

Kedrowski, K. M. and Sarow, M. S. *Cancer Activism. Gender, Media, and Public Policy*. Urbana/Chicago: University of Illinois Press, 2007. xxiii + 288 pp. \$40. ISBN 978-0-252-03198-4 (hbk).

*Cancer Activism* aims at exploring how American breast and prostate cancer advocacy groups attract media attention in order to elevate their respective disease-specific claims onto the agendas of policymakers. The book also provides a broad and well-informed description of the publicizing and politicization patterns for two common forms of cancer in contemporary America. In its approach and methodology, the book is firmly grounded in the theoretical literature of media and mass communication studies, with an emphasis on concepts (such as agenda-setting or framing) that other social science disciplines also frequently discuss in slightly altered terms. Its authors rely on the unoriginal yet effective combination of quantitative and qualitative data collected through content analysis of television and newspaper media coverage of both breast and prostate cancers over the past two decades, and through interviews with 'activists, members of Congress and congressional staff, agency staff and selected health reporters' (p. 230).

Starting with the apparent paradox that breast and prostate cancer movements are unequally endowed in terms of media attention (to the advantage of the former), the authors start by briefly exploring their respective organizational resources, in order to identify the 'characteristics of apparently successful "disease groups", or grassroots survivors' organizations' (p. 39). The typology offered in Chapter 2 contrasts breast and prostate cancer in several ways and traces their relative strategic power to the differing behaviour of their survivor bases. The authors' analysis does not, however, engage with existing explanations of social movements capacity. Specifically, resource mobilization theory could have contributed to elucidate the gap in media outcomes between the breast and prostate cancer communities of interest, by underlining the role of cancer professionals and pharmaceutical firms in making each movement differently resource-rich. Instead, professional and financial support tends to be downplayed in the authors' general explanatory framework. Their partial explanation is also threatened by infinite regress when it relies on initial endowments to explain current ones: the observation that breast cancer 'has a rich heritage of activism' (p. 56) does not properly explain the higher successful attainment of the breast cancer constituency in comparison to its prostate cancer counterpart.

Chapter 3 and 4, which compare media coverage and public perception of breast and prostate cancer over time, are equally puzzling as far as their analytical structures go, insofar as the authors do not clearly state whether the variations observed among these factors stand as dependent or independent variables in the general story of cancer media advocacy. While the amount of coverage, which is sharply superior for breast cancer in all media types (p. 72-78), is susceptible to fall into the former category, the dramatic and traumatic effects of such coverage might actually incline toward the latter and provide a natural 'advantage', once again, to breast cancer advocates among the general public (p. 102). The following chapters hopefully develop a more robust explanation of *why*, instead of *how*, breast and prostate cancer diverge in achieving public recognition and member engagement. The authors indeed turn to the advocacy processes that raise the public profile of breast and prostate cancer into the media (Chapter 5) and in Congress (Chapter 6). Even though the book does not specifically concentrate on the activities of the National Breast Cancer Coalition (NBCC) and the National Prostate Cancer Coalition (NPCC), two prominent activist groups that have acted as federal-level umbrellas for smaller

organizations since the early and mid-1990s respectively, much of the authors' description of cancer activism revolve around these two particular movements. The authors provide a rich and thoughtful analysis of leader development and policy entrepreneurship among policymakers, sometimes in the form of 'reluctant champions' when Congressmen hesitate to disclose their personal experiences of prostate cancer (p. 150). Chapters 7 and 8 complete this analysis by documenting the discursive and marketing strategies of media advocates, which differ markedly for both types of cancer.

Perhaps the main merit of *Cancer Activism* resides in its successful cross-pathological comparison between breast and prostate cancer. The book is highly effective in showing how these two forms of cancer differ not only in terms of their biomedical markers, but also through their distinct social properties; in that sense, the book is a valuable contribution to the sociology of disease (Haas and Timmermans 2008) as well as to the study of social health movements (Brown *et al.* 2005). The authors also put forward some interesting assumptions in need for further verification. Their analysis suggests that some media coverage for prostate cancer derives from breast cancer media advocacy, and that prostate cancer activists are able to free-ride (or 'piggyback', p. 134) on this resource by jumping on the breast cancer media bandwagon. Their overall story, however, is resolutely American-centric. For instance, when the authors observe that 'prostate cancer activists have not adopted the more confrontational tactics of the AIDS or breast cancer movements' (p. 33), their statement is valid only in a very restricted number of countries. Outside of the United States, and even though the NBCC sometimes served as an example to initiate collective action as was the case in the European Union, breast cancer activism is clearly distinct in style and substance to AIDS patient-based advocacy. The authors implicitly reinforce this bias by refraining from referring to sources that would facilitate cross-national comparison. The findings of Baggott *et al.* (2005), for instance, are not discussed in *Cancer Activism*, even though they also include efforts at building typologies of health movements, and even though they resonate with the authors' observation that 'breast cancer and prostate cancer are only two of a panoply of "disease groups" competing for the attention of policymakers' (pp. 34-5). The book hence leaves plenty of room for scholars interested in the comparative analysis of cancer advocacy, providing them with an in-depth discussion of two American cases.

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- Baggott, R., Allsop, J. and Jones, K. (2005) *Speaking for Patients and Carers. Health Consumer Groups and the Policy Process*. London: Palgrave. (See also their 2004 article in *Sociology of Health and Illness*, 26, 737–756.)
- Brown, P. and Zavestoski, S. (2005) *Social Movements in Health*. London: Wiley-Blackwell. (First published as a Special Issue in *Sociology of Health and Illness*, 26, 2004.)
- Timmermans, S. and Haas, S. (2008) Towards a sociology of disease, *Sociology of Health and Illness*, 30, 659–676.