Excalibur

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

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 Publications.

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Fear and loathing in the food committee

Whichever side one happened to be on, Monday's meeting of the food services committee in Bethune could have elicited only disgust and amazement.

Disgust, because there seemed to be a definite plot to unseat member John Montgomerie from his post as chairman of the food service body's finance sub-committee. And amazement that the plot succeeded despite its overwhelming inconsistencies.

Why, for instance, did Michael Hennessy, the acting chairman of the committee, openly participate in what amounted to an attack on Montgomerie, sharing the chair with Peter Charness, who also joined in the attack?

Why was Hennessy allowed to take the chair in the first place, when his view was obviously prejudiced? And did this account

Whichever side one happened to for the fact that he failed to conduct a proper enquiry?

Take the fact that one member supposedly left a message with Montgomerie's answering service, when that machine had not been working since July.

Hennessy wasn't interested in looking at a repair shop receipt Montgomerie offered as evidence. He blithely left numerous points unresolved. And he insisted that the committee move on to "more important business" instead of spending time arguing the case, as though the verdict had already been decided.

Why was a new chairman for the sub-committee chosen a mere minute after the dismissal of the old chairman, with only one person's name up for nomination? Quite a coincidence that this same person, Ken Lindsay, had been practically

offered the job by the executive subcommittee long before Montgomerie had resigned or been dismissed — before, in fact, Montgomerie had been given any chance to defend himself.

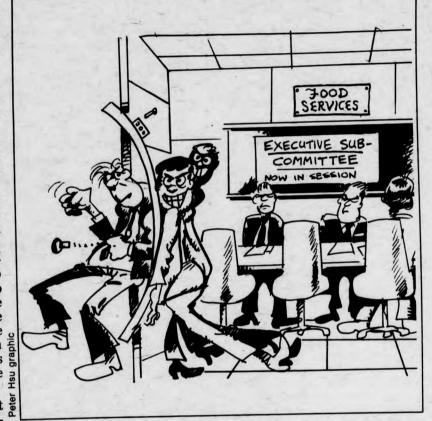
One charge against Montgomerie was that he failed to turn in a written financial report. Montgomerie claimed that he had indeed turned it in to committee chairman Peter Jarvis, who had allegedly passed the report off as his own.

Since Jarvis was not present at the meeting, why did the committee not postpone its decision until Jarvis' evidence could be heard?

The main point against Montgomerie was his failure to turn up for five meetings. How odd that no separate minutes exist for those meetings, and that the single document reporting on those sessions deals with the Johnston food report — a report which was only made available in time for the fifth meeting!

One might almost assume that those executive members interested in ousting Montgomerie had engineered a series of impromptu meetings with the express intention that Montgomerie wouldn't be informed of them until the last minute, or (in one case) until after they had taken place.

All these points were raised at the meeting. None was explained satisfactorily. And yet eight of the 14 members present, aware that the



"As long as Montgomerie isn't here, we might as well get on with the meeting . . ."

case against Montgomerie was highly suspect, voted to oust him.

A body which takes as its rule of thumb the belief that one of its own members is guilty before proven innocent is to be seriously questioned as a responsible body.

We urge the members of the committee to conduct a thorough investigation into the handling by the executive of the whole affair, and, if the study turns up evidence of a fabricated case against Montgomerie, to fire immediately those responsible from the committee.

Committee must fight status quo food report

What the hell is going on?

On the one hand, the university is making preparations for a complete shake-up of food services on campus, and is asking for tenders from caterers interested in taking the spot now filled by Versafood. Questionnaires have been circulated to all students, asking them exactly what kind of food service operation they want.

On the other hand, all the while, a consulting firm has been working under the administration's commission, studying the food situation on campus.

Not whether it would be feasible to bring in competing operators to improve quality and costs.

Not whether there are viable alternatives to the present system.

But simply, to study how Versa works. And, according to an introduction to the report by Harry Knox, assistant vice president in charge of business operations, to seek "a method of having the caterer make improvements".

split between the statu of the admir. 'ratio committee's drive to whole campus system. What happens in the caterer make improvements.''

