

Images of the War on Cancer in the Associated Press: Centering Survivors and Marginalizing Victims

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Using the war metaphor for cancer, the media often label those with cancer as either victims or survivors but it is unclear what determines which label is used. We used content and discourse analysis to examine 296 Associated Press photos, captions, and titles of cancer victims and cancer survivors from 1995-2005. Survivors were portrayed more often ($n = 235$) than victims ($n = 61$). Pediatric cancers were more associated with cancer victims ($n = 26$) than survivors ($n = 13$). Women were more often connected to cancer (women 58.8%, men 41.2%), and more frequently represented as cancer survivors (75.4%). International photos ($n = 30$) were more likely to be depicted as cancer victims. Comparing our analysis to the National Cancer Institute statistics, we argue that these texts discursively marginalized foreigners and centered U.S. women and cancer survivors through four strategies: (1) disproportionate frequencies, (2) demographic profiles, (3) portrayals of responsibility, and (4) the depiction of agency.

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Since 1971 when President Nixon declared a federal “war on cancer” with the [National Cancer Act](#), war has been the prevailing metaphor used to describe and “combat” cancer ([Penson](#), Schapira, Daniels, Chabner, & Lynch, 2004). Because of the prevalence of this metaphor, people may find it difficult to talk about the disease without employing one of the many terms associated with the war metaphor. For instance, a person undergoing chemotherapy is “fighting,” “battling,” or “combating” the disease. In immunology, “lymphocytes are ‘deployed’ or ‘mobilized,’ the protagonists are ‘killer’ cells and the images are all of ‘battles’ for supremacy and survival” ([Penson](#), et al., 2004, p. 709). Oncologists tell their patients that they know of a new “magic bullet” to treat the disease ([Penson](#), et al., 2004). The political community continues to use the war metaphor. In 2001, Senator Feinstein commissioned the report “[Conquering Cancer: A National Battle Plan to Eradicate Cancer in our Lifetime](#)” ([Barker & Jordan](#), 2003, ¶ 26). The use of the war metaphor also remains prevalent in the literature on cancer in numerous newspaper ([Epstein](#), 2005) and newsmagazine articles ([Arnst](#), 2005), academic analyses ([Clarke](#), 1999a; 1999b; [Clarke & Everest](#), 2006; [Grant & Hundley](#), 2008; [Stibbe](#), 1997), books ([Frähm & Frähm](#), 1992), and oral descriptions of those “fighting” cancer ([Carter](#), 2003; [CNN.Com](#), 2005; [Bowker](#), 1996; [Kuner](#), Orsborn, Quigley, & Stroup, 1999).

The war metaphor is not only used to talk *about* cancer, it is also used to describe people *with* cancer, dividing them into “[cancer victims](#)” and “[cancer survivors](#).” Through the late twentieth century, a person diagnosed with cancer was termed a “cancer victim.” The term “cancer survivor” was coined in 1985 by Dr. Fitzhugh Mullan ([MedicineNet](#), 2006). In 1986, the [National Coalition for Cancer Survivorship](#) (NCCS) set out to change the parlance from cancer “victim” to cancer “survivor” ([NCCS](#), 2007). Their definition of a cancer survivor as a person from the time of cancer diagnosis until the balance of life is now the norm for the cancer community ([National Cancer Institute](#), 2005). Despite this definition, the term is extremely broad; cancer survivors include those who just received a cancer diagnosis, those in treatment, those in remission, those actively dying from cancer, and those who have been cancer free for decades. Perhaps for this reason, the term “cancer survivor” is frequently misused ([National Cancer Institute](#), 2005).

Unlike “cancer survivor,” the term “cancer victim” no longer has a specific definition, but is still frequently used. Often the term “cancer victim” is used to contrast those who have died from cancer compared to the “survivors” still living with the disease. Sometimes being a cancer victim is seen as a state of body, while being a cancer survivor is a state of mind ([Levitt](#), 1998). At other times, the term harkens back to the common definition of a victim referring to “one that is injured, destroyed” or one who suffers from cancer ([Mish](#), 2005, p. 1394). Regardless of whether the term “cancer victim” or “cancer survivor” is used, the metaphor evoked is still of a person involved in a war with a disease.

