



Vancouver Women's Health Collective

# HER VOICE

Spring 2004

## Are you interested in...

Doing research on complementary therapies, reproductive issues, or endometriosis? Knowing about the health resources available to you in your community? Finding a new doctor or therapist? Inviting the VWHC to your meeting to do a women's health workshop?

Then please call our health information line: 604-736-5262, visit our Health Information Centre at 1 - 175 East 15th Avenue in Vancouver, or check out our web site: [www.womenshealthcollective.ca](http://www.womenshealthcollective.ca)

Staffed predominantly by volunteers, the information centre is open:

Monday through Thursday  
10:00 a.m. to 1:00 p.m.

Monday and Tuesday  
2:00 to 5:00 p.m.

Wednesday  
6:30 to 8:30 p.m.

**On April 1, 2004,  
the provincial  
government will  
cut 100% of its  
funding to the  
VWHC and 36  
other women's  
centres in BC.  
Shame on them.**



**Notice...Notice...Notice...**

Please Join Us For The

**Vancouver Women's  
Health Collective**

**SPECIAL GENERAL  
MEETING**

To adopt  
a new Constitution  
and By-laws

**Wednesday, March 31, 2004  
7:00 to 8:00 p.m.**

At the VWHC  
(1-175 East 15th Avenue in  
Vancouver)

## **WELFARE CUTS: AN ATTACK ON WOMEN**

The UN has reported that 70% of people living in abject poverty are women. Worldwide, women earn on average slightly more than 50% of what men earn. One's gender almost always determines one's economic position.

Women's economic dependency on men has been essential to the perpetuation of the system of masculine dominance (patriarchy). As Lesley Harman has documented in *The Feminization of Poverty*, the myth of equality of opportunity conceals the fundamental inequities that continue to keep women economically dependent on men and the state. When women attempt to break free of dependency relationships their position in the paid workforce and having children increase the likelihood of their seeking social assistance.

British Columbia has the highest rate of violence against women in Canada at 59%, and poverty and unemployment are higher than ever. One quarter of all BC women and almost one half of single mothers earn less than the low-income cut-off ratio. Women who are older, non-white or disabled find their experience with poverty compounded.

Caught in the cycle of poverty, women often lack access to resources and services to change their situation. The poverty facing women in BC is so extreme that some women are being forced into the sex trade, or are staying with or returning to their abusers out of desperation to pay the bills and feed their kids.

What is the BC Liberal Government doing to stop this? They have engaged in the systematic dismantling of women's human rights in BC. Just over a year ago, the United Nations Committee, which examined Canada's compliance with the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), singled out BC for special criticism. The committee was concerned about the negative impact that cuts to welfare, women's centres and legal aid, among others, would have on women, in particular Aboriginal women.

One year later, the BC Government is still ignoring the UN committee's recommendations. Women are confronting custody and access hurdles, child apprehension, a lack of housing, unemployment, scarce affordable childcare, barriers to education, immigration problems, non-existent legal aid, violence, their own worsening health, barriers to health care, and inadequate levels of family maintenance.

On February 6 of this year the Campbell government made a sweeping last minute exemption to its proposed welfare cuts. Under the time limit policy, “employable” clients who do not meet any of the new 25 exemption criteria are limited to a cumulative 2 years of assistance out of every 5 years. The 25 exemptions to the rule cover people with disabilities, pregnant women, single parents with children under 3, people in a special care facility or people with an alcohol or drug problem. The Ministry of Human Resources has stated that “only” 339 people could lose all or part of their benefits this year.

Poverty groups estimate the numbers to be much greater than that predicted and that thousands will still fall through the cracks. Regardless of what the numbers are, the time limit policy is a precedent in Canada that should be removed altogether. As the Canadian Centre for Policy Alternatives reports, the policy is redundant because even without a time limit law, if recipients do not abide by their “employment plan” they can be cut off. The sole remaining function of the policy is to intimidate welfare recipients, who, in spite of the new exemptions, will live in fear of being cut off.

The time limit policy has created a negative and false stereotyping of poor people through its message that people who receive social assistance will not work unless forced to by deprivation. The new changes to the time limit policy may be perceived by some as a victory, but if so it is only a small one. A harsh reality still faces women in BC.

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## **The impact of BC government welfare cuts on women:**

- Welfare eligibility is tougher.
- Single moms on welfare with children over 3 are required to search for paid work, enroll in a training program or return to work.
- Women are in a double bind; being forced to look for work without access to affordable quality childcare.
- The support portion of welfare for single mothers with a 3 year old child has been reduced by \$51. This remains the same even with more than one child.
- The earnings exemption was eliminated. Single welfare recipients are no longer allowed to keep earned income of \$100, and those with a child or partner lose the \$200 per month earning exemption.
- Welfare applicants must wait 3 weeks after making an appointment for an intake interview; for many women, welfare is a last resort, and they are unable to wait without severe hardship.
- Under the two-year time limit policy “employable” people are permitted to receive welfare for only 24 months out of any 5-year period as of April 1, 2002.



