

blogs can be seen as important cultural artifacts of our time (Semino et al., 2018). Personal blogs, in general, and, more specifically, cancer blogs, are predominantly written by women, and therefore, are particularly robust means of accessing women's experiences with cancer (Ressler, 2012; Kim et al., 2015).

Despite the significance of metaphor use in cancer discourse, empirical research on the metaphorical description of cancer remains scarce. Therefore, this article aims to explore the potential functions and cultural implications of metaphor—notably, personification—of cancer in women's blogs. We seek to address the following research questions: i) What metaphors are prevalent in contemporary women's cancer blogs? ii) How do metaphors function for the writers? iii) How do metaphors shed light on our cultural understanding of cancer survivorship among women?

Metaphor theory

George Lakoff and Mark Johnson (1980) made significant contributions to our understanding of metaphors' intricate nature through their development of cognitive metaphor theory. According to Lakoff and Johnson, metaphors are ingrained in our thought processes as an essential aspect of language and culture: "You don't have a choice as to whether to think metaphorically.... We will think and speak metaphorically whether we know it or not" (1980, p. 257). Lakoff and Johnson introduced the notion of "conceptual metaphor" to explain how we comprehend one idea by associating it with another. This concept encompasses two main types. "Universal metaphors," could apply without regard to context, such as "life is a journey." "Cultural metaphors," are influenced by specific cultural contexts (Lakoff & Johnson, 1980, p. 274). Lakoff and Johnson also delineated the relationship between the "target domain," representing the concept being conveyed and the "source domain" which provides the metaphorical replacement or elaboration of the target (Lakoff & Johnson, 1980, p. 265). For example, in the expression "Life is a rollercoaster," "rollercoaster" serves as the source domain, while "life" is the target domain.

Lakoff and Johnson's insights into the functions and effects of metaphors have garnered attention across various academic disciplines, including studies of illness narratives in the field of health communication (e.g., Semino et al., 2018). Metaphors serve as bridges in language, offering a more vivid vocabulary to express how illness is felt psychologically and existentially. Awareness and analysis of metaphors is beneficial for individuals grappling with illnesses as well as for healthcare providers and nonprofessional caregivers to better understand experiences of cancer patients.

Types of metaphors

Lakoff and Johnson (1980) identified three categories of metaphors: structural, orientational, and ontological. Structural metaphors involve conceptualizing one concept in terms of another, and orientational metaphors organize concepts spatially. Ontological metaphors—the focus of this article—project a concrete phenomenon onto something abstract, with personification being a prominent type. Lakoff and Johnson described personification as "the most obvious ontological metaphor," where human qualities are attributed to non-human entities (pp. 33–34). For instance, in the phrase "Life has cheated me," personification helps express experiences, emotions, and ideas (Lakoff & Johnson, 1980). Thus, metaphorical personification aids in conceptualizing abstract target domains by drawing on familiar human attributes.

By projecting our beliefs or attitudes onto objects, we act creatively, both as message senders and receivers (Wohlmann, 2022).

Cancer culture

Construction of self-identity is a reflexive endeavor, with individuals actively crafting evolving biographical narratives about themselves (see, e.g., Beck, 1992; Giddens, 1991). However, pursuing self-definition also exposes individuals to frustrations, uncertainties, and vulnerabilities. In this dynamic interaction, individuals and discourses mutually shape each other (Ahmed, 2004; Giddens, 1991).

How do these factors intersect with cultural discourses on cancer? The uncertain causality of many cancers has led some to view cancer as a reminder of life's fragility and inevitable mortality (Bauman, 1992; Paal, 2010; Stacey, 2017). Moreover, certain cancer types are perceived, to some extent, as self-inflicted through unhealthy lifestyle choices such as poor diet, smoking, and, especially relevant in this study, sexual behaviors associated with HPV—all reinforcing shame and stigma (Vrinten et al., 2019).

The discourse of "cancer survivorship" became prominently impacted by breast cancer campaigns in the 1960s, portraying cancer survival as a battle. Similarly, the Pink Ribbon narrative has emphasized personal heroism in overcoming the disease (Wackers et al., 2021). Following this line of thinking, breast cancer narratives often depict individuals as personally responsible for their recovery, encouraging women to confront cancer with positive affirmations like "I can do this." However, focus on breast cancer has overshadowed other cancer types, creating challenges for alternative narratives to emerge—a phenomenon called "breast-cancer-ization" (Bell, 2014:56). Alongside the heroic survivor narrative, there is also a pressure for cancer patients to embrace "positive thinking" in their situation, as a way to self-motivate. Barbara Ehrenreich (2010) explains this norm of always staying positive and the drawbacks and commercialization behind it, noting that promoting optimism comes at the price of acknowledging the emotional toll of cancer. Such discourses can exacerbate the burden on individuals living with cancer.