The war metaphor for cancer has implications for the identities of those with the disease. Sociologists, psychologists, and communication scholars all agree that the use of metaphor remains salient to retain the power to identify and define the allies and enemies, winners and losers, victors and victims. This discursive power is vital in war and in other aspects of life since “the constitution of a social identity is an act of power” ([Hall](#), 1996, p. 18).

The media play an important role in constituting and defining the image and identities of

those with cancer by controlling the messages broadcast to society. Early media effects studies began to acknowledge the power to define and, therefore, control others. More recent scholars have acknowledged this power relationship and tried to combat it by giving voice to the marginalized others (see e.g. [Kim](#), 2002; [Tuhiwai Smith](#), 1999). Despite such efforts, the practice of maintaining power and privilege remains pervasive in American culture.

These same themes of power and privilege have been manifest in American media portrayals of cancer. [Clarke](#) ([1992](#); [1999a](#); [1999b](#); [2005](#)) conducted numerous research projects to examine how the print media portray cancer. She found that magazines described cancer negatively as an evil, immoral predator, portrayed cancer as an enemy, and associated military imagery and tactics with the disease ([Clarke](#), 1992). Her study of prostate cancer, [Clarke](#) (1999b) found latent themes of gender wars in magazine articles. [Clarke's](#) (2005) study of the portrayal of children with cancer found that magazines stigmatized people with cancer and depicted children with cancer as having heroic and idealized character traits. Thus, [Clarke's](#) work reveals that portrayals of cancer in print media reinforce gender and disease stereotypes that present cancer as "the enemy" (also see [Lupton](#), 1994).

Clearly, the war metaphor has become enculturated as a perspective on cancer. Medical practitioners, politicians, advocacy groups, and the media embrace the war metaphor in describing cancer and assign people with cancer as either victims or survivors, yet these terms are not coherently defined. Thus, this investigation seeks to determine the meaning the media give to these terms through the portrayals of cancer victims and cancer survivors. We use quantitative and qualitative approaches to examine the verbal and visual depictions of cancer survivors and victims in the [Associated Press](#), to see how they are portrayed differently, and to critically explore the identity and power implications of these portrayals.

Content Analysis

To examine the portrayals of cancer victims and survivors, we concentrated specifically on the photos, captions, and titles in the Associated Press (AP) because it is one of the largest and oldest news organizations in the world, serving as a source of news, photos, graphics, audio, and video for half of the world's population each day ([AP](#), 2007). It has received more Pulitzer prizes than any news organization: 49 overall, with 30 for photography. It provides news and photos to 1,700 U.S. newspapers and 550 international broadcast subscribers from 121 countries ([AP](#), 2007).

We explored ten years of the [AccuNet/AP](#) database from August 1995 through July 2005 ([AccuWeather](#), 2005). This database archives more than a million photos from the AP spanning from late 1995 to the present, with some historical photos added going back to 1826 ([AccuWeather](#), 2006). It represents approximately 2% of all AP photos, providing a manageable sample size with duplicate photos deleted, and hundreds of historical photos added ([Sheret](#), 2001). Two keyword searches for "cancer victim" and "cancer survivor" in the data based yielded 297 photos from August 1995-July 2005. Each photo included a headline, descriptive caption, and other identifying information such as the location, date, photographer, and identification number. Since the purpose of this study was to discover the differing portrayals of cancer victims and survivor, we eliminated one photo that portrayed both victims and survivors from analysis. The 296 remaining photos and accompanying captions and headlines comprised

our texts.

To retain the richness of the data while simultaneously testing for significant relationships, we used both numeric content analysis as well as a cultural studies analysis. First, we began with a content analysis to narrow and simplify our data. We use [Berelson's](#) (1952) classic definition of content analysis as "the objective, systematic, and quantitative description of the manifest content of communication" (p. 18). To examine the manifest content, the authors coded the photos and their attached texts for the following information: victim/survivor, type of cancer, number of people, sex, age, celebrity status, assignment of blame, location (US or foreign, and date).

