

broadsheet

new zealand's feminist magazine

march 1978 no. 57 60 cents

A GIANT STEP BACKWARDS —

ABORTION OUTLAWED



**A guide to the Abortion Act
PLUS A guide to getting an abortion
MUST WOMEN HAVE BRAWN AS WELL AS BRAINS?
TEENAGE TALES — WHAT'S WORTH READING?**

Fronting up

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Mon — Thurs: 9 a.m. — 3 p.m.

Friday: 9 a.m. — 12 noon.

It is best to ring first before visiting as we are sometimes out and about. There are sometimes people here after 3 p.m. too.

Phone: 378-954.

Address: 65 Victoria St. West, City
(Just above Albert St.).

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Another plea for any filing cabinets, bookshelves, chairs and metric scales which are surplus to your requirements. We could put them to good use. Give us a ring (378-954) and we can arrange to collect them.

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12. Offer to help for a couple of hours a week — typing, filing, writing, recycling envelopes — whatever suits you best.

Donations

are always welcome. Broadsheet is one of the cheapest women's magazines available. But that's only because we stint ourselves to keep costs down. We want to get our message out to as many women as possible so we don't want to increase the price. However, the continuing price increases in postage, printing, etc., mean that we may have to increase the price of Broadsheet in 1978. Those readers who can afford to give us donations can help stave off that evil day.

Articles for Broadsheet

We are always delighted to receive contributions from our readers and would appreciate it if women sending articles, short stories, letters etc., could comply with the following guidelines:

1. Articles should be typed on one side of paper only, with wide spacing.
2. Please mark you name and address clearly on all contributions — also enclose a stamped, self-addressed envelope.
3. Short articles (say for Behind the News) should be under 1000 words; main articles 1,500 — 2,250 words (3 or 4 pages).

Keep letters short (say, 450 words) so that as many letters as possible can be published. We are receiving a lot of letters at the moment both in response to our articles and also raising new issues. We really enjoy this and like to see letters published as soon as possible after we receive them. We don't like cutting letters, and hardly ever do — you can help, by being concise, but don't stop writing.

4. Send two copies of all articles (not letters) as this enables us to send a copy to the woman illustrating the article.

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writings from
the women's movement

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Photo: Julie Lambie

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These people worked on this issue:

Val Cole, Rosemary Curl, Sandra Coney, Christine Dann, Anne Parsons, Jill Ranstead, Rosemary Ronald, Lyn Schnauer, Annie Helen-Claire, anon (compliments Wanganui Computer) Jean Volkerling and the enveloping women.

Cover photo: Zusters

Illustrations:

Sharon Alston p7

Vanya Lowry p28, 30

Letters

Natural birth Control

Dear Sisters,

As the author of the article on Natural Birth Control I would like to make a few comments in reply to Maxine Boag's letter.

Explanations of methods, including the material on ways of observing your cycles and on the benefits of such cyclic changes were not included in the article as printed, a decision made by Broadsheet on the grounds of space. I have now decided that my health articles will not be cut. If space is a problem they will be serialised in successive issues.

Readers were asked to write in for the more detailed information. I hope that any women interested will do so, as actual instructions for this method are detailed and for women not receiving personal instruction need to be very full. I do agree that as printed the article was a very brief skim over the topic. However to write in brief on health topics is impossible and there is always a problem with space.

I must disagree with Maxine about some points in her letter. It is possible to get pregnant even if you ovulate close to your period. Some women have even got pregnant by ovulating actually on their menstruation dates. IUDs have been found to interfere with the 'normal' cycle and with mucous changes. This does not happen with all women but does affect some. There is a great deal of evidence from women that disturbances do affect their ability to recognise ovulation and other signs. Again this may not be true for Maxine but it is for some other women.

Finally, I still do not believe that this is a viable method at the moment, as we do not have safe legal abortion for those women for whom this method fails, and we do not know enough about the processes at work to offer this method to all women. Many women given our present knowledge would not be able to make good use of this method, not only with regard to the actual methods themselves, but also in terms of their lives and life —

styles (the same is true for coitus interruptus). If you can use this method and have worked out your attitude to a possible pregnancy (and the problems of getting an abortion), well and good, but it is not as yet suitable for many women.

Sarah Calvert,
Hamilton.

Assertiveness-training

Dear Broadsheet,

I was disappointed by the superficial nature of the editorial on Assertive training (Nov. 1977). Rather than being a discussion on the value of assertive training groups as the title implied (. . . . A discussion on the pros and antis) it read as a condemnation. It seems rather presumptuous to be so critical on the basis of two assertive training references; no observation of an assertive training group in operation, or discussion with women who have participated in such groups (as members not 'leaders').

Pamela Butler is middle class but I feel that Christine and Sandra have misinterpreted her on several counts e.g. Butler does not say women should not *feel* angry as suggested in the editorial, her concern is how this anger can be expressed effectively. It is not true that Butler ignores the need to change the power imbalance; a section of her book is sub-titled 'Androgyny as Power'.

It would appear that Christine and Sandra perceive 'assertiveness' as equivalent to 'dominance' (Note 'Boss' illustration), in fact every manual on assertive training defines 'assertiveness' as 'not violating the rights of others'; as being able to express warm, caring feelings as well as negative feelings.

It is suggested that the situations dealt with in assertive manuals are 'not particularly difficult'. Maybe the situations are not difficult for Christine and Sandra, but in my experience women come to assertive groups because they have extreme difficulty

in these situations e.g. expressing positive feelings towards themselves and expressing anger. I could be accused of being wrapped up in the 'personal' and ignoring political considerations but I have found that the assertive training exercises do lead to discussion of the political aspects of the group members daily lives. Assertive training clarifies the anomalies of stereotyped roles and the unfair expectations imposed on women.

In thinking about Christine and Sandra's arguments there is one thing I cannot understand, how we are to bring about political change without personal effectiveness. They suggest "It will help, when we're working for change, if we can be assertive rather than passive"; I would argue that it is crucial not just 'helpful' for women to become assertive, if revolution is not to be just theory devoid of action and well-voiced words, and thus unlikely to occur.

Sincerely,
Sue Fitchett,
Auckland.

Dear Broadsheet,

Assertiveness training is the name given to the acquisition of a skill in self-expression.

No skill is intrinsically good or bad and its teachers may vary widely in political/ideological beliefs. A good teacher will distinguish carefully between assertion and aggression.

Many of us, handicapped by a lack of self-assertive skills, from shyness, timidity, self-sacrificing ideals or role models, may suffer inwardly over supposed passivity or lack of courage. Unnecessary inhibition of self-expression contributes to a depressive outlook. By untangling rational and irrational fears and practising the desired skill, we find ourselves to be more "normal" and socially adequate. Sure, there may be dangers of calling down aggression upon ourselves. You suggest it is better to be passive under the threat of violence or desertion than to be self-assertive — and self-respecting.

Should we also be saying Yes, Mr. Gobblement, No, Mr. Gobblement – we don't really want our rights if you're going to be angry?

I remember reading an article which ended – where do you go in the land of the raised consciousness? The answer might well be – to assertiveness training, to learn to state our rights and take steps to recover them non-aggressively, non-apologetically, honestly, directly.

In sisterhood,
Heather McPherson,
Christchurch.

New midwifery service in Wellington area

Dear Broadsheet,

I trained as a midwife in England where over 80% of births have a midwife in attendance and not a doctor. The registration led me to the position of a practitioner of normal midwifery in my own right. The part of my training I enjoyed most was the district where I was privileged to care for some women as they gave birth to their babies in their own homes.

Back in New Zealand in August 1974 I began working in delivery suites full time. I have considerably developed my diagnostic skills but always come back to the frustration of being a doctor's assistant. Some of these doctors have delivered fewer babies than I and rely upon the skills and abilities of midwives like myself.

Last year when I began to read about Leboyer, a friend and I tried to put his ideas into practice. We were forced eventually to adapt them so that they could be accepted by medical staff and other nursing personnel, many of whom openly ridiculed the whole idea.

There are practices I am compelled to assist in or carry out for patients and their babies, which I heartily disapprove of; e.g. circumcision, routine injections of Vitamin K to babies, lithotomy position for normal deliveries, episiotomies to allow students to deliver babies without the mother tearing, routine enemas, inductions for doctor's convenience, early clamping of the cord, and routine use of ergometrine (ergot alkaloids are considered to interfere with the bonding process).

Although I have seen so much in the last 3 years that is good medicine, good obstetrics and good nursing, I have also seen and read enough to convince me that if I went into labour at the end of a normal term pregnancy, fit and healthy, with no contra-indications, I would have my baby at home attended by a friendly, competent midwife, my husband and some friends. With careful ante-natal care many healthy, educated and confident women could have their babies at home if that is what they want. I have heard of some who have been abused and threatened by their doctors when they have enquired about this possibility. An American obstetrician said recently: "The medical profession can't go on saying: 'If you don't accept good care on our terms you don't get good care.'"



