aspects of her self. Przybysz comments on the connections between quilting and concepts of the self: "quilt-making as practiced by some women in specific

sociocultural and historical contexts seems to make possible new ways of experiencing, thinking and speaking about the self" (Przybysz 1993:171). Life history has been well-suited for this exploration because "Life stories express our sense of self; who we are and we got that way. They are also one very important means by which we communicate this sense of self and negotiate it with others" (Linde 1993:3).

Through the interview process Mary discovered that although she loved quilting, she stopped doing it for a period, in part, because of a lack of space in her home for her work. After interviewing Mary I found that we were both curious to learn whether or not other women shared Mary's experiences of breast cancer and quilting. We wondered if other women had similar or different experiences. Our questions led me to decide to try a focus group technique with other women who had an interest in breast cancer and quilting. A discussion of the focus groups appears in the next chapter.

Mary was diagnosed with breast cancer in 1990. The collection of data with Mary took place in January 1996. Three interviews of two to three hours each were conducted. The diagnosis, treatment, and subsequent life events were paramount in Mary's life history. As a result, most of the data I collected from Mary deal with the portion of her life from 1990 to 1995. My concerns about the stories being

mostly limited to this period were assuaged by Linde who writes that

Obtaining the text of an entire life story would require recording all the talk ever produced by a given speaker. In principle this is possible, but both practically and ethically it is not. However, obtaining part of the life story is sufficient to indicate the nature of this open unit and the principles of its construction; so we do not need to be concerned with the entire volume of a lifetime's worth of talk, but only with a selection from it (Linde 1993:51).

It is difficult, however, to collect stories from a portion of a person's life without reference being made to events further in the past. I begin Mary's story with her recollection of how she became a quilter, which refers back to long before 1990.

M - Well the truth of the matter is that I didn't think I'd ever be allowed to sew because my mother really took a lot of pride in her work and she was sort of territorial about it but when I was in high school I was taking Latin and I hated it [c- hmm] and so I signed up for Latin two and I hated it even more and so one day I said to my mother that I wanted to change to sewing and would she let me do that and she said yes and so I registered in a sewing class and it was sort of like walking into a new world and I loved it. And I was really good at it and so subsequently in high school I took all of the home ec classes that were offered and then I went to University and majored in home economics.

C- What kinds of formal training have you received?

M- I have a degree in Home Economics and my emphasis was on child development and family life but in the program I was in you had to take sewing classes and design classes and actually painting and things like that too so that was my formal training and then as I became interested in quilting I read a lot and over the years have taken lots of quilting classes of various kinds, some from quite famous people.

C - Informal?

M- I guess, I'll tell you another story cause I really like telling you stories. [c-OK] The way I got to be a quilter actually was that when I was in graduate school at the University of Kansas, I was in a group, on Monday nights we met for sewing. It was a group of women and the rule was that you had to have some kind of sewing project to get in to the group and you had to bring something with you every time. But sometimes we didn't sew at all. Sometimes we talked and sometimes we drank wine and sometimes we sewed. My friend who was my office mate was interested in quilting and she was interested in quilt history and she spent all of her spare time developing some kind of categorizing system for quilt blocks and so in the group she said she would teach me how to quilt and I could teach her, like each person was supposed to teach everyone else what they were doing, and I was doing needlepoint at the time, which I like cause its really fiddley and monotonous and it was great for me and I taught her and she said 'this is shit I'm never doing this again.' Cindy laughs She taught me quilting and I thought "this is wonderful what can I do that's harder?" So [c- hmm] I was hooked and from that time on I started studying on my own about quilting and then when we came to Edmonton a quilt store opened shortly after we came here and I went in and got to know the owner and said I could teach quilting. And so I did I taught handpiecing and handquilting for awhile in this store.

C- OK, um, are there other people, artists who have influenced your work?

M- There's no doubt that my mother and my grandmother influenced me tremendously in terms of quality of workmanship and that kind of thing. My mother was very very artistic, and a frustrated artist so -- I think from her part of what I learned was that artistic pursuits weren't very valuable [c- mm] and so I didn't do as much with that as I might've earlier on because -- what was important in my family was being smart [c-mm] and umm art didn't seem to be related to smart and in retrospect I now see that my mother was the smart one in the family and she was very creative but the system was set up so that what she did wasn't valued in the way that going to school and getting degrees and that kind of thing were valued.

[January 2, 1996]

Mary spoke about quilting as an endeavor that requires a lot of personal space, both physical and temporal, in which to work. Przybysz addresses the issue of space as it relates to the lives of quilters writing that

It seems to me that many contemporary women are engaging in quilt making as a body praxis and participating in quilt related activities as a way of creating literal and psychic space for their selves to dream their way out of culturally constructed and constricting feminine roles (Przybysz 1993: 180).

In the above passage from Mary she talks about the valuing of artistic pursuits. We found, through our discussion, that the amount of space that Mary allocates to quilting reflects how much value is being placed on her work by herself and her family. After Mary moved to Edmonton with her husband and two children she found herself with little space in which to quilt. She tells a story that we call "The Ping Pong Table Story." This story illuminates the space issue.

C- OK, OK. Um, Starting and Stopping, having you started and stopped? Like, are there periods where you didn't quilt at all?

M- Mm hmm. Yes, one of my great sadnesses is, I guess, that I was very focused on quilting as a hobby and sewing as a hobby and teaching people and I loved that and I'm really good at it and somewhere along the line I got so busy working and being a mom and being a wife that I stopped doing that kind of stuff. The standard joke in our house used to be that we had this ping pong table for the boys but it was always covered with fabric and then when we remodeled the basement we took out the pingpong table and shortly after that I stopped sewing because there was no place for me. I didn't have a sewing room [c- mmm] so I would sew at the dining room table and I was forever having to put everything away. So I literally stopped and it was not until after I had breast cancer and Gary one day said "you know I used to really like it when you would sew down in the basement and I miss it that you don't do that" and it was sort of like, "Oh God I thought you didn't like that." Like he never said anything to make me think that he didn't like it but somehow — I thought — that my work — wasn't very valued and so I quit. And as soon as he said that my sewing machine was out and I started doing stuff again.

C- That's like 1990?

M- yeah

C- So how many years do you figure you were away from it? Like a decade?

M - Ten. I think it was, sigh it was about 1980, when we remodeled the house and I went to work at the Association for the Hearing Handicapped and I think I just lost myself

C- How come it was your thing that lost it's space?

M-It's cause I always give up my thing. That's, I mean that's one of those heart wrenching awarenesses. It is because I would go out of my way to make space for everybody else. I mean it wasn't that anybody ever said don't make room for your sewing, [c-no] it was my interpretation of everybody else's needs being more important than my own ...Its going right back to my mother who was so creative, who did, I mean she was a terrible housekeeper and she was a wonderful maker of things and for her it was sort of a passive aggressive kind of thing it was the one place where she could do what she wanted. As I say that it makes my father sound like some kind of ogre and that's not the case at all. I don't think there are any villains here. It's just he had a view that the mother looked after the children and took care of the house and didn't work outside the home and she bought it. [c- mm] And they worked together on that model, and I heard it and even though all the time I was growing up I was being told that I would go to university and I would have a career, there was this subtext of the mother, sacrifices and puts her husband and her children ahead of herself

[January 2, 1996]

In her book entitled The Fifties: A Women's Oral History, Brett Harvey collected a story very similar to the above story told by Mary. The following passage is from Harvey's interview with Julia Harmon:

"I felt very happy if everybody was happy: if I'd had a good dinner, and the children were scrubbed and happy and doing well in school and their clothes were clean and I was looking good when it all came together- that was pleasing, that was good. It was best when all these good things were happening for everyone and I was managing it." Julia's choice was not without it's costs, however. She had willingly set aside her love of painting, and as we talk a more complicated picture emerges... "I never really abandoned art, you know. Of course, I never had a studio and I could never have worked while the kids were underfoot anyway. I'm a terrible night owl- I come alive about nine o'clock at night, I would get out my materials and paint on the dining room table" (Harvey 1994:122)

Mary's move to the dining room table heralded the beginning of a decade of no quilting. Those ten years were a time when she did other things: she concentrated on being a wife, a mother, and on her career. At the end of ten years Mary was diagnosed with breast cancer but this was still not quite the impetus to return to quilting. It was not until one year after Mary's bout with cancer, when her husband was diagnosed with cancer that Mary decided to make some changes in her life. One of the biggest changes she made was to cultivate things that were her own and hers only, things that had nothing to do with being a wife or a mother or a worker. One of these things was quilting. Mary spoke to me about the return to quilting,

c- mmm, so it's like um really important that your getting to put that first [m-mm hmm] right now over and above working or housekeeping [m- mm hmm] or grocery shopping [m- mm hmm] or anything like that

m- it is, and it is my work now, I go to work everyday

c- OK. So you were diagnosed with breast cancer [m- mmhmm] um how, when did you pick up the needle and the thread?

m- Sometime after I had surgery and, and it may have been after Gary was diagnosed with cancer [c-is it a haze, kind of ?] yeah , yeah. Because that all sort of melts together, that time, that fifteen month period is all mushed or two year period I guess it would be. I was diagnosed with breast cancer in June 1990 and Gary was diagnosed with colon cancer in October of 1991.

c- OK

m- And then in the summer of 1992 we went to Pittsburgh on sabbatical [c- mmm] and I used that time to take classes and learn so I upgraded my skills in that time. But sometime in that illness period Gary said 'You know I really miss that you did that' and it was sort of like 'Oh my God, you know I could be doing this again.' It was just kind of an immediate switch and I started taking classes here actually and started making things and I just felt this burst of energy when I was doing that.

c- Do you think its coincidental that you almost like had to go away to make space and then you came back and made a space?

m- That's right, that's right because when I started sewing here before we went to Pittsburgh I was sewing on the dining room table again. So I was sewing before we left but it was on the dining room table and I started a quilt that I've never yet finished that I'm going to finish this winter that's called Liz's wedding quilt and so I didn't have to finish it cause Liz wasn't getting married laughter but now I want to get it finished because my skills have so far exceeded that project [c-oh yeah] and she still wants it so I want it to be finished for her [c-yeah] but it's not anything I would do now [c- oh] which is an interesting thing [c-yeah] but it was what I needed to do to get myself back [c- going] in yeah

[January 2, 1996]

The information I have shown so far from Mary's life has dealt only with her quilting history. Some of the themes that arose in the first passages I have so far shared are: communication, identity, changes in priorities, and the importance of a woman's personal space. A large part of my

discussions with Mary dealt with her experiences with breast cancer; and these are found in the next stories.