We also recorded notes about the events, people, actions, and situations portrayed to supplement the categorizations and offer further detail about each photo. We independently coded 31 (10.4%) randomly selected photos, captions, and titles (21 survivor, 10 victim) and determined that we had adequate intercoder reliability using Krippendorff's alpha ($\alpha = .88$). This statistic corrects for chance agreements, level of measurement, number of coders, and missing data ([Hayes & Krippendorff](#), 2007). The lowest reliabilities occurred in the sex ($\alpha = .70$) and age ($\alpha = .77$) categories. All coding disagreements were resolved through discussion. After meeting adequate reliability, we divided the remaining photos equally between us and coded them separately.

Discourse Analysis

Since discourse works ideologically to naturalize particular meanings on social topics within texts, we used discourse to investigate how the AP photos discursively present cancer to the public and differentiate between presentations of cancer victims and survivors. [Fiske](#) (1991, p. 447) defined discourse as "an ideological way of thinking about and representing an important topic area in social experience." We argue that cancer survivors and victims are naturalized within the media and society and must be deconstructed to reveal the underlying ideologies.

Once we statistically determined significant features within our texts, we approached our data from a cultural studies perspective. Specifically, this approach involved questioning identity construction and power. With this approach, we sought to understand how the AP service discursively constructs victims and survivors, the center and the margins, and ultimately demonstrates power to define and construct social identities for people with cancer.

Results

The photos and their captions identified 25 specific types of cancer: blood, bone, brain, breast, cervical, colon, esophageal, leukemia, liver, lung, lymphoma, muscle and joint, multiple myeloma, neuroblastoma, oral, ovarian, pancreatic, prostate, skin, synovial sarcoma, testicular, throat, thyroid, trachea, and uterine. They also mentioned pediatric cancer (of any type) in 39 (13.1%) of the photos.

Cancer survivors were represented in 235 (79.4%) of the photos, while cancer victims were found in 61 (20.6%). The AP portrayed 97% of the breast cancer photos as survivors ($n = 97$), as well as 100% of the colon cancer ($n = 6$), and prostate cancer ($n = 5$) photos. In contrast, 83.3% ($n = 5$) of the lung cancer photos were portrayed as victims. Women's cancers (breast,

cervical, and ovarian, $n = 114$) were significantly more likely to be associated with survivors ($n_{\text{surv}} = 109$) than victims ($n_{\text{vict}} = 5$, $\chi^2 = 29.82$, $df = 1$, $p < .000$). Pediatric cancers were also significantly more likely to be identified as victims ($n_{\text{ped vict}} = 26$) as survivors ($n_{\text{ped surv}} = 26$, $\chi^2 = 4.45$, $df = 1$, $p = .035$).

Females appeared in 99 photos, males = 68, mixed sex = 125, unidentified sex = 4. Portrayals of females (either alone or in mixed gendered groups) did not differ significantly by victim/survivor ($\chi^2 = 2.51$, $df = 1$, $p = .11$).

All combinations of age groups appeared in the photos (child = 13, adult = 164, elder = 24, child and adult = 34, child and elder = 5, adult and elder = 44, all ages = 12). Older adults were not more likely to be portrayed as cancer survivors or victims ($n_{\text{elder vict}} = 15$, $\chi^2 = .23$, $df = 1$, $p = .63$). However, photos portraying adults ages 18-64 whether alone or with another age group ($n_{\text{adults}} = 254$, $n_{\text{adult vict}} = 54$) approached significance for showing women to be depicted as survivors ($n_{\text{wom surv}} = 161$, $n_{\text{wom vict}} = 37$) more than men ($\chi^2 = 3.55$, $df = 1$, $p = .059$).

Celebrities appeared alone in 40 photos, non-celebrities in 177, and celebrities with non-celebrities in 79. Celebrities were not more likely to appear in either victim or survivor shots ($n_{\text{celeb vict}} = 23$, $\chi^2 = .20$, $df = 1$, $p = .65$).

