

User's Guide Fact Sheet for Slide-Tape Presentation:
An Alternative Approach to Women's Health

Content:

Part I -- Women's Health

Social and historical introduction to women and the health care system.

Part II -- Vancouver Women's Health Collective

Philosophy and approach of the Collective three members' views.

Part III -- Self-Help in Action

Examples of using a self-help approach, breast self-exam, cervical self-exam, and several contraceptive methods.

Length: 11 1/2 minutes.

Media: Audio tape synchronized with slides (88 slides).

Equipment needed: Cassette tape recorder, with or without automatic advance. Slide projector, with manual or automatic advance.

To Use: Start with carousel in "0" position. When using manual advance, advance each slide with each "*" in the script.

Audience: General audience of senior secondary school level or older. Please note: for school audiences, the necessity of parental consent should be considered.

Script for Slide-Tape Presentation:

An Alternative Approach to Women's Health

Slide Number

- | | |
|-------------------------------|---|
| 1. Title | <u>*1An Alternative Approach to Women's Health</u> *2 |
| 2. Title | <u>Vancouver Women's Health Collective</u> *3 |
| 3. Title | <u>I. Women's Health</u> *4 |
| 4. Vancouver scene | (Music) |
| 5. crowd | Women*5 make up about 50% of the population. |
| 6. Vancouver street | However*6 they use a greater proportion of health care services than men, take more prescription drugs, and are admitted to |
| 7. Vancouver General Hospital | hospital*7 more often than men. Most health |
| 8. health care workers | care workers*8 are |
| 9. " | women, but the people with power,*9 including doctors, are mostly |
| 10. woman's anatomy: diagram | men.*10
Because of their anatomy and physiology, women have special health concerns, which bring them frequently to seek medical |
| 11. menstrual cycle | attention.*11 |
| 12. pregnancy (outdoor) | Menstruation, pregnancy*12 childbirth and menopause are normal female processes. The |

13. pregnancy (indoor) medical profession mystifies these*13 processes. Women have been constantly denied the information necessary to develop the self-knowledge and confidence to understand their body changes.*14
14. Vancouver General Hospital Women are relatively powerless. When a woman needs health care she faces an impersonal*15 male-dominated bureaucracy. She is not given the information, credibility or responsibility to make the best decision for her health, herself.*16 It is more profitable for the medical profession to maintain costly forms of health care*17 than to establish cheaper preventive programmes.*18
15. "Health Care Hierarchy" How did women lose control of their own health care? They once relied on each other for help. Midwives were consulted for any women's health problems, especially in labour and delivery.*19 Childbirth used to be a major social occasion, with the woman's family and friends present to help. Around 1750*20 with an increase in medical knowledge, and the invention of various instruments, men began attending childbirth. With the promise of greater speed and safety as an excuse*21
16. "Preventive Medicine" (street)
17. "Preventive Medicine Centre"
18. midwife
19. midwife with assistants
20. pregnant woman: old print
21. "Man-Midwife"

- the men gradually discredited the female midwives, and eventually, by the 20th century, made it illegal for them to practice. In the 19th century, rigid views of women developed. "Ideal" women were innocent, religious and passive. They were considered weak, nervous and incapable of intelligent thought.*22
22. "The Touch"
Women were encouraged to seek their doctors' opinions on many matters. However, this was a time of great prudery, and doctors were forced to follow social etiquette and examine fully-clothed women by touch alone!*23
23. "Twilight Sleep"
Until 1900, most births were at home, but then women were led to believe that hospital deliveries offered greater safety, efficiency and comfort. Relief of pain with "twilight sleep" or anesthesia began in the 1920's.*24
24. hospital delivery
The childbirth experience then became more regulated and dehumanized until the 1970's,*25
25. fetal monitoring
when women began seriously questioning the need of elaborate medical procedures. The hospital system has changed considerably in recent years.*26
26. home birth
However, pregnancy and childbirth are still treated as illnesses, rather than as basically healthy processes.*27
27. "V.D."

Cultural beliefs are hard to change, and women's position when needing health care

- reflects their usual place in male-female relationships.*²⁸ It is not surprising that many women feel embarrassed and threatened during contacts with the health care system.
28. "The Pap Test"
29. pelvic exam: draped
- Events such as Pap tests*²⁹ and internal exams become mysterious, unpleasant necessities. Women are neither informed about procedures nor encouraged to ask questions which would dispel this medical mystique.*³⁰
30. Title
- II. Vancouver Women's Health Collective
- In 1971, the Vancouver Women's Health Collective was formed by a group of women*³¹ looking for an alternative to conventional health care. These women have found that as lay health workers they can help themselves and others*³² to learn about their bodies, and to take the initiative and responsibility for their own health.*³³
31. "Caring for Ourselves"
32. "Woman's Body: An Owner's Manual"
33. Collective member #1
- Women's role in the health care system is reflective of their role in capitalist society.*³⁴ Women in capitalist society are powerless. We are defined by our relationships to men, as sisters, mothers, daughters, pupils, et cetera.*³⁵ We are also defined by our biological function, as we are seen as child-bearers and nurturers. It is not surprising
34. "
35. "

