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MIJO (My Son)

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Report

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Dedication

To my husband, Andy Palanisamy: for his unconditional love, infinite support and encouragement to pursue my dreams.

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Abstract

MIJO (My Son)

Chithra Jeyaram, M.F.A.

The University of Texas at Austin, 2012

Supervisor: P.J. Raval

Mijo emerged as an alternate project to fulfill my MFA thesis requirement when *Foreign Puzzle* my initial thesis project faced serious setbacks. *Foreign Puzzle* is an hour-long documentary about love, life, breast cancer, dance and the transcending power of the human spirit. In an attempt to unravel an individual's struggle with mortality, to understand a child's adaptation to a mother's illness and to document the healing power of creativity, I began filming Sharon Marroquin's life from September 2010. Unfortunately, when filming real people undergoing life threatening medical illness it is impossible to stick to a timeline. Sharon Marroquin, the central character in the film developed serious medical complications that pushed the deadline for *Foreign Puzzle* significantly. While, I was committed to the completion of the film *Foreign Puzzle*, I did not want to delay my graduation from film school by almost two years and hence was forced to come up with an alternate thesis project. I had an animation script ready to go

into production. But, I was so deeply involved with the production of *Foreign Puzzle* that it became impossible to work earnestly on a completely new film. The only viable alternative was to make a short film from the footage filmed for *Foreign Puzzle*. For the film to work and function independently, it had to have a strong and distinct thematic strand and not seem like a trailer or a scene from a longer film. This report is an elaboration of the process that went into the creation and exhibition of *Mijo* and its influence on *Foreign Puzzle*.

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INTRODUCTION

When I was a 22, I discovered a mysterious pea sized mobile lump in my right breast. It was growing too fast and in two weeks when, I sought medical help it was the size of a golf ball. It was excised immediately. Thankfully the biopsy indicated that it was a benign tumor. Now, I undergo periodic mammograms and breast ultrasounds to monitor a few lumps on both of my breasts. Every time I am due for these diagnostic tests, I have this inexplicable gripping fear of an impending breast cancer diagnosis. Because of these experiences, making a film about some aspect of breast cancer was always on the horizon for me. Therefore, when I met Sharon Marroquin, a single mother and modern dancer who was diagnosed with breast cancer, I just had to make a film. In a way I feel a deep connection with the millions of women that have experienced breast cancer and am honored at the opportunity to share one poignant story with the world.

As a filmmaker, I seek transcending phases in human life, where one confronts their deepest fears and become willing to experiment and embark on a journey where the end is unknown. Sharon was in that critical phase of her life and was willing to allow me to document that process.

But *Mijo* was not the film I set out to make. I was planning to make a documentary titled, *Foreign Puzzle*.

Synopsis Foreign Puzzle: Confronted with her mortality, angered and frustrated over her inability to prevent the disintegration of her body, Sharon Marroquin, a modern dancer, begins to consciously deal with it through art. The creative process allows Sharon to escape to another realm that is not confined by physical limitation, disease, child rearing, teaching and running a home. For 18 months, Foreign Puzzle documents Sharon's struggles as a choreographer and as a single mother with breast cancer, highlighting her relationship with her son Dali, her ex- husband and the transcending power of dance.

Synopsis Mijo: An evocative portrayal of a mother and child's intimate relationship in the midst of life altering medical events.

According to Manoharan and Pugalendhi (2010), breast cancer is the second largest cause of death in women and is the most common cancer among women, excluding non-melanoma skin cancers. Globally, every year, approximately one million new cases of female breast cancer are diagnosed (Bray, McCarron & Parkin, 2004) and 410,000 women die from the disease (Coughlin & Ekwueme, 2009). In the United States of America and most of the developed world, the annual breast cancer campaigns in the month of October have raised and continue to raise public awareness about the disease (Coffey, Glynn, Kelly, Kerin & Sweeney, 2011).

Few documentaries that create awareness about the impact of breast cancer on the woman's body, mind and life have been made and are available for broad circulation. Most of these non-fiction films begin with the devastating diagnosis and focus on the first year after the diagnosis. *Breast Cancer Diaries* is an unvarnished and humorous account of Ann Murray's experience with breast cancer for the first nine months following the diagnosis (Nelligan, Paige & Pattillo, 2006; Baer, 2008). *Cancer Pants* is the journey of a 36-year-old lesbian woman diagnosed with breast cancer. Often these films follow the protagonist for the first one-year of diagnosis and end when the worst of the cancer treatment is over. Such films are absolutely essential for creating awareness about the arduous medical and surgical battles in the first year of diagnosis. Although they try to end on a positive note, these films showcase the most horrific part of cancer treatment and it is hard to be hopeful after watching the horror of cancer.

There are quite a few films where several cancer survivors - usually celebrities - share their personal experiences in order to raise awareness about breast cancer. The documentary *I a minute* informs the public that worldwide a woman dies of breast cancer every minute and celebrities share their stories of hope, courage and survival.

Some breast cancer films are political in nature such as the recent *Pink Ribbons, Inc* that raises the vital question – Who really benefits from the pink ribbon campaigns – the cause or the company? It reveals the co-opting of what marketing experts have labeled a 'dream cause' (Din, 2011). Then there are educational films that raise awareness about

prevention of breast cancer, alternate treatments for breast cancer and explore new paradigms in combating the illness. For example, the documentary *No Family History* (Tucker, 2007) emphasizes the need for prevention of breast cancer not just a search for the elusive cure. Another film, *Catching Cancer* investigates the provocative and paradigm shifting idea – can viruses cause cancer (Wright, 2009)?

Finally, there are inspirational films like, *Polly's Global Walk* – a documentary that follows Polly Letofsky on a four-year odyssey around the world to raise awareness of breast cancer in communities and cultures where it is a taboo subject (Hagloch, 2010).

