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Engaging with the Cancer Warrior Metaphor: How Language Polices Interaction

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Abstract

Illness upsets daily activities, and if the illness is severe enough, may permanently alter routines and personal relationships. To make sense of the disturbance that illness causes, people may resort to the war metaphor. In the context of cancer, The Cancer Warrior Metaphor casts the ill person in the role of a warrior fighting cancer. When people diagnosed with cancer adopt this metaphor and thus take on the role of the Cancer Warrior, it affects their lives as well as the lives of those closest to them. This inquiry explores how individuals affected by cancer engage with the Cancer Warrior Metaphor. Discussion of the power of metaphor, storytelling, and the Cancer Warrior Metaphor itself establish a base of knowledge. Interviews with a woman diagnosed with cancer and two family members of those diagnosed provide evidence to support the existence of the Warrior Metaphor as well as allow for an examination of the far-reaching effects of the Metaphor. Ultimately, the narratives reveal that those touched by cancer search to personalize their metaphors to reflect their own experiences with cancer and oftentimes, the Cancer Warrior Metaphor is inadequate.

Introduction

What tools can people use to reconcile disorder in the body? Sociologist Talcott Parsons described "being sick [as] a disturbance in the 'normal' condition of the human being, both biologically *and* socially."[1] Illness is a form of deviance within the ill person, as well as that ill person's interpersonal relationships. To make sense of the disturbance that illness causes, people may resort to metaphors. In the book *Pain as Human Experience*, Paul E. Brodwin explains that when persons invoke metaphors, "they actually endow their pain with new meanings. The use of metaphor creatively restructures both the experience of chronic pain as well as its place in a person's most important social relations."[2] There is no reason to assume that metaphor's utility is unique to chronic pain; this may apply to many chronic illnesses. For the sufferer, metaphor is a way of understanding otherwise wordless distress and illness. Metaphors thus have the power to redefine illness and social interaction. In the case of serious chronic illness, metaphors are a powerful tool for understanding, defining, and reimagining that illness.

Perhaps one of the most ubiquitous metaphors is the War Metaphor. To describe someone as a "straight shooter" means that that person is honest and dependable. When someone gets a ticket they feel is unjust, they may say that they are going to "fight the charges." In 1982, President Reagan declared "war" on illegal drugs; men with polio "often considered their struggle against the effects of the disease as a military battle or athletic contest."[3] The War Metaphor rhetoric is not unique to any one issue; the examples provided are only a few among myriads. In the context of cancer, the War Metaphor takes the form of The Cancer Warrior

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[1] Cockerham, W. C.. (2016). *Medical sociology* (p. 189). Routledge.

[2] Brodwin, P. E. (1992). Symptoms and social performances: The case of Diane Reden. In M. J. Del Vecchio Good, P. E. Brodwin, B. J. Good, & A. Kleinman (Eds.), *Pain as human experience: An anthropological perspective* (p. 78). University of California Press.

[3] Wilson, D. J. (2004). Fighting polio like a man: intersections of masculinity, disability, and aging. In edited by B G. Smith & B. Hutchison (Eds.), *Gendering Disability* (p. 189), Rutgers University Press.

Metaphor. In this metaphor, people with cancer are cast in the role of a warrior fighting against cancer.

As metaphors do more than simply reconceptualize reality, casting a person as a warrior has powerful implications. In a review by linguistics professor Dr. Elena Semino, she states, “As salient meanings may be literal or non-literal, highly conventionalized metaphorical expressions will be processed by accessing the metaphorical meanings directly … Indeed, recent brain-imaging research does not suggest a clear-cut distinction between metaphorical and non-metaphorical language.”[4] If a person is familiar with a particular metaphor, it becomes more than just a metaphor – the brain comprehends the metaphor the same way it comprehends reality. Popular metaphors not only make sense of reality, they are also a part of reality. This makes literalization of common metaphors like the Cancer Warrior Metaphor concerning in their power to affect the lives of those who have been diagnosed with cancer, as well as the lives of those closest to them.

This inquiry explores how individuals affected by cancer engage with the Cancer Warrior Metaphor. Discussion of the power of metaphor, storytelling, and the Cancer Warrior Metaphor itself will establish a base of knowledge. Interviews with a woman diagnosed with cancer and two family members of those diagnosed will then provide evidence to support the existence of the Warrior Metaphor as well as allow for an examination of the Metaphor’s far-reaching effects. The researcher contacted interview subjects through networking with personal acquaintances and friends. The subsequent interviews were casual, some taking place in subjects’ homes. Interviewees were not aware of an explicit interest in the Cancer Warrior Metaphor in order to preserve the authenticity of their narratives. To protect identities, all names are pseudonyms. All

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[4] Semino, E. (2010). Descriptions of pain, metaphor, and embodied simulation. *Metaphor and Symbol* 25(4): 215.

of the interviewees were Caucasian, college-educated women. The woman who was diagnosed with cancer was of middle age and the two women with diagnosed family members were in their early twenties. All interviewees lived in the Des Moines, Iowa area and were interviewed in early 2018. As such, this research is not meant to be broadly representative of other identities' conceptions of the Cancer Warrior Metaphor, nor are their narratives meant to represent the average person's experience with cancer. As narratives, however, they still reflect how these individuals deal with cancer and may hint at common themes and experiences with cancer, particularly for white, middle class, midwestern American women.

