Reading Log #4

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January 31st 2018

This reading log is based on the article “The Challenge of Developing and Publicizing Cervical Screening Programs: A Canadian Perspective”, written by Mandy Hadenko. The first thing I noticed about this article is that it relies a lot on the works of Kirsten Gardner whom had written a chapter in this very same book. 1 This article has several important facts that it wants to convey to us: one of which is that “medical professionals were largely invested in dealing with cancer treatment rather than prevention.” 2 This helps to show us why it took so long for the Canadian Cancer Society (CCS) to become involved with cervical cancer because they were more focused on finding cures than preventing it from happening. Sadly even when “a fully funded health care system was [put] in place in the 1960s” women were still reluctant to be screened for cervical cancer due to the fact that most women were not being properly educated on the disease by their health care providers. 3 This article's main purpose is to “argue that print and film were integral places for women to seek knowledge about this disease” 4 This author does a great job of demonstrating this as she uses many examples from Chatelaine magazine and the Toronto Star which both provided information which “empowered women to learn and make educated choices about their own health.” 5 Chatelaine published many articles in regards to cancer such as Adele Saunders 1945 article “Plain Talk about Cancer” 6 and a 1973 article on the ‘breast pap’. 7 Chatelaine became very popular in the late 1950’s when they starting publishing stories of women who spoke of their own experiences with cancer and with their healthcare providers, 8 while Toronto Star wrote articles to validate the Pap smear. 9 Several movies were written to inform women of cervical cancer as well, such as “A *Progress Report on Cancer*” 10 and *Cancer Clinic.* 11 Overall this author used a lot of outside sources to get her points across and this article contributes to the overall historiography on the topic because it gives us a detailed outline of the emergence of the pap smear and cervical cancer information and helps health care providers know they need to be more educated in the future. What I still have questions about are the causes of cervical cancer. This article mentions that the key factors are “age, previous health, and sexual activity” 12 but nowadays the age for pap smears is getting later and later regardless of your health or sexual history. I want to know why they decided to move them up if these are important to the risks.

This reading log is based on the article “‘We Remain Very Much the Second Sex’: The Constructions of Prostate Cancer in Popular News Magazines, 2000-2010,” written by Juanne Clarke et al. This article's main purpose is to argue that “there is an undeniable connection and relation between masculinities and health” 13 and that this is due to media’s portrayal of masculinity. Masculinity is often believed to be related to a man's sexual ability and sexual experiences so getting prostate cancer is detrimental to one's manhood as it limits their sexual function. 14 People often “turn to media sources, including magazines, for information about health, including treatments, discoveries and prevalence.” 15 They also turn to magazines in their daily lives where men are “portrayed as bodybuilders, meat eaters, beer drinkers, heterosexual champions, and television watchers” 16 who “endorse and reinforce the male practice of not seeking help and take excess risks.” 17 This article focuses on a study based on research of “four popular news magazines- *MacLean’s, Newsweek, Saturday Evening Post, and Time Magazine”* 18 from January 2000 to December 2010 in Canada and the United State. 19 It found that prostate cancer is compared to breast cancer as they are both parts of the body on male and females that determines one's gender in media. 20 It is also seen as a heterosexual problem as the partner as almost explicitly referred to as a woman. 21 Men are also made responsible for their prostate health, they are told it is their fault if they get it and that they need to change their lifestyle to prevent it (exercise more and eat more responsibly). 22 Men cannot make excuses for not getting tested, it in an obligation that you cannot deny. 23 It also found that women need to be better caregivers; getting your man tested is your responsibility as well; keep your family healthy.24 One of the most obvious findings is that prostate cancer threatens manhood because without sexual drive, you are not a ‘man’. *MacLean's* article even said that “For many men, sex is a signature act, primal and necessary to their identity.” 25 Men also need to be stoic and courageous during treatment and the battle through prostate cancer, they typical idea of masculinity needs to hold true to you if you want to survive this disease. 26 This article was published in 2013 and the research is done from this century so it is still relatively recent, although I feel this has been and will continue to change as the typical gender stereotypes are being questioned and the fight for good health has become a new trend. This article relates to the overall historiography on the topic as it further demonstrates the power of the media and gender stereotypes and how it has been used for bad, so now we can learn from it and use it for good proper education. What I found interesting is the idea of men not seeking medical attention as it makes them seem weak so they need to ‘tough it out’ because I see this with the men in my life all the time and when people ask medical professionals for help they are almost seen as lesser for it and I want to make them feel good about it.

This reading log is based on the article “Malignant Histories: Psychosomatic Medicine and the Female Cancer Patient in the Postwar Era,” written by Patricia Jasen. This article takes on many ideas. The main argument is that the psychological well-being of females determined whether or not a woman would get sick, Carl Jung, for example, “took an early interest in “psycho-biology” and developed a theory that there was an intimate relationship between “bodily and psychic traits”.” 27 One researcher said that extraverts are “cancer-prone because their libidos turn outward and attach themselves to external objects (such as persons or life goals) which become absolutely essential to their well-being.” 28 A lot of research in this area showed that women “most often suffer from cancer of the “maternal organs”...because of “unsatisfied maternity”.” 29 Many studies were conducted on emotionally repressed women

That found if a woman was not happy she was much more likely to become sick and “somehow responsible for [her] own disease”. 30 I found this article very difficult to understand, possibly due to the nature of the topic as I feel it is completely wrong to blame a woman’s personality on her physical illness. Although there may be some correlation, I feel that they should be focusing on treatment rather than playing the blame game.

Notes

1 Hadenko, Mandy, “The Challenge of Developing and Publicizing Cervical Screening Programs:

A Canadian Perspective,” in Cheryl Krasnick Warsh (Ed), Gender, Health and Popular Culture: Historical Perspectives, Waterloo: Wilfrid Laurier University Press, 2011: 129.

2 Hadenko, Mandy, “The Challenge of Developing and Publicizing Cervical Screening Programs:

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3 Hadenko, Mandy, “The Challenge of Developing and Publicizing Cervical Screening Programs:

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4 Hadenko, Mandy, “The Challenge of Developing and Publicizing Cervical Screening Programs:

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5 Hadenko, Mandy, “The Challenge of Developing and Publicizing Cervical Screening Programs:

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10 Hadenko, Mandy, “The Challenge of Developing and Publicizing Cervical Screening

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11 Hadenko, Mandy, “The Challenge of Developing and Publicizing Cervical Screening

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12 Hadenko, Mandy, “The Challenge of Developing and Publicizing Cervical Screening

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13 Miele, Richelle and Juanne Clarke, “‘We Remain Very Much the Second Sex’: The

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14 Miele, Richelle and Juanne Clarke, “‘We Remain Very Much the Second Sex’: The

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15 Miele, Richelle and Juanne Clarke, “‘We Remain Very Much the Second Sex’: The

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22 Miele, Richelle and Juanne Clarke, “‘We Remain Very Much the Second Sex’: The

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23 Miele, Richelle and Juanne Clarke, “‘We Remain Very Much the Second Sex’: The

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24 Miele, Richelle and Juanne Clarke, “‘We Remain Very Much the Second Sex’: The

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27 Jasen, Patricia, “Malignant Histories: Psychosomatic Medicine and the Female Cancer Patient

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