

PEDESTAL

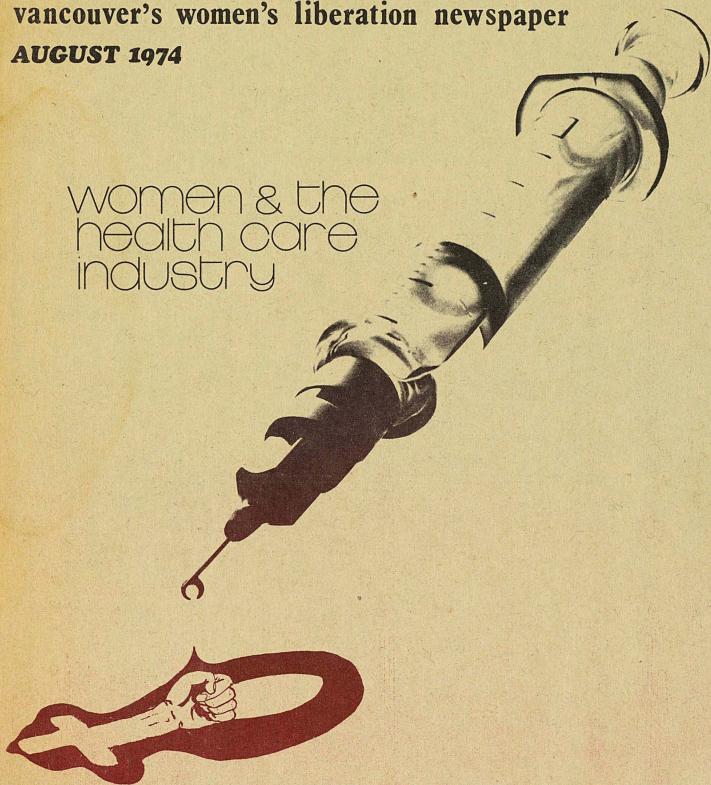
VOL. 6
NO. 5

25¢

vancouver's women's liberation newspaper

AUGUST 1974

women & the
health care
industry



"The ages of masculism are now drawing to a close. Their dying days are lit up by a final flare of universal violence and despair such as the world has seldom before seen. Men of goodwill turn in every direction seeking cures for their perishing society, but to no avail. Any and all social reforms superimposed upon our sick civilization can be no more effective than a bandage on a gaping and putrefying wound. Only the complete and total demolition of the social body will cure the fatal sickness. Only the overthrow of the beast of three-thousand-year-old heast of masculist materialism will save the race.

In the new science of the twenty-first century, not physical force but spiritual force will lead the way. Mental and spiritual gifts will be more in demand than gifts of a physical nature. Extrasensory perception will take precedence over sensory perception. And in this sphere woman will again predominate. She who was revered and worshiped by early man because of her power to see the unseen will once again be the pivot--not as sex but as divine woman--about whom the next civilization will, as of old, revolve."

from The First Sex by Elizabeth Davis.

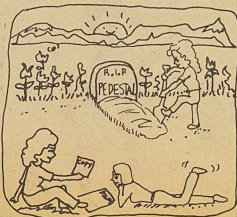
feminist author found dead

SARASOTA, FLORIDA.

Feminist author Elizabeth Davis was found dead in her home late Tuesday, July 30, of a self-inflicted gunshot wound.

The body of the 64-year-old author was discovered in the bedroom of her home here by a neighbor. Ms. Davis was holding a .38 calibre revolver in her hand.

Ms. Davis had been depressed for several months by illness.

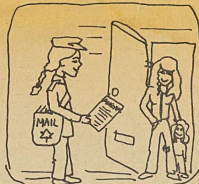


after two months of being Women CAN. we have resurrected the Pedestal. And we would like to tell you about ourselves.



Sometimes we are the only people who know we haven't died. Sometimes we don't even know for sure...

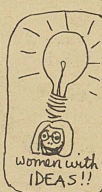
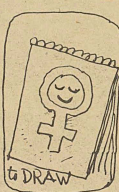
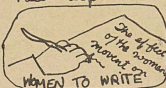
..But that is all past now (a-hope, a-hope) and we will indefinitely fall through your mail slot. And appear at your local store.



Bringing you news that is still new; stories, funnies and anything else we can think of.



We do. Anyone who wants to do. We always need help.



...DISTRIBUTION



Rumour has it that the Pedestal is broke, exhausted. It's a true rumour sometimes. Please send your writings, bring your energy. Or, if you like, a donation for supplies, a typewriter, money to rent a permanent home. We have been shifting around for over a year.

We need women who are interested in keeping the OLDEST, LIVING, WOMEN'S LIBERATION PAPER IN NORTH AMERICA even more ALIVE!!

We know you are really cramped for space and you have probably had enough surprise visitors to last a lifetime but still wouldn't it be nice to put a traveller up for three days this summer. The Home Placement Programme will pay the host \$3.50 per night per visitor. If you are interested call Ann at 689-8771

WHY NOT RENT FROM WOMEN?

If your group needs space for meetings, why not consider renting from Vancouver Ms.? We have coffee facilities and will set up for your needs, whatever your group size. We are also interested in talking with women who would like to lead self-defense courses, workshops, dance classes, etc. Rent is negotiable. Call 738-5821 or drop by Vancouver Ms., 2089 W.4th. Ave.

ADVERTISING

Please note pedestal rates for business ads: \$5.00 per 3"x3" col. camera ready art

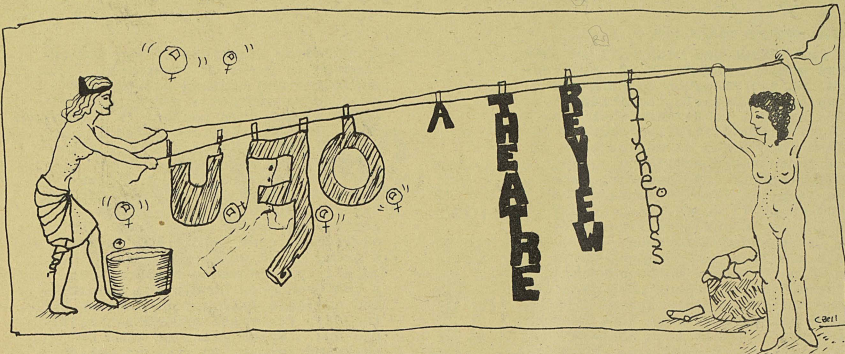
or we will design an appropriate ad if requested.

WOMEN AND RADIO

Vancouver Co-op Radio, soon to begin broadcasting (Sept 1st, hopefully 102.7 FM) needs WOMEN's PROGRAMMING! Anything, everything. Tapes on what you're doing, health, art, literature, legal information, women's music.

You can do it yourself!

They have the equipment and will train you to use it. Call Co-op Radio at 684-8494 or drop into their office at #1 West Hastings Street, Vancouver. (that's at Pigeon Park) Speak to Shelley or Suzanne. After hours you can call Suzanne at 876-3726.



"Gathered together from the four corners of the earth, exclusively for our circus, and for your edification, education, and entertainment, we have here the most fantastic, the most fabulous collection of female beings upon which mortal eyes have ever set." And they were. Careening around the dance floor, spilling down the stairs of the new Vancouver Ms. Club, last night, was UFO--the United Feminists Operation--a zany troupe of white face clowns, led by a ringmistress, replete in costume that outrageously parodied a vaudeville stripper with grotesquely padded derriere and size 86, double E tasselled pasties. And out rolled a whole circus of bizarre beings: straight from the nuclear family was Wonder Woman; then Chameleon Connie, able at the drop of a hat to match both her appearance and behaviour to the needs of male society; and 'Lectric Lizzie, who thanks to the marvels of modern therapy is no longer the tortured victim of human thought or feeling. Interrupting this delirious burlesque of woman kind was Professor Wombthrottle, that illustrious doctor, lawyer, scholar, inventor, politician and author or the run-away bestseller Copulation Without Population.

The enthusiasm and fun of the company was infectious. Your normal theatre audience is not a particularly lively one. They're prone to attacks of the "polites". They sit scrunched in their seats clutching a dog-eared programme which they consult repeatedly to be sure they're masters of all the pertinent data--and who knows--maybe somewhere in the programme notes there'll be a mind illuminating statement explaining, preferably in twenty-five words or less, the meaning behind you being bored for the next two hours. And you can sink comfortably back into your chair and be assured of some kind of intelligent conversation for the interval, safe in the knowledge of the cultural worthiness of the event. None of these held last night: we were drinking beer, smoking cigarettes and participating enthusiastically in the performance--nodding, hooting, clapping, and hissing. By some form of strange magic, these carnival clowns with absurdly painted faces came to represent, with frightening clarity, absolutely real women trapped in the midst of

a male-oriented society. We saw a shorthand version of Mary trying to grow up condemned to sissy dolls and "girl stuff", to following left footed dancing partners, being told her appearance was by far her most important asset, and the predictable employment interview at the end that bypassed all her qualifications with the "and how many words a minute..." routine.