In almost all of the cited films, the central protagonists are Caucasian women. Although, breast cancer is less frequent among women of color it is much more aggressive with higher mortality rates (Brown et al., 2004). Women of color have many barriers to access of care and screening for breast cancer including lack of insurance, lack of understanding of the disease and reservations, embarrassments and discomfort during clinical breast exams and mammograms (Brown et al., 2004). Yet there are very few films that showcase the experiences of colored women. The HBO documentary - *The Education of Dee Dee Ricks* tackles the issue of affordable healthcare and the lack of care and treatment for uninsured black women with breast cancer (Cohen, Nevins, Peltz & Rosenthal, 2011). Even this documentary is from the perspective of a wealthy white woman, Dee Dee Ricks, who wants to make treatment accessible for uninsured black

woman. There are hardly any films available for broad public circulations that are made by and about women of color with breast cancer.

The documentary *Foreign Puzzle* is an account of a Mexican American single mother's experience with breast cancer. The film is further enriched by the creation of a dance, titled, 'Materiality of Impermanence' and explores the impact of art in healing the traumatic stress (Christensen, Jensen, Moller, O'Connor & Zachariae, 2011) associated with breast cancer. With the creation of *Foreign Puzzle* I hoped to contribute a breast cancer film that reveals the experience of a woman of color.

Collective efforts to improve awareness and access to breast cancer screening have had a substantial impact in reducing mortality from breast cancer in developed countries (Ekwueme, 2011). Most women with breast cancer have a good prognosis with a survival rate of 89% 5 years after diagnosis (American Cancer Society, 2011). However many of them have to work full time, look after a family and fulfill family roles while dealing with cancer and its necessities. The uncertainty and fear of death is overwhelming and the task of relearning to live life within this new paradigm is daunting. At other times the simple joys of life make everything worthwhile. There is an absolute need for a film that portrays an unabashed exploration of emotions such as pain, fear, hope and healing by an artist battling cancer. *Foreign Puzzle* is that visceral and tangible film that will provide spiritual fuel for those who are recently diagnosed with breast cancer. It is the story of one woman, her 6-year old child and the dance she creates to embody her cancer

experience. The film begins 8 months into the diagnosis and documents the waxing phase of the disease. It starts at the lowest point, sure there are hiccups and dark moments but at the end the film shows the recovery and rejuvenation phase.

Foreign Puzzle is like a mirror into the future, not only for women who are newly diagnosed with the disease and seek an empowering positive experience, but also to their families, friends and support networks who need reassurance that their loved one will most likely come through.

Finally, a diseased human body is a chaotic system, and as a filmmaker, I am interested in telling stories of the disruptive consequences of illness from unique perspectives. *Foreign Puzzle* explores one woman's process of re-identifying with her body through dance and her arduous journey towards a holistic acceptance of life. The film will encourage women to rekindle their passions and thus hopes to suggest options for an alarming number of women who deal with their disease with disturbing anonymity

When we began filming *Foreign Puzzle* in September of 2010, Sharon Marroquin had just started to choreograph the dance and most of her medical treatments were on course. Suddenly she developed some medical complications that needed immediate attention. Sharon needed time to recover from those complications and that resulted in a prolonged delay in the production schedule of the film. My commitment to the project was unchanged but I was getting anxious about graduation. Three years of graduate school

was financially very stressful. It was also beginning to take a toll on my marriage. Hence, it was absolutely necessary for me to graduate on time.

Both, P. J. Raval and Anne Lewis on my thesis committee suggested that I explore making a short film from the material that I had already filmed. Initially, I was very reluctant to do that. I was concerned about two things:

1. Will the release of a short film affect Sharon Marroquin's continued participation in *Foreign Puzzle*? What if she dislikes the short film and does not permit me to complete *Foreign Puzzle*?
2. How will the short film affect *Foreign Puzzle*? Will it be beneficial or detrimental? Will people want to see another film about the same character or will they be turned off? Will the films be distinct enough to warrant their separate existence?

I was unable to convince myself that a short and a long film will work. So I began exploring an alternate thesis film. I had a short animation fiction script ready to go. And after consulting with my thesis committee members, I began pursuing it. Simultaneously, I continued filming *Foreign Puzzle* as the story evolved. It was humanly impossible to do justice to two very distinct film projects while attending film school as a full time graduate student.

At this time, I also began viewing the footage from *Foreign Puzzle* with the intention of editing a sample reel to raise much-needed funds for the project. Jorge Faz, my editor and I were looking through the footage of *Foreign Puzzle* to pull out material that could be edited into a sample reel that revealed the essence of the film. I sent this sample reel to several people for feedback. *Mijo* gradually emerged out of this process of looking at the footage, listening to people's response to the sample footage and reflecting on the feedback. Over a period of three months the sample reel was shaped, remolded and tweaked several times.

In this report, I have tried my best to verbalize the ideas and the process that influenced the making of *Mijo*. Apart from that, the scenes and specific story elements included in the short film are discussed in great detail. Everything about *Mijo* happened organically. The same was true for its distribution and outreach and hence it will be discussed as well. Finally, the impact of *Mijo* on the continued production of *Foreign Puzzle* and on Sharon will be touched on briefly.

EMERGENCE OF MIJO

According to Bernard (2010):

Documentary story telling is an organic but time-consuming process in which a filmmaker approaches a subject, finds (as opposed to imposes) a story within that subject, and then uses a wealth of narrative devices – structure, character, questions, point of view, tone, stakes and more – to tell that story truthfully and artfully, so as to attract and actively engage an audience’. (Page xiii)

Thanks to the various organizations that have raised awareness about breast cancer, particularly ‘Susan G Komen Foundation’ and their ‘Pink Ribbons’, it seems like breast cancer receives a lot of attention in the media. And when a film is being made about something that seems so popular and commonplace, it becomes absolutely necessary to spell out loud and clear what is unique about the film. Why should this film be made?

When I was cutting the sample reel for *Foreign Puzzle* my goal was to put emphasis on the absolutely unique elements of this film. Those were as follows:

1. The presence of strong central characters: Sharon Marroquin a very eloquent and beautiful dancer and her son Dali Gaytan a charismatic and expressive child. Both of them had an amazing relationship.