Cancer metaphors

A few studies have aimed to understand cancer patients' use of metaphors in order to improve patient-carer communication and to help patients understand and cope with their illness experiences (Bodd et al., 2022; Gibbs, 2020; Stephens & Thorne, 2022). Most notably for this study, Gustafsson et al. (2020) investigated blogs written by Swedish patients with advanced cancer using psychological theories focusing on coping. According to Gustafsson and colleagues, metaphorical descriptions of cancer, such as a "stranger" or "monster," are used to "compartmentalize experiences and emotions" (Gustafsson et al., 2020, p. 267). By separating the "self" from cancer and externalizing it, cancer bloggers attempted to fight against it as an outside enemy, providing bloggers with an effective coping strategy. Similarly, Demjén (2016) demonstrated that using metaphorical descriptions in online communication can reduce anxiety and promote solidarity.

Susan Sontag's writing (1978, 1989) on metaphor and stigma during and after her cancer struggles is considered "ground zero" in understanding how prevalent cultural metaphors for illness—such as references to battle—framed the understanding of cancer in contemporary Western society (Wohlmann, 2022: 6). Sontag advocated for the elimination of military metaphors from discussions

about illness, arguing that they could unfairly stigmatize and assign blame to individuals.

While most scholars agree with Sontag's general claim that metaphors create a meaning other than the biomedical, others have critiqued her argument. For instance, Stacey (1997) challenged Sontag's insistence on a metaphor-free discourse on illness, arguing that all illnesses are inherently linked to specific cultural contexts and that science can never be entirely value-free or devoid of metaphor. Similarly, Wohlman (2022) contends that war metaphors are deeply embedded in our society and are often used without consideration of their origins. (See also, Abaalalaa & Ibrahim 2022.) However, recent research has identified recurring metaphors that, while reminiscent of Sontag's observations, may offer positive psychological benefits for coping (Frank, 2002; Gustafsson et al., 2020). In this article, we will examine both sides of this debate through our analysis of metaphor use in women's cancer blogs.

Materials and Methods

Data

Data were collected between July 2019 and February 2020, and two previous articles were written on the material (Kvaale et al., 2022; Kvaale et al., 2024, forthcoming). As there are no blog registries in Norway, the texts were obtained using purposive sampling where the primary investigator searched for texts via cancer associations, newspaper articles, social media, and specified web searches. Our inclusion criteria were as follows: i) publicly available Norwegian blogs and texts, ii) first-person narratives, iii) blogs and texts written by individuals with all types of pelvic or colorectal cancers, and iv) writers above the age of 18 years (determined via self-reporting and photos in the blogs). Data consisted of 31 individual writers (Table 1), and their texts ranged from 1 to 200 pages per blog.

The original study intended to include and compare blogs written by men and women, but blogs written by men turned out to be challenging to include because i) fewer males are blogging on this topic, ii) those who were blogging had passed and could not be contacted for consent to be published, or iii) male bloggers were untraceable (without contact information or full name); to protect their privacy rights, we could not pursue the search for their identities according to our data protection impact assessment (further discussed below).

Therefore, all quotations from the data are from those bloggers who could be contacted—all women—and consent was obtained to use their words in publications. Each citation in the article is indicated as text writer (T) and an individual number. The study's perspective was thus influenced by an unavoidable set of circumstances preventing gender comparisons on cancer blogs from being published. The fact that men are less willing to share their personal experiences with full names is, however, interesting and relevant for future studies.

The empirical material comprises personal blogs, guest blog posts, and one-time personal texts from cancer organizations. The posts might be discontinuous, episodic, and primarily contain text, but may also include photos, links to other websites, and commentary. The writing style is often informal, autobiographical, personal, and written at the moment, like diaries, but some are also more elaborate with poetry and external links.

As naturally occurring discourse, blogs are cultural artifacts representing norms and values from our specific social, historical,

and political context (McCosker, 2014). Studying blogs is useful because the content is naturalistic, meaning that researchers do not directly influence the material. Thus, the material is written without questions posed or the blogger's awareness of being analyzed as research material as blog writers share their texts openly and willingly with an unknown public of readers. The blogger's choice of language, tone, topics discussed, and overall approach to storytelling provide insights into their perception of who they are addressing with their blog posts. By analyzing these aspects of the writing, we can better understand the bloggers' intended audience and how they seek to engage with them.

Our study analyzed metaphors (with an emphasis on personification) and narrative perspectives in women's blogs about cancer experiences. We ensured rigor by developing a systematic sampling process and using data-driven coding. We searched for identical words and phrases to enhance trustworthiness and analyzed deviant cases. Also, we enhanced reliability through critical reflection by promoting a rigorous and systematic approach to examining information, arguments, and evidence. During the analysis, we questioned assumptions, evaluated sources, considered alternative perspectives, and assessed the validity of claims. By actively engaging in this process, we were better equipped to identify biases, errors, or inconsistencies in our own thinking and/or in the information we encountered. This helped to ensure that conclusions drawn were based on sound reasoning and credible evidence, thereby enhancing the reliability of the analysis or argument.

