

## VWHC Volunteer Info Resource Book Table of Contents

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Appendix 1 (Policy Manual)

# Getting to know the Collective

## THE NEED FOR THE COLLECTIVE

Here is a brief outline of the herstory of the basis of our health care system:

- **Women have always been healers. Throughout history, women were:**
  - unlicensed doctors and anatomists
  - abortionists, nurses, counselors
  - pharmacists, cultivating healing herbs before anyone thought of the term pharmacy
  - midwives
  - for centuries doctors without degrees
  - lay healers called wise women by the people, witches or charlatans by the authorities.
  
- **The witch Craze Maleus Maleficarum - the witch hunt that spanned 4 centuries from 14C to 17C**
  - Many were lay healers serving the peasant population and their suppression marks one of the opening struggles in the history of man's suppression of women as healers.
  - A ruling class campaign of terror directed against the female peasant population witches represented a political, religious and sexual threat to the Protestant and Catholic churches as well as the state.
  - From Germany through to England to France
  - At Toulouse 400 witches were put to death in one day
  - on average every town put to death two a day in Germany
  - In 1585, two villages were left with only one female inhabitant each.
  - It is estimated that a total number killed to have been in the millions.
  - The witch hunt was a well ordered legalistic procedure, well organized campaigns, initiated, financed and executed by church and state. The manuscript was called Maleus Maleficarum. "Hammer of the witches".
  - The crimes that women were accused of & killed for:
    - Sexual crimes against men (having sexuality).
    - Conspiring against men (Being organized, educating)
    - Practicing magic (Healing and having medical and obstetrical skills)

- ⊗ Today health care is still predominantly the property of the male professional. The burnings set the stage for the division of power and authority and the monopoly of science and medicine into the hands of men and out of the hands of women and the public. Legislation in the United States against quackery midwifery and other lay forms of alternative health practices became offenses punishable by law and incarceration. The authorities doctors strengthened their position by excluding women from all opportunities.
- ⊗ "Doctor know best" is taught to women health care workers and consumers. The forbidden, mystically complex world of Science which women as consumers are taught is beyond our understanding. Hence, we are convinced that as consumers we have no right or no need to have information.

#### ⊗ **Therory of Medicalization**

- Every women's natural functions have become medical problems. Drugs are the answer for menstrual periods of all sorts: scanty, erratic, heavy, painful, or depressing. And when they stop because of pregnancy, further medical intervention is regarded as essential. It begins with the obligatory round of ante-natal check-ups and culminated in hospitalization for the birth...just in case.
- We are taught to think of our natural cycles as an illness or an enemy. Menopause, PMS, Puberty? Eventually, they may convince kids to take a pill for puberty.
- Because of our biological difference from men, women are systematically seen as medical problems with functions that need to be cured.
- Hysteria comes from the word in Greek Uterus. Hypocrites believed hysteria was caused by the womb's tendency to wander about a woman's body. He recommended marriage as the best remedy. Doctors recommended removal of the uterus-hysterectomy.
- Women's bodies have become the raw material for chemical and surgical interventions. Practically the only body parts ever actually removed for all kinds of reasons are the breast, ovaries and uterus.

## ∅ Profit & the Pharmaceutical Industry

- Valium is the most widely prescribed drug in the world. In the United States 47 million prescriptions were given in a year. Fourteen percent of Britain take it. In addition they continue to spend million research drugs that do the same work of reducing anxiety.
- It has been stated that it is doubtful whether drug research contributes much to better health. It was discovered in 1973 that the drug age began to decline in 1954 There have been hardly any effective new drugs since then.
- Allopathy is the study of pathology. The model here is a disease model, concentrating on the problem curing it with a pill; it is static and inadequate.
- Women are questioning the medical professions right to withhold knowledge and to monopolize decisions about their bodies and lives. They are beginning to take control of their own health.
- The medical establishment while all at once clinging to the idea that they adhere to the ethic of healing and health have virtually ignored the issue of poverty.
- Health has become an extremely profitable commodity throughout the world. The industries that benefit most are building contractors, drug companies and equipment suppliers.

## **Herstory of The Vancouver Women's Health Collective**

The Health Collective has been operating for over 21 years. The focus and nature of the work being done has gone through many changes during that time.

### **This is our Herstory:**

In the fall of 1971, a woman angry and dissatisfied with the health care she had received from her doctor ran an ad in the local women's paper hoping to meet other women with similar experiences. From this ad a group of women met to share their frustrations and continued to meet into the winter of 1972. While designing a questionnaire to obtain and share information about women's experience with doctors, specific women's health issues became priorities, such as birth control, vaginal infections and so forth. Out of this our first self-educational health group began. We were determined to explore and develop our own capabilities of doing things for ourselves.

In the spring of 1972 we moved into a house which was called A Women's Place. A small group of women who had been doing abortion referrals since even before 1969 (when the Canadian laws concerning abortions were changed), joined the collective at this time. By December, the collective opened Canada's first women's self-help clinic, using space at a free clinic one night a week.

