

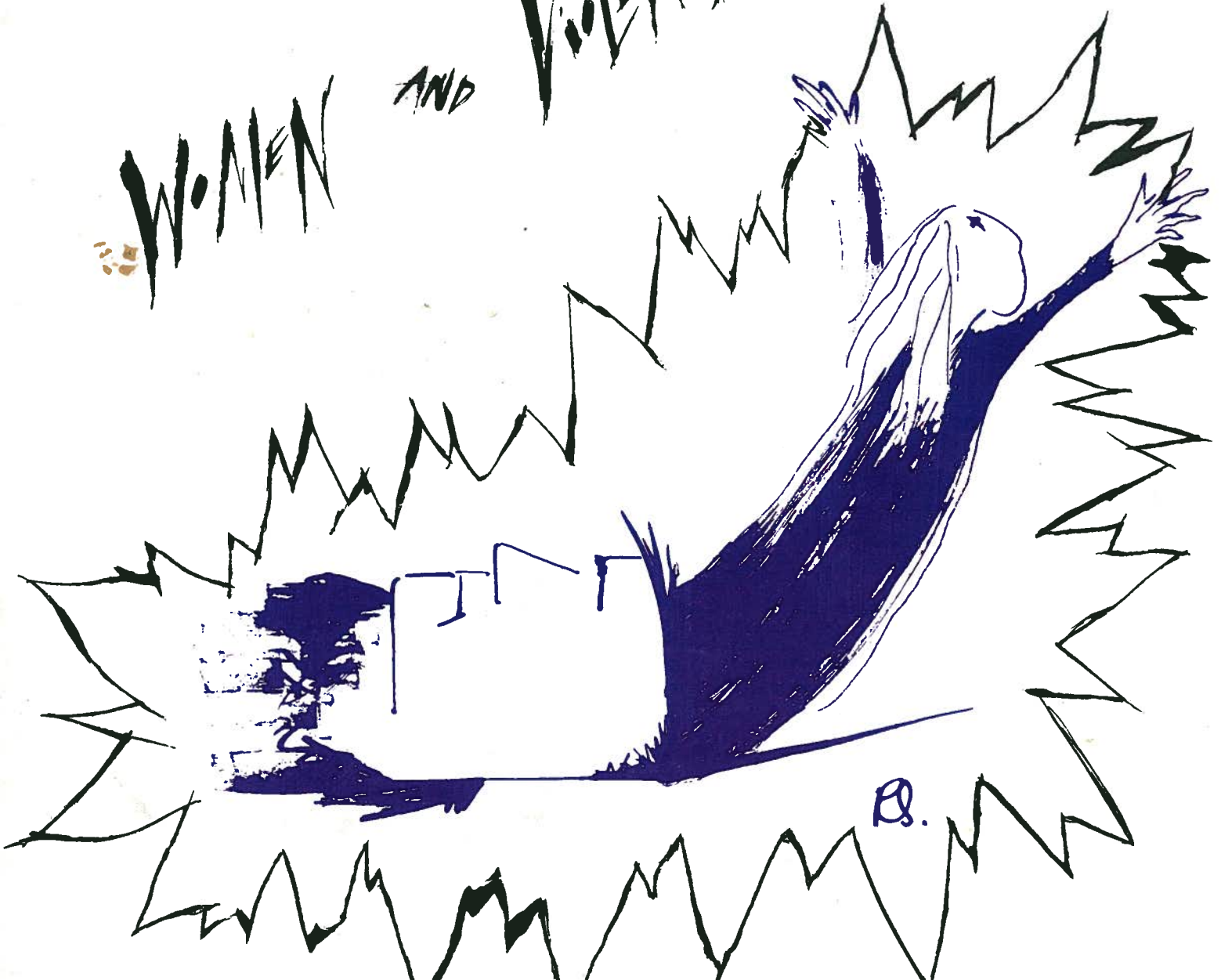
Summer, 1984

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Healthsharing

A CANADIAN WOMEN'S HEALTH QUARTERLY

WOMEN AND VIOLENCE



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COLLECTIVE NOTES

The Healthsharing collective sat in front of a blazing fire, the remnants of lunch strewn around us, talking. We talked about violence all that afternoon, disregarding our agenda and all we had to accomplish. Mostly we spoke personally—how we feel about the threat of violence, how we live with our fear and anger. We shared gut-level fantasies about defending personal safety and worlds in which women are safe.

It was a good old-fashioned group consciousness-raising session, something feminists so seldom do anymore. As happens whenever we take the time to touch, we felt stronger, supported, loved. By better understanding the tools we have to withstand violence—some by virtue of individual traits and skills, many by virtue of our social privilege as middle-class white women—we felt better able to fight against violence.

We talked about all kinds of violence—nuclear buildup, unhealthy work, subsistence wages, medical treatments and other abuses of the medical structure. But mostly we talked about physical and sexual violence and their threat. In our lives, these emerged as the most direct, omni-present forms of violence. They are random and certain, something which can happen to any woman and will happen to some women. All women live with this knowledge and the fear that it generates, but responses differ. Our's follow:

- *I don't want fear and anger as part of my daily life, so I put on blinders. I take incredible risks as a way of pretending it's not there.*
- *I too have an unrealistic sense of my own power, particularly verbally. I have this myth that I could just talk my way out of any danger.*
- *I want to know; I want to be aware. But it's too devastating. Half an hour of reading the paper and I'm in tears. People say I take it too personally, but who cannot take it personally?*
- *The fear for me is almost a constant—so is the anger, and I like the anger. It gives me energy and strength. Sometimes the anger gets too overwhelming and then I fear the anger itself, that it will change me or destroy me. But generally I like, I need, the anger.*

Each collective member had experienced strength that derived from fighting back. We'd known it through the stomping and shouting of take back the night marches; we'd known it on picket lines and demonstrations. We felt sure that direct action aimed at individuals—pickets outside a harasser's workplace, posters identifying rapists—could bring the same sense of power. While all of us supported such activities in the abstract, as a group we remained uncomfortable about doing them. We feared personal repercussions; we feared the State and its machinery.

Once again, we are silenced by our fear, left with the question, when will the day come when we are ready to take these risks? What will precipitate us beyond fear and into action?

We fantasized about a world without violence, a world where women never doubt their safety. Our fantasies contained a frightening imagery of using violence—or more often a threat of violence—to secure us from attack. The violence in our fantasies, stemming from our fear, contrasted markedly to the actions and strategies we employ in real life.

- *I fantasize about being able to walk down the street completely free of fear. To do that I carry a machine gun.*
- *I imagine myself as the world's ace switch blade artist so skilled I never actually use it. Nobody would dare come near me.*
- *I fantasize about exuding a sense of confidence and power, projecting an inner strength that creates a sort of shield of protection."*
- *Me. I fantasize about being able to make myself invisible.*

Our fantasies raised challenging questions. Can we eliminate violence without resorting to violence? None of us has answers; each of us has different contradictions with which we will continue to grapple.

- *At my most idealistic, I fantasize we will simply be heard and understood and that will be enough to effect total change. As a back-up, I dream that women can take to arms without becoming men, that we can direct violence, with clarity and vision, maintaining our ideals and politics intact. Finally, as a last resort, I imagine we can painlessly and humanely exterminate men and start again.*
- *For me, the new world would come through social pressure on a mass scale—friends and family turning against a family member who is misogynist or violent, instead of protecting him and rationalizing his conduct.*
- *A new land will spring up, an island, a community of women, a place of safety and love...a new Atlantis.*

Betty Burcher
Connie Clement

Diane Majury
Lisa McCaskell

Jo-Ann Minden
Julie Wheelwright

Healthsharing

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Super Tampons Still Risky

TORONTO—A Vancouver doctor who conducted Canada's first major study of Toxic Shock Syndrome (TSS) says he's concerned cases of TSS may not be properly recognized or treated. Dr. Anthony Chow of Vancouver General Hospital's Division of Infectious Disease says that since there is no specific lab test for TSS, doctors must rely on an analysis of a patient's symptoms. This is a difficult task because the symptoms of TSS cover a broad spectrum and are easily misinterpreted.

Dr. Chow studied thirty TSS patients in the Vancouver area over a period of three years. Despite the common association of TSS with the use of tampons, fifteen of the thirty cases were not related to menstruation. In the past about ninety percent of TSS cases were menstrually related, but Dr. Chow says the figure is now more like sixty percent. He attributes the dramatic drop to the fact that women are more familiar with the disease, saying he thinks they're staying away from super tampons and are more conscientious about personal hygiene during menstruation. Also, more non-menstrual cases are being discovered as doctors become more adept at recognizing TSS.

The fifteen non-menstrual patients in the Vancouver study included five women who had just given birth (two by caesarean), one newborn baby whose mother had an infection of the amniotic sac, one patient with vaginitis following the insertion of a diaphragm, six patients who had recently undergone surgery, and two with skin infections. Three of the fifteen non-menstrual TSS patients were men, a figure just under the average of cases reported in males. Ten of the fifteen cases developed while the patients were in hospital, but Dr. Chow says that doesn't necessarily mean the hospital was the source of the disease. It



Drawing by Karen Sjöholm CPF

Another Myth Exposed

PHILADELPHIA — A woman over 35 who decides to become pregnant is taking a big risk, right?

Wrong.

A Philadelphia nurse has recently written a thesis that should hit the medical establishment like a tornado of fresh air. "The idea of the high-risk pregnancy for women over 35 is a myth, and probably was all along", charges Phyllis Kernoff Mansfield, PhD., an assistant nursing professor at Pennsylvania State College in a recent issue of the *American Spring Magazine*.

Her thesis, *Advanced Maternal Age and Pregnancy Outcome: A Critical Appraisal of the Scientific Literature*, says the real problem for expectant mothers over 35 is not their age but the low-quality of current research and many obstetrician's low expectations.

Age 35 was chosen arbitrarily at a 1958 council of obstetrician-gynecologists to identify high-risk patients, even though no consistent studies supported this conclusion. After 1958, the council conducted research in hospital clinics, where many of the women patients were low

could be that the patients' resistance levels were down and they were more susceptible to the *Staphylococcus aureus* infection usually associated with TSS.

Of the fifteen TSS cases associated with menstruation, twelve women used regular tampons and three used super. The brands used included Playtex and Tampax. None of the fifteen women used oral contraceptives. Their ages ranged from sixteen to forty-seven with an average of twenty-nine.

Two of the thirty patients died during the study, one on the twentieth day of illness (menstrually-related), and the other on the sixth day (following surgery).

Nine patients reported long-term effects, including hair and nail loss, memory impairment, inability to perform calculations, and poor concentration. Dr. Chow says the complications didn't surprise him because other studies had reported similar findings. He was surprised by the severity of the cases

income, poorly educated and received little or no prenatal care. Just as they had predicted, many patients had pregnancy complications.

But one of the few significant, properly controlled studies revealed opposite results. All 23 "elderly" women delivered normal, healthy babies.

Even when it comes to Down's syndrome, there are still many unanswered questions. Ernest B. Hood, M.D., a leading genetic researcher says: "Relatively little is understood about the underlying causes of Down's syndrome. At this point it appears there are two distinct types of Down's syndrome: One is related to maternal age, the other is not." Hood says he objects to an abrupt age-35 boundary for the risk of Down's syndrome.

Mansfield also criticizes the expectations many obstetricians have of older mothers. Christiane Northrup, M.D., an obstetrician and gynecologist who is also a delayed motherhood parent, says "Obstetricians know that an older woman has fewer child-bearing years ahead of her. They don't want to take extra risk with the delivery and worry about a possible malpractice suit."

She says the high rate of caesarian sections for women over 35 is a "cop-out", because older women are more capable of delivering vaginally than younger women. Adds Northrup: "There is no reason why a woman 35 years or older who is healthy and fit should be any more at risk for having a baby than a woman who is 20 or 25."

and their distressing effects on the patients.

Dr. Chow is continuing his study of TSS, concentrating on its causes and its prevention. He would like to see more accurate reporting of TSS cases. Doctors are currently not required to report incidents of TSS among their patients, and many cases may still be going undiagnosed. With over half of the known Canadian cases having occurred since 1981, TSS does seem to be increasing. **By Sue Ridout**

Students Expose DES Doctor

TORONTO — Members of the Ryerson Polytechnical Institute's Women's Centre are learning to pronounce diethylstilbestrol (DES) without stumbling. They are also learning how to use "guerilla tactics". That's what the Ryerson administration is calling their efforts to stop a campus doctor from prescribing DES as a morning-after pill.

DES is the drug that was widely used between 1941 and 1971 to ineffectively prevent miscarriages. DES caused various medical problems for some of the children whose mothers took the drug. Its use during pregnancy was banned in 1971.

Toronto's birth control clinics do not use DES because of its side effects. The federal government's Health Protection Branch has warned physi-

cians against prescribing the drug as a morning-after pill.

But Ryerson's Dr. Donald Barr likes to use DES. His reasons were broadcast by CBC on April 4. "I have another little quirk. Most women who take it are quite nauseated on it, in fact, some go to vomiting. That, to me, helps drive the lesson home that responsible contraception is preferable to an easy morning after." Similar comments have been made to the campus media.

The Women's Centre has registered a complaint with the Ontario College of Physicians and Surgeons, is currently circulating petitions and has met with the Ryerson administration about DES. The women have won a small victory. Dr. Barr will not prescribe any morning-after pills until he conducts a

review of the medical research. Ryerson women will now be referred to city birth control clinics. The Ryerson women thought that Dr. Barr might have read the research before prescribing DES.

"But the fight is far from over," say the Ryerson Women's Centre Collective. "Dr. Barr's attitudes are judgemental, moralistic and unacceptable. These attitudes drive the lesson home that women at Ryerson do not receive adequate health care."

The collective needs help with this issue. Address complaints to the College of Physicians and Surgeons of Ontario, 80 College Street, Toronto M5G 2E2. And send a copy to: The Ryerson's Women's Centre, c/o SURPI, 380 Victoria Street, Toronto M5B 1W7.

For more information on this issue contact Women's Issues director Kelle Dunlop at 597-0723.

Survival

VANCOUVER — Despite the provincial government's move in September 1983 to completely cut its funding, the Vancouver Women's Health Collective is alive and well, surviving on donations from friends in the community.

The Health Collective resource centre continues to provide women with information and support around health issues. Volunteer training sessions for women who want to staff phones and greet women when they drop in to the Collective are ongoing. Other groups of highly-competent, trained volunteers fit diaphragms and cervical caps and have recently begun teaching the ovulation method of fertility awareness.

Sudden cuts in the number of paid staff at the Health Collective (from seven to zero) put a lot of work, particularly public education, on hold and a major portion of the available womanpower began training volunteers and reorganizing the collective. But now that things are running more smoothly, women at the Health Collective are beginning to respond to more requests for public speaking and group facilitation.

In January, the Women's Health Collective received a substantial grant from the Federal Health Promotion Directorate to develop resource materials and present a series of workshops

Although this grant will allow a few Health Collective members to continue their paid educational work, and will provide women in isolated communities with much-needed health information and contact, it is temporary and does not provide core funding for the Health Collective

The Health Collective is continuing its fundraising and is currently seeking other funding sources to continue the centre's operation. For more information, write or call the Vancouver Women's Health Collective at 1501 West Broadway, Vancouver, V6J 1W6, (604) 736-6696.

By Lorna Zaback

Halifax Unites

HALIFAX — There is an aura of optimism about the women's movement in Nova Scotia. Despite the usual obstacles, the long years of hard work and patient nurturing on the part of Nova Scotia's women's groups are beginning to pay off.

Not only has a women's network developed to support and inspire each other's efforts, but significant grassroots advances are being made throughout the province. These efforts are assuming a bi-level approach to women's needs which are aimed at prevention (education, information sharing, skill development, counselling, political action) and crisis intervention.

While the prevention work strengthens women individually and collectively and accumulates need data, it also serves to educate the public. These efforts, along with widespread media coverage of several recent Nova Scotian court cases

involving incest, child abuse leading to murder, sexual assault, and the murder of a man by his battered common law partner, have raised the public's consciousness concerning these issues. Public awareness means support for women's concerns. As a result, new crisis intervention services are currently being developed in communities previously not served.

In the Lunenburg/Queens area, a new HELP line has been established with trained volunteers. Currently three transition houses for battered women are in the works, joining Sydney Transition House and Halifax Byrny House. A home proposed by South West Nova Transition House Association for the Yarmouth area would serve Digby, Yarmouth, and Shelburne counties and follows a two year needs survey by the group. Better Environment Kare Association will open a home in Bridgetown serving Annapolis, Kings and Hants counties in June. The Tearmann Society for Battered Women is very close to its goal for a home to serve the Pictou-Antigonish-Guysborough area.

One in Ten: Women and Violence — Working Towards Solutions, the annual conference of the Women's Health Education Network (WHEN) is an accurate reflection of the concerns and efforts of Nova Scotia's women. It will support on-going work and undoubtedly inspire women in areas where their needs are not being served.