The photos depicted individuals as well as groups of 2, 3, and four or more ($n_1 = 86$, $n_2 = 53$, $n_3 = 17$, $n_{4+} = 140$). The number of individuals in the shot did not differ significantly by victim or survivor ($n_{1-\text{vict}} = 21$, $n_{2-\text{vict}} = 11$, $n_{3-\text{vict}} = 6$, $\chi^2 = 4.5$, $df = 3$, $p = .21$).

Blame was assigned in 32 photos (22 victim, 10 survivor). Victims were significantly more likely to assign blame to others than were survivors ($\chi^2 = 50.82$, $df = 1$, $p < .000$, $\phi = .38$).

Just over 10% of the images were taken in countries outside the US ($n_{\text{int}} = 30$). Victims were significantly more likely to appear in international shots ($n_{\text{int vict}} = 15$) than domestic ones ($n_{\text{dom vict}} = 46$, $\chi^2 = 17.63$, $df = 1$, $p < .000$).

Examining the years of the photos revealed that victims ($M_{\text{vict}} = 2000.38$, $sd = 3.04$) appeared significantly earlier in the sample than did survivors ($M_{\text{surv}} = 2001.91$, $sd = 2.58$, $t = -3.63$, $df = 83.7$, $r = .37$). Domestic ($n_{\text{dom}} = 266$, $M = 2001.55$, $sd = 2.79$) and international ($n_{\text{int}} = 30$, $M = 2002.00$, $df = 2.29$) portrayals did not differ by year ($t = -.99$, $df = 39.4$, $p = .33$).

From a discourse analytic point of view, the analysis revealed four strategies the AP service used to naturalize U.S. superiority, vis-à-vis winning the war on cancer. These strategies included centering the survivors and marginalizing the victims through (1) disproportionate frequencies, (2) demographic profiles, (3) portrayals of responsibility, and (4) the depiction of agency.

The most apparent observation when we gathered our data was the vast difference in photos attributed to cancer survivors versus cancer victims. By using the terms “victim” and “survivor” the AP set up a linguistic dichotomy. According to [Hall](#) (1996, p. 17) “identities are constructed through, not outside, difference” (also see [Derrida](#), 1981; [Butler](#), 1993; [Laclau](#),

1990). Thus, the AP categorically divided the identities of people with cancer are as those who live (survivors) and those who die (victims). We find this disturbing. In war, the enemy is supposed to die. Yet in the AP depicts some survivors as dead while many victims remain alive, and cancer (the real enemy) is undefeated.

Disproportionate Frequencies

One strategy used to center survivors was to depict them in the majority. While it is true that most people who receive a cancer diagnosis will not die from cancer, the AP depictions showed a disproportionate number of survivors of 4:5. The [National Cancer Institute](#) (NCI) reports that while people have a lifetime risk of about 3:5 of receiving a cancer diagnosis at some point in their lives, the lifetime risk of dying from cancer is only about 1:5 ([Ries](#), et al., 2005). By misrepresenting statistics through their visual depictions, the AP concretely entrenched cancer survivors as the center and victims as the margins. It is clear the AP pushed victims on the margins of survivors by sheer frequency and perpetuated the idea that the medical and scientific fields are currently “winning” the war on this disease.

Demographic Profiles

Another discursive strategy the AP used to center survivors was to identify survivors and victims through varying demographics. Female adults were more likely to be portrayed as those with cancer. Single-sex photos portrayed women 56% of the time, while portraying men 41% of the time. If the mixed-sex photos are included, women appeared in 77% of the images. However, while the AP showed females more often as survivors (82%), they portrayed people with pediatric cancers (or children) more often as victims.

These findings suggest power relations on different levels. First, the dominance of women having cancer in the texts was inconsistent compared with men. According to the [NCI](#), men have a 46.9% lifetime risk of receiving a cancer diagnosis, while women have a 41.44% risk ([Ries](#), et al., 2005). Nevertheless, the portrayal in our texts suggested that women are more prone to disease, perpetuating the strong virile man myth in American culture. The second kind of power relation at work was the portrayal of children as victims. Hence children are portrayed as incapable of coping with the realities of war, and thus must suffer its tragic consequences.