2. The project had access to the intimate spaces occupied by a mother and child and the opportunity to film a lot of verite content. This resulted in the filming of some very dramatic and powerful moments.
3. Dance, music and creative movement make the film musical, sensorial and visceral in experience. The combination of a funny, quirky 6-year-old, dance, music and play add a strange complexity and lightness to the story and provide for a variety of narrative storytelling devices.
4. Finally, breast cancer adds tension and anxiety to the film. Cancer is a disease whose very name is a metaphor for death (Sontag, 1978). Breast cancer is a major health concern and the second leading cause of cancer mortality in women (Manoharan & Pugalendhi, 2010). It comes into a person's life forcefully and takes over their existence and redefines their life. It brings the fear of mortality and impermanence to the forefront. I decided to focus on the palpable fear of death.

In the film's sample reel, we left out large portions of Sharon's breast cancer journey, the gritty details of the chemotherapy, radiation and surgery. Sharon's struggles with the creation of the dance, her insecurities, her ex-husband, the amazing dancers, her life as a bilingual school teacher, the creation of the dance and rehearsals with the dancers were also excluded in the sample reel. Eventually, what was left in the sample reel was the story of a mother, her son, her very present medical complications, her fear of dying,

their beautiful relationship and the interpretation of the relationship between a mother and child in her dance.

After three months of distilling and refining the footage, I was left with a short film. Its name sprang out. I called it *Mijo*, which is a Spanish slang for ‘my son’. Once I called it *Mijo*, there was no doubt in my mind that it was a film in its own right and was not in conflict with *Foreign Puzzle*. So, inadvertently, in my attempt to show people that *Foreign Puzzle* was a unique film about a breast cancer survivor, I was carving out *Mijo*.

Population statistics show that 1 in 217 women under the age of 40 develop breast cancer (Schmidt, Toomey, Vetto & Wheeler, 2005). American Cancer Society (2011) estimates that 27% of all cases with breast cancer and 16% of breast cancer related deaths were in women under the age of 50. In her study, Yankaskas (2005) concluded that although young women have low risk of breast cancer, they have poorer prognosis, higher recurrence rates and relatively higher mortality rate. Breast cancer is the leading cause of death for women in their 4th and 5th decade of life (Schmidt et al., 2005) and a good number of these women have young dependent children living with them. The treatment protocols for young women with breast cancer are aggressive, long and arduous (Schmidt et al., 2005). Many of the women diagnosed with cancer have one or more school age children living at home and hence potentially, thousands of children are affected each year by their mother’s breast cancer diagnosis (Zahlis, 2001). Several studies have explored the experiences and emotional needs of children (Ashley et al., 2006; Zahlis,

2001), strain on spousal relationships (Forrest, Plumb, Stein & Ziebland, 2009) and the overall impact on family after the mother is diagnosed with breast cancer (Forrest et al., 2006). There are sparse resources and practically no published research about the experiences of single mothers with breast cancer and their children. And there are hardly any documentaries in public circulation that showcase the issues of children and families of breast cancer survivors.

Mijo is an important audio-visual resource because it documents the experience of a divorced mother with breast cancer. *Mijo* is an intimate short documentary about the relationship between a young mother who is a professional dancer and her six-year-old son, as she undergoes treatment for breast cancer. The film finds a delicate balance between her son's innocence, the mother's fear of death and its interpretation through dance. Ultimately it is an affirmation of love and the purpose of life. Screening of the film among breast cancer survivors creates a space where cancer survivors can talk about and highlight their concerns and experiences with their young children while battling cancer.

CONCEPTUALIZATION OF MIJO AND ITS STRUCTURE

Every cut is a lie. It's never that way. Those two shots were never next to each other in time that way. But you're telling a lie in order to tell the truth.

—Wolf Koenig

Story Structure

A short film is a rather tricky format, especially when you are dealing with such emotionally charged content as breast cancer and fear of death. A good short film often looks at a moment in a life or sketches a portrait. *Mijo* could have been either a portrait sketch of Sharon Marroquin or an intimate description of moments of her life as a cancer survivor.

While not short films, Frederick Wiseman's films such as *Boxing Gym* (2010), *High School* (1968, 1994), *Hospital* (1970), *The Store* (1983) have an underlying theme of an individual's attempt to preserve their dignity while struggling against laws and dehumanizing bureaucratic systems. His films are about the everyday struggles of simple people caught in the social institutions. The rhythms of daily life and drama in ordinary experiences are central to Frederick Wiseman's story telling (Bernard, 2010). I wanted to

see if *Mijo* could be a similar style essay of the drama in the everyday events of a single mother (Sharon Marroquin) with breast cancer and her son (Dali Gaytan).

So first, I reviewed *Foreign Puzzle* production notes (from 10 months of filming) to look for scenes and events in Sharon Marroquin's life that were indicative of rhythms of daily life. Fortunately, we had filmed a lot of everyday activities like Sharon's hospital visits, treatments, teaching at school, dance lessons, eating, cooking, bedtime stories, playing, cleaning, taking care of pets, etc. Then I looked within the footage for events that were dramatic. Of course, in the case of Sharon's story there was a big elephant in the room – breast cancer and the looming fear of death and hence there was a lot of inherent drama. We had filmed the rhythms of daily life in intimate quarters over an extended period of time and there were a number of events in the raw material that could be built into strong emotive scenes. In a quasi Frederick Wiseman style, I tried to use simple rhythms of daily life such as sleep, bedtime stories, play and inherent fear of death to structure *Mijo* and thus the short film, *Mijo* steered away from being a portrait sketch of Sharon Marroquin.

Also, in Frederick Wiseman's documentaries the scenes are driven by questions posed by previous scenes (Bernard 2010) and the scenes are interconnected by an elegant poetic structure. *Mijo* is too short a film to make scenes drive the story eloquently. So, after much thought I decided to do something that might seem strong handed at first glance.

The film opens with the interviewer asking 6-year-old Dali Gaytan, ‘What happens when someone dies?’ and it is followed by his definition of Death:

“Dying is like... when you close your eyes and huh you stop breathing and when you stop breathing you...you are like going to bed but you can’t ...you can’t wake up. You never wake up”

Figure 1: Opening scene of Mijo - Dali defines death.