Women Celebrate our Culture

ST. JOHN'S — As part of International Women's Day, the Newfoundland Status of Women Council organized a three-day festival to celebrate and promote the value of women's culture and to increase awareness of women's experience globally.

More than 200 women from all parts of Newfoundland and Labrador attended the first provincial Woman's Festival. It opened with a Women's Art Show, which displayed 40 works by women artists from around the province. Films, videos and 12 workshops (open to women

only) produced a high level of information sharing. Some workshops generated so much interest that discussion continued long past the allotted time.

The workshops covered topics as diverse as Women's Action in the Province, Women at Work, Women and Peace, Women in Revolution, Midwifery, The Cervical Cap and Menopause: A Natural Process.

The relatively small groups in each workshop (20 or 30) allowed women to speak frankly and openly with one another. Rural and urban, older and younger women exchanged in-

sights and knowledge. The commonality of women's experience was evident as friendships blossomed and new bonds were formed.

The women's artistic community produced three nights of public performances. Song, dance, theatre and poetry offered more than mere entertainment, and the Festival was the occasion for several premiere performances.

The atmosphere, created by the women participants and facilitators alike, was a positive, energizing and stimulating one. Women returned to their daily responsibilities not only enriched, but vowing to create an annual festival in celebration of women.

By Pamela Hodgson

Burning Times

EVERETT, WASHINGTON — An arsonist struck the Feminist Women's Health Center in this city for the second time on March 26 and local activists are outraged at this attempt to close their clinic.

The first fire occurred on December 3, 1983 and the two incidents have cost the centre \$50,000 in damages, not including two months of revenue lost while the Center was closed for repairs. Insurance costs for the Center have also tripled and organizers are seeking \$5000 for an injunction against their anti-choice harassers in Everett.

The Center provides access to safe, legal, and low-cost abortions for women in their own communities.

In addition to the two fires, attacks by local anti-choice groups have included several hundred abusive phone calls, threats on staff members' lives, picketing of the facility and abuse of clients entering or leaving the Center.

"We are appalled that there have been no arrests, even after months of investigation," reads a statement from the Center's defense committee. "We demand immediate 24-hour protection of the clinic facilities, staff, and clients. We demand that the Everett City Council, Mayor William Moore, and the police and fire officials lend their voices in condemnation of these terrorist attacks. Finally, we demand that the Everett City Council hold a special hearing on anti-choice violence."

The Center is seeking funds to support their fight and donations can be sent to: The Everett Feminist Women's Health Center, 1712 Pacific Avenue, Everett, Washington, 98201.

care will be blocked by the Act."

The Group also calls on all doctors who reject the National Citizen's Coalition's position to dissociate themselves from the OMA's endorsements.

WAP Wraps Committee

VICTORIA — The local Women Against Pornography group recently submitted two briefs to the Fraser Commission on Pornography and Prostitution.

Their briefs to the Royal Commission included the results of WAP's interview survey with a number of Victoria's adult female prostitutes. The information was submitted to ensure that the prostitute's views and opinions would be represented at the Commission hearings.

The briefs are available from WAP, Box 2363, Sidney, B.C. V8L 3Y3. The prostitution brief is \$6 and the pornography brief, \$10.

WAP also organized a Women Take Over the Night march in Victoria on March 30. Women walked the streets of downtown Victoria chanting slogans — "No more violence", "End the silence", "Red Hot keeps women down", and "Red Hot get out of town" — and waving lit sparklers. Many wom-

en dressed in costumes depicting their favourite stereotypes. One woman came in a gorilla suit carrying a submachine gun (urban gorilla) and a coven of witches was also represented.

By Susan Moger

OMA Blunders

TORONTO — The Ontario Medical Association, the voice of the province's medical profession, has recently aligned itself with the National Citizen's Coalition against the Canada Health Act.

The Citizen's Coalition has mounted a campaign against the act which the OMA has formally endorsed.

But fortunately, a group of doctors who support the Canada Health Act and oppose further erosion of medicare have criticized the OMA's endorsement of the National Citizen's Coalition. The Group recently charged in a press release that the Coalition has mounted "a misleading and irresponsible campaign against the Act. In particular the elderly, those with chronic illness and those with acute symptoms have been intimidated by home delivery of pamphlets and newspaper ads suggesting that their access to

Centre fights Crimes

MONTREAL — A booklet recently released by a Montreal women's centre reflects their basic approach to the problem of violence against women: Women must learn how to de-victimize themselves.

On apprend à être victime... on peut le désapprendre is for women who want to learn how to stop seeing themselves as and acting like victims. The English version, *Victimization: Unlearning the Lesson* will be available this summer.

The YWCA-based La Riposte des Femmes was set up in October 1982 to provide counselling for women who have been sexually assaulted or subjected to other forms of violence. Women who come to the centre can meet privately with a counsellor or participate in group discussion.

The centre's address is: La Riposte des Femmes, Montreal YWCA, 1355 Dorchester West, Montreal, Quebec H3G 1T3.

By Susan O'Donnell

BCMA Revokes Gynecologist's Licence after Sex Assault

VANCOUVER — A Vancouver gynecologist recently had his licence to practice indefinitely suspended by the B.C. College of Physicians and Surgeons for sexually assaulting four of his female patients.

Dr. John Wakeford's license was suspended February 17, 1984 after an inquiry by the College. Although these investigations are usually carried out in complete secrecy, the story was leaked to the local press, and made public. Since then, local women's groups have discovered that Wakeford is only one of at least nine doctors who have been disciplined for similar actions by the college since 1976. Some are still practicing in the province.

The College of Physicians and Surgeons whose members are doctors practising in B.C., is deemed a self-governing body by the provincial government and, as such, wants to make its own rules. Some College members, including registrar Dr. John Hutchison, say it is doing an admirable job of governing British Columbia's doctors, taking disciplinary action where necessary, and see no reason for the public to be involved or informed. One lay individual sits on the College's board of inquiry.

Other doctors say the College should be more publicly accountable; its power has been delegated by the legislature which, in turn, has been delegated by the B.C. public.

As the debate rages on, where does it leave us, as women? It is imperative that we are protected from doctors who would sexually assault us as a form of "treatment". Solutions that have been suggested could very well prove inadequate, given that we live in a society where the "justice" system works repeatedly in favour of those with money and power and where the interests of women are rarely taken seriously.

For example, the College wants the B.C. government to appoint another lay person to

their board of inquirers, with the suggestion that lay people, no matter who they are, would have the interests of women at heart and would more carefully monitor doctor's behaviour. Sean Madigan, a Vancouver regional Crown counsel recently

said the Crown would be willing to lay charges against a doctor if there was evidence of a criminal act, even without a complaint from the victim.

Whatever the outcome of this debate, perhaps a precedent has been set. Whether

the College likes it or not, the issue is now public. Perhaps women who have been victims of sexual abuse by doctors will now feel more comfortable discussing it, knowing they are not alone.

By Lorna Zaback

In Search of a Scapegoat

Her striking hand-painted sign—Nurses Against the Witch-hunt at the Grange Inquiry—makes her stand out in the crowd at International Women's Day. The bold and vivid lettering of her sign contrasts with its bearer who speaks very softly to the reporter, "I just don't think that the Grange Inquiry into the deaths at the Hospital for Sick Children is actually unravelling what happened there. Instead, it seems to be based on the supposition that the murder was committed and that the culprit is a nurse."

It is not just nurses who feel this way. Some months back, Orland French of the *Globe and Mail* wrote in an editorial: "It's the style of the (Grange) Commission which causes nervous shivers. It's a Royal Commission to discover the facts but it reads and sounds much more like a trial without an accused. Those types of trials used to be called witch-hunts."

In March of '81, headlines screamed across the daily newspapers that a murderer was killing babies at the prestigious Toronto Hospital for Sick Children. One whiff of murder and the public was stunned. A few days later, when a nurse, Susan Nelles, was charged with murder, nurses everywhere reacted with disbelief and horror that a colleague had been charged. For nurses it hit too close to home—"My God, it could have been me!"

Nurses and non-nurses are stunned and confused by the media hype and sensationalism associated with the Grange Inquiry. Because the Grange is

not a court of law, TV cameras are permitted. It is a far better soap opera than General Hospital, mainly because it's based on real events and real people. But, what most people fail to realize, is that in a hearing incriminating evidence is admissible, without the safeguards and protections present in a court of law. There have been accusations about the media coverage, reprimands from Commissioner Grange about nurses speaking out, statements taken out of context, cameras zooming in on a nurse breaking down.

Peter Trueman, managing editor of Toronto's *Global News*, in responding to criticism of the media coverage, said, "I don't mind telling you I have never been involved in anything so unfair or damaging to innocent people in 39 years of journalism. But it is the terms of the inquiry which are responsible, not the news coverage."

There had been a series of deaths on the cardiac ward at the Hospital for Sick Children between July 1980 and March 22, 1981. It appeared that these deaths were more than a coincidence. Police were called in to investigate on the week-end of March 21, 1981. Four days later, on March 25, 1981, Susan Nelles was charged with the murder of one of the babies, and a few days later with the murder of three more babies. On May 21, 1982, Nelles' 44 day preliminary hearing ended, with the charges being dismissed for

lack of evidence.

At Nelles' preliminary hearing, Judge Vanek concluded that murder had indeed occurred at the hospital. Someone was murdering babies with massive overdoses of Digoxin. After Susan's case was dismissed by the court, the police resumed their investigation which continued throughout the summer of 1982.

By order-in-council from the provincial government in June 1982, the Dubin Committee reviewed the management and administration of the hospital and the quality of care and treatment of patients there. The Dubin Report was released in June 1983 with 98 recommendations, 17 of which pertained to nursing. Among these were changes in nursing administration and a change to the unit-dose system of administering drugs.

Because the murderer had not been found, the Hospital for Sick Children requested a special investigation. Subsequently the Atlanta Center for Disease Control was retained. They concluded that 28 of the 36 deaths during the nine month period were suspicious.

After reviewing the Dubin Report, the Atlanta Report, and a report from the police about their investigation, Attorney General Roy McMurtry said further charges would not be laid at that time. McMurtry then called for a public inquiry which was created through an order-in-council. The Inquiry, headed by Justice Samuel Grange of

the Ontario Court of Appeal, began sitting on May 31, 1983. The Inquiry has two functions or phases: firstly to determine how and by what means the children came to their deaths and secondly to examine the conduct of the police and why they charged Nelles.

Digoxin Story

There were four babies who showed extremely high Digoxin readings even though they were not prescribed the drug. According to the testimony presented at the Inquiry, the Digoxin issue is far from clear. Experts have testified that:

- Digoxin is released from tissues into the blood after death at a level that is one to four times the level before death.
- Digoxin is stored in tissue at a level of 50 to 1,000 times the storage level in blood. It can be even more concentrated in exhumed tissue.
- Substance 'X', a Digoxin-like substance is produced by the body in newborn babies. However, expert testimony revealed that the highest level of this substance known to date is 4.1 nanograms per millilitre. The dead babies had Digoxin levels ranging from 25 to 1,100 nanograms per millilitre.
- Digoxin peaks in the bloodstream immediately after administration, so timing of blood samples is crucial. If a sample was taken immediately after an intravenous administration of Digoxin it would be in the range of 500 nanograms per millilitre and would fall off to about half that level within two hours and more slowly after that.

There have been some explanations about the four babies in particular who registered sky-high Digoxin level readings. One sample was determined to be contaminated. Two others were taken from exhumed tissue and the sample from one baby was taken right after a resuscitation effort. The unknown is how very ill newborns metabolize

Digoxin. Coupled with the timing of blood samples, Digoxin release from tissue and the action on the heart during resuscitation, how valid and reliable are the Digoxin readings?

Atlanta Report

The highly esteemed Atlanta Report must also be put in perspective. The authors of this report categorized the 36 deaths at the hospital into three groups: A - the most suspicious; B - those deaths which occurred between 12:00 and 6:00 a.m.; C - all other deaths. They also looked at which nurses had been on duty at the time or within four hours of these infant deaths. What caused a media uproar was that one nurse had been associated with all 28 category A and B deaths. They were able to make these associations with nurses because they had detailed records of their work hours; the same records do not exist for other hospital personnel.

When the Atlanta authors did testify, they were challenged on many bases. What became apparent during cross examination was:

- That the authors had an expectation bias when they began their study, i.e. they were trying to prove murder. The consultant pharmacologist who was one of their experts was also retained at the same time by the Metropolitan Toronto Police to assist them in their homicide investigation.
- They failed to determine all of the other possible people and hospital personnel who had access to the children during the epidemic period.
- The report merely shows the coincidence between nurse Phyllis Traynor, or other nurses and deaths; it does not provide a cause and effect relationship. The first rule of epidemiology is that association does not prove cause.

Such serious methodological flaws may render the conclusions worthless. There are no categorical answers about the role of Digoxin or whether or

not 28 of the babies can actually be considered suspicious deaths. Nonetheless, nurses remain suspect.

Is murder a foregone conclusion? Certainly when we look at 28 or 36 suspicious deaths, it is hard to imagine



that everything that occurred is coincidental. However, if the number of suspicious deaths decreases to three or four or six or seven, then events which occurred may not seem so extraordinary. Despite the lack of clear-cut evidence, nurses remain the prime suspects.

Why Nurses?

In April, Susan Nelles was asked by the Grange Commission lawyer, Paul Lamek, "Do you have any idea why so many children who were assigned to you died during your shift?" Susan responded, "I was the most senior nurse on the team, hence I was assigned the sickest babies." Nurses are suspect because they were in the proper place fulfilling their responsibilities as nurses. Because they have the most contact and the most responsibility for patients in their care, they become vulnerable targets.

Why else are nurses suspect? In the hospital hierarchy nurses are not very powerful. Historically, nurses have not been a very cohesive group. Odd working hours (twelve hour shifts and shift work) have made it easy to divide nurses. Nurses are not like doctors who are known to close ranks quickly and protect one another.

During the police investigation and the inquiry into the baby deaths, the police did attempt to divide nurses. Nurses, socialized to be compliant and always willing to please, were led to speculate

about each other by expert interviewers. And they were very naive about their rights. At that time, the Hospital for Sick Children nurses did not retain their own counsel but instead relied on the hospital lawyer. In fact, when the police came to interview Susan Nelles, she alone requested to speak to her lawyer before talking to the police. This was widely reported in the press; it was assumed that anybody who wanted a lawyer had something to hide. Nurses have learned the hard way that innocence does not mean you don't need a lawyer!

The Outcome

Ironically, the Inquiry into the deaths at the Hospital for Sick Children led to positive changes in the nursing profession. The Registered Nurses' Association of Ontario has achieved considerable prominence in this affair. The Association has standing at the inquiry and is playing an assertive and active role there.

The Inquiry has succeeded in pulling nurses together across this province, even across the country. More nurses are critical of what they read in the media and what they hear about the events at the Inquiry now than ever before.

Where will nurses go from here? What will be the impact on all health-care workers? Could the Grange Commission have been more effective if organized differently? Should the media and the public be allowed into inquiries of this kind? Which is more important—the rights of the nurses and other witnesses testifying at the Grange or the public's right to know what is happening there? What really happened at the Hospital for Sick Children? These and many other questions remain unanswered.

Regardless of the outcome, nurses are learning they can overcome obstacles by being a solid force of strength.

By Betty Burcher, R.N. and Lisa McCaskell, R.N.

ETHICS AND PORNOGRAPHY

by Rabbi Elyse Goldstein

It is not surprising that the clergy, male clergy in particular, have not yet identified sexual violence as a sin equal to other sins. For many generations, religion has not taken women's voices seriously. We have been told to be silent, obedient and sexually available to our husbands, but not sensual. We have been told to remain modest, covering our arms and knees because we arouse men in church or in synagogue. We have been told this is our fault; it makes us evil.

It is also not surprising that our religious institutions have not yet voiced moral outrage at the proliferation of violent pornography. To do so, organized religion would have to stop defining women as the 'other,' those whose salvation is vicarious through men, child-bearing and child-rearing. If we want our religious institutions to voice moral outrage it means they will have to listen to women who are voicing moral outrage. For this to happen, we will need many more women in leadership positions in church and synagogue, and many more generations of experience in hearing the songs of women sung and the tales of women told.

It is possible to speak about ethics and pornography from a dual point of view: from our pain as victims and our strength as survivors. It would be too simplistic to define pornography as wrong, for in the realm of ethics, 'right' and 'wrong' are relative terms. I prefer to define the problem of pornography and ethics in a theological way. I see ethics as simply *correct behaviour*, or that which is acceptable to what we call the Divine Being. What is right is not necessarily what is good, enjoyable, expedient or comfortable. This is most powerfully seen in the form of human relationships.

Marie Marshall Fortune in her book, *Sexual Violence: The Unmentionable*

Sin, talks about "the norm of right relationship." She calls any violation of right relationship a sin. We can examine right relationship as a form of theological metaphor.