Also during that summer, with a government grant, we distributed the questionnaire about doctors to a large number of women in Vancouver.

In March, 1973 we moved to a new location. At this time our activities included: 1) the health information phone line, 2) abortion counseling and referral services, 3) health educational groups, 4) the women's self-help clinic, and 5) public presentations for community groups. A year later, the collective moved to another new location in a warehouse at 6th Avenue and Granville. We renovated for one month to include meeting rooms, a health information area, a child care space and rooms for fitting diaphragms.

The women's self-help clinic continued to operate, for a time out of offices at the Seymour Medical Building. This arrangement was discontinued when the doctors at the Seymour were unwilling to deal with the political context from which we worked, particularly, our critical perspective of the health care system and traditional medical practices were unacceptable to them.

Federal funding was terminated by 1976 and partial provincial funding became the main source until April, 1978, when provincial funding was granted. In the summer of 1977, the collective moved again, to West Broadway, where we remained until December of 1984. For a time after January, 1978, we closed to reassess our emphasis on services (the self-help clinic, abortion and health counseling, and diaphragm fitting) versus our original emphasis on self-help

maintained through educational work. While the clinic was a good service for women, it did not encourage self-help nor did it encourage women to demand what they were entitled to from the health care system. At the clinic, women received good care from volunteers and more time would be spent with the women there than if they had gone to a doctor's office. Doctors passed on their work to us freeing up their time for more patients and therefore more money. Out of this evaluation came a redefined set of goals and a decision to close the clinic. We wanted to maintain our ideal of practical health in a different way and our philosophy to be more explicit about our political position.

A demonstration took place and our service-oriented groups became autonomous to the health collective. The core workers began extensive research of the health care system and developed a series of topics for presentations.

During 1978-82 a health series was organized to encourage new women to join in the research and information sharing. From these groups a health series was developed with an emphasis on our political perspective and in the context of women's health. Some health topics included: Health Care Industry, Drug Industry, Psycho tropic Drugs, Politics of Birth Control, Politics of Cancer, Health Hazards, of Video Display Terminals, PID (Pelvic Inflammatory Disease), Ovulation Method of birth control and Menopause. In 1982 the Women's Occupational Health Group developed and wanted to share information on health hazards (particularly health hazards that effect the reproductive system) of clerical and health care workers. By 1983, after extensive research, a booklet on PID was written and published.

As information was researched and gathered, it was organized and filed, and the Collective set up the Resource Centre. To encourage women to get involved, a training program was set up to incorporate unpaid workers into the resource centre. There was an emphasis to decentralize and different groups continued, but the main focus was to build up the available information of the Resource Centre. While continuing to experiment with different politics and programs, several aspects of the Collective have been maintained over the years, for example, our critical perspective of the health care industry, one or several health information groups meeting at different times, and our collective structure.

In August of 1983, 100% of our provincial funding was cut with one month's notice. The Collective was able to keep going through an emergency grant from the City of Vancouver and donations from individuals. In January of 1984, a grant from the Promotion Directorate of Health and Welfare Canada was received for a large Self-help project for five health topics: PMS, DES (a drug given to pregnant women in the 40's and 50's and 60's), cervical health, vaginal health, breast health and Menopause. The grant involved development of workshops and information packets on each health topic as well as travel to other parts of the province, Alberta and the Yukon, to present these workshops. There has been one project grant from Secretary of State for this training manual from October, 1984. Grants which "top-up" unemployment insurance benefits

from Canada Works and VIP have been used to keep paid workers. Most of the other members are volunteers.

In 1992 the Health Collective went through a major restructuring at its Annual General Meeting. A committee structure was introduced and the Core structure dissolved. All volunteers are now encouraged to participate as part of the decision making structure through committees that they work on.

In March of 1993 the Health Collective made another move to West 8th Avenue. Our office space is shared with the BC Coalition of Abortion Clinics, The National Action Committee on the Status of Women and Midwives Association of BC. We rent out our other rooms for groups such as self-help and support when space is available. We provide meeting space for other women's organization like "Contact Point for Lesbians". We also periodically rent our rooms out to holistic practitioners i.e. Reiki, Shiatsu and Body work.

In 1994 the Health Collective collaborated with residents of the Downtown Eastside on the health needs of women living in that area. It was a fascinating process with surprising results: the women surveyed said one main health-care need was clean showers.

Although the collective receives many requests for information on such health issues as hysterectomy, fibromyalgia and breast cancer, the most frequent calls are from women expressing frustration with the health-care system itself. One of the collective's studies indicated that what women want most was more health information more readily accessible to them. Through this process "we designed the WHIN system- Women's Health Information Network". The network will be available in the near future through women's centres, community centres and public-health units. The plan is to eventually make it more widely accessible to all women at a language level that facilitates translation. The Ministry of Women's Equality has given the collective 77,000 of their Project Grant to developing the WHIN system. Current moneys received to date are 15,090 from the City Of Vancouver and 52,176.12 from Women Of Equality, both for four part-time paid jobs. Positions will be filled by the winter of 1998.