Data analysis

The research followed an interpretive approach, allowing for an understanding of individuals' experiences in different contexts and within a hermeneutic framework. To analyze the data, we extensively examined and coded the texts to generate overarching categories, themes, and subthemes (see Table 2). These themes and sub-themes were continually revisited and cross-checked against the data to ensure alignment.

NVivo was utilized to organize and manage specific references to metaphors within the data. Further analysis involved deep dives into transcripts and continuous reflection on field

Table 1. Bloggers.

Age groups	Gender	Cancer area	Text types
20–29: 8	Women: 23	Pelvic total: 23** (Gynaecological: 17 Prostate/testicle: 6* Colorectal: 9**)	One-time texts: 11 Multiple texts/blogs: 20
30–39: 12			
40–49: 1			
50–59: 8			
60–69: 2			

*Could not consent and only provided context in the study. **One writer had both colorectal and gynecological cancer.

Table 2. Patterns found in the data.

Cancer as an uninvited companion
Cancer as conscious and intentional
Cancer as an enemy to be battled against
Cancer as harbinger of death

notes, narrative context, and corresponding data such as entire blogs, including photos. During the ongoing analysis, we coded the texts by studying them line by line to find metaphors and expressions related to the bloggers' cancer using the "metaphor identification procedure" (MIP) developed by ten metaphor researchers (Pragglejaz Group, 2007).

The MIP approach adopts a maximalist rather than minimalist stance, allowing for a broad spectrum of words to be considered as conveying metaphorical meaning based on their contextual usage (Pragglejaz Group, 2007). We searched for linguistic images—both source and target domain, and literal and figurative meanings. The first author performed a variety of NVivo searches inside the clustered material with an awareness of previous knowledge about cancer survivorship. To ensure that all possible versions of a metaphor were discovered, we reread all phrases and paragraphs with the words "cancer," "illness," "disease," and "death." There are clear challenges when analyzing metaphors, such as misunderstanding and separating literal and figurative messages. All language considered uncertain as metaphoric or not was first considered using MIP, and arising doubts were discussed between the authors to agree on the significance and meaning of writers' words, expressions, or potential intentions.

Ethical considerations

Our study followed national Norwegian guidelines, including their guide to internet research ethics. The Data Protection Office (Norwegian Centre for Research Data) considered the study's data subject to consent due to the sensitive subject and the fact that the bloggers did not intend their writing for research. The legal basis for processing personal data is considered "archival purposes in the public interest, or for purposes related to scientific or historical research or statistical purposes" (GDPR, art. 9, no. 2 letter j). A data protection impact assessment was also performed in line with these EU regulations. The assessment concluded that, although the texts were published willingly and were open to the public, they needed to be considered and protected as research material, and all cited texts required consent. Therefore, the study underwent a Data Protection Impact Assessment approved on 22.10.2019 (no 977764). In addition, an Institutional Review Board (IRB) approved the study as stipulated according to current Helsinki Declaration guidelines.

Results

Forms of metaphorical description

Cancer as an uninvited companion

When describing their cancer experiences, bloggers frequently used the term "the cancer" or "my" cancer, as in "what the doctor is going to say about my cancer" (T20). This might be natural when repeatedly referring to the same diagnosis. However, it also shows an intimate relationship to the diagnosis. Several writers use the pronoun "you" when addressing their illness, further indicating a personal relationship and personification of cancer. One of the most explicit examples is when an active blogger with colorectal cancer posts a picture of herself from the hospital bed, giving the finger to the camera with the text "FUCK YOU, CANCER" (T13), indicating a direct conversation with the illness. Similarly, another blogger with a similar diagnosis writes:

Suddenly, every minute with you in my body felt unbearable. Each wave of pain felt like a foretaste of death. I interpreted every itch as a symptom and every cough as a sign of spread. Yes, you scared the shit out of me. (T20)

This post was penned just over a month after the blogger received her initial diagnosis of bowel cancer, during a period when her situation was tumultuous and bewildering. Significantly, her symptoms and suffering had been shrouded in uncertainty for an extended period, so receiving a diagnosis brought some clarity, albeit with the grim realization that it was the worst possible outcome: "Lactose intolerance. Ulcer. Irritable bowel. Celiac disease. Stomach catarrh. Gallstones. Crohn's. Diverticulitis. Ovarian cyst. Functional dyspepsia. Kidney stones. Ulcerative Colitis. Esophageal hernia. The doctors had many names for you" (T20). After enduring numerous tests and appointments, she finds herself exhausted and frustrated. The final diagnosis reveals a type of cancer that evades detection on scans, adding to the sense of bewilderment. It's as if the cancer had been lurking in the shadows, only revealing itself suddenly. Her blog post carries on:

She is going to give up, you thought. Obviously, you don't know me well enough. Twelve trips to the GP, two trips to the emergency room, three gastroscopies, four ultrasounds, nine blood tests, two CT scans, one MRI, one PET scan, six years, and then... There you were. (T20)

As a form of "revelation," cancer appears before her, and she approaches it as something or someone she can address. She shows a strong personal commitment to *her* illness and its stages; it is *her* cancer she is conferring with, not with the doctors. Accordingly, she reveals an intimate relationship with her cancer as an unwanted companion.