Martin Buber, the great Jewish philosopher, speaks of I-thou relationship, and I-it relationship. I-thou is a relationship between two equal human beings based on mutual respect: as God respects all humanity, so we respect each other. I-it relationship is one in which a human being uses or manipulates another, objectifying that human being. I-it is the way we use things and people for our own ends. In an I-it relationship there is no impropriety, and no level of responsibility one toward the other; there is only that which is easy, utilitarian, and pleasurable.

The paradigm of I-thou is the paradigm of right relationship. One soul is connected to another soul, the other's personhood is as respected as our own. The other is seen as a unique individual, not an extension of ourselves; therefore, they cannot be used or abused for our pleasure.

Seen within this context, there are sexual activities which fall within I-thou and sexual activities which are clearly I-it. Any sexual violence against women, any pornography, be it soft porn or hard porn, is, therefore, an I-it relationship between a male user and a female used. Theologically viewed, it is a violation of that right relationship between God and humanity.

Religion tries to tell us what is right and the pornography industry tries to tell us what is fun. We are confused. There seems to be no right and no wrong. It is here that we so clearly need the strong and directive voices of our clergy. Why has the religious community up until now been silent in the face of sexual violence against women?

We don't want to believe it happens in our churches and our synagogues. We think church-goers are immune to such influences. But the shocking statistic is that people who consider themselves religious also indulge in pornography and sexual violence against women. This hypocrisy is the gravest of sins.

The clergy has not yet been willing to identify sexual violence as a sin, nor have they been willing to hold the offenders guilty and culpable, not legally but vis-a-vis God. It is time to classify those who use sexual violence against their wives or children as sinners, and to hold them accountable to the church, to the synagogue, and ultimately to the Supreme Being. If we let the abusers know they are responsible not only to civil law but to conscience and religion and ultimately to God, we will have a moral understanding of the world in which sexual violence and pornography is abhorrent.

A world in which I-thou is considered the normal relationship between men and women, a world in which human beings take ethical responsibility for their daily actions, a world in which right and wrong are defined not by those who have money and power but by a universal definition encompassing the views of both men and women, would be a world free of sexually violent pornography and degrading images of women. Perhaps that is the state of affairs that once was, back in the Garden; it is time for our religious leaders to take an active role in bringing us back there.

Rabbi Elyse Goldstein, originally from New York, has been serving as Assistant Rabbi of Holy Blossom Temple in Toronto since July 1983.



In the first week or two when we started going out he told me his brother's house was weird. I said I wouldn't go to

his brother's place if it was weird. He started hitting me and saying that his brother wasn't weird and not ever to talk about him that way...

When I got my hair cut he would tell me how ugly it looked or if I wasn't dressed properly. He'd cut me down when he thought I was gaining weight. Finally I started wearing what he wanted...

What a waste of my life. I wonder what other relationships will be like for me. I'm scared that no one will be able to get used to me and help me overcome some of my fears...

My plans for the future? I'm just starting to think about it. It is hard making new friends. I can't trust people. I'm scared they'll phone him or his family and tell them where I am.



Like many other young women in their teen years, Mary has been the victim of extensive emotional and physical battering at the hands of her boyfriend.

The relationship began when she was thirteen; at nineteen she is still trying to keep him away from herself and her infant son.

Unlike a lot of other young women in abusive relationships, Mary has laid several charges against her former boyfriend and has been able to enter a second stage shelter providing longer term housing for battered women. The shelter is only temporary. Her former boyfriend threatens that she will never be safe from him; and she now must deal with the isolation, loneliness, and lack of self-esteem resulting from her six-year experience in a battering relationship.



The problem of violence in dating relationships is well-known to most social workers, school counsellors, and crisis workers dealing with teenage women

on a one-to-one basis. Police encounter it regularly. In severe cases it may come to the attention of medical per-

under his thumb

teenage battering

by Patrica Gibson

illustrations by
Roslyn Schwartz

sonnel. Young women themselves freely admit they are aware of it occurring in their schools, even among their friends. Rape crisis lines and women's transition houses are frequently contacted by young women who have been beaten, or sexually assaulted by their boyfriends.

Despite extensive awareness about the problem of abuse in younger women's relationships, there is not a single shred of solid documentation available in Canada.

In the summer of 1983, Vancouver's Battered Women's Support Services (BWSS) secured funding from the Secretary of State Women's Program to undertake a 12-week research project on the subject. The idea for the project came from women working at BWSS who had received a number of calls from concerned parents, teachers and social workers encountering young women in violent relationships. The calls not only brought the extent of the problem to their full attention, but also

made them realize they were without sufficient information, let alone analysis, regarding the nature of what has been termed 'dating violence'. Moreover, BWSS staff understood they could not automatically transfer the theories and research regarding women who are living with their batterers to younger women.

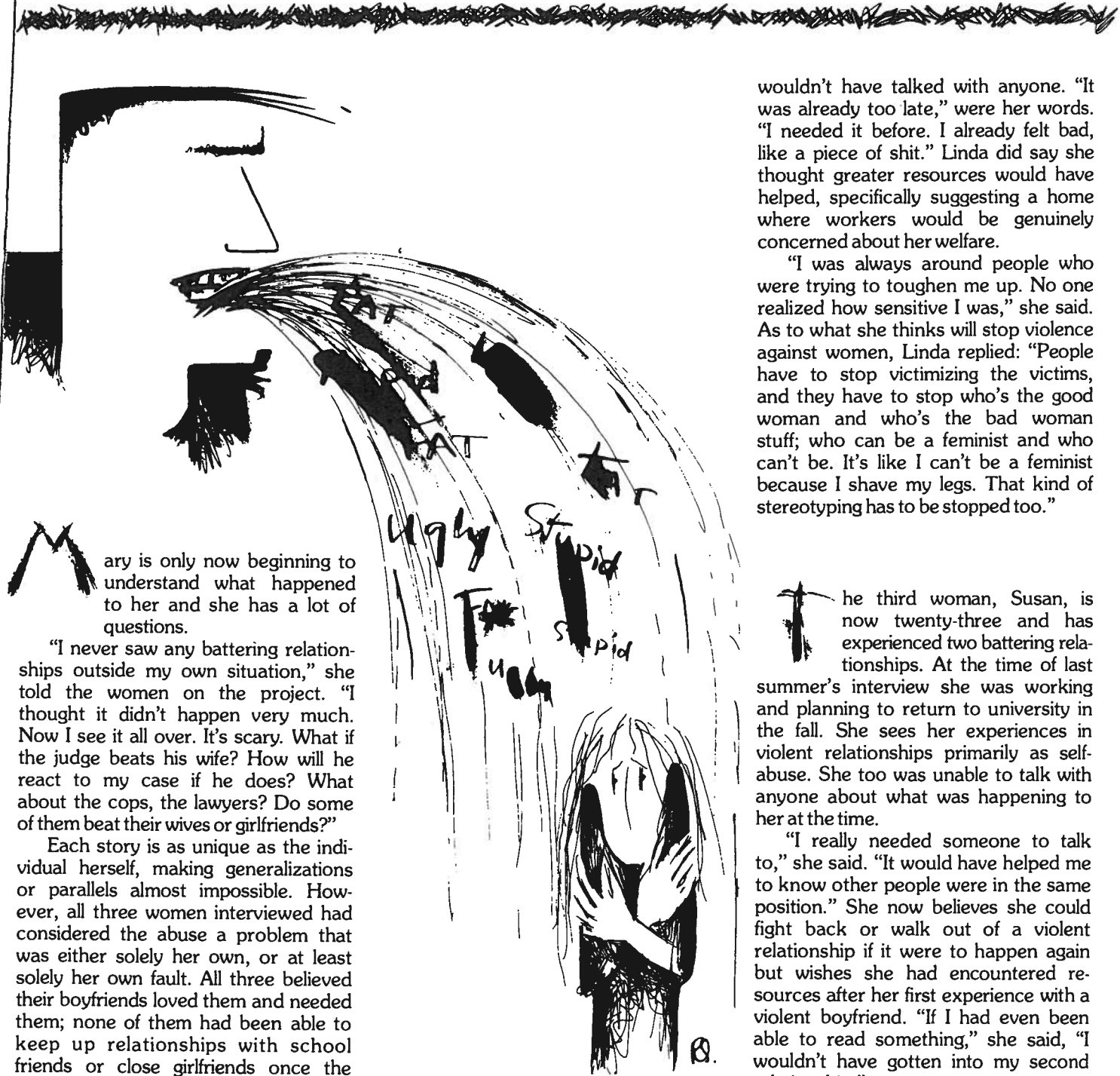
Jean Bennett, Jeny Evans, and Miljenka Zadavek, the three women hired for the project, were able to gather preliminary information on teen battering. The information is valuable primarily for the light it sheds on the existence of the problem and the questions it raises for feminists working in the general area of violence against women.

Although the project workers had initially wanted to interview only younger women who had directly experienced a battering relationship, they were forced to start with those people actually working with teenagers. They began the project with a series of interviews with streetworkers, social workers, teachers, youth workers, and rape crisis and transition house workers. These "professionals" proved valuable not only for their insights into the abuse they witness, but they were essential in providing contacts with younger women in violent relationships.

Through these contacts, the project staff were able to talk extensively with three young women who were battered in their first dating relationships. The workers caution anyone interested in pursuing research on younger women in violent relationships to remember class and cultural differences. The project was only able to make contact with white women.

The project focussed its research almost exclusively on young women who had not lived with their batterers. Mary, for example, was in a battering relationship for six years, but never lived with her boyfriend. According to the project's research, this is not uncommon.

The three young women talked at length about their experiences during the relationships, how they finally managed to leave their boyfriends, and what they thought could have helped them personally when they were in the situation. They were also asked for their views on violence against women generally.



ary is only now beginning to understand what happened to her and she has a lot of questions.

"I never saw any battering relationships outside my own situation," she told the women on the project. "I thought it didn't happen very much. Now I see it all over. It's scary. What if the judge beats his wife? How will he react to my case if he does? What about the cops, the lawyers? Do some of them beat their wives or girlfriends?"

Each story is as unique as the individual herself, making generalizations or parallels almost impossible. However, all three women interviewed had considered the abuse a problem that was either solely her own, or at least solely her own fault. All three believed their boyfriends loved them and needed them; none of them had been able to keep up relationships with school friends or close girlfriends once the abuse began.

Linda, nineteen at the time of the interview, was fifteen when she left her middle-class home in suburban Vancouver to work the streets. She met her boyfriend in a local hotel and from time to time he assumed the role of her pimp.

"Between fifteen and eighteen he kept me isolated," she said in her interview. "He didn't start abusing me until six months after we got together,

when he knew I had fallen in love with him."

But once it began, emotional and physical abuse became a regular occurrence. "He'd love to put fear into me," she said. "He'd tease me for three hours with his boots hanging over my face ... Once he threw me down a flight of stairs. Another time he killed my cat and dog." Like Mary, Linda is afraid her former boyfriend will find her no matter where she hides.

When asked what could have helped her when she was in the midst of the relationship, Linda was sure she

wouldn't have talked with anyone. "It was already too late," were her words. "I needed it before. I already felt bad, like a piece of shit." Linda did say she thought greater resources would have helped, specifically suggesting a home where workers would be genuinely concerned about her welfare.

"I was always around people who were trying to toughen me up. No one realized how sensitive I was," she said. As to what she thinks will stop violence against women, Linda replied: "People have to stop victimizing the victims, and they have to stop who's the good woman and who's the bad woman stuff; who can be a feminist and who can't be. It's like I can't be a feminist because I shave my legs. That kind of stereotyping has to be stopped too."

The third woman, Susan, is now twenty-three and has experienced two battering relationships. At the time of last summer's interview she was working and planning to return to university in the fall. She sees her experiences in violent relationships primarily as self-abuse. She too was unable to talk with anyone about what was happening to her at the time.

"I really needed someone to talk to," she said. "It would have helped me to know other people were in the same position." She now believes she could fight back or walk out of a violent relationship if it were to happen again but wishes she had encountered resources after her first experience with a violent boyfriend. "If I had even been able to read something," she said, "I wouldn't have gotten into my second relationship."

According to the project workers, the most difficult thing for a young woman to recognize in a violent relationship is the steady stream of psychological abuse. From interviews with crisis workers as well as the younger women, they discovered a pattern of psychological abuse that results in the woman gradually losing control of the situation. Psychological abuse begins with being called fat or ugly or stupid. The boyfriend will end up deciding what his

girlfriend should wear, who she should not spend time with, how she should conduct herself when they are out together. Without realizing it, the woman finds herself isolated from friends and soon sees herself through his eyes.

Isolation is a major factor making it difficult to reach young battered women. A person conducting research has almost no credibility with these women, explained Jean Bennett. Teenagers are particularly concerned about protecting themselves from inquiry and are reluctant to talk with anyone who could bring their problems to the attention of people in the justice system. People who work with teens were adamant that anyone wanting to talk with young women in an abusive situation cannot be judgmental or too eager to give advice.

From the interviews with the "professionals" and the younger women themselves, the project concluded that the inability to talk about abuse when it is happening is the major problem for a teenage woman.

"Who can a younger woman talk with who will believe or understand her," asked Jeny Evans in a recent interview. "She doesn't talk to her family, or friends about something like this, much less strangers, and she is afraid if she does tell someone she will lose her control over the problem."

Evans says it is important for older feminists to realize that a young person has been silenced for most of the years of her life and has not learned how to discuss a problem she is having. "Basically she's been told to shut-up all her life or ridiculed for the things she does say. For a teenager there is no safe place where she can open up and talk about herself."

Zdravek, Evans and Bennett were all convinced at the conclusion of the project that, while battering situations for younger women have a great deal in common with what is known about battering in marital relationships, the context in which teenage violence takes place is quite different.

"But it is not a difference that sets them poles apart," says Bennett. "Both younger women and older women who are living with their batterers are part of a continuum of violence. Younger women lack a certain level of knowledge, whether it be about birth

control, sexuality, the judicial system, or relationships, that older women have gained simply through the process of living. Older women in battering relationships suffer from a lack of power and control, but it is even more intense for younger women. Young people are not given accurate and useful information that enables them to have greater control over their lives. At the same time, these young women are trying to assert a place for themselves as adults and they feel that they get that from their boyfriends, especially when the rest of the adult world continues to view them as children."

Susan went into a variety of group homes, but was unable to find someone who could talk to her on her level. "They didn't understand that it's hard to come off the street where you've had a lot of freedoms and have acted like an adult in taking care of yourself and stuff and go into a situation where people want to treat you on a child level. They create a bunch of rules that don't work for kids who have had control over what they did. Kids develop instincts about who is trying to manipulate them and they manipulate right back."

Women as young as twelve are known to have been beaten, raped or terrorized by their boyfriends. Many still live at home; some are working the streets; most are caught in a situation where they are being treated as children at home and in school, while they are beginning to see themselves as adults.

The pressure to have a boyfriend is extremely heavy within their own peer group. At the same time, the pressure not to have a boyfriend can be as extreme within the family. The ideal of romance and lasting love, with all the accompanying myths, is particularly strong at such a young age and the experience of dating or sexual involvement is almost non-existent. A teenager living on her own who decides she does want out of a violent relationship has nowhere to go and, because she's a juvenile, people who know about the situation are legally required to report her to the government (in B.C. the Ministry of Human Resources).

A major trap for the teenage woman is the likelihood that her boyfriend may be the only emotional contact she has. This is not necessarily the case for a married woman who may at least have her children as an emotional comfort. Zdravek adds, "These women really care about the guys they're with. If he's been a victim of abuse at home, she sees herself as vitally important to his welfare and doesn't want to walk out on him. In many ways, she sees herself making up for all the rough breaks he may have had down the line."

The women on the project talked about the escalation of violence toward women generally and the undercurrent of violence that exists in advertising directed towards teenagers, as well as rock videos and other forms of popular culture. There is more pornography directed at and accessible to young people than ever before. In the past few years there has been a steady stream of horror movies for young people that repeatedly victimize or terrorize the female characters. "Tough is pictured as acceptable, normal, and ultimately attractive," says Bennett, "while violence as real pain is left out of the picture."

And of course, the real economic effects of an ever-escalating depression mean there are far fewer opportunities in general for young people to go to college, receive some form of skill-training, or secure a steady job. "The ideal of independence from the family (having a job and an apartment) still persists," says Bennett, "while in reality things are closing down."

In other words, the experience of abuse in teenage relationships cannot be understood without taking into account the whole range of dynamics involved in being young *per se*, and being young today in a world that is openly violent and riddled with severe economic disadvantage. Most young people have trouble seeing a future for themselves and as a result are all the more vulnerable to abuse.

O n the surface one would think young women today would be less susceptible to traditional myths and stereotypes about females, the feminist option being

at least one plus for teenagers growing up in the eighties. Not so, say the women from the project. The feminist role model for may young women is not an acceptable option.