36. Collective member #1 that it is mostly women who make up teachers and housekeepers and nurses.*³⁶ Equally, women in the health care system are also
37. " powerless. As patients,*³⁷ we are taught not to question our doctors' opinions. We are taught nothing about our bodies. As health workers, women are also subordinate to
38. " doctors.*³⁸ Women make up 70% of the health care workers, but only 3% of the administrators in hospitals and institutions. Women hold the
39. Collective member #2 lowest paying non-unionized jobs.*³⁹
40. " One of the things that contributes to women's lack of power is a hierarchical health care system, in which a few people maintain power by hoarding information.*⁴⁰ Therefore, the Health Collective is committed to the concepts of sharing information, power and
41. " responsibility.*⁴¹ The logical result of these ideals is that we are organized as a collective rather than having a traditional hierarchical
42. " structure.*⁴² This means there are no bosses; all members are valued and expected to take responsibility for our activities and partici-
43. Collective member #3 pate in decision making.*⁴³
44. " The concept of self-help deliberately works opposite to the oppressive medical system.*⁴⁴ We learn how to define our own

- needs, rather than letting our needs be defined for us. For example, we have been conditioned to think we need an instant form of birth control, like the "Pill", that is harmful to our health.*45 But through sharing information with each other, we've found there are other effective methods which aren't harmful.*46 Through self-help we learn about our own bodies, learn that we can understand mysterious scientific language, learn to do practical preventive health care measures, such as breast self-exam, and cervical self-exam.*47 In this way, we can take control of our own bodies, as well as demand better health care from our doctors.*48 Through group self-help, we learn that we can help each other, that we all have valuable information to share,*49 and this breaks down our feeling of isolation from each other, and helps us to realize we don't have to go off to an expert for all our health care needs.*50

50. Title III. Self-Help in Action

51. "Our Bodies, Ourselves" How does the Women's Health Collective put theory into practice? Women visiting the Collective*51 experience a new attitude to health, they learn to take increased responsibility and control of their health. Greater

- political and social awareness is also important,^{*52} for women must learn how to help each other to meet their health needs.^{*53}
- On a practical level, the Health Collective is devoted to self-help, sharing information and skills which enable women to take greater control of their own health.^{*54} Learning breast self-examination is an example of how women can take responsibility^{*55} for detecting early signs of disease. It is also an example^{*56} of learning how our bodies change at different times.^{*57}
52. "Caring for Ourselves" group
53. group
54. "Breast Self Examination"
55. "It Could Save Your Life"
56. woman with diagram of breast
57. B.S.E.: visual
58. B.S.E.: axillary area (Pause)^{*58}
59. B.S.E.: tissue (Pause)^{*59}
60. B.S.E.: nipple (Pause)^{*60}
61. nude and mirror (Pause)^{*61}
62. woman with make-up
63. woman with mirror

Women have been brought up to be very conscious of their outward appearance, and to notice the slightest change.^{*62} "Femininity" is related to outward appearance.^{*63} But what about changes inside? Why do women--as a group--know so little about their physical or

64. woman showing reproduction chart personal selves? *64 Why do women lack the knowledge, self-confidence, and therefore the power to make clear decisions about their health? *65
65. woman with speculum With knowledge and understanding, the mystery of many things disappears. *66 A basic idea of our anatomy *67 is necessary in understanding many body processes. *68 A first step is seeing our usually hidden parts; *69
66. woman passing speculum
67. genital self-exam
68. cervical self-exam
69. cervix here, the cervix ... *70 Then procedures such as Pap tests, *71 once seen and understood, *72
70. "The Pap Test"
71. Pap test equipment
72. woman doing Pap test
73. close-up Pap test lose their clinical mystique. *73
74. "It Only Takes Minutes to Make Sure" (Pause) *74
75. "Birth Control That Works" (Pause) *75
76. birth control chart Choosing a suitable method of birth control is another example of how a woman can help herself, *76 once she knows certain facts ... *77 It is important to understand *78 exactly how the chosen method
77. diaphragm and jelly
78. demonstration of diaphragm

79. "Let's Be Practical about the Condom" works.^{*79} As with other decisions, the advantages and disadvantages^{*80} of each alternative must be weighed. Research^{*81} is constantly exposing health hazards in every area of our lifestyle. With the broader awareness and responsibility gained with a self-help approach, women can judge the benefits and drawbacks of various solutions to their needs. Instant solutions are not always the best answers to long-term problems.^{*82}
80. Condom and foam
81. "Pill" boxes
82. midwife
- In summary, we have looked at various changes in women's health care, and seen current possibilities. To return to our historical heritage, women once cared for one another. Together we have many resources--and a lot to share.^{*83}
83. street scene
84. Vancouver scene . . . (Pause)^{*84} . . . (Pause)^{*85}
85. Title Produced by Geraldine Peet, February 1979^{*86}
86. Title In Cooperation With^{*87}
87. Title Vancouver Women's Health Collective^{*88}
88. Title U.B.C. School of Nursing
U.B.C. Biomedical Communications

Illustrations from:

Boston Women's Health Book Collective. Our Bodies, Ourselves. New York: Simon and Schuster, 1976.

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