

ALBERTA STATUS OF WOMEN ACTION COMMITTEE



September 1986

Vol. 7 No. 7



Over 250 women walked to Take Back the Night! in Edmonton on September 19.
An uproarious time was had by all. The Calgary walk was also a huge success.

photo by Sheryl Ackerman

**Inside this newsletter:
Special features on the wonder drug
we wonder about, and Assembly info**



ASWAC is

Over 500 members across the province!

1985/86 Board members

Frances Adams (staff member) c/o ASWAC

Luanne Armstrong (staff member) c/o ASWAC

Cathy Bray #706-10135 Sask. Dr. Edmonton
T6E 4Y9 433-2682

Lavera Creasy Box 1740, Hanna TOJ 1P0 854-3216

Terri-Ann Marco 44 Columbia Bay West
Lethbridge, T1K 5A7

Lorraine Mitchell (staff member) c/o ASWAC

Suzn Morgan 6423 Laurentian Way, SW Calgary
T3E 5N2 246-8755

Eunice Olsen Box 124 Innisfail, TOM 1A0
227-1970

Aura Rose 9941- 81 Ave, Edmonton T6E 1W5
433-0349

Marty White Sun Box 418, Hythe TOH OH1
356-3797

Jane Wiley (staff member) c/o ASWAC

1985/86 Regional reps

Gerry Bailey RR1 Westrose, TOC 2V0
(WestCentral) 586-2983

Irene McRae 10928-115 St, Edmonton
T5n 3L4 (Edmonton) 428-1280

Joan White Calf 5603 50 Ave, Camrose
T4V 0T6 (East Central) 672-2210

If you have any articles, comments, artwork or features you would like to see in the ASWAC Newsletter, send them in! Letters should be marked, NOT FOR REPRINT, if you don't want them in the Newsletter.

ASWAC's mailing address is Box 1573, Edmonton, AB, T5J 2N7. Telephone 424-3073.



photo by Sheryl Ackerman

Inside this Newsletter

Board meeting minutes

..... page 3

New staff members page 4-5

AMES health campaign

..... page 6

Special feature on Depo

..... page 7-11

Women and politics . page 12

letters page 13

happenings page 14-15

Upcoming Board meeting

The next Board meeting will take place in Edmonton, the weekend of October 17,18,19. The majority of the meeting will be held at the Women's Building at 10055 110 St.

Don't forget !!!
The Assembly will be held November 14,15,16 in Innisfail at the Innisfail Country Lodge. Be there !!

Donations

These wonderful women put their money where their hearts are and made a donation to ASWAC in the last little while; M. Ann Hall, Beverly Abbot, Gloria Chalmers. One man made the list this time; thanks to Jim Brieshaber-Otto.

Our board meeting minutes

Eighteen hours at a glance

Following is the minutes of the board meeting, held September 11, 12 and 13 in Grande Prairie at the Alpine Motor Inn.

Present:

Suzn, Aura, Terri, Lorraine, Marty, Cathy, Jane, and Frances. Eunice was absent because of a medical emergency with her son.

Assembly

Most of the workshops and speakers are now confirmed. Once again, don't forget, the assembly will be held Nov. 14, 15, and 16, in Innisfail. The pre-registration packages, with details of the agenda, will be in the mail by the first week in October, so please get your registration back to us as soon as possible. Early registration definitely makes life easier for us in the office. Travel subsidies and childcare subsidies will be available, and there will also be carpool information coordinated through the ASWAC office in Edmonton, so if you need a ride, or would like to offer rides to women, please let us know.

Details of the board and regional rep selection process will be included in the Annual General Report, "Stories of the Year".

Homemaker's Pensions

It was decided to do more research on this issue. There is still no consensus in the feminist community on the merits of homemaker's pensions.

Ft. McMurray

It was confirmed that Norma Scarborough will be speaking for the local CARAL group on Oct. 16. The campaign for the therapeutic abortion committee plebiscite is going well, and it was decided not to send a group of women up.

Membership Development

We decided to look at developing local membership committees, which would be initiated by regional reps, in conjunction with Board and Staff. Such committees could welcome new members, lobby around local issues, initiate social action groups and find ways of socializing with other feminists.

It was decided that staff, as part of staff development, would identify specific tasks that could be done in the office by volunteers, and these would be advertised in the newsletter.

Childcare

The Edmonton Coalition for Quality Childcare is changing its structure to allow new members to join. Frances has been asked to take a position as an organization representative for one year. It was decided that ASWAC would join the coalition. Their next meeting, on September 29, at 7:30, in the CNIB basement, will be attended by Cathy Bray, as Frances will be away.

Come to the 10th Annual Assembly

**November 14, 15, 16
Innisfail, Alberta**

Workshops will be held on pay equity, childcare, lesbian visibility, abortion rights, rural women, superwomen studies, and much more!!!

Assembly brochures will be available in October

New faces around the office

Our new office co-ordinator

by Luanne Armstrong

Driving across Alberta last week, over the blue and gold patterned prairie, I felt welcomed by the beauty of the place, but also excited, scared, and nervous about my new responsibilities; as always, protected and strengthened by the love, joy, and energy I find in the women's movement.

Now, having been here with ASWAC, and in Edmonton, for a whole two weeks, (yes, it feels much longer) I still feel all of the above, plus a growing pride in being part of an organization with so much heritage to look back on, and so much future to look forward to.