It is that question by the interviewer and Dali’s answer that helped anchor the entire film, its structure, purpose and the scenes and sequences that follow. Once that decision was

made it became much easier to structure the rest of the film.

Use of child subject and its affect on perceived emotions

The editorial decision to open the film with a strong statement from a child (Dali’s definition of death) was not easy. At the outset it seems very manipulative and forced. Will the rest of the film justify the use of such a strong opening? Can the film’s closure have equal impact? What is the affect of having a child talk about death on the viewers?

In many documentaries, children have been the central focus but not always with the intention of exploring the child as a speaking subject. In “Documentary: Politics, Emotions and Culture”, Smaill (2010) says that more often than not documentary films position children as objects of desire that must be protected and nurtured. Children are often acted upon and are vulnerable to the oppressive social and political forces.

For example, the documentary film, *Children Underground* (Belzberg, 2001) tells the heartbreaking story of five Romanian street children – Cristina (16), Macarena (14), Mihai (11), Ana (10) and Marian (8) who form gangs, are addicted to spray paint and their lives are full of violence and abuse. These children are among the 20,000 unwanted children in Bucharest who were born as a result of policies that outlawed contraception and abortion in an effort to increase the nation’s work force. The film tugs at the audience’s heart and explores the relationship between moral responsibility and poverty. In these documentaries, ‘The child’ is the discursive screen onto which the society’s fears and hopes are projected (Smaill, 2010). While *Mijo* is not dealing with a heavy subject as the film *Children Underground*, we still need to understand the role of Dali Gaytan in the film.

In *Mijo*, Dali Gaytan narrates his perception of death and his views of what is happening to his mother with breast cancer. Besides the interview, Dali appears in several scenes in the film, where the viewers get to experience him as a happy, demanding and in many ways a typical 6-year-old. The scenes included are: Dali not allowing his mother to take

an afternoon nap; him playing with toys in his mother's ballet class; his mother reading a bedtime story to him and playing with his mother in the park. His representation as a child or his childhood status symbolizes numerous maternal/parental emotional attachments for the audience. And, Dali as a speaking subject also represents colorful expression, experience and subjectivity from a child's point of view. Therefore, in the film, Dali is being used as a vehicle for the society to project their fears and hope and get an in depth understanding of the gravity of the situation.



Figure 2: Poster of the film - 'Children Underground'

According to Bernard (2010), the main difference between fictional and non-fictional story telling is that the filmmaker is not free to invent plot points or character arcs and instead must find them in the raw material of real life. The documentary filmmaker has almost no influence on the natural course of the events of the story but they do have a lot of choices on how the story is presented to the audience. There is a reasonable amount of liberty in structuring the story without distorting the truth.

I strongly felt that by opening the film with Dali's definition of death, I was not distorting the truth but just dictating a style and approach of delivering the story in way that was

best suited for *Mijo*. The film emerges from Dali's point of view and concludes with Sharon's point of view. Dali opens the film by defining death; he introduces his mother in very simple sentences— a dancer and breast cancer patient. Sharon then further elaborates about her illness and takes us into the world of creating a dance about sleeping with her child. That scene is followed by a desperate attempt to catch a midday nap with her son interrupting her sleep and so on. Finally, Sharon concludes the film by saying that it is Dali who is between her and death. It is he who gives her the impetus to push through each and every day of her treatment. In the other words, the film builds on and justifies the strong opening with subsequent conversations, scenes and dance about sleep and fear of death.

Emotions and viewership

“My obsession has been — and is still — the feeling of being there. Not of finding out this and analyzing this or performing some virtuous social act or something. Just what's it like to be there”

—Richard Leacock

Emotions play an active role in shaping the viewer's perception of the story. In a documentary, the individual subjects are entrenched in emotions ranging from pleasure, hope, pain, anger, and empathy to disgust (Smaill, 2010). To fully engage in the issues, it

was necessary for *Mijo*'s audience to feel like they inhabited the physical and emotional space of the film's subjects – Sharon and Dali.



Figure 3: Injection Scene - Sharon cringes in pain after getting a blood thinner shot.

In the months that followed her diagnosis and during her treatment, fear of death and impermanence of life were omnipresent in Sharon's existence. Breast cancer awareness programs focus on overcoming odds, positive thinking and feeling good. While empowering messages

and overwhelmingly positive films are absolutely essential, I felt we needed a film that told people yes going through cancer is pretty frightening and you are not alone in being frightened. In *Mijo* I attempted to portray the fear that most patients with a life threatening illness go through in a tangible experiential way. There is a sense of security in knowing that you are not alone in feeling so. It also allows friends and family of cancer survivors to realize the depth of their emotional truth. A lot is going on even after the hair starts to grow back and even after someone seems to look healthy. Breast cancer survivors just don't spring back to life, the recovery process is painfully long and lonely. So, it was necessary for the audience to feel what Sharon was feeling and to empathize with that experience. And so an editorial decision was made to keep some of the scenes

in *Mijo* intentionally raw, gritty and difficult to watch. These scenes make people cringe and squirm in their seats and sometimes bring them to tears.

Use of humor

Bernard (2010) implores filmmakers to have a simple narrative structure. The simplicity

in structure allows for complexity to evolve in the overall film. *Mijo* deals with intense feelings about death and therefore light funny moments and delicate life affirming events needed to punctuate the film both as a tool to layer the film and also to



Figure 4: Dali plays with toys during mom's ballet class.

provide some relief for the

audience from the state of heightened anxiety. Scenes specifically used for this purpose include the prayer scene in Dali's bedroom, Dali playing with toys in Sharon's Ballet class and Sharon teaching Dali how to spin in the park. Apart from providing relief for the audience, these scenes show the strong emotional bond that exists between the mother and son in a playful way.

Dance as a narrative device

Initially, we edited a short 20-second sequence that used ominous music to create a



Figure 5: Shot of Sharon dancing after Dali's definition of death

montage that integrated dance and hospital footage following Dali's description of death. That is when it clicked, that the dance needed to be interwoven into the storyline or else it feels like an unnecessary appendage.

