Oncologists Congress 2020: Cancer Awareness: A view into the reality of cancer - Amanda R. Ferraro, Cancer Survivor, US

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Statement of the problem: Cancer awareness is typically reflected on prevention of cancer and not the cancer experience. Far too often there are campaigns to bring awareness to different cancers; however prevention is mainly the only subject overwhelmingly is discussed. Diagnosis, treatment, financial toxicity and survivorship should categorized under cancer awareness as well. The effects that cancer has on an individual doesn't limit itself to just prevention. Sadly, the topics of other cancer related hardships are not regularly associated with awareness. A discussion on cancer awareness should include all cancer related matters that one may experience.

Just after the Second World War, gynecologist Malcolm Donaldson set out to convince the British Empire Cancer Campaign (BECC) to expand its prewar program of lay cancer education. Though he chaired the BECC's Educational Committee, Donaldson failed to persuade the organization's leaders that a national cancer-education campaign would be worthwhile. Nor would the Ministry of Health accept Donaldson's suggestions, its medical officers arguing that "the time was not ripe for an approach to the general public." When Donaldson managed to recruit allies in the Central Council for Health Education (CCHE), he and they soon found that neither the BECC nor the Ministry would cooperate with them on a national program. Instead, these organizations suggested that lay education about cancer should be left to the initiative of local groups choosing to experiment with it.

To scholars familiar with the history of cancer control, the BECC's and the Ministry's reluctance to create or participate in national educational programs about the "dread disease" might seem odd. In North America, equivalent organizations had just increased their substantial prewar commitment to education, funding national campaigns intended to "fight cancer with

knowledge," as the American Cancer Society's motto put it. But in Britain, much of the cancer elite—the clinicians, researchers, public health workers, and government officials who made the disease their business—rejected the idea that they should teach the public about cancer symptoms and treatment. Furthermore, when cancer-education programs were developed and adopted in 1950s Britain, many differed from those in other national contexts: cancercontrol organizations elsewhere used the nationally coordinated media "blitz," the big-screen film, and the glossy color pamphlet to get their message across, while British proponents of cancer education devised local efforts, often relying on the humbler media of newspapers and small-group discussions to promote everyday understanding of the disease and its treatment.

In the second half of the article I examine an influential experiment that challenged existing doubts about cancer education by offering a new model of what cancer education was and what it needed to do. The Manchester Committee on Cancer (MCC) argued that the British public's knowledge came from local, everyday encounters with medical institutions and expertise in their communities. While these proponents of education agreed that the everyday dread of cancer was substantial and frequently irrational, they also argued that the public's fear was understandable and based in reality: it derived from personal experience with family, friends, and neighbors dying of the disease. The real challenge for cancer control, then, was to improve that experience and thus change experiential knowledge, "cancer as the general population knows it." To accomplish this, the Manchester organizers instituted a very different sort of educational program, one that enlisted the voices of everyday Britons and mobilized existing social networks.