A chi-square analysis found that people in U.S. photos were significantly more likely to be survivors while people outside the US were more likely to be victims. Furthermore, although the use of the term “survivor” is more common later in the dataset, the change only applies to people in the US. This finding resonates with connotations regarding superior first world and inferior third world science, technology, and culture. Several shots of U.S. survivors included American icon [Lance Armstrong](#) bicycling across the country cancer researchers, nurses, physicians, caregivers and cancer survivors (e.g. Images [Bailey](#), 2000; [Cummings](#), 2003; [Terry](#), 2004, see [Appendix A](#)).

Note: All photos from AccuWeather, Inc. AccuNet/AP multimedia archive photo index. Retrieved August 9, 2005 from <http://ap.accuweather.com>

Photographer	Date	Title	Image Number
American Communication Journal Associated Press/ United Artists	1999, July 1	Obit Sidney	3739540 (007D0)
Bailey, E.	2000, February 8	Armstrong cancer	4303487 (002OV)
Conklin, J.	2005, May 19	Hanford downwinders	8133222 (002HI)
Cummings, D.	2003, October 16	Armstrong cancer	6980132 (0003O)
Demarchelir, P.	1999, April 21	Obit Tilberis	3541740 (001CC)
Derer, M.	2005, March 16	A widow's crusade	7859899 (007MZ)
Dovarganes, D.	2003, June 20	Atomic survivors	6816521 (00515)
Edlund, A. W.	1999, May 25	Red Hawk Woman	3637750 (005ZA)
Felix, E	2005a, May 13	Nicaragua Nemagon	8108968 (006X4)
Felix, E.	2004, March 5	Nicaragua cancer	7177061 (005G5)
Felix, E.	2005b, May 13	Nicaragua Nemagon	8108958 (006WU)
Felix, E.	2005c, May 13	Nicaragua Nemagon	8108978 (006XE)
Keiser, B. A.	1998, July 31	Radium girls	2972470 (001WM)
Keiser, B. A.	1995, October 20	Socialite sale	536571 (000FV)
Leon, A	2005, April 13	Nicaragua Nemagon	7996520 (00514)
Luedke, M. J.	1997, April 10	Tobacco suit	1888627 (006NN)
Moffitt, B.	2004, April 23	Cancer walkers	7253588 (002RO)
Nading, B.	2002, August 16	Relay for life	6392814 (00266)
Riffe, C.	2004, August 6	Relay for life	7401142 (000VQ)
Schneider, C.	2004, October 3	Race for the Cure	7487272 (005M0)
Shurtleff, A.	2003, October 9	Couric funeral	6969845 (007LH)
Sommers, J.	2002, May 6	Breast cancer	6258935 (006W7)
Takahashi, K	2001, May 20	Breast cancer walk	5778544 (006LC)
Terry, A.	2004, October 4	Tour of hope Armstrong	7488469 (006J9)
Vogel, R.	2002, March 2	Vietnam Agent Orange	6174015 (0033J)
Worner, T.	2004, May 8	Breast cancer	7272644 (0021G)
Yu, V.	2004, December 3	Hong Kong Bhopal	7566702(005 66)



Cancer survivor and six-time Tour de France winner Lance Armstrong, center, and the Bristol-Myers Squibb Tour of Hope team ride through the cheering crowds as they arrive at the University of Colorado Cancer Center in Aurora, Colo., Monday, Oct. 4, 2004. (AP Photo/ Rocky Mountain News, Ahmad [Terry](#))

U.S. superiority was evident when juxtaposing these shots with pictures of powerless, international victims, such as Nicaraguan farmer, Celestino Juarez, who suffered from the effects of the insecticide [Nemagon](#). The photo showed him shirtless and emaciated with his head in his hands, sitting in squalor (Image [Felix](#), 2005a).