Any woman who elects to have her baby in hospital leaves control in the hands of others; she has little real choice about drugs or in-hospital procedures. An example is the increasingly sophisticated methods of monitoring the unborn infant during labour – belts around the mother's abdomen and in more serious cases wires also attached to the infant's scalp. In most hospitals the monitoring is now routine whether or not there is any sign of foetal distress. The monitoring complicates breathing exercises, massage, walking around during labour and interferes with the mother adopting positions of comfort as labour progresses.

All this has led to a colleague and me deciding to offer a home confinement service in the Wellington and Hutt areas. As we are both very experienced midwives, Lyn and I believe we will be offering a safe and responsible alternative to having a baby in hospital for women who want a

greater say in how they bring their children into the world.

Our thanks to La Leche League, Parents Centre, our friends, Joan and Carolyn in Auckland for help and encouragement, and a special thank you to Carol.

Those interested contact:

Jennifer Gardner 663-891 or 764-480
Lyn McLean 899-898 or 849-145
or write to Jennifer at 77 MiroMiro Road, Normandale, Lower Hutt.

Is contraception all bad?

Dear Broadsheet,

Having worked as a 'paramedic' in the field of family planning for over two years, I would like to comment on the two articles concerning contraception which have appeared recently in Broadsheet. In Broadsheet, October 1977, Sarah Calvert asked why so little research has been done into 'natural' methods of birth control. In fact, a lot of research has been done and both the Family Planning Association clinics and those run by the Catholic Church agencies, do teach methods of ovulation detection. Catholic organisations, who on the one hand will not hear of any kind of hormonal or 'artificial' aids to contraception, are doing an enormous amount of scientific research to provide adequate contraception for their people.

Although this is another example of the hypocrisy of this church, it also shows how clearly 'unnatural' natural family planning is. The reasons why the use of these methods are not widespread are the very reasons that Ms Calvert has given. They require very intelligent, systematic use and adherence to a very stable domestic routine, as well as having a very co-operative partner. Natural family planning is therefore not suitable for many women.

In the November 1977 Broadsheet, the Depo Provera injection is also criticised. Like all methods of contraception, the injection has advantages and disadvantages and must be viewed in this light. At the clinic we find that Depo Provera is suited to quite a large number of women. When considering the side effects of any method, we must also consider the alternatives, which are very few. The average woman who leads a normal married life, engaging in some sexual activity for a period of

about twenty years without having recourse to scientific methods of contraception, can expect to have eleven pregnancies. Most of us are not prepared to risk a single unwanted pregnancy, especially now with the possibility of the closure of AMAC. Because of this fear, many women are going back on the pill, rather than risk the failure rate of the diaphragm or the I.U.D. Drug companies are spending considerable time and money in researching better methods of contraception. They are in competition with each other, and only the fact that there is money in it will encourage them to continue. The government is not likely to put money into research for better methods of contraception.

While I think it commendable that aspects of contraception be discussed in Broadsheet, couldn't it be more positive?

Julia Millen,
Wellington.

Nicotine fumes

Dear Broadsheet,

'Lily Lung Meets Nicotine Queen at a Party' (December issue) has prompted me to write on an issue that has been bothering me for some time now, in general, but particularly in feminist situations.

I really wonder how so many feminists (especially radicals) can so enthusiastically support the capitalists who exploit pockets, addiction and health. You are slaves to those whom you criticise in so many other respects. Politically it doesn't make sense. I'm aware of the difficulties involved in kicking the habit (I've been trying to give up eating for years) but I constantly see women who start smoking, when they are fully aware of the dangers.

"Your space is off-limits
mine is open to you."

... is easy enough to say, but what about the many times when a common space has to be shared, at parties or meetings? My clean air doesn't offend.

I'm fed up with: "Oh well, let's open some windows and it'll blow away" and having to wash my hair and clothes after parties in rooms of 'nicotine fumes'.

Rosemary Curl,
Auckland.

Undemocratic politics

Dear Broadsheet,

I was delighted to read recently my first three copies of Broadsheet, even if they did shock me out of my conservative goody shoes.

The shallowness of what passes as male idealism is best epitomised for me by the fact that millions of people in a male dominated world died in wars to preserve democracy, but most seem blissfully unaware that we haven't got it yet! Is it unreasonable to expect that in a democracy we should be able to vote for the person of our choice, as well as the party of our choice? The S.I.S. bill showed us what dangerous legislation can be passed, virtually giving our Prime Minister the powers of a dictator; particularly when his party was elected with only 38% of all eligible votes. (We seldom have a majority government; only one since the war.) The abortion issue presents us with the dilemma as to whether our politics is to be overruled by a subject of personal concern to women; do we retain a right to regulate our menstruation, or do we leave it to the Department of Fertility Control? The party versus the conscience vote, as politicians are pleased to call it. (Politicians who cut solo parents' benefits in the first six months to a level where it covers only the average rent may need to re-establish in the minds of their electors that they have in fact got a conscience).

I question the legality of the well-named Birch law, if we have any effective laws preventing discrimination in this country. Is there any mention of the causative male being asked to go before several doctors to be counselled, reprimanded, assessed, belittled, examined mentally and physically or whatever else the boffins are going to dream up? A certain amount of empathy with God is necessary before one can undertake to be on one of these panels. The law is discriminatory against the female physically, emotionally, mentally, socially and financially, and as such should be illegal.

The fact that so-called minority groups do not have any proportional representation in Parliament, particularly with regard to social, environmental and financial issues means that those groups that do get in are in danger of becoming a law unto themselves. The

Proportional Representation petition with over 40,000 signatures on it was recently thrown out of the male-dominated Parliamentary Petitions Committee. It was not even accorded the privilege of debate.

Yours sincerely,
Elaine Freer,
Feilding.

SROW replies

Dear Broadsheet,

Joss Shawyer's subjective viewpoint of the Society for Research on Women's publication "*What Shall I Do? The Unmarried Mother's Decision*" in December's Broadsheet unfortunately did not always accord with the facts and consequently could give the wrong impression to anyone who has not read the book or is not familiar with the work of the Society. As a completely impartial group we could appear to someone who has strong views in one direction to be leaning towards the opposite view. However, anyone interested in reading the book and forming her own opinion may buy it for \$2.50 from the Society and everyone is very welcome to attend our two-monthly meetings and to join the Society.

For details please phone Auckland 558-906 or write to P.O. Box 28-314, Auckland 5.

Edwina Duff,
Publicity Officer, S.R.O.W.

Abortions in Australia

Dear Broadsheet,

I am concerned at the current attitudes of those involved in sending NZ women to Australia for abortions. It is clear that the hard-sell techniques used by one clinic have won over a number of prominent women here who are now unprepared to listen to any of the very genuine complaints made against that clinic by feminists both here and in Australia. I personally feel it likely that we will need to use this clinic, especially for terminations at a late stage, but I am concerned at its use of a general anaesthetic as a rule (something not advocated by women who are experienced in medical abortion techniques), by its generally poor attitudes to women, by its record with regards counselling and by the long waits that many women have there. (I note that

NZ women do not appear to be having to wait which suggests that Australian women are having to wait even longer). There are other equally good (and in some cases better) clinics in Sydney, some run by feminists whose concern is to provide the best possible care for women. I would hope we would use these clinics, ensuring that no one clinic gets the bulk of the NZ business — and make no mistake it is business and very big money business to the abortion clinics in Sydney. Competition and a critical view of the services offered will ensure that women get good medical care. I am personally concerned that we are at present supporting a service which is not the best. I wonder how long it will be until SOS and other services run by women are circumvented to put more money and control directly into the hands of men?

For any women in NZ interested there is a very good feminist abortion referral service in Sydney. It provides counselling for women, will meet and look after them during their stay and will arrange everything for them. It has been going for about 5 years and has managed to improve many of the services available in Sydney. Its phone number is Sydney 2312777. Leichhardt, the women's health centre in Sydney, is also prepared to help NZ women who can contact them at Sydney 560-3011. Any woman who would like more information is welcome to write to me (via Broadsheet).

Sarah Calvert
Hamilton

Depression

Dear Broadsheet friends,

I would like to renew my subscription which I let lapse early in the year. I have been buying Broadsheet occasionally since from the bookseller.

September's issue was *Right On* for me, with the follow up of the TV programmes "Women" and especially Julie Thompson's article on Mental Illness.

I am one of those thousands (where are they!) of women who are on tranquillisers to help them to 'cope'. And it seems an impossible situation. My doctor tells me I am perfectly healthy when I think I have all sorts of things wrong with me and I feel exhausted mentally and feel sick often. He says that perhaps I am bored and should 'get out' more and perhaps

do some voluntary work.

And so I ask for tranquillisers to calm me so I can survive and put on a happy face.

My husband and I get on well and he tries to understand and help me as much as he can, although work and survival for him is enough to cope with. I get angry at him because of how I feel and we both feel trapped.

I have always blamed myself for the way I am now because I am a shy person and too sensitive. Slowly over the last 11 years of marriage I have withdrawn from everyone and have lost all my confidence. Even to shop or go to the pictures is impossible sometimes. I feel so ashamed of myself.