Also, the placement of the scene in which Sharon explains the choreography of the sleep dance to her student Ciara early in the film, helped layer the subsequent sleep scenes and dig deeper



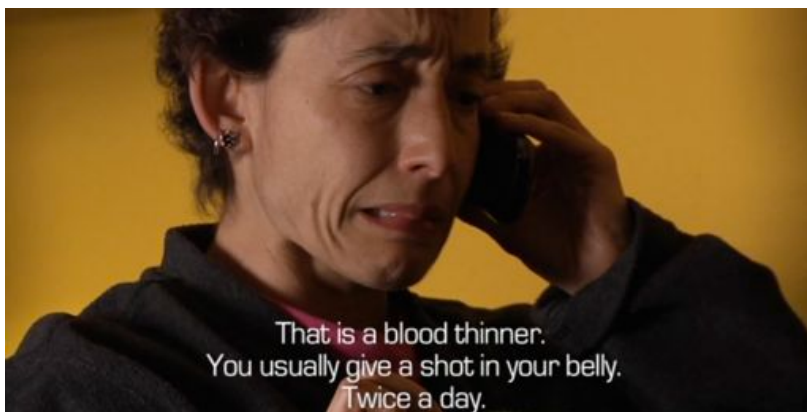
into Sharon's fear of death and allowed us *Figure 6: Sleep Dance*

to explore Dali as a symbol of hope in Sharon's life. At the film's conclusion, a section of the sleep dance plays right after Sharon says that Dali is between her and death. The viewer is able to appreciate why Sharon created the dance and reflect on the interconnectedness of all events in the film.

Filmmaking ethics and building audience trust

In general, the audience trusts documentaries and that trust is key to the form's power and relevance. Creative arrangement of scenes needs to be done with journalistic integrity. To be impactful, the films must not only reach audience through compelling nuanced storytelling but must also earn their trust through reliable honest content.

Betraying that trust by implying that important events happened in a way that they did not or selecting only those facts that support your argument or bending the facts in service of a more dramatic story will all undermine the form and the film. The filmmakers have ethical responsibility towards their subjects and viewers. But there are no strict rules or guidelines for ethics in documentary filmmaking. The ethical boundaries are largely dependent on the individual judgment, comments from peers on interactive forums and film networking events such as festivals (Aufederheide, Jaszi & Chandra, n.d.).



In *Mijo*, Sharon receives a call from her doctor interrupting a sit down interview at her house. Documentary

Figure 7: 'Doctor Phone Call' scene in *Mijo*

films sometimes use a telephone call as a structural device to propel the story forward or convey information quickly. In other words, in some documentaries, phone conversations are engineered into the film and do not happen in actuality. Hence, it was necessary to edit that scene in such a way that it informs the audience that the phone call in *Mijo* did happen and was not engineered.

The “Doctor phone call” scene opens with Sharon stating that it was three days since her cancer anniversary and the phone rings. She gets up and walks to the phone. The camera follows her as she walks past the lighting set up for the interview and answers the phone. The shot plays without a cut till the doctor delivers the bad news (that she has a blood clot and needs to go to the ER). An uncut shot and the shock on Sharon’s face both provide adequate evidence to the audience that things were unfolding in the present. Building viewers trust is important. If they believe the scene is real then they have strong feelings of empathy for the central character and are much more involved in the film and its outcomes.

Exclusion of breast cancer related statistical data in the film

Documentaries have the burden of being more than just entertainment. It almost seems like they need to add or contradict or do something about the information presented by mainstream media. It was a conscious decision on my part to exclude statistics, prologue or epilogue about any data related to breast cancer in the film. In my mind, *Mijo* was

going to be an experiential film and the most important thing the film needed to do was for the audience to feel like they were right there with Sharon and Dali. I wanted them to feel their fear, panic, joy and love. I did not want to reduce the experience to a statistical number.

Finally, the facts alone do not define documentary films: it's the weaving together of the factual elements into an overall narrative that strives to be as compelling as it is truthful and is often greater than the sum of its parts. (Bernard 2010). It is hard to capture a powerful experience in a 10-minute short film. I strived my best to edit and make *Mijo* a larger narrative experience that is woven and presented to the viewer in a little package.

DISTRIBUTION OF MIJO

Over the last decade, a growing number of documentary films have not only gained theatrical releases and commercial success but have also instilled a new relevance for the genre in the eyes of the filmmakers and viewers (Smaill, 2010). With the advent of mobile technology and social media, the avenues for viewing documentary films have become increasingly fractured (Smaill, 2010). The distribution strategies for documentary films are constantly evolving. Documentaries are seen on a variety of audiovisual platforms: online free viewership, paid on demand via web and cable, through subscriptions, mobile viewership, web interactive and transmedia platforms, network and cable broadcasting, community screenings, theatrical screenings and DVDs. Documentaries like other films build an audience base through film festival screenings, publicity from award ceremonies, audience reviews via social media and traditional press coverage.

Niche Audience

Inherently, *Mijo* has a large audience and has the potential to build a fan base of people who would be interested in watching and acquiring copies of the film. They include the following:

- Breast Cancer Survivors: There are more than 2.6 million breast cancer survivors in the U.S. alone (American Cancer Society, 2011). In 2011 alone, 230,480 new

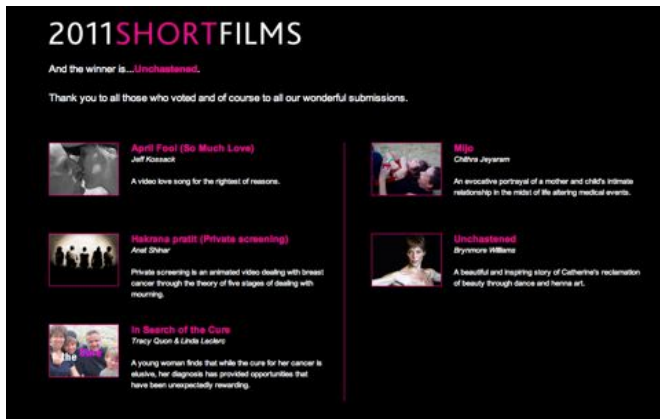
cases of invasive breast cancer was diagnosed (American Cancer Society, 2011). Therefore breast cancer survivors and their families are the largest niche audience for this film.