Cancer victim: Celestino Juarez, a farmer affected by the insecticide called Nemagon during the 1970's reset during a protest in front of the National Assembly, in Managua, Nicaragua, Friday May, 13, 2005. The U.S. government banned the pesticide in 1977. (AP Photo/Esteban [Felix](#), 2005a)

Such depictions contrasted greatly with images of U.S. citizens portrayed as positive, strong, healthy, determined survivors. When paired with images of weak, destitute, foreign victims, the AP naturalized U.S. superiority as an unquestioned, taken-for-granted concept.

Besides gender, age, and nationality, we also identified other demographic strategies that the AP used to center cancer survivors and marginalize victims. These strategies include what kind of cancer is associated with the “winning” and “losing” sides, the reasons for contracting the disease, and reactions to the diagnoses.

In the texts, certain cancers are “victim” cancers, and some are “survivor” cancers. Breast cancer, colon cancer, and prostate cancer are strongly associated with survivors, however, lung

cancer is mostly as a “victim” cancer. One reason for this disparity might be the powerful efforts of advocacy groups for breast, colon, and prostate cancer compared with that of lung cancer. The [National Breast Cancer Coalition \(2008\)](#) consists of over 600 member organizations and 70,000 advocates. It was named one of the 20 most influential groups in health policy by Congressional staffers in 2003. The [National Prostate Cancer Coalition \(2007\)](#) has worked to increase federal funding for prostate cancer research from \$85.5 million in 1995 to \$441 million in 2007. Colon cancer awareness and funding received a boost when [President Reagan](#) was diagnosed with the disease in 1987 ([Fabricant & Fintor, 1997](#)) and again in 2000 when [Katie Couric](#) launched her colorectal cancer awareness program on the [Today Show](#) after her husband’s death from the disease. Her campaign was so successful, that the term, “[Katie Couric Effect](#),” was coined to represent the impact celebrity endorsements can have on cancer awareness ([Cram, Fendrick, Inadomi, Cowen, Carpenter, & Vijan, 2003](#)). In contrast to these successes, the [American Lung Association \(ALA, 2008\)](#) notes that death rates for lung disease are on the rise, while other leading causes of death have declined. Lung cancer is the leading cancer killer for both men and women, while 87% of lung cancers are smoking-related ([ALA, 2007](#)). Thus, this differential association of some types of cancer with victims or survivors may be a reflection of the media’s perception of the battles we are “winning” against cancer, versus those we are “losing.”

Portrayal of Responsibility

Next, we examined if the AP assigned blame to the person’s cancer. Although many people with cancer may connect a cause for the disease, the AP service signified blame more often for victims than for survivors. Again, this strategy reinforced the centering of cancer survivors and the marginalization of victims.

Interestingly, the photos tied a majority of the blame to the U.S. corporations and federal government. For instance, photos assigned fault to American fruit companies (e.g. [Chiquita Brands International](#), [Dole](#), and [Del Monte Foods](#)) for the use of the pesticide Nemagon in Nicaragua (Images [Felix, 2005a, b, c](#); [Leon, 2005](#)). The [Shell Chemical Company](#) manufactured Nemagon, but the [Environmental Protection Agency](#) banned it in the US in 1979 ([Orme & Kegley, 2004](#)). However, it remained in use in other countries. In India, cancer victims blamed [Union Carbide](#) for a [leak of poisonous gas in 1984](#) that killed 10,000 people and affected more than 555,000 others with gas-related illnesses, like lung cancer, kidney failure and liver disease (Image [Yu, 2004](#)). U.S. corporations were also the targets of blame in domestic photos. Jean Connor testified against [R.J. Reynolds Tobacco Company](#) claiming the company caused the lung cancer that led to her death (Image [Luedke, 1997](#)). Widow Betty Ann Kearney sought the cause of her husband’s cancer by seeking other victims who worked with her husband at the [Bayway Refinery](#) (Image [Derer, 2005](#)). In another photo, Darlene Halm was shown cleaning grass and debris from the graves of family members who fell victim to radiation poisoning from the [Radium Dial Company](#) (Image [Keiser, 1998](#)). All these examples blamed U.S. companies for causing cancer.