All leading up to the fairy tale from which the evening drew its title: But, something was wrong with the Princess. How can you have a fairy tale without a happy ending, but how can you have a happy ending when your princess happens to be a lesbian? A woman hated, feared and vilified by men and women alike: someone who calls into question every value of a patriarchal system. In no respect the stuff of fairy tales, but no more shocking than the pile of factual data subsequently thrown into our laps. Ferinstance:

Aristotle: The female is as it were a mutilated male.

Carl Jung : But no one can evade the fact that in taking up a masculine calling, studying and working in a man's way, woman is doing something not wholly in agreement with, if not directly injurious to, her feminine nature.

James Lovell (US astronaut): Well, we've never sent any women into space because we haven't had a good reason to. We fully envision, however, that in the near future we will fly women into space and use them the same way we use them on earth--for the same purpose.

Sigmund Freud: The great question that has never been answered, and which I have not yet been able to answer despite my 30 years of research is: What do women want, dear God, what do they want?

Zap! Enough? Another scene takes place in a psychiatrist's office. Familiar situation: bored house wife is treated with the recommendation that she do part time volunteer work and take valium three times daily. Followed by more of those shattering factual details:

"The widest target group for lobotomy, according to all the large scale studies, is women. Dr. Lindstrom, a prominent California neurosurgeon writing in 1964, said that 72 % of psychotics and 80 % of neurotics operated on are women. 71 % of the lobotomies performed

U.F.O. THEATRE cont'd from p. 3

be Drs. Brown and Lighthill in 1968 were women. And Dr. R. F. Heather-ton, at the Kingston Psychiatric Hospital in Ontario, admitted at a 1970 medical conference that the hospital administration refused to allow lobotomies on men because of the unfavorable publicity...that publicity did not, however, deter the hospital from performing lobotomies on 17 women. Repeatedly in the psychosurgical literature, it is regarded as evidence of success if a previously distraught woman is able to return to housekeeping chores. Dr. Freeman, the "dean of lobotomists", openly stated that lobotomized women make good house-keepers." (Taken from WBAI-PM Radio Women's Workshop in "Women in the Mental Cage")

The audience reaction was explosive--stomping, roaring, cheering, clapping. A far cry from the usual "Well, where shall we go for a drink?" that follows most theatre presentations. Why the difference? Was it this particular audience? Entirely female, and, for the most part, predisposed to fervent agreement with the material presented. Partly, I'm sure. But more than that UFO succeeded in creating a theatre event that was relevant, that forced the audience to react in some way. Another audience might have reacted differently, but no audience could refuse to be moved, to participate in the event. Which, for my money, is a lot of what theatre is about.

A confusing statement if you define theatre in terms of government subsidies and trained actors, who have rehearsed for a period of time and who will then perform in a theatre. UFO's director, Eileen Mitchell, is the only member of the troupe with professional experience. Lucy Winer's script started as a presentation commissioned by and for a Canadian Libraries Association conference held last summer. The excitement generated there caused a group of UN women to sponsor them on a trip to Romania to appear at a conference on Population Control. And now this trip across Canada, with ten days rehearsal and no financial backing. Which means no time to rest and rework, no time to polish, no time to experiment further, no time to grow as a company and clean up the technical clumsiness that plagues inexperienced companies, and no time to mature.

What more can you say? I hear lots of the people who went last night are going to the Y to see them again tonight. That I want them to get a grant so they can continue to grow? Mostly, thank you, for one of the strongest images I've seen in a production: a clothes line stretched across the stage by two company members and hung with diapers, frying pan, dish towel, and all that represents the dreariest of household chores.

WOMEN IN THE ARTS

Throughout August, the Vancouver Art Gallery (1145 W. Georgia ST.), is holding a series of special events called "Women In The Arts". Days, Times, Events are listed here.

August 6 - SETSUKO PIROCHE
September 1 Experiments in Sculptural Form
Exhibition in conjunction with Women in the Arts

Thursday WOMAN AS OTHER IN
August 8 THE ART OF MEN
Slide lecture by Avis Rosenberg
12:10 - 12:50
free

Friday SCULPTURE IN
August 9 MOVEMENT
performance by Evelyn Roth, Karen Rimmer
12:10 - 12:50
free

Monday TRANSCENDENTAL
August 12 MEDITATION,
PART 1
Diana Eckstadt, Teresa Cillen
12:10 - 12:50
free

Tuesday TRANSCENDENTAL
August 13 MEDITATION
PART 2
12:10 - 12:50
Free

Wednesday RECITAL
August 14 Lakshmi, Veena
12:10 - 12:50
free

Thursday
August 15

THE COLLECTED
MOMENTS OF JOAN
MCINTYRE

theatre, music,
dance
12:10 - 12:50
free

Friday
August 16

REELFEELINGS
VIDEO WORKSHOP
12:00 - 2:30
\$2.00

Wednesday
August 21

MICHELINE PELLERIN
French Canadian
Folksongs
12:10 - 12:50
free

Thursday
August 22

WOMEN IN LITERATURE:
FORUM
novelists Audrey Thomas and Jane Rule with Elizabeth Komisar
12:10 - 12:50
free

Friday
August 23

CANADIAN WOMEN
ARTISTS NOW
illustrated lecture by Glenn Allison
12:10 - 12:50
free

Tuesday
August 27

WOMEN'S THEATRE
COOPERATIVE
review of popular
pieces
12:10 - 12:50
free

Wednesday
August 28

RECITAL
Patricia Hoy
Pianist
12:10 - 12:50
free

Thursday
August 29

POETRY READING
Judith Copithorne
Carol Itter
Pat Lowther
12:10 - 12:50
free

Friday
August 30

ANNA WYMAN DANCE
THEATRE
improvisational
dance
12:10 - 12:50
free

Wednesday
August 28

JOYCE WIELAND
FILMS
Catfood
Sailboat
Pierre Valliere
8:00 pm. free.

Vancouver
ms.

Vancouver Ms., at 2089 West 4th, is sponsoring a group art show. Participating are Josie Cook, Colette French, Diana Kemble, Beverly Davies, and Elizabeth Trott. All women are invited to attend the opening night, Wednesday, August 28 at 8:00 pm. For more information, phone Dorothy or Jackie at Vancouver Ms., 738-5821 any evening after 8:00 pm.

KATCHING:

an illustrated women's liberation diary
on/out of the shell and into the streets!

like some 50% of
us, i was born

FEMALE!

about 17 years later
i discovered:

**WOMEN'S
LIBERATION**

when what women's liberation
was about finally hit me



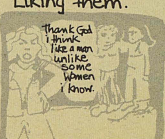
it meant a lot of changes:

a lot of things had to end for me:

letting men
treat me
certain ways:

being worried
about the
way i looked

thinking about other
women as compe-
tion: not really
liking them.



a lot of things had to begin:

self-respect
self-love & digging other
women & getting stronger and
more secure



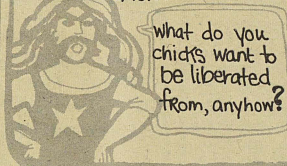
i did a lot of
thinking...



eventually i came to
certain conclusions



and then i started explaining
a lot...

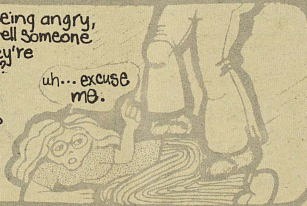


i spent a lot
of time
explaining.
It's a funny
situation —



i don't enjoy being angry,
but how do you tell someone
politely that they're
stepping on you?

what do you do
with blindfolds
that were
stapled on
at birth?



i explained a
lot why i think
the word "chick"
denies women
their
humanness &
i really got
tired of
explaining.

So in the interest of helping to build a world where i don't have to explain, i'm gonna try to do it here, hopefully, once and for all:

If you look at the commonly used "hip" words for men and women, you will notice something —



have you ever seen a real baby chick? they're soft and cute and cuddly and adorable and fragile and you really want to touch them, and they really need protecting cause they're **so stupid.**

Call birds are notoriously dumb witness the word "Birdbrain". The English call us birds.)



Now CAT, on the other hand, the form for a man — well, a cat is strong, sensuous, smart, of all: **SUPREMELY INDEPENDENT.**

cats don't need anyone; they don't take orders.

DON'T MESS WIT' ME



When you were little, did you ever play the game of choosing what animal you'd like to be? I'd say most of us would choose some kind of cat, but who wants to be a baby chicken?

I wanna be a leopard

I wanna be a panther



now, a lot of men say....