A few months ago I enrolled myself for group therapy at Carrington Hospital, feeling desperate for some help from somewhere, thinking I was going crazy. But I could only stand two days there. I couldn't stand being peered at through the mirror window, being watched for my peculiar antics like an animal, or the sexist attitudes of a psychiatrist, or the high heels and perfume talk of the other women in the group, and I felt more different and guilty than ever.

So I left and cried at home wondering where to go next or what to do or who to talk to. I have no friends I could tell how I feel.

The last one of our three children has now just started school so at last I can have some peace and quiet and think only of myself for a while and hopefully learn to love myself and gain confidence again.

Thanks for listening and thanks for the great article of Julie's. I'll have to post this now before I change my mind.

Please don't print my name because I really just want to hide away.

Te Puea

Dear Broadsheet,

Thanks indeed for the attention you gave *Te Puea* in the December issue. There is one impression I must correct, however, because it has now appeared in print twice. I don't know why.

The elders who helped me with this book have at no time withheld information from young Maoris. Indeed, Piri Poutapu, Tumokai Katipa, Rotohiko Jones, Whitiara Cooper,

Heeni Wharemaru and others were concerned that I get down on paper what they knew so that young people would be able to read it. The only reason they did this with me and not with somebody else was that they knew me, and no one else they knew had offered to do it.

The rest of Vapi Kupenga's points I take and agree with. It is time the Maori woman was written about, and it is time that Maori women wrote about them. Maggie Papakura, perhaps should be next.

Kiaora koutou.

Michael King,
Paremata.

Broadsheet not always joyfully received.

Dear Broadsheet,

Katherine O'Regan says in the October issue how much she enjoys reading Broadsheet each month.

Made me think — I occasionally buy Broadsheet on my way to work. If I read the magazine at work, I read it with the page folded in half so that the headings are less obvious, or go off to a separate table from the others. I am the only woman in my department. The boss may wander over and flick through the magazine, or read a few headlines, make some kind of sarcastic or rude comment, and fling it down. These are narrow, ignorant people, who have kept the same beliefs all their lives. Any idea that does not fit within their narrow bounds, anything different, is to be sharply condemned.

I am a coward. I hide my magazine. In fact often I do not buy it. I become so angry at injustices reported in it, or injustices I see around me, that I fear my own reaction and the inevitable putdown. It is so hard to stay silent, but there is always that fear of those ugly minds and their conviction that they are right and that there is something wrong with me for being different. I *cannot* assert myself against these putdowns, after a lifetime (still short) of awareness that so many are angered by my attitudes. I myself have built up a great store of anger. How can I release that, knowing my weakness? How can I become a complete, fearless person?

Raewyn Seager,
Auckland.

Behind the News

THE PILL/THE IUD

Our new abortion laws mean that many New Zealand women are turning to more effective means of birth control, but in doing so we run the risk of taking hormones and using devices which are harmful, even dangerous to our bodies. Broadsheet has recently received reports of new findings about the Pill and a recently released IUD.

Progestasert

The history of many IUDs is a history of inadequate trials, suppression of damaging evidence by manufacturers and a hard sell to doctors. The story of the Dalkon Shield is the best documented of these: it was not until about 20 American women had died that this device was eventually withdrawn from the market.

In 1976 a new intra-uterine device called Progestasert appeared on the market, manufactured by the Alza Corporation of America — self-proclaimed experts in the field of “therapeutic systems” requiring “minimal reliance on patient compliance”. Progestasert works by gradually releasing the hormone progesterone into the uterus over a period of one year, after which time the device must be removed. Pregnancy is prevented by the presence of a foreign body in the uterus as well as by the hormone. The Progestasert was sold on the basis that it averted some of the problems of other more conventional IUDs and it was supposed to be more effective. However, experience has shown that the Progestasert “appears to be no more effective than other IUDs, may cause more pain on insertion, and must be removed and replaced every twelve months. The long-term safety of this device has not been determined.”¹

One study stated: “An inflammatory reaction has been noted in women carrying ‘inert’ plastic devices. In subjects using the progesterone-

releasing system it seems to be more frequent and more intense.”²

Progestasert was approved by the FDA and is used in the US, Britain and New Zealand. But at the end of 1977 researchers at the Family Planning Research Unit at Exeter University “discovered disturbing evidence concealed in the clinical data supplied by Alza”.³ One in five women who became pregnant with a Progestasert in place had an ectopic or tubal pregnancy.

In an ectopic pregnancy the fertilised egg does not descend to the uterus imbed in the uterine wall. It remains in the fallopian tube (more rarely in the cervix, ovary or abdominal cavity), developing there. Ectopic pregnancies are more common amongst IUD users in general, probably because the inflammation set up in the uterine wall as part of the IUD’s modus operandi blocks the opening between the tube and uterus, preventing the passage of the fertilised egg. A British study⁴ showed that the pregnancy rate among IUD users (not including Progestasert) was 2,000 per 100,000 users per year, with 121 (6% of those pregnant) ectopic pregnancies. The risk with Progestasert is over three times higher (20%).

An ectopic pregnancy is a dangerous and potentially life-threatening condition. A woman thus affected experiences the signs of pregnancy as she would in a normal pregnancy, although there may be some tenderness on one side of the lower abdomen. A bi-manual examination will sometimes reveal a uterus which does not correspond with the date of conception but as the uterus enlarges with hormonal

changes at the onset of pregnancy this can be missed. An examination of the products of conception following an abortion will reveal an absence of foetal tissue and thus an ectopic pregnancy must be considered. If the tubal pregnancy is not diagnosed the tube will rupture, causing internal bleeding and possibly death. The tube usually ruptures between the eighth and twelfth weeks of pregnancy and the rupture itself is felt as an acute stabbing pain or cramps or a constant dull abdominal pain. This initial pain will be replaced by lower abdominal pain, pain in the diaphragm, pain in the shoulders, painful breathing and shock.

Treatment of a tubal pregnancy is by removal of the affected tube. A woman who has had one tubal pregnancy has a reduced chance of subsequently conceiving and an increased chance of another tubal pregnancy.

Dr Robert Snowden, head of the Research Unit at Exeter University has contacted the British distributors of Progestasert, who have decided to stop promoting the device, and they have written to all doctors who have fitted it.

Dr Margaret Tillott of Auckland FPA told me that Progestasert has always been treated with caution by the FPA as it is expensive, needs to be changed every year and seems to have no real advantage over other types of IUDs. In Auckland, only about six Progestaserts were inserted at Auckland FPA and these women will be watched carefully. It is “highly unlikely” that the device will be further used. A small number of Progestasert IUDs were also used at the Auckland Medical Aid Trust hospital.

If you have a Progestasert IUD you can:

1. Have it removed and replaced by another type of IUD or use another form of contraception.
2. Wait until it must be replaced anyway (at the end of one year)

but be aware of the signs of an ectopic pregnancy. See especially "Our Bodies Ourselves", Boston Womens Health Book Collective, Simon & Schuster, New York, 1976 edition, p. 324.

New Pill findings

Major fears are being expressed about some aspects of oral contraceptive use following the publishing of two major British prospective studies in *The Lancet* of October 8, 1977.

Briefly the findings were as follows:

1. The death rate from circulatory diseases in women who had ever used the Pill was roughly five times that of 'controls' i.e. women of similar age etc., who had never used the Pill.
2. The death rate increased with age, cigarette smoking and duration of Pill use, but at all ages it was higher in 'ever-users' than non-users.
3. If the Pill was taken continuously for five years or more, the death rate increased roughly ten times that for non-users. All the deaths which involved Pill use of five years or more occurred in women aged 35 or more. (Few younger women had taken the Pill for this long, so the risk for them could not be assessed).
4. The death rate for 'ever-users' was 'much greater' than the death rate from pregnancy in the non-users." 5

Dr Malcolm Potts, consultant to the IPPF, commented that "This increased overall figure for mortality is higher than previously believed. It is, for example, greater than the risk of death from road traffic accidents in Britain, and higher than the chance of death in this country from pregnancy and its complications." 6

What is also new is the discovery that having stopped taking the Pill you do not necessarily escape the danger of heart disease associated with Pill taking.

In the light of these new findings various recommendations have been made regarding continuing oral contraceptive use. These are the ones made by the Royal College of Practitioners and the Royal College of Obstetricians and Gynaecologists in the UK:

1. Women Under 30.

"No evidence to justify recommending any change of oral contraceptive

practice. It would be wise to emphasise the general advantage of stopping smoking."

2. Women 30-35 Years.

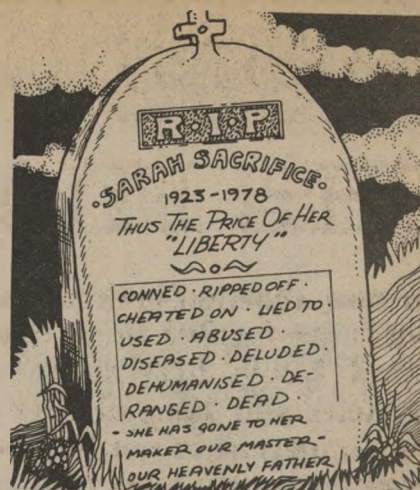
"Some women over 30 years ought to reconsider their use of oral contraceptives (if they) have used oral contraceptives continuously for more than five years and if they are cigarette smokers."