After a few months of acknowledging the presence of the cancer, she changes the pronoun to a third-person singular pronoun, "him":

"We can't be sure that the cancer won't return, especially when it has spread like in your case," replies the surgeon. I wait until the surgeon has left. Then I cry in silence as "completely healed," my very best friend, gets up and disappears out the door. Instead, I'm left alone with "basically healthy." In no way do I feel as confident about him. (T20)

The pronoun change from "you" to "him" could suggest a form of relational development with the cancer. It seems that the blogger is placing cancer on a level further from herself than the previous and more intimate "you." Instead of being face to face with her cancer, as she was in the initial stages of her diagnosis, she now keeps "him" at arm's length. The "he" referred to could also be interpreted as the metaphorical personification that has evolved more specifically into a man who has intruded into her, as a physical aggressor, with all the cultural associations this implies. Notably, cancer is rarely described as a woman in Western societies—a subject which should be further explored in further investigations.

Other bloggers typically describe cancer as a person-like presence in the later stages; the shape of the "being" is vague, but constantly present and horrifying. It holds human-like abilities and characteristics, with descriptions such as: "It is laughing at me" and "It has no empathy." One blogger reflects, "When it decided to move into me is not easy to say!" (T3). The cancer, "it," is ex-

pressed as finding a “home” in her body, suggesting that it chose her specifically as a preferred space.

Cancer as conscious and intentional

Uncertainty and fear of recurrence of cancer are common for cancer patients as well as those who have ended treatment. In one woman’s expression, we see how intentionality is perceived: “Are all cancer cells really gone? After all, all it takes is one lousy cell, which is good at hiding” (T10). Here, cancer is a persistent and clever threat, with the blogger imagining the possibility of cancer recurrence or growth.

Again, bloggers attribute human-like qualities to their illness, or parts of it, as if it had cognitive or behavioral capabilities and willpower. One woman says, “In the last few days, we started talking about who we really are and what we really did before cancer pushed us onto a sidetrack” (T13). She thus imbues the disease with intentions, will, or abilities.

Not surprisingly, the place in which cancer arises has major implications for some bloggers’ motherhood and future as women, as explained by a blogger with gynecological cancer:

At irregular intervals after the operation, a wave of great sadness has washed over me: the sadness of not being able to have children of my own. Cancer took that opportunity away from me. Everything had to be operated. There is nothing left to create life with. (T5)

In this example, the blogger describes her diagnosis as intentionally taking something important from her. Cancer represents a willful being, which can intentionally divert one’s life completely.

Another blogger repeats in several of her texts how the personified cancer is seeking her out: “I decided early on that I was no victim of this tumor that had chosen to settle inside me!” (T3). In a single sentence, she implies that cancer possesses agency and deserves condemnation, while simultaneously asserting her refusal to be a helpless victim; rather, she vows to actively combat it.

Cancer as an enemy to be battled against

The word “battle” is often used, suggesting that the bloggers are fighting a war against cancer. They sometimes express appreciation for those on “their team” or evoke their willingness or strength to take action:

I must fight! Tooth and nail, I must fight the battle of my life! Once again, I have to roll up my sleeves to do what I do best! Fight...Lucky for me, I have a black belt in fighting for my life and fighting cancer...because this girl refuses to die! (T3)

Through an extended use of exclamation marks, the blogger expresses to what degree fighting is expected and that the battle she engages in is crucial.

The battle metaphor, in which cancer is seen as a personified enemy ready to fight the individual, is a feature seen all the way from Sontag (1978) to more recent publications (e.g., Bodd et al., 2023). Common expressions in the material show several examples, with such phrases as “mobilize for battle,” “showing cancer who is boss,” “the battle my body is waging,” and “my fight against cancer.” As one blogger states, “It is an incredibly unpleasant

feeling to know that you have cancer cells in you, which are doing their best to destroy you” (T13).

Another woman shares her anger using war metaphors and ascribing her cancer with negative attributes:

My new main enemy is a ferocious 4 cm cancerous tumor, which has already started to grow into the surrounding tissue and threatens to take over new territories if given a chance. Already in a week, the tumor devil will be operated on, together with various tissues and organs, to make sure that there is no spread. (T5)

Although war metaphors and references to cancer as a monster (here, the devil) are not necessarily equivalent, they are both associated with battle or encouragement to fight and thus maintain the norms of the individual fight against an evil enemy.

One blogger discusses the use of battle metaphors, per se:

The way cancer is portrayed in the public space, as a battle you have to fight to win, can, in my opinion, contribute to creating a sense of shame in many people. Is this because, should you lose this “battle,” you are weak, unsuccessful, and inept? In our achievement and perfectionist society today, this is not an option. We, humans, are social beings who depend on belonging to a community. (T6)

Some bloggers consider themselves more potent than their opponent: “[I]t’s just as if I can turn up my nose at cancer: “You didn’t expect this, did you?” (T10).

