

Pastel Injustice: The Corporate Use of Pinkwashing for Profit

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ABSTRACT

This article discusses the importance of recognizing pinkwashing, the practice of using the color pink and pink ribbons to indicate a company has joined the search for a breast cancer cure and to invoke breast cancer solidarity, even when the company may be using chemicals linked to cancer. This article argues that pinkwashing is a form of social injustice directed at women in the United States because the practice a) provides a vehicle for corporations to control the public experience of breast cancer, while simultaneously increasing profits and potentially contributing to the rising rate of the disease; b) obscures an environmental health discourse that recognizes the environmental causes of breast cancer; and c) co-opts or redirects women's experiences of the disease by narrowly defining what is possible.

INTRODUCTION

THIS ARTICLE DISCUSSES THE IMPORTANCE of recognizing a complex and multi-layered injustice related to women's health in the United States. *Pinkwashing* is the co-optation of breast cancer symbolism by corporate actors who stand to profit from the use of breast cancer awareness imagery, including pink ribbons or simply the pastel pink which have become synonymous with breast cancer "awareness," "the search for a cure," or the "fight against breast cancer" in the United States.

This article will describe and explore the manner in which this phenomenon functions, with the goal of articulating a term that has rarely been explored outside of cultural outlets, such as blogs and non-profit organizations' Web sites as well as a recent documentary,¹ which often identify instances of pinkwashing but do not explore the extent to which pinkwashing has penetrated the breast cancer experience. Specifically, we wish to highlight how pinkwashing a) provides the vehicle for corporations to control the public experience of breast cancer, while simultaneously increasing profits and potentially contributing to the increasing rate of the disease; b) ob-

scures an environmental health discourse that recognizes the environmental causes of breast cancer; and c) co-opts or redirects women's experiences of the disease by narrowly defining possible responses, outcomes, and by limiting appropriate activist repertoires.

PINKWASHING

Pinkwashing is "a term used to describe the activities of companies and groups that position themselves as leaders in the struggle to eradicate breast cancer while engaging in practices that may be contributing to rising rates of the disease."² The term is borrowed from the concept of greenwashing, the practice whereby corporations or businesses use green and eco-friendly marketing to appeal to consumers, though the actual products, services, and/or the companies' overall business practices are harmful to the environment.³ Pinkwashing is detrimental to American women and their families: Corporations create (and profit from) consumers' desire to "cure," become "aware," or find solidarity while coping with breast cancer, even while using carcinogens, hormone disruptors, and other toxic ingredients in the making of pink

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¹Sabrina McCormick. *No Family History*. (2007). <<http://www.nofamilyhistory.org/>> (Last accessed February 15, 2011).

²Stacy Malkan. *Not Just a Pretty Face: The Ugly Side of the Beauty Industry*. (New Society Publishers, 2007), 75.

³Sharon Beder. *Global Spin: The Corporate Assault on Environmentalism*. (Scribe, 2000).

products. These chemicals are rendered invisible by lack of consumer knowledge, misleading or incomplete labeling, lack of transparency along the supply chain, and by the marketing strategies that play to consumer emotions.

ENVIRONMENTAL CAUSES OF BREAST CANCER

Worldwide, breast cancer affects more than 1 million women every year, with women in industrialized nations experiencing the highest rates of disease.⁴ In the fifteen years between 1973 and 2008, the incidence rate for American women rose by more than 40 percent; today a woman in the United States has a one in eight chance of being diagnosed with the disease and nearly 40,000 women die each year.⁵ Although diagnostics have improved in the past four decades, increased diagnostic changes cannot fully account for the four-fold increase in the United States in such a short period of time.