3. Women over 35.

"It would be wise for all oral contraceptive users over 35 years of age to reconsider their method of contraception."

Some have attempted to cast doubt on the findings about death risks from circulatory disease by arguing that estrogen doses in Pills have dropped since the study started eight years ago, but Valerie Beral, principal author of the Royal College of General Practitioners study has confirmed that most of the women who died were on low-dose estrogen pills. Furthermore other studies support this evidence having found that estrogen dosage is irrelevant. Interestingly, the RCGP's data strongly suggest that progesterone must also be suspected as a cause of thrombosis. Remember the Depo Provera controversy which briefly raged in Auckland newspapers last year after Sue Neal petitioned the Queen to have that drug looked at again? She got a very patronising dressing down from National Women's Prof. Mont Liggins for suggesting that Depo Provera might be inappropriate for women with clotting problems. "I wonder whether she got her hormones mixed", he said, "There's no known association between Depo Provera and clotting problems, indeed where women have such problems we are likely to turn to a hormone of the Depo Provera type." 7

The medical profession will never recognise what women say about what is happening to them — medical studies often only verify what women have already seen happening on their bodies. Yet when we complain to our doctors of side-effects we are treated as neurotic hypochondriacs and fobbed off with paternalistic platitudes. Many women have instinctively felt uneasy and repelled by the idea of having hormones permanently circulating around their bodies, or of having a foreign body lodged in their uterus. If they have resisted this and tried other less harmful means of



contraception or used none, they are labelled as irresponsible, careless and unintelligent and their fears dismissed with such irrelevant statements as "You're more likely to get run over in the street" or "It's better than being pregnant." These studies show that such statements are lies designed to quell the very realistic fears of women about what they are expected to do to their bodies in the name of "responsibility".

Although this new information is disturbing New Zealand women have very little choice about changing to safer yet less harmful methods of contraception. Without the backup of abortion most of us will be forced to continue with the surer methods of contraception even though it is not best for our health.

Sandra Coney

Footnotes:

1. The Medical Letter on Drugs and Therapeutics, V. 18, No. 16, July 30, 1976.
2. Martinex-Manautou, J. et al. "Endometrial morphology in women exposed to uterine systems releasing progesterone." American Journal of Obstetrics and Gynaecology, V. 121, No. 2, Jan 15, 1975, p 175-9.
3. Angela Phillips "Progestasert: Worth Worrying About" in Spare Rib, No. 67, February 1978, p.13.
4. Family Planning Perspectives, Volume 8, Number 5, September/October 1976, p241-245.
5. Jill Rakusen "The Pill . . . as bad as we thought", Spare Rib, No. 67, February 1978, p.44-45.
6. Dr Malcolm Potts, leaflet.
7. Auckland Star, September 3, 1977.

For further material on Progestasert see "Sister Courage", October 1976 and "Spare Rib" February 1978.

WOMEN AND WOOD

Do your capable hands become all thumbs when presented with a hammer and saw? Are you helpless when it comes to fixing a broken window frame or making a coffee table? Here's a chance to learn to approach such daunting situations with confidence and expertise.

Sue Becroft is a furniture maker and a feminist. She designs and builds individual pieces of furniture in a workshop she shares with three others in Parnell. Mostly Sue works to order using exotic timbers such as mahogany, kwila, island kauri and sometimes oak. She produces beautifully finished

tables, chairs, cabinets and shelves.

Recently Sue has got really excited with the idea of introducing other women to woodwork. She is very keen to open her workroom to other women who would like the opportunity to work with wood in a non-threatening environment. "In this way women will gain confidence in handling tools and machinery in a supportive environment. They may also come to know the sensuous qualities inherent in timber."

The costs of running such a workshop are high — \$610 per month in overheads alone. Normally these expenses would be shared with other members of the workroom. In order to keep the workshop free for the Women's Workshops, Sue must pay all the expenses. This means she must charge enough to cover these expenses and keep herself alive.

Workshops of varying lengths are planned by Sue from April through to June. Even if you've never lifted a hammer before, this is your chance to learn to fix or make a shelf — a toybox, a coffee table — you name it! The Workshops are restricted to a maximum of six women and you will find them advertised in this issue of Broadsheet. Women who are really keen but have difficulty meeting the cost should contact Sue anyway — something might be able to be arranged. Here is your chance to work with wood with Sue's expert assistance. Charges are worked out on the basis of three women. If more women attend charges can be lowered accordingly.

Sue first became interested in women's liberation while working in the United States in 1970. She tried to get a Consciousness Raising group going at that time. The group ran into difficulties, however. Sue felt this was because the group lacked direction and because they had difficulty finding a place to meet where they weren't bothered by men.

Now Sue is a member of a C.R. group meeting regularly in Auckland. It's the same group we belong to, and that's how we have come to know Sue pretty well. Sue says: "Now that I have the



Sue Becroft — furniture maker

Photo: Glenys Parry

feeling that I've proved myself in one area (furniture making) I have more energy to put into feminist activities. I want to extend myself in this direction."

Sue certainly has had expert training for her craft. Although Sue was born in New Zealand she moved with her family to Australia at the age of seven. Then on to the United States to Philadelphia where she attended Drexel University. She graduated Bachelor of Science in Interior Design.

During a period working as a colour and design consultant she developed an interest in furniture making. This interest eventually led to her attending the London College of Furniture where she received a Diploma in Furniture Production and Design in 1974 with First Class Honours. Sue went on to do research work at the college including designing special furniture and aids for the disabled. In 1975 Sue returned to New Zealand and joined the Parnell workshop.

Sue has travelled a lot. She enjoyed moving about and for a long time established a pattern of working nine months of the year and travelling for three months over the summer. Sue has hitchhiked a great deal in Finland and Norway and bicycled alone around France. She starts getting itchy feet at the beginning of summer. This summer was spent tramping on Stewart Island with friends from U.S.A. However, now that she is self employed and has heavy commitments at the workshop Sue has had to shorten her holidays a little.

In Auckland, Sue goes everywhere by bike. She is a dedicated cyclist and what with that, the tramping and the physical labour involved in furniture making it's no surprise that Sue is very fit! Sue has more than enough energy to ensure that her Workshops will be a worthwhile experience for you.

Dale Hunter
with the help from other C.R. members.

AUSTRALIAN WOMEN

Geraldine McDonald has just returned from a visit to Australia. She reports on government action on women's issues and particularly child care.

"Australia is a federal country with both a Commonwealth Government and governments in each state; therefore women have a more difficult time getting general agreement on matters affecting them than we do in New Zealand."

This was the impression of the Australian women's movement that Dr Geraldine McDonald, a member of the Committee on Women, brought home after visiting the country.

Dr McDonald went to Australia to attend the 48th Congress of the Australian and New Zealand Association for the Advancement of Science. While she was there she took the opportunity to contact various women's groups.

Her first impression of the position of Australian women was at the education section of the conference.

"One of the things that struck me was that over the five days only on one occasion did a woman address the main session, and then only to reply to the main speaker. That gives you an indication of how prominent women are in education.

"Yet women make up half of the customers of the schools and probably a larger proportion of the teaching force.

"I did find out later that there were women in other sections of the congress who had done research into matters such as sex-stereotypes, the position of women in Australian society and the position of women in the teaching service, but they did not happen to be in my section of the conference", Dr McDonald said. "In my section of the conference we were presented with a Who's Who in Australian Education and they all, with one exception I have just mentioned, happened to be male."



The Australians do not yet have a government advisory committee such as the Committee on Women; but a working party recently reported to the Prime Minister on how such a Women's Advisory Committee should be set up and what its functions should be.

"I was invited along to attend a meeting in Melbourne and met members of this working party of the planning group. As I listened to the women talking, I realised that the problems of Australian women are very similar to the ones the Committee on Women is dealing with," Dr McDonald said.

"They were discussing the position of women in employment, and particularly women in the armed forces. There is a Human Rights Bill before Parliament and they were having a look at the implications of the clauses just as the Committee on Women did with the Human Rights Commission Bill. We could have transferred the meeting to Wellington and we would all have been quite at home," she said.

In some areas Australia has made more progress than New Zealand. This is true in the provision of child care

Continued on page 40

1978 WLM CONGRESS

110 women from many parts of New Zealand attended a Women's Liberation Congress at Piha early in February. CHRISTINE DANN makes a brief report and notes that issues raised at the Congress will be discussed in Broadsheet in the future.

The Women's Liberation Congress, Piha, February 1978 . . . what can one say? Plain facts — one hundred plus women reading papers, discussing theories, sharing ideas, exploding with feelings, listening carefully, shouting carelessly, singing and dancing . . . How did it all come to be?

