

To our health!

by Dr. Angela Hallett

Four years ago, four Dalhousie medical students organized the Dalhousie Women, Health and Medicine Committee. The dictionary definition of WHAM as "the sound of a forcible impact" brings the acronym amazingly close to onomatopoeia. That forcible impact was inevitable, given that the group is the first of its kind at Dalhousie and a rarity, indeed, at any medical school.

WHAM's members, women and men from medicine, health professions, and other faculties, are interested in the concerns of women as both providers and consumers of health care. The members view health as much more than disease, diagnoses, investigations, and therapies. Health includes social, emotional, psychological, and political aspects of well-being, not merely the absence of infirmity. To supplement the medical school's curriculum concentrating on 'objective' and technical medical care, WHAM has organ-

ized an extracurricular educational program on women's health issues.

Numerous lunchtime and evening series of films and/or speakers have addressed topics including: wife battering, sexual assault, sexual abuse of children, menopause, pre-menstrual syndrome, breast cancer, poverty, the housing crisis, disabled women, reproductive technology, DES, and health care in Nicaragua, China, and South Africa.

WHAM also maintains a small resource centre in accommodation provided by the Dalhousie Medical Students' Society, which houses books, journals, and resource files. This has proven useful for students doing research projects, electives, or research for topics of personal interest. WHAM also published a newsletter as another forum to disseminate information on women's health issues.

WHAM belongs to several national and provincial women's organizations. They are as follows: National Action Commit-

tee on the Status of Women (NAC), Women's Health Education Network of Nova Scotia (WHEN), Canadian Abortion Rights Action League (CARAL), New Brunswick Women's Network (NBWN), Midwifery Coalition of Nova Scotia, and the Women's Action Coalition of Nova Scotia (WAC).

The inception and the growth of WHAM is exciting because of its novelty and success in its supportive role for students, its

broad educational objectives, and its liaison with community groups. Members would be pleased to hear from other people interested in women's health issues and are willing to share ideas, resources, and strategies for change.

For more information, write to Women, Health, and Medicine, Box 2, Sir Charles Tupper Medical Building, Dalhousie University, Halifax, Nova Scotia, B3H 4H7.

an object, as exemplified by the ad which introduces "A new way to wrap your package". These ads turn a woman into a thing, which is the first step in justifying violence against that thing. Violence is the chilling, logical conclusion of this objectification. The ads are trivial but the stakes are high. And the message is clear: conform or lose out.

Older women are rarely used in ads. When they are present, their image is distorted. The "busybody" is a typical stereotype perpetuated. Also, advertisers create a double standard for older women and men. As a woman stated in one ad, "On men, grey hair is distinguished. On me, it's just plain old."

In advertising we find contempt for women and all things female. The devaluation of compassion, cooperation, passion, and sensitivity leads to women devaluing themselves. The denial of our true selves and striving for the unattainable ideal creates anxiety, but advertisers offer the solution — shopping! Through advertising, we are taught to be consumers. We learn that happiness can be bought, and there are easy solutions; products can fulfill us and meet our needs. Advertising doesn't deal with our real problems and it doesn't offer real solutions. Unfortunately, until society's priorities change, advertising won't.

Ad sexism and stir

by Dalhousie Women and the Law

The *Naked Truth* is a slide presentation by Jean Kilbourne on the portrayal of women in advertising. In the '60s, Kilbourne became involved in the women's movement, doing research on sex role stereotyping in the media. In 1970 she began collecting advertisements, and created the first version of *The Naked Truth*, which she now presents internationally.

Advertising is the foundation of the mass media. It sells us values and images, a sense of nor-

malcy. But does it reflect the true attitudes of society? In advertising, 80 per cent of the women are under thirty. They are, predominantly, young, white, and able-bodied. How accurately does this reflect the truth about women?

Advertisers surround us with the ideal of female beauty. Young and professionally made-up, the models in these air-brushed photos have no blemishes, freckles, or unwanted hair. Flawless, the ideal is unattainable. When women are judged against this artificial standard, failure is inevitable. In all forms of advertising, the message comes across again — "you won't do the way you are".

A woman's face is seen as unattractive unless covered with makeup. And her body becomes

that would provide a full range of health services: from birth control counselling to breastfeeding classes, from standard medical check-ups to safe abortions.

Woman are moral, caring beings fully capable of making decisions, especially difficult ones, that are right for us.

The freedom to choose the option that is right for you when faced with an unplanned, unwanted pregnancy is not something you can take for granted.

Women who choose to have an abortion are our sisters, our friends, our mothers and our daughters.

Now is the time to stand up and be counted on the issue of abortion. Equality means dignity. And dignity means choice.

Choose pro-choice

by Amanda Le Rougetel

The Supreme Court decision of January 28th that struck down section 251 of the Criminal Code as unconstitutional is a tremendous victory for the women of Canada.

In handing down their decision, the Supreme Court Justices in effect echoed what pro-choice supporters have been saying for years: it is a woman's right to choose abortion, and the Canadian health care system must not obstruct a woman's access to safe, legal abortion.

"Forcing a woman, by threat of criminal action, to carry a fetus to term unless she meets certain criteria unrelated to her priorities and aspirations is a profound interference with a woman's body and thus an infringement of security of the person," wrote Chief Justice B. Dickson and Mr. Justice A. Lamer.

Madame Justice Bertha Wilson wrote, "The decision whether or not to terminate a pregnancy is essentially a moral decision and in a free and democratic society the conscience of the individual must be paramount to that of the state."

So the Justices have spoken. With their decision, women have been given constitutional guarantees of access to abortion.

But the politicians have yet to speak. The Mulroney government and every provincial government in the land has yet to come to grips with the situation.

Mulroney and his ministers are talking about bringing in legislation to limit access to abortion. These (mostly) men seem to think it is essential to legislate that abortions be performed only up to (maybe) 16 weeks. It should be noted that standard Canadian medical practice for the past 20 years has limited the provision of abortion to the first to trimesters. Less than one half of one per cent of abortions were ever performed after 20 weeks, and these were for three reasons: grave fetal deformity, life-threatening pregnancy, and unavailability of early abortions.

The introduction of a federally legislated cut-off date would create grave problems in cases of fetal deformity and life-threatening pregnancies. It would not improve access to abortions for groups such as poor women and inexperienced teenagers.

The abortion rate can be effectively lowered only by providing widely accessible and free birth control information and safe contraceptive devices.

In Nova Scotia, Buchanan and his ministers have stated they will not permit MSI to cover abortions performed outside of hospitals. What is so all-important about hospitals that abortions must only be performed there? The Canadian Abortion Rights Action League supports the establishment of women's health clinics in communities around the province

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