By analyzing their narratives, the nuances in each story revealed several important concepts. The first is that the Cancer Warrior Metaphor may in fact police interpersonal interactions, emotions, and even treatment choices. All subjects, in one way or another, rejected the Cancer Warrior rhetoric, some more fiercely than others. When they rejected the popular metaphor, they substituted it with one that better represented their experience. The narratives reveal that those touched by cancer seek to further personalize their experiences through the use of metaphor. Oftentimes, the Cancer Warrior Metaphor is an inadequate tool to accomplish this nuanced personalization, nor does it communicate desired meanings for the subjects involved in this study.

Elucidating the Cancer Warrior Metaphor

The War on Cancer originated in the 1940s with Mary Lasker, a gifted salesperson with connections to the advertising industry. In Siddartha Mukherjee's history of cancer, he explains the depths of Lasker's commitment to finding a cure for cancer after her mother died of breast cancer. He explains, "Mary Lasker chose to eradicate diseases as some might eradicate sin – through evangelism. If people did not believe in the importance of a national strategy against diseases, she would *convert* them."[5] Religiously committed to her goal to find the cure, she used her salesmanship to construct language around the disease that would motivate others, coining "the War on Cancer." She and other advocates actively campaigned for President Nixon's attention in order to generate funding from the National Cancer Institute to create "a goal-driven institute that would decisively move toward finding a cancer cure."[6]

Lasker's vision may have been inspired by the Manhattan Project, which changed the way people approached scientific discovery. The atomic bomb was made by "a focused SWAT team of researchers sent off to accomplish a concrete mission … research driven by specific mandates, timelines, and goals ('frontal attack' science, to use one scientist's description)."[7] Science became about "attacking" problems. With cancer, research became a part of the war effort. To show his support for the fight, President Nixon dedicated money and resources to the cause in 1971 during his State of the Union address. As a direct result, Fort Detrick, originally a biological warfare facility, became the Frederick Cancer Research and Development Center. Nixon's National Cancer Act (nicknamed "The War on Cancer") gave the National Cancer Institute "special budgetary authority" in the same year.[8] The effort to eradicate cancer became conflated with the military and government research, in turn conflating war rhetoric with cancer, deepening the connotations of the word "cancer" itself.

Beyond galvanizing the American government, military, and researchers, the language of the Cancer War Metaphor became common in healthcare and in the everyday understanding of cancer. A quick Google search of "fight cancer" yields a number of websites and articles,

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[5] Mukherjee, S. (2010). *The emperor of all maladies: A biography of cancer* (p.110). Simon and Schuster, Inc.

[6] Mukherjee, S. (2010). *The emperor of all maladies: A biography of cancer* (p.117). Simon and Schuster, Inc.

[7] Mukherjee, S. (2010). *The emperor of all maladies: A biography of cancer* (p.120). Simon and Schuster, Inc.

[8] National Cancer Institute. (n.d.). *National cancer act of 1971*. Retrieved February 12, 2020 from https://dtp.cancer.gov/timeline/flash/milestones/M4_Nixon.htm.

including a Harvard Health study titled “Teaching T cells to fight cancer”[9] and even a site that promises to “help you fight cancer.”[10] The Cancer War Metaphor, or in reference to a person diagnosed with cancer, the Cancer Warrior Metaphor, appears to provide a modicum of power. When cast as an adversary, cancer can be named, challenged, and approached. It can become external despite its physical existence inside someone with the disease. This is why the Cancer Warrior Metaphor is so potent: if cancer can be seen, it can be fought; if it can be fought, it can be conquered. Key parts of the Cancer Warrior Metaphor reality include an emphasis on hope, presentation of cancer treatment as a team effort, and the person diagnosed with cancer taking on the Cancer Warrior identity.

Perseverance and Positivity

The Cancer Warrior Metaphor is steeped in hope and is conceptually fused with cancer treatment. In fact, there is a verifiable discourse on hope in the cancer experience. These conversations cannot avoid the Cancer Warrior Metaphor. An article that examines how hope permeates cancer treatment in America maintains,

> The American emphasis on the ‘message of hope’ in the ‘war on cancer’ … incorporates popular and professional dimensions of our culture of biomedicine. Its emphasis on ‘will’ – if one has enough hope, one may *will* a change in the course of disease on the *body* – articulates fundamental American notions about personhood, individual autonomy, and the power of thought (good and bad) to shape life course and bodily functioning.[11]

The discourse on hope appears to be an effort to give the diagnosed person some control by believing they can save themselves with sheer willpower. In the NPR podcast, *Invisibilia* – a podcast that investigates invisible forces that shape human behavior – a reporter describes this concept. He says, “People make up these stories that aren't true. But they make them feel like