I have already met some of the women of ASWAC, and I look forward, in the next few months, to meeting many more of you. I am impressed by the vigour and strength of the Edmonton women's community, and I am slowly learning how to find my way around Edmonton despite the rather confusing number of bridges.

A brief biography - I have been a committed and active feminist for about ten years, primarily organizing women's events, as well as peace and environmental activities. I am also a writer, (poetry, short stories) and a journalist.

Feminism is my life, and the life of the other women that I love, work with, care about, cry with, cherish. It is the ongoing work we are all doing, as women together, transforming our world to someday make it a safe, just, kind and peaceful place to be.

My goals for ASWAC are, to continue to build on and consolidate the work that has

gone before, without losing our awareness and excitement about the future. We will continue to ensure that ASWAC is an inclusive organization, sensitive and responsive to the needs of its members, and of the other women of Alberta.

It is also important to me personally, that the voices of women who are otherwise silenced by this society are given a place to be heard; the voices of native women, immigrant women, disabled women, rural women, poor women, lesbian women, and other women who have been hurt and silenced by a society which is so destructive to the majority of its population.

It promises to be an interesting, exciting, and informative time for me, and all I can do is give the best that is in me. Please call and



say hello, or drop by the ASWAC office, if you're in Edmonton. I look forward to seeing you.

The newsletter challenge

by Jane Wiley

I thought it would be a great idea to have each of the new staff members at ASWAC write up an introduction to themselves, for the newsletter. Well here it is, four days past the deadline and the woman responsible for pulling together the newsletter, (ME!), is just now writing her introduction.

I was born in Medicine Hat and spent the first 18 years of my life there. Aside from a year spent gallivanting across the country, and a winter in the Northwest Territories, I have always lived in Alberta. When I was younger, being 'from Alberta' was not part of my identity, but now it is. I am not sure that I know what being 'from Al-

berta means, except perhaps the stubborn determination to stay when all of my feminist sisters have gone to the grass-is-greener revolution in Toronto or Vancouver.

I have named myself a feminist for about five years. I had thought of myself as a socialist before then, and it was the act of bringing my politics of social justice home to my body that brought me to feminism. My consciousness-raising began when I discovered that male approval was not worth the dieting, and besides, women were my real friends anyway.

I was a student at university when I made the decision to find ways to spend my life as a feminist activist. Doing so was a challenge until I moved to Edmonton two and a half

years ago. Since moving here, I have stumbled on to more than enough opportunities to stay busy.

My challenge now is to find my priorities and goals. I have been working on an enormous range of issues - from violence against women to international development. I have enjoyed the diversity, but I sometimes wonder at my effectiveness as an all-rounder.

In any case, working with ASWAC has become one of my goals, and I love being a part of her. Working on the newsletter gives me huge

amounts of satisfaction, and I am thrilled at the opportunity to gain more print skills.

Which reminds me, it is four days past the newsletter deadline, and there is tons of work to be done!!



Taking tips on research

by Lorraine Mitchell

It is always difficult to write about yourself. I am not sure what people would want to know. So, the following are what I think are the important parts of my existence.

I was born in Pincher Creek, (the home of sour gas). I have a large family who mostly live in Southern Alberta. (Although I have one errant sister in Victoria.) I miss them alot. We are pretty close although we have lots of political fights. My mother is an amazing woman who has had six children and has worked as a secretary for twenty years. She recently formed a union where she works, and she is a source of much inspiration to me. My rural roots have left me with a penchant for female country and western singers and blue cowboy boots.

I have since become a city girl. I have lived in Calgary, Lethbridge and Edmonton. I have worked mostly as a waitress although I have also been a receptionist and a clerk. When I moved to Lethbridge I went to University and majored in political science. It was there

that my political life "officially" started, although I feel that the seeds had been planted years before. I went from a small grassroots campaign to being on the boards of provincial and national student organizations. I also worked on women's issues, peace and Chilean solidarity.

Upon moving to Edmonton in 1982, I was a founding member of Edmonton Working Women. For the next four years I worked almost



exclusively in this group, fighting to improve workplace rights. We work with women in job ghettos who are largely non-unionized. We also do solidarity work with women who are fighting to build unions. I was a member of the Hotel

and Restaurant Workers Union and spent seven months on a picket line after being locked out of my workplace.

My academic background also allowed me to graduate to the level of government "make-work" jobs. I worked as a researcher for the U of A Women's Centre, and I also worked on a six month welfare rights project for the Edmonton Social Planning Council. These jobs gave me valuable experience in research. They also helped me understand how to work (or not to work) collectively.

My current position as the ASWAC researcher will allow me to expand on these skills and develop new ones. I am also working part-time as a waitress, and I think that this work gives me an interesting perspective on my ASWAC work. I have a lot of thoughts on what research is important for ASWAC to do. I would like my work to focus on women's experience, because I believe this is an important part of our liberation. However, dealing with government or members of the establishment, I will probably focus more on mainstream research style.

Health campaign needs funds

In spite of the war that is raging in that tiny Central American country, the women of El Salvador are organizing to take control of their bodies and of their lives.

Salvadorean women have traditionally been illiterate and ignorant of how their bodies function, and have been kept in the home, bearing as many as a dozen children. With 40% of their children dying before age five from such easily curable illnesses as diarrhea and intestinal worms, women keep having more children in the hope that some of them will survive to adulthood.