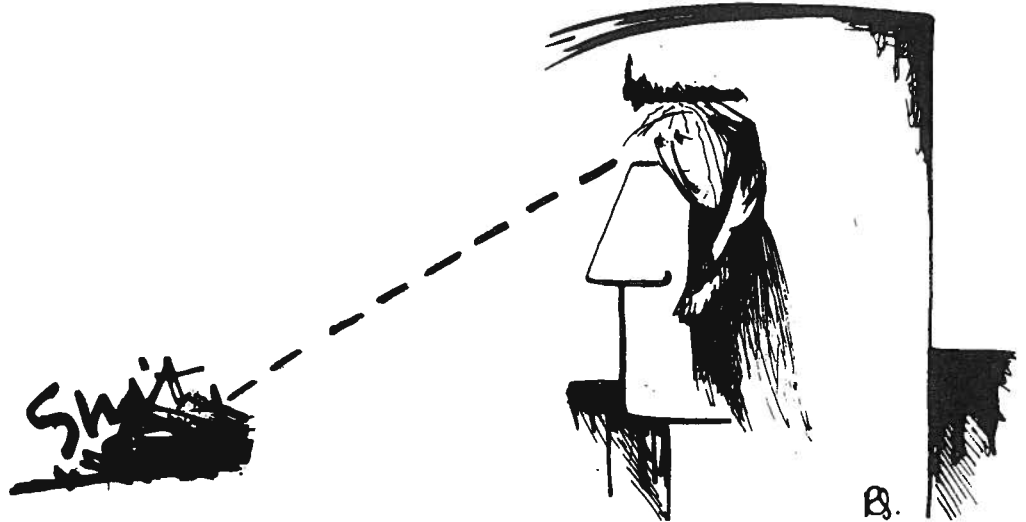
"The feminist option is a lonely option, or at least it is seen that way," says Bennett. The women's movement has not been able to bridge the generation gap and, as a result, young women today are likely to be trapped in the same role patterns as the young women of a generation ago.

The women from the project believe this is a major challenge for the feminist movement, and one that should not be easily glossed over. Teenage women, they say, are caught in the cross-fire between two conflicting messages. On the one hand, mainstream socializing tools continue to present the image of beauty as the road to popularity. Teens are told they must be "feminine" or "pretty" if they're going to be popular, have boyfriends, and so on. On the other hand, feminists are saying they should be themselves, stand up for their rights, and demand respect from the men they are with. The force that wins out time and again is not the feminist one.

Often another roadblock for feminists trying to relate to young women is their general unwillingness to accept youth culture. "As we age," says Bennett, "we have less and less understanding of what young women's culture is all about. We have to develop a greater tolerance. We already assume, for example, that there is a different and legitimate cultural experience for women from other countries. It's the same thing with youth. "We can't put our own analysis onto another generation of women; we can't be patronizing; and we can't assume they are all the same."

Older feminists have to open themselves up to younger women, realizing we have things to learn from them and their experiences. "They know best what is happening to them," says Zadravek. "We can't set up a structure that tells younger women what their experiences are, or should be."

As to what needs to be done, the women say more information must be gathered regarding the dynamics of these rela-



tionships. "we are in essentially the same position we were ten years ago with wife-battering," says Bennett. "Various professions were aware of the problem, but nothing had been done to document it or analyze the dynamics of a battering relationship." The BWSS project was very preliminary, they say, and much too short in its duration.

The younger women interviewed seem much more interested in the development of outreach materials and safe, one-to-one help, than support groups or any kind of consciousness-raising classes. Evans believes that well-publicized information about what to do in a battering situation would be particularly helpful. "Even if they don't act on it right away, at least they know some of the options that are there, and someday, when they're ready, they will use them."

One suggestion the women have for feminists working with violence against women is to be sure the information contained in their materials includes younger women. And materials should be developed for, and made accessible to, younger women.

In a final note, the women on the project discussed their essential optimism about such a tragic and disturbing issue. "There's a tremendous potential for change here," says Zadravek. "There's an opportunity with teenagers to circumvent a pattern of abuse before it is set. There is a chance to teach women how not to lose control over their relationships with men before it actually happens."

They also believe a greater understanding of the dynamics involved in

battering of younger women will ultimately shed greater light on the issue of battering as a whole. The role of economic dependence is one of those key issues which we may need to re-examine. According to the project workers, there is no evidence that teenage women in abusive relationships are economically dependent on their boyfriends. Many of these women still live at home and are primarily dependent on their parents' income; some have moved into their own places and have jobs; even those who are working the streets are functionally independent on a financial level. Yet most research on wife-battering assumes the woman's economic dependence on her husband to be a major, if not the primary component in maintaining the battering relationship.

"If economics is not the greatest factor in keeping a young woman in an abusive relationship, then some serious questions as to the weight we give the economic element in wife-battering must be raised," says Bennett. "On the surface it would seem more weight should be given to the psychological and sociological questions relating to wife-battering."

The project has produced a leaflet and an outreach poster, both of which are being circulated in Vancouver. The women plan to produce an information poster and hope a follow-up project will be funded next summer. BWSS can be reached at 2515 Burrard Street, Suite 301, Vancouver V6S 3J6.

Patricia Gibson is a free-lance journalist living in Vancouver. She is also a member of the Kinesis editorial staff.

Violence and Feminist Strategy

By Varda Burstyn

Illustrations Mary Firth

Like the amazing grace celebrated in the religious song, feminism has given us sight to see those things to which we were blind before.

Social arrangements of domination and oppression, which we and others before us accepted as natural and inevitable, have been revealed through analysis and action to be products of human design. Our perceptions about violence, especially violence against women, and about sexuality have perhaps been affected most dramatically of all. With these revelations have come shock, horror, and anger. As feminists have broken the silence imposed on women for so long—a silence enforced by laws and courts as well as more ordinary gender conditioning—women have been encouraged to speak out about the violence that has been done to us. We have done so in a number of ways.

The greater visibility of violence has led many feminists to conclude that there is a qualitative rise in violence around us, particularly violence against women. Many of us feel frightened and desperate as a result of these perceptions, and in the struggles we launch to fight violence against women, we opt for solutions that seem to promise the most immediate relief. But there is a danger in this approach. We may find ourselves supporting laws and institutions which can, through cooptation, diversion and even, ultimately, direct repression, end up reinforcing women's social powerlessness and vulnerability to violence. After more than a decade of feminist organizing around issues of violence, and armed with a new body of feminist historical scholarship, we now have the necessary experience to

analyse our strategies better than ever before. The promise of harder times ahead, as the recession deepens year by year will force us to examine our experiences strategically, as we lose in ever greater numbers the material gains made in the sixties and seventies.

One of the things we have to do is seek, beyond our anger, a clear understanding of the causes of violence in our culture. If our strategies merely get at the symptoms, it is likely that they may, like many allopathic drugs, serve to hide the root problems. They may even contribute to the disease of the whole system, rather than help the system to heal.

VIOLENCE OLD AND NEW

In trying to assess not only the extent, but the significance of violence against women and children today, let us remember what has gone before. We need to be mindful of the conditions under which huge numbers of working people lived during the nineteenth and well into the twentieth century—the incredible hours of work, the appalling housing conditions, the terrible health problems that the majority of urbanized working people faced (many still do). These conditions were, until very recently, typical of a social system in which patriarchal imperatives were so institutionalized as to be invisible: what we now call wife battering and 'sexual assault' were once simply the prerogatives of husbands and the inevitable lot of many wives. Corporal punishment of children went hand in hand with these values as did very high rates of father-daughter incest. Statistics on prostitu-

tion in turn of the century London, perhaps typical of trends in urban centres, indicate a greater number of prostitutes per capita than today's statistics show.

In other words, the extent of gender violence against women, of sexual exploitation of wife and prostitute, of masculine command over women, has been so very great as to be considered natural, inevitable, even a good thing. Its previous invisibility should not blind us to the fact that the violence against women we see today is not in any simple sense new. It is especially important for us not to lose sight of the many improvements in women's lives that have been won by women's struggle over the last century.

WHAT IS NEW?

Having sounded this cautionary note, it is very important to register what is new, different and peculiar about the violence with which today's feminists have become concerned. First of all, there is an element in the way we experience violence that reflects the first law of political life: where there is struggle by the oppressed there is resistance from the oppressor. The growth of the autonomous women's movement has brought about qualitative breaks with masculinist definitions of womanhood; women's increasing control over their fertility and erotic practice is fundamentally challenging the power structures of masculine dominance. This, as many feminists have pointed out, has created a real backlash. Part of this is expressed in

physical violence, another part in fantasies of violence. Rape, battering and violent representations—movies, films, pornography—all carry a heavy flavour of political repression which makes their impact ugly and bitter. But this kind of violence is also a sign of how besieged the system of masculine dominance is.

Secondly, we are living in conditions of upheaval and atomization unprecedented in human history. These conditions have disintegrated moral as well as economic systems, and given a terrifying cast to the crisis of human existence. Industrialization and urbanization have broken up communities of villages and small towns, where social life was organized along lines of kinship and mutual obligation. In the urban metropolis, kinship and obligations for mutual aid have been turned into obsolete and cumbersome baggage. Increasingly, travelling alone is the best way to travel on the economic highways of our society. Marriage no longer provides a life-long commitment and it, like close friendships, can be torn up by unemployment and re-employment, promotion or demotion, management or labour affiliation and the like. The premium on a ruthless and implacable individualism, which has reached a historical high point, does violence to the social nature of our being. Again, if we are to understand root causes, we have to see that while women always suffer a specific, often extra measure of violence in these times, much of the violence we experience is inherent in industrial capitalism and not in patriarchy *per se*.

We are also facing a human-made crisis of our physical existence never before experienced in the history of our species. Amassed on this planet is enough radioactive material to blow us and everything else on earth to kingdom come; present in our water and air is enough poison to destroy the life supporting qualities of the biosphere on which we are completely dependent. This situation, a combined product of the capitalist/masculinist industrial complex, affects us very profoundly. Our entire beings feel the crisis: our bodies protest in their greater propensity to disease and intolerance, our minds to the impossible violence of a future of death.

People have many different reactions to this kind of violence and distress. Some of us become consciously



aware of our pain, others don't. There is nothing agreeable in this awareness, but it moves us to try to identify its source and take intelligent action. Those of us who are not consciously aware of distress about this world and our place in it are potentially much more likely to displace anxiety, fear and even anger. Unconscious anxieties are very easily manipulated, so from feminism's point of view, they are very dangerous. In particular, because feminism so clearly represents the disintegration of the patriarchal way of life that structured society for so long, feminism can be and often is targeted as the major cause of social breakdown. 'Woman', as well as feminism itself, is a prime scapegoat for this kind of displaced distress. In her remarkable book *The Mermaid and the Minotaur*, Dorothy Dinnerstein has given what is to my mind the best account of the reasons for this. She believes it has to do with the psychological consequences of women's sole responsibility for primary infant and child care. Because women are the universal providers of primary care, they are the first, most terrifying and most angering of all people in our lives, as well as bringers of the greatest joys. This sense of women as all powerful beings creates for 'woman' a special place in our unconscious. There is a

strong, primitive part of us that continues to see women as the world, or at least, as the world's most powerful agent, and thus as the cause of things, including bad things. Women can be seen as forces for good and for nurturance. But in hard times, it is the unconscious image of women as deniers, as punishers, as deserters that gets triggered more often than not.

This trend combines with our sense of species crisis in profound ways. As we grow from childhood to adulthood, we learn about nature and its precarious status: about its threat to turn off the taps, shut down the energy, remove its life support systems if we don't stop exploiting it. At a whole number of levels, our perceptions about this situation resonate with our infantile and childhood sense that nature's stance is all too much like our mother's was when she denied us. If we are ignorant of and deny the social arrangements which placed our mother into that all powerful place vis-a-vis ourselves, and of her own denied needs for care from others, if we refuse to grapple with women's needs to be nurtured and to have integrity and autonomy respected, then we are likely to collapse the solutions to the economic/political/ecological crisis into a demand that women/mothers/feminists just get on with it and



do their job: take care of us. Outrage at women's demand for abortion rights contains this kind of emotional content, far more often than it does a horror of death itself, and it is an outrage that can be felt and expressed by women as well as men, given that girls as well as boys are, as Dinnerstein says, "mother-raised."

Much of the symbolized violence we are seeing in advertising and in all mass media, and doubtless much physical violence against women, reflects displaced fears and anxieties. These originate in and must be solved by understanding and working to change the conditions which produced the anxieties: capitalist industrialization and masculine dominance. Certainly, as feminism has seen so clearly, harnessing women yet again to a role which makes them incapable of taking full responsibility for their individual and collective behaviour is not the answer. We must dismantle the conditions of alienated capitalist industrialization which generate violence in our society—be it the violence of the Dalkon Shield or the Cruise Missile

A word about pornography in this context: without question, as the feminist analysis of pornography has shown, the vast amount of commercially produced explicit representation (what I

call pornography) is a powerful carrier of sexist values. Indeed, as traditional definitions of appropriate gender behaviour rapidly erode (and with women increasingly compelled to compete with men in the capitalist labour market) pornography is one of the most important 'definers' of 'masculinity' and 'femininity' definitions that reassert the ideology of a biologically pre-ordained social relationship of inequality between the sexes. But in a real and crucial sense the mass produced porn of the last thirty years is a new kind of literature: an ideology in the form of advertising—depersonalized, standardized, objectified; in a word, commodified. The values in the porn of today are quintessentially capitalist values, fused with masculinist ones. If we are honest about the increasing objectification of men in all advertising and media, we'll see how many negative qualities representations of women and men share, qualities that have to do with the tendency of capitalism to make people into interchangeable 'things'. Feminists would be making a major error if today's pornography were read as a patriarchal artifact, without understanding its capitalist nature and function. We would fall into the trap of displacing anger and blame from a complex of oppressive structures onto only one.

DIRECTIONS PAST AND FUTURE

By way of example, it is useful to look at what happened to feminist campaigns around a number of sexual issues in the nineteenth and early twentieth centuries. In Britain, in the 1860's, Parliament introduced a piece of legislation called the Contagious Diseases Act (CDA). It required women who were earning money through prostitution to register with and undergo bi-weekly examinations for venereal disease by police authorities. On the surface, this was a bill enacted for the health of the population. In reality, it gave police unprecedented and extremely oppressive powers over impoverished working class women.

The fight to repeal the CDA was one of the most important social campaigns in nineteenth century Britain, involving a coalition of forces similar to those currently mobilized around the pornography issue today. The leadership of the feminist component always fought the act by emphasizing the way it violated women's rights to control their own bodies. But, as historian Judith Walkowitz has documented, towards the end of the long campaign for repeal many of the rank and file of their movement were coopted by a different group of social forces, those who organized under the banner of 'Social Purity'.

Comprised of religious groups and secular organizations whose leaderships were male dominated, these movements had fought side by side with the feminist forces against the CDA. But their concerns and political agendas were differently motivated in several key respects. As they saw it, the CDA was unacceptable because by acknowledging and regulating prostitution it sanctioned vice. These forces did not agree that women had a right to control their own bodies, nor did they think that people in general, and especially children, had rights to define for themselves any form of sexual satisfaction outside the patriarchal marriage framework. Substantial agreement on this latter, sex negative clause created the bridge between the feminists and social purists through the '70's and '80's in nineteenth century Britain.

It was their convergence on this common ground which made possible the cooptation of the broad women's mobilization into support for a whole

set of new legal measures that passed Parliament in the wake of the successful repeal of the Act itself. Stricter restrictions on prostitution, a higher age of consent law and stricter prohibitions on same-sex practices were demanded by the social purists—many feminists among them—as ostensible means to protect women and children. What was called female chastity (no sex except under conditions of marriage and procreation) became the standard by which all other sexual practice was judged.

After 25 years of agitation for the rights of prostitutes, as women, to full bodily integrity, civil rights and social services, the feminist leadership watched as prostitutes were placed at even greater risk. They saw homosexual practice persecuted in the name of patriarchal heterosexuality and state regulations on sexual life used as a way to extend social control over working people.

Women's poverty and the systematic oppression and discrimination which produced it were left untouched by these reforms. Today, these same conditions continue to produce a large number of adult women and children of both sexes who turn to prostitution to earn a living.

According to Carol Lee Bacchi, a historian of the English Canadian Suffragists, the pattern of feminist and social purist collaboration was even more pronounced in Canada than in Britain or the U.S. Her work claims that with the exception of a tiny group of conscious feminists, the majority of the women's suffrage movement was comprised of middle-class Anglo-Saxons who saw votes for women as a tactic to hasten implementation of the temperance and social purity platforms. As social reformers these women activists had no qualms about drafting new laws and regulations which would enforce behaviour forged in their own image. They were also quick to 'woman' the new state-funded agencies for social welfare.