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[9] Harvard Health Publishing. (2017, October). *Teaching T cells to fight cancer*. Retrieved March 27, 2020 from https://www.health.harvard.edu/cancer/teaching-t-cells-to-fight-cancer

[10] Stamps, R. & Stamps, P. (2019). *Attacking cancer*. Retrieved March 27, 2020 from https://attackingcancer.org/

[11] Del Vecchio Good, M. J., Good, B., Schaffer, C., & Lin, S. (1990). American oncology and the discourse on hope. *Culture, Medicine, and Psychiatry*, 14: 61.

they have control, right? … And you feel confident. And you can invest your time and energy today in things that won't pay off until tomorrow."[12] Ultimately, metaphors are there for people to grasp at agency. With the Cancer Warrior Metaphor, the person diagnosed can "fight" and "win" against cancer. This metaphorical power is a source of hope for both the person diagnosed and the people trying to support them.

However, the metaphorical power the Metaphor grants may not *empower* the person diagnosed. Dr. Atul Gawande's bestselling book *Being Mortal* includes some of the conversations he and other physicians had with terminally ill patients. The conversations are well-intentioned, but often hampered by the discourse on hope. With one terminal cancer patient who later died of the disease, Dr. Gawande relates,

> I found myself swept along by her optimism … After one of her chemotherapies seemed to shrink the thyroid cancer slightly, I even raised with her the possibility that an experimental therapy could work against both her cancers, which was sheer fantasy. Discussing fantasy was easier – less emotional, less explosive, less prone to misunderstanding – than discussing what was happening before my eyes.[13]

Strangely, Dr. Gawande says that discussing fantasy – essentially a lie – was "less prone to misunderstanding." Presumably, he means it is easier than explaining the complicated mechanisms of disease and treatment, but it is implicitly paradoxical. His reflection indicates that both he and the patient want to believe more work – more treatments – can save her, regardless of whether this is true. In this case, the hope is false and may have motivated her to seek out unnecessary treatment.

Family and friends play a role in precipitating the social pressure inherent in the Cancer Warrior Metaphor as well. In Kate Bowler's autobiography *Everything Happens for a Reason: And Other Lies I've Loved*, she delves into her experiences with hope-based language around

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[12] Spiegel, A. (2018, March 30). The pattern problem. [Audio podcast episode]. In *Invisibilia*. NPR. https://www.npr.org/programs/invisibilia/597779069/the-pattern-problem

[13] Gawande, A. (2014). *Being mortal: Medicine and what matters in the end* (pp. 168-9). Picador.

cancer. The work is essentially her illness narrative , that is, her story details her illness experience. Her family wants her to remain hopeful so they can remain hopeful as well; Bowler just wants to hear that her family will be safe. This is representative of a sharp divide between the priorities of those immediately facing their own mortality and those who are not. When describing her personal relationships, she explains, "I have still, somehow, clung to the idea that I am able to save myself. To my friends and family, I sugar coat the truth with spiritual sounding assurances and good cheer. There is an inchoate sadness in the pit of my stomach, hard to express."[14] Faced with the inability to express her pain, she remains positive, though she notices it feels forced and painful. Similar to Dr. Gawande's experience, hope becomes a performance and Bowler feels pressure to tell people what they want to hear. She further explains, "I couldn't stand that people might see through me. That they might know that I was only another tired cancer patient with a creeping sense of hopelessness and the glorious delusion that sheer will power would make the difference."[15] Bowler is directly engaging with the discourse on hope. The pressure she feels strains her ability to communicate with others, resulting in emotional isolation.

Positivity in the Cancer Warrior Metaphor also lies in platitudes. People rely on aphorisms like "The miracles we want aren't always the miracles we receive," and especially if the person has died: "They're in a better place." Far from comforting, these common sayings can become dismissive in conversations involving grief, loss, or illness. Indeed, the title of Bowler's book, *Everything Happens for a Reason: And Other Lies I've Loved* is a direct refutation of these aphorisms. Kate Granger, a person diagnosed with cancer, expresses her frustration with the

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[14] Bowler, K. (2018). *Everything happens for a reason: And other lies I've loved* [Audiobook, track 3]. Random House, Overdrive.

[15] Bowler, K. (2018). *Everything happens for a reason: And other lies I've loved* [Audiobook, track 3]. Random House, Overdrive.

wartime rhetoric surrounding cancer as well. In her article in *The Guardian*, she expresses her dismay when considering the impossible expectations family, friends, and institutions place on diagnosed people. She explains that being a "brave warrior" implies that having cancer is a choice. She says,

> I didn't choose to be affected by cancer and I don't believe being placed on the courage pedestal helps me to continue living. Just because I have cancer, it doesn't mean I cannot make mistakes or be selfish, but it almost becomes an expectation that because you are a cancer patient that you somehow become the perfect person. [16]

Both Bowler and Granger feel pressure to remain courageous because to be a Cancer Warrior is to continue to be brave no matter the challenge. These expectations of bravery can feel like expectations to be perfect.