Gloria Viscarra at her desk

There is one maternity hospital in El Salvador to serve a population of about two million women. Most births, especially in the countryside, take place in unsterile conditions at home, sometimes with the help of a midwife but often alone. Maternal and infant mortality at birth or in the weeks immediately after birth is high, as a result of infections. Many more children die before reaching their first birthday.

Today, due to the escalation of the war against the civilian population in the countryside, Salvadorean women have even less access to basic hygiene products that in Canada we take for granted, things such as toothpaste, toothbrushes, soap and sanitary napkins.



Oliva Torres in the Edmonton Friends of AMES

Due to regular army invasions into the rural areas, communities of 200 or 300 people have to evacuate to avoid being killed. Women who are menstruating have to use unclean pieces of cloth and are unable to bathe for days at a time. The inevitable vaginal infections that result from these unsanitary conditions cannot be treated because the needed medicine is very expensive. A single tube of Canesten cream - a common anti-bacterial medication, costs the equivalent of six days wages for a woman fortunate to have paid employment.

The Women's Association of El Salvador, AMES, was formed in 1978 to organize women around health, work and other important issues. AMES has 10,000 members who are students, housewives, teachers, farm and factory workers, market vendors and professional women.

AMES aims to help women attain their basic rights and to help them develop personally and as members of their community. In the 40% of El Salvador that is now under control of the people struggling for liberation, AMES is helping to plant food crops, and to build schools, health clinics and childcare centres. AMES also organizes programs to teach work skills, literacy, basic hygiene, first aid and midwifery.

AMES has a new project called the Women's Health Education Campaign. This program will begin with 200 women from four villages in the provinces of Chalatenango, Cuscatlan and San Miguel. The ten day course will include basic information on female anatomy, common women's health problems and their prevention, family planning and prenatal and post-natal care for women and their newborn babies.

Friends of AMES, a sister organization with chapters in Canada, the United States and Europe, is raising money for the Women's Health Education Campaign. Funds raised through events and donations will go towards buying the educational materials for the program as well as the necessary materials for carrying out the lessons learned. These materials will include hairbrushes, toothbrushes, toothpaste, bath soap, clothing soap, underclothes, sanitary napkins and medicine for vaginal infections.

Women who are interested in learning more about women in El Salvador and the Health Education Campaign can write to the Friends of AMES at PO Box 1826 Edmonton, AB T5S 2P2. phone 425-1271.

If you live in the Edmonton area, drop by the Women's Building at 10055-110 St. and visit the women who are working for Friends of AMES there.

International Drug Dealers

by Lorraine Mitchell

There was a great deal of confusion surrounding the public hearings on Depo Provera, held on September 9 in Calgary. First, they weren't public, and secondly, they weren't on Depo Provera. That is, they were supposed to focus on this issue. However, the vast majority of presentations to the hearings were on Depo. Confused?

So were we. When ASWAC was first contacted by Health and Welfare Canada, we were given the impression that the hearings were in response to the proposed licensing of Depo as a contraceptive. Later we were told that the hearings were called regional meetings on fertility control. Moreover, they were held behind closed doors and no press were allowed in. There was a rigidly controlled agenda, with a set number of people invited to make presentations.

ASWAC's brief, co-written by Anne Dolina and I, focussed on Depo Provera. It seems obvious that this is the most pressing fertility issue, given the push by Upjohn, to license this drug. The other presentations were from women's groups, family planning agencies, and individual doctors. The women's groups came out unanimously opposed to the current and proposed use of Depo as a contraceptive.

Unfortunately, most of the doctors argued in favour of the use of Depo. There seem to be two major themes to their argument.

They brought out the old "freedom of choice" line, to illustrate their concerns that we would be denying women the right to chose the form of contraceptive they wish. The other argument put forward by the doctors, is that this drug is useful, even necessary for "certain types" of women. The example given was mentally retarded women. Presumably, it is easier on institution staff, if women stop menstruating!

Although we were glad to have been invited to the hearings, we were left wondering, "exactly what was going on here." Is the panel going to make recommendations to the minister? Why were the hearings behind closed doors?

In response to these questions, the spokesperson for the panel stated that they were an "information gathering body", and that they would compile our concerns in a report and present it to

the government. She assured us that no decision would be made until after the report was completed around the end of October.

It seems that while the panel itself was quite sympathetic, the process of these "hearings" left a lot to be desired. Rather than a public task force on the issue, the "hearings" appeared to be an assesment of the opposition to the licensing of Depo. There is a great deal of opposition, and for many good reasons. What follows is an excerpt of the 20 page brief that was presented. If you would like a copy of the complete version, let ASWAC know.

The other argument put forward by doctors is that this drug is useful, even necessary for "certain types" of women.

Depo Provera is not currently licensed for use as a contraceptive in either Canada or the United States. It has been marketed in Canada since 1960, but it is only approved for use in the treatment of endometrial cancer and endometriosis. However, once in Canada it can and is being used for other purposes. The laws do not prohibit doctors from prescribing it as a contraceptive, they only prevent Upjohn(the company that markets Depo) from promoting it for this purpose.

There are reasons why organizations such as the US Food and Drug Administration refuse to approve the licensing of this drug as a contraceptive.