The Women's Health Collective continues to help women to help themselves by providing information on health care choices. This is done through:

- Education Workshops
- Information Centre
- Newsletter
- Research Projects
- Networking, advocacy and lobby work with many organizations and community groups on a local, provincial and federal basis.

**NOTE: See Appendix #1 for the Policy Manual**

# How do we keep those doors open??

The VWHC has an annual operating budget of about ~ \$160,000.

Where does the money come from?

- direct mailing to our regular donors
- doing bingo stints at the Starship Bingo
- membership
- special fundraising events
- overhead costs from project grants
- rental of our space
- sale of our publication
- fees for doing workshops
- special programming
- operating funds from the Ministry of Women's Equality & the City of Vancouver

As you can see all of our money gathering techniques require a lot of volunteer participation in order to happen so that's why we ask each volunteer to put 3 of her voluntary hours/year towards helping out doing the either the bingo or a special fundraising event.

Each committee has it's own budget which it is responsible for administering.



# The Collective Process

## THEORY:

### Hierarchy

The Collective process is a model for decision making that is very different from the hierarchical systems used by most other groups and organizations who are status quo. Because our mandate is to serve all women, The Vancouver Women's Health Collective is dedicated to decisions made through the collective process. Only in this way do we gain clearer insights into the needs of women. Hearing the voices of women is critical.

Decisions made based on hierarchical structures rarely work for women because they are not sensitive to the voice of women. These decisions are still made generally by men and unfortunately man's values and experience differ from women. All too often decisions made based on hierarchical processes reflect a white, male, middle class bias.

Hierarchy operates with the assumption that authority knows best. Decisions that are arrived at by only a few can not reflect the needs of the many.

Collective process is an attempt to make decisions that reflect women's needs in broader and broader ways. These become quality decisions that reflect the needs, desires, principles, and values of women. Because we are an organization that developed with a mandate to help women help themselves, we must be willing to allow ourselves to be informed by the women we intend on serving:

### Representation:

As an organization we continually strive for inclusiveness (to include all women from diverse experiences) and representation. The way we do this is to continually ask ourselves who are we serving? Are we serving a narrow interest or are we serving a broad interest?

We can usually answer this question first by asking ourselves who do we represent, who are involved?

As women, what we know and believe is influenced by our experience. Basically, all women are biased by that experience; therefore, in an organization that strives to serve all women it is vital to look at who makes up the organization and thereby determine what our bias is.

Representation is vital for a collective organization if it seeks to serve all women. In organizations that tend to be predominantly white, straight and middle class our inherent biases can, in almost invisible ways, further marginalize less empowered groups of women, such as immigrant women, first nations women, women of color, and lesbian women.

## **LINES OF POWER**

It is important to be aware that not everyone has the same amount of power in any given group. With the collective process information is often power. Those of us who have been here a long time have a responsibility to be open to sharing with those who are newer. Also it is sometimes perceived that staff people have more decision making power than volunteers. The Health Collective struggles to address these lines of power through using the collective process, and by openly discussing such issues when lines of power may be presenting problems.

## **Consensus**

Decisions are based on input from the group. All women are encouraged to express their feelings, ideas and opinions; to have a voice within the group. Decisions are worked out so that **everyone** can agree with the final outcome. Decisions will not be finalized without agreement from everyone who participates. If a situation occurs where a woman's ideas are divergent from the group and consensus cannot be reached, she may consider stepping out of the debate in order not to block the decision making process. However, if the women, given that she has had access to all the information, does not feel comfortable with the decision of the group and feels the group decision would adversely effect or jeopardize the operation of the whole organization, then the group must take steps to look at other ways of approaching the issue. Compromise and information sharing and education around issues are essential to the smooth running of a Collective.

## **PRACTICE**

Every meeting utilizes certain tools which help to ensure that the collective process runs smoothly.

An opening round is very important. This enables each person to let the group know how they are feeling before hand in order to avoid emotional conflicts. It makes us all aware of what each of us is bringing to the meeting in the way of emotional baggage or emotional energy or just plain positive vibes.

✧ A rotating chair woman

The chair woman is responsible for facilitating the meeting making sure discussion stays on topic so to prevent meeting from becoming too long and drawn out. She also calls each topic off the agenda in the order the group decides.

✧ A rotating time keeper

At the beginning of the meeting the group decide roughly how much time to dedicate to each agenda item. This helps keep the meeting from running into ridiculous over time.

✧ A rotating minute taker.

Minutes are very important to the collective process. Decisions must be recorded along with any information on what people thought of issues. The actual format of the minutes is a very loose thing and each person will deal with taking minutes in their own unique way. As long as ideas are recorded that's all that matters. Minutes are made available to all collective members and left in the minute book on the information centre desk.