Identity

The team mentality connects closely with another common theme: identity. The struggle for identity begins with the conception of cancer as a foreign invader, an important part of the Cancer Warrior Metaphor. According to the metaphor, cancer "creeps" and "spreads," implying cancer is "not so much a disease of time as a disease or pathology of space."[17] In the Cancer Warrior Metaphor, the fight for identity becomes a fight for real estate and the body becomes a battleground. Cancer is, in effect, pushing the self out of the body. The cancer may "evict" the person from their body, leaving a corpse behind. To prevent this, "fighting" cancer becomes an attempt to maintain residency in the body, to forcibly evict the cancer.

In the Cancer Warrior Metaphor, treatment becomes a weapon for reclaiming territory, reclaiming identity. Encouraged by friends, family, and even healthcare representatives to remain positive and persevere, people may choose harsh treatments to "fight" the cancer. However,

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[16] Granger, K. (2014, April 25). Having cancer is not a fight or a battle. *The Guardian*. https://www.theguardian.com/society/2014/apr/25/having-cancer-not-fight-or-battle

[17] Sontag, S. (1977). *Illness as metaphor* (p 14). McGraw-Hill Ryerson Ltd.

cancer treatment can radically change physical appearance. Some common side effects of cancer treatment are appetite loss, anemia, nausea and vomiting, delirium, memory loss, difficulty concentrating, hair loss, sexual health and fertility issues, and pain.[18] While cancer sometimes goes unnoticed, treatment has no such issue. Baldness instantly marks a person undergoing treatment. Vomiting, memory loss, and pain demand attention and can make completing daily activities difficult. The body they live in becomes a body compromised not only by cancer, but also by cancer treatment. As interviews revealed, this identity struggle is fraught with pain and suffering.

The Narratives

The following three narratives are the result of interviewing a person diagnosed with cancer and people whose family members received a cancer diagnosis. By analyzing the individual stories and investigating how they engage with the Cancer Warrior Metaphor, the pitfalls of the Cancer Warrior Metaphor become evident. Included are the alternative metaphors that each interviewee presented.

A Natural Disaster

Jenny's story is about her stepfather, Brian, who raised her since she was ten years old. She does not call him her stepfather and refers to him as "dad" and describes their relationship as more or less typical of a father-daughter relationship. He taught her things that parents teach their children, like how to grill and golf and exercise. The two of them were not particularly close, but she would confide in him when she could not confide in her mother. While they would occasionally fight because of their differing moral and political views, Jenny says that he was extremely excited for her to go to college and to see her graduate.

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[18] National Cancer Institute. (2018, April 5). *Side effects of cancer treatment*. Retrieved February 12, 2020 from https://www.cancer.gov/about-cancer/treatment/side-effects.

When Jenny was in high school, her family took a trip to attend her grandfather's funeral. Jenny noticed on the plane ride home that Brian was more ornery than usual. She only found this significant in hindsight, and initially thought that the stress of the trip had agitated him. His vision had been worsening – a sign of a brain tumor – but Brian's retinitis pigmentosa caused similar symptoms. About a month later, he hit his head on the car door and experienced a severe headache. Medical testing revealed ten tumors in his brain and he received a terminal brain cancer diagnosis. Jenny was devastated and wanted to come home, but Brian was adamant that she not miss any school. Hours from home and working through final examinations, this was a very traumatic time for Jenny. When her mother picked her up and drove her home for the summer, she told Jenny that the doctors had given her father two to six months to live. Jenny's reaction was violent: she cried so hard that she vomited.

Before and after her father's death, Jenny described her father's family as "insufferable." She describes her time with them as one of the most trying of her life. They could not stop talking about her father recovering from his terminal cancer. She said,

> They were very upset that my mother and I had 'given up' and accepted his diagnosis … Everyone who visited him … and everyone in the family, said like, 'Hey, you're going to beat this, you're going to fight this, you're going to kick this cancer.'

She thinks they were in deep denial as to her father's prognosis and feels as though the family blames her and her mother for believing that his cancer was terminal. She loved her father and was upset by this. What was even harder for her was her father's belief in the same upbeat rhetoric that his family maintained. For this reason, he didn't sign his will, which became a source of tension and stress after his death. Jenny explains,

> He had it drafted up and everything with a lawyer and it was very official and by the time he knew he was going to die he was on morphine, so it wasn't legally admissible. And his family didn't help with any of that because they were like, "You're going to beat it, you're going to beat it, you're not going to die, it's fine." So we had a whole legal battle over his estate after that.

These fighting words influenced Brian's choice to continue treatment and avoid making plans for his death. The pressure to remain positive and for Brian to maintain the Cancer Warrior identity was harmful to Jenny's family as well as Brian.

Even before he died, not giving up also meant denying final wishes. Brian had another daughter from a previous marriage, Liesl. Liesl was much older than Jenny and after his diagnosis, she would visit Brian at Jenny's home frequently. When Jenny was at work, she received disturbing news:

> I got a call from my mom that [Liesl] had tried to force-feed my dad and that he was choking. His advanced directive specifically dictated that once he could no longer eat any food himself … we weren't supposed to feed him or force feed him … and she tried to feed him lobster.