From our review of the medical tests that have been done, it seems there is much confusion about the nature and extent of the long term side effects of Depo. In general, there seems to be agreement on the immediate side effects. Most women experience some disruption of their menstrual cycle. The majority stop bleeding altogether. Others experience very heavy bleeding while some have light spotting during the period the drug is in effect. Some doctors give women estrogen to counter the effects of menstrual chaos. In the seventies there were reports that some women were given DES! Other side effects that have been reported are changes in weight, nausea, irri-

tability and a decreased sex drive.

The most serious side effect associated with the use of Depo Provera is cancer. A link between this drug and the development of breast cancer was discovered in tests done on female beagles both in the US and Britain. There was a dramatic increase in the development of breast tumors in dogs given Depo.

In Ontario, 533 women in institutions for the mentally retarded were injected with Depo in order to "stop their periods". A study done by Dr. D.E. Zarfes was released in 1981. He found that three out of 533 women have died of breast cancer. This is much higher than the rates expected to occur among women in the 30-40 age bracket.

Even more controversial is the debate over whether Depo can be linked to uterine or cervical cancer. There is some evidence to suggest that cervical carcinoma in situ is more likely to occur in users of Depo. When Upjohn's own studies (which purported to show that Depo was safe) were compared with a survey done showing the incidence of cancer in the population of the US, it was found that Depo users were three times more likely to get cervical cancer.

Finally, links are being made between the use of Depo and development of certain types of cancer of the uterus. Ironically, the first indications of a link between Depo and uterine complications were found in the early studies on beagle dogs. Strangely enough, this aspect of the tests was not brought to public attention until Stephen Minken, a researcher for the National Women's Health Network in the States conducted a critical examination of these studies. He found that within 3.5 years all of the dogs given high doses of Depo and half of those given low doses had died as a result of the action of the drug on the uterus. Not only was this information not widely publicized, but in the next round of beagle testing Upjohn performed hysterectomies on all the dogs in the study. You certainly cannot find abnormalities of the uterus if there is no uterus!!

In a subsequent study done on rhesus monkeys released in 1978, it was found that two out of twelve monkeys receiving high doses of Depo developed endometrial cancer. These tests were said to be invalid as they were not performed on humans.

Yet to test Depo on human beings raises many ethical questions. Can we, for example, allow women in the Third World where Depo is widely distributed, to be used as guinea pigs in order to determine whether this drug is safe for North American women? Given the results of the animal tests, can we allow the continued use of Depo at all? Human testing of Depo that has been done has been found to be inconclusive and inaccurate. Further, many of the studies have been done without informing the women involved of the dangers and risks.

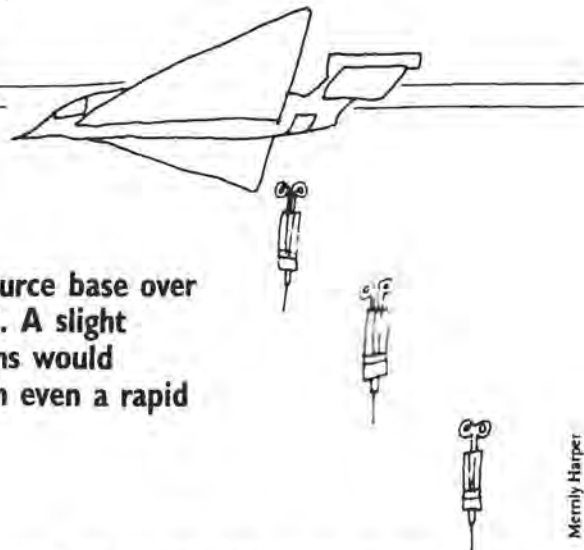
It seems that the research into Depo Provera is similar to the testing that was done on other methods of birth control. The drug is being administered before the seriousness of its effect is full known. Many of the animal and human tests are inconclusive while others point to a potential danger. It even appears that attempts have been made to conceal per-

In India, women's groups are concerned about imminent government approval of the drug. "The government is about to introduce the drug through some women's organizations", says Gayatri Singh of the Lawyers' Collective of Bombay. "They'll be using it in villages where people will not be aware of the side effects. Doctors will give vitamin tablets and Depo injections. People will believe it's a vitamin so they'll take it." The Indian government claims that its approval is based on recently completed studies of Depo but will not make the studies public...

In South Africa the drug is supplied at government funded family planning clinics... according to prominent black physician Dr. Lichatlo Motlano, "agencies are administering Depo Provera shots to young black girls without even asking their consent..."

In Bangladesh, says British journalist Joseph Hanlon, "The Big Aid sponsors, especially the World Bank, are putting considerable pressure on Bangladesh to show quick results in the family planning program". In practice that means sterilization and injection, which can be done with little involvement of the women themselves and without setting up a proper family planning and maternal health service...

In Thailand at the KAO-1-DONG refugee camp on the Cambodian border, women have been given a chicken for their families if they agreed to take a shot of Depo Provera...



Mernly Harper

...the average citizen of the first world requires a resource base over 20 times that of the average citizen of the third world. A slight increase in the population of the world's richest nations would create far more pressure on the world's resources than even a rapid rise in the population of a third world country.

continent information about the drug. The errors that were made in the testing of DES, the pill and the Dalkon Shield are being committed with Depo.

According to the the American publication, the Multinational Monitor, Depo Provera is either approved or registered in at least eighty countries where Depo is distributed.

Agencies like the International Planned Parenthood Federation and the United Nations Fund of Population Activities support and/or finance family planning agencies using the drug. The justification for this seems to be that a different set of values can be applied to the Third World.