✧ A rotating vibes keeper

The vibes keeper keeps an eye out for anyone who may be having difficulty speaking up, or monitors the emotions of the group. If there seems to be unspoken problems or thoughts floating about the room, she can jump in and ask if there is more that needs to be dealt with. Sometimes this happens and then it is a good thing "to do a round" where everyone takes turns speaking openly on the issue at hand. Often when people have strong ideas on an issue they sometimes forget to hear the other people before jumping in. The vibes keeper may then want to monitor those who interrupt in their excitement.

The rotating responsibility is important to a collective group. This gives everyone the opportunity to be responsible, to feel some ownership and it guards against one person monopolizing the meetings. It lends a fresh perspective to each meeting.

Agenda's for the meeting should be pre-posted so everyone knows what will be discussed at the meeting and can prepare for it. Any one can add items to the agenda for discussion. Any one can bring agenda items to the meeting at the

last minute and it will be up to the group if they want to discuss new agenda items under "other business" or postpone it until the next meeting. This allows people to decide whether they want to participate in any given meeting based on what's on the agenda. Minutes should be typed up or legibly written and put in mail slots long before the next meeting.

At the end of each meeting the group asks for someone to volunteer to minute take, vibes keep, time keep and chair the next meeting.

Collective meetings have generally been held once a month. Dates and times of meeting are always decided upon collectively. Committee meetings also run according to collective process.



# Fundraising committee

## GOALS

- to keep the collective open
- to get staff
- funding for programming
- to increase community awareness about the collective
- to standardize fundraising activities
- to involve the whole collective in fundraising

## HOW WE RUN THIS COMMITTEE

### Decision Making

how do we prioritize what apply for ?

take direction from the collective at the agm & use the following as guides:

- # of volunteers needed
- amount of prep needed
- experience of the committee
- amount of \$ involved,

### Who Do We Apply To - Foundations & Corporations

criteria for acceptability of a corporation/foundation for possible submission:

- willingness to give
- no multinational corporations
- no pharmaceutical corporations at all!!!
- no companies that produce liquor and or drugs,
- no right wing political organizations, company culture - ask questions to ascertain:

- do they have affirmative action policy?
- how do they treat their women employees

### Venues For Publicity

venue criteria:

- cost
- large target audience
- non-profit friendly

**So if you join this committee you will learn:**

**1. background**

outline what decisions have been made  
get you up to date  
what our timeline and goals will be for the next year,

**2. meeting climate**

ensure you have fun focused meetings, and develop an understanding on how important we are to the collective

**3. practical skills**

grant writing and direct mail  
bingo facilitation  
foundation searches  
budgets management  
computer skills - data bases  
event organization

**Current Activities:**

- Funding to keep the collective open
- Bingo with Starship Bingo
- Funding for the Women's Health Information Network
- Funding for new positions in the collective

**Fundraising Meetings Time:**

Every two weeks

Our main focus for the upcoming year will be the WHIN system-Women's Health Information Network. We will be approaching foundations and corporations for additional funding for this project.

## **Information Centre Committee**

The Information Centre includes the front desk, a library of files and books on women's health, and the doctor/therapist files. It is currently open five days a week: Mondays 10 a.m. to 1 p.m., Tuesdays and Wednesdays 6:30 to 8:30 p.m., Thursdays 10 a.m. to 1 p.m., and Saturday 1 p.m. to 4 p.m.

Duties of shift workers during open hours, of our Information Centre, include the following:

- phone counseling and referral
- assisting women in the information centre
- miscellaneous tasks, i.e. reading for the files, filing, photocopying, researching information, requests, etc.

See **shiftworkers' grey manual** on Info-Centre desk for more details

The shift workers are automatically part of the Information Centre Committee. We meet to discuss ideas, suggestions, long-term planning, Collective projects, etc.

### **Current Activities:**

- Expanding and updating the Health/Holistic/Therapist Practitioner Files
- WHIN system-The Women's Health Information Network

### **Goals:**

- to ensure that the Info-Centre is kept open and operating to serve women with their health-care needs
- to encourage women to help themselves
- to provide alternative preventative health-care options
- to offer support to women who suffer from health-care violence
- to provide women of all diversities with access to information

**Information Committee Meeting Times: once a month**



# Administration Committee

## GOALS

- to provide the collective members & committees with administrative support
- to ensure that the collective's equipment & required support devices are well taken care of
- to offer administration committee members opportunities to become proficient in office management
- to be able to provide necessary support when administrator is not present

## MEETINGS

- we meet 7:00 pm the third Thursday of each month

## OBJECTIVES:

- we continue to train women with no office skills to become more competent at various office management tasks
  - answer phones
  - fax and mail information
  - typing data & information into various computer programs
- update & maintain administration manual
- year end collective inventories
  - every March we do inventories that enables financial assessment of collective's assets
- open mail
- order office supplies
- general upkeep of the collective space
-

# Networking Committee

The mandate of this committee is to ensure women have a voice in the health care reform process and to organize action around health issues that affect women.