In their book Lives: Chinese Working Women Sheridan and Salaff explain that they wanted their readers "...to learn that their own problems are rarely personal and instead result from social structures. Such problems can be overcome only by means of social transformation" (Sheridan & Salaff 1984:20). I have found that while undergoing diagnosis and treatment for breast cancer are personal processes, the processes occur within the context of certain shared social structures- the systems of western medicine. Although Mary was satisfied with the level of care she received and with the quality of her medical treatment, her stories contained descriptions of dehumanization, loss of identity, paternalism, and a lack of interpersonal communication between Mary and her doctor and/or Mary and the nurses.

The first example of a story about a paternalistic experience comes from Mary's diagnosis experience. Mary found the lump in her breast herself and she felt something was wrong. In other words she had intuitive knowledge about her own body's condition which it took the medical system four years to confirm. This is the story in Mary's words:

M - I found a lump in my breast in March of 1986. We were living in North Carolina at the time. The doctor said that we should do a biopsy. The biopsy

was negative and when I came back here after our sabbatical I went to see my family doctor and he said 'oh no don't worry about it, it's nothing'. I asked to be referred to The Breast Centre and our family physician said he preferred to send me to his friend he thought was the best person for breast cancer in the city. I said "I don't want to see a man, I wanted to go to the Breast centre because it's all women" so he said "well ok" and let me do that. My experience there was actually fairly negative. The woman who established the breast centre was I think a wonderful, well-intentioned woman but she also was a zealot and so she badgered people and criticized if they didn't do breast self-examination "the right way". I told her I was really concerned about this lump in my breast and she gave me quite a long lecture about how I was a hypochondriac. I went away from there continuing to be concerned about this but trying to hear that I was over-reacting, I was young and I knew I didn't have to have mammography every year and so I didn't go back. I didn't do anything until 1990 when I noticed a change in the lump. At that time I phoned the breast centre and I waited three months for an appointment. Again I'm saying to myself all along "you're a hypochondriac, this is probably nothing, this is no big deal, don't worry about it". On June 15th 1990 I went back to the breast centre and I saw a different doctor and she was quite lovely. The setup there is that you don't leave there until they've read the mammogram and they can tell you on the spot that you're ok. That's one of the wonderful things about the breast centre. The bad thing is that you have to sit in this little paper shirt for as long as it takes for them to do that so I sat and I read a magazine article and I read another magazine article and at one point I thought "gee this is taking a long time." People were coming and going but I wasn't at all concerned because I'd convinced myself that I was a hypochondriac and there was nothing to be concerned about. So Dr. W. came herself to find me and I'd actually gone to sleep. She woke me up and said come back to my office and she closed the door and we sat down and she looked at me and she said I don't know any easy way to say this, 'You have breast cancer'

[January 7, 1996]

Mary made a quilt called "Fractured" (Figure 1) to depict the events in the story of her diagnosis. Mary described the emotions that are portrayed in "Fractured," as

I have an image of myself breaking into a million pieces upon hearing of my diagnosis. I quickly pulled myself together as best I could in a mistaken effort to be strong"⁵ (Holdgrafer 1995).

⁵The description of emotions that are represented in the quilt and the descriptions of quilts that follow in the rest of this chapter are taken from

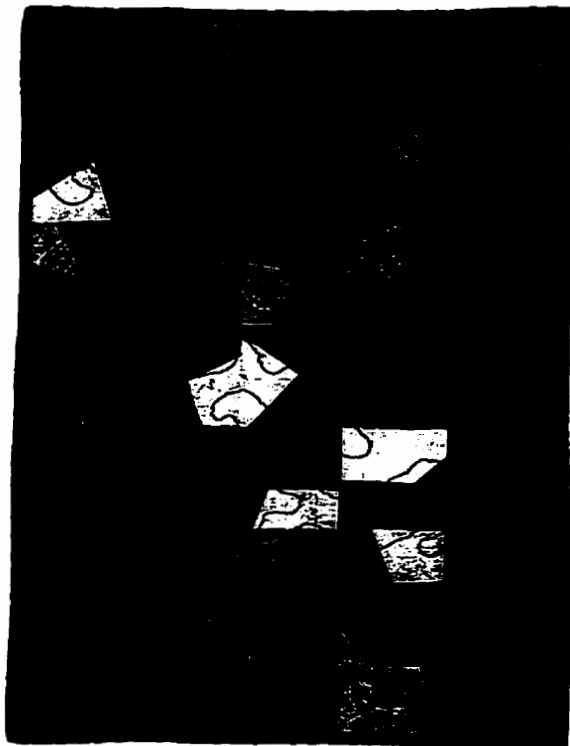


Figure 1
"FRACTURED"

a booklet that contains Mary's descriptions of thirteen quilts, which together make up a show entitled "My Healing Journey". At this time, the quilts are no longer all together as individual pieces have been sold.

Mary shared a second story from her breast cancer experiences. This story is a particularly disturbing account of dehumanization, at one point in the story Mary says "I was not a person." This is her story:

One time I had to go for xrays. I went into the xray room and the woman said, "take off your clothes you don't even have to take off your shoes just take off your clothes." So I took off my clothes. It was winter and I was wearing high boots which I left on. Then she came in and said, "this is not working pull down your slip and your panties and your panty hose." I said "ah well ah, ah" and she said, "No come on its ok it'll just take a minute" and she just went whoosh and pulled my clothes down. She did, She did this to me and I kept thinking I could have taken off my boots I could have taken off my boots. It was just such an invasion. And then she said "ok that's it", and it was over, it was that fast. I was not a person. In that moment, I was not a person.

[January 7, 1996]

Mary made two quilts called "Another In a Million I" (Figure 2) and "Another In a Million II" (Figure 3). These quilts depict several of Mary's stories and experiences. The previous story in which Mary says "I was not a person" is one example. The "Another In A Million" quilts also describe a loss of identity. Mary described the feelings she has portrayed in the quilts,

In general, the medical care I received was excellent: however, I was painfully aware I was one of a throng of patients. I often felt anonymous - not only breastless, but faceless to boot! (Holdgrafer 1995)



Figure 2

"Another In A Million I"



Figure 3

"Another In A Million II"

The "Another In a Million" quilts depict floors littered with the breasts that have been removed from cancer survivors. This perception and depiction of the removed breasts as litter or refuse is something that also occurs in the breast cancer quilts made by others. In an article titled "The Mastectomy Quilt: A Statement of Strength" Theresa Walla describes "The Mastectomy Quilt" made by Suzanne Marshall. In Marshall's quilt one sees

...her entering the picture, having a mammogram and finding out she has cancer. As she undergoes surgery, disembodied and dispassionate heads, wielding knives, float above her, and her vinyl breasts end up in a trash can. The stitched-up sorrowful figure then confronts a doctor who is trying to urge a 'normal' shape on her, via more surgery or prostheses. Finally, the defiantly flat-chested figure waltzes off amid flowers and music. (Walla 1996:26)

Both Marshall and Mary show the removed breasts as refuse. A second similarity is that in Marshall's quilt, the woman walks away defiantly, and in the next piece of transcript from Mary, she describes the women in her "Another In A Million" quilts as defiant. Both artists depict women moving away from the breast cancer experience stronger than when they came into it.

The "Another In A Million" quilts speak volumes about Mary's life experiences. Mary described to me how these experiences are reflected:

M - So the other ones that I was thinking about or the other one was the one with the female figure. I ended up making two of those for the show because I thought that I had ruined one and it wasn't going to be perfect enough to be in the show, keeping with the theme. I had struggled and struggled and struggled with that, I could see it in my mind and I couldn't make it. They were the last two that I finished. There's a lot of emotion wrapped up in those quilts about how people in the medical system treat patients — and — I—I generally am unaware of being real hostile about — my care — and since we've been talking, you and I, for this, I've become more and more aware of things I didn't even know I was holding, carrying around. In the pieces I think some of the things that are important are that there is some humor in them and I think they're pretty twisted but I love them because there's the person who — who is sort of walking down this hallway exposed and by the tilt of her head she seems to be a little bit defiant and I like the fact that you can't tell whether its one person or two because of the way the shadows went and and so there's a blurring of individuality in that and then there's this field of sort of unformed figures each with at least one missing breast. They're faceless and they're lining the walls and they sort of seem to me like um endless kind of like they go on forever and and they're kind of passive. [c- mm hmm] I think that that's how the medical system likes you to be when you're a patient, they want to tell you what's good for you and they want you to be passive. But then there's the the floor that's littered with breasts Cindy and Mary laugh despite the seriousness of the topic Well what do you do with those things?

[January 25, 1996]

The above passage from Mary tells us that her experience as a breast cancer patient was rather impersonal in that she felt that she was simply another person going through the medical system. Something else in this passage that is interesting is Mary's comment that she is "generally unaware of being real hostile ...and since we've been talking...I've become more and more aware of things I didn't even know I was holding, carrying around." It was important for me as a person gathering life histories to hear this from Mary. I interpreted her comments to mean that she was able to further explore her experience through the process of telling it to me. Greg Sarris wrote about the life of Mabel

Mackay, a Pomo basket-maker. Mabel describes this process that occurs between the teller and the listener,

"Mabel is saying: Remember that when you hear and tell my stories there is more to me and you that is the story. You don't know everything about me and I don't know everything about you. Our knowing is limited. Let our words show us as much so we can learn together about one another. Let us tell stories that help in this. Let us keep learning (Sarris 1993:46).

Mabel's advice describes what was going on between Mary and me. We were learning from one another not just about each other but about things within ourselves. Through telling me her stories Mary discovered more meanings and feelings than she had previously associated with her stories.

Jayne Willouby Scott wrote about her quilt "Respect me?...Respect me not?" in a letter to Mary. Jayne has addressed the issue of body image in her quilt. She writes that

My quilt visually reflects my feelings of helplessness and anger around the politics of breast cancer. The title and symbolism suggest feelings of loss of control over the self. The petals of the flower are breasts, ready for plucking as the doctors see fit. The plastic stuffed petals/breasts symbolize women's need for maintaining perfect breasts, often at great cost
(Personal Communique)

While it is a need of some women to maintain a perfect body or at least to attempt this, we can see from a story told by Mary Holdgrafer that it is not always the woman's need to maintain the perfect breast; in Mary's story about body image, it is not Mary that is concerned with the aesthetic beauty of her breast, it is her surgeon. The example comes

from Mary's diagnosis experience. Mary and I suspect that one reason for the four year delay in diagnosis had to do with the original surgeon's concern for preserving the appearance of the breast. While this may be a concern for some women, to Mary, her health and her life mattered more than the way her breast looked. Her story:

When the surgeon did the first biopsy I think he was convinced there was nothing there. This is another man thing. The lump was at the outside of my breast. Instead of making a direct incision which would leave a small scar he made an incision around the aureola and then lifted the skin to get in to where the lump was so that the scar would be right at the edge so you wouldn't see it. If he'd asked me I would've said 'why don't you get right to it?' There was an assumption that how my breast looked would be more important than finding out about my health. I think that's often what happens in life that because this is important to me it'll be important to you

[January 7, 1996]

Mary made a quilt that describes her feelings about losing parts of her body. The quilt is called "Chaos In Containment" (Figure 4) and Mary's description of the feelings that are depicted in the quilt demonstrate that although she grieved over the loss of her breast, it was her life that she was the most concerned about losing. This is Mary's description:

As I began chemotherapy treatments, I was determined to carry on with dignity, but when I lost my hair I felt panic. I wailed in grief at losing my breast, my hair, and perhaps, my life (Holdgrafer 1995).

