Excalibur

Everything secret degenerates; nothing is safe that does not show it can bear discussion and publicity

Excalibur, founded in 1966, is the York University weekly and is independent politically. Opinions expressed are the writer's and those unsigned are the responsibility of the editor. Excalibur is a member of Canadian University Press and attempts to be an agent of social change. Printed at Daison's, Excalibur is published by Excalibur

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If the alternatives are bad, we need new alternatives

"All the alternatives are bad," president H. Ian Macdonald told Excalibur in an interview earlier this week.

And he wasn't kidding. Since the board of governors wants a balanced budget next year, Macdonald has ordered the deans of York's faculties to slice \$1.3 million from their programmes this year, and to forego any projects they might have had, to save another \$1 million.

The faculty and staff associations and York's CUPE local are attempting to negotiate salary increases in the neighbourhood of 15 to 20 per cent to stay a jump ahead of the cost of living. The administration, to preserve a balanced budget, says it can't go much above 10.

New projects, like a creative writing degree programme planned for next fall, have been "slowed down", which is a euphemistic way of saying "killed".

Ancillary services, the administrative branch which handles residences, parking and food on campus, has been told to change its annual loss into a \$150,000 profit.

So we can assume residence and parking rates will skyrocket. But then, will it be worth making the trip to get here?

Many faculty members will probably get the axe, and most of those will be untenured and/or on contract. More teachers will take on more courses, while more students squeeze into fewer classes. The quality of education is seriously threatened.

And how is the administration handling this? Macdonald places his hope in a supplementary grant which the provincial government will bestow on York and 14 other Ontario universities. York is hoping for \$1 million; last year it received \$260,000. Figure the chances.

The basic issue, of course, is the Ontario government's dumping of universities from its list of pet projects. Funds are being cut off without thought and without planning.

Closer to home, the funds are

Staff meeting today at 2 p.m.

Voting criteria for new editor selection to be drawn up



tight because the board of governors, which handles York's finances, doesn't want to budget a further deficit.

Students, faculty and staff are caught in a vice while Macdonald repeats worn phrases like "longterm objectives" and "adjusting our horizons".

We have heard these phrases for too long. The oft-promised longterm plan has to be unveiled so that we can see exactly what's happening to university education. If we can't preserve the quality of education without running up a deficit, the board must agree to run

The next step is to organize a unified front, as other universities have, through three-day moratorium and study sessions, and to persuade the government to pick up the deficit and re-consider its entire on-again off-again approach to education in general, and higher learning in particular.

There have been budget crises before, but none with quite the ominous air of the current squeeze. Whether the concept of higher education as we know it will survive in this province depends on how we

And it's becoming increasingly clear that we have to react fast.

Harbinger's column

Questions you should ask about the pill

"Here's a package of pills. Take one a day for three weeks, don't take any for one week, and you'll never get pregnant."

In truth, it is very unlikely that a woman will become pregnant while on the pill; it has a lower failure rate than any other method of birth control except abstinence. Moreover, it is easy to use and does not interfere with sexual activity, factors which help to make it one of the most popular forms of birth control around.

Nonetheless, the pill does have its disadvantages. It is particularly important that a woman realize that in tent experimenting with her own

dications and negative side effects prevent a certain percentage of women from ever taking the pill (although some of the side effects can be eliminated by switching to another brand of pill).

"Women who have or have had thromboembolism, thrombophlebitis, pulmonary embolism, a stroke, retinal thrombosis, sickle-cell anemia (HbSS), severe heart disease or defect, severe endocrine disorder, recurrent jaundice of pregnancy, or any form of cancer, must not take the pill." (Birth Control Handbook, p. 19.) This Handbook contains the most comprehensive summation of literature available on the pill (for a copy, come to Harbinger, 214 Vanier Residence, 667-3509.)

In addition, in a small number of women, taking the pill results in oversuppression of the menstrual cycle. This can generally be stimulated by hormonal therapy, but in the interests of security even Ortho, the largest birth control pharmaceutical company in North America, recommends that women discontinue use of the pill for a few months after two or two and a half years to

taking the pill she is to a certain ex- give their menstrual cycles a chance to re-establish themselves.

In terms of how to use the pill, There is simply no concrete infor-several of the major drug companies mation on the long term effects of have come out with new low-dosage taking the pill. Moreover, contrain- pills in the past couple of months. These pills have only from 30 to 35 micrograms of estrogen in each pill (as opposed to the 50 to 100 micrograms of estrogen in all the previous pills on the market.)

Although these new pills have a sufficient quantity of estrogen to suppress ovulation (the primary reason for the effectiveness of the pill in preventing conception), they can only do so if taken at exactly the same time every day. (It was generally possible to forget the other pills for a few hours or even a day without getting pregnant; these you

There are presently four lowdosage pills on the market in Canada: ModaCon, Minovral, Loestrin, and Logest 1.5/30. Finally, no pill can assure protection during the first month of use or if its use is accompanied by breakthrough bleeding.

The morning-after-pill, an oral contraceptive taken within 48 hours of unprotected intercourse, is no longer generally available due to the high incidence of vaginal cancer in female offspring of women who have taken the drug.

Finally, it is important to know what kind of medical care to expect (and if necessary, demand) while on the pill. Never go on the pill without having an internal examination and a thorough medical history; while on it, have an annual check-up, including an internal examination and Pap smear.

In addition, ask questions about the pill; you should especially know the brand of pill you are taking and the quantity and potency of both the estrogen and progesterone on it.

EMERGENCY HOURS

Harbinger now has staff on call from 6 pm to 10 am Monday through Friday, and on weekends. Staff can be reached through York Emergency at these times (667-3333).

MEN'S GROUP

Harbinger is sponsoring a group for men only, to enable them to get together every week and to discuss anything related to being a man. The eventual goal of the group is to help everyone in the group to become more aware of themselves as men, and to publish a book by and for men relating to the problems of men and their roles.

The first groups will tentatively meet Wednesdays at 2 p.m. in Founders room 118, and the second. Thursday at 7 p.m. in Founders room 119. Any questions should be directed to Harbinger (667-3509).

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