**Skills building workshop for new VWHC volunteers.**



## New Books at the VWHC Resource Library

### ***Endometriosis: The Complete Reference for Taking Charge of Your Health***

Mary Lou Ballweg & the Endometriosis Association provide “groundbreaking information on the disease and its relation to other health concerns, including certain cancers and autoimmune problems”. Based on the latest research, this guide includes information on:

- Surgery and other treatment options
- The connection between endometriosis and cancer
- Infertility and endometriosis

### ***Common Occurrence: The Impact of Homelessness on Women’s Health. Phase II: Community Based Action Research – Final Report***

From a gender-based perspective, this report explores the impact of visible and hidden homelessness on the lives of women. It concludes that, “homelessness is a significant women’s health issue. It seriously impacts on women’s emotional/mental, spiritual, and physical health.”

## My Experience Living with Asthma

**G**rowing up can be a painful experience for some! As a child, I had very severe asthma so asthma was a huge part of my life. I did not think it was any different for boys or other girls my age, and I did not know that some people had more severe asthma than others did. In my opinion, anyone who had asthma probably felt the way I felt and had the same allergies and medical problems. Then I hit puberty and the whole asthma experience went haywire. I was sick most of the time and it felt a lot worse than it ever had.

Most women and girls do not realise that menstruation, menopause and childbirth can increase the severity of asthma. For instance, various studies have found that many women find their asthma to be out of control, or more difficult to control, during their menstrual cycle.

According to a 1996 study completed by Dr Emil Skobeloff, at Philadelphia’s Allegheny University of the Health Sciences, at least 46% of women get severe attacks 3 days before and ending 4 days after their menstrual period. He figures that this is because of the asthma-menstrual link. That is, as estrogen levels rise in women, the risk of asthma falls. But during the pre-menstrual period, estrogen levels fall sharply, which leaves women more vulnerable to asthma attacks.

An American Lung Association study found that asthma is more common amongst women. Women are more likely to be hospitalised for asthma and they are also more likely to die from it. As of 1999, African American women “had the highest asthma mortality rate, compared to African-American men and to men and women of other ethnic groups.” (American Lung Association, Epidemiology and Statistics Unit. Trends In Asthma Morbidity and Mortality. February 2002.)

Women who suffer from asthma need to study their asthma attacks carefully and try to come up with an acceptable method of controlling these attacks in consultation with their doctor. There are numerous triggers for asthma that range from perfumes to cigarette smoke. For women, bodily changes are a huge part of the triggers and these should be taken seriously.

**Deborah Acor** is a VWHC Practicum Student from UBC’s Women’s Studies Program.

### **For more information about Asthma please contact:**

- Allergy and Asthma Information Association (BC/Yukon Region) located in Kelowna, 1-877-500-2242, or [www.aaia.ca](http://www.aaia.ca)
- BC Lung Association in Vancouver, 604-731-5864, 1-800-665-5864, or [www.bc.lung.ca](http://www.bc.lung.ca)
- Asthma Education Clinic in Port Moody, 604-469-3227
- Vancouver General Hospital, Respiratory Clinic – Asthma Education, 604-875-4122

## AS WOMEN WE ARE PRO-CHOICE BECAUSE...

The "Clothesline Project", the VWHC's pro-choice action group, will be restarting this spring. This initiative began last summer when community women joined and shared their reasons for being pro-choice, painted them on cloth, and strung them together on a long clothesline. Last summer's actions were a great success and we hope to see many women at the upcoming events. For more information, please e-mail Iona, a member of the VWHC steering committee, at [ielgabry@shaw.ca](mailto:ielgabry@shaw.ca).



**VWHC steering committee members.**

## NEW PRO-CHOICE CAMPAIGN LAUNCHED!

### Inviting Women to Share Their Abortion Stories

A new web site launched by Lefty Lucy and co-sponsored by the Pro-Choice Action Network offers pro-choice information and resources in a fun, creative way. As well, the web site asks pro-choice women who have had an abortion to complete a legal affidavit attesting to the importance of being able to access a safe, legal abortion. Please check out the web site: [www.clarification.ca](http://www.clarification.ca).

from page 3... **Welfare Cuts...**

Governments fail to understand that oppression is the root cause of violence against women. Empowering women is a critical factor in freeing women from the cycle of poverty. Instead of undermining the influence of grassroots activists, the government should be working with feminist front-line workers to develop policies that create real change and improve the lives of women in BC. Because the biggest determinant of health is income, the VWHC, allied with many other women's organizations, will continue the fight to put women's equality issues back on the political agenda.

*Lesia Hnatiw is a member of the VWHC steering committee.*



## HIV/AIDS and Women in Canada

According to Health Canada, 15% of positive HIV test reports between 1985 and 2003, in which gender was known, were women. The percentage of positive women being reported has increased from 12% in 1985 to 25% in 2003.

**W**omen living with HIV face unique challenges connected to HIV and sexual violence, particularly those women who are in an abusive relationship. If a woman tells her partner that she is HIV-positive it can increase her susceptibility to sexual and physical violence. This knowledge can give an abusive man further control in the relationship. HIV-positive women may stay in abusive relationships because of decreased self-worth. Women living with HIV also face the fear and threat of rejection or emotional, physical and/or sexual violence from friends, family members, co-workers and their community. As well, marginalized women, particularly those who are incarcerated or women from ethno-cultural or Aboriginal communities may confront the increased risk of stigmatization and violence as a result of disclosure of their HIV status.