- Children Support Groups: Organizations that provide support services for children of chronically ill parents will form the second largest niche audience for the film.
- Dancers: Dance is a central theme in this film. Sharon is an active member of Austin's dance community. Therefore the dancing community, dancers, students of dance, movement therapists and audience interested in dance as therapy will be interested in this film.
- Breast Cancer Support Organizations: The large network of breast cancer support organizations, vendors and health care service providers might be interested in the film.

Film festival exhibitions

I began exhibiting *Mijo* at film festivals and community screenings for special interest groups from September 2011. *Mijo* premiered in an online short film contest (Breast Fest Film Fest) conducted by 'Rethink Breast Cancer', a Canadian charity organization that helps young women diagnosed with breast cancer (2011 Short Films, 2011). I was strongly advised against premiering the film online, as it would jeopardize the chances of *Mijo* playing at several prominent film festivals. Breast cancer survivors and their

families are my niche audience and making the film accessible to that group was of utmost importance. Therefore, I took the risk of screening the film online.



During the 8-week online contest, 3000 people in 79 countries watched *Mijo*. A lot of people reposted the film on their facebook network, tweeted about it and shared it with friends far and wide. No film festival would have taken the film instantly

Figure 8: *Mijo* finalist at Breast Fest Film Festival 2011

to so many countries and to such diverse audiences. I got several hundred emails from friends, friends of friends and strangers who watched the film.

Some of the emails were extremely moving. For example, after watching *Mijo*, a parent decided to share the information about his cancer with his two children aged 4 and 7. He had never talked about his illness with anyone but *Mijo* made him realize that his relationship with his children could only become stronger if they knew about his diagnosis. He thanked me not only for making *Mijo* but also for making it accessible to him.

These responses made the importance of the film clear to me and I was driven to do everything possible to get the film out there. So, after the strong response to *Mijo* at the

Breast Fest Film Fest, I sent the film out to several film festivals big and small in countries around the world. Since then the film has been exhibited in several cities in the U.S.A, Canada and United Kingdom. It is slated for screening in France and Lebanon soon. *Mijo's* screening campaign has only begun. Efforts are being made to arrange community screenings and outreach events in the US and other countries through organizations that focus on issues faced by children and young mothers with breast cancer.

Mijo has received 5 awards so far and a grant from the Commonwealth Broadcasting Association in United Kingdom to create another documentary on international development. That grant will be used to fund and film the experiences of young mothers with breast cancer and their children in developing countries.

Plans for outreach and audience engagement

In my previous films, my primary focus was to tell a good story but in this project, I hope the film will go a step further with a strong outreach and audience engagement component. I want to explore and document global experiences of mothers' with breast cancer. *Mijo* is selected to play in Beirut in the summer of 2012. I plan to use the screening as a way to broaden engagement with Lebanese breast cancer survivors and their young children through a filmed interactive workshop. I intend to extend this exploration to other countries in Asia, Middle East and Africa.

Breast cancer is a global epidemic and documenting these stories is of utmost importance. *Mijo* will function as a catalyst and a way to begin discussions in local communities. Several studies point out that breast cancer is on the rise in developing countries across the world. For example, In India, breast cancer is the most common cancer among urban women and the 2nd most common cancer among rural women (Manoharan & Pugalendhi, 2010). In Saudi Arabia, breast cancer is a critical problem with 26.4% of breast cancers occurring in women under the age of 40 compared to 6.5% in the USA (Ajarim et al., 2007).

Research studies show that, women with breast cancer exhibit significant traumatic experience (Christensen et al., 2011). A high proportion of women experience sleep difficulties (Kai et al., 2009), depression (Kai et al., 2009), sexual problems (Besancenet et al., 2011) and poor physical function (Butow et al., 2011). Also, young women with breast cancer have concerns about fertility issues (Armstrong et al., 2011). Studies show that an increase in the amount of social contact and the presence of a social network improves the likelihood of survival among young women with breast carcinoma by enhancing coping skills, expanding information sharing and providing emotional support (Bloom et al., 2012). Documenting and presenting [audio-visually] similar and unique ways in which women, children and families with breast cancer express their fear of death and cope with it is the ultimate goal of the project. Rosedale's (2009) study concluded that survivors experience loneliness for several years after the acute diagnosis

of breast cancer and treatment. Such a quilt can be a powerful interactive platform for people to understand and situate their own personal fears within the vast spectrum of experiences and help them feel like they are part of a larger communal experience.

Besides being a powerful 10-minute film on an important social issue, it has the potential to create awareness and promote understanding of breast cancer among children and young mothers globally. Plans are being made to use *Mijo* effectively for that purpose.

Organization such as ‘Wonders and Worries’ that help children cope when a parent faces a serious or life-threatening illness exist in few major cities in USA. These organizations reiterate the need for the creation of a short educational video that will function as a resource tool for families and children of cancer survivors to understand cancer and cope with the illness as a family. It is possible that an educational video might be made to create awareness and promote understanding of breast cancer among children of people who are diagnosed with cancer.

REFLECTIONS ON *MIJO*

‘Never made a film which fully satisfied me’ - Roman Polanski

Like any filmmaker, when I watch *Mijo* I think of ways it could be a stronger, better shot or better edited film. Perhaps because its development was organic, the postproduction phase was staggered. The story was picture locked but due to lack of funds it was not sound-mixed or color corrected till it got accepted into festivals.

Once the film was edited, the distribution strategy also evolved gradually over time. I had no specific plans as to which festival or city would be an ideal premier location for the film instead I just sent it to a handful of festivals and decided to wait and see. The film was screened online first. It received an overwhelming response from the community. It was these responses that catapulted and resulted in an evolution of a distribution strategy for the film. In retrospect, I wonder what would have happened had the film had a world premiere in a popular film festival instead of an online screening. Would that have worked out better? It is hard to speculate on such scenarios. But it is something that I need to ponder about in future projects.