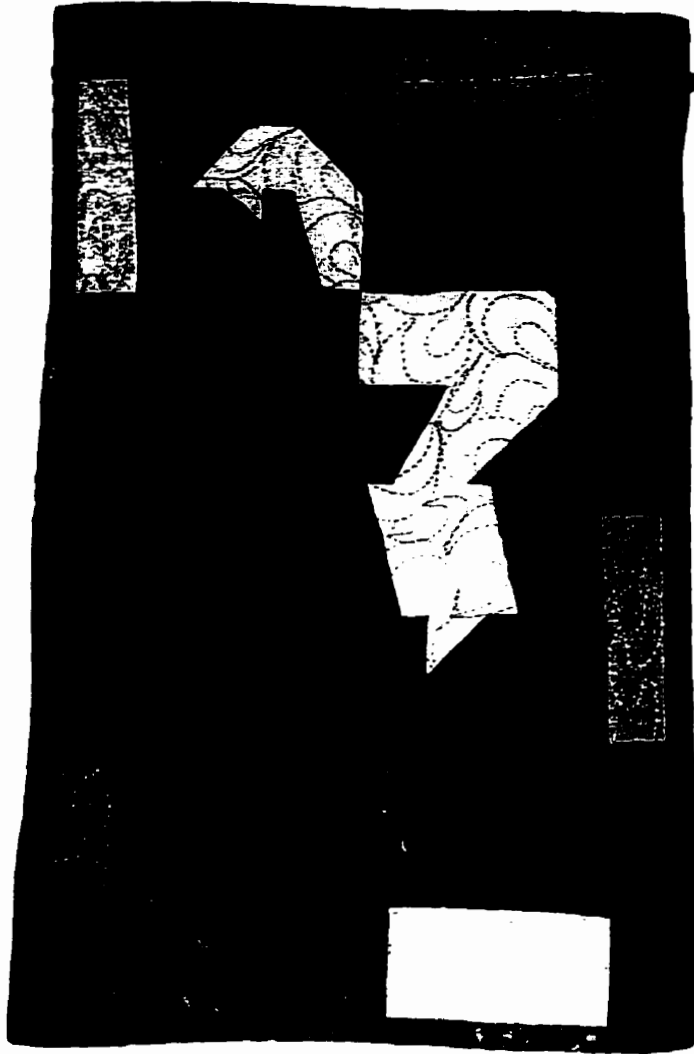


Figure 4
"Chaos In Containment"

A theme that recurred in all of the interviews with Mary was 'the superwoman.' Prior to her diagnosis of breast cancer Mary was rapidly moving ahead in her chosen career of public school administration. At the same time she was a wife and mother. Throughout her breast cancer treatments Mary worked hard at presenting an image of well-being. Mary described to me what it was like being the 'Super Sick Person,'

I was quite focused on my career when I was diagnosed and I think I was really unhappy in my job but I liked it a lot and I was really good at it and I liked being told that I liked it even though it was making me crazy. You know, I liked being told I was good at it and I was quite invested in that. I've always worked very very hard in any job I've had and often if I left a job I was replaced by two people and my view was that that was somehow a mark of what a good worker I was that it took two people to replace me. I now think that it was a sickness that I would give myself away so much that I'd do twice as much work as other people. But I didn't know that then so when I was first diagnosed with breast cancer I uh I was heavily invested in having people see that I was gonna be ok and that I could take care of myself. I continued to work even when I was having chemotherapy and I was really really sick during that time but I tried not to tell people I was sick because I wanted to be seen to be well [c-mm hmm] and and I thought any sign of weakness would be inappropriate and so that's what I did. When I got sick Gary was quite definite that he wanted to be there and he wanted me to take the time I needed and he was gonna be a good support and he was that. However what I had in my head was that I was gonna be the *super sick person*.

[January 7, 1996]

Mary made a quilt that depicts this view of herself as the 'super sick person,' it is called "Holding It Together" (Figure 5). Mary wrote the following to describe the piece:

People often commented on how well I looked and acted as a I continued chemotherapy treatments. I wanted to be seen doing well. In fact, I was sick and lonely and fearful. I felt like I was suffocating (Holdgrafer 1995).



Figure 5
"Holding It Together"

Mary's discovery of herself as a 'superwoman' and her beliefs about the 'super' syndrome and its relation to her illness have led her to make changes to her self and the way she lives her life. She calls the process her 'journey' and she described some of that journey to me:

Like I worked today and yesterday on a quilt block for a round robin project for the quilt store and at the end of two days of work the block is not satisfactory to me. [c-mm] I need to go back and do something that's what I do. [c- mm hmm] And that's a good lesson for me that you know I was trying to fit and do something smart [c- mm hmm] and it wasn't the right thing to do. So I'm learning about my style and that's part of the journey [c- hmm] is to learn that although I've tried to fit myself in to the standard mold to being the the good wife, the good mother, the good teacher, the good worker, the good, good, good, good, good, good. [c- mmmm] Really what I need to be doing is finding out what my style is and practice that [c- mm hmm]. And so I take great delight in in saying I should be making something other than standard quilt blocks I should be wearing something other than standard clothes you know I love it that I have the freedom to wear kind of wonky clothes and that I could wear a silk coat and my doc martins [c- mm hmm] at my opening [c- mm hhmm] I realize that that's not that outrageous [c- but for you] but for me it is.

[January 7, 1996]

In the above passage Mary discusses the fact that she has made some changes to the way that she presents herself to others. As she is less 'super' she has more freedom. Przybysz has commented on the ways that quilters visually present themselves, "The many different approaches to the presentation of self through clothing used by quilters again suggested the multiplicity of pleasures women experience and enact at quilting events (Przybysz 1993:177)". Mary also spoke to me about how the discovery of the 'super' part of herself led to further discoveries about her 'not so super self' which she directly relates to her creative abilities.

M - One of the things that fits with this theme of me being the super sick person and the super caregiver and all that is that in being that super person then I denied all kinds of things about myself that are not super [c- mm hmm] and so as I'm more willing to look at that, so the shadow side of myself, the things that I haven't been willing to look at in the past. The more I'm willing to look at that, the more creative I become. My theory is as I stifle parts of myself and I'm unwilling to acknowledge parts of myself then everything gets stifled [c- mm, ok] so as I say well, you know this is who I am, I am not always a nice person, I'm not necessarily good hearted, sometimes I'm a slob, sometimes I'm evil [c- mm hmm] and in letting that be possible even I think that frees up other stuff in me that I call creative.

[January 7, 1996]

Mary found that when she did not behave as the 'super sick person' she faced judgements from the medical community about her behavior. One of Mary's stories is about an instance in which Mary let her frustration and despair show and the subsequent negative reaction of a nurse.

M- There are two other things that happened there that I remember, three other things. One was, at the end of chemotherapy when I went for my last treatment one of the teachers from Waverly came and met me and brought me flowers and said I think you should celebrate this day. Then they came and told me that I couldn't have the treatment because my blood count was too low and I burst into tears, [c- oh] sitting in the hall, and the nurse who had seen me everytime I'd come in [c- mm hmm] patted me on the shoulder and said "you've done so well - until now "

C - Oh my [m- and then she walked away] Meaning, you lost it, [m-yeah yeah that's right] your not the good little soldier [m- that's right]

M - And that's exactly what I was, was a good soldier. And the people that got really good care were the ones that were basket cases from the beginning. But since I wasn't a basket case from the beginning and I'd been a good soldier and then I lost it then somehow I should be punished for that. [c- mm hmm] And she was one of the people who had been constant through my treatment and I quite liked her and and I think she liked me as far as it went but I saw her a year later and she didn't recognize so that again made me realize that you know at the time. Yes she recognized me when she saw my file, and she'd seen me on a regular basis, but I was just another patient.

[January 7, 1996]

Mary made a quilt that shows this process of discovering the parts of her self that are not 'super.' The quilt is "Layers and Chains" (Figure 6). The following is Mary's description of the quilt:

I once prided myself in conforming to professional and social standards. Now I appreciate how little interest I have in being like others and how often I continue to stop myself from being who I am (Holdgrafer 1995).



Figure 6
"Layers and Chains"

Rediscovery is a theme in Mary's stories. Many of Mary's stories speak about her breast cancer experiences as empowering. The following is a story told by Mary that tells how she put into practice some of the techniques she taught herself for dealing with the medical community,

M - ...there was another day when I stood up for myself. It was just before we went to Pittsburgh and I had to have one more test. They said it'll be six weeks and I said "we're leaving in three weeks, I just told you that." So the nurse came back and said "ok in you know like two weeks and six and a half days you can have this test" and I said, "no that's not good enough I want the results before I leave," and she said "well it probably doesn't matter." I said "I WANT THE RESULTS BEFORE I LEAVE, THIS IS NOT GOOD ENOUGH." So she said, "sit out in the hall and I'll see what I can do." She came back and she said really that time in two and half weeks is the only time we have and at that moment I grew about fourteen feet. I could feel myself just going whistle sound [C- were you by yourself?] No Gary was with me and he was sort of against the wall and I was gettin bigger and bigger and I said "I NEED TO HAVE THAT TEST BLAH BLAH BLAH BLAH." I was really firm. And so she sort of looked at me like well geez lady and she went away and she said, "well if you can wait for an hour you can have the test today." Then I was really mad [C-yeah] I said "Why the hell did you make me go through all of that when I could have had the test today in the first place?" "Well, we usually save those spaces for emergencies," I said "CONSIDER IT AN EMERGENCY." So I got to have the test that day and I said to the technician "Are you missing your lunch to do this?" and she said, "oh no I had my lunch, no problem," and so I told her what had happened and she said, "we always reserve a certain number of slots for emergencies but you can always get in in a hurry if you need to." So I guess I have some real resentment that you have to go through that when I guess, I was thinking about—⁶ how reasonable I am. I get reasonable and then I get mad because being reasonable sucks. [C - mm hmm] I mean I have a basic belief that if everyone were reasonable [c- mm hmm] that the world would operate pretty well and you know everything would be ok. But in fact sometimes being reasonable is not the thing you need to do so then you get punished for being reasonable or at least that's been my experience but in this case I did get what I wanted [C- yeah] and we certainly learned from this so that when Gary went through all of this we were much better prepared.⁷

[January 7, 1996]

⁶ Three dashes indicate a short pause.

