

Bookreview: Pink ribbons, Inc. breast cancer and the politics of philanthropy. Samantha King. Minneapolis and London: University of Minnesota Press, 2006, 157 pp. ISBN 978-0-8166-4898-6 (paper). \$US18.95

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Pink ribbons, Inc. breast cancer and the politics of philanthropy

Samantha King. Minneapolis and London: University of Minnesota Press, 2006, 157 pp.

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A recent issue of my undergraduate university's alumni magazine contains four full-page advertisements: private jet planes (you can also buy "factional ownership"), a business school's summer course that promises "to give students an advantage in recruiting and in everything they pursue", and designer wristwatches ("our passion for perfection and love of detail"). The fourth advertisement makes no explicit offer or request. It simply proclaims the presence of "Susan G. Komen for the Cure" and invites readers to visit komen.org/ivy for more information. The page tells a brief story how, in 1982, Nancy Brinker promised her dying sister, Susan Komen, "to do everything in her power to end breast cancer forever". *Pink Ribbons, Inc.* shows why a breast-cancer charity actually belongs within this collection of advertisements.

King demonstrates the linkages between neoliberal governments, corporations, and foundations that teach people how to imagine, experience, and respond to illness. She argues that "the emergence of the current preoccupation with consumer-oriented philanthropic solutions to social problems", coupled with "new techniques of soliciting corporate and individual donations", "have helped fashion a far-reaching constriction of public life, of the meaning of citizenship and political action, and of notions of responsibility and generosity" (p. xi). The book develops arguments initiated in Barbara Ehrenreich's classic 2001 article in *Harper's* magazine, "Welcome to Cancerland", and in Barron Lerner's *The Breast Cancer Wars: Hope, Fear, and the Pursuit of a Cure in Twentieth-Century America* (2001). King's distinct contribution is to illuminate the role of corporate philanthropy.

King's point of departure is 1953, when the U.S. courts made charitable donations tax deductible for corporations. By the 1980s, corporations "began to look for ways to make philanthropic activities profitable, and strategic philanthropy emerged as the solution... philanthropy is viewed as a possible route to gaining access to new markets at home and abroad, finding new partners with whom to do business, and enhancing sales" (p. 7). In this new corporate world of what King calls "cause-related marketing", breast cancer emerged as "a dream cause" (p. 9 ff.).

The Komen Foundation exemplifies the strategy of development through corporate partnerships, even with such apparently unlikely groups as the U.S. National Football League. Partners gain branding as good corporate citizens, and King cites profit figures that show how well image pays off. Should a corporation engage in activities that might draw criticism from

more activist members of groups receiving their funding, “nondisparagement” clauses are built into contracts, preventing any criticism of, for example, funders’ poor environmental records (p. 27).

Corporate partnerships affect consumer consciousness most directly through what King calls “the politics of civic fitness” (p. 29), notably the Komen Foundation’s “Race for the Cure”. Other events include walks, triathlons, dragon-boat races, bicycle rides, and mountain climbs. King underscores how much money is involved in these events; as one example, the Komen Foundation *purchased* rights to a walk previously sponsored by Avon. The international reach of events is also staggering. King provides a five-page table listing women’s health programs sponsored by Avon on all inhabited continents.

What is the problem with all this? Social scientists have long recognized that most gifts involve some reciprocity, but at what rate of return should a (tax deductible) gift be called the investment that it is? Setting that issue aside, is it not more important that medical research is funded, that breast cancer and other diseases are destigmatized by being brought into mainstream awareness, and that individuals are empowered by their participation in civic fitness? The answer can only be yes, but... and King fills in all the appropriate reservations. Civic fitness events overtly reinforce the mutual dependence of health and consumerism, beginning with the cost of entry, and extending through sponsors’ promotional work. King also emphasizes the more subtle acts of erasure that the events effect: two of her many examples are that neither environmental causes of cancer nor inequalities in access to treatment are mentionable topics in post-race speeches. Most disturbing, at least to some, is the projected image of diseases like cancer as curable “forever”. When events present “the” cure as depending upon intensity of participant dedication, can the implication be avoided that death is a failure of dedication?

Civic-fitness events have inverted the utopian vision of poet Audre Lorde, whose highly political memoir, *The Cancer Journals* (1983), imagines: “What would happen if an army of one-breasted women descended upon Congress and demanded that the use of carcinogenic, fat-stored hormones in beef-feed be outlawed?” (quoted by King, p. 35). The army is there, but events “leave little room for politically targeted anger” (p. 36). The social is subsumed in the personal: “No questions were asked about, nor was there any mention of, persistently high rates of breast cancer in the United States and worldwide” (p. 41). Moreover, the rhetoric of these events perpetuates what King calls a “tyranny of cheerfulness” that “provides no place for those women who cannot or do not wish to view their condition as a lucky gift” (p. 122).

King fully acknowledges the empowerment that many people do experience through civic fitness and other forms of health-charity activity. She also describes the activism of resistance to the corporatizing of survivorship. But her research follows the big money, leading her to

conclude: “the empowered patient—the activist-expert, the survivor—has become institutionalized and incorporated into the fabric of the cancer establishment” (p. 107). Few recent books so effectively display the founding mandate of this journal, to examine the expansive entwining of *health* in the broadest range of institutions and practices.

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Review notices: books on death and dying

Book review editor's note:

health: is fortunate to receive more books than we can actually review. Sometimes the problem is limited space for reviews; sometimes no one can be found to write the review; and I regret to say, sometimes reviews that have been agreed to are not delivered.

In an effort to at least provide notice of notable books, I offer these review notices of books that deal with death and dying.

Arthur W. Frank
Book review co-editor

Physician-assisted dying: The case for palliative care & patient choice.

Timothy E. Quill and Margaret P. Battin (eds.). Baltimore, MD: Johns Hopkins University Press, 2004. 342 pp.
ISBN 0-8018-8070-x. \$US 26.95 (paper).

Timothy Quill remains best known for his 1991 article in the *New England Journal of Medicine*, “Death and dying: A case of individualized decision making.” Quill described his relationship with a patient whom he called Diane, who was dying of cancer and, for reasons that Quill elaborates, refused aggressive treatment that had a low probability of success. Quill prescribed barbiturates to Diane for sleeping problems, knowing that she intended to use accumulated pills to end her life, which she did. “Diane”, as a bioethics case, has been a flashpoint of controversy since then, and Quill has written several books of compelling case histories that present patient choice-in-dying as a sane, humane option that can be better controlled if it is legalized.