Despite the widely held assumption that breast cancer is genetic, no more than 1 in 10 women with breast cancer has a genetic history of the disease.⁶ Additionally, data shows that less than 50 percent of all cases are related to individual risk factors such as diet. The cultural perception that breast cancer is genetic obscures an understanding of how women of color, who tend to be over-represented in communities that contain toxic waste sites and industrial facilities, may face higher cancer risks than white women. It has been suggested that the medical establishment's preoccupation with genetic disease factors exploits women of color in particular, fostering an expectation of undergoing expensive genetic testing, despite the fact that minority women may face a multitude of risk factors that are directly related to their community or workplace.⁷ Interestingly, a person's cancer risk increases when she moves to a country with higher incidence, suggesting that a woman's local environment, rather than her genes, is a significant predictor in whether or not she will develop cancer.⁸

Along with the reality that breast cancer is not simply genetic, research indicates that environmental exposures to toxic chemicals (through air, water, food, furniture, cosmetics, plastics, cleaners, and workplace exposures)

are contributing factors in a large number of cancer cases.^{9,10} Disease and illness are mediated by social, environmental, and economic forces and breast cancer is no exception; in the United States, African American women are less likely to be diagnosed with breast cancer, but are 20% more likely to die from the disease than white women.^{11,12} And while the age of puberty in U.S. girls is falling across the board, girls of color now reach puberty a full year younger than do their white peers.¹³ This phenomenon has fairly clear and alarming cultural implications, but the health outcomes are less obvious: the longer a woman is exposed to estrogen in her lifetime (or the longer the span of time between puberty and menopause), the greater her risk of developing breast cancer.¹⁴ Differences in socioeconomic status, access to care, proximity to toxic industries and institutionalized racism within the medical field may all contribute to the disparities in women's experiences of breast cancer.¹⁵ However, this reality is rarely represented in mainstream discussions of breast cancer and all but absent from corporate depictions of breast cancer "survivors."

The United States' current approach to regulating chemicals has been critiqued elsewhere.¹⁶ Existing laws have failed to assess for safety many thousands of chemicals, resulting in countless chemicals and finished products entering the market with little or no data on their effect on human health or the environment. The present regulatory paradigm fails to account for the synergistic effects that occur when numerous chemicals are used in a product (which is nearly always the case).¹⁷ And since current regulation is based on the outdated theory that the dose makes the poison, it has a limited capacity to

⁹Gray. *State of the Evidence*.

¹⁰Marcy Jane Knopf-Newman, "Public Eyes: Investigating the Causes of Breast Cancer," in *New Perspectives on Environmental Justice: Gender, Sexuality and Activism*, ed. Rachel Stein. (Rutgers, 2004), 161-176.

¹¹Charles Muntaner, "The Bell Curve: On Race Social Class and Epidemiologic Research." *American Journal of Epidemiology* 144 (1996): 531-535.

¹²Lisa Newman, James Mason, David Cote, et al., "American ethnicity, socioeconomic status, and breast cancer survival." *Cancer* 94 (2002): 2844-2854.

¹³Sandra Steingraber, *The Falling Age of Puberty in US Girls*. Breast Cancer Fund, 2007. <<http://www.breastcancerfund.org/media/publications/falling-age-of-puberty/>> (Last accessed on February 15, 2011).

¹⁴Silent Spring Institute. *Risk Factors for Breast Cancer*. <<http://www.silent.spring.org/faqs/risk-factors-breast-cancer>> (Last accessed February 11, 2011).

¹⁵JM Phillips, MZ Cohen, and G. Moses, "Breast cancer screening and African American women: fear, fatalism, and silence." *Oncology Nursing Forum* 26 (1999): 561-71.; WJ Eley et al., "Racial Differences in Survival From Breast Cancer: Results of the National Cancer Institute Black/White Cancer Survival Study." *JAMA* 272 (1994): 947-954; Rhonda Moore, "African American Women and Breast Cancer: Notes from a Study of Narrative." *Cancer Nursing* 24 (2001): 35-42; TR Taylor, CD Williams, H Kepher et al., "Racial Discrimination and Breast Cancer Incidence in US Black Women," *Journal of Epidemiology* 166 (2007): 46-54.

¹⁶The Lowell Center for Sustainable Production. *Chemicals Policy Reform*. <<http://www.sustainableproduction.org/publ.chempolicy.php?pid=174>> (Last accessed on February 15, 2011).

¹⁷Steingraber. *Living Downstream*, 250.

⁴Janet Gray. *State of the Evidence: The Connection Between Breast Cancer and the Environment*. (Breast Cancer Fund, 2008). <<http://www.breastcancerfund.org/media/publications/state-of-the-evidence/>> (Last accessed on July 30, 2010).