Some Auckland women felt that 1977 was a crisis year for women and the Women's Liberation Movement, with attacks on women by the government and a lack of direction within the Movement itself. They formed a collective to organise a congress where the key issues confronting the Women's Liberation Movement in New Zealand today could be discussed. It was decided to structure the congress differently from previous radical feminist gatherings, in an attempt to make it easier to get down to the business of thrashing out political theory. Therefore papers on key issues

were prepared and circulated in advance, with all the participants being given a chance to write commentary papers. The papers and the issues they raised were discussed both in small groups and by the Congress as a whole. How did it all work out?

On Friday night discussion of the first paper, on the history of New Zealand women and the New Zealand family, quickly developed into an attempt to define the word "heterosexism" — a foretaste of arguments to come. On Saturday Marxism, anarchism and feminism were under consideration, although the discussion seemed to be more about the personal reaction people had to these labels than the theories themselves. A heated debate on class in the women's movement developed.

Saturday night saw a "lecture" on race and feminism. This was the first time this tricky topic had been so deliberately broached at a Women's

Liberation gathering in New Zealand and the differences between this session and the previous ones were remarked on. Some pakeha women said they were pleased just to listen to the Maori women, because they felt they needed to learn more, but others questioned the sudden increase in politeness and respect which these speakers were accorded.

By Sunday morning, when the state of the WLM today was scheduled for discussion, some of the small groups had begun to talk about the need for listening carefully to each other and accepting diversity, and these "process" considerations were brought up in the big group discussion. Women from the Socialist Action League had prepared a paper on socialism and feminism and the full Congress spent a lot of its discussion time on this topic, considering whether the S.A.L. description of the origins and nature of the oppression of women was correct e.g. whether the oppression of women was dependent on class society.

Cultural feminism and lesbian feminism were discussed on Sunday night, in a long and exhausting session which officially broke up at midnight. These topics raised issues of such complexity that any brief comment runs the risk of being simplistic. Much thinking and writing remains to be done, and we know that several women intend to write more on these subjects. However, the difficulties of separating (and integrating) the personal and the political seemed very relevant to both these discussions.

Monday morning was scheduled for discussion of the organisation of the Women's Liberation Movement — unfortunately, in our opinion, most of the time was spent discussing the organisation of the Socialist Action League and the relationship its female members have with the WLM. This 'arose out of debate on what radical feminists could/should do to organise the abortion struggle, and the role the S.A.L. has played in this so far.



Photo: Rhonda Bosworth

Women's Liberation Congress, Piha

Monday afternoon — and suddenly it all began to wind to a close. What did we achieve, what did we learn? It's hard to write a report when we realise that each of us experienced the Congress in her own different way.

In this very bald report we can state that the concept of heterosexism and the ideas of lesbian feminism were hotly debated, and that the ideas of the Socialist Action League women were also given a lot of consideration. Both the lesbian feminists and the S.A.L. women were regarded by some other women at the Congress as "party liners", and on Monday morning a group of about 35 women who called themselves "non-aligned radical feminists" met to consider how they differed from these two "blocs". What "camps" women aligned themselves with was quite an issue at the Congress, and certainly many women who did not belong in either of the major camps seemed to experience feelings of exclusion at times, although in our opinion it is useful to distinguish between the internal dynamics of the two "blocs", with the lesbian feminists being engaged in working out their politics in their own group which met during the Congress, while the Socialist Action women had gone through this process before arriving and had no need for group meetings during the Congress. However, whatever the internal differences are (and they are many!) the external effect seemed to be similar, and this will no doubt continue to be a contentious issue.

The structure of the Congress was the cause of a great deal of concern for the organising collective (structure being a perennial problem of the W.L.M. it seems) and some aspects of



Photo: Rhondda Bosworth

structure were discussed. However most participants seemed pleased with the structure and the collective intends to write up its experience for the benefit of others. We have reported largely on what happened in the big group sessions, where trends of thought and behaviour tended to show up, but many women have commented that the most successful part of the structure for them was the small groups. These groups contained only about eleven women, and they were randomly chosen and changed each session, so that participants were able to share ideas with as many of the women present as possible.

Issues of great complexity were raised, and often the time needed to properly pursue them was lacking. We all needed time to make personal contact with women from other parts of New Zealand, and to get to know the women from our own areas better too. Time to sing and swim together as well as argue and chat.

The thoughts and ideas which the papers and discussions raised will be circulating for some time to come. Nearly every woman we have spoken to who went to the Congress has expressed a wish to sort out her ideas on paper and/or to develop her thinking further. Some feel it is too early to say what they learnt because they are still "digesting" what went on. However, we thought we'd leave you with a few impressions besides our own:

"Some thorny issues were confronted like the participation of Socialist Action League at such congresses but others, like the attitude of some lesbian feminists to heterosexual feminists, were deliberately avoided even when they were raised for discussion.

My understanding of some women's politics was made clearer by direct contact with them; previous impressions gained through reading what they had

We are offensive?

Our January issue with information on how to get an abortion didn't stay on the bookshelves long in one shop. Christchurch Whitcoulls withdrew the magazine after someone complained that he/she found the sticker attached to the front cover saying "How to get an abortion" offensive. Christchurch press reported the action and later the magazines were replaced minus stickers.

REAL KIWI JOKERS

"Since 1975 is International Women's Year, it can be expected that all political parties will talk a great deal about their "women's policies". Unfortunately most will be little more than window dressing. **National's plans go far beyond this.**" From "Women's Rights a National Cause" 1975 electioneering pamphlet of the National Party.

written or hearing second-hand what they thought I found to be sometimes inaccurate. I realised that some political differences were less than suspected but with others I realised we are worked for diametrically opposed ends."

"My feelings at the Congress ranged from excitement and joy at the sheer energy of so many women coming together to frustration and anger when discussions were circular,

superficial and less than honest.

Three main trends were clearly in evidence: lesbian/cultural feminists, marxist/socialist feminists, and non-aligned radical feminists, and during the congress women were able to identify and relate to the group they most identified with. I found this recognition of differences useful and hope that there will be future meetings of like-minded women".

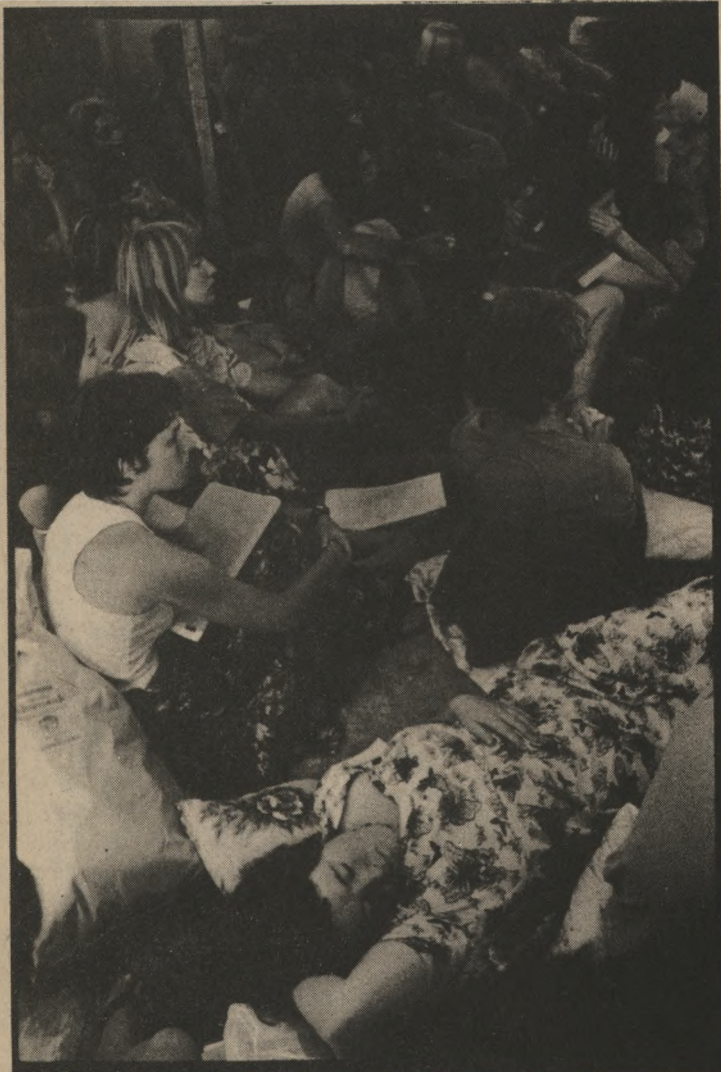


Photo: Rhonda Bosworth

"One of the most important things for me was that by the end of the weekend there was an awareness of the need for tolerance of the different ways in which feminists work, the different priorities which feminists have. I think that's good — calls for unity are pointless. I was unhappy that there was not enough time for developing abortion strategy. I feel we need another weekend just for that alone — soon. The Congress helped me to clarify my attitudes to the different political ideologies in terms of being a radical feminist. I found which "labels" fitted me — socialist, racist, heterosexual and middle class!"

"I have been depressed about the state of the Movement for some time. Now I'm beginning to know why, and I call that progress".

"We were concerned with working out broad outlines of ideology from our theories and experience rather than planning action or discussing details. . . . The various groupings within the Movement clearly emerged in relation to the central theories . . . The problem of informal elitism stood out the more clearly because we were working within a tighter structure".