It is increasingly clear that aid in the form of birth control is on the increase. In 1975-76 over two thirds of all US aid for health programs was taken up by family planning. It is estimated that half of Britain's multi-lateral aid is devoted to population control. Contraception research groups like the Population Council, largely funded by the US government. The result has been to produce a limited range of often dangerous and insufficiently tested products like the Dalkon Shield and Depo.

The most common argument for distributing drugs like Depo, is that it must be used in order to curb the rapidly expanding world population. Yet, in 1975, the United Nations Population Conference concluded that poverty and not numbers of people was the source of problems in the Third World. In fact, the average citizen of the industrialized or "First World" requires a resource base 20 times that of the average citizen of the Third World. A slight increase in the population of the world's richest nations would create far more serious pressure on the world's resources than even a rapid rise in the population of a Third World country.

Depo Provera is not just used in the Third World. It is also approved for use in several industrialized nations. It was licensed for long-term use in the United Kingdom in 1984. The Family Planning association in Britain made the request for licensing based on their position that restrictions on the use of Depo Provera were detrimental "particularly to those most in need of contraceptive protection."

What does this mean? According to a pamphlet issued by the Campaign Against Depo Provera in England, this usually means very poor women are targeted for Depo injections.

The Campaign Against Depo Provera concludes: "There is no doubt that those who are being offered Depo Provera in Britain tend to be women who are poor and who, overwhelmingly are non-English speaking and black. The Depo injection is being given by doctors on social grounds, to women considered by them to be inadequate in some way."

Sir Keith Joseph, Secretary of State for Social Services in Britain in 1979 backs this up with: "The balance of our population and human stock is threatened... a high and rising proportion of children are being born to mothers least fitted to bring children into the world."

In Canada, it is difficult to know the exact nature of Depo usage. We do know that it was used on mentally retarded women in Ontario. We also know that it has been used in Edmonton. Our information is based on a medical experiment that was performed on seventy-six women in 1969. In this study, Dr. C.A.D. Ringrose concluded that Depo is not only safe but has many positive side effects. Yet Dr. Ringrose also notes that, "out of 76 patients, 37 dropped out of the study, one moved away, two desired pregnancy, five underwent hysterectomies, one had a tubal ligation and 28 had intolerable side effects. (This is approximately 37% of those tested.)"

The most common argument in favour of Depo is that it is very effective. Certainly, we are in favour of increasing a woman's control over her own body. But at the cost of her health? And the argument of control becomes quite empty when one examines the actual use of Depo Provera around the world. Can a woman who agrees to take this drug in return for food be said to be increasing her control? Can a seventeen year old girl who is offered Depo but not told of potential dangers be said to be increasing her control? Can women who are not even fully aware of what drug is being injected into their bodies be said to have any control at all?



Another argument is made that Depo is necessary in cases where women won't or can't use other methods of birth control. This argument is largely made in regard to Third World women and poor or immigrant women in industrialized nations. We would like to clarify: **IF DEPO IS NOT SAFE FOR MIDDLE CLASS AMERICAN WOMEN, THEN IT IS NOT SAFE FOR ANY WOMEN.** We do not accept a double standard in the application of Depo Provera. Perhaps if more money were spent on education, health care, and food, the use of dangerous drugs would not be even considered. A scenario where potentially hazardous substances are injected into our bodies in the interest of world population control does not strike us as a gigantic step forward for women.

Dr. Ian Henderson of Health and Welfare on the use of Depo Provera: "Ten years ago, if you were talking to a group about a drug like Depo Provera they would say, "There must be something wrong with a drug that intereferes that much with physiology". But we seem to have crossed over. All sorts of women are now getting it. It is now culturally acceptable to say that menstruation is a nuisance. I think that it will be a relief to many women that they will be able to take a drug that eliminates menstruation.

Our job at Health and Welfare, after Depo is approved, will be to educate women that the fact they have stopped menstruating is a natural effect of this drug and that it is not unhealthy for their genitals to be in a dormant state. Their genitals will be just like they were when they were 9 or 10 years old."

"All sorts of women are now getting it. It is now culturally acceptable to say that menstruation is a nuisance."

Dr. Ian Henderson Health and Welfare Canada

Let us turn this argument around. Suppose a drug were discovered which turned the male genitalia into that of a nine or ten year old. Perhaps this drug had the effect of causing complete impotence. In this sense, the drug was found to be 100% effective as a method of birth control. Of course, there might be some serious or long term side effects that are not known. But we are sure that men will be delighted to be "liberated" from their natural bodily functions. Can anyone seriously consider that such a drug would be licensed anywhere in the world? Can you possibly imagine the widespread outrage if this drug was given to men who had little or no control over the process? Why then are we giving it to women?

There's no turning back

During their work on the Depo brief, Lorraine and Anne were contacted by quite a few women who wanted to share their personal experiences with the drug. What follows is an interview with one such woman.

Q - When was the drug given to you?

A - I was just trying to figure out the year, it would have been about February, 1976.

Q - How old were you then?

A - I would have been seventeen

Q - Dr Ringrose was your doctor?

A - Uh huh

Q - Why did he use depo, as opposed to other methods of birth control?

A - I'm not sure, I didn't want to take the pill so he suggested that and I thought well, you know, it sounded really convenient and because he was saying you wouldn't get your period while you were having it and you don't have to remember every day to take something, so it sounded more convenient. I'm not sure if I had one or two injections, I can't remember.