An advanced directive is a legal document, in this case detailing end-of-life care restrictions. These sometimes include "do not resuscitate" or "do not intubate" directives. In Brian's case, his illness and treatment dictated that he receive nutrients through an IV. By denying his advanced directive to make him resume a "normal" activity, Liesl denied the severity of his illness. The warrior identity became dangerous, and this story represents more than just forcing food – Liesl was forcing the warrior identity on Brian.

Denial cultivated by the Cancer Warrior Metaphor becomes dangerous and has the ability to cause even more suffering than the diagnosis and treatment. Jenny expressed her frustration with words like "fight" and "battle," saying she didn't like "fight" metaphors in general. Discussing her concerns with the "war" language people use, she became impassioned:

> It wasn't a battle. It was a slow torture. It's also very patronizing. This rhetoric everyone uses, like, "He fought until the end." I'm sorry, were you there? Did you listen to his dying breaths go on until 5 PM until 2 AM in the morning? I'm sorry, you didn't. So don't tell me he fought until the end, don't tell me this patronizing bullshit that you think is going to help me deal.

Jenny challenges this war language and sees it as imposing on her experience as a loving family member. She repeatedly says, "I'm sorry" acerbically and emphasizes that other people do not understand her suffering because they were not there for her father’s death. For Jenny, the war rhetoric makes unfair and untrue assumptions about the end of her father’s life.

In Jenny’s eyes, there was little that she, her family, or her father could do to stop the cancer. This is a direct example of the conflict between the Cancer Warrior Metaphor and the reality of terminal cancer: unending support from family and the harsh reality that some fights must end. In order to cope with the knowledge that her father was dying, she would sequester herself in her room, something she now regrets. However, this is a testament to how isolating the experience was for her and how powerless she felt. She describes,

> It was two months and done. There wasn’t time for a fight. There wasn’t time for some concentrated, strategic battle against cancer. Like it wasn’t a courageous thing, it was a miserable, sad, lonely affair of watching someone you love waste away … And I get that some people fight it and they win in those terms and that’s good for them … the reason I don’t like it is there’s not much the patient or the family can do about it. It’s not them fighting. It’s the drugs or the treatment that they’re getting that’s fighting the cancer, so it wasn’t a fight for us.

She even found it difficult to talk to other people who had gone through similar experiences because she didn’t feel like she could open up to anyone, mostly because she said that no one could relate to her loss. For her and her family, the most isolating experience was the grief she felt at her father’s decline in health and her bereavement at his eventual death.

Unsatisfied with the Cancer Warrior Metaphor, Jenny provides her own metaphor in its place: a hurricane. She explains,

> The context of fighting feels wrong. It feels like there’s a concentrated effort that you’ve trained to fight. Like, boxers train, soldiers train; this wasn’t something you could train for …. This was a natural disaster … It’s like a hurricane. It’s like a fucking awful, shitty hurricane with trash and rain and wind and just all these things coming at you that you could never prepare for. And it came too fast for us to get the evacuation order.

A natural disaster is unavoidable, whereas the Cancer Warrior Metaphor implies that the diagnosed person has some control over their condition. In a war, each side strategizes, and one side wins because it has better resources or strategies than the other. In a natural disaster, the only entity with any control is nature. By talking about how the evacuation order did not come soon enough, Jenny points out how quickly the event occurred for her; her father was diagnosed and died in the space of two months. They had no way to prepare for the diagnosis and did not know what they were facing. The natural disaster metaphor flips the agency from the individual to nature, which is inherently uncontrollable. Using the term "natural disaster" also exemplifies how devastating the event was for Jenny. In a natural disaster, there are no winners.

A Journey of Surgeries and Treatment

Sarah is a mentor to the researcher and self-identifies as a cancer survivor. Her mentees know her as a harsh but fair judge and a quick thinker. The interview took place in a research lab one afternoon during the week. The very first thing she did was pull out a napkin that she had written on with black marker. She had written down her exact type of cancer as well as all of the drugs she took for treatment and explained their chemical functions.

She recalled the exact day that she was diagnosed, down to the time of her mammogram appointment, though it had been fourteen years earlier: "They called me by 10 AM … I came in and they did a stereotactical biopsy for … 2 masses that were in the breast, one was over 3 cm, I can't remember what the other size was – they were big." Throughout her interview, Sarah did not leave out any treatment details and she continued to use medical terminology. A part of her treatment that featured prominently in her narrative were her double mastectomies (breast removals) and her subsequent breast reconstruction surgery. Sarah had a double mastectomy as well as chemotherapy because though the cancer was only in one of her breasts, she didn't want "to dink around with it on the other side." The idea of breast implants was scary to her at first, so she asked a friend who had had breast cancer to show her what the implants looked like. She describes them, as she does all of the treatments, in detail: "They're called breast mounds. So there's no nipple, there's no nothing. It's a Barbie. There's nothing. It's just a Barbie." She went on to describe the surgeon who performed her reconstruction as she knew his father and who he worked with at his undergraduate facility. Sarah described every person in her story this way, both doctors and friends. She explained her connection to them, (in the case of doctors) what treatments they gave her, and sometimes even where they went to school.