In British Columbia, Positive Women’s Network provides advocacy and support services to women living with HIV/AIDS. Please contact PWN at 604-692-3000, or 1-866-692-3001, or check out their web site: [www.pwn.bc.ca](http://www.pwn.bc.ca). For more Health Canada information, see [www.hc-sc.gc.ca](http://www.hc-sc.gc.ca).

*Deborah Acor is a VWHC Practicum Student from UBC’s Women’s Studies Program.*

### VWHC 婦女更年期全套中文資料

我們的全套中文資料, 提供各方面的知識, 關於婦女更年期, 目的是增加她們對更年期的了解, 以助日後可為自身健康作出正確的選擇。

閣下如有興趣購買這套中文資料, 可致電或郵寄訂購。每套 10 元加 2 元半郵費。(請用英語訂購)。

### VWHC MENOPAUSE KIT

Our Menopause kit is designed to provide women with a range of information about menopause so they can make more informed choices about their health.

You can contact us by phone or mail to order the kit in Chinese for \$10 plus \$2.50 postage. We regret that we are only able to process requests in English.

## THAT BURNING DESIRE

I went through my early teens with chronic, undiagnosed yeast infections, due to an approaching case of diabetes. I didn't know what it was, and I certainly wasn't about to ask anyone. After weeks, I finally told my mother, but I only broke because I just couldn't take it anymore.

Ten years later, I'm still hearing a very similar story. I talk to women every week who are dealing with some kind of vaginal problem. Most of the time we don't know what's wrong. Most of the time our doctors don't even know what's wrong. It's crazy-making to be in prolonged pain or discomfort without answers. A friend of mine told me for months about hers. When she said, "I've tried everything..." she meant it. Until recently, no one could give her a solid diagnosis.

What she's got is called *vulvar vestibulitis*. There's a word for it now. There is still very little information about what causes it, let alone a cure. This is typical of any illness that predominantly affects women. As long as drug company executives think their research funds are better spent on diet pills and the like, the odds are stacked against us.

It's no surprise to me that the part of women's bodies most hated and abused in society is the one that gets sick all the time, and that no one really cares. Our best bet is to start taking care of each other. There are a couple of women running a group in Vancouver who've got the right idea. The group meets to share experiences and information about vestibulitis. I'd put money on the fact that a group of women will come to conclusions faster than any professional about why this happens to us and how to prevent it.

Women often call the VWHC health information telephone line about their vaginal problems. We encourage women with similar concerns to contact one another and form their own groups. If you are interested in joining the one described in this article, or if you'd like to start your own, just give us a call at 604-736-5262.

If you'd like to contact the Vulvar Vestibulitis Support Group directly, check out their web site at [http://vv\\_vancouver.tripod.com](http://vv_vancouver.tripod.com). They meet at the Vancouver Public Library - Oakridge Branch (191 – 650 W 41<sup>st</sup> Ave, enter on the South West Corner of the mall). Meetings are the last Thursday of every month, 7 – 8:45 p.m. and attendance is free.

**Sacha Fink** is a member of the VWHC steering committee.

Friday, May 28, 2004

## 17th International Day of Action for Women's Health

Sponsored by the Women's Working Group of the BC Health Coalition.

This year's Call for Action will focus on the impact of health sector reforms on women's access to sexual and reproductive health.

For more information, please call Terrie Hendrickson, BC Health Coalition Coordinator, 604-681-7945, or Caryn Duncan, BCHC Co-chair, at the Vancouver Women's Health Collective, 604-736-4234.



# Yes, I want to help women access quality health information!

I would like to join the VWHC       I would like to renew my VWHC membership

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
(street)

\_\_\_\_\_ (city/province) (postal code)

**VWHC membership category:** Fee enclosed: \$ \_\_\_\_\_

- Volunteer - pay what you can up to \$25/yr
- Associate \$10-\$25/yr
- Health Practitioner/Therapist/Business \$50/yr

### All VWHC Members

- receive the VWHC's newsletter and invitations to special events
- may participate at the monthly Steering Committee meeting & the AGM
- support the mission statement, values, and goals of the VWHC

### Volunteer Members

- expected to volunteer at the information centre & attend one bingo shift

### Health Practitioner/Therapist/Business Member

- entitled to a business card ad in HER VOICE

I wish to make a donation to the VWHC (*a charitable tax receipt will be issued*) \$ \_\_\_\_\_

Full amount of my membership fee and donation \$ \_\_\_\_\_

***Thank you for your support!***



### Contact Us

1 - 175 East 15th Avenue  
Vancouver, BC V5T 2P6

**health information line: 604-736-5262**

fax: 604-876-1282

administration line: 604-736-4234

www.womenshealthcollective.ca

e-mail: vwhc@vcn.bc.ca

### 2004/2005 VWHC Funders

BC Ministry of Public Safety and Solicitor  
General, Gaming Policy

VWHC Members & Donors

Summer Career Placement Program, HRDC