Interestingly, the same phrase is found in another blogger’s post. However, there is no indication that the two bloggers have read each other’s blogs: “The fact that something good comes out of this disease makes me really happy; it’s just as if I can turn up my nose at the cancer and say: ‘You didn’t expect this, did you?’” (T13).

In contrast, another woman describes uncertainty stemming from the diagnosis and the awareness of the placement of cancer in her body while reflecting on encounters with her doctor:

To him, I appeared as a confident, solid young lady. Composed and in good spirits. Inside me, I was boiling with both uncertainty and shame. It’s a shame that I got cancer right there! In the womb! Where my babies became children! Where they were conceived and created! The most feminine part of myself. Of course, I got sick in it... So is it possible? You don’t welcome it heartily, the ruthless cancer, but you play with the cards you’re dealt. To a certain extent, anyway... (T3)

In addition to depicting cancer as a ruthless opponent, the same quote highlights both a normative expectation (behaving calmly at the doctor’s office) and a taboo (gynecological cancer).

The same blogger explains further:

We must dare to talk about it. We must dare to say it out loud and break the barriers of our shame. What is hiding behind the shame? The cancer? I refuse to believe that because there is no shame around it. It brings with it fear and irrational anxiety. It is not ashamed. Oh, I really didn’t choose it. That bastard chose me. And it was cancer that chose my womb... (T3)

This text shows the writer’s ambivalence: She opposes the

taboo of the diagnosis and stigma, but at the same time, she confirms it by saying that cancer “chose” both her and to affect shameful areas.

Uncertainty when experiencing cancer may produce frustration and sadness about not being able to involve anyone else: “I felt completely alone. In a fight against death” (T19). The loneliness of their cancer experience is a recurring subject for the bloggers: “And this is where I lie now. With the alarm switch in hand and panic in my throat. The alarm is useless because I can’t escape; the cancer’s soldiers have to come in for a check sooner or later” (T20). This blogger and others often convey a sense of helplessness regarding their inability to combat the enemy “soldiers.”

Referring to her cancer as a person, another blogger shares her uncertainty: “It feels like there’s a fucking monster living in your body. How big are you? How bad are you? Have you spread out? Who has the upper hand, you or me?” (T20). In this passage, cancer is personified as having active and aggressive behavior; still, the blogger is uncertain about her opponent.

In contrast, however, a different blogger describes her refusal to accept having cancer dominate her:

I was ill. Deadly ill. And the phenomenon became as clear as day. Life was what happened to me. Not death, although it knocked at my door once again. It was like it suddenly stood there. In all its glory. I just didn’t want to be in it. I wanted to own it, live it, to be in charge of the greatest gift I have ever been given. Suddenly, it was uncertain again. If I could keep it. Life! It was like waking up from a battle I had already won. I had to restart and use all my experience to win over myself. I couldn’t just be a subject of my own illness. (T3)

This writer will not be passive when confronted with her illness; instead, she will fight it, reflective the “heroic” warrior ideals from breast cancer scripts described above.

Cancer as a harbinger of death

Several writers use cancer and death interchangeably, indicating a strong association between the two, despite the fact that many are cancer survivors. One writer, for example, stated:

The scar on my stomach is, for me, the very proof of how fragile life is and how much I have to lose if I don’t take myself seriously! Inside my belly lived both my children. Their lives began here. Inside my stomach, death also took up residence in the form of a malignant cancerous tumor. (T3)

The expression of death taking residence in her is the same as previously shown when the writer used it to describe how cancer had chosen to settle inside her. It is an expression that is repeated several times in her blog.

Another blogger describes her strong association between the disease and death:

When you hear the word cancer, you think of death; in any case, it is often the first word that pops into our heads when we hear it. Cancer and death somehow belong together in our heads, even though deep down, we know that’s not the case. (T10)

She indicates that beyond statistics, or maybe even what the doc-

tors have told her about her prognosis, the image of cancer as deadly dominates any other possible reality.

Several bloggers express how thoughts that never existed before appeared, especially concerning death. Death is in their consciousness or an omnipresence, such as “being aware of death,” “facing death,” or “death knocked on my door.” Here, we also find examples of personification:

Three months later, everyday life with “you can die from this” is going surprisingly well. At first, I struggled to keep him at bay, but now his daily scare tactics aren’t as effective as initially. However, he is always there, in the background, in the back of my mind. Like a wound that never heals, a constant reminder that I could be torn away from those I love far too soon. (T20)

Once more, we observe a shift in the blogger’s perception of death and cancer over time. Initially confronting “him” head-on, she now depicts “him” as lingering in the background. Nevertheless, she concludes, “I’ll probably learn to live with him. Some even say they live better with him in tow. But I don’t think we’ll ever be friends” (T20). The writer points out how she must accept the constant presence, even unwillingly. In another post, she describes the benefits of this consciousness of death being always close:

Then there are the benefits that emerge as a result of having death lurking a few meters behind you around the clock. For example, I always take advantage of an opportunity for a comforting cinnamon bun; who knows how many cinnamon buns I have left? [...] This is how you enjoy a cinnamon bun when death is sitting on the table behind you, waiting for an opportunity. (T20)

Similarly, another blogger expresses how the awareness of death makes her more conscious of life:

I embrace all the good things in life; I have given myself the right to do so. Especially considering that until nine days ago, I fought against death again. Death moved into my own body. And it tried once again to take up space in my mind. This time, it did not succeed. First exam passed!!!! (T3)

The writer’s use of cancer and death as interchangeable tells us that the diagnosis is still, to a high degree, considered fatal in her mind. For her, complete removal is the only cure for the ongoing uncertainty of death or fear of recurrence.

Discussion

Individual and cultural aspects of personifying cancer

The word “cancer” is not shied away from in the texts examined here, with one blog containing over 400 mentions of it. This prevalence suggests a heightened recognition and tolerance for discussing cancer, although there are still individuals who find it difficult to verbalize, as indicated by references such as the “disease I can hardly bear to pronounce” (T19). This statement emphasizes the weight of naming the particular diagnosis.

Our research reveals that one mechanism for coping with cancer involves personifying the illness as a sentient entity that

the writer must confront. Some bloggers portray themselves as individuals specifically targeted by cancer, implying a belief in its agency and suggesting that its selection of them was not arbitrary.

Personification serves multiple purposes. First, by personifying their cancer, bloggers can confront their fears and frustrations more tangibly. By directly addressing their illness, they can cope, process, and/or engage in a form of therapeutic dialogue with themselves and with an imagined “other,” particularly when articulating their experiences and emotions proves difficult. Thus, psychologically, personification can evoke emotions regarding the situation, rendering bloggers more powerful and the illness more comprehensible. This activation also means that bloggers are confronted with an entity that they can challenge, fight, or compete against.

Gustafsson et al. (2020, p. 268) described personification as a coping strategy—a “compartmentalization,” but we diverge somewhat in how we interpret our findings, as we view them as both potentially therapeutic and harmful, the latter going back to Sontag’s argument. Personification proves beneficial for cancer patients in externalizing their illness and voicing therapeutic catharsis or acceptance. It provides bloggers with a means to direct their actions toward an external entity rather than directing hostility toward their own bodies, thereby enabling them to articulate feelings of motivation and hope.

Personification assists bloggers in addressing feelings of shame or resistance associated with societal taboos surrounding their diagnosis. Also, it allows bloggers to express determination and optimism, conveying a sense of agency over their cancer experience, and by sharing their thoughts online, they reassure their readers of their proactive approach to managing the illness, rather than passively succumbing to its effects on their bodies.

On the other hand, personification could function more negatively as a type of passivity, allowing bloggers to place cancer outside themselves as something they could not influence. Such expressions as “I can’t escape” (T20) or “Cancer chose my womb” (T3) indicate the bloggers’ lack of control. Therefore, personification may be counterproductive. As such, personification could be harmful and therapeutic simultaneously or occur separately at different points in bloggers’ experiences.

One purpose of our analysis was to explore how bloggers’ discourse represents modern culture and discourses on cancer survivorship. We found a dialectical perspective where cultural norms guide the narratives, while at the same time, the narratives and metaphors can help to maintain, reinforce, or change these norms. As we witnessed in our material, several bloggers adhered to descriptions of “their” cancer as an enemy, a monster, or a villain. In these examples, the bloggers maintained cultural ideas of cancer and sometimes reinforced such resonance through their anger and repetitions. One clear finding was the occurrence of battle metaphors combined with personified cancer as villains to fight or battle against. In this construct, the blogger represented the innocent victim who had to gather unknown strength to fight the duel against the cancer enemy.

Medically and culturally, and for many decades, we have heard metaphorical descriptions of “aggressive” and “non-cooperative” cancer, depicting it as a monster, both visually and linguistically (Stacey, 1997). Thus, the cultural presentations critiqued by Sontag continue to be highly influential on the image of cancer as an enemy.

In *At the Will of the Body: Reflections on Illness*, Arthur Frank (2002) discussed battle metaphors and metaphorical personification and objected to the negative personification of his

cancer. Instead of fighting an enemy in his own body, his approach was to acknowledge that the cancer was a part of him: “[A]ggression is misplaced energy. You may feel angry because of the way you are treated, but that is different from fighting yourself” (Frank, 2002, p. 85). Frank discusses the battle metaphor extensively in a dedicated chapter (2002, pp. 83–91) criticizing this externalization of cancer:

Most people opt for the tumor-as-alien. At the extreme, Ronald Reagan’s well-known quote: “I don’t have cancer. I had something inside me that had cancer in it, and it was removed” sums up this unwillingness to understand cancer as part of oneself. I only hope this served Reagan well. For me, I had cancer. (Frank, 2002, p. 84)

The battle and fight metaphors are well-known cultural representations. As such, the bloggers had integrated culturally established scripts of how to think about, represent, and act toward their illness. In this way, they represent how “master narratives of cancer, or privileged cancer narratives, circulating public discourses, affect cancer patient experiences” (McElearney, 2019, p. 983).