There are two features of the mobilization around issues of prostitution and sexual life that combined, were responsible for the ultimately repressive use of legislation and social work agencies. First of all, the women activists were far too willing to enshrine their sexual values and norms in law and to

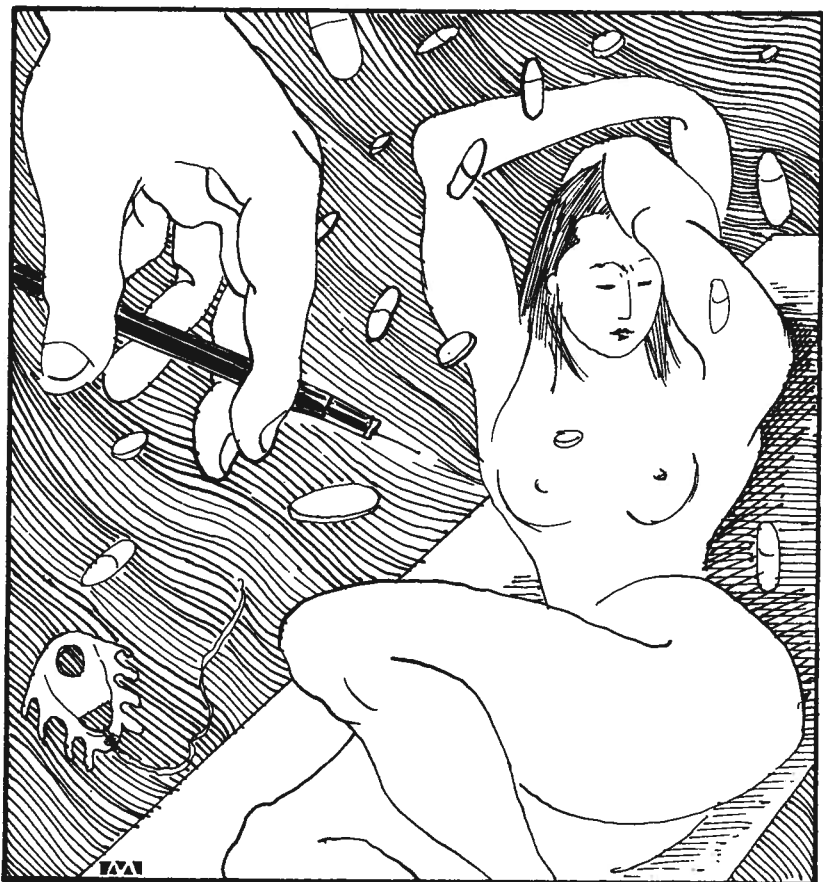
thus conspire in the labelling and punishment of so-called 'deviant' sexual practices. Second, the women were far too willing to call on the state to organize and implement that regulation and punishment.

In their zeal for reform, they saw the state as an unproblematical instrument for the inculcation and policing of their values. Insofar as their values did in fact reflect something of their privileged economic-class position, they were, of course, right. But as a number of British and American feminist leaders understood only when it was too late to change direction, not only did the state not serve feminist interests, it was actually hostile to them. As a very extensive, very powerful set of networks, with great wealth and armed force to command, the state's political and bureaucratic arms were controlled by wealthy men much as they are today. These men were not about to implement a set of laws which would undermine their economic and gender privileges. To do so would be to dismantle the hierarchy at whose apex they sat.

The social control model of reform finally put in place by the Social Purity

movements focused both women's energy and state power into changes in law and an expansion of the police, courts and prisons to accommodate the 'criminals' thus apprehended. Thus was constructed a built-in collaboration between social work agencies and the judicial-repressive branches of the state. This has been lucrative in direct terms for those with social power. For example, the relationship between police and prostitutes has always been good for the police and bad for the prostitutes.

Political divisions have also been created—the homosexual panics of the fifties and sixties, the kiddie porn panic of the present—with astoundingly positive results for those whose crimes these panics camouflage. For example when U.S. Surgeon General Everett Koop speaks at anti-pornography events like the Symposium on Media Violence held in February in Toronto, the people whose sense of outrage and purpose he addresses simultaneously forget the crimes over which he has presided as a ministerial figure in the Reagan administration—crimes with respect to American women's reproductive and health needs which amount to destroying all the gains ever made by this wave of the women's movement.



Feminists cannot in the long, or even short run, gain from a social control model of reform and regulation. Instead, we have to look to a model of popular and feminist empowerment. Such a model uses public resources to help people with problems organize together and take appropriate actions, be they therapeutic, interpersonal, social or economic, to change their problems. Using principles of self-help and workplace and community-based organizing minimizes the possibility that sexual regulation will be used as a tool of oppression.

Today, we are once again in the midst of a massive public debate about sexuality, morality, law and the state. Conservative and authoritarian voices speak about the evils of pornography, prostitution, child abuse and kiddie porn. Because women are so justifiably angry at pornography, many feminists have mobilized and been drawn into the debates about prostitution and the sexuality of youth and children. The language of these debates is one of human wellbeing and need. These are positive terms, as long as they do not become pretexts for social control.

Our strategies must reflect not only our sense of what's wrong with, say, pornography, but also of what we think is right: self-determination for women, children and men. These two elements must translate into working plans which do not strengthen social and state apparatuses which obstruct self-determination. Our energies and our social resources should be used to empower, not to control. Before we throw all our energies into controlling the contemporary manifestations of what a previous generation of feminists called male licentiousness, we must think about how these problems result from both the capitalist organization of our economic system, and from the sexism of our society.

Harnessing feminist anger and legitimacy to rightwing, authoritarian and sex-negative forces is something we should refuse. We are right to demand that government distribute resources to enable us to improve our sexual life, as well as resources to improve all other aspects of our social life. But because the state is neither pro-feminist nor anti-capitalist, we must be very careful what powers we confer on it in our name and give it no pretexts or camouflage to act against us.

VIOLENCE AND HEALTH

From the point of view of the women's health movement, there are a number of important implications flowing from this analysis of violence and the ensuing points about political strategy. First of all, as many feminists have documented, women suffer from a deep current of misogyny institutionalized in the predominantly male medical profession. This itself takes many forms: the basic denial of women's perceptions about their own health; the continued ascription of mental disorders (hysteria, hypochondria) when physical ones cannot be diagnosed; the use of drugs to placate alienated women; the wholesale expropriation of birthing by the medical profession. All these phenomena speak to an extraordinary control exercised over women by men through masculine dominated professional methods and associations.

There are other forms of violence involved in the way women encounter the allopathic medical system. This system has acted to drive underground other forms of healing which rely on natural substances and the stimulation of the body's self-healing capacities. One of the most horrifying results of this process is the development of a vast epidemic of iatrogenic (physician-induced) illnesses, now comprising at least one fifth of all hospital admissions according to the Ontario Patients' Rights Association.

There are other consequences of the allopathic medical world-view: collusion with corporations to obscure the often lethal nature of occupational health hazards; collusion through commission or through silence with the more general poisoning of our whole environment. From black lung and asbestosis to systemic candidiasis and immunological breakdown, the consequences of treating humans as though they were composed of separate parts and unrelated systems are terrifying indeed. Poor and working women are at an appalling disadvantage with respect to iatrogenic and ecological illnesses. They have no one to provide the sustained care needed to recover from them nor the funds to pay for the extended allopathic and naturopathic care needed.

The medical profession has played an absolutely central role in defining and redefining norms for sexual behav-

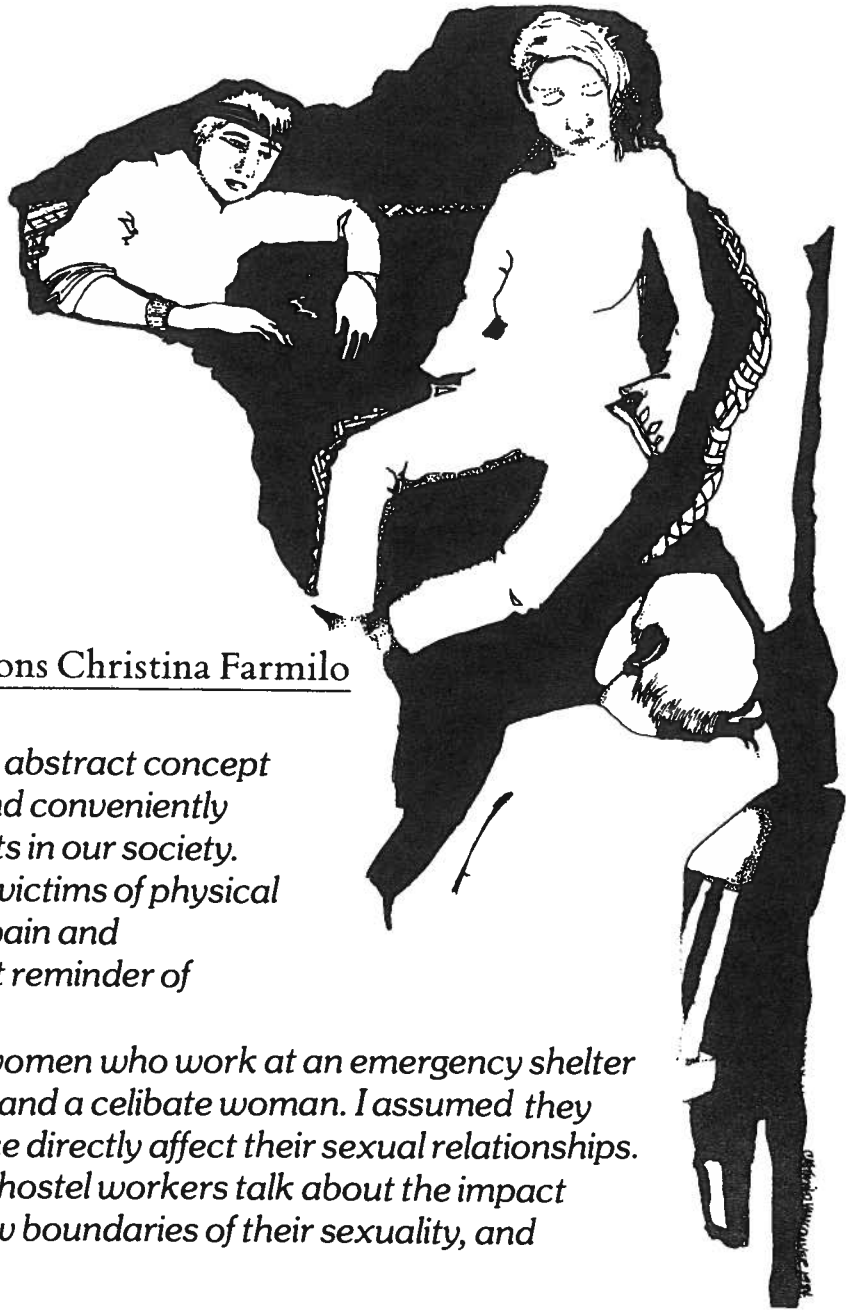
our which buttress oppressive gender arrangements. Using the language of health and sickness, behaviour which appears to challenge masculine dominance is labelled as ill. Medicine's physical and psychiatric branches have provided powerful ideological support to patriarchal sexual standards. Today, this function is still played by many medical professionals—whether through their denial of reproductive rights to women or through the replication of sexist gender norms through supposedly value free sex research. These ideological services should also be addressed by the women's health movement.

The women's health movement, virtually by definition, has understood how crucial physical integrity is to personal and collective self-determination. That most contested terrain of all in a masculinist, capitalist society—woman's body—has been staked out for defence from control and opened up to women-identified redefinition. What will be crucial in the future is how well the movement can translate its concerns into effective political strategy. All the gains that have been made are under sustained attack by an economy in which the needs of profit displace the needs of people on a staggering scale.

The prognosis for the next decade is much greater cuts in social expenditure, unless the women's movement and its allies can actually bring about changes in the economic and political systems in which we fight for autonomy and health. If the system as a whole cannot tolerate women's physical and emotional health, if by definition it undermines these prerequisites to our well being, then we must face the fact that we cannot simply tinker with one or another of its components. The medical and health systems are part of and affected by the economic and political structures. We will have to tackle these if we want health and self-determination for all.

Varda Burstyn is a feminist writer and teacher who works in the field of political and cultural theory.

Working with Violence



by Julie Wheelwright

Illustrations Christina Farmilo

For most of us, violence can become an abstract concept in our day to day lives. We can neatly and conveniently turn a blind eye to the violence that exists in our society. But how do these women working with victims of physical and emotional abuse cope with anger, pain and frustration that arises from the constant reminder of violence?

I set out to discuss this with three women who work at an emergency shelter for women — a lesbian, a heterosexual and a celibate woman. I assumed they would say their experiences with violence directly affect their sexual relationships. I was wrong. In the following article, the hostel workers talk about the impact of their work that far exceeds the narrow boundaries of their sexuality, and encompasses their lives.

Vita is sitting in her home, thoughtfully cradling a cup of tea in her hands as she talks about the impact working at Sarah's has had on her life. Her home is a warm, peaceful haven from the bitter February winter; an inviting smell of freshly baked coffee cake hangs in the air. The security and quiet of her home contrast sharply with the women she sees at work.

She smiles as she warmly describes one of the regulars at Sarah's, the shelter for women where she's worked for the past few years. She is speaking of Sally, the 50 year old daughter of an alcoholic, who comes to the shelter to sleep and recuperate after her Aqua Velva binges. "She has so much pain that she doesn't talk about it, she jokes about it. She's someone I carry with me because I like her so much."

"My dreams are more about the women's personalities than about the violence," says Vita. "I dream more about their suffering."

But dreaming about the women who stay at Sarah's is only one aspect of the hostel worker's experience. The women who come to Sarah's consume their waking hours; the hostel assumes a paramount place in their lives.

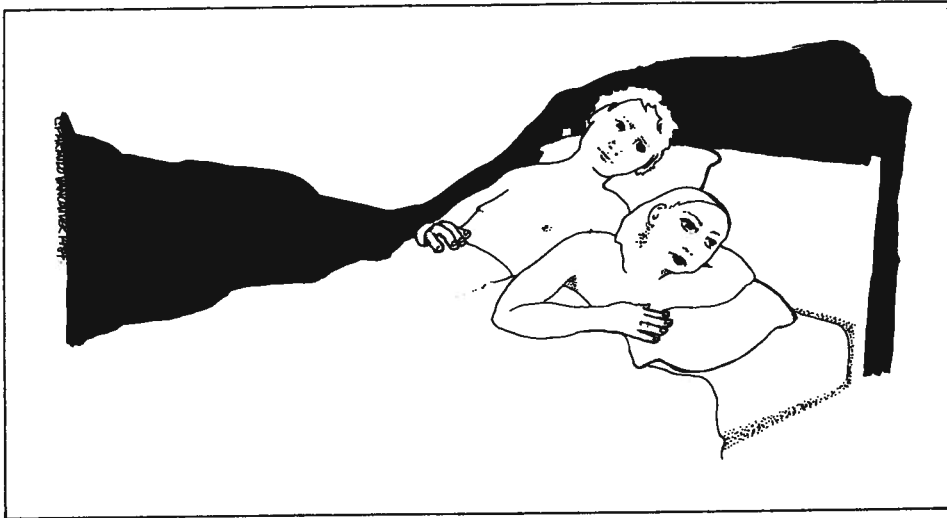
"It's very exhausting carrying all these people around in your head. When a girl tells you that her father lures animals into their house in order to—I don't know how to say this, but screw them—it's very hard to shake that," says Vita. Although she says she no longer experiences this dilemma, when she first began working at Sarah's she found the adjustment to life

at home difficult after long, exhausting shifts.

"It's very hard especially if you make love shortly after you come home. It's very hard to shake that repulsion."

Vita says her work at Sarah's has considerably changed her attitudes about men by exposing her to the extremes of male domination. And while Vita says she does not associate Bob, the man she's been living with for the past two years, with the abusive husbands she encounters through a double-glass door at Sarah's, her work does take its toll.

"Bob's a very gentle and sensitive man, not someone who I lump in with the louts we run into at Sarah's or hear about at Sarah's, or see at the door at



Sarah's. So there's no question of just jumping the association. But when I am in bed making love, I can't help but think of the stories that women have told me in these very intense and long shifts which we have. It is like going through the motions in bed without really any of the pleasure."

Gradually the shock wore off and the reactions to the horror became less emotional. "Sarah's doesn't throw me for as long as it used to. It doesn't enter my bedroom quite as much. You do, to some extent, accept, at least emotionally."

...work at Sarah's has considerably changed her attitudes about men by exposing her to the extremes of male domination.

With that acceptance Vita says she began to work on the intellectual aspects of her reactions. "You start to see what you can do about it and try to analyse the systems and the services that are available, and try to think, apart from the general waiting for women to be equal, what you can do to improve things."

Vita pauses, takes another sip of tea and leans forward in her chair. "I think I'm too old to think anger's going to solve anything. The women I admire

are cool and rational and they're policy makers. They work for concrete things rather than stewing and ranting. It is because of anger that women come to the house with broken jaws."

Irritation and exhaustion are Vita's emotional reactions to work at the hostel. Time alone becomes increasingly important. "I have always liked to have a lot of solitude and my working at Sarah's has accelerated my need. Coupled with my extremely happy family life, this has meant I spend much more time at home."

When the women on the collective at Sarah's feel the need to socialize, they do so together, says Vita. "We see members of the collective socially, which is hilarious, and we talk about Sarah's. You can do that with your mate or your best lover to some extent but after awhile, you can turn them right off."