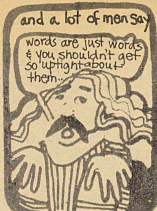


i don't mean those words that way, i never thought about them meaning anything.

and i say: racism in this country is subtle, unconscious (like "flesh-coloured" band-aids) that makes it no less real. Sexism is the same way (though both are also often blatant). Even if you personally didn't think up cat and chick and what they mean, it's your responsibility to stop using them, once you become aware of what sexual roles they imply.

and a lot of men say

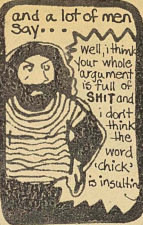
words are just words & you shouldn't get so uptight about them.



and i say: words are not just words, they are symbols, and what the words CAT and chick symbolize are the respective places of men and women in this society. They are limiting, confining, and a general drag.

and a lot of men say...

well, i think your whole argument is full of shit and i don't think the word 'chick' is insulting.



and i say: **LAY OFF!** 'cause in this case what you think is irrelevant! 'Cause even if my objections to the word were completely "irrational" **I HAVE TO DEFINE FOR MYSELF WHAT WORDS ARE INSULTING AND WHAT WORDS AREN'T, AND YOU, IF YOU WANT TO TREAT ME AS A HUMAN BEING, HAVE TO GO ALONG WITH IT!**

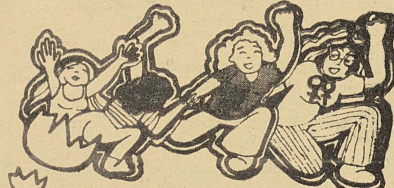
THAT'S WHAT ALL OF US HAVE TO DO!
THAT'S WHAT WOMEN'S LIBERATION IS ALL ABOUT — OR ANY LIBERATION — STEPPING UP FROM UNDER AND OUT FROM BEHIND "THE MAN'S" DEFINITIONS OF YOU AND WHAT YOU ARE BASED ON RACE, SEX, AGE, OR ANYTHING ELSE!

WE SEEK A WORLD FREE OF NIGGERS, GREASERS, SPICS, CATS OR CHICKS —

WE WANT A PEOPLE'S WORLD



and we're gonna get it!



our thanks to the anonymous sister whose ideas & work are reprinted here.



WOMEN'S HEALTH SYMPOSIUM

by ELIZABETH ZIMMER



While the Women's Health Symposium, held June 22 at Bayview School, may not have led to a "March on Victoria", or a unified strategy for revolutionizing health care delivery in B.C., it has already had some significant effects on the lives of the women who participated.

The Symposium, organized by the N.D.P. Women's Subcommittee on Health, achieved an individual sense of involvement among the 267 women present, enabling them to make connections between their personal experience with the health care system and a broader view of the system as a whole.

Melanie Conn, one of the planners of the day-long event said that the aim was to bring together a wide range of women, and let them interact and share experiences and ideas.

Both the establishment and the radical press distorted the event in similar ways, focusing attention on the prepared speeches by the panelists, and ignoring the consciousness raising aspects of the meeting. Kayce White of the Sun wrote several stories on the panelists' contributions, retailing extensively the speeches by Eve-Lynn Rubin, Morgan Fox and Cathy Stewart. Cathy felt that while the Sun's coverage of the speeches was not distorted, no effort was made to report on the "sharing that was the meat of the symposium." She has received a lot of good feedback from women who read about her speech in the paper, especially older women.

Coverage of the Symposium speeches served as a flash point in the conflict between the Seymour Medical Clinic and the Vancouver Women's Health Collective (which has been using the Seymour Clinic for the weekly women's self help clinic). The Sun's coverage of Morgan Fox's talk on "The Health Care Industry" succeeded in creating the impression that the entire event had been sponsored by the Vancouver Women's Health Collective, and antagonized the doctors who reacted negatively to Morgan's speech (reprinted in full on pages 9-9 of this issue).

The doctors were concerned that the women not appear too radical and requested an explanation of the aims and views of the Health Collective.

(Some of the members of the Collective felt that certain of the partners in the clinic objected to the women's presence because they were encouraging self-examination and "were probably lesbians and not to be trusted alone with women patients.")

This development has had the positive effect of strengthening the Collective's consciousness of itself as a political entity. The need to respond to the Clinic's questioning led the group into its first large scale examination of its political position and is resulting in the realization of a need for more political analysis and a continuing examination of the Collective's position and direction.

Though the situation may result in the Collective discontinuing its association with the Seymour Clinic, members expect to have no difficulty finding another facility in which to continue their programme; for information on the new location call the Collective at 873-3984.

Other "tangible results" of the symposium include the formation of a couple of ongoing study groups.

"It's crucial that nurses get it together," observed Melanie Conn, "if they become strong and clear it will change the whole system." An effort in this direction has begun by a group of women ranging from nursing students to university teachers, interested in exploring feminist concerns in nursing. Marie Campbell is spokesperson for the group, which hopes to appeal to a large number of nurses with consciousness-raising groups, bibliographies and a catalogue of unpublished material on the Canadian nursing situation. "Nursing has such a long tradition of conservatism," she observed. "Anyone who thinks they're a people-helper doesn't like to turn things around and look at them from a different point of view."

"You don't have to be stupid to be a nurse," she said. "We're going to have to act different to change our image."

Seven women attended the first meeting of the group on July 8. They are planning an event to be held in late September, featuring a guest speaker and a discussion of what the issues are for nurses. Among the problems the group has already earmarked for attention is the changing role of the nurse.

"We are no longer going to be handmaidens, but what are we going to be?" Nurses have no tradition of decision making or of taking much responsibility, Ms. Campbell points out, and their co-operation, loyalty and patterns of support have always been with "their men", the doctors, rather than with their fellow nurses.

The nurses have been seen as children and dependents in the health care system, never expected or allowed to make important decisions, always looking to doctors for authority.

On the other hand, at home they have faced the same problems as other career professionals, having to juggle their families' needs and their personal relationships around the demands of their nursing schedules.

The group's initial focus will be on the members' personal experiences as women in nursing. It will also include concern with the quality of care, with the place of the nurse in the larger issues of the health care system. Interested women can contact Marie Campbell at 731-2370.

Another outgrowth of the Symposium has been a "Self-Healing Collective," a group which has met a few times attracting as many as 20 people. They want to learn alternative healing methods, and pass them on to the general population as an alternative to "male-dominated western medicine." The group plans to have a political basis, and is writing a position paper as we go to press. Their concerns will include reflexology, acupressure, massage, herbs, psychic healing, yoga, bio-energetics, nutrition, astrological influences on health, visual training and radical therapy.

Women interested in learning skills in these areas, and sharing them with the public at large, can call Peggy Ormond at 873-1743.

THE HEALTH CARE INDUSTRY

Reprinted here in full is the speech Morgan Fox gave at the Women's Health Symposium, June 22nd.

I used to think I only purchased what I needed when I shopped and that advertising merely helped me make an intelligent decision. I thought more expensive items were always better quality than cheaper items. I thought companies existed to develop and manufacture better working, more efficient and ultimately cheaper products for my comfort and well being. I used to think doctors existed only to make me well. I thought I was always prescribed the best drug on the market to cure me of my particular ailment. I thought any operation I was told I needed was solely for my health benefit.

I was very naive.

I realize now that our health care system is in fact an industrial complex similar to the oil industry and the academic industry. I know this industry, like all industries, is dominated by a group of powerful and elitist individuals, the doctors. I know this industry deals with enormous amounts of money and is profit oriented. I know that the product of this industry is health, and that as a consumer I am forced to buy health from a veritable monopoly. I know drug companies spend huge sums of money advertising their particular brands. I know that I am discouraged from learning how to take care of my own body or having anyone other than a doctor treat me when I am sick. I know how much more clearly I have understood where and how the health system could and must change when I view it as an industry. I would like to share my knowledge with you this morning.

Let me explain what I mean when I say our health care system is an industry. There are four main areas I would like to explore: 1) The process of becoming a medical doctor or health professional, 2) The monetary incentive of being a medical doctor in a business which is a monopoly, 3) The fact the medical system is geared to treatment rather than prevention, and 4) The connection of the medical industry with the drug industry.

HEALTH PROFESSIONALS WORK IN A TIGHTLY RANKED HIERARCHY.

with the doctor at the top and professional bedpan changer at the bottom. What does it take to become a doctor? I used to think it took intelligence. I now see it also takes time, money, competitiveness, aggressiveness and in most cases a male body. A relatively small number of people are admitted to medical school each year.

These people are treated as the cream of the crop, and many of them end up believing they are. Doctors are trained to believe only they should heal sick people, they are trained to impose their authority and power on their patients and other health professionals who work with them. Many medical students

develop the belief, after struggling through years of hard work and sleepless nights that: 1) they deserve to be highly paid the rest of their lives and 2) no one who did not go through the grind of medical school should be allowed to treat illnesses. Nurses may also go through a lengthy and tedious training process but they are not given the same authority and responsibility which is vested in doctors, although they may at times perform exactly the same task.

The medical structure that develops is similar to the structure of a big business. At the top are the well paid, prestigious, highly educated business executives or doctors; at the bottom are the underpaid, overlooked, often unappreciated, competent but without a degree to prove it, employees or nurses, dietitians, volunteer health workers and so on. Somewhere in the structure exists the patient/consumer, you and me, who has been trained to believe in the medical model or who has never tried to analyze the model so that we could understand how to develop anything different.