Q - Did he give you any information about possible side affects?

A - No, he just said I wouldn't get my period.

Q - He didn't say anything about studies that had been done showing incidents of cancer or anything like that?

A - No, nothing. So then, let's see, in 1978 I got really sick and had fibroid tumours on my ovaries and blocked fallopian tubes and some kind of an infection that they never did find out what it was, they couldn't identify the strain or the source of it. I had my ovary taken out and my fallopian tube on my left side, and then they said that I couldn't have any more kids because the other one was so damaged at the time. And just problems, really heavy periods and constant infections and things like that. Then when I was pregnant with my last baby, they noticed an erosion on my cervix, so I went for some tests, this was while I was pregnant. They found it was carcinoma in situ, so I had a hysterectomy with my last baby. In my opinion, most of that was caused from that injection, just from what I have read about it. It's too coincidental.

I was only twenty-four when I got cancer. Which is pretty young to be getting cervical cancer.

"One of the things I am concerned about is that when it's in your body, it's there. It's not like taking the birth control pill, where if you do have side effects you can stop taking it and if it lasts that long how much longer does it stay in your body?"

Q - So what would you say to this committee, if you had the chance, if you could be at the hearings?

A - I would not recommend it at all. I think that if there's any kind of controversy, why bother using it? If there is any chance that something could happen, it's like that DES or Thalidomide or any of those kinds of drugs. I think that if they are going to use it, they should really do some strong research and get the facts out. Tell people about it. Like what angers me is that the doctor didn't tell me and he must have known at that point...

Especially when you're young, like I was ignorant about a lot of things at that point. You know you put your trust and faith in them, (doctors). I just think that it's very dangerous. Especially that they are covering it up. Not making people aware. Like even for the birth control pill, when you do in they give you a pamphlet that tells you what to look out for. Like the girl I was telling you about. She is thirty six and they offered her that injection, they didn't tell her anything about it. Just one shot and you're good for

six months or whatever, nothing to worry about. Except ten years down the line when your body starts going out of kilter.

When you first hear about it (depo) it sounds like the most wonderful thing since sliced bread.(laughter)

Not just another civil servant

As part one of a series on women and politics, Aura Rose interviewed Shirley Cripps, PC, Associate Minister of Agriculture. Mrs. Cripps is the eldest of six children, holds an Education degree and has been an MLA since 1979.

Aura: What is your background?

Shirley: "I have been an active member, either on the executive or in the MLA position for 12 years. I worked on a number of community organizations and sat on a number of provincial boards; The Alberta Association of Agriculture and as a director of the Alberta Charolais Association."

Aura: Why did you become a politician?

Shirley: "My work in the community and through the community just lead me further afield. I was involved in the constituency association for a number of years, sat on the executive, and when our MLA decided not to run again - it was a mutual decision between me and the constituency association that I should replace him."

Aura: Has this required significant changes to your lifestyle?

Shirley: "Yes. I do not believe that anyone has any idea of the impact being a politician has on one's time and commitment. You are always at someone else's beck and call. ...my weekends are never free. It's a 24 hour, 365 day a year job. The other aspect that people don't understand is that you're away from home so much. You're elected to be in the legislature when it's sitting. As a member of the government, people don't realize the work that goes on behind the scenes."

Aura: Do you feel more women should get involved in politics?

Shirley: "Yes, I think that it's important for all people, women and men to be involved. I just plain think it would be better if more people were involved. I tend to think of women as people as opposed to as women/men scenario. I guess I do that because I'm off the farm, and in rural Alberta we're partners, there's no question about it."

Aura: What hinder/helps women get involved?

Shirley: "Unless you live in the city of Edmonton, I would think it would be very difficult for a young woman with a family to be an MLA. The time and period away from home...would be very difficult. By the same token, it's very difficult for a man. It's difficult for anyone with a family."



Aura: How are women affecting politics in the long and the short term?

Shirley: "Anybody that gets involved can change it (politics). You would be surprised in the grassroots organizations how many women there are - and they work hard."

Aura: Is there anything you would like to add?

Shirley: "I would like to encourage women to become involved. I think that when women decide to get a job done they do it, as an overall perspective. They have a certain ability to hang in and not become discouraged - a certain tenacity - and that's good."

Aura: How can the women's movement encourage women's involvement in politics?

Shirley: "I think all women's organizations should have speakers, address the process. A lot of people feel that it's too big for them - they think about the government process at election time and say 'It's big, it's scary'. That's not what it is. It is grassroots people working from all walks of life in an organization just like yours. As people understand that there is a grassroots organization there, they become more involved."

Aura: How can political parties encourage their involvement?

Shirley: "I'm not sure that people really know, or really stop to think about, political organizations. The Conservatives, for example, have a political organization in every constituency, but that can cover a large area. It's hard to get people to become involved, to take part in constituency meetings and in annual meetings of the party."

Aura: Do you think that women make a different type of politician than men?

Shirley: "No. Basically I think that you'll find that the breakdown of the differences in politicians will not be by sex. Generally speaking, it breaks down depending on the personalities, the perspective you are coming from, your background and your interests. It depends on the person, and what the issue is."



an answering machine and volunteers to run the place - one of whom will be me, partly because i am getting to really like the fine women i am meeting here and partly because i am really excited about having a real, live women's resource centre in the heart of bible belt Alberta.

the same thing. And (yes, i know one is not supposed to begin sentences with 'and' but i take pleasure in doing so) i want other women here in Lethbridge to know about ASWAC. i think that Terri-Ann has done a fine job, and i would like to learn more from her.