⁵Ibid.

⁶Breast Cancer Fund. Make Prevention a Public Health Priority. <<http://www.breastcancerfund.org/big-picture-solutions/make-prevention-a-public-health-priority/>> (Last accessed February 15, 2011).

⁷April Taylor, "High-Tech, Pop-a-pill-Culture: New Forms of Social Control for Black Women," in *Dangerous Intersections: Feminist Perspectives on Population, Environment, and Development*, eds. Jael Sillman and Ynestra King. (South End Press, 1999), 242-254.

⁸Sandra Steingraber. *Living Downstream: A Scientist's Personal Investigation of Cancer and the Environment*. (Vintage Books, 1997), 61-62.

incorporate scientific findings that low dose exposures of certain chemicals (e.g., hormone disrupting chemicals) are *more* harmful because they mimic the body's own production and synthesis of hormones. There is mounting evidence that many now ubiquitous chemicals can cause harmful effects at very low doses—the levels currently found in consumer goods^{18,19,20} and in peoples' bodies.^{21,22,23} Given the inadequacies found in chemical regulatory policies, many of the consumer goods that are marketed with pink ribbons may contain chemical substances linked to breast cancer.^{24,25,26}

CORPORATE SPONSORED CANCER AND THE MARKETING OF CARCINOGENS

The practice of tying a product or brand to a cause has the potential to raise money and awareness, which can be very helpful for non-profit research and advocacy groups. However, corporations often have the most to gain in this supposedly symbiotic relationship, and can mislead partners and consumers in the interest of increasing brand recognition, image, loyalty, and ultimately profits.

Breast cancer is useful for corporate cause marketing campaigns because it is a disease that many people are intimately familiar with and it is associated with beloved family members and friends. Breast cancer as a marketing tool has few (if any) risks of alienating potential consumers, unlike HIV/AIDS, poverty, obesity, or other

“uncomfortable” epidemics. In addition, women control somewhere between \$0.70 and \$0.85 of every household dollar spent, so marketing in relation to women's health is a logical business move.^{27,28} However, many corporations that engage in breast cancer cause marketing actually exacerbate the problem by contributing to environmental causes of the disease—they use chemicals linked to cancer and hormone disruption in the manufacture of their products.²⁹

Recently King noted that the public perception of breast cancer has been transformed from a grassroots struggle to secure research funding to a “chic” project for wealthy elites and corporations, a shift which has allowed corporate entities to largely dictate the public discourse around breast cancer.³⁰ In fact, Cindy Schneible of the Susan G. Komen Foundation, the self-proclaimed global leader of the breast cancer movement, refers to the strategic management of breast cancer marketing noting, “We're always looking for ways to engage consumers in the breast-cancer cause by capturing them where they live, work and play.”³¹ Schneible flips the oft-repeated environmental justice concept on its head, applying the language of grassroots environmental justice activism to consumption-oriented behavior that is isolated from a social movement community. Her comment suggests not only that pink ribbons are omnipresent in American women's lives, but that consumer responses to breast cancer should be seen as a viable means of engaging with the “cause” of breast cancer.

In practice, this can be understood as what Jurgen Habermas refers to as the colonization of the lifeworld where the lifeworld represents the social and cultural symbols and forms of language that support social structures.³² Habermas suggests that in an advanced capitalist society, economic and political actors seeking to maintain positions of power must rationalize their actions through the creation of social or cultural norms that legitimate their activities. Following his logic, pinkwashing can be recognized as a practice whereby corporate actors seek to legitimate their products via the creation of language and imagery that obscures the often harmful nature of some consumer products while simultaneously producing a positive corporate image. Pinkwashing further perverts this process when these pink ribbon products

¹⁸National Workgroup for Safe Markets, *No Silver Lining: An Investigation into Bisphenol A in Canned Foods*. May 2010. <<http://ej4all.org/contaminatedwithoutconsent/downloads/NoSilverLining-Report.pdf>> (Last accessed on August 10, 2010).

¹⁹Heather Sarantis, *No More Toxic Tub*. Campaign for Safe Cosmetics, March 2009. <<http://www.safecosmetics.org/toxictub>> (Last accessed on August 10, 2010).