"Mentally, physically, emotionally and politically exhausting! I found it the most positive, stimulating experience I've had for a long time, and it reinforces my previous impression that the Women's Liberation Movement in New Zealand is far from dead".

Correction: The author of the words of the song *Don't Be Too Polite Girls*, published in the September, 1977 issue of Broadsheet is Glen Tomasetti of Melbourne, Australia. We are sorry we were unable to credit Glen in the September issue.



Karin Wakely's Craft Room

49 Hackett st Ponsonby ph. 768-933 after 11

Fem create's

hand weaving, pottery etc
Visit my working studio—
(not a shop)—hours fluid

but not before 11 am, best phone first
or call in if you're passing & you see life

SOS Donations

A donation box is now available at
Sight N' Sound Records, Mayfair Mall,
Queen St, Auckland, (just below
Wyndham St.).

Women in other centres could try and
persuade a local shopkeeper or two to
put a donation box for SOS on their
counters. Contact your local SOS
group and discuss it with them.

One Woman's Life

Life on the land — an alternative for solo mothers.

Reading of "lives of country women" and the problem of single mothers "Budgeting on the Breadline" I would like to add a new dimension — that of solo mothers "Living in the country on the Domestic Purposes Benefit"

The most immediate, realistic and positive action a solo mother, providing for her family on the DPB, can take to alleviate the problems caused by insufficient money is to change her lifestyle — to look imaginatively into ways and means of providing a better, even enchanting, new life.

Solo mothers living in New Zealand's rural towns and countryside are often better off financially than other "back-to-the-landers" and people living similar subsistence lifestyles.

Why pay high rent for a home in town when you can rent one for half that amount in the country — and what are we paying for — a constricted, highly

structured environment to drive mum and the children mad for lack of spiritual and physical freedom to move and grow.

This is the way life can be and is for solo mothers like myself and others residing in the country. With 41 dollars a week to spend (I have been receiving the Emergency Unemployment rate while awaiting my maintenance case) I allot 15 dollars towards groceries and household goods — we eat well — home-grown vegetables, milk from goats, eggs from hens fed mainly on scraps, shellfish from a nearby beach. I pay one dollar a week land rent; the house I live in I helped to build. No money is used for power sources — cooking, hot water and heating are all fuelled from surrounding free resources. I have managed to save and buy a van for transport to visit friends and for shopping trips to the nearest town 25 miles away. I have enough money left over to provide for clothing, books, toys, materials for crafts, entertainments and holidays away.



This photograph is of myself adding a wood beam for the loft of the house I inhabit.

It is possible to reduce one's dependence on the money economy quite simply while gaining enjoyment and positive value from new skills acquired to help support oneself. Carpentry skills, learned on the job make it possible for a woman to build her own home — there are fewer building codes to cope with in rural areas; building materials are often cheaper and can be found for nix.

To achieve a measure of self-sufficiency one has to be prepared to critically examine one's own consumer needs — are they related to real survival or are they habits unquestioningly regarded as 'rights' to a certain standard of living — if you don't want to be ripped off by our consumer economy, try doing without it.

Liberation is a many-pointed star; self-sufficiency is a way of freeing oneself, of giving a woman a sense of joy and a rewarding way of life.

Rachel Tarver
Westport.



A



B

Looking for a feminist card?

Broadsheet now has two.

You can order either or both these cards from Broadsheet. Each pack of ten cards comes with ten envelopes.

I would like pack of Card A

My Name

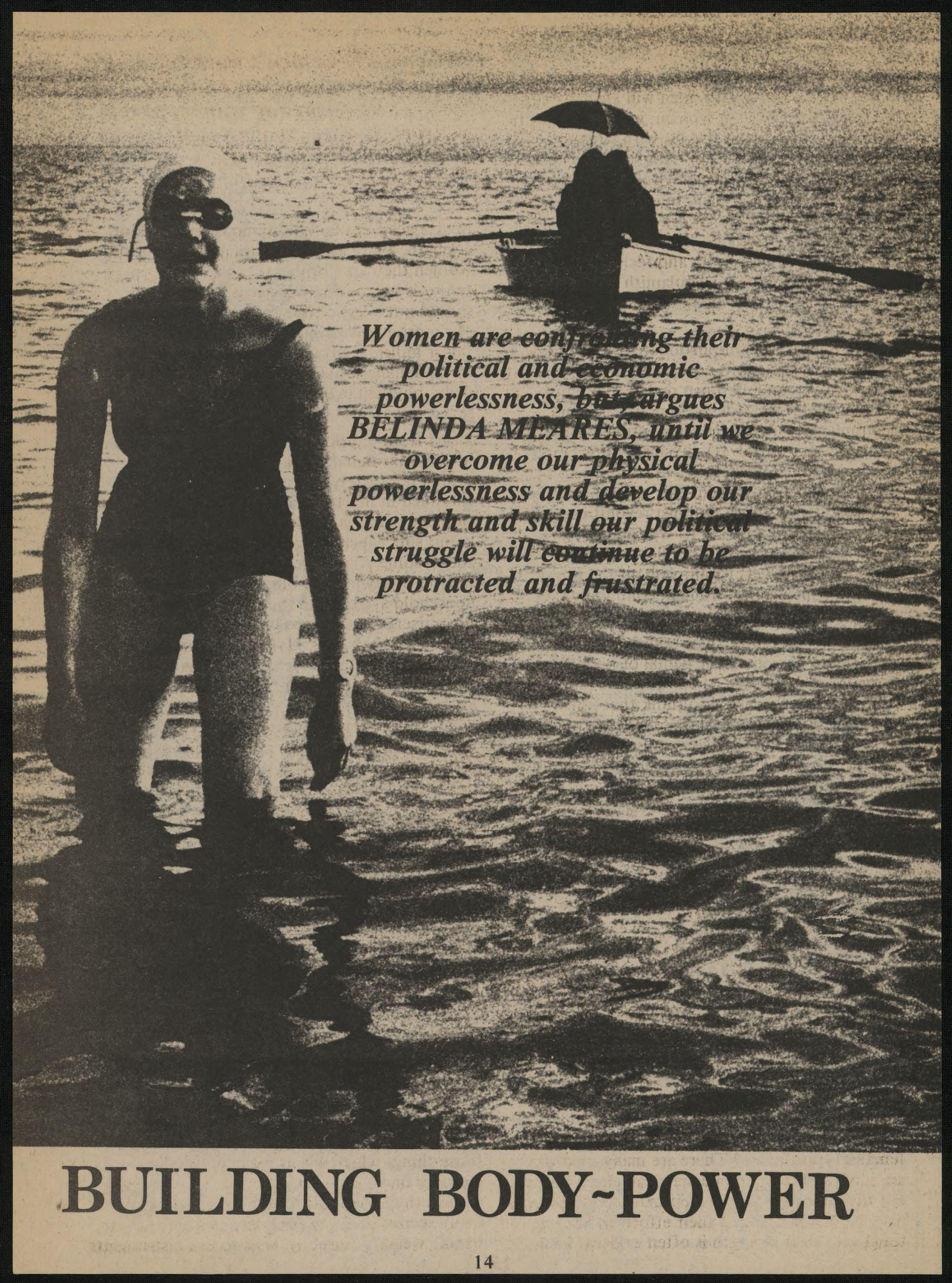
I would like pack of Card B

Address

I would like pack of Cards A & B

I enclose for a total of

..... packs at \$2 each.

A black and white photograph of a woman in a swimsuit and sunglasses standing in shallow water, with a small boat and two people in the background.

*Women are confronting their
political and economic
powerlessness, but argues
BELINDA MEARES, until we
overcome our physical
powerlessness and develop our
strength and skill our political
struggle will continue to be
protracted and frustrated.*

BUILDING BODY-POWER

Sexism and the Psychology of Strength and Skill

Physical power is a psychological advantage. As possessors of this power, men will always hold themselves superior to women, because basically they have more survival skills with which to handle the physical world. This still holds true, despite our technological environment, and despite the fact that many in our western society (male or female) do not work physically. For so long as men are smug in the knowledge that their sex is the more physically and technically able, women cannot wait for Shulamith Firestone's cybernetic age to put them on an equal basis with men.

The problem of disproportionate physical power between the sexes will not quietly evaporate, but must be overcome. Women realise they must confront their powerlessness politically and economically, but while we are still considered (and consider ourselves) physically inferior to men, our political struggle will continue to be protracted and frustrated. Our physical status is an integral part of the feminist revolution, and we must fight to develop it. We can only go a short way relying on our intellectual, intuitive and spiritual powers to supplement the physical strength which we, as women, commonly lack.

Social conditioning has deprived women of the use and enjoyment of their bodies in numerous ways. Most obvious is the denial of female sexuality and our lack of control over reproduction. However, it is a mistake to think that by achieving multiple orgasms and legal abortions we will liberate our bodies totally. Women need to become stronger physically and more technically adept; otherwise we shall continue to rely on men, directly or indirectly, and their sense of superiority will linger on and on. Any political advances women may win will be set back by this basic disparity between the respective capabilities of the two sexes. Social reality is still bound up with the primitive notion of survival skills, and reinforced often by the economic advantages of self-sufficiency. Physical weakness and inefficiency leads to dependence and powerlessness; what can our feminist energies do to stop and reverse this centuries-old trend in womankind?