THE HEALTH SYSTEM IS A MONOPOLY.

Doctors are the only people legally allowed to treat a physically unwell person. I go to the dairy to get milk I go to the hardware store to get a hammer, I go to my doctor to get well. But while I am able to go to another dairy if the price of milk is too high, or return my milk if it tastes bad, or buy a used hammer from a friend if I do not find what I want at a hardware store, the only place I can go if I feel sick is to a doctor and I pay the same price for that visit where ever I go.

The medical profession has succeeded in establishing a highly lucrative monopoly which is structured like a business, makes profits like a business, and yet is not accountable to the consumer for the services it offers. I am aware of a certain mystique that surrounds the health world when I draw analogies between, for example, the used car business and medical business. People get a kind of glazed look in their eyes and they say in hushed voices, "How can you imagine the medical profession as a competitive business, doctors are dealing with human lives, life and death, they are different." I always feel strange and uncomfortable with this replay. Statistics from Health and Welfare Canada show that more young people die of automobile accidents than any medical problems. 10 Much of what I do every day deals with life and death. Buying vitamins or a used car affects my ability to stay alive no more and no less than the diagnosis of a vaginal infection and a prescription for Playl suppositories twice a day. Malcolm Brown in an article entitled "Medicare and the Medical Monopoly" 2) notes that "the restriction on the number of doctors has always been defended by the medical profession on the basis of quality control--an argument that tends to hit

a responsive chord with the public since no one wants to be treated by an incompetent doctor. But the quality argument is often abused. Just as one does not need a mechanic to sell gasoline or a Ph.D. in English to teach spelling, one does not need a medical specialist to conduct a general examination or a general practitioner to remove corns." Most doctors have a monetary interest in maintaining the present under-supply of doctors. It is comfortable and profitable to practice business where there is no competition. Malcolm Brown continues, "the medical profession has tended to limit the quantity supplied of medical services not only by limiting the number of doctors but also by restricting the roles of nurses and paramedical personnel. Physicians maintain that these professionals must work under the direction of doctors. By confining nurses and paramedical personnel to non-decision making roles the medical profession simultaneously retains control over all aspects of medical supply and enables physicians to increase incomes by employing nurses and paramedical personnel." (3)

The medical system is geared to treatment rather than prevention. One way of preserving the health industry is the emphasis on treatment or acute care rather than prevention. Doctors are paid a fee for service. This means service for a particular problem. Under the Medical Insurance Plan, a woman with a vaginal infection can visit her doctor, but that same woman is not covered by the Medical Insurance Plan to visit her doctor to talk about how to prevent common vaginal infections. As long as doctors are paid for treating illnesses rather than maintaining health, there is little incentive for preventative medicine. An article in the Canadian Medical Association Journal titled "Tonsillectomies in Dollars and Cents" points out some rather alarming disparities in the number of tonsillectomies performed per year per 10,000 children under 15 years of age. In Uppsalla, Sweden, the rate is 17, in Liverpool, England, it is 26, and in British Columbia it is 107. (4) Such figures lead one to assume that unnecessary surgery is probably being performed. There are similar statistics in the New England Journal of Medicine which show that 7 times as many women in Canada have their gall bladder removed as women in England and Wales. (5) One Canadian doctor sums up this viewpoint quite succinctly: "There is only one kind of health--that ordered by the physician..." (6)

CONNECTIONS BETWEEN THE MEDICAL WORLD AND THE DRUG INDUSTRY.

are another example of the way in which our health care system is run as a business. Drug companies spend thousands of dollars each year indoctrinating doctors. Companies which sell products like beer, tobacco,

and liquor spend about 5% of their total revenue in advertising, and they advertise to the entire population. In contrast, drug companies put 24% of their total revenue into advertising and promoting their drugs to only a small part of the population, the physician. (7). Every day doctors receive plastic wrapped, skillfully decorated, free-sample-inside brochures pushing the magic cure-all wonder drug of the week. Antibiotics are produced in enormous quantities, far greater than is medically necessary. The Annals of Internal Medicine finds that each person may need antibiotic treatment once every five to ten years, but enough antibiotics are produced for every man, woman and child to use antibiotics twice a year. (8) That is 10 to 20 times too many antibiotics produced a year which must be sold through high power advertising. Although the figures are not yet compiled, the overuse of antibiotics at Vancouver General Hospital is also a cause for concern. Sedatives and tranquilizers are another category of commonly misused and over-promoted drugs of particular concern to us since the advertising is slanted towards use by women.

The involvement of the drug industry with the Health Industry is intimate and frightening. Drug industries provide medical societies and institutions with research grants, they give "gifts" to physicians, they indoctrinate medical students and doctors to the drug company's high priced name brands. (9) John Gilbert, President of Jules R. Gilbert, Ltd., states, "I sell my products to druggists, under generic names at prices which are up to 1,150% cheaper than the equivalent products sold under a brand name. Yet I still make a comfortable profit." For example, a drug called by its brand name, "Gravol" sells for \$69.55/1,000. Under its generic name, dimenhydrinate, it sells for \$6.12/1,000. (10)

To receive better health care we must realize how the health system is organized. We must be aware that at the present time our health care system is structured on an industrial model with many of the drawbacks of a big business, such as professional dominance, profit orientation, and monopolistic control, with very few of the advantages, such as being able to buy health elsewhere, organization into unions of consumers to boycott shoddy service, and direct consumer involvement in management of the health business. I know many doctors whose commitment to health care is on the basis of using their skills to heal people and sharing their knowledge so that more people learn how to take care of themselves. Unfortunately, there are many doctors for whom this is not the case. I know through working with the Health Collective that non-medical people can learn



to do routine medical examinations and interpret standard laboratory tests. I know that health information can and should be taught and learned and demystified. I also know that so far this is the exception. But these exceptions make me aware of how our health systems could be organized. It will take many of us to bring about this reorganization.

I DO NOT BELIEVE HEALTH IS SOMETHING WE SHOULD HAVE TO BUY.

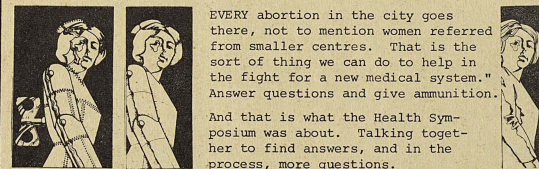
I do not think our health care system should be an industry. I believe health is a human right, not a business commodity. I share my fears, my frustrations, my anger, and my hopes in order to learn and to change. I hope to learn with other women today how the health system is structured and where women fit into that structure. I hope to participate with other women in changing that system by using our collective skills, powers, and energy.

Morgan Fox

REFERENCES

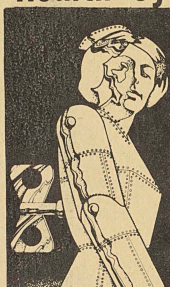
1. Major Causes of Death for Each Sex and Age Group, Canada, 1971. Health and Welfare, Canada, Long Range Health Planning
2. Malcolm Brown, "Medicare and the Medical Monopoly" in *Canadian Forum*, April, 1974, pp 5-9.
3. Ibid.
4. C. P. Shah and L. M. Carr "Tonsillectomies in Dollars and Cents" in *Canadian Medical Association Journal*, February 1974, pp 301-303.
5. Eugene Vayda, "A Comparison of Surgical Rates in Canada and in England and Wales" in *New England Journal of Medicine*, Dec. 6, 1973 Vol. 289, pp 1224-1229.
6. J. A. MacMillan, "Factors Influencing Utilization of Medical Care," in *Canadian Medical Association Journal*, Dec. 16, 1967, Volume 97, p. 1513.
7. Lecture by Dr. Tom Perry, Pharmacology, UBC, April 6, 1972.
8. *Annals of Internal Medicine*, Vol. 79, 1973 pp 555-560.
9. The Economics of Drug Prices in Canada, paper by Joel Lexchin, November 1970.
10. Ibid.

Another View... cont'd from p. 10



Health Symposium: another view

by Pat. Smith



nurses, administrators, patients, educators, and so on.

There were speeches, of course. Well researched, concise, biting, they made excellent copy for the establishment press. (The speeches made good copy for the "unestablished press" too, as you will find when you read Morgan's "The Health Industry" on pages 8 and 9.) It seems to me, though, that the function of prepared speeches at a "symposium" is two-fold. Not only does it give the writer an opportunity to present highly organized information to a large number of people at the same time, but it also gives us some focus, some new information, some mind-bending insight that enables us to attack old problems with new vigour. They act as a catalyst for thought and discussion and that the opportunity to discuss was provided at the Health Symposium was one of the most rewarding aspects of the whole day.