She also repeatedly spoke about her divorce from her spouse while we discussed her cancer experience, weaving the two life events together. For example, she would talk about her treatment and immediately transition into where she should have suspected her husband was cheating. When they were still together and discussing treatment options, her husband told the oncologist that he didn't want her to "suffer." Sarah reflected angrily, "It's in hindsight that I realized he'd been fooling around on me. Who the hell was he? If I had listened to this idiot and not taken chemo, I could've died!" The frustration and pain of this betrayal is still present for her. She continued to talk about her treatment following this aside: "Then, I went on 5 years of this … heavy-duty chemo, the first line. That's when you lose your hair and get real sick and I'd developed all kinds of pain and lots of problems." By going systematically through her cancer experience, interwoven with her divorce experience, she demonstrates how inextricable the pain from each experience is for her. This time represents a long chapter in her life that cancer and divorce affected in every aspect.

As part of every interview, the researcher asked the subject's opinion of sayings such as "everything happens for a reason" or "believe in yourself." When asked for her opinion on these common platitudes, she said she didn't have an opinion about these sayings because "I don't think that way, I guess I just don't think that way. It just happens … There's nothing you can do about it, except take charge where you can and be comfortable with where you can't have control." For her, these phrases are so outside of her experience that she does not even consider them. When people were trying to "deal" with her diagnosis, she said that they would do things like talk about other people with cancer. When they did that, Sarah said that "you need to just turn your ears off. They're just going to piss you off otherwise." She chose to replace such sayings with another phrase entirely: "Shit happens."

Sarah used far fewer metaphors to describe her illness experience since her story was so grounded in the chronology of her story, especially in regard to cancer treatment. However, this faithfulness to chronology does hint at a metaphor she uses to explain her experiences. Sarah names every doctor, every person who went to her appointments with her, and every caregiver who helped her with her home and her children. She takes great care talking about the people in her life who were involved in her "journey of surgeries and medications." It is important to note that she does not say she thinks of cancer as a journey – the concept of cancer itself seemed to play very little part in her story. With her careful details, she demonstrates that her journey is a journey of treatment as opposed to a journey of disease.

A Toxic Environment

Angela's interview took place in her living room, surrounded by her pets. A young artist, much of her artwork hung on the walls of the living room. She began describing her mother, Pamela, who had died of endometrial cancer a year and a half prior. Angela gushed about how beautiful her mother's voice was, saying that "people would invite her all over to come and sing at things, like she was a very, very great singer." Her mother was also quite popular; Angela paints a picture of her mother being constantly surrounded by people. Her mother had five children including Angela, so her house was always full, and her popularity and performance schedule kept her quite social.

This all changed when her mother was diagnosed with cancer. Pamela became withdrawn and could no longer sing because of a tumor affecting her vocal cords. Their relationship also changed; Angela says their typical roles as mother and daughter switched and she began to "mother" her own mom. Angela said that the experience "kind of made me have to grow up a lot quicker … My friends are going to their moms and their moms are cooking them meals and doing these like very parent-child things and mine was just kind of in reverse." Despite this, Angela made a point to say how glad she was to be there for her mother, who had moved into the home she and her boyfriend shared. She even took a break from school in order to take care of her mother.

Pamela went through several surgeries as well as chemotherapy and she underwent a jarring physical transformation. Losing her hair as a result of treatment devastated her. After she finally had the courage to post a photo of herself on Facebook, the comments were flooded with warrior rhetoric. Angela expressed her dismay:

> Our culture is very obsessed with like cancer survivors … people literally wear bracelets about being strong for cancer. Like, I just think that there's kind of a toxic environment surrounding cancer patients. That they feel like they have to survive because other people have.

Angela feels that the language people use with those diagnosed with cancer puts pressure on them to survive. She calls this environment "toxic." This reinforces the idea that the language around cancer has the potential to be dangerous.

Angela thinks of cancer as an attack. This is a concept that forms a component of the Cancer Warrior Metaphor, but she includes treatment as another form of attack, which is a direct refutation of the metaphor. She elaborated,

> The cancer is eating away at you … It doesn't let [her body] function normally and she has to try to stop that with this thing that is also attacking her body and that's why one reason you feel so terrible during chemo is because you have a drug being pumped into your body that is killing everything in your body … You have so many things going on inside of you that you can't change … you're being attacked with medicine or mutations of cells.

To Angela, both sides in the battle inflict serious damage on the battleground: the body. The diagnosed person is not a warrior – just the opposite. There is no agency in this metaphor because they must watch as their bodies deteriorate as a result of the battle between the disease that is killing them and the treatment that is supposed to heal them. Angela's understanding of chemotherapy and cancer cast the person not as a warrior, but as a casualty of war.