Generally women are smaller than men, and must inevitably lack the power sheer bulk brings with it. However, this is no excuse to be powerless. How much stronger would we be, if, born as male children, we were yet as slight in build as females typically are? There are many men who are small and slight; some are weak along with it, but the majority, due to their male conditioning, have probably doubled their efforts to become tough and their strength is often evident. Lack

Generally women's work involves a lot of sitting and standing around . . . by relegating women to this sort of work, society exploits our bodies every bit as much as it does sexually.

of size need not be synonymous with lack of strength. Many arguments are used to convince women they are born weaker than men, that frailty is inherent in our genes, and that we should not exert ourselves for fear of damaging our reproductive systems. Most of us now believe this is bullshit, but from this positive rejection of the female "role" we must work hard in our daily, physical lives to overcome this perverted sexist reasoning.

Apart from physical strength, technical know-how is considered second nature to men (or should be, society assumes) yet it is often shrouded in mystique and incomprehension for women. Let us consider the implications for us, in our super-technological lifestyle. Women are adept, some very skilled, in the traditional spheres of sewing, cooking, attending to intricate household affairs, and this ability spills over into the nursery, typing, teaching roles most women choose for their jobs. However, when considering our part in the external, undefined world (where men predominate and about which women are encouraged to learn nothing), suddenly it seems we become confused, even helpless. And why? Simply because we are ignorant and underconfident. Why does a switch choose to click off in our heads when we have to fix things, start a tricky motor, handle tools, use our own practical ingenuity? Why are we too often left standing embarrassed and awkward, reduced to turning to the nearest male for help? (and if we pay for his services, he could rip us off, if he knows we have no resources of our own to check up on him). Our morale and confidence are being continuously undermined by such occurrences. Seeking help is not a degrading action in itself, but degrading in view of the sexist attitudes it usually reinforces (consciously or unconsciously) when women seek male help.

With a combination of strength and skill, coping with all aspects of practical life becomes much simpler. What we may lack in strength can often be made up for by skill or technique. If men appear to have a near magical ability to do all those things which we, as women, usually consider immensely difficult, it is because they possess the hallowed KNACK. There are so many secrets about making things work, how to handle weights correctly, how to use instruments

and so forth, and men have seldom let us in on them. Obviously we have centuries of catching up to do which concerns our collective lives as women, and individually since the day we were born female. The process of learning physical self-sufficiency is hard and frustrating for women; it goes totally against our conditioning. We can either blunder along by ourselves, learning by the book, or by trial and error, or we can swallow our new found pride and look for assistance (which usually has to come from men). The most important thing, is not to ask simply, but to ask to be *shown how*, and to stop the helper short before he (or she) has done the whole job for us. Passivity in women is a scourge, and there will be no progress unless we attempt things ourselves. Even if we are aware of our passive tendencies, they are so ingrained that it takes continuous positive energy to fight them. It is not enough to be a dilettante and try something once, and then to leave the task in hand to the man whose assumed job it was before. Small wonder that the basic mechanics affecting our lives are still controlled by men. As women, we have been trained to stand back, to be the handmaidens; to pass the tools but never use them, to watch men labour and test themselves, but to seldom do so ourselves, to accept that men should do things for us, but seldom say "let me do that!" Do we remember the physical and mechanical labour done by slave women, peasant women, women in mines and factories, women during wartime? No-one could claim they were not strong and skilled (as well as exploited). Why do we modern women seem so feeble then by comparison?

Another of the secrets men have kept from us concerns the pleasure element involved in physical work, real work. The type of physical work reserved for women is an apology; mere drudgery and little more. Consider housework, cleaning, laundering, factory work and so on; all automatic, uninspiring and physically unrewarding. Admittedly, much of the labour that men do is also drudgery, and many people consider that work of any kind done for someone else is drudgery, if one has to live by that work. This point taken, the best kind of physical

Seeking help is not a degrading action in itself, but degrading in view of the sexist attitudes it usually reinforces when women seek male help.

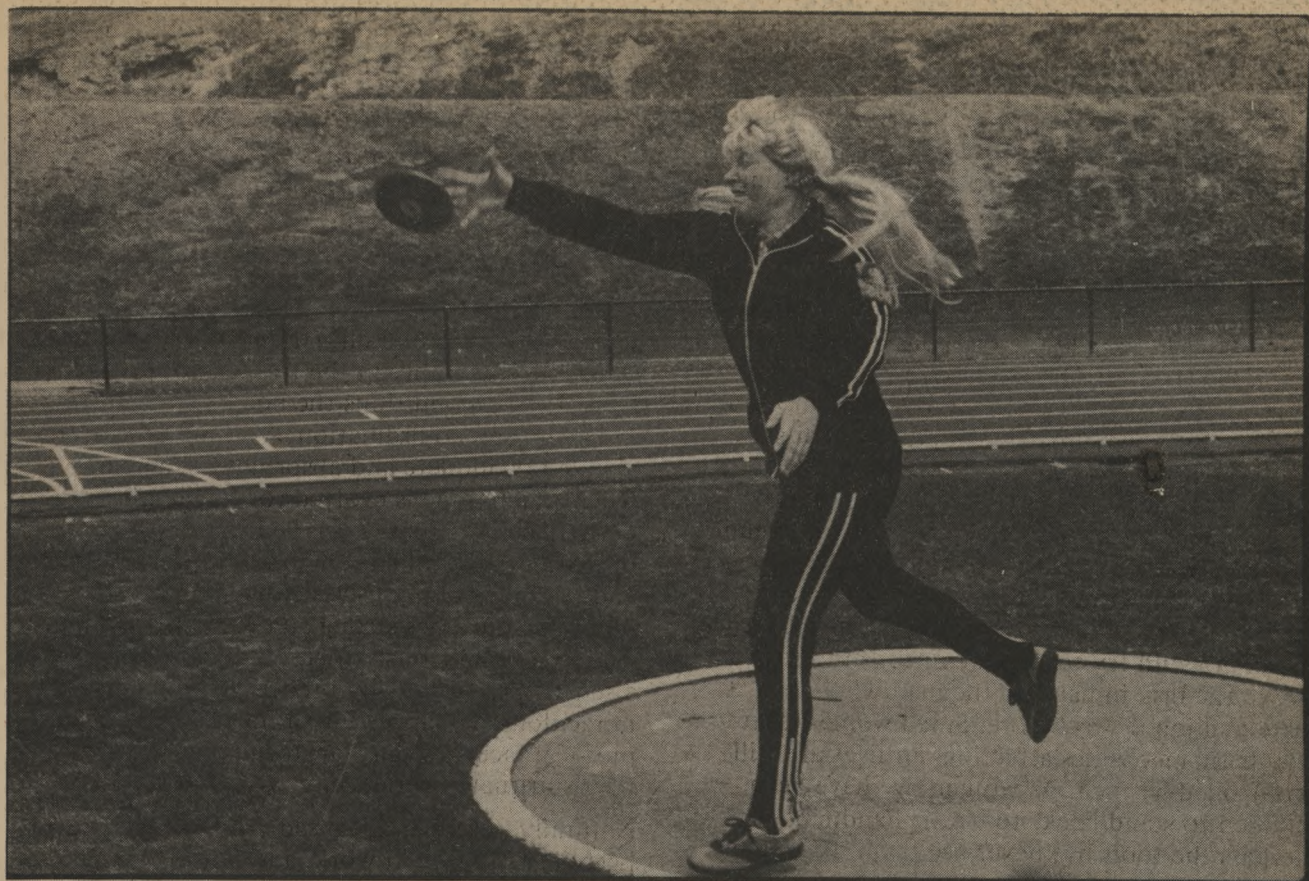
Brain-power is an insufficient lever to total liberation, because women's body-power has been so sadly neglected.

work is done for oneself, (friends, family – whatever) and preferably in the freedom of outdoors. In such ideal conditions the body has room to move in total co-ordination; working physically can be as complete and absorbing as dancing. Once a technique is evolved (or taught) for a particular task, energy can be used wisely and movement controlled. The body moves gracefully and rhythmically, muscles expand and relax, breathing becomes strong and regular, the mind can be simultaneously focused on the job yet in a sense free (from daily preoccupations). This miraculous synchronizing of mental and physical faculties can transform working into a near-spiritual experience.

Naturally, this is an idealised vision of how to best use the body in work, and not often realised; we can, however go a long way towards it. The essence of physical work is that it should be challenging, and not merely repetitious (although repetition allows skill to accumulate). Rewarding work is work which requires strength and skill, it is a job to start and see through to the finish, with something concrete to see at the end; it is labour which has tested body and mind and satisfied both.