²⁰Heather Sarantis, et al., *Not So Sexy: The Health Risks of Secret Chemicals in Fragrance*. Campaign for Safe Cosmetics May 2010. <<http://www.safecosmetics.org/notsosexy>> (Last accessed August 10, 2010).

²¹Rebecca Sutton, “Adolescent exposures to cosmetic chemicals of concern.” Environmental Working Group, September 2008. <<http://www.ewg.org/reports/teens>> (Last accessed on August 10, 2010).

²²Kathy Curtis and Bobbi Chase-Wilding, *Is It In Us? Chemical Contamination in Our Bodies*. Commonwealth Biomonitoring Resource Center & Coming Clean Body Burden Workgroup, November 2007. <<http://www.isitinus.org/documents/Is%20It%20In%20Us%20Report.pdf>> (Last accessed August 10, 2010).

²³Environmental Working Group. *Pollution in People: Cord Blood Contaminants in Minority Newborns*. 2009. <<http://www.ewg.org/minoritycordblood/BPA-cordbloodpollution>> (Last accessed on August 10, 2010).

²⁴JG Brody and RA Rudel, “Environmental Pollutants and Breast Cancer: The Evidence from Animal and Human Studies,” *Breast Diseases: A Year Book Quarterly* 19 (2008): 17–19.

²⁵Malkan. *Not Just a Pretty Face*.

²⁶Environmental Working Group's Skin Deep database search of “Avon.” <<http://www.mbcc.org/content.php?id=169>> (Accessed August 10, 2010). Search of “Estee Lauder” <http://www.cosmeticsdatabase.com/company/Est%26%23233%3Be_Lauder/> (Accessed August 10, 2010).

²⁷Boston Consulting Group. *WomenWantMoreTheBook*. <<http://www.womenwantmorethebook.com/overview/default.aspx>> (Last accessed February 15, 2011).

²⁸Stephanie Holland. *She-conomy: A Guy's Guide to Marketing to Women*. <<http://she-conomy.com/report/facts-on-women/>> (Last accessed on February 15, 2011).

²⁹Breast Cancer Action. *Think Before You Pink*. <http://thinkbeforeyoupink.org/?page_id=13> (Last accessed on July 24, 2010).

³⁰Samantha King, “Pink Ribbons Inc.: Breast Cancer Activism and the Politics of Philanthropy,” *International Journal of Politics in Education* 17 (2004): 473–492.

³¹Stacey Stukin, “Pink Ribbon Promises.” *Time Magazine* (October 2006).

³²Jurgen Habermas, *Legitimation Crisis*. (Heinemann Educational Books, 1976).

actually contribute to the occurrence of (or inhibit the treatment of) breast cancer.³³

Thousands of products are now stamped with the ubiquitous pink ribbon. From bottled water and snack foods to clothing, iPod cases, shoes, batteries, KFC buckets, and credit cards, “thinking pink” has become nearly unavoidable. Barbara Ehrenreich, a social scientist diagnosed with breast cancer in the late 1990s, has noted that the space afforded to breast cancer now “bears a striking resemblance to a mall.”^{34,35}

One of the most poignant instances of pinkwashing is the cosmetics giant Avon. The company launched the “Kiss Goodbye to Breast Cancer” campaign in 2001 with a fundraising lipstick in six shades (Courageous Spirit, Crusade Pink, Faithful Heart, Inspirational Life, Strength, and Triumph).^{36,37} Those lipsticks may have contained ingredients that disrupt hormone functions (which is in turn linked to breast cancer).³⁸ The use of hormone disruptors is not uncommon in the cosmetics industry, and is not currently prohibited by U.S. law.³⁹ Avon is one of the most recognizable corporate entities participating in the breast cancer awareness industry and according to the Massachusetts Breast Cancer Coalition (MBCC), more than 250 of Avon’s products listed in a database assessing the health risks of cosmetic products are listed in the “highest concern” category due to the presence of hormone disruptors, neurotoxins, and possible carcinogens.⁴⁰ Avon and many other companies fall back on the claim that “it’s just a little bit” of carcinogen or hormone disruptor in a given product, despite the fact that we are all exposed to more than one product and to thousands of chemicals daily, and that low doses of these chemicals are very concerning.