So that is what i wanted to say and i am MOST looking forward to seeing you fine women at the Assembly in November. And i said that i would never come back to Lethbridge. tsk. the best laid plans of mice and women...

In Sisterhood,
erin graham

So i am staying in Lethbridge, (erin was considering moving, editor's note) and i would like to be on the ASWAC board for the next year. i want to find out what other women in this frustratingly conservative province are doing to foster a revolutionary atmosphere - or just bring women together - which some may say amounts to

Dear Sister ASWAC members,

Hi there. This is erin graham here in Lethbridge, Alberta. There are an awful lot of fine women around Lethbridge, and these fine women will soon have a resource centre. And this resource centre will have

Union women speak out

by Luanne Armstrong

"It's everybody's fight." said Kathy Kennedy, president of Local 740P, which has been on strike at the Lakeside Packing plant in Brooks for 27 weeks. The other women sitting at the front of the room with her nodded agreement.

These women, six veterans of picket lines and union organizing, were at the Women's Building on Thursday, Sept. 25 at the invitation of Edmonton Working women to talk about their lives "on the line."

The women, Debbie Bouchard and Kathy Kennedy from Lake-Side, Janice Sinclair and Linda Brady from the AUPE, and Margaret Gallimore and Ada Shackleton from Gainers, agreed that the fight they are in is a long and important one.

"It's up to us to change the labour laws," said Kennedy. "Otherwise no one's job is safe."

The women were impressively calm, strong and determined. They agreed that women's energy and ability to give emotional support to one

another had been a major factor in keeping the strikes ongoing.

Kennedy said that the men on the picket line had gotten enormous support from their wives, also. Many of whom had

to find employment in order to support their families. She added that the strike had been hard on everyone, and particularly, hard on the children, but that the strikers had become "a tight little family."

Keeping up to date

THE OTHER ALBERTA REPORT compiled by Julie Anne Le Gras, available 8 - 9 times per year, annual subscription rates \$25.00

"Information is power" says Julie Anne and information is certainly what The Other Alberta Report is all about. In digest form, this publication offers a synopsis of news items covering political, social and economic issues in Alberta with a particular emphasis on women's concerns.

Taken mostly from The Edmonton Journal the information provides a record of indicators and trends in Alberta's political happenings. Divided into such sections and headings as the Alberta government,

the Advisory Council on Women's Issues, the economy and so it becomes easy to flip through the almost 20-page document and zero in on those news items of most interest and use to you.

The days of rummaging through piles of inky newspapers to relocate that one particular item are gone. With The Other Alberta Report now available to us it will be an easier task than ever before to spot the (damaging) trends of our provincial government!

THE OTHER ALBERTA REPORT
Information update at a glance
ANNUAL SUBSCRIPTION RATE:
\$25.00 (8-9 issues)

Julie Anne Le Gras
Re-Source/ReSearch Services
10737 - 71 Avenue
Edmonton AB T6E 0X5
OR CALL 438-8069 FOR FURTHER INFORMATION.

happeningshappeningshappenings



Good television

What are the roles of women in today's society? What determines a woman's economic status? Why are so many women the victims of violence? What kind of political power are women seeking?

These are some of the topics explored by experts and by members of the public in *About Women*, a series of 13 one-hour television programs. This new series is designed to inform viewers about many new issues in our changing society, specifically controversies and ideas that have an important impact on the lives of women.

About Women is a co-production by ACCESS Network and Athabasca University. It is part of Womens Studies 267, a credit course offered by A.U.

About Women is broadcast on ACCESS Network every Tuesday at 8 pm from September 16 to December 16. The series will be re-broadcast on Wednesdays at 1 pm from September 24 to December 17.

Native Women gather

October 9,10 are the dates of a Native Women's Conference in Brandon Manitoba. The conference has been organized to provide an opportunity for information sharing, as well as to encourage the involvement of new women. If you are interested call Laureen Cote at (204) 725-2955.

Hear Moon sing

On November 22, 1986, the Newsmagazine for Alberta Women is sponsoring a fundraising concert with Winnipeg singer/songwriter Moon Joyce. Warm-up act for the event is Peggy Ward of Calgary.

Moon is an energetic performer, who says her voice is her "primary instrument".

More work on PMS

Many women experience a variety of mood, behavioural, and physical changes in the days preceding their menstrual period. For some, such changes are severely debilitating enough to interfere with normal daily functioning. As yet there have been no definitive studies into the causes and treatment of this condition due to the lack of diagnostic information.

We are a group of researchers who are interested in examining the physical and psychological changes which occur in the menstrual cycle in the hope that better methods of diagnosis may be developed. If you have filled out a premenstrual assessment form from a study conducted last year or if you have no premenstrual symptoms or minor physical symptoms, we would greatly appreciate your assistance. Please contact:

Shirley at 432-6311 or Dr. Cumming Ob/Gyn U of A 432-6636 (leave message with Elaine)

Together again

Coming Together Again: A Women's Sexuality Conference, will be held November 7-9, 86 in Toronto. The conference will be a gathering of sexually diverse feminist women interested in exploration, challenge, and solidarity in the area of sexuality.

Featured resource women are Greta Hofmann Nemiroff, Sandra Butler, Deborah Gregory and The Company of Sirens.