The way we do that is varied & may involve any of the following:

- sitting on committees/boards/advisory councils
- doing direct lobbying to government
- facilitating other groups of women or organizations to lobby for themselves
- working in coalitions
- upkeeping our lobby list
- belonging to other associations/networks

In the past the VWHC has done extensive lobbying around several health issues and has more recently moved towards doing lobbying about the changes in the health care reform process.

## Current Activities:

- WHIN system- community health advocate network
- sitting on committees, boards, and advisory councils
- work in coalitions
- help other groups of women or organizations to lobby for themselves
- sitting on the Canadian Perinatal Surveillance System Steering committee to ensure community input
- sitting on the BC and Yukon Women Centres Steering Committee to ensure community input
- being on the steering committee of the BC Coalition for Health Reform to ensure a women's perspective is brought to the table

**Networking Committee Meeting Times:** the first and third Wednesday of each month from 5-6 p.m.

# STEERING COMMITTEE

## Goals:

- liason between committees
- keep the collective on tract
- develope a yearly plan
- oversee the collective meetings
- review long-term plans and the role of the collective within the community at large
- hold scheduled Steering Committee Training Sessions yearly

## Activities:

- researching, planning, and processing

**Steering Committee Meeting Times:** once a month

# VOLUNTEER COMMITTEE

## Goals and Activities:

- planning and organizing the Volunteer Training Session that happens at the Health Collective four times a year
- distribution of Volunteer Resource Manual
- updating the Volunteer Resource Manual
- letting the community at large know that we exist
- recruiting and interviewing new volunteers

**Volunteer Committee Meeting Times:** see representative for times and dates

# Newsletter Committee

## Goals and Objectives:

- to act as a forum wherein collective members and the community at large can connect around women's health issues and Health Collective's activities
- assess current status of previous publications which includes: doing a physical inventory and putting this information into a database, evaluating unfinished projects, deciding what to continue distributing, and creation of a marketing plan.
- research, development, and prioritizing of specific publications
- to work towards the establishment of an editorial policy
- liaison with Education and Information Centre Committees
- to produce a monthly memoflyer which will update members on the activities of Health Collective committees, advertise upcoming events and workshops and reward/make mention of special effort on the part of particular members
- development of desktop publishing skills
- new publications on a quarterly basis (July, Nov., March, July)

## How we relate to the rest of the collective:

We are the manifestation of the work of the other committees. The end product.

We produce educational tools based on the needs of our community, as researched by the Information Centre and Education Committees.

## Current Activities:

- making our newsletter happen●●

**Newsletter Committee Meeting Times:** Third Sunday of each month

# Education Committee

## Function of the Education Committee

This committee offers workshops and seminars to other organizations and groups in the community who are interested in learning more about women's health issues. In the past we have provided workshops about menopause, PMS, reproductive health concerns, breast cancer, hysterectomies, birth control, lesbian health and the politics of women's health.

We also focus on community outreach and meet with various groups to talk about the services of the Health Collective, as well as a variety of women's health issues.

In the past, we have developed in-house workshops and self-help groups. Our other topics of interest include health policies, collectivism, and physiology & anatomy as they relate to women's health. Possible future workshops are: youth sexuality, women and aging and low-cost vegetarian meals.

## Opportunities:

As part of the Education Committee, you will have the opportunity to use or develop public speaking skills, as well as organizational skills around planning and implementing dynamic workshops.

You will have the opportunity to investigate educational resources and potential groups with whom to share information and network, such as providing seminar leaders, spokespersons, or facilitators for women's health related events.