As usual, the discussion groups were crowded, almost to the point of being unwieldy. There was an incredible variety of women there,

The Vancouver Women's Health Symposium was a time and place for women, no matter what their place in the medical hierarchy, to talk about the issue of women's health as concerned equals. Virtually every level of the hierarchy was represented: doctors,



quite well. Then the patient got sick and the relationship deteriorated. "The problem was that he became very condescending and patronizing. I didn't argue. There is something really demoralizing about pain."

Doctors pointed out that they are trained to deal with healthy people:

"All through medical school you never see a healthy patient. When one came in to my office, I just didn't know what to do."

Agreement was expressed by 'patients' that they have felt incredibly guilty in going to a doctor for a check-up when they felt nothing was wrong.

"Our whole medical system is geared to cure rather than prevention. In fact, a doctor does not get paid for time spent with a "healthy person" If I say on my report that it was a routine check-up and nothing was wrong I won't get paid."

Concern was expressed by almost every one that there is no intermediate person in the health system who can take the time to answer

representing as I mentioned earlier, probably every level in the medical hierarchy. Talking as concerned individuals about a common problem, we were able to view the problem from varied points of view.

We talked of the problems that women had with their doctors. About how at least in one case, the relationship seem



questions and do routine procedures. Doctors explained that often they didn't have the time and moreover, they often didn't have the skill to deal with the social/emotional problems that patients have. Nurses explained that their hands are tied in a lot of cases because they might be found guilty of going beyond their jurisdiction by counselling patients. It was agreed that some paramedical service is needed.

Later, in an afternoon workshop, members of local hospital boards mentioned that paramedical services are being looked into but it is a very slow process. Some changes are being made in the nursing education programs but it will be a long time before there will be any comprehensive, preventative health system. The Foulkes report is a step in the right direction but it is significant that it is being implemented in areas that have very little or no organized health conglomerates already. When asked whether or not it was worthwhile for lay people to seek positions on the hospital boards one woman said that no, she didn't think so, but that didn't mean we couldn't use the women already on the boards.

"For instance, The Vancouver General Hospital does twice as many abortions as live births. That is the sort of statistic that gets into the hands of the Right-To-lifers. What these people don't say is that the obstetric facilities at VGH are so bad that any doctor who can, will admit the patient to another hospital. Also, VGH is the only hospital in the area doing abortions period so

(cont'd on p. 9)

RAPE RELIEF CENTRE

RAPE RELIEF, 4197 John st., is a group of lay women who have come together to provide support for rape victims. They provide counselling, accompaniment service, 24 hour crisis line, referrals, police, medical and legal information, education and third party reports.

IF YOU WANT TO REPORT A RAPE

Preserve the evidence.
Call police immediately.
Call a friend and/or Rape Relief for support.
Get medical attention.
Write down the details of the rape.

PRESERVE THE EVIDENCE

Until you have had a medical examination, DO NOT wash, change your clothes, nor bath or douche. DO save torn clothing, articles which may have fingerprints, anything broken in the struggle, or any weapon used by the rapist. Try to remember the license plate number, the description of the rapist, his car, etc.

874-7911

CALL THE POLICE IMMEDIATELY

Call the police as soon as possible. This will help them find the suspect. Initial investigators will come immediately to take down a statement. They will take you to the emergency ward of a hospital for a medical examination to obtain evidence. Take a change of clothing with you. You do have the option to call your own doctor.

Within the next day or two, detectives will contact you for a more detailed interview. They will question you thoroughly about your description of the suspect and the rape situation. Some of the questions may seem irrelevant, or even humiliating. Don't hesitate to ask for an explanation.

CALL A FRIEND OR RELATIVE

Should you decide to prosecute, the first person you talk to after the rape will be a key witness in your case. Therefore, it is legally essential that a complaint be made to someone at the first reasonable opportunity (this can be the police). There is also the value of having someone with you through the ordeal. (It is unwise, however, to relate your story to too many people before relating it to the police. Facts may become distorted or out of sequence.)

WRITE DOWN DETAILS OF THE RAPE.

It may take some time before the rapist is apprehended and the case brought to trial. Your immediate recollection of particulars concerning the rapist and the circumstances surrounding the rape will help you at that time. It will also be instrumental in any later investigation or report.

GET MEDICAL ATTENTION

For legal evidence, the doctor should:

1. check the whole body for injuries
2. check for torn or stained clothing
3. do a pelvic examination to check for internal injuries and take samples of vaginal fluid for sperm and semen tests.

In any case, the doctor should:

1. make sure all injuries are treated
2. take cultures for gonorrhoea from your throat, vagina or anus if the rapist's penis was in contact with any of these areas
3. do a routine bloodtest for syphilis
4. ensure follow-up testing for gonorrhoea, syphilis and possible pregnancy.

GET A V.D. RETEST

A retest for syphilis will be NECESSARY in 4-8 weeks; a gonorrhoea check in 4 - 7 days. Until you have negative results on these tests, you could be spreading VD. For information about VD, call the VD Clinic or Rape Relief.

ABOUT PREGNANCY

A pregnancy test is not valid until 6 weeks after your last period. Pregnancy tests can be arranged through Rape Relief. If you are pregnant, your doctor, the Women's Health Collective (873-3984) or Rape Relief will counsel you on the alternatives. Briefly they are:

1. See the pregnancy to term: keep or put the baby up for adoption
2. Abortion - before you are 12 weeks pregnant; the Women's Health Collective will help with abortion counselling
3. The Morning After Pill - some kinds are now considered to be dangerous; there seems to be a connection between the use of this pill and uterine cancer in later female children. The harmful chemical is known as DES (Diethyl Stilbestrol). Other morning after pills contain Ethinyl Estradiol which is thought to be less dangerous. If you decide to use the morning after pill, you must begin to take it within 72 hours after the rape.
4. Menstrual Extraction - up to 10 days after a missed period

GOING TO COURT

If you decide to prosecute, Rape Relief will give you more information, accompaniment and support. HOWEVER, THE DECISION MUST BE YOUR OWN. It will be a long and difficult process. You must keep the facts firmly in your head, and

not allow yourself to be intimidated. The major issues in a rape case are identity of the accused, penetration of the vagina, and a lack of consent on the victim's part. When a suspect is apprehended by the police, you will be asked to come down and identify him. You may be asked to pick him out of a line-up. Now the court procedure begins.

BAIL/HEARING

This usually takes place within 24 hours of apprehending the suspect. In 90% of the cases, bail is granted on "own recognizance".

THE PRELIMINARY HEARING

The preliminary hearing may take place a couple of months after the bail-hearing. You will be informed at least a week in advance. The prosecutor may call and talk to you about your case before the hearing. The purpose of the preliminary hearing is to establish whether there is enough evidence to go to court. The hearing usually lasts several days and is open to the public. You and the accused and any important witnesses in your case (police, doctor, etc.) will testify and be cross-examined before a magistrate.

AT THE TRIAL

It is the trial that finally decides the case. It may take place several months after the preliminary hearing. The case is generally heard before a jury, but the defense can elect to have it heard by a judge. The trial is open to the public and usually lasts several days. The same individuals are present at the trial as at the preliminary hearing, plus other relevant witnesses for the defense (character witnesses, private investigators, etc.)

WHAT IF YOU DECIDE NOT TO PROSECUTE?

Make sure you get proper medical treatment for injuries and possible VD or pregnancy. Even if you are not going through with the prosecution, it is still possible to make an informal report to the police. Any information they have helps in the identification of repeating rapists and/or identifying suspects. If you do not want to involve yourself, you may ask Rape Relief to file a Third Party Report, in which the circumstances will be reported to the police but your name will never be used. Remember, that even if you report the rape to the police, you can drop the case at any time.

WHAT WE DO AT RAPE RELIEF

We give support and counselling to women who have been raped, be it recently or long ago.

We are available in crisis situations on a 24-hour, 7 day a week basis.

We will accompany a woman through the police investigation, medical procedure and/or the court process if she so desires.

We will provide information about the police investigation, medical needs and legal procedures.

We have an educational programme. Speakers and reading materials are available through our centre at 4197 John Street.

We will provide medical and psychiatric referrals.

We will file Third Party Reports.

SOME WAYS TO AVOID NEEDING OUR SERVICES

Whenever possible, wear non-restrictive clothing so you can run.

Yell loudly if attacked. "Fire!" seems to be the most effective.

Practice memorising license plates and being aware of the people and cars around you.

Self defense tactics can be used to give you an opportunity to escape!

*do not carry a weapon; it could be used against you.

*poke at eyes, clap hard over the ears, throw anything available in his face.

*scrape your foot down his shin and step hard on his instep

*carry a small purse-size can of hair-spray without the cap on

*carry a loud whistle

*a lit cigarette can be useful as a defense

Remember hitchhiking is a very risky way of travelling. Many men consider sticking out your thumb a symbol of soliciting. If you do hitch:

*know the license number of the car

*check the back seat before entering; never get in the back of two door cars

*know where the door handle is and get out if necessary; don't wait to be polite

*never accept a ride with more than one man in the car

*don't feel embarrassed about refusing a ride if you don't feel comfortable about a situation.