For Vita and other members of the Sarah's collective, social contact with men has become increasingly rare or non-existent. Frieda, a lesbian who has worked at Sarah's since 1982, finds that even contact with her brothers now sparks her anger.

This fall Frieda spoke to a group of criminology students about Sarah's. Their anger and indifference to the issues she raised in her talk shocked and angered her. "That made me realize what little contact I had with the 'real' world. I was really shocked at these people's ideas. The speaking engagement was disastrous. Then when I went out with my brothers and their friends, I was just so angry."

Frieda can no longer make the transition between the woman-oriented life of Sarah's and her brothers' world. "I can't float back and forth anymore. I'm just too angry at them and their behaviour and what they believe. When there's a group of them, they're like the men I see at Sarah's knocking on the door. I thought that I had reached as far as I was going to reach in terms of my anger before I started at Sarah's. I had no idea that it was changing my life until the speaking engagement this fall and then it just hit me in the face."

"It is in many ways an ideal place to work... You have a lot of control over your life when you work there and get tremendous support from all the women."

Working at the hostel has increased her rage towards men as she daily witnesses a litany of abuse. "At Sarah's I reached a point where I didn't want to be around men. I don't get angry very often but when I do I clench my fists and pounce. So in some ways, I avoid people who can push those buttons. In some ways, that's why I don't hang around with men."

It's late afternoon and Frieda and I are sharing a beer, cheese, crackers, and more beer. "It's that whole idea of separatism," she says, methodically peeling the label of the beer bottle. "I could very happily live my life without men."

Where does that anger, which is a large part of her work at the hostel, go? "Oh, it probably goes into my upper back, my shoulders," she says and smiles. "I don't know where to put my anger. Sometimes I can see directions to put it in but it's never enough—writing letters, going on demos, fighting for stuff. But it's certainly not enough."

Developing an immunity to the rage is not a solution, says Frieda. "Once I lost the anger, I wouldn't work there any more. I love going in there and exuding energy and hope and making the women there feel like there is someone who cares. It's not a one-shot deal, it's a constant. Sometimes I say, 'what is it for this woman that makes her want to keep living? For so many women, their lives are destitute.'"

Whether the women at Sarah's are leaving abusive husbands or looking for temporary shelter after psychiatric hospitalization, or wandering the streets homeless, they're all victims of an unrelenting system. "There are times when I feel that Sarah's is a band-aid. It's just like I'm not changing anything. All I'm doing is giving women shelter for two weeks and trying to hook this woman into this system or that system—assessment, referral."

The frustration is mixed with pleasure at seeing the women when they return, fed-up with the inadequate shelter the province provides. "I enjoy seeing the women. I just wish that I wasn't seeing them because they have to come and stay at Sarah's. I wish I could see them on a Sunday or they would come to visit rather than for shelter saying, 'I'm back again because my boarding room didn't have a lock on it and all the men used to walk right through it, and I was living with ten men, and we weren't allowed to eat anything after 8 p.m.—tea was the last thing we could have and that was at 8 p.m. in the evening.'"

As Vita says of work in the hostel, "It's a lot of frustration."

And recently an increasingly prevalent phenomenon has added to Frieda's frustrations, "Right now we have a whole lot of women between the ages of 18 and 22 who are lesbians. And their lives are incredibly violent; and have been for a long time."

It was a Sunday when Frieda was on shift and there were no office staff. A group of six or seven young lesbians,

"I love going in there and exuding energy and hope and making the women there feel like there is someone who cares."

who locked up their chains and knives as they entered the hostel, talked with Frieda about the violence in their lives.

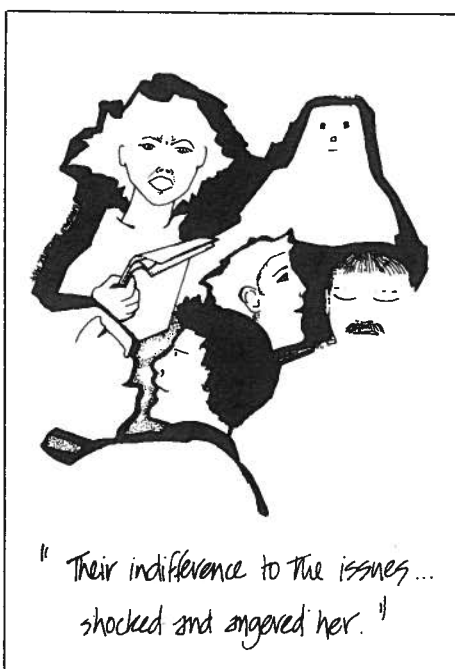
"I listened for about eight hours to what their lives are—the knives, the chains. Their best friend had been murdered and they were friends with

her lover who just OD'd and they were also friends with the woman who had just been thrown in jail. Their stories were, 'Oh well, so and so told me I should get off my pills, so I just told her to fuck off and threw her up against the wall.'"

After her 27 hour shift, Frieda went for a drink with some friends. "I was just a mess."

A few months later Frieda is still wondering how to show these women there's an alternative to their violent behaviour. "I can't tell them that it's inappropriate. I've been taught to talk and to listen to all those kinds of things. For them, their reality is you don't talk, you act."

Dealing with violence among lesbians has forced Frieda to think about her own potential for physical abuse. "I recognize my potential for violence, but



I've never let my anger go. I don't make excuses for women whose lives are predominantly violent, because they don't have an alternative. I understand it. But there are points where it doesn't always work."

While Frieda says there is no guarantee anyone can always avoid a violent relationship, she is disturbed by women who see violence as a way of solving problems. "I think I'd walk away from a violent situation before I gave my heart and soul away."

"...I used to be able to say, for the most part he's a good person, but he has some faults. But not any more."

It is easier for Frieda to understand a heterosexual woman's need to stay in a relationship. Frieda says she knows of a couple who have been together for 25 years and "they hate each other." She works nights, he works days and they avoid each other. "For them the fear of the unknown is greater than the pain of staying together."

But as her understanding of women has grown, her tolerance for their husbands and lovers has not. "I used to be fairly free and easy and casual and I've lost an awful lot of that. I know that it's because of Sarah's. And where most of it has gone is in dealing with men. I just don't have time for them. It can be one comment and then, 'I'm sorry, you're written off.' One fuck up, and ...'you lose, sorry. You're just another asshole.' I used to be able to say, for the most part he's a good person, but he has some faults. But not any more."

Vita, on the other hand, is less harsh toward men. She talks to her lover about feminist issues, but his response is sometimes frustrating.

"When I discuss things with Bob, he thinks that a lot of feminism is sexist and a lot of what comes out of Sarah's collective, or what he hears anyway, is very sexist. So he thinks that's unfair, and it's not objective at all. So we argue a lot about those sorts of things. It's very hard. Especially given the kind of work we do—it tends to put one rather to one side."

"Well," says Frieda, "I'll leave the men up to other women and hopefully soon to men, to educate themselves."

Emma has worked at Sarah's for almost eight years and a few years ago made the decision to be celibate. She says working at the hostel has not changed her relationships with or attitudes towards men.

"It is in many ways an ideal place to work... You have a lot of control over your life when you work there and get tremendous support from all the women."

"I can remember when I had a relationship with someone while I was at Sarah's and it was wonderful and everything. But I used to get a little bummed out. I don't think I would feel that way anymore. I just recognize that some guys are real jerks—they seem to be the majority—and then there are a few really special guys who are really all right and all right about their sexuality."

Emma is quitting smoking and to keep her hands busy she's doodling, drawing rough pictures of women's faces on a large sketch pad.

"There are times I've made the conscious choice to be celibate. At times, yeah. At times there just wasn't anyone around that I was attracted to. Right now, I would say celibacy for celibacy's own sake. Relationships are nice but when Germaine Greer said 'no sex is better than bad sex,' I couldn't agree more."

Despite the exceptions, Emma says she feels men are basically inferior to women, not because of their capacity for violence but because of their incapacity for sensitivity.

"My husband used to be quite violent for a little while. He was an extremely volatile man—he's doing time right now in the pen. The only reason I put up with the violence was he had had a wretched life and he didn't know any better. I've thought about violence; I thought about it when we had fights. I tried to figure out how some women don't seem to mind the fighting—the rough stuff."

"Working with a collective is a new experience and I find that terrifically stimulating."

Emma shares the frustrations of hostel work her co-workers experience. "It gets so bloody depressing all the time. It's like when I talk to a woman at Sarah's, on the phone usually, and they're talking about being beaten, sometimes I have to bite my tongue."

Sometimes I can't. When they say 'I'm afraid he's going to kill me,' I say, 'why don't you kill him first?'"

It was a relief to quit Sarah's full time because I'm one of those ones who speaks their minds. And I always do. I can't otherwise. I would go to jail if I hit someone who abused me—it's worth it. You know, we've got to show our strength," says Emma.

"I listen, and sympathize with the women and say, 'yea, keep trying, don't feel bad,' all those sorts of things. So I find that really difficult at Sarah's. I don't like to hurt anybody. I think if it wasn't for the violence I have experienced with men, I would be an incredibly different person. I think I'd be less angry."

One of Emma's hobbies is playing pool and while she harbours great anger towards men, she can still enter their world on her own terms. "There's a lot of stuff that I can really relate to with men, macho men too. Because we can talk; because we have those common grounds—fighting, shooting pool and all that garbage. I can really talk to those people and they'll listen. I've had so many men come and say, 'thanks, you've changed things so much.' That's why I do it—I can raise the consciousness of these men."

Despite the exhaustion and the frustration all three women experience, Sarah's also inspires, politicizes and rejuvenates them.

"Working with a collective is a new experience and I find that terrifically stimulating," says Vita. "Women on the collective are incredibly considerate."

Few women have access to paid work that is feminist, political and engenders such optimism and hope.

"It is in many ways an ideal place to work," says Emma. "You have a lot of control over your life when you work there and get tremendous support from all the women."

Julie Wheelwright is a fourth year Canadian history student at the University of Toronto. She is a former writer for the Vancouver Status of Women's newspaper, Kinesis, and a Healthsharing collective member.



SILENCE MEANS DISSENT

Andrea Dworkin on Women & Pornography

The Symposium On Media Violence and Pornography held in Toronto February 5, 1984 proved to be a day of information, enlightenment and controversy. According to the organizers, the day was to be a "historic bringing together of researchers and other concerned people who perceive a link between depicted violence in the media, the mounting violence in society and the harm done to victims of that violence.

While the goal of the conference was commendable there was a great deal of controversy surrounding the process. The choice of speakers, mostly American male experts (doctors, psychiatrists and police) ignored our feminist analysis, anger and activism. In addition the printed agenda for the day requested that all speakers refrain from raising potentially divisive issues, specifically abortion and homosexuality. Responding to this "request" a group of 20 American and Canadian women took over the stage to deliver a bilingual message to the conference: "The denigration of lesbianism as a sexual choice and the denial of reproductive control to all women are both part of this pornographic system in which women are denied self determination. Any attempt to address pornography that does not address this system as such, or actively or passively would permit any part of it to remain unchanged, does not address what pornography is and what it does."

In the end, the afternoon belonged to the women, the women who had taken over the stage and made their statement, the women in the audience who supported and applauded their stance and the individual women like Andrea Dworkin, who delivered speeches that we won't soon forget.

Linocut by Susan Barsel

I AM CONCERNED that there are women, local women, who have been working on the issue of pornography and who have been excluded from this conference for economic reasons or for what may be political reasons, while American feminists have been flown in at great expense. I am concerned that the only panel that had primarily women on it was originally scheduled to go last. We told Mr. Scott, a conference organizer, that it wouldn't even be seen by most people if it went last. It was first moved up in the day, and then not only moved back to the end but collapsed into another panel. This is relevant to my theme; it has everything to do with the fact that when things happen to women, it really doesn't matter very much to very many people.

As a feminist I have been organizing against pornography for a long time. I am very grateful to the research community, which has taken feminist theory seriously enough to try to see if in fact pornography does harm to women. I say that because I am entirely outraged that someone has to study whether hanging a woman from a meat hook causes harm or not. We are grateful to the research community out of our despair and our devastation, because mostly we are silent, and because when we speak up, nobody listens. We know how to quantify, we know how to count, we can show you the dead; yet it doesn't matter if it comes from us. Objectivity, as I understand it, means that it doesn't happen to you.

There are women researchers who are trying very hard to bring what they know as women into their research. There are male researchers who have paid attention to what we have said. I am not dismissing them, but I am saying that we are living in a society where you can maim and kill a woman, and there is a question as to whether or not there is a social harm. Somebody has to study it to find out.

WE KNOW THAT MEN like hurting us. We know it because they do it and we watch them liking it. We know that men like dominating us because they do it and we watch them enjoying it. We know that men like using us because they do it, and they do it, and they do it, and they do it, and they do it, and they do it. And men don't do things that they don't like, generally speaking. They like doing it and they like watching it and they like watching other men do it and it is entertainment and men pay money to see it and that is one of the reasons that men make pornography. It's fun.

Now, what we know is — the "we" being women — that there are people that it is fun for, and there are people that it is not fun for, and that women are the people it is not fun for.

Pornography is the sexualized subordination of women. It means being put down through sex, by sex, in sex, and around sex, so that somebody can use you as sex and have sex and have a good time. And subordination consists of a hierarchy that means one

person is on the top and one person is on the bottom. And while hierarchy has been described in beautiful ideological terms over thousands and thousands of years, for us it is not an abstract idea because we know who is on top. We usually know his name and address. Often we do. So we understand hierarchy, and this is a hierarchy that has men on the top and women on the bottom.

Subordination also consists of objectification. Objectification is when a human being is turned into a thing, a commodity, an object — someone who is no longer a human being. They're used, because they're not human like the other people around; and that frequently happens on the basis of their race or it happens on the basis of their sex. It happens to women on the basis of both.

AND SUBORDINATION ALSO consists of violence, overt violence — and it's not just violence against people. It's violence against women. It's violence against children who are very closely connected to women in powerlessness. It's violence that isn't such a mystery. Crazy maniacs don't do it. People who have power over other people do it. Men do it to women.

Now, if you take hierarchy and if you take sex and if you understand that hierarchy is very sexy, then what you have is a situation in which people are exploited systematically; and they are exploited in such a way that everyone thinks it's normal. The people who are doing it think it's normal. The people to whom it's done think it's normal. The people who report about it think it's normal. The people who study it think it's normal. And it is normal. That's the thing about it — it's actually normal. It doesn't make a difference if it happens in private or if it happens in public, because women are primarily hurt in private. Now that pornography is out in the world, where it is an officially established form of public terrorism against women, we think we are dealing with something that is qualitatively different from anything we have ever dealt with before. This is, in fact, not true, because the pornography gets acted out on women whether women see the pornography or not. This is because men use the pornography when it's criminal, when

it's illegal — they still have access to it, they still use it, and it still has all the consequences that you heard about today and those consequences are acted out on the bodies of women.

I WANT TO TALK ABOUT social subordination, because women are not equal in this society and one of the

ways that you can tell is the quality of our silence. The Three Marias of Portugal said (and they were put in jail for saying this) silence does not mean consent: silence means dissent. Women are the population that dissents most, through silence. The so-called speech of women in pornography is silence. Splayed legs on a page are silence. Being beaver, pussy, cunt, bunnies,



pets, whatever, that is silence. The words that women say in pornography: that is silence. "Give it to me," "do it to me," "hurt me," "I want it bad," "do it more": that is silence. And those who think that is speech have never heard a woman's voice. I want to tell you that even those screams, even the screams of women tortured in pornography, are silence. Men pay money and watch, but no one hears a human scream. They hear silence. And that's what it means to be born female. No one hears you scream as if you are a human being.

Catharine MacKinnon and I wrote a civil rights bill that makes pornography a form of discrimination based on sex and a violation of the civil rights of women. We hallucinated those rights in a frenzy of hope, in a delirium of dreaming. We hallucinated that women could be recognized as human beings in this social system. Human enough even to have civil rights. Human enough to be able to assert those rights in the face of systematic sexual exploitation, brutality and malice.

So human, in fact, that one would not have to study it to see if any harm is done when a woman is tortured. So human that no one would have to study it to see if harm is done by long-term pervasive systematic exploitation, dehumanization, objectification. So human that one could actually assume as a premise throughout life — not just today but seven days a week all year long, forever — that when a woman is being tortured, or even only exploited or even only used and used up, that a human being is being tortured, exploited, used and used up, and that that constitutes harm to a human being. You don't have to study it. It's happening to a human being so it constitutes harm to a human being.

WE DREAMED THAT WOMEN might be taken to be so extremely human that one would know, even without laboratory evidence, that when a woman is diminished in her integrity, in her rights, humankind is diminished because of it. And we thought that it might even be possible that a woman could be so human that even the law, which is not big on recognizing human beings, might recognize her as being human enough to deserve equal protection under the law. Just that human,

not a smidgen more, just that.

That's not even equality; That's not as human as men, not really, not entirely. That's not asking for much, is it? So human that when the pimps, the parasites sell her and coerce her and rape her and destroy her and abuse her and insult her — so that men can be entertained by her exploitation and abuse — that those pimps and those users will have to face her in court for violating her human rights because she is a human being.

