

Portrayals and presentation of cancer in cinema



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INTRODUCTION

Through years, many movies have been released for public viewing regarding cancers of all types. Depictions might include the nature of cancers, patients' response, care-givers' response, and the clinical outcomes. Since movies may affect thoughts of the viewers, outcomes in movies may affect decision making of the patient or caregiver and may affect care-seeking behavior, the way they react to the situation and their compliance to treatment.

At present, films featuring cancer patients are no longer a rare scenario, as stated in a press release at the ESMO 2012 Congress of the European Society for Medical Oncology. Many cancer movies were released for viewing, however, the portrayal of the patient's chances of survival are rarely accurate. In 82 movies that focused on cancer patients, Dr Luciano De Fiorre et al, found that descriptions on cancer experience in the films were not reflective of cancer in its scientific meaning.

In the Philippines, there are only few movies that feature a person/persons with cancer. And in most of the Filipino movies that depict cancer, cancer patients are diagnosed late and hospitalization with other therapeutic modalities are not clearly seen. Cancer patients' experiences described in the movie were so different from the truth. Davaoenos, like most Filipinos, see that cancer is always worse in the movies. The illness is usually depicted as death sentence.

To our knowledge, no previous descriptive reviews of movies about cancers in children, adolescents, and young adults have been documented, hence this research.

Review of Related Literature

Medical portrayals in the media, including depictions of clinical outcomes, may impact public perceptions and health decision-making. Media greatly affects people's behavior toward a certain event and the said response varies in each individual, depending on how they perceive or understand. What we see affects what we think, and thoughts may become action. We act upon what we see thru imitation (Koordeman et al 2011) Both market research and anecdotal case reports have long claimed that the general public learn and form reactions regarding health conditions based on what is seen on television (Eisenman et al., 2005) (Tayal, 2003). Increasingly, media has not only been an entertainment tool, but has been applied deliberately as a health educational source, as "entertainment education" in different countries (Hether H. J et al, December 2008.) Some people do not only rely to medical professionals regarding their health. According to one study, (Kowalczyk et al, 2012) older generations greatly depend on internet in gaining information about cancer, hence it must be ensured that they are gaining information from a reliable source. Cinema had also been used for medical-educational purposes (Akram et al, 2009). More recently, entertainment education has been attempted on the topic of cancer as well, for instance promoting breast cancer awareness in adults. The extent and nature of depictions of cancers in children, adolescents and young adults, however, remain less clear.

Negative perceptions result from negative portrayals and negative outcomes. In one research, it was noted that there had already been lots of motion pictures with negative portrayals of the medical profession (Thibodeau et al, 2007). In another research with 131 movies as sample size, it was pointed out that physicians were portrayed negatively in 44% of movies and that 27% of the sample size had medical inaccuracies. (Flores et al, 2002).

There may be a wide disparity between public perceptions and scientific findings. This usually happens when we are convinced by what we saw or hear on the news and not relying on the scientifically documented events. Movies like “ Erin Brokovich” let the people think that cancer in New Jersey and Long Island, New York trigger the cancer clusters (Robinson D, 2002). In reality, it is not only the purely environmental exposures that may lead to cancer.

After carefully studying 82 movies that centre on a person with cancer, Dr Luciano De Fiore et al, found experiences pertaining to cancer as described in the films were not reflective of the truth. In the movies the researchers studied, 40 characters with cancer were women, and 35 men. In 21 films the type of cancer was not mentioned. Symptoms were considered in 72% of the movies, while diagnostic tests were mentioned in 65%. The most frequent treatment mentioned in the movies was chemotherapy followed by pain-relief. Death occurred in 63% of all movies). Doctors and nurses turned up in 58 films (77%). (De Fiore, 2012)

If we are exposed to wrong information, we will be living in wrong direction. If cancer patients in movies die without a fight, diagnosed cancer patients may also choose to die without a fight. It is the government's role to protect the viewers from what they see. Some research had already pointed good representations about cancer in movies. Some movies are informative and the role of medical research in overcoming the disease is already highlighted (Lederer SE, 2007).

A positive outlook about cancer is very possible if people will see realistic portrayals in movies. Movies especially those containing health issues will give hope if those will not only show death and hopelessness of cure. At present, there are movies with scenes pertaining to health and death issues which contain inappropriate portrayals although it is worth mentioning that some movies remind audiences that not all scenes are based on real events but are reflective of the writer's view.