⁷ Mary's husband underwent treatment for cancer after Mary and is now in very good health.

There is a quilt called "Rediscovery" (Figure 7) that shows the theme of empowerment. Mary described "Rediscovery" like this:

I am in the process of rediscovering myself. In the past, I spent my energy and passion in working to please others. As I become more centered, I realize that I can work to please myself" (Holdgrafer 1995).

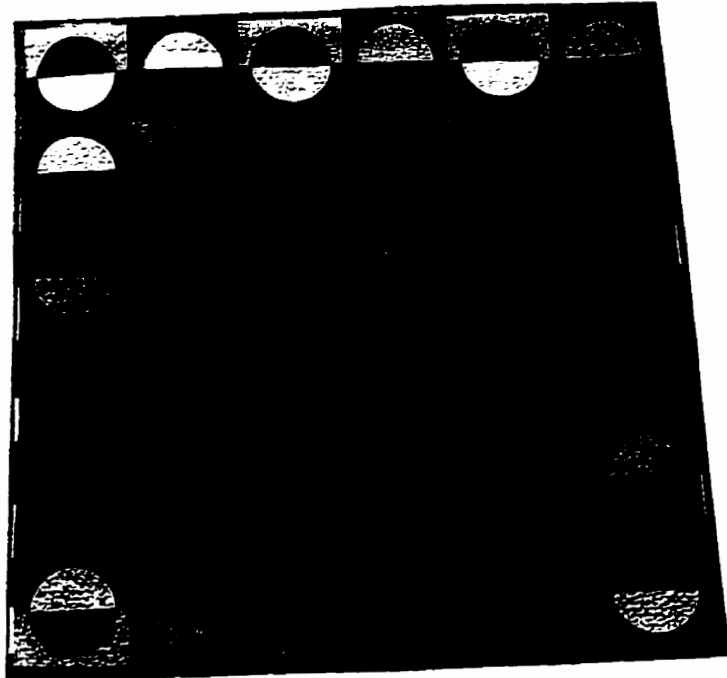


Figure 7
"Rediscovery"

Mary and I talked about why one would gather a life history and why one would tell a life history. One reason Mary had for speaking to me about her breast cancer and quilting experiences was that when she was diagnosed with cancer there was a time that she sought out the experiences of other women who had survived breast cancer. The written experiences of others were difficult to find. The types of information Mary found were medical texts, journal articles, and other factual information that told her about the disease but not about how people dealt with it, how they felt, and how they survived.

m- hnm, Well, at the time I learned all the details. I learned about the variety of kinds of breast cancer because breast cancer is not just a single illness. I learned all the types and all the stages and all the treatment options. I gathered consumer information and all toward the end of making a good decision about my own treatment. I got all the best books that I could find. Gary and I went back and met with Dr. W again, we asked her about questions that we should ask the surgeon. It wasn't until later that I started finding out anything about anybody's experience with breast cancer, so what I got was the clinical information, the science.

[January 7, 1996]

In Mary's search for stories about the experiences of other breast cancer survivors, she did not at first realize the importance she placed on this type of information until we were involved in the life history process. This is a second reason for telling a life: telling the life may help the teller to remember or to rediscover.

M- ... I really was reaching out and I wanted to know her mother's experience through her and I didn't feel like I could call her so what I said before isn't isn't

really, its not that its not true [C- no] that I have a memory now of something [c- of wanting to know [M- yeah] even though you didn't know it at the time] yeah or that I didn't know it a few minutes ago. [C- yeah] I don't know, I think sometimes that I felt like I didn't really have any information. I know one of my continuing complaints was wanting to talk to somebody who'd gone through this but in fact I talked at length to Gail and I did talk to her mom. She continues to be really important in my life because here she is 30 x years after the fact and she's healthy and alive [C- yeah] and she had a very aggressive cancer and she's done well you know. She's lived well so she's important to me.

[January 7, 1996]

In this chapter I have presented some of the stories that Mary shared with me. These stories were shared in response to my direct questions. Much of the content in this chapter has been about Mary's quilting and breast cancer experiences. In the next chapter about Mary H., I present stories which were not elicited by me in any way other than my very presence as a listener.

Chapter Six

"The Healing Was In The Making"

My work with Mary H. was a *collaboration* as it is defined by Sally Cole:

Reflexive ethnography involves the 'other' as an integral part of the definition of research problems, the representation of historical contexts, and production and interpretation of texts (1992:125).

One thing that demonstrates the collaborative nature of my work with Mary was that at my second interview with Mary she came prepared with a list of topics she wanted to discuss. About halfway through our series of interviews, on page eighteen of the thirty page transcript of our interviews, we made the transition from my list of questions and discussion points to Mary's list.

C- ...Ok let's go to your stuff now

M- OK, are you sure?

C- That was the bulk of mine, yeah

Mary's list of discussion points was probably the most important part of our work together. The list was revelatory to me of several things. First, the points on Mary's list indicate the topics that are important to Mary. The list was generated by her, it contained points that she wanted to discuss, not points that I asked about. The list gave me a little information about Mary's thought processes as this was a list that she prepared over a few days after our first interview together.

The following are excerpts from the discussion Mary and I had which was generated from her list of topics. I have inserted my own comments after each discussion point to provide contextual information for the reader. All of the points from Mary's list are from our January 7, 1996 interview.

This is the first point from Mary's list:

1. M - One of the things I was thinking about was how did I make the change from traditional quilting and being interested in quilt history to doing non-traditional and art quilts and why is it that I'm so driven to do art quilts and what keeps calling me back to traditional things?

This is a question Mary is asking in light of our conversations. What I hear Mary saying in this question is that the reasons for making traditional quilts are different from the impetus for making art quilts and that she is drawn to working on both types.

2. M - I guess we haven't really talked very much about how my quilts got made for the show from this experience [c- no] so there'll be more to do about that.

In the second point Mary is talking about her show of quilts. This was a display of thirteen quilts which took place at Mkasi Salon in Edmonton Centre⁸ from November 19 to December 30, 1995. The show was opened with a celebration which was attended by family, friends and strangers. Following this show the quilts were moved to the University of Alberta for a second showing in the Home Economics building. The pieces have recently moved to various venues. Some of the pieces went to the Glenbow Museum in Calgary to be shown as part of the "Healing Legacies" art show.⁹ Other pieces are currently on display at the Misericordia Hospital in Edmonton as part of their satellite exhibit of the "Healing Legacies" show.

⁸A shopping Centre in downtown Edmonton.

⁹ This is an international exhibit dedicated to the subject of breast cancer.

3. M - I have this note about spirit voice and does everyone have it and thinking about how Mabel Mackay as a child knew, she had a single purpose in her life, to be the dreamer and and I haven't gotten far enough in the book to know if she ever got sidetracked, it doesn't seem that she did. [c- no I don't think she ever does] And so then I was trying to say I believe that I have a spirit voice and I believe that I have been sidetracked so that sometimes I can't hear it or haven't heard it but I'm not a dreamer. [c- mmm] I'm not a healer and so I was trying to say what I am and the words that keep coming to me is that I see and I know.

Mary is referring to the book Weaving The Dream by Greg Sarris (1994). This book is about the life history of Mabel Mackay, a Pomo basket weaver. After my first interview with Mary I loaned the book to Mary. I thought she might enjoy it because Mabel is a basket weaver whose designs come to her from a spirit voice. Mary was prompted by Mabel's story to try to describe to me her own ways of knowing. This is what she means when she says "I see" and "I know," these are her ways of knowing how she will make her art quilts and what designs she will use.

It was while we were having the discussion generated by Mary's list that I found out how the quilts are created. One thing that happens in Mary's creative process is the seeing that she begins to discuss in point number three. Mary told the following story about a particular quilt she struggled with for a long time until she kind of let herself listen to the quilt.

M- ...one of the things that I discovered as I've become more easy with this is that sometimes I had to just wait. So you know the quilt that I cut in two? Well I'd get it out day after day get it out, I'd lay it out, I'd look at it an I'd talk to it even and say 'I don't, you know, there's more here an I don't know what it is, I can't tell what it is. I can't tell what I'm supposed to do here but this is not finished, there's more here, I like you.' And that was one of the things that, this sounds weird, but I kept saying to the quilt over and over again 'I like you, show me what I'm supposed to do here' and then one day the quilt said, "cut me apart" [c- ooh] and without, like I didn't hesitate. I picked up the scissors and I did it and then I didn't know what to do and so I had to wait some more but by that time it was ok. It was like I'd learned this lesson

4. M - Ok alright so I mentioned about people at my show that cried and were touched with my work and so I have a note here about how this has given

me opportunities to connect with other people who are touched by what I've done. Not just people who came to the show but people who volunteered to help me like my friend K.W. [c- mm hmm] who came several Saturdays and just helped do hand sewing and stuff like that. [c-mm hmm] And she's not the only one L.L from the store and M came a couple of times and with some of those people there was some really deep soul kind of connection. Like, what women are supposed to do and share together, [c- mm hmm] not my work [c- no] but sharing together in this way is something that we need to have more of [c- mm hmm]....its like as you work with your hands then you open up your heart

As Mary was making the pieces for her "My Healing Journey" show, close friends and acquaintances helped her prepare. The sharing she discussed in point four took place during those times when other women went to Mary's home to help her sew.

Mary calls her life a journey. In our work, we discussed a fairly specific portion of that journey beginning with the breast cancer diagnosis through treatment, physical recovery, discovery, rediscovery and on to the present, Much of Mary's recovery and discovery came to her through the process of creating quilts which depict her journey. The creation of the quilts culminated in a showing of the quilts at a Salon in downtown Edmonton. Mary and I discussed the reactions of people who saw her show.