Does this sound like the sort of action a university would take if it were actively seeking an alternative to Versa?

Far from it. It sounds more like a move made in the assumption that Versa will continue to operate at York in 1975-76.

No wonder the food services committee has reacted with outrage and shock, and demanded the right to draft its own feasibility studies for alternatives to the current system. No wonder it has demanded an extension of the January 31 deadline imposed by ancillary services on any proposals the committee wants to make.

In the past, the food services committee has been called a mere rubber stamp, coming up with ideas which have already been decided upon months before by the ancillary services office.

Now, there seems to be a definite split between the status quo report of the admir. 'ration, and the committee's drive to revamp the whole campus system

What happens in the next few weeks will show us exactly how much weight the students' food committee has when it comes to really crucial decisions concerning the food made available at York University.

Harbinger's column

A guide to venereal disease

This column is a weekly series written by the staff of Harbinger Community Services on a variety of issues, including drugs, birth control, health care, abortion and related topics. Because of limited space, these columns will be able to provide only the most basic information on each subject; requests for further information should be directed to the Harbinger office (214 Vanier Residence, 667-3509/3632), as should suggestions of topics you would like to see covered in this column.

Venereal disease is a term encompassing a variety of sexually transmitted infections, the most common of which are gonorrhea and syphilis. Any discharges, ulcers or lumps in the genital area are symptoms of VD in people who have had sexual contact (including but not restricted to sexual intercourse). Both heterosexuals and homosexuals can contact VD.

If a sexual contact develops VD, it is important to be tested even if no symptoms occur. This is especially true for women, who frequently exhibit no early symptoms of VD. In addition, the symptoms they do show can often be mistaken for vaginal or urinary infection, such as monilias, trichomonias, or cystitis. General symptoms for VD include discharge from the vagina, penis or rectum; pain on urination; unusual bumps, warts or blisters in the genital area, which may or may not be painful; and a general discomfort in the genital area.

If you think you have VD, contact a doctor or a VD clinic immediately (Harbinger has lists of these); also, tell your sexual contact(s) so that they can seek treatment if necessary.

SYMPTOMS

Of the two, gonorrhea is the more common, syphilis the more serious. Syphilis is more serious because the infection can invade any of the body's vital organs and cause irreversible damage, while gonorrhea is largely centralized in the reproductive system. Symptoms of gonorrhea for males include a burning sensation during

urination, and a discharge of pus. Women may or may not exhibit these early symptoms, and the disease may go unnoticed until the infection invades the Fallopian tubes and causes a painful disease of the pelvic organs. If untreated, gonorrhea may result in sterility, particularly for women.

THREE STAGES

Syphilis shows different symptoms in each of its three stages. In primary syphilis, a small open sore or chancre develops in the genitalia. This chancre is painless, highly infectious, and, in females, often invisible. It can heal without treatment, but the infection remains in the bloodstream.

This is the secondary stage of syphilis, where symptoms include a variety of skin rashes (especially on the hands and feet), a sore throat, and a fever. These symptoms may last a year or two, then disappear, leaving the infection in the blood stream and internal organs. Tertiary syphilis involves the damage to any of the internal organs. Brain infection may result in mental illness; spinal cord damage may result in crippling. Blindness, heart disease, and premature death may also occur.

DIAGNOSIS

Gonorrhea is detected by a physical examination and a microscopic and bacterial examination of the pus; syphilis is diagnosed by a physical examination, microscopic examination of fluid from the chancre, and a blood test. The blood test usually does not indicate the presence of syphilis until three to six weeks after the initial appearance of the sore.

TREATMENT

Gonorrhea is treated by penicilin, tetracycline, sulta drugs, or antibiotics. Syphilis is treated with massive doses of penicillin or antibiotics. Damage to organs in tertiary syphilis cannot be reversed by treatment.

For lists of VD clinics, as well as information on venereal diseases and vaginal and urinary infections, contact Harbinger.

Excalibur still needs reporters and photographers. Meeting for all staff today at 2 p.m. in Central Square

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