Report to the police the license number of any car which follows or harasses you.

When driving alone, make sure all doors are locked. Check the back seat if the car has been parked and don't leave your car unlocked.

Always try to be in control of situations where a sexual confrontation could happen - on all levels from casual to intimate.

Reprinted in its entirety from a pamphlet available from Rape Relief.

ACTION for WOMEN : Conference Report by Pat Smith

On May 25th, a day long conference was held at Capilano College. Entitled "Action for Women", its purpose was to take a look at what is being done re: Rights for Women (or rather, the lack of rights) how it is being done, and with what results.

The day's work started with a panel discussion with representatives from Women in Teaching, The B.C. Teacher's Federation, Women's Health Collective, The Vancouver Status of Women, N.D.P. Women's Committee, and the Committee to Defend Dr. Morgentaler.

As each woman spoke, two things became painfully clear:

1. Practically everything had been tried
2. Practically nothing has worked.

Gene Errington from the Status of Women explained that SWAC has been from the start, a group dedicated to working within the system. To this end they have acted as lobbying group, meeting with ministers and submitting briefs. Long briefs, short briefs, serious ones, light-hearted ones and a good number of the angry variety. Each one was systematically disregarded.

"WHAT WE LEARNED IS HOW TO SURVIVE."

A part of learning how to survive is finally understanding where the decisions are actually made. It's not around the committee table as we have been lead to believe, but around the cafeteria table at lunch. And there are few women admitted to that circle. She pointed out

that the Status of Women has been listened to, not so much as a force to be reckoned with but because there have been women on the "inside" sympathetic to the issues of Women's Rights.

This attitude on the part of the government to 'listen' but not act was further underlined by Shannon Randal of the NDP Women's Committee. She said that while the NDP Party has officially recognized Women's Rights as part of the party platform they have not acted upon these issues in any real way. "THEY ARE JUST NOT PRIORITIES."

In contrast, the representative from the Committee to Defend Dr. Morgentaler pointed out that not only is the government unwilling to act upon the abortion issue but they are unwilling to listen. The ridiculous abortion reforms of a few years back seems to have closed their eyes to the fact that abortions are impossible for many women to obtain and that in all but the most "liberal" cities, the situation has not changed at all. The Morgentaler committee has also written briefs, but in their mind, one of the most important things is public demonstration coupled with petitions. This acts as a consciousness-raising device for the general public and it's a fact of life that for each and every woman carrying a placard, there are X number of women who couldn't, although they have similar views.

SERVICE MUST INCORPORATE STRATEGY

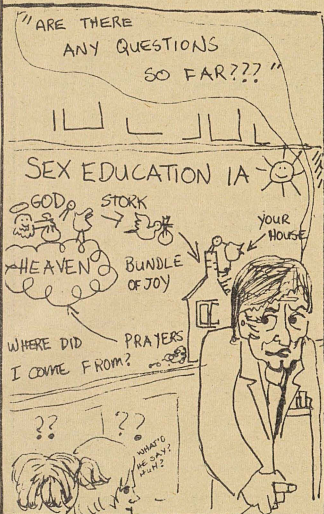
Cathy Stuart of the Women's Health Collective talked briefly about the dangers of the Feminist Movement being channelled into service projects. Ever-present is the fear of co-option. The government funds Women's groups to perform some sort of service for Women. Then the group spends all its time and energy providing that service to the exclusion of working towards a society that meets the needs of women.

After the panel presentation, the floor was open to a seemingly endless period of "question and answer". There were no questions, however, and woman after woman related the experience of her group, generally giving evidence that "virtually everything has been tried and little has worked".

In the afternoon workshops, we looked at what had already been discussed and brainstormed for new ways to approach the problem. Generally speaking, no unusual tactics were devised, but the energy with which the old ones were examined was heartening. Finally, in a mass meeting, it was voted that a steering committee be elected to

1. plan a shadow legislature protest in Victoria in the fall
2. look into the possibility of forming a B.C. federation of Women.

EVERYTHING YOU NEVER WANTED TO KNOW ABOUT SEX.....



After I completed the grade eleven sex education program in school, I am more disgusted than ever with the lack of adequate information being provided, as well as the lack of qualified instructors.

Our guidance class was made up of women and men in the sixteen-seventeen year range, with two female instructors, one being the school nurse, and the other, the "girl's" counsellor. I presume it was thought that having a man there would have been much too embarrassing.

The course began with a five page sex questionnaire we were to fill out anonymously indicating only our sex. The questions were multiple choice. It began with a few little dillies like.....

Where did you receive your first sex information?

Did you think it was good information?

Then it moved on to.....

1. Sex is (a) a biological need (b) a psychological need (c) an emotional need (d) all of the above (e) none of the above

2. How can you tell if a woman has had sex? (a) by the way she walks (b) by the way she talks (c) by her social setting (d) only her doctor can tell (e) none can tell

3. What is the importance of foreplay in the sexual act? (a) to delay the man's orgasm (b) to delay the woman's orgasm (c) for pleasure (d) to make the woman's sex organ ready for intercourse.

This is a big killer in itself, as the "sex organ" they are referring to is obviously the vagina, which is not a sex organ, but a reproductive organ. Once again reinforcing the myth that penile-vaginal intercourse is "the real thing" (even though it may be completely devoid of pleasure and sensation for the woman).

4. In achieving an orgasm (a) men are always ready before women (b) men are usually ready before women (c) women are usually ready before men (d) a well matched couple is ready at the same time. Notice the phrase "a well matched couple". Does this mean to say that if you are both interested in bullfighting, skydiving and opera that you are bound to come in unison, or is it implying that if you do not come in unison you are not well matched? Maybe people should be wearing T-shirts saying "I come in five minutes". "I come in half an hour", etc so we can become "well matched".

ACTION for WOMEN : Steering Committee Report *by Ann Dascal*

At the Capilano Conference, a Steering Committee was struck whose responsibility is to organize and present recommendations at a founding convention of the B.C. Federation of Women. They are also working on the proposed demonstration to be discussed at the Founding Conference.

Many women's groups from all over the Province are represented in the steering committee. (over 20 women) There has been much discussion and research on organizing the future conference. Discussion of the proposed demonstration, recommendations of structure, policy, issues, financing and other aspects of a B. C. Federation of Women are being worked on.

Subcommittees have been formed for these various tasks and formal recommendations are being worked out to be discussed and voted upon at the conference.

Important concerns are finance and structure of the Federation. It is important to ensure that areas outside of Vancouver are represented, and that the best organizational structure is found to implement the goals of the Federation. The issue of membership is also being discussed (whether to recommend membership on a group or individual basis, or both). The committee agrees that membership fees should be kept low.

While many of the recommendations to be taken to the founding conference are yet to be finalized, the Steering Committee is working

hard at considering all aspects of proposals regarding a Federation of Women. They will continue working throughout the summer.

WHAT HAS BEEN DECIDED SO FAR??

First, that a conference is to be held September 13 - 15 at either the University of B. C. in Vancouver, or Capilano College in North Van. to discuss the demonstration and Federation recommendations and to hopefully vote the B.C. Federation of Women into existence.

Arrangements are being made for out-of-town travel expenses.

Second, that a raffle will be held before the conference to help pay for costs.

WHAT CAN YOU DO TO HELP??

Assistance will be needed in recruiting prizes and selling tickets for the raffle to help finance the conference. Tickets will be distributed to groups and individuals willing to participate. If you wish to help, write or phone Diana Douglas, 306 West 25th Street, North Vancouver. 987-2412.

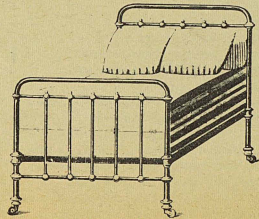
If you or your group wishes to present ideas or briefs concerning any aspect of a B. C. Women's Federation, there will be a steering committee meeting devoted to this on Saturday, August 24 at UBC in the Continuing Education Building starting at 10 am. Please come early.

If unable to attend, briefs and comments can be sent to Joyce Hammond at #212 - 125 West 5th Street, North Vancouver. 985-9782.

Consideration of the proposed Federation and demonstration before the conference is important. This will help facilitate the amount of work and decision making which has to be done at the conference.

Strong support and unified action is necessary to meet our goals, to advance the issues of the women's movement and to support each other in our struggle.

Ann Dascal
Steering Committee



This month the Pedestal was put to bed by: Ann, Donna, Rhonda, Jane, Elizabeth, Carolyn, Pat, Marni, Beverly. Special thanks to Ann Dascal, Morgan Fox, Janet Torge. Printed by Fran and Sarah at Press Gang.

5. A woman can only get pregnant if (a) she has her period (b) she is not using birth control (c) the man has had an orgasm (d) she has had an orgasm

6. Masturbation: (a) is a normal healthy activity (b) leads to homosexuality in later years (c) leads to insanity (d) makes your hair fall out (e) none of the above. What is masturbation? Well, the definition supplied for my class was "self stimulation".