One of the things that I noticed, I don't know if I've said this to you before but at my show some of the people who we've known for years and years who were there had nothing to say. It was almost as though by having my show and being as open as I was about my feelings with the pieces of work that I sort of stepped over some boundary and that I was acting in a way that was inappropriate. And I guess I noted that [c- mm hmm] and I don't want to do anything about it because I'm not going to change. [c- mm hmm] I mean I am gonna change but I'm not gonna change for them but I noted that. Oh there were people who had nothing to say, I mean 'thank you for inviting me' was about as much as they could get out. You know and on the other hand there were people standing there with tears streaming down their cheeks trembling and holding my hand saying "thank you for doing this I feel so close to you" [c- mm hmm].

5. M - Ok so, I have a note here about why do women who haven't had breast cancer make breast cancer quilts? Which we've already talked about a little bit and how is that different?

One thing Mary is very curious about is the fact that there are people who make breast cancer quilts without having had

breast cancer. Mary wants to know what motivates people to do this, what motivates someone who has not had breast cancer to make a breast cancer quilt? This is a question that Mary and I have pursued in other research that occurred at the same time as the research for this thesis but as research that is separate from this thesis.¹⁰ In the focus groups that were conducted for this thesis there was one participant who is a quilter and has not had breast cancer. She was connected to breast cancer because she nursed her sister-in-law through the disease.

6. M - ...its about Haven and that may be a thing that'll take a long time

Haven is a place to which Mary has gone a few times each year for the last four years. It is located on an island near Vancouver Island. It is a haven for Mary. Many of Mary's healing experiences have been influenced by things she has learned and done at Haven.

7 M - The other thing I have is mythology and we've kind of talked about that too [c- mmm] and I'll keep working my way through that book and it seems like that's part of, you know, the stories are part of the women thing that also has to do with working with your hands and telling the stories of the culture

Mary is talking about female mythology and a particular book, Women Who Run With The Wolves (1992) as it has influenced her quilting and how she views her own experiences.

Some of the questions that came up in the discussion between Mary and I were the following:

1. Why is quilting so healing?, or Why do women find it healing to quilt?
2. Is having a place set aside for quilting important to other women? or, Do other women find it difficult to quilt when they do not have a place set aside?

¹⁰In October 1996, Mary and I are presented our findings to five separate audiences in Edmonton and Calgary, Alberta.

3. How do women who quilt make decisions about their own treatments for breast cancer?
4. Do women fear a recurrence of breast cancer?

I decided to hold a focus group with other women who have made breast cancer quilts to see if other women had similar experiences going through the medical system as breast cancer patients, and to see if answers could be found to the above questions. Following Geiger, it seemed appropriate to seek out the stories of more than one person in the context of a particular issue which was breast cancer and quilting. Some answers to the questions were found in the focus groups.

Life history studies that include the narratives of more than one woman or of several women or men from a particular society or ethnic group afford opportunity for internal comparisons (Geiger 1986:343).

To find women who were interested in participating in a focus group an ad was placed in local quilt guild newsletters requesting a response from women who had an interest in breast cancer and quilting. Five women responded to the advertisement. A focus group was organized to take place on March 7, 1996, in my home. Four women, not including myself and Mary H., had committed to attending. Two women attended, in addition to myself and Mary H. The first woman, G.E., is forty-nine years old and the second woman, L.L., is forty years old. Both L.L. and G.E. were diagnosed with breast cancer. G.E. made her first quilt at

age twelve and considers herself to have been an active quilter for the last seven or eight years. L.L., on the other hand, has never made a quilt but she is a member of the quilting community. L.L. takes quilting classes, has piles and piles of fabric that she has purchased for quilting as well as a vast collection of quilt books, articles and photos.

A second focus group was organized to take place on March 15, 1996, at my home. The impetus for a second group was that there were three women who had not attended the first group, all of whom expressed interest in coming to a focus group should another one be organized. The participants at the second focus group were L.R. and V.M., in addition to Mary and myself. L.R. is sixty-five years of age and V.M. is sixty-eight. Both L.R. and V.M. are quilters. L.R. was diagnosed with breast cancer twenty eight years ago when she was thirty seven years old. V.M. is not a breast cancer survivor, her link to the disease is through her sister-in-law, whom V.M. nursed through the disease from diagnosis to death. One thing that stood out in this focus group was that most participants arrived with an emblem identifying themselves as quilters, either through photos, quilt blocks, a tote bag or an article of clothing. Przybysz notes this phenomenon among quilters,

More often than not, festival participants arrived clutching a bag -often a quilted bag- out of which they eventually produced some kind of quilt. And if they hadn't brought a quilt to show, they were frequently wearing one- a quilted vest, a patchwork skirt, a dress with a Seminole Indian pieced-style bodice, or an embroidered and embellished denim jacket (Przybysz 1993:177).

There were several answers to the first question: Why is quilting a healing activity? One answer had to do with quilting being an activity that is often done in groups. It is the getting together with other women that seems to be one of the healing factors. Two of the women spoke about this,

G.E. - Oh well our group is just hysterical, we just, sometimes we don't quilt at all, we just talk. We go in, there's about fifteen of us, we just talk talk talk talk and then we all go home again and we get so excited for at least a week before we do this. Can't put my finger on why. But we all really love it but its a very very laid back no pressure group. You can be completely useless, you can never sew a stitch in your life but we still all really enjoy it. Its wonderful, its a lovely group. So it wasn't like you'd go there and you've got to produce a perfect square that somebody's going to judge, that would be the end of that, I could never've done it. It wouldn't have been therapeutic at all [mm hmm] I'd a been in a panic. There's no doubt its more than just the sewing its the getting together with people

L.L. - Actually you know what, I could care less if I ever opened up my sewing machine. I just like the social thing [- yes]

M.H. - ...mostly I work in isolation. I have a studio in my house and that's where I work and I had several people say if you need help with hand sewing or anything let me know and I'll come [well] and so I asked some of them to come and help me and they did. It was some of the neatest time [oh I bet] getting ready for the show and sometimes we'd just sit and cry and cry. [oh] You know something would happen or a question would be asked about why did you do this this way and I'd start to explain and then we'd both be crying. Those were really precious times to me, though because it was, it wouldn't have been the

same if I'd just been doing it on my own. [no oh no you need to share] You know you need that connection.

[March 7, 1996]

Some of the following comments made by L.L. demonstrate that as G.E. says above "There's no doubt it's more than just the sewing." One can see from the following comments from L.L. that beyond sewing quilts she is interested in fabric, quilts, quilt books, pictures of quilts, and in the connections she has made with other quilters.

L.L. - Me turn, ok I'm 40—three, I was gonna say 41, I'm 43 and I've always liked quilting. I've always taken pleasure in looking at quilts and stuff but Mary taught me a course.

C.D.- mmm

L.L. - Not last November the November before.

M.H. - Before, mm hmm.

L.L. - So its just been a little over a year an I took the twelve week course or whatever and I really really enjoyed it and I'm a real sigh it's gonna sound really stupid but I really enjoy buying and having a collection of books on every quilt, any kind of craft that I do. But I hate reading them, like I hate to read

G.E. - I've read about people like you

L.L. - I mean, I like to have my books and I like to be able to flip through my books and look at all the wonderful things. I'll photocopy things and stuff but don't ask me to sit and read a bloody book to find out how to do something.

C.D. - Oh yeah

L.L. - You know if I can sit and take a course or you can show me what to do or I can watch a video. Like every Monday I tape "Sew Many Quilts," every Tuesday I tape "Sewing with Nancy" and every Wednesday I tape laughing "Quilting from the Heartland" Everybody laughing Don't ask me to read a book but I have millions of books at my house.

M.H. - and piles of fabric

L.L. - Oh Much Fabric laughing and Do you wanna know how many quilts I've made in my lifetime?

C.D. - Yeah

L.L. - None.

G.E. - Oh!

L.L. - I I kinda did my sampler for my course and I never did finish that. Mary said she'd give me a refresher because I kinda remember the basics but I can't remember the the after I get it together part. I also took like a stained glass quilting course and stuff but I mean I just I don't know how to put them together. I know how to make the blocks and stuff but I don't know how to put them together but Mary's gonna refresh my memory. And that's about it. It's something my mother-in-law and I have in common because I got her to start quilting and we can talk about quilting and read each other's books and stuff and we have something to talk about.

[March 7, 1996]

Przybysz discusses the importance of fabric to quilters and the fact that it is more than just the sewing,

All the talk about "not being able to keep my hands off of fabric" and about women secretly "stroking" their fabric that goes on at quilt festivals seems to indicate some women find working with fabric an autoerotic activity. And the feeding, touching, and sharing so characteristic of quilt-related activities undeniably contribute to a kind of homosocial bonding that has flourished with the contemporary quilt revival. (Przybysz 1993:181).

What Przybysz says is true for the quilters that I interviewed. L.L. told us that she loves to collect fabric and quilt paraphenalia and all the quilters talked about the importance they placed on the connecting with other women that comes through their quilting activities.

L.L. is very involved in a quilting community. She is a member of a quilt guild, she had financially invested in a substantial supply of quilt books, supplies and fabric but she has never completed a quilt. To me, this indicates that L.L. is finding some satisfaction from being part of the quilting community and in collecting the objects and symbols associated with quilting that are for her, for the time being, enough. That is, at the time of the focus group, although L.L. would have liked to have completed a quilt, it was not imperative for her to finish a quilt in order to feel satisfied. The process of quilting was enough, completion was not necessary.

Another reason for the desire to quilt is the longevity of a quilt and the fact that it may be admired by several future generations. Quilting seems to be a way that women urge themselves to do their best without worrying about being perfect. The following excerpt speaks about this,

G.E. - But when you look at some of the very old quilts people made, a lot of them are just full of what we would call mistakes. [mm hmm] But you don't look at them and think 'oh dear look at that' you just think "oh dear isn't that sweet somebody made that and its still around" [mm hmm] We're much too, much too hard on ourselves aren't we [yeah] I mean I think you should strive to make it as well as you can but you don't have to kick yourself if it doesn't go quite right [that's right, that's right] so I mean who's checking on us? Is somebody checking? Is the quilt police around?

[March 7, 1996]

Some of the women said that quilting is a healing endeavor because in quilting they feel that they are creating

something. It is the process of creating and completing a quilt that is satisfying. In connection with the creative aspect of quilting, the women mentioned the stages of quilting. It was explained to me that quilting is done in somewhat discrete increments. It is the completion of each stage that provides some satisfaction. The women felt like they were 'getting something done' with the completion of each stage. The following are descriptions from two women about the stages of quilting:

G.E. - Well for me its because I'm actually creating something. I don't know what it is about me but I like to rush at everything. But I really like starting on a quilt that I know will probably take me a good year from when I first start thinking about it to when I actually finish it and I like having those long projects like stripping a piece of furniture. You know you're not gonna just do it and go on with the next thing, I don't know why, its very nice to be, well especially with my job where you never seem to finish a blinkin thing, you actually finish something. I mean at every stage, you act. Its also in nice satisfying stages. You pick out the fabric and that's an exciting stage and then you cut it all out and it's another nice stage and then so even though you haven't finished it that's sort of the completion of that stage. [mm hmm] You get these little ending parts and then there's the sewing up of all the squares and you make the first one its very exciting and then you put the quilt top together and that's another exciting thing. You admire that stage, then you get the backing and then you quilt it and then you put the binding on and then you take the basting out. Blimey, there's so many exciting parts.