Pornography is at the heart of male supremacy and that is true whether the pornography is in public or in private. When you see pornography, you see male supremacy; and if you look around you and you see male supremacy, you had better believe that you're seeing pornography even if you don't know where it is in the room. The goal of feminists who are fighting pornography is to end the hierarchy, the objectification, the exploitation: the dominance of men over women and children.

AND WE ARE GOING TO DO IT. I want to tell you this: if you love male supremacy but you abhor pornography, then you do not abhor pornography enough to do anything about it. Some people don't want pornography to be seen in public because it shows some very true things about what men want from women; for instance: dominance, power over women, women's inequality, the use of women as sexual objects. It also shows what men do not want women to have: humanity, integrity, self-determination and complete and total control over our own bodies. We need these so we are not used, so that we are not forced into sex, forced into pregnancy, forced into any sexual relationship that is not our choice.*

It's important to understand that the feminist movement against pornography is a grassroots movement against male supremacy. We are going to settle for nothing less than full social and sexual equality of the sexes. We are going to get whatever institutional changes have to be made to accomplish that. We are going to get self-determination for women. We're even going to get something that people call justice.

I am wondering, and I think it is worth thinking about, what justice

would look like for the raped and the prostituted, and I would like to know how afraid men really are of what that justice would look like. For instance, would it look like *Snuff*? Would it look like *Deep Throat*? It might. Study that.

We are going to stop the pornography in the shops and in our lives, when it's written down and when it's acted out, and we're going to do it one way or another. Before I came here on Thursday night, another victim story reached me — another one in twelve years of listening to women who have been hurt by pornography — from a woman who had been tied up, raped, photographed. The man had made hundreds of pictures of her, he had made hundreds of pictures of other women, he had a list of names of the other women he was going to assault. She went to the police; they didn't do anything. She went to some people who knew the man; they didn't do anything. Nothing, nothing, nothing. That is typical. What he said to her when he tied her up, after having raped her and having started photographing her was, "Smile or I'll kill you. I can get lots of money for pictures of women who smile when they're tied up like you."

I want you to think about the way women smile. I want you to think about it every minute of every day, and I want to suggest to the men in this audience, in particular, that you had better be afraid of women who learn to smile at you that way.

*Feminists took over the stage at the conference to demonstrate for reproductive rights and lesbian rights, the denial of those rights being (in common with pornography) sexual colonization.

Andrea Dworkin is a radical feminist activist and author of five books including On Pornography: Men Possessing Women, and Right Wing Women.

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MY STORY, OUR STORY

My story, our story, is every woman's experience — our collective experience — with health.

Memories of a Nightmare

Initially, there was no clue of what the relationship would become. No one had ever been violent toward me. Fear became a part of life abruptly and without warning. The first time my boyfriend (call him David) picked up the bread knife and threatened me with it at the dinner table, I was stunned and uncomprehending. There was no apparent reason for the occurrence. No argument, no particular tension. It was like flicking a light switch on and off: good/bad/good. It seemed unreal. It was real, and quickly became routine. Many nightmarish scenes. Hurting accompanied by laughter. Never any explanation why it happened; never even the admission on his part that anything had happened. If I was upset after an incident, as I always was, then I was upset about nothing, which was crazy. As far as he was concerned, there was no problem — with him or his behaviour.

I was very isolated. At that time, I had just finished university and started a job. All of my close friends had finished school at the same time and had moved to other cities. There was no one around I knew well and I didn't know how to tell anyone that something so wrong was happening to me. I became too upset to pretend. I told a couple of people—friends—but they seemed to become angry at me when they found out bits of what was going on. The solution was simple in their eyes: leave. And I agreed that I should. I knew I should.

I didn't; I couldn't. The awfulness was tangled up with concern and caring and warmth. I wanted those good things and I felt I was being destroyed by the bad. It was like being with two people. Sometimes I lay in bed and saw myself—a tennis ball being smashed across the room between two different Davids.

I made excuses: "He's worried about

school right now." "He's still upset about his father's death." "He really doesn't like this city." "It's hard for him to adjust." Et cetera. And I blamed myself: "I'm not a good enough lover." "I'm not a good person." It seemed I must be very terrible for someone to treat me so terribly.

Time went on and days replayed themselves, the scenes repeated and time became very mixed up. I started to expect I would be killed, started waiting. It seemed inevitable. I didn't feel like a person any more, just a mess of confusion and fear and hope (foolish, futile hope) that the awfulness would just stop, as suddenly as it had started, and everything would become magically fine again, I could never really see how I was failing, but the attacks seemed to be proof of my inadequacy, just because they happened.

Eventually, something snapped. There was too much hurt. I had never wanted to harm anyone in my life, but I wanted to make David admit he was hurting me, so I tried to hurt him. It was a pretty ineffectual attempt which he treated as a joke.

He took off to another city, abruptly, and decided not to come back. End.

The awfulness should have ended then, but it didn't. By that time, I was not functioning very well, was having trouble sleeping and concentrating at work and was ill a lot. For a month or so, I drank quantities of coffee, trying to keep myself in motion, drank liquor and took Valium, trying to numb myself, to distance the memories. Finally I couldn't move, couldn't be sufficiently numb, couldn't... anything.

Someone took me to a hospital, where a psychiatrist referred me to the out-patient psych clinic. It seemed like a reasonable idea at the time.

The (female) therapist I was assigned to at the clinic didn't seem to want to hear what had happened to me, beyond the bare fact that there had been violence in the relationship. She was, I think, the first person I ever tried to tell in detail what happened. The message I got was; you're not supposed to talk about it; it is not important. Well, she was the therapist. I mistrusted me. So I spent two and a half years in therapy with this woman, memories that felt like torture. I couldn't stop remember-

ing, I had several admissions to hospital, was given a variety of drugs. I wanted to die; I wanted to end the pain.

I got a job in a women's centre. I learned that violence had been part of other women's lives. Connection. I finally started trying for myself to figure out what had happened to me and why it continued to hurt.

Not accepting silence any longer, I raised the issue with my therapist. She told me that I had been abused because I was self-destructive and unconsciously or subconsciously wanted to be hurt. I don't know if that was a full-fledged theory or something she tossed out off the top of her head. When I argued that it didn't happen that way—I had been feeling okay, David was not at all violent or verbally threatening at first—she told me I was wrong.

She insisted that I had known and recognized David's potential for violence all along and had chosen him for that reason. She never met me, before or during the relationship; she never met David; but she sat there and told me my memories were wrong and her speculations about what happened were right. She had reconstructed my life in her head, and if I didn't agree, I was just denying the truth because I couldn't face unpleasant aspects of myself.

It was pretty incredible. My career as a psych patient ended a couple of months later.

After trying not to remember came trying to understand. I was angry and frustrated at my behavior. I did not understand why I had not gotten out of an obviously destructive situation. It seemed I had been very stupid, but I knew I wasn't a stupid person. There were no financial or legal hassles involved in leaving. I had not wanted to be abused. I had not anticipated it when I entered the relationship, and I didn't see, finally, how I could have provoked it. So—why?

As I thought and remembered, talked and listened and read, I began to see that the paralysis of the soul that took away my instinct for self-preservation was rooted in dependency. Funny — I had thought I was independent, strong, mature, liberated, but something in me had absorbed the belief that I was not complete without a

man's caring, a man's validation of my existence. So, I had a need to maintain the relationship, whatever its costs. The failure of my life with David seemed to be my failure, my inability to be a good woman in many specific ways. I felt responsible but unable to change his treatment of me.

To realize and accept that I had been battered, not bad, turned out to be both a crisis and a turning point. The re-thinking brought too much remembering, and many of the horrible scenes came back, real and immediate—the hurt, the fear, the sense that death was imminent. But this time the memories also brought anger. I felt murderous rage toward David for his cruelty, not at all the blind hurt that had once urged me to repay violence with violence. Bits of strength came also, as for the first time I was able to talk about that part of my life without being overwhelmed by horror; as I understood that what happened did not happen to me alone. Connection was important. Only then did I really hear what David had told me years earlier—how he had been cruel and abusive to other women. I hurt for them and I was terribly afraid that others had followed me. Sometimes that seemed like my fault, but I

could never figure out what I could do to stop him from hurting someone else.

I finally found people who helped me take some of the hurt out of the memories. It has been a slow process.

There is some connection between being hurt and hurting myself; something about deserving to die/be killed. Making the link has made it easier to decide to be alive.

After five years, I still have much fear and little ability to trust. For a long while, I kept people away. Mostly, I kept away from people, and I thought the fear had faded. Distance is a reasonable defense, but distance is also isolation and brings with it other forms of hurt. Trying to become re-connected to people, I have found the contact with people, especially men, is mixed with images of violence. A sense of safety is almost impossible. I can think, can judge, that a person will not hurt me, but images intrude. There are very few people I trust enough to believe that they will not, someday, suddenly, want to hurt me. There are some people, now, and I can have friends, but not lovers. I don't have enough freedom from the terrifying link between intimacy and attack. I don't know if the

fear will ever go away, trust become more possible. Things have changed to an extent, and I hope they will continue to change. It is not a pleasant way to live, but I do not know, intellectually, how to get rid of the images the past has given me.

I think about the women who live in violence.

I try to write: because it is a way of seeing; because it used to be a big part of life, a good part, and I'd like to feel competent to write again; also because for too long I didn't know that what happened to me was related at all to anyone else's experience, and that kind of isolation should not be. So I try to write, but negative messages interfere—you're stupid; you're screwed up; you have nothing to say that's worth saying. I feel ashamed that the past has so much presence in my life. Sometimes, it seems that it's just my weakness; that it's wrong to feel hurt/feel changed/feel diminished; that it was only a short time and it should not matter anymore. Other times, I feel strong and I'm not angry at me for being hurt by the hurting that happened.

Many internal battles keep being fought, over and over.

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Life on the Street

Hookers on Davie, Pan-Canadian Film Company (Cineplex) produced by Janis Cole and Holly Dale, 16 mm, colour, 86 minutes, 1984.

Reviewed by Phyllis Jensen

Making a documentary film on prostitution is truly a tricky business. In the process of humanizing the women there is a tendency to overlook their situation and a new kind of romanticism takes over. This is what has happened in the latest film of Janis Cole and Holly Dale.

Gone are the naughty but nice girls dressed in the luxurious clothes and surrounded by the handsome powerful men in the Hollywood set; in comes the feisty independent streetwalker. It's hard not to like her and so we tend to gloss over what she does.

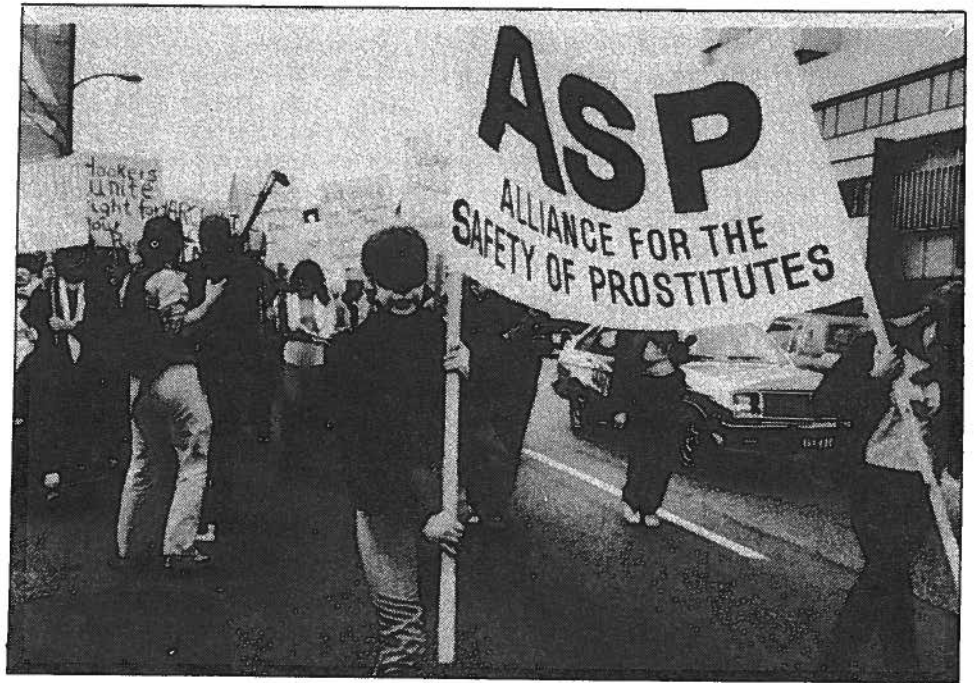
Hookers on Davie begins with lines that tell you it is a unique setting. It is the street's uniqueness of being almost pimp free that gives the women the freedom to talk and be filmed. But because it is rather impossible to get parental permission to film juveniles, many of whom are runaways, we don't see this aspect of the streetlife.

Most prostitutes start young and vulnerable and when not taken up by pimps, they are often protected by older hookers who try to get the kids off the streets. It's not just because the kids are competition, being the current favourite of the well-heeled and respectable johns. It's because it's a terrible life.

All hookers in the film want to get off the streets for none sees a future there. The problem is that they can't see any alternatives where they can earn equivalent money—the perennial problem of underpaid women's work.

Michelle and Tiffany, the two likeable transvestites who become the spokespersons for the women, are the main strength of the film and paradoxically also its greatest weakness. In a kind of Craig Russell *Outrageous* act they parody the female hooker which gives us a false idea while providing comic relief in an otherwise grim scene.

One attractive mother of a seven-year old child (who hasn't been told



what mummy does) rationalized prostitution as just another form of work with an image problem. But it's much more than that. Street prostitution is dangerous and degrading work that often leads to heavy use of drugs and alcohol to deaden the pain.

The film tends to probe too deeply into the hookers' turbulent backgrounds, making it difficult to gauge how much mental chaos is created by the reality of their present work. Such a focus tends to reinforce the idea of prostitutes as "problem people" and "throw-away-women." In the film the portrayal of "working" is limited to endless hanging out on the same street corners and cafes with a bunch of amusing friends who occasionally fly off the handle with everything forgotten the next day. While hanging around and soliciting are a large part of the practice of prostitution, it's only one part.

There is no exploration of the revulsion the hookers feel toward the men—the way they smell, how they act, what they look like and what they want done. Apart from one discussion of half-and-half (a blow ending with a lay) where the hooker's disdain for the trick comes out, there is no understanding of the subtle ways that prostitutes develop to protect themselves, such as learning how to use their tongue to slip a condom onto a man without his knowledge and "cutting off" their minds by thinking only of the money or anything else than what they are doing. They do this because hooking isn't fun,

it's agony. By ignoring these aspects of the work the film gives the appearance that "it ain't so bad."

Why then the need for ASP (Alliance for the Protection of Prostitutes) which publishes a description of men who have shown violence towards the women. ASP is totally unique to Davie Street in Vancouver. So is the system of buddies, the copying of license plates and the reporting of delays in the return of their sisters. These unique aspects of Davie Street were not brought out in the film. The film's focus is instead on the dangerous trick sheets which are distributed regularly which provide not only contact with the hookers, but a forum for political action such as the march against criminalization of prostitution.

I wanted to know more about ASP. How did it get started? Who are the people who handed out the sheets? How does the organization work? With that kind of information this film could be a learning experience for others caught in the web of prostitution, likely a thicker web than that of the independents on Davie Street. While customers are a constant threat of violence to the hookers, it is the pimps who carry out routine and horrific violence.

Michelle's mother bravely touched on the despair many of us feel about the present working conditions of prostitutes when she said that "it gives the male population a license to murder." Prostitution is not only a destroyer of bodies but also of self-respect. Our

problem as feminists is how do we support these women? How do we build solidarity with them?

These are questions Janis Cole and Holly Dale did not address and so for many the film is simply voyeurism. While one must commend them for trying to get an authentic portrait of street prostitution by filming on the spot, it might have been better to pay actresses and actors to play the parts and so explore the entire experience of "the life." Maybe then we would have the knowledge we need to respond to their needs.

Phyllis Jensen worked as a research associate on the Badgley Committee on Sexual Offences Against Children and Youths. Child prostitution was one of many areas investigated. Currently she runs SMOKEFREE a program that teaches women how to quit smoking.

Straddling the Fence

Pornography and Prostitution: issues Paper, prepared by the Special Committee on Pornography and Prostitution available from the Department of Justice, Communications and Public Affairs, Ottawa, Canada, K1A 0H8.

Reviewed by Lisa Freedman

One tends to pick up the Fraser Committee's Issues Paper on Pornography and Prostitution with slightly veiled skepticism. What innovative solutions will a committee, appointed by the Minister of Justice for Canada, be able to pen? After all, their appointor has already deemed prostitution this country's number one public scourge (so much so that we must clean up the streets at all costs), with pornography running a close second ("but let's not get rid of the stuff, let's just get rid of some of it—just the stuff that is immoral or should that be violent, or do I mean the stuff that degrades women?").