Use of metaphorical personification by the bloggers may perpetuate and reinforce stereotypes of cancer patients and victimhood. By framing their experience with cancer as a me-against-you scenario, the texts echo familiar narratives surrounding survivorship that bloggers have internalized. “Such an ideology,” Willig (2011, p. 901) argues, “constructs cancer as an opportunity to demonstrate one’s superior personal qualities including optimism, resourcefulness, and resilience but does not allow for expressions of anger, sadness or hopelessness.” In contrast, we saw the known metaphor of battle used in conjunction with fury, apathy, and grief. In this aspect, our data seem more heterogeneous regarding the struggle faced by cancer experiences, suggesting that the positive thinking and breast-cancer-ization is not completely dominating.

Furthermore, we observed instances where self-reflection and awareness of battle metaphors may contradict the bloggers’ genuine beliefs; bloggers may deliberately choose to employ them at times while abstaining from their use at others.

Ultimately, despite some latitude exemplified in the data, cultural metaphors continue to frame bloggers’ discourse, leaving bloggers with a limited range of available rhetorical resources. Wohlman (2022) described how some metaphors are so conventional that they can be called “dead” metaphors, thus, becoming a kind of “fact” (or “common sense.”) Metaphors connected to battle and fight may be close to that status; they have been in our vocabulary for so long that they are no longer recognized as metaphors (Wohlmann, 2022). The bloggers may, therefore, use words without consciousness or be blinded to alternative representations.

Significantly, since the material consists of openly shared blogs, an awareness of the implied readers may influence how bloggers express themselves. Some blogs allow comments from their readers, and others do not. Some include a commentary field, but it is often left blank. All these cases may influence the bloggers in their writing. Also, their motivation or intention when creating their blog might imply or overtly state a vision of their goal, whether to help others, unload some of their heavier burdens, or impress. Thus, some bloggers may have used acknowledged metaphors and metaphorical personifications as conscious literary tools to engage readers.

The conflation of death and cancer in our material is a sig-

nificant finding since it contrasts with both early and more recent scholarship on death as taboo. Stacey (1997), for instance, writes:

Cancer can grow “secretly” inside the body for years without a person having any knowledge of its existence (sometimes between five and ten years). Cancer has traditionally been “kept a secret” from both patients and their friends and relatives because of its association with suffering and death. (1997, p. 42).

More recently, Andersson (2019) studied cancer blogs in Sweden, a context similar to ours. She found that bloggers avoided the term “death” and instead described how feelings such as grief, anger, or disappointment would manifest. Referring to Bauman’s (1992) theories, she explained how death has been described as taboo or something unspoken: “Cancer blogs are about life—maybe life in the shadow of a deadly disease—but they are certainly not about death” (Andersson, 2019, p. 402).

In contrast, our findings show that death is described frequently in conjunction with metaphors including personification and hence, following Lakoff and Johnson, are interchangeable as the target and source domains. The indication that cancer equals death is an essential finding regarding survivorship in general, diverting from the findings of Andersson (2019). The surprising amount of talk about death contradicts the high survival rates for several cancer types in Western society, which may indicate that even if technology develops rapidly, everyday understanding of a disease does not.

The gendered perspective presented in this article holds significant relevance. Despite a high degree of gender equality in Scandinavian countries, men may still feel less inclined to embrace the culture of emotional openness in public spaces. Ruth Page, considered a pioneer in exploring blogs and social media platforms from a sociocultural perspective, writes:

There is some evidence to suggest that gendered values bear on the narrative style. Typically, these differences reinforce hegemonic masculinity and femininity, whereby women’s stories are seen to promote solidarity through affective emphases and self-disclosure, while men’s stories tend to be factually oriented and present the protagonist in a heroic light or isolation from others. (2018, p. 221)

This gendered distinction regarding shared experiences, often linked to societal ideals of femininity, is supported by Pages’ discovery that female blog commenters predominantly interact with blogs written by women. This dynamic suggests that blogs more readily serve as an online platform for nurturing solidarity among women (Page, 2018, p. 226-227), again perpetuating established discursive cultural patterns.

Given the gendered nature of blogs, the fact that cancer is often constructed as being male in the blogs is particularly intriguing. While on a few occasions, the cancer was labeled as “it,” it was never portrayed as female. Bloggers may have opted for the pronoun “he” because they were all women who chose to envision a man as their adversary. Another possibility is that, since many (though not all) of the bloggers had various forms of gynecological cancer, the cancer was depicted as something unnatural in this place, thus an “alien intruder.” The “bastard” that targeted the womb can perpetuate a gendered metaphorical personification, where the “good one” is female, and the “villain” is male. Further

exploration of this topic could be quite valuable in understanding women’s perceptions of cancer.