M.H. - It seems to me that there's a rhythm to quilting. That part of it is the stages but its also the work in between. The rhythm of it is really nurturing and musn't be rushed. It's a time to be quiet for me.

G.E. - Yeah, you actually have to concentrate, you can't muck about can you?

M.H. - So on the one hand there are the social times when you get together with someone else to quilt but then there's also stuff that you need to do quietly.

[March 7, 1996]

One woman described quilting as a process of self discovery. She describes the learning as that takes place and how it is connected to learning something about herself,

M.H. - There's something about learning about yourself as you do this too. Like I find that it doesn't matter what the project is I'm learning about quilting all the time and I also learn about myself. I learn about colors and how I am in relationship to different colors or sometimes its because I have to figure out something and try something new and there's some ah hah about me in there that seems important.

The second question I asked was How important is it to have a place set aside for quilting? I know that this was really important for Mary and that she was much more productive as a quilter once she set aside a studio space for quilting in her home. When this issue of place came up in the focus groups there were a number of different responses. One woman described her lack of space and the reason for it,

L.L. - Well it takes a lot of time and energy for me to figure out that what I'm gonna do next. Like I wanna quilt, but we're in the process of - every time I get semi-organized in my basement something else happens. Like we just moved my son downstairs so all the boxes that were in his room are now out and my sewing, I just kind of I call it my fifteen year room because I been living in the house for fifteen years and hucking things in there. laughter [oh dear] So now I've gotta go in and sort cause I don't throw nothing away God knows I might need it sometime.

M.H. - So you have a hard time getting to sewing because [-mm hmm] even though you have a place you don't have a place

L.L. - Well I really don't. I'd have to set up a place now. My fabric room is so full of fabric. Everyone laughs

G.E. - What you might need is a deadline or something because...

L.L. - an I have...

G.E. - You always put other things first don't you?

L.L. - Well what my biggest thing was, I wanted to make, you know the jumper M had on at the quilter's guild meeting I wanted to make one of those to wear to Paris cause I want just some nice little thing that I can wear to Paris, that I did, you know while I'm gone, but god I'm never gonna get it done I only have two weeks.

M.H.- I don't think you're gonna get it done

L.L.- no

[March 7, 1996]

One of the other women does not have a space set aside for quilting but she still accomplishes a lot of quilting. She spoke about her method,

G.E. - That's why I like having quilting in those small plastic hoops or square things actually because its right in the living room in my way or that what I can do is pick it up and just do it.

M.H. - so you're a hand quilter then

G.E. - Yeah Oh yes. I'm not very good at machine quilting. I need to have it right there otherwise I wouldn't go downstairs and I can't quilt on a big frame in the basement because the cats think its a trampoline and they sleep up there, they do!

C.D. - I believe it.

[March 7, 1996]

One woman gave a detailed description of her quilting area. She spoke about her space with obvious pride, at one point she invited all of us to visit her and see her quilting area anytime. Toward the end of her description she talks about what it was like to have no space or an inadequate space.

V.M. - Well, you know I'm one of the world's luckiest women and that's why I've got eleven unfinished tops ...I have this space because it's all this at the back, there's a big walk-in closet with shelves and a coat rack that had to be for storage things. Now this is all a windowless space. But you know the table they have in Quilter's Dream I said to me husband "Oh that's really what I need" so he built this thing four feet by eight. we walked into a store somewhere and we bought a piece of melmac or something and it had one little corner that was a little broken so we took it for nineteen dollars. Then I have the folding table that is also from Quilter's Dream. We built this and we couldn't put it into the house, we had to hire two men to come. It's like building something and building the house around it. I wanted a light box so what did he do he built me about a four foot by three foot and then he dropped the glass but anyway and then there's the fluorescent bulb in the corner. And here is the bookcase and he made the shelves, put the shelves into the bookcase, so I could keep all my books and things in it but he didn't make the spaces high enough so it would take tall books so it had to lean over. And then we bought cheap cupboards and we put the base cupboards here and there's one and two and one at the bottom and the top. So I have my fabric in that. In the corner I have a tall thing from Ikea which has still got some fabric and everything in. And here I have sort of a computer thing, table so that my chair is here and I have a t.v. here. Here's my omega board, ironing board. Then I have the Serger here and my Singer here. It's very little space in here, this all gets pushed together. I have a flannelette sheet on the wall to put things on. ...What a blessing! I never had it and we've been married, we lived in lots of places, never had space for V! It's so important because it's my space!

M.H. - and don't you think that women are so quick to not have space

V.M. - Well yeah because I haven't asked for it

M.H. - right

V.M.. - because I didn't think I deserved it. I was supposed to make all the kids clothes, the coats, my evening gowns, everything and I had a small room about eight by eight and it was cold and the washing machine was in it, the freezer, whatever storing the sealers, the canner etc. And now I have all this wonderful space, people make rumpus rooms down here. When you're seventy five you don't need a rumpus room!

[March 15, 1996]

Przybysz writes about space and what it means to quilters:

Women's efforts to appropriate space - room of their own - for their quilt making activities seems very much linked to a desire for an experience of time that is uninterrupted, and an experience of self as sensuous, desiring and whole. For the many women whose bodily and social energies are constantly at the service of children, husbands, and/or employers, and hence fragmented, the experience of working in a concentrated manner on anything is something they crave. In addition, each of the activities involved with quilt making - designing, ironing, cutting, machine sewing and hand sewing - induces various body experiences (Przybysz 1993:172).

Przybysz' comments address questions one and two: Why is quilting so healing? (Why do women find it healing to quilt?) and, Is having a place set aside for quilting important to other women? (Do other women find it difficult to quilt when they do not have a place set aside for the task?) Przybysz is saying that the need for space is paralleled by the quilters' need for time. Quilting is healing because women make time and space for themselves to re-energize their bodies.

The third and fourth questions for which some answers were found in the focus group were: How do women who quilt make decisions about medical treatments for their own breast cancer? and Do women fear a recurrence? These questions and their answers are presented together because the two questions are tied together by the fact that women make the choices they make in the hope of averting a recurrence.

There was quite a range of experiences with treatment and outcome represented in the focus groups. One of the women who participated in a focus group was diagnosed and treated in 1967. It was her experience that almost everyone she knew in 1967 who had breast cancer also had surgery and radiation treatments. This woman's story of her diagnosis and treatment tells of the decisions she made and her rationale for making them.

L.R.- Well I had cancer a little different from most people. you see they removed a lump that I had when I was eighteen. And of course it kept getting sorer and sorer. And then my physician says "I think we're gonna have to do something about it. We're going to have to look into it, why is it getting sore?" But anyway, there was no problem, there was no malignancy or nothing. Then, of course, as you all know, when you take something out of something it's definitely going to fill up with scar tissue. And that's what happened. Of course, then it got sorer and sorer again, to the point where I'd come home from work and I'd have to go into the bathtub and lay down on my side, and the hot water took some of the pressure away. So then, when the surgery was done, they removed the growth and they left it (the breast) on for now because it was going to the pathology lab to be checked to see if there was anything. So they found cancer cells, not in the lump, but around the tissue that was there. My doctor came back to me and he said "Well," he sat on the edge of the bed, "What do you want me to do?" And I said "Take it off because I don't want none of this half business stuff. Take the whole thing off." So then of course they sent that (the breast) back to pathology to check to see if there was any cancer closer to the part. I avoided all the radiation. There was no chemo I don't think. Chemo didn't come into effect until much later it seems. So I didn't have nothing like that except I was in the hospital for two weeks....

[March 15, 1996]

One thing that was common to all the women who had been diagnosed after 1986 was a dislike of the drug Tamoxifen. There were several stories about Tamoxifen. Here are a few examples:

L.L. - ...and they gave me all these steroids and I gained seventy pounds. [tsk] I mean I've always been a big girl [oh] but seventy pounds I didn't need. [oh dear] Of course the steroids didn't work so then they said if the steroids don't work we've gotta take out your spleen. So then I went into the university hospital and had my spleen taken out. Then they had to wean me off my steroids, like they dropped me from 150 milligrams a day to twenty milligrams a day in the hospital and this doctor couldn't figure out why I was all upset and I kept tellin him you can't drop me that many steroids in one day. "I'M THE DOCTOR AND WHO DO YOU THINK YOU ARE" so I got on the phone, I go right to the payphone. I had one quarter, I phoned the cross¹¹ and I said "you get my file, you look and find out what doctor it was from the university that put me in here to begin with" I said "and I want her name. " I got her name and I went back to the headnurse and I said "I wanna see this doctor and I want to see her now." She came up and I said "listen" I said "I know that you can't drop me from 150 milligrams a day to twenty but this doctor will not listen to me." She said "well of course not" and I would just sit there and just be crying all the time you just look at me the wrong way and I'd be in tears.

- yeah

L.L. - It was awful.

- yeah

L.L. - So she went out and talked to him and they finally boosted it up again but it took six weeks to get off my steroids. Then I had I had to have my next two sessions of chemotherapy and then instead of letting me lose the weight that I had gained with the steroids they put me on tamoxifen

M.H. - on tamoxifen actually said in unison with L

L.L. - And once you're on tamoxifen you can't lose weight till you get off tamoxifen so

M.H. - Well, if then

L.L. - You know so I said,

G.E. - Did you have to have more chemo?

L.L. - Well they gave it to me on my third one,

G.E. - mm hmm

¹¹Cross Cancer Institute, Edmonton.

L.L. - so then I had three more to go so I had my last three and then they put me on tamoxifen my very next visit

G.E. - Are you still on it?

LL.- yeah

G.E.- Are you really? I tried it I just couldn't stand it.

L.L. - Oh I can't stand it either but I always think that obviously something's working so I'm not one to change something that's not broken

G.E. - No, no, I know I just felt so horrid.

L.L. - And if its causing me from not getting cancer then I'd rather be fat and alive then skinny and six feet under. So I don't have any choice so I just take it. Yeah but its maddening cause I say to Dr. S about four years later, two years later I said "Why can't I lose any weight?" she says "well I guess we shouldn't a put you on the tamoxifen so fast."