In a bigger perspective, it is not only cancer prevention consciousness is the major barrier in fighting against cancer. Poor language skills, low income and low education are contributory barriers (Loughridge, 2012). There must be a collaborative effort in our fight against cancer. Cancer patients, medical practitioners, health allies and the government must move to destroy against these barriers.

In a press conference made during World Cancer Day, it was pointed out by Dr Lucio Lecciones that leukemia accounts 40-60% of cancer among patients in the Philippine setting. And that in Philippine Medical Center Hospital alone, the case rate is increasing by 30% annually. Deaths from leukemia accounts

greater than the number of dengue shock syndrome, sepsis and prematurity combined. It was also stated that 70% of the newly diagnosed childhood cancer cases in the country were recognized in the late stages of the disease. Diagnosis was made when the cancer is no longer curable, even with the use of the most aggressive and expensive treatment.

Socioeconomic status is also a great contributory factor to the abandonment to treatment. High cost of diagnostics and treatment affects survival rate and there is barely 2 in ten children surviving cancer. (Jet Villa, 2014)

The Department of Health is active in the campaign for the fight against cancer. Educating people not only on how to prevent cancer, but also, how to survive it. Most doctors encourage prevention, as the saying goes "An ounce of prevention is better than a pound of cure"- Benjamin Franklin.

Cancer cases were increasing in number. There were more than 82,000 new cancer cases, affecting both males and females in 2010 in a census from the Department of Health, Philippines. With the increasing trend in cases, it is estimated to reach 85,000 new cases annually. According to Dr Ona, the number of cases is expected to double within the next decade.

Cancer ranks third as the leading cause of death in the Philippines, according to PSMO president Felycette Gay Lopus. The risk factors in developing cancer include smoking, viral infections, sedentary lifestyle, alcohol and radiation. With the great number of people affected, vigilance to its warning signs, a healthy lifestyle and early treatment will shield the people against the disease.

How can we expect cancer patients submitting themselves to doctors if most of the cancer movies show no hope for cure, portrayals of non compliance to treatment and death immediately after diagnosis. How can we expect people to gain true information when media has its own flaws in its portrayals. Much freedom is given for entertainment but not much is given to qualify information. Even if we have the most potent medicine or cure for patients, if we are directed by misleading information, science will still fail. In the end, it is not the therapy that will have a great influence to people but it us how they help themselves not to be victims of misleading information. There are only few movies that contribute or portray facts about cancer and even other health issues. With its double edge sword, vigilance to its content can prevent future deaths and maladies.

Research Questions

1. What are the most common movie depictions of cancer in childhood, adolescents, and young adults? Are the depictions relevant and/or appropriately show the true nature of cancer- regarding its detection, treatment and outcomes? Do movies show the common symptoms of cancer?
2. Do movies discuss the care-givers' and patients' options to treatment? Do movies promote hospitalization among cancer patients?
3. What are the most common outcomes of cancer as depicted on movies?
4. What are the patients' and caregivers' response or coping mechanisms in dealing about cancer?

5. How do movies portray cancer in children, adolescents and young adults (AYA), including outcomes?

Significance of the Study

In our fight for cancer, we need to address problems about economy, problems arising from bad health habits and addressing the country's education. Media is a double-edged sword promoting entertainment to people and depicting pictures which can be perceived as facts. Media can be merely entertaining or may be source of information. These informations may twist a myth into a fact, and wrong decisions may be produced.

This study aims to explore movie depictions in children, adolescents and young adults through a review of cancer movies for the last twenty five years. Media becoming an entertainment-educational tool portrays a role in information dissemination thus may help in prediction of viewer's attitudes towards cancer. This is an exploratory study of movies which aims to describe cancer depictions and portrayals. Our result will guide future research to better understand movies, including their effect on viewing public. Furthermore, this research specifically describes movies depictions as how they may affect viewers who are themselves patients and caregivers.

Accurate result of this study will provide awareness to medical practitioners of the dismal movie depictions which will guide them on how to correct each. It will also help them understand why patients have feeling of fear and opted not to be treated medically. Practitioners may educate the public by showing the data in the hospitals

Hospital administrators will be able to identify the dismal portrayals of cancer and promote scientifically based scenario thru health programs and by disseminating information thru all forms of media. It will also serve as an important tool in their advocacy in the fight of cancer.