Angela's view of her mother's experiences clashed with others' opinions. As her mother was popular, Angela and her family were unfortunately charged with explaining her prognosis to every single person who visited her. Angela recounts her encounter with her mother's coworker:

> She came in and she's asking all these questions … She said, "So what, she's just going to give up?" … It was very upsetting because it was just like we had such an intimate relationship with mom and I saw her not giving up and to just have someone come in and say she's just giving up … felt disrespectful to everything my mom endured.

Hope discourse has the potential to cause a great deal of suffering. The phrase "give up" implies that Angela's mom could have corrected her situation with more treatment. It implies that she accepted defeat instead of fighting for positive results, and ultimately, that she refused to be a Cancer Warrior.

While the onus is on people with cancer to remain hopeful and courageous, it is also taboo for others to give up hope. Angela had difficulty expressing grief around others because when she did try to confide in some people, she was chastised:

> I would say, "I don't want my mom to die I don't want my mom to die" and I would just be crying and I would be talking to people and they would say, "Your mom's going to be fine." And I really just wish they had said it's okay that you're scared that your mom might die because she could, you know, and just let me feel those things. Because I feel like people just don't want you to give up or something, you know.

Ultimately, her description indicates that hope is a method of silencing grief. The Cancer Warrior Metaphor uses hope-based language, so it is unsurprising that the metaphor is capable of invalidating "negative" feelings. She expands on the effect of common platitudes. When asked how she felt about sayings like "everything happens for a reason," Angela said that these phrases upset her. She explains,

> Its disrespectful because my mom's death didn't happen for any sort of reason other than the fact that she had cancer and she died from it … I just can't think of any purpose for me to not have my mom … I feel like its people's way of grasping at offering comfort and because they don't know what else to say and what it does is [insinuate] that their death is more meaningful than their life.

Angela points out that these sayings may be well-intentioned, but they are disrespectful and have the ability to minimize the person's life. When the expectation is to remain positive, people may not know how to respond in a meaningful way. Relying on a strong support system is particularly important during times of emotional hardship, so failure to listen and validate emotions can cause a grieving individual to feel alone and unheard. The hope inherent in Cancer Warrior rhetoric is isolating.

For Angela's mom, cancer affected her identity by changing her mother's ability to speak. A large tumor in her lymph node compressed her vocal cords, making talking difficult. What was even more difficult to grapple with was her mother's inability to sing. Her mother had always been a vocal performer and Angela said that her mother even moved her and her siblings out to Las Vegas to try and "make it" when she was younger. However, the tumor in her lymph node made singing impossible. As her daughter and as a fellow artist, Angela found this upsetting:

> When you're an artist or a creative person or anything, when you can't even do that because of this thing that's attacking your body, that would probably feel so isolating, you know … she just had this crazy identity crisis where everything that made her who she was just stripped from her. She lashed out in anger at first and then eventually she dealt with it, but I think definitely just there were all these things chipping away at her.

Her mother's identity crisis demonstrates a lack of agency, the inability to find control in her life. For Angela, the way cancer prevented her mom from doing something she was most passionate about played a large role in her struggle with her identity. For example, Angela, whose mother was diagnosed with lymph node and uterine cancer, recounted the way her mother changed as the disease progressed. Her mother had been very feminine, or "prissy," as Angela called it. However, as cancer treatment radically altered her body, it became difficult to maintain her appearance the same way she had been.

> She had her hysterectomy and she lost her hair after that … Once you start losing your hair they just recommend that you shave your head because it's a lot less dramatic, I guess, to always be having your hair fall ... So she was yelling at the guy shaving her head, "Just take my, why don't you just chop my breasts off too, I'm not even a woman anymore!"

Angela's mother's conception of her own femininity was severely compromised by the loss of her hair and her uterus. Both of these physical effects were the result of treatment, of "fighting" the cancer. While Angela says that her mother was very concerned about not wanting to give up, she was sacrificing herself to do so.

Discussion

Metaphors are a tool to structure narratives, which may give the storyteller a sense of control. The Cancer Warrior Metaphor, in theory, lends itself to this purpose by casting the person diagnosed as an active party with the ability to conquer a foe. Given that the brain interprets metaphor via the same pathways as it interprets reality, it would appear that a Warrior's agency must exist. However, Sontag points out that the metaphor is neglectful in its oversimplification: cancer *is* the body. In Susan Sontag's *Illness as Metaphor,* she says, "Trying to comprehend 'radical' or 'absolute' evil, we search for adequate metaphors … And the cancer metaphor is particularly crass. It is invariably an encouragement to simplify what is complex and an invitation to self-righteousness, if not to fanaticism."[19] Accounts from people diagnosed with cancer, as well as the interviews in this study show that there is a disconnect between the Cancer

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[19] Sontag, S. (1977). *Illness as metaphor* (p. 85). McGraw-Hill Ryerson Ltd.

Warrior Metaphor and reality. Ultimately, the body's own cells cause the sickness and it is not feasible to metaphorically separate cancer from the person diagnosed with it.