The corporate manipulation of pink ribbon imagery is not only confined to tangible goods, but extends to philanthropic activities as well. Between 2005 and 2008, the cosmetic giant Avon raised over \$265 million from the country’s largest corporate-sponsored fundraiser, the

Avon Walk for Breast Cancer.⁴¹ Although Avon proudly announces on their website that they disperse the funds raised to a variety of organizations nationwide, one-third of the funds raised from these walks go toward Avon’s own overhead. In fact, Massachusetts Breast Cancer Coalition notes that the Boston Avon Walk has raised millions of dollars, but less than two percent of those funds have supported environmental research related to preventing breast cancer in Massachusetts, despite the high rates of breast cancer in that state, the need for more research on disease causation, and the seemingly obvious need to prevent the disease whenever possible, rather than treating it after the fact.

Funds raised from breast cancer walks and runs undoubtedly serve to further treatment and early detection of breast cancer (which saves more women’s lives). However, corporate entities marketing to cancer patients and their families develop brand loyalty, generate free advertising on the part of women who participate, and discourage questions about the role of chemicals used in consumer products in cancer incidence. Philanthropic events and breast cancer branding aim to legitimize the activities of corporations (many of them major, international conglomerates), while minimizing consumers’ abilities to recognize hazardous products—already a difficult task when most consumers assume that federal agencies are ensuring that chemicals ingredients are safe for customers’ long term use.

PINKWASHING AS SOCIAL INJUSTICE: OBSCURING AN ENVIRONMENTAL HEALTH DISCOURSE

Pinkwashing practices subvert the ongoing environmental health discourse related to breast cancer, marginalizing debates and discussion over the causes of breast cancer in favor of a dialogue focused on “the cure.” The corporate practice of pinkwashing has interfered with the public recognition of environmental causes of breast cancer and creates significant barriers to better health outcomes for women in the United States.

Despite a multitude of independent, peer-reviewed scientific studies that find connections between environmental toxins and increased rates of mammary tumors, pinkwashing frames the scientific effort related to breast cancer in terms of pharmaceutical interventions or treatments that will, one day, cure women with the disease.⁴² One specific way that this occurs is through the corporate

³³Elizabeth W. LaPensee, et al., “Bisphenol A at Low Nanomolar Doses Confers Chemoresistance in Estrogen Receptor- α -Positive and -Negative Breast Cancer Cells.” *Environmental Health Perspectives* 117 (2009), 175–80.

³⁴Barbara Ehrenreich, “Welcome to Cancerland.” *Harper’s* (November 2001), 46.

³⁵The co-optation of the pink ribbon goes deep: the “awareness” ribbons, originally peach, started out as a grassroots campaign to focus on prevention, until Estee Lauder and SELF magazine stepped in with a cause-marketing campaign, and changed the ribbon to a light, feminine pink. For more, read Sandy M. Fernandez. *Breast Cancer Action. History of the Pink Ribbon*.

³⁶Malkan. *Not Just a Pretty Face*.

³⁷CancerNetwork.com, September 2001. <<http://www.cancernetwork.com/display/article/10165/63618>> (Last accessed August 10, 2010).

³⁸Environmental Working Group’s Skin Deep Database search for “AVON ULTRA COLOR RICH LIPSTICK” <http://www.cosmeticsdatabase.com/product/331891/Avon_ULTRA_COLOR_RICH_Lipstick/> (Last Accessed on August 10, 2010).

³⁹Environmental Working Group’s Skin Deep Database. <<http://www.cosmeticsdatabase.com/special/whatnottobuy/>> (Last accessed on February 11, 2011).

⁴⁰Massachusetts Breast Cancer Coalition. *Frequently Asked Questions*. <<http://www.mbcc.org/content.php?id=169>> (Last accessed on February 15, 2011).

⁴¹Avon Foundation. Avon Walks Make a Difference. <http://walk.avonfoundation.org/site/PageServer?pagename=walk_how_spent> (Last accessed on February 15, 2011).