Mr. MacGuigan has already introduced amendments to the Criminal Code dealing with these two areas. To then appoint a committee to study these issues seems a colossal waste of the Committee's time, not to mention public monies ("here is your answer, now go out and get the information to support me") and an abuse of the par-

liamentary process. Why appoint a committee if the outcome is a fait accompli? Alternatively, why introduce legislation if one doesn't even know what the issues are?

The final report is due by December, 1984. In the meantime the Issues Paper is meant to acquaint Canadians with the questions and problems posed by pornography and prostitution. More specifically the committee will be investigating the following:

- access to pornography, the effects of pornography, and what is considered to be pornographic in Canada
- the problem of prostitution in Canada, with particular reference to loitering and street solicitation, the operation of bawdy houses, living off the avails of prostitution, the exploitation of prostitutes and the law relating to these matters
- and the public's views on ways and means to deal with these problems

The Issues Paper covers all of the players in these debates. With respect to pornography, they hope to look at the consumers (what is the lure of pornography, and to what extent, if at all, do consumers of porn suffer in terms of their view of other human beings), the participants (to what extent are the participants required to perform against their will and/or subjected to actual physical, psychological and emotional harm) and society in general (to what extent if any, does exposure to pornography lead to an increase in sexual offences, violent crimes and aggressive anti-social behaviour).

The same analysis is repeated with respect to prostitution. At the consumer level, the committee recognizes the double standard operating between customers and prostitutes, such that the purchasing of sexual services is seen as normal and acceptable behaviour while the provision of such services is deemed deviant. With respect to society, it is preferred that street solicitation causes public nuisance problems, including harassment of women who are often mistaken for prostitutes and are harassed by men shopping for sexual services. The paper does at least point out that it is not the prostitutes themselves who are solely responsible for these and other problems.

The Committee has found (from where I don't know) a firm tradition in this country of upholding the right to personal liberty. Now "when the exercise of personal liberty leads to harm to

the rights and interests of others, the state is, of course, justified in restricting personal liberty, not only to mitigate the harm, but also to emphasize the importance of social responsibility." The Committee frames the question in terms of the kind of harm to the rights and interests of others caused by pornography and whether such harm is sufficiently serious to warrant legislative or other governmental response. Some of the harms of pornography that the Committee parrots are: exposure to porn will lead directly to an increase in sexual offences, violent crimes and aggressive anti-social behaviour; exposure to porn will diminish the dignity and status of women; and over the long run exposure to porn will undermine the values essential or important to society, which in turn will lead either to the ultimate disintegration of society or at least to a less desirable kind of society.

The harm discussed with respect to prostitution reflects two very different ideological views. On the one hand, prostitution is seen as a threat to society's moral standards and in particular the sanctity of the family unit. The other view is that prostitution quite specifically harms society by harming women.

What does the Committee propose to do? As this paper is just meant to raise issues for discussion, the Committee outlines three options available for both areas. The first is criminalization which involves the use of criminal sanctions. The second is legislation which entails the use of regulatory schemes. The third is decriminalization which involves the repeal of existing criminal legislation.

Here, as in the rest of the paper, the Committee provides something for everyone to think about. This, in and of itself, may give us a hint as to what the Committee will recommend. Given the divergent views on these subjects, don't be surprised to see recommendations which try to straddle all fences and in the end fail to satisfy anyone.

Lisa Freedman is currently doing research in the area of pornography.

LETTERS

We reserve the option to print letters to *Healthsharing* with minor editing for length, unless they are marked "not for publication."

In Defense of Self-Help

I was disturbed to read the derogatory remark about self-help groups in *Through the Medical Maze, Healthsharing* (Spring, 1984): "I refused the self-help groups because I wasn't interested in playing 'True Confessions'."

Self-help groups have become an integral part of our health care system and numerous people are volunteering their time and energy to vital causes. People are given an opportunity to learn what "professionals" do not take the time to teach. They are able to share information, exchange ideas and, perhaps most importantly, in a world where relatives and close friends may be miles away, they are offered emotional support when they need it from people who genuinely care.

I work with so-called "professionals" on a daily basis and, after twelve years in the health care field, I can say that many of them have less empathy than stones and even less common sense. Let us not depreciate those dedicated people involved in self-help groups simply because they may lack half an alphabet behind their names.

Mary Margaret Steckle
Toronto, Ontario

Author Defends Book

I'm writing to clear up some interpretations in the review by Ms. Holtz of my book *You Don't Need To Have A Repeat Cesarean* (Winter, 1983). In response to the statement that the book lacks seriousness and is in some way not responsible: the medical findings within it regarding the safety and feasibility of vaginal birth after

a prior cesarean are well-documented. They are virtually the same findings as the National Institute of Child Health and Human Development (Bethesda, Maryland) and the *Journal of the American Medical Association (JAMA)*.

You Don't Need... is to be listed in *JAMA* and *Current Literature In Family Planning*. It is a selection of the Registered Nurses' Book Club; so it is taken seriously by members of the medical profession and health care community.

The anecdote about my Lamaze Class' reaction to the question of the worst consequences imaginable of labor and delivery was misunderstood by Ms. Holtz. The spontaneous answers of cesarean birth followed by infant or maternal death and then birth defects were not a real indication of the class' priorities. I told the story simply to illustrate how strong feelings were running against the idea of surgery.

The United States is one of the few countries where repeat cesarean is routinely practiced. (The U.S. rate is 98-96%, whereas in Britain it is around 12%). Yet, the reason for so many surgical deliveries—to improve infant and maternal morality—is not proven and does not take into account other factors such as improved prenatal and neonatal care, as well as better care of premature infants.

VBAC (vaginal birth after cesarean) is considered by many medical authorities (the above mentioned ones, for example) to be far safer than an automatic repeat cesarean when there is no new indication for cesarean other than the fact one was previously performed.

Supported by my research, medical authorities, and other VBAC mothers, I approached my VBAC as safer than an automatic repeat cesarean. This was not a "political" statement as Ms. Holtz implies, but a purely personal one. Besides wanting to share the birth of our child with my husband, my primary motivations were to avoid major surgery and its attendant pain, and to shorten my recovery period so I would have

more energy to care for my three-year-old and a newborn baby. I expressed these motivations in the book. But we had also planned for a cesarean if labor had not progressed. Chapter Six relates the cesarean operative procedure in detail (pp. 92-95) as well as indications for surgery, and options for elective repeat cesarean. Ms. Holtz says scant attention was given to the cesarean operative procedure itself.

More than once (pp. 35, 45, 68, 181, for example) the fact that a cesarean might be a necessary and/or lifesaving operation was mentioned. Ms. Holtz cautions that we not "forget" this fact.

Cesarean is a valuable birth alternative when it is necessary, but when it is not, it should be as discouraged as any other unnecessary surgery. The many reasons for the rapid increase (over one million cesareans performed in the U.S. this past year) are discussed, such as outdated medical knowledge, fear of malpractice, greater convenience for the doctor, greater financial incentives.

I believe many women would choose to avoid surgery if they were aware of the alternative. Far from being a "fairy tale" as Ms. Holtz suggests, the information about the option of vaginal birth after cesarean is very "real" good news to these women.

Nicki Royall
Williamsburg, Virginia

Circumcision in Canada?

I was interested to read the letters concerning genital mutilation in the Winter '83 issue.

Female circumcision has been performed in Australia, under the national medical insurance system, on Muslim "New Australians" and in Britain, by both lay and medical practitioners. To quote from the English feminist paper *Outwrite*, "...there have been cases where surgeons have been reluctant to unstitch circumcised women giving birth and performed caesareans instead, when there has been no ground for it whatsoever."

A bill banning female circumcision in all its forms may soon be passed in Britain. This bill poses foreseeable problems because African and Arab women in Britain were not involved in its formulation.

There is no reason not to assume that some female genital mutilations are performed in Canada, either at home or in hospitals. Such operations are medically unethical and constitute yet another expression of violence against women. Besides our responsibility to support women elsewhere in determining their own strategies for change we have a responsibility to find out just what is going on in our own country and how best to support women who may be subjected to this particular form of control over our sexuality here.

Further information and literature is available from *Forward*, a group fighting against female circumcision and for the advancement of women in the Third World, c/o Efua Graham, The Africa Centre, King Street, London WC2, England.

Alicen Keamarden
Smithers, B.C.

Healthsharing Praised

Recently a friend shared with us the article about our First National Conference on Black Women's Health Issues (see *Healthsharing*, Spring 1984). We were very pleased.

Several articles have been written on the conference, but the interview by Makeda Silvera with Erica Mercer, was one of the most concise, detailed, informative and moving (Ms. Mercer's account of her experience in the "Black & Female..." workshop) that we have seen so far.

The linocuts by Susan Barsel were excellent and greatly enhanced the article. We also publish a newsletter and would like to print Ms. Barsel's linocuts in our next issue.

Byllye Y. Avery
Black Women's Health Project
Atlanta, Georgia

RESOURCES ON VIOLENCE

The Canadian Advisory Council on the Status of Women Publications

The CACSW has published a number of works on violence against women. They are all available free of charge. Publications include two fact sheet brochures on rape and wife battering, a very informative book by Linda MacLeod called *Wife Battering in Canada: The Vicious Circle*, and two major reports on wife battering and sexual assault. Write CACSW for these publications and for their publications list at P.O. Box 1541, Station B, Ottawa, Ont., K1P 5R5; (613) 922-4975.

Education Wife Assault

Support Services for Assault Women changed its name to Education Wife Assault in 1983, to reflect its primary goal of education of agencies, government services and the public on the issues of wife assault as a societal crime. In addition to doing public speaking and workshops, EWA has an extensive publications list that includes articles, handbooks, pamphlets and education sheets. Their work is from a clear feminist perspective and addresses many of the complex issues in this field. One of their brochures directed towards the assaulted woman or her friends or family is available in ten languages. Contact Education Wife Assault at 427 Bloor St. W., Toronto, Ontario, M5S 1X7 or call (416) 968-3422.

Sexual Assault Legislation: Critique

Kinesis, the newspaper of the Vancouver Status of Women ran a series of articles critiquing the new sexual assault law, Bill 127. The four issues they examined were: consent and honest belief, past sexual history, the definitions of sexual assault and statutory rape provisions. Ask for the issues Oct'82, Nov'82, Dec/Jan'83 and Feb'83. Write *Kinesis* at the VSW, 400A West 5th Ave., Vancouver, B.C., V5Y 1J8 or call (604) 873-1427.

Vis-à-vis

The National Clearinghouse on Family Violence provides information and consultation to individuals working in the areas of child abuse and neglect, wife assault and abuse of the elderly. Their quarterly newsletter, *Vis-à-vis*,

contains articles, reviews, a conference calendar and bibliography each issue. It is published in a pleasant, easy to read format, in both French and English. Write to the National Clearinghouse on Family Violence, Department of National Health and Welfare, Ottawa, Ontario K1A 1B5 to be put onto their mailing list at no cost.

Canadian Woman Studies/les cahiers de la femme: Violence Issue

The Summer '83 issue of CWS/cf examines violence against women in articles, reviews, fiction, poetry, humour and reports. Topics range widely, including sexual harassment, pornography, violence in fairy tales, sexual assault law, incest, and wife assault. Pieces in English have French abstracts and vice-versa. The 114 page issue is available for \$4 from Suite 204F, Founders College, York University, 4700 Keele Street, Downsview, Ontario, M3J 1P3 or by calling (416) 667-3725. Bulk orders available at reduced rates.

Wen-Do, Women's Self Defence

Wen-Do is a system of self defence that was specifically designed for women. It teaches practical releases from common chokes and holds, and counterattacks to vulnerable body targets. In addition to physical techniques, there is an important discussion component to the course: our fears about fighting back, myths about rape and wife assault and verbal self defence among others. Taught by women in a supportive atmosphere, women of all ages and physical abilities are encouraged to discover their inner and outer strengths. Check your phone book or write to 2 Carlton St., Suite 817, Toronto, Ontario, M5B 1J3, or phone (416) 977-7127 for locations across the country.

Family Violence Prevention: Audio-Visual Resources

The Family Violence Prevention Program of the Ontario Ministry of Community and Social Services has made available for borrowing, eleven films and videotapes. They have published a small catalogue in which the resources are described, and for what groups

they are recommended. Titles include: *Deck the Halls*, *Do I Have to Kill My Child?*, *Killing Us Softly*, *the Rites of Violence* and *To Have and To Hold*. The films can be borrowed free of charge; shipping arrangements are your responsibility. For their catalogue, or for more information, contact Frances Pendrith, Co-ordinator, Family Violence Prevention Program, Ministry of Community and Social Services, Room 337, 3rd Floor, Hepburn Block, Queen's Park, Toronto, Ontario, M7A 1E9; (416) 965-4332.

Fresh Start

This small book (71 pages) is a very practical and supportive guide to women who are currently with, or are leaving partners who are abusive. The author Joan LeFeuvre delivers the clear messages that you are not alone and that you are not responsible for the abuse. Useful information on how to help yourself while you are in the relationship, what to do in crisis times and steps to take to leave, including legal specifics, jobs, housing and children are all covered in a supportive and non-judgemental manner. As this was written and published in 1982 in Peterborough, Ontario, the social agencies and legal information are Canadian, although specific to Ontario at times. It is available from the National YWCA at 1901 Yonge St., Toronto, Ontario, M4S 2Z5; (416) 481-1151 for \$2.00.

Unwanted Sexual Attention and Sexual Harassment: A Survey

The results of a Canadian Human Rights Commission survey of 2004 people have been published in a bilingual 52 page report. Only 49% of the women interviewed reported experiences of unwanted sexual attention, and only 30% of them considered it harassment. This is in contrast to other studies that report harassment as high as 70-80% in women interviewed. Other questions involved the setting, who the harasser was, what happened, and the consequences for the two people involved. It is available free of charge from the Canadian Human Rights Commission at 90 Sparks St., Ottawa, Ontario, K1A 1E1; (613) 995-1151 or at many libraries.

RESOURCES & EVENTS

C.C.L.O.W. National Conference

"Education For Change" is the theme of CLOW's three day conference designed to engage women in strategic positions in Canada in discussions of current issues pertaining to the education of women. The role, content and format of education for women in the future will be the focus. The Conference will be of interest to educators, social workers, guidance counsellors, teachers, health and fitness educators, consultants, programmers, administrators and managers. It will be held in Toronto on August 19, 20, 21.

Please write or telephone for further information: Eleanor Christopherson, Conference Co-ordinator, CLOW, 692 Coxwell Avenue, Toronto, Ontario, M4C 3B6.

All of Our Lives

All of Our Lives is a film by Laura Sky and Helene Klodawsky which shows the positive side of aging. While it deals with institutionalized women and the economic and mental health problems of women over 65, the film attempts to show beautiful images of aging. It is 30 minutes and is available through the National Film Board.

Self-Help Manual

Research, Education and Assistance for Canadians that have Herpes (REACH) has just put out a manual entitled

"Some of the Nicest People I Know Have Herpes". It is intended as a lay person's guide to self help through support groups. The booklet outlines what is likely to occur in a support group situation and is recommended for facilitators or participants.

Cost is \$7.00 for non-members, \$5.50 for members and is available through REACH, P.O. Box 649, Station P, Toronto, Ont., M5S 2Y4. Prepaid orders preferred.

Women and Mental Health

A new bibliography of feminist books on women and mental health, *New Visions*, by Janet Rogers, has just been published by Boudicca Books. It lists forty-seven U.S. and Canadian books currently in print and is recommended as a good, general introduction to the subject.

It is available from your local women's bookstore or for \$2 postage paid from Boudicca Books, P.O. Box 901, Station K, Toronto, Ont. M4P 2H2.

Pregnancy Booklet

The Coalition for the Medical Rights of Women has published a booklet, *Safe, Natural Remedies for the Discomforts of Pregnancy*. The booklet alerts women to the possible hazards of taking over-the-counter drugs, and contains a variety of practical remedies for nausea, constipation, backaches, edema and

other ailments, as well as ways to prevent them from occurring. Useful for pregnant women and health care providers.

Order from: Perinatal Committee, Coalition for the Medical Rights of Women (CMRW), 1638B Haight St., San Francisco, CA. 94117. The price is \$2.00 per copy plus .75 postage. Inquire about bulk rates.

Health or Profit?

World InterAction and InterPares have just released an innovative community resource called *For Health or For Profit?*. It is an up-to-date guide looking at the pharmaceutical industry's impact on our lives in Canada and in Third World countries.

For further information contact Interpares, 209 Pretoria Ave., Ottawa, Ont., K1S 1X1. Tel. (613) 563-4801.

CRIAW Conference

The Canadian Research Institute for the Advancement of Women will be holding its Annual Conference at l'Université du Québec à Montréal on November 9, 10, 11, 1984. The theme is Women: Images, Role-Models.

It is too late to submit proposals, however any information can be obtained from Isabelle Lasvergnas-Brémy, Professor, Department of Sociology, University of Quebec, Montreal, Que., H3C 3P8.