As such, the metaphor may put pressure on those diagnosed to pursue harsh treatments, as Angela's mother did, or postpone end-of-life preparations, as Jenny's father did. The expectation to remain positive, to "keep up morale" in the "war effort" that is cancer treatment can also stifle the grief process, as it did for Angela and These unrealistic expectations also extend to people grieving the illness or death of someone diagnosed with cancer, silencing their "unhopeful" thoughts and making it difficult for them to deal with their grief. This ultimately restricts autonomy, resulting in isolation, struggles with identity, and the stress of performing positivity to others. The Cancer Warrior Metaphor can police and damage individuals both emotionally and physically.

It is important to point out that these findings should not discourage people from pursuing cancer treatment. The findings are significant in that the "fight" rhetoric around the Cancer Warrior Metaphor can encourage people to pursue harsh treatments. A person diagnosed with cancer may pursue difficult treatments whether or not it is something they would choose for themselves. For a diagnosed person, there is a pressure to take on the identity of the Cancer Warrior. Positivity is intertwined, and at times inseparable from, this Cancer Warrior identity. In these interviews and in other accounts from people who have been diagnosed with cancer, relentless cheerfulness and treatment is the expectation. The purpose of this research is to point out the significance of these expectations and the effect that it has on people whose lives have been changed by cancer.

It is also important to note that the goal of this research is not to entirely turn people away from using metaphor to structure their understanding of illness. Susan Sontag's "Illness as

Metaphor" prologue states, "My point is that illness is *not* a metaphor, and that the most truthful way of regarding illness – and the healthiest way of being ill – is one most purified of, most resistant to, metaphoric thinking … It is toward an elucidation of those metaphors, and a liberation from them, that I dedicate this inquiry."[20] Sontag believes that the only way to maintain a measured view of illness is without metaphors of any kind, but this does not give metaphors enough credit. Metaphors can give people the freedom to make the reality more accessible and readily understandable. This research is merely reflective of a growing sentiment that the primary metaphor for cancer should not be the Cancer Warrior Metaphor, as it may take away control and agency, replacing autonomy with expectation.

Indeed, people demonstrate that they need metaphors to understand their illness and the illness of those they care for. An unanticipated finding during this research is how all subjects grasped for metaphors of their own making over the course of the two-hour interviews. Upon further research, an article in *Independent* – a prominent UK news source – discusses a study conducted by the University of Lancaster. By analyzing millions of words, they determined that "it should be for the patient themselves to introduce the metaphor."[21] According to Dr. Semino, a professor of linguistics, "Battle metaphors are sufficiently negative for enough people that they shouldn't be imposed on anyone."[22] The findings in this research, when compared with self-reported accounts from other sources and the interviews included in this research, are reflective of an emerging discomfort with the cancer war rhetoric.

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[20] Sontag, S. (1977). *Illness as metaphor* (p. 3). McGraw-Hill Ryerson Ltd..

[21] Cooper, C. (2014, November 3). Mind your language: 'Battling' cancer metaphors can make terminally ill patients worse," *Independent*. Retrieved on February 12, 2020 from https://www.independent.co.uk/life-style/health-and-families/health-news/mind-your-language-battling-cancer-metaphors-can-make-terminally-ill-patients-worse-9836322.html

[22] Cooper, C. (2014, November 3). Mind your language: 'Battling' cancer metaphors can make terminally ill patients worse," *Independent*. Retrieved on February 12, 2020 from https://www.independent.co.uk/life-style/health-and-families/health-news/mind-your-language-battling-cancer-metaphors-can-make-terminally-ill-patients-worse-9836322.html

In the narratives, people brought up a metaphor that presents cancer as a journey. In the same interview from *Independent* with Dr. Semino, she points out that should they become sicker, the Journey Metaphor does not generate as much guilt in a person diagnosed with cancer. In explaining these findings, she says, "Cancer is becoming, in many cases, more like a chronic disease. We all need to talk about cancer more as something that we can live with for some time … rather than just as an enemy to defeat."[23] Since cancer can be chronic, the metaphors people use to describe experiences with cancer should reflect the length of time that many people have to live with the diagnosis. "Fighting" is a strong action word. It implies passion and a great deal of energy expenditure, whereas a journey is allowed to be nuanced and may have many undulations in emotions as well as its level of activity. This differs from the Cancer Warrior Metaphor, which defines dispositions as winning or losing and defines the path to those dispositions with treatment and morale maintenance. If the world stopped seeing cancer as something to be fought, perhaps medicine could be more focused on care instead of treatment. Perhaps others would be willing to listen to the complicated emotions of grief associated with cancer. If people move away from cancer warrior rhetoric, the Journey Metaphor may be a better way to understand cancer and those whose lives are affected by it.

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[23] Cooper, C. (2014, November 3). Mind your language: 'Battling' cancer metaphors can make terminally ill patients worse," *Independent*. Retrieved on February 12, 2020 from https://www.independent.co.uk/life-style/health-and-families/health-news/mind-your-language-battling-cancer-metaphors-can-make-terminally-ill-patients-worse-9836322.html

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