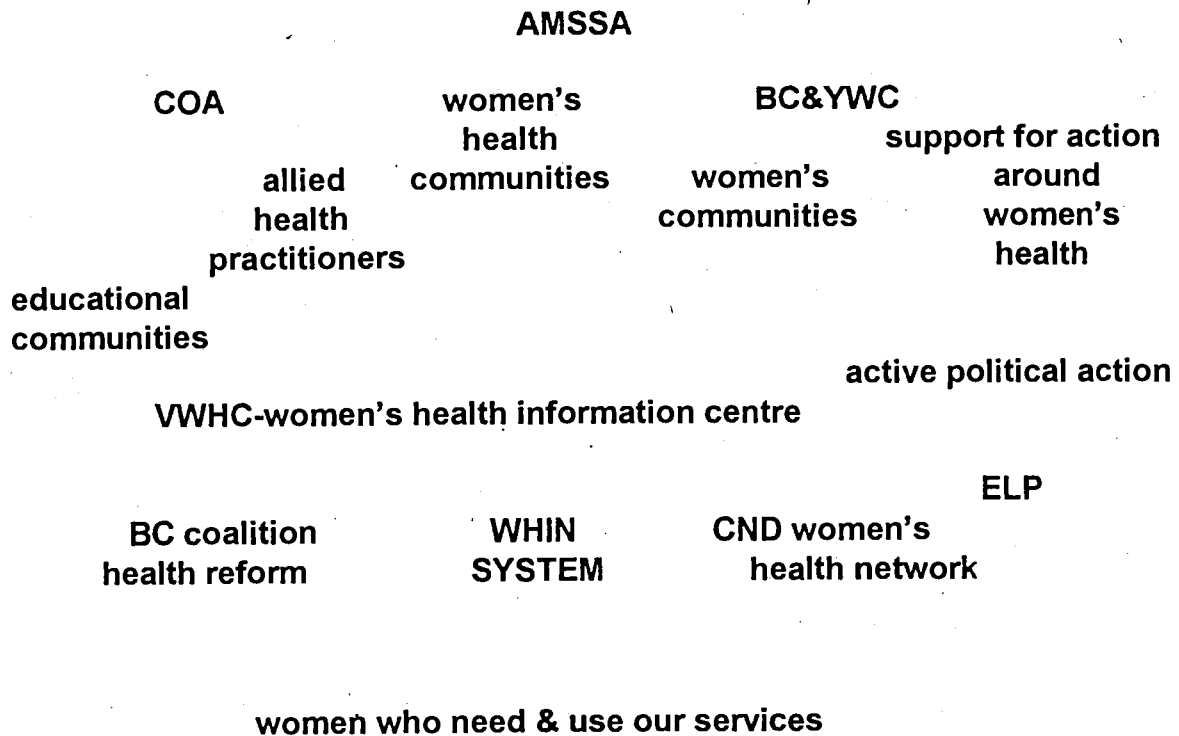
There are many ways in which the education committee can grow. In becoming a member of the education committee, you will have the freedom to decide the committee's future direction. It largely depends on the individual members' interests and goals, and how the committee as a group envisions the roles of the committee within the context of the Collective as a whole.

## Goals:

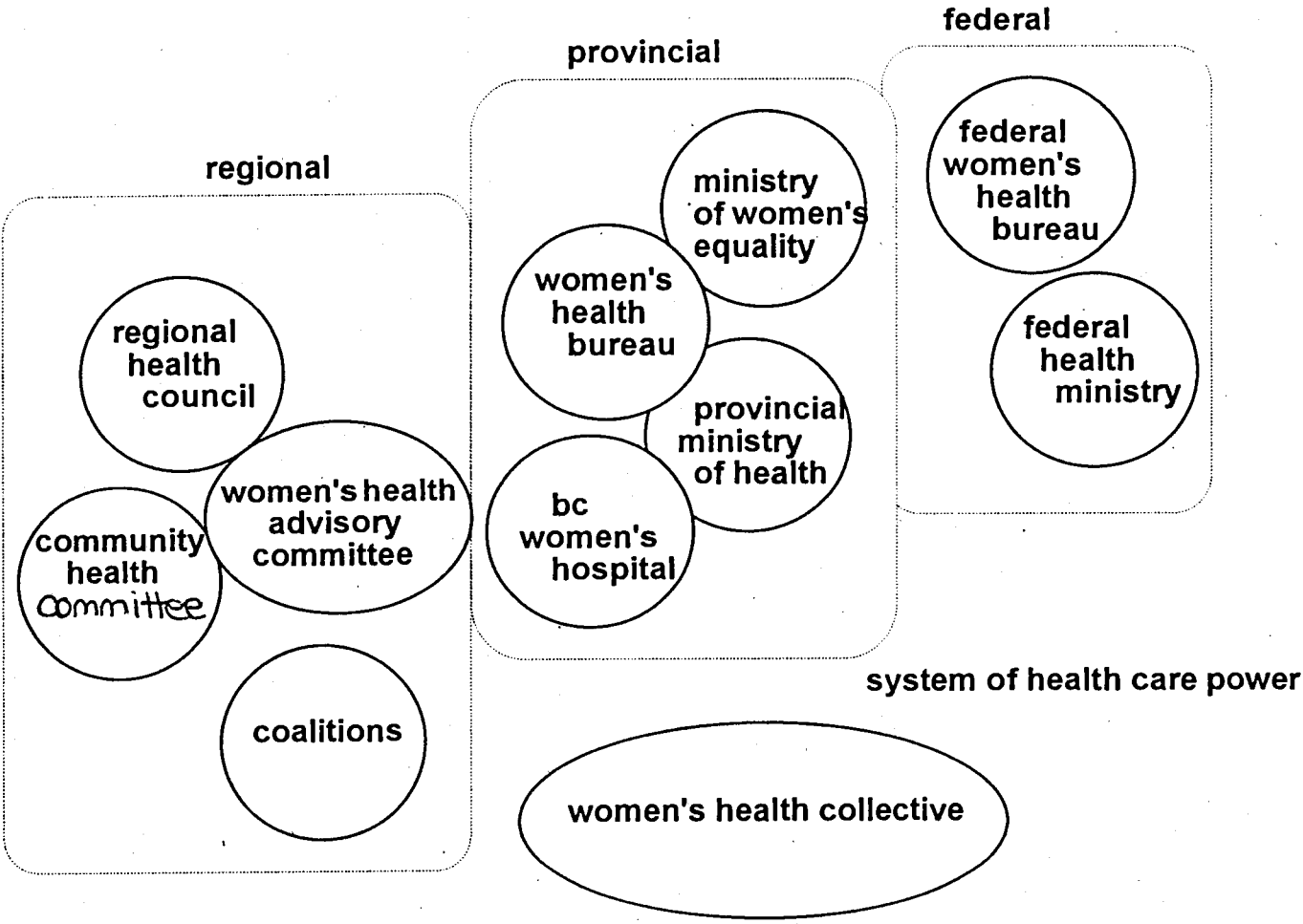
- more internal "workshop techniques" including doing workshops internally before publicly
- update our "feedback evaluations" and create effective strategy to promote our workshops