And thus the questions proceeded in this manner. After we completed them we discussed in class the "correct answers". The next period was devoted to anatomy in which we looked mainly at, you guessed it, reproductive organs, and another period was devoted to a film about a premature ejaculator and his unfulfilled wife, entitled (?) "Sex and Communication" bringing to an end our unit on sexuality.

Some of the examples quoted from the questionnaire may be slightly off how they were originally presented. I apologize for this inconvenience, but when I tried to get hold of the questionnaire again I was refused

the right to do so, and allowed only to read it through once in the counsellor's office, without making notes. The reason given me for this action was that the counsellor does not want the questionnaire to fall in the hands of the irresponsible public and displayed throughout the community.

Admittedly sex education in school has come a long way from the sperm meets the egg episode, but in my opinion it can still be judged to be vastly inadequate. The instructors were probably honestly trying, but were ignorant themselves, not to mention afraid of static from the community. This to me, is not justifiable, though. The majority of teenagers in school are now getting involved in sexual activity between the ages of fourteen and eighteen, thus we need good education starting at an early age. We desperately need to put an end to the penis-vagina conditioning we receive when we do get a course

in sex education. Someone has got to blurt out that the clitoris is the female sexual organ. Someone has got to admit that homosexuality is not weird, grotesque, or even that unusual. As women, we have to receive an early enough knowledge so that when we do get into sexual relations we are not left waiting for that magic penis to enter us, sending us off to wonderland. It's a long wait...

People, I am sure will forever argue that "kids" of that age aren't ready for this kind of information. Well then what are we going to do? Hold separate classes for those who are virgins and non-virgins, continue teaching everybody at a prepuberty level or treat all as equal and make everyone aware of the real and relevant facts concerning sexuality?

by
Ann

LETTERS to the PEDESTAL

In a statement printed in last month's Pedestal, Minister of Highways Graham Lea said that Northern Development will cause social problems with an influx of single migrant workers and one way to alleviate the problem, would be to hire more women in the work force - "not just in the traditional jobs." While the Pedestal did not receive any letters about his statement, the Vancouver Sun did. Reprinted here are two of them:

1.

The increasingly irresponsible behavior of B.C.'s minister of highways is no more evident than in his sexist statement, "Women are needed in the North."

Throughout the history of B.C., both men and women have pioneered together the interior and northern regions of our province.

The suggestion implied by the minister's remarks is that government intervention is needed to sponsor some kind of a "here come the brides" program for B.C.

The Women of B.C. do not want a highways minister who wants to be some kind of a sex broker for northern B.C. We would much prefer that he get on with the business of fixing the roads.

VOX POPULI

Victoria

2.

RE: Highway Minister Graham Lea's reported statement that "More women are needed in the North."

To hundreds of women in B.C. this was a most degrading statement coming from a minister of the Crown.

This statement referring to women as so much machinery to be used by the northern male for the development of the North is highly insulting, barbaric and uncivilized. It drags us back to the Dark Ages with all the violent actions of dominating males with attitudes shaped by that era. We do not live in the Dark Ages and we will not be subjected to such slanderous suggestions pertaining to our sex.

Women are establishing themselves as competent individuals, and statements such as Mr. Lea's only serve to stimulate our determination.

(Ms.) B. Pennock

(Ms.) C. Kemeny

Victoria.

Sisters:

We just finished a hectic one week effort to put out our newsletter. Then the latest issue of PEDESTAL came in the mail. It's so nice to read some one else's effort. It made me realize that others probably look forward to our newsletter, too.

I would like to draw your attention to our centre's change of address:

Saskatoon Women's Centre,
124A Second Ave North
Saskatoon, Sask.
Phone 242-5830

The University Student's Union has funded a Women's Directorate which acts as a Women's Centre on campus.

At this point, it acts as another base for Women's Liberation Activities:

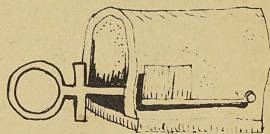
USSU,
Women's Directorate,
Memorial Union Building (MUB)
University of Saskatchewan,
Saskatoon, Sask.

As far as women and financial resources allow, we attempt to mail the Pedestal a copy of our newsletter. We also send copies to Centres, groups, and individuals across Canada. We use the addresses as published in the Pedestal to supplement our list.

We had originally planned to put out a magazine, "Prairie Woman", but the effort's never gotten out of the planning stage.

Read the newsletter; it indicates the state of the movement. We are in danger (in my opinion) of becoming service-oriented and non-political. As a woman who became politically conscious in the 60's and later - a feminist - I would prefer if Women's Liberation were a pressure group and political.

Yours in Sisterhood,
Nadia Greschuk



Dear Sisters:

...good to see some ♀'s papers are still around. Someone in BC told me you weren't!

M. Kostash,
Toronto.

2467 Clearbrook Road,
Clearbrook, BC

Dear Sisters.

My friend and I are doing a resource manual for Women in the Fraser Valley. (on an OFY grant).

We understand that the Pedestal was oriented (or is) toward the working woman when first started.

I wonder if someone from your staff could send us a few back issues of the Pedestal. We would like to reprint an article or two detailing a personal story, or an essay perhaps on the dilemma of a working woman with a family, to fit in with the section we would like to do on working women. In that section we will be including basic labour laws, some first steps to unionization, childcare, etc.

Anything you can send us would be appreciated as our resources out here are limited.

Thank you.

Sincerely,
Ms. Pam Grover,
Ms. Sue Beachy



Subscribe
to the
Pedestal

Rates for a one year subscription are:

\$3.00 Canada
\$3.50 U.S.A.
\$4.00 Overseas
\$10.00 Institutions

Send by cheque or money order to:

The Pedestal
804 Richards St.
Vancouver, B.C.

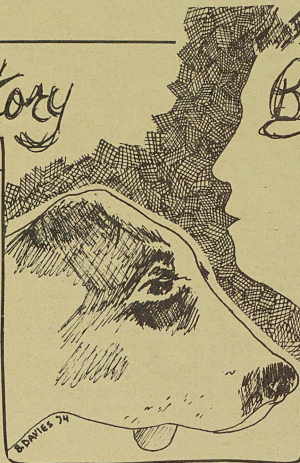
A Short Story

By Mari Smith

My father stood with one foot on the running board of our half-ton truck and the other disturbing the freshly-plowed potato patch. He picked his teeth with the spit-softened end of a wooden match. From time to time he would swing his arm in a wide arc explaining to Frank with gestures the magnitude of something in his story. Frank leaned against the truck's fender, his right leg draped across his left so as to make the number four, if you allowed for distortion. The two men were framed for me by the front room window of Frank Painter's house. Della, Frank's wife, sat across from me folding diapers and stacking them. To help her, I sorted socks and pieced them in pairs. My mother never really understood why I liked to go with Dad when he was going to Frank's. I'm not sure I understood. They had skinny, pesky kids who were just starting school as well as teenage boys and married daughters. They also had a baby. Della would mention time and again how other women thought it was sure something how she and her daughter had almost managed to deliver on the same day. I wondered how the baby would like it, when she grew up, to be the same age as her niece.

Della was the worst housekeeper I had ever seen. Sometimes, when there was a dance at the Community Hall, she'd ask me to babysit and always paid me extra if I "cleaned up the place". Cleaning up involved clearing the kitchen table, which would entail the sorting of mail, the folding of newspapers, the scraping of dishes and the disposing of cigarette butts which could be found saturated in china tea cups or gathered gregariously in ashtrays. Rubber boots were set in pairs on the porch. The dishes were scrubbed, not washed, after much soaking. Dried pieces of bread and tail ends of sausage rings were collected from various places and garbaged. When all this was done, I moved the larger pieces of kitchen furniture to the front room and drew hot water for floor scrubbing. Depending upon how long ago I'd babysat there, the floor was either blighted with dirtprints or crusty with dirt. Then if I weren't too tired, I'd iron clothes while I waited for the floor to dry so I could wax it.

My mother seldom came here to visit. When she did, she invariably rolled her eyes and held her nose as soon as she was out of sight of the



house. "Baby pee!" she'd say, "You'd think she'd at least wash the diapers."

I didn't like the dirtiness either but I felt able to relax there, knowing I would not be criticized. Another consolation was the array of old love comics and true romance magazines left for Della by her married daughters. She let me read them, never asking if my Mom allowed it or not. But I was not always comfortable in that house.