Even though I made a conscious decision to edit this short film and christened it *Mijo*, I did not create an independent existence for the film. In my mind, *Mijo* never existed

independent of *Foreign Puzzle* and its sole purpose was to create visibility for *Foreign Puzzle*. So I never created an independent outreach platform for *Mijo*. Initially, whenever I spoke about *Mijo*, I told people it was only a short vignette from *Foreign Puzzle*. I downplayed *Mijo* and made it vehemently clear that *Foreign Puzzle* is the real deal.



Figure 9: *Mijo and Foreign Puzzle Website*

Foreign Puzzle had its own facebook page, website and twitter account but *Mijo* did not. I thought people would make the connection that obviously *Mijo* was part of *Foreign Puzzle* but that did not happen. *Mijo* continued to be screened in film festivals. People loved the film but the love for *Mijo* did not translate to more facebook

likes for *Foreign Puzzle* or follows on twitter. Therefore, three months after *Mijo*'s first festival screening and after it won four awards, I decided to include *Mijo* in the title of the *Foreign Puzzle*'s Facebook Page and website. Now the website title reads "Mijo and Foreign Puzzle – documentaries by Chithra Jeyaram." That has made a substantial difference in people's perception of the connection between the two films.

Earlier I had mentioned that one of the reasons I did not want to make a short film from *Foreign Puzzle's* footage was because I was worried that it would affect Sharon's continued participation in the film. The film showcased gritty medical events in her life and she was still unwell when *Mijo* was completed. I was concerned that she might be hurt every time she saw *Mijo* in public. Therefore, I decided to show *Mijo* to Sharon first and if she was not comfortable or thought it was too soon to share these intimate medical details with the world then I would refrain from public exhibition. Sharon saw *Mijo* and permitted me to exhibit the film. The sensitivity that I showed towards her condition only strengthened our relationship and has had a very positive impact on Sharon's continued participation in *Foreign Puzzle*.

CONCLUSION

I came to the film program with practically no knowledge of filmmaking. After almost four years in film school, the one thing I have learned is that filmmakers grow leaps and bounds with each film they make. In my previous film projects at the University of Texas, I was plagued by self-doubt and was very result driven in my approach to filmmaking. As a result, filmmaking was an exhausting exercise. In the past, the obstacles would weigh me down. But this time around, I decided to embrace the challenges and use them creatively to build the film. I trusted my instincts on what the film has to be about and I followed through with it despite numerous obstacles. In the making of *Mijo*, I allowed myself to enjoy the process.

Mijo emerged as an emergency project to fulfill a graduate requirement. Amidst doubts, it was edited over the course of the three months from footage shot for *Foreign Puzzle*. Exhibitions in film festivals proved that the film resonated with the audience. *Mijo* has inadvertently built a fan base that is eagerly anticipating the release of *Foreign Puzzle*. Now, *Foreign Puzzle* is in its last month of production. As I wrap up the production and gradually step into its postproduction phase, the lessons learned from *Mijo* can only help make *Foreign Puzzle* a better film.

As a physical therapist and filmmaker, I am always interested in human experiences where people push their body and mind beyond realms of perceived and accepted

experiences. I hope my body of work will continue to focus on such individuals and that my films will make their stories more accessible and common place for people to watch, interact and explore.

APPENDIX A

MIJO TIMELINE

- SEPTEMBER 2010: Research, planning and pre-production phase
- SEPTEMBER 2010: Production Phase 1- Secured permission to film in oncology center. Filmed Sharon at home, in dance studio and with son in several locations.
- OCTOBER 2010: Production Phase II - Filmed Sharon receiving radiation and chemotherapy.
- NOVEMBER 2010 to MAY 2011: Production Phase III - Principal Photography Phase 1 filmed breast reconstructive surgery, Dali's birthday, treatments, Sharon teaching fourth grade children. Community participation in various events like – medical fundraiser, 5k Susan Komen walk for the cure, bra-modeling fundraiser at Breast cancer resource center and so on. Filmed choreography of early stages of Materiality of Impermanence.
- MAY to JULY 2011: Postproduction phase.
- JULY 2011: *Mijo* picture locked.
- August 2011: *Mijo* sound mixed and color corrected.
- SEPTEMBER 2011: Premiere of *Mijo* in Breast Fest Film Festival.

APPENDIX B
PRODUCTION STILLS



Figure 10: Mijo Postcard



Figure 11: Mijo Production Still

APPENDIX C
PROJECT PERSONNEL

Protagonist

Sharon Marroquin is a critically acclaimed modern dancer and choreographer living in Austin, Texas. She was born in Mexico and has created pieces for many different dance companies, festivals and showcases. She is a three-time winner of the Austin Critics Table Award for Outstanding Choreographer. She teaches dance at Tapestry Dance Company and is a bilingual primary school teacher in Austin. Also, Sharon Marroquin is the recipient of Ella Lyman Cabot Trust grant in 2010.

Dali Gaytan is Sharon Marroquin's only son. Dali loves to tap dance, play soccer and watch Spiderman movies in his spare time. He thinks school will be a much nicer place if there was no mathematics.

Director/Producer

Chithra Jeyaram is an emerging documentary filmmaker. Her first exposure to filmmaking began in 2004 with a failed attempt to fund a film about an explosive water-sharing dispute between two southern states in India. Deeply affected by this experience, she quit a decade-long career as a physical therapist to pursue an MFA in film production

at the University of Texas, Austin. She is the recipient of the Dina Sherzer Award for social Awareness for her work in progress “Refugee Musings” about Tamil refugees from Sri Lanka. She is also the recipient of the postproduction grant from dance films associations (New York) and documentary production grant from commonwealth broadcasting association (UK). She is the author and creator of the blog <http://realtalkies.wordpress.com/>, a unique portal that informs the public about documentaries from a social perspective.

Director of Photography

Therese Tran is an award winning photojournalist and filmmaker who has worked nationally and internationally with her work published in major publications world wide. Therese has directed, produced or been the cinematographer for several award- winning short films in both documentary and narrative genres. She is currently a MFA Film Production candidate at the University of Texas at Austin. She is the recipient of the 2011 Nicholas Cominos Scholarship and has been nominated for the 2011 American Society of Cinematographers Student Heritage Award, and the 2011 Kodak Student Scholarship.