Also, it is worth noting that amidst blog discourse, there seems to be greater acceptance of the overarching term “cancer” compared to specific types like “gynecological,” “vaginal,” or “anal cancer,” which are often linked with feelings of vulnerability and embarrassment (e.g. Vrinten et al., 2019). Not surprisingly, the localization of their cancer held immense significance for the bloggers. This observation was sometimes articulated for evident reasons, such as the disease precluding the possibility of child-bearing; however, there was also an emphasis on the notion that it was precisely in that area that the cancer “chose” to develop. Hence, instead of asking “Why me?” we more often found “Why there?” in our blogs, indicating that there was a willed presence who specifically aimed for their female organs of intimacy and fertility that are difficult to discuss.

Similarly, the reluctance to specify their particular diagnosis and instead utilize “cancer” as a broad term indicates that we can still discern stigma surrounding the body area rather than the term “cancer” itself. Within this study, numerous bloggers expressed concerns regarding the shame associated with the specific localization of their cancer. As Sontag (1978, p. 17) wrote, “cancer is notorious for attacking parts of the body (colon, rectum, bladder, breast, cervix, prostate, testicles) that are embarrassing to acknowledge.” Recent research also concurs with our hypothesis that sex, fertility, and bowel are difficult topics to discuss in our culture, which, in turn affects our actions, including communication (Reynolds et al., 2018; Vrinten et al., 2019). Hence, we observe how stigma has moved from “cancer” overall to cancer in private parts of female bodies. One could say that breast cancer also needed decades of campaigning to become as openly expressed as it has become.

Conclusions

Our findings cannot be neatly summarized to conclusively address all our initial research questions. Indeed, this narrative messiness reflects our methodology of analyzing naturalistic texts and the characteristic openness of blogs. Nonetheless, we identify patterns that offer insights into the types of metaphors employed, their usage patterns, and the underlying implications. Comparing our findings with Sontag’s foundational work from 1978 reveals both points of agreement and contention regarding the use of metaphors.

Sontag argued that the widespread adoption of war metaphors in discussing illness instills fear and uncertainty in patients and society, contributing to the perception of cancer as a formidable adversary. Our analysis reveals that the personifications present in our data, to some extent, perpetuate this “otherness,” as many individuals frame their experience as a battle against the disease. The continual portrayal of cancer as a villain with the intent to target them reinforces fearful perceptions of the illness.

However, contrary to Sontag’s perspective, metaphorical personification also provides bloggers with optimism, faith, and motivation to navigate everyday life amidst treatments, fears, and uncertainties. This may stem from a cultural discourse encouraging individuals to “fight” for their survival, aligning with ideologies of personal responsibility (also a problematic concept) prevalent in late modern society. While individuals today may feel less blame for the diagnosis compared to Sontag’s era, societal norms and established narratives still dictate that cancer patients should exhibit strength and optimism in their response to illness.

Notably, our bloggers sometimes utilize metaphorical discourse for therapeutic purposes without necessarily considering its broader personal or cultural implications. This duality, wherein cancer is personified as a malevolent alien, suggests that individuals employ readily available language largely without awareness of potential risks of perpetuating such frameworks. For bloggers composing personal diaries during moments of despair or pain, linguistic precision may not be their primary concern; rather, they prioritize the utility of metaphors in their writing process as ready tools of expression. Therefore, critiquing them for using metaphors that cultural researchers may scrutinize appears unreasonable. Nonetheless, our study contributes to a deeper understanding of the enduring influence of certain metaphors and narratives in contemporary discourse.

As noted above, Sontag posited that cancer often affects “embarrassing areas” of the body. Similarly, our bloggers frequently acknowledge their cancer diagnosis while omitting or downplaying their specific type of cancer. The expressed shame surrounding the affected area indicates the persistent social taboo associated with certain cancers. Paradoxically, bloggers occasionally also express anger and frustration towards this taboo, condemning it as unfair and ignorant.

Practical implications of this research

Death is a prominent theme in our material, indicating that bloggers do not consider it taboo. Still, death is often inextricably linked with cancer, reinforcing the perception of cancer as a deadly force even though we have high survival rates in Western societies today. This observation suggests that our media-driven society could benefit from sharing more optimistic narratives about cancer.

Exploring the functions of metaphors such as personification among female cancer patients provides deeper insights into cancer patients’ emotions and needs. Patients’ fragmented narratives also offer an understanding of the linguistic and cultural resources available today—resources that may be limiting, challenged, or both. By gaining awareness of the rhetorical strategies patients use, we can improve communication amidst patients and health-care workers and also contribute to discussions on how cancer metaphors and narratives can either aid or burden cancer patients and survivors.

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