If we are exposed to wrong information, we will be living in wrong direction. If cancer patients in movies die without a fight, diagnosed cancer patients may also choose to die without a fight. It is the government's role to protect the viewers from what they see. But the burden of correcting the moviemakers' wrong portrayal of diseases specifically cancer lies on us physicians. It is hoped that this study will provide the figures of the disparity between fact and myth.

Should the results of this study show significant dismal portrayals of cancer in movies, health allies will be obliged to warn public about the disparities in movies, especially those pertaining health. It is not only empathy that is elicited when viewing movies. Some persons may imitate whatever they saw, good or bad. Absolute correction of wrong portrayals may be impossible, however public warning will still help the viewing audience not to be misguided.

Objectives

1. To characterize the depiction of cancers in children, adolescents and young adults (AYA) in English-language or -subtitled movies.
2. To gather data about the most common signs, symptoms and outcomes of cancer as depicted on movies

3. To gather data about behaviors and coping mechanisms of patients in response to cancer, as depicted on movies.

4. To gather data about behaviors and coping mechanisms of families, caregivers and/or significant others of cancer patients, as depicted on movies.

5. To gather data about where treatment is initiated on movies, and estimated time to live of cancer patients from time of detection.

Design/Method

A qualitative type of research will be used in this study. A preliminary list of mainstream, independent, and made-for-television movies produced from 1975 to 2010 will be independently identified by two authors through manual searches of the internet and movie databases, for English-speaking or English subtitled films. This will be made possible by searching from websites namely: [www. google. com](http://www.google.com) and www. youtube. com. Abstracts of movies will then be viewed thru www. imdb. com and will be decided whether they fit the inclusion criteria. Qualifying movies will then be viewed by the two authors. Included movies will be those movies containing individuals aged 29 and below whose signs and symptoms of cancer are noticeable by the audience. Data gathering about the variables regarding cancer, most common signs and symptoms of cancers, behavior of patients and families and the most common outcomes will then be gathered and tabulated.

Setting

Data gathering were done by the two researchers independently at home by viewing the movies included in the criteria. The outcomes of the data gathering are to be collaborated

Inclusion Criteria

Each of these criteria must be met for inclusion:

1. The cancer movies are released on public during the year 1975 to 2010.
2. The character of the movie, particularly the patient with cancer must be aged 29 and below and these characters clearly manifested signs and symptoms of cancer noticeable to the audience.

Exclusion Criteria

Either of these criteria being met will lead to exclusion:

1. Cancer movies released before year 1975 and beyond 2010 are excluded in the study, including those with cancer characters with age 30 years and above.
2. Cancer movies filmed between the year 1975-2010 which contains languages not clearly understood by the proponents of this research.
3. Movies which involve cancer patients who are not the main subjects of the film or cancer manifestations not highlighted in the film.

Data Gathering

Main outcome measures

1. The Variables of Cancer in an individual affected as reflected on movies

1. 1. Age

1. 2. Sex

1. 3. Type of cancer

Table 2. The Most Common Signs and Symptoms, Treatment Options, Outcomes of Different Types of Cancer and Estimated Time to Live among Cancer Patients as Reflected on Movies

2. 1. Physical effects

2. 2. Treatment Options

2. 3. Outcome of cancer

2. 4. Estimated time to live among cancer patients

Table 3. Behavioral Reactions of people toward cancer

1. Behavioral reaction of patients toward the sickness

2. Behavioral reaction of families/caregivers toward cancer

3. 3. Where treatment is initiated

Data Handling and Analysis

The co-authors will review cancer movies based on the inclusion and exclusion criteria. The data from the movies included will be tabulated in a table. All of the movies viewed independently by the co-authors will be collaborated at the end of the 10-month study period. The data on age, sex, <https://assignbuster.com/portrayals-and-presentation-of-cancer-in-cinema/>

type of cancer, physical manifestation of different types of cancer, treatment options, outcomes and estimated time to live will be presented as frequency and percentage. Typical emotional process that most people with a terminal illness and families go through namely: denial, anger, bargaining, depression and acceptance will be presented in frequency and percentage.

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