French Translator

Heidi Phelps is a writer, editor and translator from Washington, DC, by way of Providence, RI. Working in bilingual communications at the French Embassy, Heidi's interests also extend to visual arts (drawing, painting and photography) as well as music

and deejaying. Her DJ nights emphasize rock, punk and soul music by female artists and musicians.

Editor

Jorge Faz is a recent graduate and a creative editor living in Laredo, Texas.

Sound Mixer

Richard Shapiro is a recent graduate and a freelance sound mixer in Washington D.C.

Supporting Cast

Ciara Regimbal-Walsh – Dance student

Catherine Musinsky – friend of Sharon Marroquin

Alisa Slevia - nurse

APPENDIX D

Transcript for MIJO Documentary

00:00:00

Q: What happens when someone dies?

A: A lot of people should know that.

00:00:05

Dali: Dying is like... when you close your eyes and huh you stop breathing and when you stop breathing you...you are like going to bed but you can't ...you can't wake up. You never wake up.

00:00:22

Music

00:00:37

Dali: My mom is named Sharon. She dances a lot and she is really good. She got injections or something and she was drinking a medicine that ...that made her hair fall off. And she is starting to get her hair back.

00:01:02

Sharon: Like February or something when you were taking class do you remember that I told everybody that I was diagnosed with Breast Cancer. Do you remember that?

Well the show I am going to make has to do with that and everything that I have experienced and gone through. Like both the good and the bad. Right! So that is what my whole show is about and this part of it that I want to work on with you ... is...I imagine us sleeping ...and we are somewhat...we are moving kind of at the same time we roll over at the same time.

Sharon: Like he sleeps in his own bed but half way through the night he always joins me.

Ciara: Yeah.

Sharon: You know. Did you ever do that with your parents.

Ciara: Yes

Sharon: Yeah. And So it is like when he turns I turn and when I turn he turns. You know or he puts a leg over my ...over me and I push it off and I put my arm over him. So I am imagining something like that.

00:02:04

Sharon: I am going to take a little nap. Ok?

Dali: Mama Why?

Sharon: Is that ok?

Dali: No

Sharon: Will you let me take a nap?

Dali: No

Sharon: Why not?

Dali: Because I don't want you to.

Sharon: yeah I want to take a nap.

Dali: No No

Sharon: I am going to lie down. I am going to the bathroom and then I am go to..yeah I am going to lie down. That is what I am going to do.

Dali: I don't care.

Sharon: So what you going to do when I take a nap?

Dali: I don't know. Poop on the bed.

Sharon: OK good idea. Good Night.

Dali: I will just take care of the house.

Dali: If he be's good I will put an A

Dali: So sticky notes.

Sharon: (yawning) Give me 10 more minutes.

Dali: Are these sticky notes.

Sharon: hmm hmm

00:02:56

Sharon: Three days ago was the ...the one year mark of when I got the diagnosis. So it was...

Phone rings

Sharon: right let's see if that is the doctor.

Sharon: I bet it is. Yeah.

Sharon: Hello

Doctor: Hi, Can I speak to Sharon?

Sharon: This is she.

Doctor: Sharon this is Dr. How are you?

Sharon: Hi Doctor. I am ok.

Doctor: Well, Unfortunately it does show that you have a blood clot in your blood vessels. What I am going to tell the emergency room physician is to start you on lovenox. That is a blood thinner. You usually give a shot in your belly. You have to do it for twice a day.

Sharon: For how long?

Doctor: For about a week or week and a half.

Sharon: Oh my god.

00:03:49

Nurse: Again the medicine is all pre-loaded and just pull the syringe straight off. It is little bitty. Ok pinch up the skin and then just straight in. Ready one, two, three. Ok and then they just push and pull it out.

Sharon: Oh it hurt.

Nurse: Did it hurt?

Sharon: yeah

Nurse: Oooh. Ok it is ok . It is ok.

Sharon: I think it hurt more than in the thigh.

Nurse: Did it? well like I said you can move them around. They absorb better in the tummy but you decide. You decide.

Sharon: ok

Nurse: Ok. You don't even need a bandaid or anything.

Sharon: Aiyee got dizzy.

Nurse: (laughs) Anxious too probably.

Sharon: Yeah.

Nurse: I am going to pull your feet up. Ok. Still feel light headed? Sharon Sharon Sharon. Angela Sharon Sharon

00:04:47

Sharon: If it did become dislodged would I even have time to call 911 and she said no.

Dali: Come on baby come to daddy.

Sharon: I have been seeing that impermanence or seeing death right next to me all day and all night. Not as ok I am going to die but it could happen and it is right there.

00:05:22

Sharon: What would you do ? And you call 911. You go look for my telephone and you call. What you going to tell them?

Dali: My mom is sick. Really really sick that she can't get up.

Sharon: good.

Dali: And the phone number...I mean the house number is 2611 and the street Baxter drive.

Sharon: Excellent, good job, beautiful, very good.

Dali: I don't know what she had. I don't think she was going to die. If she was about to die, she would go somewhere.

Q: So you were not worried about her?

Dali: No

00:06:06

Music

Sharon: fifth one take zip brings it in. Sorry about that. Fondu.

00:06:21

Sharon: one two

Dali: No. you are so fast.

Sharon: One two.

Dali: It is hard.

Sharon: ok buddy let's go.

Dali: Let's go let's go

00:06:45

Sharon: I wonder who these people are? Are they statues? Why are they there? We don't know? We will find out tomorrow. Ok

Sharon: Alright Dali. Do you want to say your prayer? Are you already asleep? How about I say it? Ok

Sharon: God. Thank you for my son. I love him very much. Thank you for my family. Because love is very important. Thank you for our health. Thank you for our life. Thank you for all the beautiful things.

00:07:50

Sharon: Thinking about Dali really and how ...like...he is what makes me not want to give up. I want to keep going ..um..so there is where I came up with that title. So between Death and I. So if Death is there and I am here, he stands right in the middle, so that I can't cross over so easily.

00:08:25

Music

00:09:00

Dali: Stop it stop it

Music , Dance and then Titles

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