**Education Committee Meetings Time:** Third Monday of every month

## WHERE WE DRAW OUR SUPPORT/POWER FROM






- separate organizations we belong to
- coalitions we belong to
- communities that we interact with for support







# Getting To Know The Collective Space










## Where the light switches are located:

-  The main place is on the wall just before you go out of the front door to the collective. You will see the labels above each switch saying which one is for which office etc.
-  The light switches for the filing cabinet area of the info center are located on the red wall by the brochure stand
-  The switches for the lamps are on the lamps themselves.

## The Kitchen Area (Coffee/tea, food storage, etc.)


-  Feel free to put your lunch in the fridge. Every 2 weeks, the fridge is cleaned out and spoiled food is thrown out.
-  Feel free to store food in the red cupboard by the kitchen door. Be sure to label your food if you want to ensure you'll be the one to eat it.
-  There is a coffee fund jar on the red cupboard so you can put your money toward coffee/tea in there, to help us buy more coffee.
-  Please clean up after yourself.

## Using The Telephones:




-  The phone stations are named according to the computer stations that are located near them. See individual telephone for name.
-  Feel free to use the phones.
-  To make an outgoing call, pick up the telephone receiver. Push a line button, and then dial your number.
-  To get an incoming call, pick up the telephone receiver.
-  If you want to access a call on hold, push the line button the call is on.
-  To put a call on hold, push the red button.
-  To adjust the volume of the music from the phone your are near, push the volume button underneath the number buttons.
-  For more info about how to use the phones, ask the Administrator
- 







## Adjusting the heat:

-  The thermostat is in the office of NAC, see Administrator for key

## Mailboxes

-  Mailboxes are a scarce commodity here at the collective. Priority is given to those who volunteer at the collective on frequent basis and need a mailbox for this work.
-  The way to get a mailbox is to talk with the administration committee.
-  When you stop volunteering here on a regular basis, your mailbox will be given to someone else.

## The Door Bells:

-  There are two door bells/intercoms. One for the back door of the building and another for the front door of our collective space. They both play musical sounds when pushed, so you'll need to listen to the source of the sound to figure which one is going.
-  The one in the front info centre area is for the back door of the building. You can pick up the phone like receiver to find out who is buzzing you. But you will have to go down to unlock the door & let them in.
-  The one in the hallway, just past the office supply storage closet sometimes makes a racket. Nothing is wrong with it when that happens as it is just a symptom of radio wave interference in the building. If you turn down the volume, you won't hear the door bell being rung either. If you shut it off, please make sure you turn it back on when you leave. The switch is to be left on "C"
- 

## Using The Fax Machine:

### TO SEND A FAX:



1. Prepare a fax cover sheet that includes the name of the person you're sending it to, your name, the date, our fax number, their fax number, & how many pages (including the cover sheet) you are sending.



2. Put your pages upright in the document feeder (the front wire thing).



3. Dial the fax number and push the "START" button.



4. To send more than one fax, see instructions posted below fax machine



5. If you've dialed a long distance number, record the number & who is to pay for it on the sheet above the fax machine.



The instruction manual is located to the right of the fax machine.



To receive a personal fax costs you ten cents a page to cover the cost of paper. Sending a fax that does is not long distance is free. You pay for the cost of personal long distance faxes that you send.

## The Postage Meter

### User tips:



1/ Weigh your letter on the Libra scale.



2/ Find the postage cost by looking on the postal rates chart on the bulletin board above the postage meter.



3/Turn the key away from you to turn the postage meter on.



4/ It will now ask you to check to make sure the date is right. Lift the lid, check the date, and push the blue "check date" key to tell the machine you have checked the date. Close the front cover.



5/ Push the number keys to show the correct postage you need for your letter. (If you make a mistake, push the "C" button to clear it so you can start over. Then push the green "select postage" button. Three lines will now show up on each side of the amount you punched in.