Sometimes when I was babysitting, the boys would come home before Frank and Della did. I would be watching TV when headlights would come out of the trees, flash on the window and jostle along to the side of the house. Then there would be voices and the occasional guffaw as they got out of the car. When they'd have a friend along, they sometimes stood in a row and urinated on the ground while they cheered and applauded the one whose stream shot furthest. I sat on the couch, my face red with embarrassment, knowing they would come in and suddenly remember I was there. One would look at another and giggle and soon they'd all be splitting their sides laughing. My heart would pound but calmly I'd pick up a magazine and turn to any page as though I'd just found my place. When the laughter subsided, they'd tear open cases of beer and shove the bottles in the fridge, leaving some out to be drank warm. At about this time, Charles would call me to come out to the kitchen. His name was Charles and they didn't call him Charlie, as though he were regal or something. I would have a secret laugh at their sticking to Charles in the midst of such poverty and dirt. Loud and obscene, he never cared what he said in front of me. I was just a girl, a "Pre-teen" by movie magazine definition. A few days after we had moved to Trinity Creek, Charles had

shot a hole through our new mailbox causing my mother to exclaim, "Now that's a fine welcome! What kind of idiot would do a thing like that?"

When Charles called me to the kitchen I always went. Once I had stayed in the front room declaring that I preferred to read and the derision I had suffered as a result nearly brought about my pre-pubertal death. At the kitchen, magazine gripped firmly in hand, I only had to listen to them talk, nothing more. When the talk strayed to off-colour remarks about a local couple, I simply held my magazine up and pretended to read. They then felt sanctioned to continue. Eventually the parents would come home, Della driving and Frank drunk. Della would pay me and then drive me home.

On rare occasions Frank drove me home. Though he never spoke to me and certainly never touched me, I always held myself prepared for the car to be pulled to the side of the road where silently he would forcibly extract my virginity with less emotion than that required to smoke a pipe.

My father honked the horn, bringing me abruptly back to my sock-sorting and to Della, who sat watching the TV, her expression dull and listless.

"I'd better go," I said, rising and pulling on my sweater.

"Yeah, OK," she said, "See ya Saturday. About seven?"

I nodded and went down the steps making my way to the big yellow truck. Dad was behind the wheel already but the motor wasn't running. I hated that truck and winced everytime I got into it. It was a hideous, bulbous monster which, for practical reasons had replaced our '53 Pontiac. I got in and sat quietly, waiting for Dad to finish talking.

The men exchanged a few more "If only the weather holds" and "All you can do is try your damndest" and then we were off, the transmission whining as we backed out the driveway.

Darkness had settled in quickly. We bumped and rattled along the dirt road in silence. Sometimes with him I liked it better if we didn't talk. I would pretend it was him and his kid, good buddies, riding along and not finding it necessary. I really liked my Dad. He always worked really hard, he was easygoing, and he never really knew how to be stern with us, always leaving that for Mom. I regarded him as being highly-principled and was proud of him for it.

A Short Story cont'd from p. 15

Suddenly, from the right side of the road a dark figure lurched toward the truck. I called out "Dad!" as a thundering noise came from under the front wheels. The truck continued on as though nothing had happened. "I think you ran over something," I shouted, my eyes beginning to sting. I was so frightened. Why wasn't he stopping? I stared across the seat at him.

Finally he answered, "It was Painter's dog, that old blind bitch," and when I didn't speak, "You know damn well it was going to die any day. It's so old it can't even walk any more, let alone see."

"Why didn't you stop and tell them you did it? It was an accident. You didn't mean to do it." I cried, my throat aching now.

"Now look," he said, getting a little gruff, "You want to cause trouble? You know those kids are crazy about that stupid dog."

"Were!" I retorted. I tried to ignore the nausea coming on. "I know what's best," he said impatiently, "They'll think it was a logging truck going too fast at night. You'll see. Now that's enough out of you."

I said no more, feeling angry and confused. That night I tossed and turned for hours before sleeping. When I did sleep, I dreamed in spurts of fear and anger, waking tearfully from time to time.

In the morning the sun was shining and the air was warm. I did not remember the night unrest. My sister Karen was playful and we raced each other down the road to school

our apples banging in our lunchkits. I stopped once to pick some Morning Glory for the teacher.

On nearing the schoolyard we saw the other kids chattering away by the side of the school. When they saw us they came running and shouted "Hey, did you hear? Painter's dog got run over last night and whoever did it never even stopped to tell them. Cecille threw up when she found it on the road so she's not coming to school today."

Karen was horrified, crying out, "Oh no! Who would do such a thing?" while I stood beside her, not listening but pretending I was. Later I found the wilted flowers where I'd dropped them.

women and film

LAST YEAR: A group of Toronto women, with the help of co-ordinators throughout the country, organized and international film festival called "WOMEN AND FILM" which toured Canada, stopping at 18 cities. The festival was enthusiastically acclaimed although many people in rural areas wished the tour could include their towns. **THIS YEAR:** A province-wide festival!!

A Van stocked with a variety of Goodies (films, video, etc) selected by people throughout the province will go on tour, visiting 12-15 towns, each for a three day period. Starts in the fall!!

To help finance the tour, Women and Film is holding a day long mini-festival benefit at the Vancouver East Cultural Centre. Admission by donation.

AFTERNOON 1:00 pm - 5:00 pm

1. Anything you want to be 8 mins

Humourously depicts the conflicts and absurdities that beset a high school girl. Produced by Liane Brandon.

2. Growing Up Female 50 mins.

Through a personal look into the lives of six females, the film shows the oppressive social structures that condition women. A feminist classic.

3. Cats in the Dark 3 mins

A wonderfully animated cat film, this is Gabrielle Minot's first work. She's living in Vancouver.

4. One of the recently completed Working Mothers films produced by Kathleen Shannon of the National Film Board

5. It Happens to Us 30 mins.

Considered the best abortion film (illegal and legal abortion) ever produced in North America. Produced by Amalie Rothschild.

6. Zodiac 9 mins.

The four elements, water, fire, earth and air are animated with the 12 signs of the zodiac. Created by Audrey Doray, a well known Vancouver artist.

7. Bridal Shower 22 mins.

The North American premarital fertility ritual, complete with humiliations, party games and fright masks, produced by Sandy Wilson, a British Columbia filmmaker.

EVENING

8:00 - 10:30 pm

What I want

11 mins.

A minimal movie starring the filmmaker, Sharon Hennessey, reading and endless list of "wants" on behalf of all humanity, with special emphasis on women's demands. Enormously popular throughout the East at last year's festival.

Like the Trees

14 mins.

Rose is a Metis from Northern Alberta, a woman who has lifted herself out of an anguished existence by rediscovering her roots among the Woodland Cree. One of Kathleen Shannon's eight "Working Mothers Films".

La Vie Revee

90 mins.

Directed by Mireille Danseraue, La Vie Revee tells the story of a friendship between two women who fantasize a shared relationship with an ideal man.

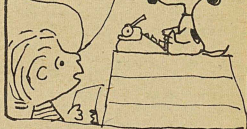
AND SO, ONCE AGAIN, KITTEN KABOODLE HAD TO ADMIT SHE HAD BEEN OUTSMARTED BY A DOG.



AN ORDINARY DOG AT THAT.



DO YOU THINK THERE'S A MARKET FOR ANTI-CAT STORIES??



"PLAYBEAGLE" HAS BOUGHT THE WHOLE SERIES:



VANCOUVER MS.

2089 W. 4TH ~ 738 5821
"Vancouver's ONLY women's club!!!"

COMING EVENTS

Wednesday, August 14
Card Games, Crib,
Bridge and whatever.
8 pm

Childrens Day on August 24
Saturday from 2 - 4 pm.
Featuring a Puppet Show and
Clown. Free Balloons, juice
and Cookies. 25c per child
or contribution.

Art Show - August 28th
Wednesday - 8pm

Colette French
Josie Cook
Diana Kemble
Beverly Davies
Elizabeth Trott

Wednesday September 11
Films: to be announced

Notes

On
planned
events



Any women who play instruments, sing, do comedy routines or theatre are asked to call Carolyn Bell at 685 - 7474 evenings or write to 536 Cambie. Two nights of good times and music are being planned for Vancouver Ms! Amateurs and Professionals are both welcome.

IN THIS ISSUE:

U.F.O Theatre
Sex Education in Highschool
Action for Women
Women's Health Symposium Report
The Health - care Industry
Rape and How to Avoid it
News of Coming Events
A Short Story
And even a Cartoon with a lesson for us all.....

TURTLE SAVES WOMAN

MANILA:
Canadelaria Villanueva survived a ferry sinking by riding a giant sea turtle for two days until she was spotted by a passing vessel.

Ms. Villanueva, 52, one of 277 persons aboard the ferry Aloha, which sank June 2, became the 243rd person to survive the disaster.

Lieut. Cesario Mana, an officer aboard the rescue ship, said that after the rescue the turtle,"circled the area twice before disappearing into the depths of the sea, as if to reassure itself that its former rider was already in good hands."

LONDON ENGLAND:

The British passport office has announced that the prefix Ms. will henceforth be allowed on passports.

Hours are from 8:00pm ~ 2:00am, Sunday, Wednesday
and Thursday. 8:00pm ~ 4:00am, Friday and Saturday.
Closed on Monday and Tuesday. All women welcome.

The Pedestal is
registered at Van.
B.C. as 2nd cl. postage.
registration # 3359