Everybody - oh, oh , heelloo, oh

L.L. - So yeah too little too late

M.H. - That really speaks to how my experience at the Cross was there were a lot of people giving lip service to wanting me to be involved in decisions about my treatment and that kind of stuff but the fact of the matter is I was at their mercy.

L.L. - Yeah Because you don't know.

M.H. - What do you know?

L.L. - Like if I knew then what I know now I would've said 'Let me lose the seventy pounds cause it would have eventually come off. Well hopefully with the steroids, but the tamoxifen ...

- yeah

L.L. - ...just made it near impossible

- yeah

M.H. - Well and I took tamoxifen for three and a half years kicking and screaming and saying that I shouldn't be taking it and then finally saw a doctor who said "oh it was a mistake to have prescribed that for you".

L.L. - Why?

M.H. - Because I was not menopausal when they put me on it.

L.L. - Well neither was I.

G.E. - There is no rhyme or reason to this they just...

M.H. - Well I just I find it very frustrating that its so hard to know what's the right thing and

G.E. - But there is, I don't think there is a right thing that's the whole problem isn't it?

M.H. - Well, I guess I had the experience of knowing intuitively what the right thing was ...

G.E. - yeah

M.H. - ... and not being listened to

G.E. - Well I I talked to Dr. S about tamoxifen because she wanted to put me on it and I said "well look I've just got to have", this was the end of May I'd had my last chemo, I said "I want the summer off all these drugs" I said "I've just got to have a summer free of drugs" and she said "that's a good idea" so I did and I started tamoxifen, I don't know, September or something.

L.L. - Are you still on it too?

G.E. - No I only lasted till December. Oh I was horrible. I could hear myself talking to the kids at school and I thought "oh I can't be this person." I don't know really whether it was that or whether I was just exhausted and you know you don't know what you are when you finish chemo. You have no idea what normal is anymore, and then you're menopausal, you know what on earth is normal?!

L.L. - Well you see I got my breast cancer when I was only thirty five.

- yeah so you shouldn't..

L.L. - So they put me on tamoxifen when I was only thirty six or thirty seven.

G.E. - yeah well it does seem strange

L.L. - Well I go see her on Tuesday I'm gonna have to ask her

G.E. - Yes, And then when I came off it, I said I can't help thinking that if I were to eat loads of broccoli and carrots and things I would be doing myself as much good as tamoxifen and she said "well to be really honest you could well be right" she said "We don't really know but its one form of insurance" so I thought well broccoli and carrots for me.

[March 7, 1996]

All the women spoke about what it is like to live wondering whether there will be a recurrence. One woman spoke about the feelings she regularly experiences.

M.H.- So you're healthy now you figure?

G.E.- Oh who knows, I'm in a constant state of panic. Actually I just finished my latest panic. With the three month checkups I never actually lasted more than two months, never!

M.H.- Is that right?

G.E.- Oh no, I was just in a panic. Actually I have coped with being past it much worse than I coped with having it. When I had it, I got on with it but when it was over, the treatment, oh dear, that's when I fell apart..

M.H.- For me it's sort of been when I was in the middle of chemotherapy I had to keep going. I had to do everything that needed to be done

G.E - Yes

M.H. - I was going to do that [G:Yes] and, it was, for me, after the fact when it occurred to me that I might die.

G.E. - Yes or you might get it again. All the time I was going through it I was psyching myself up for having to do it again if I ever had to. I was thinking "Can I handle this again?" You know I would do it again, no doubt about it. But oh, the panic of every ache, every single ache. In fact I was certain I had it in ? At the time when I was thinking to myself, "this is it I have got cancer again, G,

why wouldn't you have it again?" I think "No" I said "What makes you think of course you've got it again, what else could it be?" So back to the doctor, he said "Well, I'm almost certain it's just a pulled muscle." I said "Well o.k., I'll go along with this line of thinking for up to a week but beyond that I can't. I cannot possibly go along with it, we have to do something!"

M.H.- mm hmm

G.E.- I just can't help it you know. I guess gradually I will get used to it, I don't know. It's not that long, it's only about eighteen months since I've finished -- so it's pretty hard, I can't distance myself from it at all.

M.H.: Well, nor should you. I think what you have to do is kind of balance it and sometimes I feel balanced about it

G.E. - yes

M.H. - But I don't think that we can afford to not pay attention to every ache and pain.

G.E.- and the trouble is, I said to the doctor " you know, I can't go home and change anything about my self. I was already exercising, eating properly according to all the things they tell you anyway." I said, "there's nothing I can think of that I would change, I'm gonna go back and just carry right on the way I was." So then you're scared because you think "oh dear then they'll come up with something they think has got something to do with breast cancer" and you think "nope didn't do that anyway, nope didn't do that"

M.H. - mm hmm

G.E. - But it is scary when you are surrounded by people who are getting it again for no apparent reason.

M.H. - Well and when you have friends who have things like what they thought was just a back ache and it turns out to...

G.E. - I know I know

M.H. - I have a friend who had a sore arm and she was spending a lot of time doing this gesture you know and not thinking that it was anything cause if you were gonna have metastatic breast disease you wouldn't think its gonna be in your arm.

- no

M.H. - Well it was and by the time they found it and diagnosed it, it had spread basically through her whole skeletal system and she's a young mom with little kids

G.E. - oh blimey

G.E. - This is why you can't ever rest, there's no way you can ever say "oh well because of such and such I don't have to worry" because there are absolutely no rights or wrongs or they really don't know. Nobody knows.

[March 7, 1996]

It is interesting to compare the above passage about the fear of recurrence with the following passage from the woman who was diagnosed and treated in 1967.

L.R. -I realized the possibility that it could come back elsewhere. Up to this point in time it hasn't and I don't think it will. That's what I'm hoping for, you know I think you sort of always have to think positive when it comes to that.

The two passages are very different. The panic felt by G.E. is apparent in her story while the calmness of L.R. comes through in the conciseness of the text and in the firmness of thought. Possibly the passage of time without a recurrence brings some confidence. G.E. pointed out that it had only been eighteen months since her treatment ended and G.E. and M.H. also point out that they are surrounded by people who have had recurrent breast cancer and by stories of people with recurring cancers.

Chapter Seven

Conclusions

In this final chapter I will review what has been discussed in the preceding chapters. I will also identify the ways that the stories of the two Mary's are, in my opinion, linked. Finally, I will provide a brief analysis of the stories of Mary Holdgrafer and the focus group participants; this brief analysis will range from a simple identification of themes that emerged to some discussion of various themes.

After I collected data from Mary L. and Mary H. I looked at their stories and I asked myself, How are these stories linked? When my advisor read the first draft of my thesis she asked me the question, What is the connection between the stories of Mary L. and Mary H.? My work with Mary L. has informed my work with Mary H. There are several ways that this 'informing' took place. Firstly, I did not know Mary L. prior to our working together but I did know Mary H. The prior relationship in one case and lack of it in another influenced the questions that I chose to begin each initial interview. The fact that I began my work with Mary L. by saying:

C.D. - O.k. I don't know anything about you [M.L. - You don't know anything about me] not really, like where you were born, so you could start there.

demonstrates my lack of intimate knowledge of Mary L.'s life.

Compare the above to the opening question I asked Mary H. at our first interview:

C.D.- January 2nd 1996, it's sort of historical, just pass over anything that you don't think is relevant because this is just sort of generating more questions and information etc. Then it'll go into contemporary or current. Was quilting a family tradition?

In the above passage I am telling Mary H. that I want to begin with her quilting history and move onto the current role of quilting in her life. I did not have to begin by asking about the details of Mary H.'s birth because I already knew that kind of background information. I felt I had some knowledge of Mary H.'s life and that when and where necessary I could ask specific questions to fill in gaps in my knowledge. Whereas with Mary L., I felt that I knew almost nothing about her personal history and as a result I wanted to start from as far back as I thought it reasonable to ask. Throughout the data collection, transcription and analysis of the stories of Mary L. and Mary H. I noticed that my questions seemed to derive from my prior relationship with Mary H. or lack of a prior relationship with Mary L.

The second and most important way that my work with Mary L. and Mary H. informed each another was through the issues relating to oral history and Aboriginal women's history and biography that structure my chapter on Mary L. To review,

the following are the points about issues that are relevant to the current state of oral history today, that were discussed in "Chapter Four: Mary L."

1. That everyday life is important.
2. Too much information is written from male sources rather than written or oral female sources.
3. The life stories of Aboriginal women have much to say about Canadian history.
4. The life histories that are done with Aboriginal women, are, at times lacking in details about the context in which the information was gathered.
5. Many works on Aboriginal women are dated; the women must fit a stereotype.
6. Aboriginal women tell sacred stories.
7. Historic and social context are intrinsic.
8. Aboriginal narrators voices are often lost in biographical accounts.

I found many of the points to be applicable to my work with Mary H. I expected them to be true of my work with Mary L. and was surprised to find some of these issues present in my work with Mary H. Point number six is a good example; I was surprised that Mary H. came to one of our interviews with a note that she wanted to mention the importance of women's mythology in her life and work. Mary H. did not tell sacred stories in the same way that Mary L. did (see pp. 32-36) but

she noted the presence of sacredness and mythology in her life.

I found point number three to be true for both Mary L. and Mary H. as they both told stories, central to their life histories, about their experiences in Canadian systems or institutions. For Mary L. this was her experiences in residential school and her experiences with the child welfare system. The fact that Mary L. can now tell the stories of residential school without fears of being disbelieved or facing recrimination from the listener tells us something about the current social context in that it is now acceptable for the residential school stories to be told, whereas in the past, it was not. Mary H.'s stories had to do with the systems and institutions of western medicine. These stories also tell us something about Canadian history and the experience of women in this history and the current social context. In the past, many women would not have spoken out about their experiences in the medical system because doctors were considered authorities. While it is still true that doctors are considered to be authorities, judging from the stories told to me, women feel free to examine their own experiences and to tell them to others. Neither Mary H., Mary L. nor I have put forth any of these stories to be representative of anything but each woman's own story. Sarris has a quote about this non-

representativeness, "One party may write a story, but one party's story is no more a whole story than a cup of water is the river" (Sarris 1993:40). This is true for both Mary's, the stories they have shared with me are their own experiences and are not generalizable.

I expected Mary L.'s stories to unfold in a manner that was not chronological or linear but I did expect Mary H.'s stories to follow a linear or chronological pattern. I had this expectation of Mary L.'s storytelling because having grown up in a Metis family and community I was aware that chronology is not always important to the way that stories are structured by Metis storytellers. While my expectation for Mary L. proved to be true as her stories were linked more thematically than chronologically, Mary H.'s stories were, at times, presented chronologically but not always. Some of Mary H.'s stories were presented by her as being recalled more by event than by date. For example, when she spoke about her experience at the Breast Center, she spoke in terms of the cancer diagnosis before she spoke about the fact that it was in June 1990.