⁴²MA Kettles et al., “Triazine herbicide exposure and breast cancer incidence: An ecological study of Kentucky counties.” *Environmental Health Perspectives* 105 (1997):1222–1227.; M. Munoz-de-Toro et al., “Perinatal exposure to bisphenol-A alters peripubertal mammary gland development in mice,” *Endocrinology* 146 (2005): 4138–4147.; LN Vandenberg et al., “Exposure to environmentally relevant doses of the xenoestrogen bisphenol-A alters development of the fetal mouse mammary gland,” *Endocrinology* 148 (2007): 116–127.; CP Rennix et al., “Risk of breast cancer among enlisted Army women occupationally exposed to volatile organic compounds,” *American Journal of Industrial Medicine* 48 (2005): 157–167.

sponsorship of breast cancer research.⁴³ Avon's capacity to raise millions of dollars for research also allows them to dictate how and where that money is spent. In 2009, less than seven percent of the \$27.6 billion worth of funds disbursed by Avon went to research investigating the causes of breast cancer, environmental or otherwise. Of that seven percent, less than two percent was spent on understanding the environmental causes of the disease.⁴⁴ While allocating funds to care and treatment is hugely important, understanding what causes the disease is clearly essential to eradicating it.

The LOVE/Army of Women campaign launched by Avon and Dr. Susan Love⁴⁵ has gone further to co-opt the term "prevention." As stated on the Web site: "While advances have been made in the diagnosis and treatment of breast cancer, we still don't understand what causes breast cancer or how to prevent it. The Dr. Susan Love Research Foundation is dedicated to getting to where breast cancer begins—in the breast ducts—and is engaged in an extraordinary opportunity to focus research on the anatomy of the breast and breast cancer prevention." One of the new projects of this campaign is "The development of an inexpensive and easy to use band-aid-like test strip that can assess whether a premenopausal woman is at risk of developing breast cancer." LOVE/Avon's "prevention" seems to be far more reliant on determining a woman's predisposition to the disease rather than broadly examining the environmental links to this disease. In fact, the Web site rarely discusses environmental exposures to cancer-causing chemicals—where, one could argue, a large number of breast cancer instances *really* begin.

But environmental links to cancer are getting more attention in the mainstream—for the first time, in its 2008–2009 annual report, the President's Cancer Panel focused on the state of environmental cancer research, and highlighted several impediments to controlling cancer risk. Among them: a lack of emphasis on environmental research as a primary mode of cancer prevention, unequal exposures in some disadvantaged populations, and the complexity of how low doses of certain chemicals can act in our bodies during certain windows of development (e.g., in the womb, in puberty). In a letter preceding the groundbreaking report, the panel urged the president to use the power of his office "to remove carcinogens and other toxins from our food, water, and air that needlessly increase healthy care costs, cripple our Nation's productivity, and devastate American lives."

⁴³In 2007 The Susan G. Komen Foundation reported that it had invested nearly \$1 billion in breast cancer since its founding in 1980.

⁴⁴Avon's 2009 Approved Grants list search for any research project studying the causes of breast cancer, including environmental causes. <http://www.avoncompany.com/women/avonfoundation/2009_grants.pdf> (Last accessed August 10, 2010).

⁴⁵LOVE/Army of Women. <<http://www.armyofwomen.org/>> (Last accessed July 27, 2010).

CO-OPTATION OF WOMEN'S HEALTH ACTIVISM

Races, walks, and fundraisers for the cure encourage participants to focus on a future scenario in which breast cancer becomes just another treatable disease. Women are encouraged to endure while pharmaceutical companies continue to search for medical solutions. What Ehrenreich refers to as "bright-siding"—the cultural compulsion to think optimistically even in the face of great loss or hardship—has muted discussions related to environmental causation. Women are instead encouraged to look on the bright side, to move forward without asking critical questions, which effectively quells the demand for research on causation and prevention. Public events focused on raising funds to "fight" breast cancer, while providing a sense of solidarity and purpose for many women with breast cancer, also effectively silence experiences that fall outside of the "valiant cancer-survivor" model.