There will be two, day long pre-conference workshops for women who are working in social services, facilitated by Sandra Butler and Madeline Byrnes, Friday, November 7. These sessions will focus on issues of importance to women in healing work. Registration for these workshops includes the opening evening of the conference.

For registration information, contact: Side by Side: Canadian Feminist Resource Group, Box 85, 275 King St. E., Toronto, M5A 1K2, or phone (416) 626-5465.

There is a detailed brochure for the conference at the ASWAC office, phone for details.

Teaching Sexuality

In keeping with the theme of National Planned Parenthood Week, Edmonton Planned Parenthood is offering a course called, "Parent Taught Sexuality".

This is for parents of children up to age 10 who want information about how to talk to their children about sexuality. An opportunity to share ideas and learn some communication skills.

The deadline for registration is October 10. The course will be Saturday, October 18, 10 am to 4 pm. \$20.

Unity House events

Unity House, the Women's crisis centre in Fort McMurray, is hosting a conference on family violence, October 15, 16 and 17. The conference is being held just prior to Unity House's Annual General Meeting, to be held October 22 at the Interpretive Centre. For more information about either of these two events phone 743-1190.

Racism and sexism

The Calgary Status of Women is sponsoring a very exciting speaker series this fall, entitled, Women of Colour: Racism and Sexism. If you would like to participate in the planning, or just want more information, contact SWAC, at 124-320 5 Ave. SE, Calgary, T2E 5B5 or phone 262-1873.

Immigrant Women's Conference

1986 is another historical year for immigrant women since a National Conference for immigrants women is being planned for the fall of 1986. The Immigrant Women's Association of Manitoba has been chosen by the National Immigrant Women's Follow-Up Committee to host this conference which will take place in Winnipeg.

The Immigrant Women's Association of Manitoba therefore will be busy participating in the planning of this conference with the hope of giving more public attention to problems of immigrant women and laying the foundation of a National Immigrant Women's Association.

Women's Program Forums

You are invited to attend the following free public forums, call 432-3093 at the Women's Program, Department of Extension, U of A.

Pictures of Women

From ring around the collar to Cagney and Lacey: are we really making Progress? Toronto video artist Lisa Steele will present a talk on women's images on television. Showing selected clips from T.V., Steele will discuss the move towards positive role models for women and question how far we have really come. She will also discuss independent media production by women that provides a more accurate depiction of the diverse conditions within which women live. Co-sponsored with Latitude 53 Gallery Video Committee.

Wednesday, October 8, 7:30
Humanities Lecture Theatre 2

The following night, Lisa Steele, who has produced many videos, including "The Gloria Tapes" about the difficulties of a mother on welfare, will show some of her videos as positive alternative images of women.

Thursday, October 9, 7:30
Humanities, Lecture Theatre 3

Women's Masochism and Other Psychological Myths

Freud claimed that all women are masochistic by nature, and this thinking is still used by

some to explain, for example, why women remain in battering relationships. Dr. Paula Caplan's revelatory study of the origin and persistence of the myth of women's masochism debunks one of the most damaging prejudices with which women have had to live. Author of *The Myth of Women's Masochism*, Dr. Caplan, from Toronto, will challenge traditional psychiatric and societal attitudes toward women. Co-sponsored with the Vice-President's Committee on Women's Studies.

Thursday, October 16
Humanities Lecture Theatre 1

Women, Disarmament, Economics and Development

1986 was declared the International Year of Peace by the United Nations. What does real peace and security mean to women? What are the interconnections between disarmament, development and economics - especially economics based on militarism - and what is their impact on women? "Speaking Our Peace", an NFB production will be shown, followed by a presentation by Solanges Vincent, who is interviewed in the film. A political and economic analyst and feminist from Montreal, Solanges will help us to make the connections in these crucial issues.

Friday, October 17, 7:30
Education North, 2-115

Connecting issues

Making Connections: is a conference that tries to connect the issues of women Disarmament, Economics and Development. It will be held at the University of Alberta October 17, 18, 19.

Making Connections is intended to help us make the interconnections between these critical issues, to help us connect our analysis with our feelings in order to become empowered to act, and to help us make connections with each other in our work.

Organized by the Women's Program, Faculty of Extension, U of A, the registration is \$30, with a sliding scale according to means. Contact the Woman's Program, Faculty of Extension, 11019 90 Ave. University of Alberta, Edmonton. T6G 2E1

It is the intention that no women be prevented from sharing in this workshop due to financial reasons. Please call us at 432-3093 for information.

Are you out of date? Read on!

ASWAC's membership runs from conference to conference, November to November, with a 'generosity' period beginning in September.

If you bought or renewed your membership on or after September 1, 1985, you are up to date and ok, you will have a little 86 in the top right corner of your address label. However, if your membership dates from before September 1, you will have a little 85 or even 84 in the top right corner of your address label and **you need desperately to renew your membership!!**

So . . . if you and your membership are out of date, please take a minute and send in your renewal to the office. Donations of any variety are always received with squeals of delight.

ASWAC's membership runs from conference to conference, November to November, with a 'generosity' period beginning in September.

NAME _____
ADDRESS _____

PHONE - home _____
work _____

**suggested membership fee is \$10.00 but we will of course accept less. Please make cheque out to: ASWAC, Box 1573, Edmonton, AB T5J 2N7

Membership:
NEW / RENEWAL

Donation

Where did you come across the Newsletter?