Using a thematic analysis I have made some observations about the stories of Mary H. and the focus group participants. Having the stories of the focus group

participants offered data for comparison. However, like Geiger, who found,

Two "ordinary" Afro-American women whose life histories have recently been published are Erma Calderon and Annie Mae Hunt. For both women the centrality of and structural interconnections between racism and the violence of white and black men permeates their life experiences, which include years of domestic service for white women, and provides the painful shared reality to which each responds. Yet the life courses of these women are by no means similar (Geiger 1986:347).

I found breast cancer experiences reflect a shared reality but not necessarily shared experiences. That is to say, within the shared context of breast cancer diagnosis and recovery there are shared experiences but there are differences in the experiences of each breast cancer quilter. I have found that certain common themes are consistent and recurrent in the stories of women who have made breast cancer quilts. These are themes such as voice, communication, identity, fear, support groups, death, humor, anger, the importance of images and symbols in women's daily lives, changes in priorities, and waiting. All of these are present in at least one woman's story. The themes I will highlight here are: quilting as a multi-dimensional activity, space, waiting, perfectionism, 'the superwoman', paternalism and death.

For Mary, getting started in quilting was a multi-dimensional endeavor. It was a social activity, a female

activity, and a professional activity. We know this from her story of how she became a quilter (see p. 52). Mary tells us that taking up quilting was something she did with a group of women and that it was not always important to get any work done in the group, the important thing was to come together. The story also tells us that learning to quilt was something Mary did with her academic peers and so it was, for Mary, a professional activity. Other focus group participants also spoke about quilting as a women's social activity:

I got diagnosed with breast cancer in May of 1993 and really I never slowed down with quilting. I still went to quilting, we've got a quilting group next to where I live in this community hall right next door, two seconds walk away. And I must admit lots of times I would go just to see what was going on and I wouldn't sew at all I'd just come back again but ooh it was so wonderful to go, it was so exciting just to go and chat and come home again.

[March 7, 1996]

Mary holds herself responsible for giving up quilting but her stories reveal that many of the people around her inadvertently contributed to her cessation of quilting. Mary takes the blame when she says "it was my own interpretation of everybody else's needs being more important than my own" (p.54). But we hear in her stories that even though Mary made sure that her children had space to play and her husband had space to work, there was no space in her house to quilt and nobody ever told her that her quilting was so important to the family that they should set aside a space. We also hear in Mary's stories that she

recognizes that although her parents expected that Mary would be university educated and that she would have a career, there was what Mary calls "this subtext of the mother, sacrifices and puts her husband and her children ahead of herself" (p. 54). It is interesting to note that the quilt that heralded Mary's return to quilting, that is, the first quilt she started after her breast cancer experiences, known as "Liz's Wedding Quilt" was begun on the dining room table and it is still not finished. However, a multitude of quilts, clothes, fibre art landscapes that were begun in Mary's studio have all been completed.

This theme of personal space and the value placed on women's endeavors by themselves and their families occurs in the stories of one of the focus group participants. V.M. tells us that she thought she did not deserve the space she now has for quilting. She says.

I didn't think I deserved it. I was supposed to make all the kids clothes, the coats, my evening gowns, everything and I had a small room about eight by eight and it was cold and the washing machine was in it, the freezer, whatever, storing the sealers, the canner etc. (p.93).

Even though V.M. was expected to clothe the family, it did not seem to her, at the time, unreasonable that all this sewing was to be done in a cold, tiny room that was used for storing other things. However, that is different now, V.M. is in her 70s, an active quilter and a prominent member of Edmonton's quilting community. When V.M. spoke in the focus

group about quilting space she has now she spoke for about a quarter of an hour. She drew a diagram and gave us all an invitation to come and see for ourselves.

The stories which are about Mary's experiences in the medical system are characterized by waiting. The best example is the diagnosis story in which Mary waits so long to find out whether or not she has breast cancer that she falls asleep (see p.58). A second example is from a story that described events that took place at the very end of Mary's breast cancer treatments and tests (see p.74). In this story Mary has finished all the chemotherapy treatments and she has to take one more test. At the time Mary and her husband were leaving Canada in three weeks for an eight month sabbatical. When Mary was told she had to have the test, she told the nurse that she was leaving Canada in three weeks. The nurse then told Mary that she would have to wait for her appointment until just before Mary had to leave the country so that there was no way Mary could have the results before leaving. By this time in her breast cancer experiences Mary has become empowered in her dealings with medical staff and she demands to have the test sooner. Mary had the test later that same day. In many of the stories told by the women who spoke to me about the medical part of their experience there are references to 'waiting' for the doctor or 'waiting' for an appointment.

All through my interviews with Mary the themes of the superwoman and perfectionism recur. When Mary told me about her "Another In A Million" quilts she told me that the reason she made two of them was because she "thought [she] had ruined one and it wasn't going to be perfect enough to be in the show" (p.64). Another example of the superwoman theme in Mary's life is that said she strove to be "the super sick person" (p.68) meaning that she wanted to be seen as healthy and not needy. The theme continued in Mary's life after she recovered from breast cancer but as part of her healing Mary works at being less of a superwoman and less perfect in everything she undertakes. She tells us this when she says

So I'm learning about my style and that's part of the journey is to learn that although I've tried to fit myself in to the standard mold to being the the good wife, the good mother, the good teacher, the good worker, the good, good, good, good, good. Really what I need to be doing is finding out what my style is and practice that (p.70).

One of the focus group participants spoke about this,

We're much too, much too hard on ourselves aren't we [yeah] I mean I think you should strive to make it as well as you can but you don't have to kick yourself if it doesn't go quite right [that's right, that's right] so I mean who's checking on us? Is somebody checking? Is the quilt police around? (p.89).

Mary's experience with the medical system, like that of the other focus group participants, was one of paternalism. Passivity and resistance are subthemes of paternalism. This

is evident in some of the comments that occur in the transcripts:

"I think that's how the medical system likes you to be when you're a patient, they want to tell you what's good for you and they want you to be passive (p.64).

"And that's exactly what I was, was a good soldier. And the people that got really good care were the ones that were basket cases from the beginning. But since I wasn't a basket case from the beginning and I'd been a good soldier and then I lost it then somehow I should be punished for that" (p.71).

Then they had to wean me off my steroids, like they dropped me from 150 milligrams a day to twenty milligrams a day in the hospital and this doctor couldn't figure out why I was all upset and I kept tellin him you can't drop me that many steroids in one day. "I'M THE DOCTOR AND WHO DO YOU THINK YOU ARE" (p.96).

One reason why the paternalistic approach of the medical community may have been so bothersome to the breast cancer survivors who spoke to me is that the women had intuitions, informed opinions and ideas of their own about their own care. Almost all of the women told stories of instances in which they had the experience of knowing what was right for themselves and being treated as if they did not. The following are examples from this type of story:

That really speaks to how my experience at the cross was there were a lot of people giving lip service to wanting me to be involved in decisions about my treatment and that kinda stuff but the fact of the matter is I was at their mercy

Like if I knew then what I know now I would've said 'Let me lose the seventy pounds cause it would have eventually come off, well hopefully with the steroids, but the tamoxifen just made it near impossible.

Well and I took tamoxifen for three and a half years kicking and screaming and saying that I shouldn't be taking it and then finally saw a doctor who said "oh it was a mistake to have prescribed that for you".

Well I just I find it very frustrating that its so hard to know what's the right thing.

Well, I guess I had the experience of knowing intuitively what the right thing was and not being listened to.

[M.H., G.E., L.L., March 7, 1996]

That is not to say that these women were never listened to or consulted for their preferences but I was not told a lot of stories in which the women were empowered by the medical community or consulted for their choices. The following is the only example of a story in which the patient recounts an instance wherein she was listened to by the doctor about a choice she made for her own care and treatment.

Well I talked to Dr. Salter about tamoxifen because she wanted to put me on it and I said "well look I've just got to have", this was the end of May I'd had my last chemo, I said "I want the summer off all these drugs". I said "I've just got have a summer free of drugs" and she said "that's a good idea". So I did and I started tamoxifen, I don't know September or something.

Yes, And then when I came off it, I said I can't help thinking that if I were to eat loads of broccoli and carrots and things I would be doing myself as much good as tamoxifen and she said "well to be really honest you could well be right". She said "we don't really know but its one form of insurance" so I thought "well broccoli and carrots for me".

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During a focus group, while discussing treatment options and the approach of the medical community, one of the women made the discovery that it may not have been advisable for her to continue a treatment she was undergoing at the time.

L.L. - Well I see I got my breast cancer when I was only thirty five so they put me on tamoxifen when I was only thirty six or thirty seven.

G.E. - yeah well it does seem strange

L.L. - Well I go see her on Tuesday I'm gonna have to ask her.

[March 7, 1996]

Death is a theme in the stories of breast cancer survivors. It is a theme which sets the stories of these women apart from other life stories because they incorporate death as a very real possibility. We hear Mary's awareness of this in her description of "Chaos In Containment" where she has written, "I wailed in grief at losing my breast, my hair, and perhaps, my life" (p.66). The following excerpts from the transcripts show the incorporation of death into the life story:

M.H. - I was going to do that [G.E.:Yes] and, it was, for me, after the fact when it occurred to me that I might die.

G.E. - Yes or you might get it again. All the time I was going through it I was psyching myself up for having to do it again if I ever had to. I was thinking "Can I handle this again?" You know I would do it again, no doubt about it. But oh, the panic of every ache, every single ache. In fact I was certain I had it in ? At the time when I was thinking to myself, "this is it I have got cancer again, G.E., why wouldn't you have it again?" I think "No" I said "What makes you think of course you've got it again, what else could it be?"

L.L. - ...And if its causing me from not getting cancer then I'd rather be fat and alive then skinny and six feet under so I don't have any choice so I just take it. [yeah] But its maddening cause I said to her "Dr. S," about four years later, two years later, I said, "Why can't I lose any weight?" She says, "well I guess we shouldn't a put you on the tamoxifen so fast.

L.L. - Well it isn't bothering me so much, like I get the hot flashes and stuff, like if it can prevent it from coming back for anything I'll take it.

[March 7, 1996]

I would like to close my thesis by saying that when women tell their own stories they make discoveries about themselves, in part, because there is a listener. It is also true that the listener makes discoveries about herself through hearing the stories and through the reciprocal storytelling that occurs in the life history process.

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