The widespread corporate sponsorship of such events has created the mainstream experience of breast cancer, molding public perceptions and experiences of breast cancer into a standard, pre-packaged experience: *Someone you love has breast cancer? Then buy pink, and walk with others who are in the same boat, fighting cancer together. What else can you do?* Questions about disease causation, feelings of anger, frustration, or sadness do not meld with the dominant imagery of women who have conquered—or must be made to feel that they can conquer—the disease. Notably, this mainstream image is effectively a white, middle class model which excludes women of color, who are not only less likely to survive the disease than white women, but who may not connect with the hegemonic model of survivorhood that centers on fundraising walks (some of which require \$1,800 as a baseline for participation), and which are heavily populated by white women.

Thus, women's time, energy, and passion are diverted from efforts to prevent the disease and reduce its occurrence, and instead are focused on raising money (often by spending money on pre-assigned pink ribbon products, and cloaking themselves entirely in pink clothes with corporate logos). Everyone is told to keep their eyes on the prize: the elusive cure. This lost time and money, and more importantly, the physical pain and emotional hardship that families and communities endure with every breast cancer diagnosis is not accounted for or honored when we seek only "the cure."

A NEW WAY FORWARD

The social, medical, and cultural discourse surrounding breast cancer is narrowly defined by the assumption that for some percentage of American women, breast cancer is inevitable, and that raising awareness and searching for a cure are the primary mechanisms by which to overcome this disease. This conception of breast cancer etiology practically renders scientific debate over disease causation obsolete; if the only goal is a cure, then prevention is not important. The dominance of "the cure" paradigm is

further entrenched when corporations market products—some of which contain ingredients linked to cancer—and direct philanthropic activities in the same direction, thereby creating a unilateral understanding of the disease that leaves little room for other endpoints or contrasting viewpoints, including not only prevention, but the discussion of access to awareness-raising events and treatment.

In order to overcome the dominance of this model, scientific, economic, and cultural changes must occur. Advocacy organizations are working to increase funding for prevention, to study the environmental causes of the disease, and to prohibit from everyday products chemicals that are linked to cancer.⁴⁶ Advocates are also asking hard questions about why women of color are less likely to survive the disease, and are challenging the dominant vision of breast cancer “survivorhood” by providing alternative models and support systems that incorporate a multiplicity of disease experiences. Changes in the marketplace can also contribute to dismantling a narrow conception of breast cancer by developing and marketing products that avoid the use of known carcinogens and other toxic chemicals. The insistence by industry-funded scientists that low doses of toxic chemicals pose no hazard, and the current U.S. laws that place the burden of proof on individuals rather than on chemical manufacturers producing the chemicals must come to light, and be changed. Pinkwashing companies or any corporation seeking to market products promoting women’s health have an imperative to protect women’s health by eliminating chemicals and practices linked to harm.

When as many as nine out of ten cases of breast cancer are not genetic, and are not, as the current public dis-

course would lead us to believe, *inevitable*, the majority of research, market ideology, and activist campaigns must shift to preventing women from getting the disease whenever possible, rather than treating women once they have it. Dr. Sandra Steingraber, herself a scientist and cancer survivor, calls on us to take a human rights approach to cancer: we need to recognize that when we continue to allow the manufacture and release of carcinogens into the environment and into our bodies, “some number of vulnerable persons are consigned to death.”⁴⁷ But there is a hopeful message here: when we shift this paradigm and focus on prevention, women benefit, particularly those women who face unequal burdens of environmental exposures in their homes and workplaces. Pinkwashing is problematic in that it displaces public dialogue related to the social and environmental justice implications of disease causation, and suggests that consumer-oriented efforts are adequate in the pursuit of ending breast cancer. In contrast, we would like to suggest that a critical stance on corporate pinkwashing is the first step in addressing ongoing racial disparities in relation to breast cancer and is a necessary element in the effort reduce cancer incidence and mortality rates.

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⁴⁶Advocacy organizations focused on prevention include Breast Cancer Action, Breast Cancer Fund, Campaign for Safe Cosmetics, Massachusetts Breast Cancer Coalition, Safer Chemicals Healthy Families coalition, and others.

⁴⁷Sandra Steingraber. *Living Downstream*, 268.