The AP portrayed government fault when the US used [Agent Orange](#) (Image [Vogel, 2002](#)) in the Vietnam War, and when the US dropped the A-bomb on [Hiroshima](#) (Image [Dovarganes, 2003](#)). Within the US, “[downwinder](#)” Shannon Rhodes “claim[ed] that her thyroid cancer was caused by the radiation” from the [government’s nuclear installation in Hanford, New](#)

[Jersey](#) (Image [Conklin](#), 2005).

Through these portrayals of U.S. corporate and government fault, the AP depicted victims as deflecting their status, making them seemingly irresponsible for their actions and rationalizing their situations through outside factors. In contrast, the AP did not portray survivors as blaming others for their disease. Instead, survivors seemingly relished their positions as victors, not considering how they got to war, but that they came out victorious.

Portrayal of Agency

A final strategy used to reinforce the centered survivors and marginalized victims was the AP's portrayal of agency. Aligned with the notion of "others," the images and captions showed victims as passive people unwilling to take action for their situation. Thus, not only did victims assign blame outwardly, they did not visually or verbally enact their own agency in this war. The AP's portrayals coincide with [Audre Lorde](#)'s view that victims are silent and passive, and thus invisible and powerless ([Olson](#), 1997).

Many examples of passive victims in the texts were drawn from obituaries (Images [Demarchelir](#), 1999; [Associated Press/United Artists](#), 1999), shots of gravesites (Image [Keiser](#), 1998), and funerals (Images [Edlund](#), 1999; [Felix](#), 2004; [Leon](#), 2005; [Shurtleff](#), 2003) in which it was too late to enact agency. One particularly poignant illustration was of a rummage sale to pay the medical bills of socialite Suzanne Kuhnen who died from cancer without insurance (Image [Keiser](#), 1995). Indeed, if this "victim" enacted agency to thwart off her disease, the AP did not disclose it. Instead, the portrayal highlighted her destitute death.

In contrast, the AP images portrayed survivors, as healthy, active people, who took steps to ensure they won the war and celebrated their triumphs along the way. Active survivors were exemplified in photos of the [Susan G. Komen "Race for the Cure"](#) (Images [Schneider](#), 2004; [Worner](#), 2004), the [American Cancer Society's "Relay for Life"](#) (Images [Moffitt](#), 2004; [Riffe](#), 2004), the ["Celebration of Hope"](#) (Image [Sommers](#), 2002), and many others. In particular, U.S. women survivors participated in walk-a-thons, marathons, mountain climbs, [dragon boat races](#), and other physical activities to raise awareness, money, and solidarity. The captions told of cancer survivors who pumped their fists in the air (Image [Schneider](#), 2004), clutched roses in their teeth (Image [Takahashi](#), 2001), and took victory laps (Image [Nading](#), 2002). Indeed, the survivors were not passive, but rather engaged in acts of combat and celebration--ultimately winning their battles against cancer.

Conclusions

The media remain an important source for learning about a variety of topics and issues. Nevertheless, media critics as well as the public must remain cognizant of its power not only to tell the story, but also perpetuate it (as the drench hypothesis suggests), and ascribe salience (as agenda setting theory warns), as well as its power to (mis)represent numerous topics and issues, including diseases like cancer. Such misrepresentations may include reporting skewed frequencies, favoring particular demographics, or illustrating an imbalance appearing to support one side of the issue and discard another. Through their portrayals, the media maintain the power to construct identities, as we argue the AP service does for cancer victims and survivors.

Any mediated story contains these issues, however, the interesting finding in this study is how the AP service constructed cancer survivor and victim identities and implicitly naturalized U.S. superiority. For instance, the texts under investigation associate cancer survivors with U.S. adult citizens who do not blame others for their situation, and demonstrate agency. The portrayals of victims, on the other hand, are of third world people, children, those who assign blame to others, and do not enact agency. Indeed, the number of survivors far outweigh the number of victims, giving U.S. survivors more exposure and power. These findings suggest that the US is superior in its science, technology, and culture by winning the war on cancer.