6/ Put the envelope in the slot on the front bottom of the machine which will stamp it.



7/On the sheet above the postage meter, write down the date, the amount, who (which committee) is to pay for the postage costs. If you are paying for it, put your money, including tax, for it in the recipe card box by the meter.



8/ Turn the key back to its original upright position to shut meter off.



## Using The Computers:

- 🖥️ In the summer of 1994, a computer was left on overnight and the hard drive was burnt out as a result. That cost us \$400. So we have put passwords on the computers in an effort to keep things like that from happening again.
- 🖥️ If you would like to use a computer, talk with the administration committee to set up arrangements for this.

When you finish working for the day, you are responsible for:

- 🖥️ exiting out of the program you are working in
- 🖥️ exiting out of windows' program manager
- 🖥️ turning off **both** the monitor and the hard drive, and the printer if you were using it.
- 🖥️ Locking up the office doors, the collective, etc. See locking up responsibilities above on page 2.

## Printing costs for volunteers and paid workers:

- 🖥️ 10 cents a page if you use our paper
- 🖥️ 5 cents a page if you use your own paper
- 🖥️ see Administrator for more details
- 🖥️ (this is a good deal as it costs the collective 20 cents a page for printing. It would cost you 50 cents to \$1.00 a page to get things printed elsewhere.)

## Hey! Wanna Learn Computer Skills?

- 🖥️ Admin committee volunteers would enjoy helping you learn computer skills, and general office skills, if you can help free up their time by doing things like answering phones etc. For more information, see the Administrator.

## General Equipment Info (User tips, warranties, etc)

- 🖥️ 📞 See Administrator for details

## Getting Money From Petty Cash:

- 💰 To get money from petty cash, talk with the Administrator. Receipts will be needed for keeping the books, so make sure you save them and hand them in immediately.

# Benefits & Responsibilities

## Membership:

### New Membership/Fee Structure:

Based on a community expressed need for a range of options for membership in our Vancouver Women's Health Collective, a new membership structure was developed at the Annual General meeting in November 1994. Each membership category has a fee range and includes varying levels of volunteer participation, voting privilege, library privileges, and advertising access. All memberships include a subscription to our monthly newsletter. Membership fees will be used to cover the cost of newsletter subscription, and will also contribute to our ongoing effort to provide needed health information to women, and to keep the doors of the collective open.

### Volunteer Member:

- ☺ (\$5 - 25 per year)
- ☺ Library Privileges
- ☺ Commitment to one year on an average of 12 hours per month
- ☺ Newsletter subscription
- ☺ Decision making privileges on committee and at collective policy level
- ☺ Volunteer commitment: Active on at least one committee or project
- ☺ Opportunity to learn transferable skills (Office/computer)
- ☺ Volunteer 3 hours a month for fundraising
- ☺ Opportunity to learn collective process making
- ☺ Opportunity to work in a women's centre creating change

### Associate Member:

- ☺ (\$10 - 25 per year)
- ☺ Newsletter Subscription
- ☺ One free newsletter listing

### Health/Holistic Practitioner/Therapist/Business Membership

- ☺ (\$35 per year)
- ☺ Newsletter Subscription
- ☺ One free newsletter listing
- ☺ Invitation to special events
- ☺

## Keys:






### **To get your keys:**

Let the Administrator know which keys you need. ***Be sure you give her a week's notice at the very least.***

### **Key Deposit:**










A deposit of \$2.00 is required for each key, to cover the cost of it being cut. You get the money back when you return the keys.

### **Your responsibilities upon receipt of the keys:**



-  to not make copies of the keys issued to you
-  to not lend out the keys to non-collective members
-  to notify the administration committee if you misplace your key
-  to return all of your keys to the administration committee if you haven't attended a committee meeting or volunteered for a month.
-  See below locking up procedure and responsibilities

## Locking up Procedure & Responsibilities

### **When you lock up, you are responsible for doing the following:**

-  Closing all windows in all collective space, including unlocked offices
-  Making sure that all computers and printers are shut off. This includes all of the computers, not just the one you were working on. Take special care that you shut off ***both*** the monitor and the hard drive of each computer.
-  Shutting off all lights.
-  Locking all our office doors.
-  Locking the front door to the collective using the "thumbscrew"
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## Information Center Library

-  You can borrow books from the information center library.
-  For information as to the procedure for borrowing, read the instructions on both the purple paper of the borrowing file box and on the file box below it. This is located by the Directory

## Child Care



The collective will provide a child care subsidy to enable mothers to attend as many volunteer functions as they like.



staff are eligible for a subsidy for volunteer hours



volunteers see volunteer policy in personnel policy



all Health Collective sponsored events will provide child care for women attending or volunteering at these events



You are responsible to give the receipt for child care expenses to the administration committee.

## VVHC Newsletter:



You can have a copy of our newsletter, as it comes out.



You can write up something for the newsletter. To submit something for the newsletter, put your article in the newsletter box (by or above the mailboxes)