All of us must be wary of the construction of such centralized and marginalized dichotomies. If we insist on using the war metaphor perhaps all people with cancer should be allies against the true enemy, cancer itself, rather than framing victims and survivors as separate spheres. In war, we are all victims. This concept leads to two points of discussion: the definition of survivors and victims, and the utilization of the war metaphor when speaking about cancer.

Using identification ([Hall](#), 1996) to mark power, difference, and exclusion is obvious in the AP's ideological social construction of people with cancer by identifying them as survivors and victims. Rather than marking differences between people with cancer and people without cancer, or people with bone cancer and people with ovarian cancer, for instance, the media discursively identifies those who live and those who die, those who passively suffer and those who act. They portray people who live with cancer generally as active women within the US. People who die from cancer are primarily children and people outside the US who passively lay blame for their condition.

Essentially, we take issue with the ideological division of people with cancer into survivors and victims. Using the war metaphor, enemies are those intended to die, victims are those who suffer because of the war. Thus, anyone who contracts cancer could be conceived as a victim. Anyone who remains alive could be identified as a survivor, since that person is still alive, that person is surviving the disease. Indeed, this is the very definition of a cancer survivor used by the [NCI](#) (2005).

However, the AP does not use the terms in this manner. Survivors are heroes; victims and death are seemingly demonized as the enemy. Keeping within the war metaphor, we posit that people with cancer, whether living or dead, are heroes and cancer itself is the enemy. In an essay on portraits of people with AIDS, [Crimp](#) (1992) suggests that photographs can deny the difference between the observer and the subject to the point that the observer sees herself as the subject in the photo. The AP photos under study not only fail to bridge this gap, they widen it by constructing cancer identities that favor U.S. science, technology, and culture.

The discussion of survivors and victims leads easily into the discussion of the war metaphor itself. We question the appropriateness of this metaphor in the case of cancer. One aspect of war is to dehumanize people (endemic of the mimetic transformation people who join the military undergo), making it easier to send them into battle or even kill them. However, people with cancer, whether identified as survivors or victims should not be dehumanized. [Frank](#) (1991) writes, that "the ill want not only to be cared for in their physical needs, but to be recognized in their condition, or, for this condition to be recognized as fully human" (p. 87).

Rather than marking people as survivors or victims, we should recognize them as people with a disease, strengthening the similarities that people with cancer share. Doing so might encourage research funding and treatment to extend across political borders, ages, genders and ethnicities.

War dehumanizes people by identifying enemies as Satan, evil doers, barbaric savages, or genocidal tyrants. Yet, in the war on cancer, enemies are portrayed as cancer victims or implicitly as death rather than the disease itself. We argue that in the war on cancer, people are not the enemy. Survivors are not only those diagnosed with cancer, but all of us who continue living and coping with the disease in our world. Indeed, the [NCCS](#) (2007) recently expanded its definition of a cancer survivor to include family, friends, and caregivers. Similarly, victims are not only those who die or those in other nations, but all of society touched by the invasiveness of cancer. The true enemy in cancer is the disease, yet in using the war metaphor for cancer, the AP service has seemingly been unable to translate the enemy into a nonhuman entity. The issue of death suggests another discrepancy with the war metaphor for cancer. In war, death is expected and even socially acceptable when associated with the enemy. Yet, in the war on cancer, the enemy (cancer) does not die, but the people with the disease do.

War is a place of division, and cancer is a disease in which division among people is not useful. The media may be presenting numerous success stories, encouraging those with cancer to take an active part in their recovery; however, misrepresenting statistics and biasing particular groups (i.e. women and the US) may work against the battle encouraging people to believe that enough funds have been raised and that research is working to eradicate cancer.

Finally, although cancer is an indiscriminant disease, the AP's coverage is not. By using the war metaphor, the AP celebrates U.S. life and victories and reifies stereotypes of developing nations rather than unifying all of humanity in the quest for health and a cure for this pervasive disease. Clearly, for these reasons, both the media and society must rethink the war metaphor when used to discuss and frame diseases such as cancer.

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