How much of a "typical" woman's work could be defined like this? If her body is involved, then very often the job requires no skill whatsoever. Housework is the obvious example; a task which, when repeated day after day, becomes so boring and soul-destroying it is an insult to the woman it is forced upon. If, on the other hand, the job involves skill, it is probably not combined with integrated physical effort; such examples could include cooking, sewing, childrearing, typing. Much of women's activity disregards the best interests of the body, and generally women's work involves a lot of sitting and standing around, interspersed with sporadic fits of frenetic activity. This is not a healthy way to live; by relegating women to this sort of work, society exploits our bodies every bit as much as it does sexually. We are expected to show our bodies off, but not to become aware of their use as strong and integrated instruments of our own survival.

The majority of women still work in isolation in their homes, another factor contributing to our



The woman in these photos (shown above throwing the discus; below, bending steel for the foundations of a house) is Lynne Hope. In the next issue you can read more about Lynne. Photos by Sharyn Black.

***Physical weakness and inefficiency
leads to dependence and
powerlessness.***

ignorance and lack of confidence. In the male work situation, men frequently work in outdoor gangs, or in assembly line teams. Although performing in a framework of job hierarchy and dictated to by the needs of capitalism, men generally adopt co-operative ways of working. Collective labour is effective in achieving more complicated tasks and can be extending for the individual by the example of others as well as satisfying social needs. Men (most men) seem to have been happily conditioned to be self-reliant; to be able to work on their own, or to work effectively as part of a team. Houses get built by individuals, or by collective effort. Have women in Western society had the opportunity to share work and grow in their work situations in the way that men have (when they are lucky)? Again, we can cite women from different cultures or times (peasant women, women during the war, etc.), but for women in our own suburban environment, isolation seems the norm. When women do get together it is seldom to work but to socialise. There is nothing wrong in socialising, but too much sumpathising and commiserating about "womens lot" can only lead to confirming our low expectations of ourselves and reinforce the vicious cycle of assumed dependency on men.

Our society, modern on the surface, or "civilised" (whichever term you prefer) is still wedded to some crude principles. Freud evolved the theory of "penis envy". He saw the penis as the symbol of male power and domination, then surmised that females envied it. This notion is laughable; women never had penises, so are not likely to bewail the lack of them. If we need such a psychological concept of power-envy, then perhaps "muscle-envy" would be a more appropriate term, for women do possess muscles in much the same places as men. Muscle-power in males is developed early on in life; it is taken for granted. Boys are expected to be stronger and to imitate the way their fathers work and play sport, much more than is true of girls. Consequently, most men become endowed with active, healthy bodies, as well as healthy doses of self-assurance when compared to their female counterparts. (This assurance soon turns sick when translated into the sexist he-man cult which prevails at adolescence). Admittedly, during this century, women have won a lot of intellectual freedom; even some assurance in this field, which men have had to learn to accept and respect (if mostly in token ways). However, brain-power is an insufficient lever

to total liberation, because women's body-power has been so sadly neglected. Only when we achieve the comparative strength and practical knowledge of men will we be in a position to take control of our own lives when working within and confronting our physical environment.

As a class, women are almost totally controlled by men, because as well as making laws, passing judgements and paying bills, men twiddle knobs, pull ropes, drive bulldozers and so on. Political and economic domination is simply an extension of the power structure of our physical reality, which is inescapable. We cannot expect to change one or other facet of sexist society without struggling against the most fundamental one of all. This realisation of the importance of physical power is essential to the feminist revolution, but I consider it has not received nearly enough practical attention. It is all very well to theorise about politics, to demonstrate and hold conferences. It is all very well to develop an alternative, esoteric women's culture. It is all very well to learn about feminist health and therapy. I support and participate in these activities. But what would we do if the crunch really came? If tomorrow every male was swept off the face of the earth and we were left to run the show; what then? It is true that we do not need to produce and maintain a fraction of the rubbish accumulated in this excessively wasteful capitalist society; however mere living requires certain necessities to be met, long and short term, in whatever society we live.

When feminist theory discusses women taking control over their own lives it should be interpreted on every level, and not just on the ones which suit us. It is inconsistent to speak of sexual, political and spiritual liberation without considering the principles of physical liberation. It is a start, a personal start with implications for every other sphere of "liberation" to learn how to fix a car, to knock up a hen house, to swing an axe properly, to paint a house outside as well as in, to drive a lorry as well as a car, to work hard at a demanding job all day (not give up after a couple of hours) to tie knots which stay tied, to climb a ladder and fix the roof, to carry on at a job when it starts to rain (or hails? or snows?). To be a practising feminist means tackling all those things in our day-to-day reality which women are not expected or encouraged to attempt. It does not mean developing a fetish about work, but learning to use our working achievements as the morale-booster the movement needs. Power, woman-power, is precious and we have far too little of it as yet.

ABORTION LIFTOUT

How to get an abortion:

Desperate Women Take Desperate Measures . . .

It is a beautiful Saturday afternoon, and Alison, John and I are off for an afternoon ramble in the Waitakeres. But it is not the ordinary weekend walk I always enjoy. We walk slowly, and my eyes flick back and forth, searching, searching . . . We take little of our accustomed pleasure in the beautiful plants of the bush — we are looking for one of the ugliest, roughest plants to be found there — the bush lawyer, which Alison has heard that Maori women used as an abortifacient. At last we find a large, healthy plant, and Alison hacks at it with relief, not caring that the vicious clawed spines tear at her hands. Then

we go on to find a flax bush, for the flax root completes the abortion potion.

I urge Alison to consult herbals for appropriate dosages before she experiments on herself. She goes to the Public Library for more information — and finds that only two of the Central Library's 42 books on herbs are in stock at present. So she devises her own dosage, and takes it to supplement the tampons soaked in eucalyptus oil she has been inserting every two hours for the past week or so. In the chemist shops of Ponsonby and Grey Lynn, eucalyptus oil is getting hard to buy. One chemist asks John what

he does with it, because there has been a run on it lately.

Alison has also tried Vitamin C, but at least she didn't pay \$10 for one tablet, as certain "entrepreneurs" have been charging unsuspecting and obviously desperate Island women.

It is January, 1978 — and New Zealand's new abortion law has been in effect for one month. What can a New Zealand woman do to ensure that she gets an abortion when she needs one, and gets rid of the law which prevents her from having a safe, early, legal abortion in her own country?

Where to go for a safe abortion (if you can afford it)

At present the surest (and most expensive) way to get the safe, early abortion that you need is to go to Australia. Throughout New Zealand Branches of S.O.S. (Sisters Overseas Service) are being set up. This organisation is staffed by women, mostly volunteers, who will tell you everything you need to know about getting an abortion in Australia, and give you assistance as necessary. *All the SOS branches urgently need money to enable them to carry on this vital work — if you do not have money to spare yourself, perhaps you know people who could be encouraged to contribute to such an important cause.*

An Australian abortion will cost you approximately \$500, inclusive of the return air fare, the operation, taxi fares, overnight accommodation and medication, but excluding pre-operative medical tests, which can be done at no expense by Family Planning in New Zealand, if the appropriate arrangements are made.

Some SOS branches are referring women to Arncliffe, Sydney's largest abortion clinic, which does abortions up to 20 weeks under general anaesthetic. There is also a feminist abortion referral service in Sydney Control, which refers women to smaller women-run clinics which Control prefers to use, being critical of some aspects of the Arncliffe service. If you are interested in this feminist alternative, then write to Control, Rm 3, 1st Floor, Dymocks Building, 424 George St., Sydney, 2000. Or ring Sydney 231 2777. You may think that you can't possibly raise the \$500 needed for a safe Australian abortion.

We hope that our description of the hazards of the New Zealand alternatives will encourage you to try. The SOS volunteers have found that most women have been able to find sympathetic friends, relatives and even banks who will make them a loan, and SOS itself is able to provide some limited assistance.

SOS Contacts

Auckland — ph: 766-386
Mon-Fri 9-5.

Hamilton — ph: 82-063 (24 hours).

Tauranga — see classified ads, local newspaper.

Napier — ph: 446-414.

New Plymouth — ph: 84-937.

Gisborne — ph: 5920.

Wanganui — ph: 42-291.

Palmerston North — ph: 87-743.

Wellington — ph: 724-709 (24 hours)

Nelson — ph: 31-834 or 83-025 or 88-082 or 81-574.

Christchurch — ph: 796-970
(24 hours).

Dunedin — contact Andree or Edith,
165 Maitland St., Dunedin.

The Unpleasant Alternatives

You may have considered trying a "home remedy" or seeking out a back street abortionist. In this section we discuss the various "home remedies" and tell you what to watch out for with a back street abortion. We do *not* recommend any of these procedures but we think that women should be aware of what they entail and what the dangers are.

"Medicines"

1. **Alcohol** — is most commonly resorted to (the classic "gin and hot bath" technique). Alcohol is a poison and in large doses can make you extremely ill. It is also very unlikely to trigger a miscarriage. There is also the danger that after drinking too much you may begin to vomit and be unable to prevent yourself from choking to death. In 1966 Aerial Hopkins, a New Zealand school girl who was trying to abort herself, died in this way.

2. **Other poisons — such as Epsom Salts, quinine, etc.,** have similar dangers to alcohol and are also unlikely to work.

3. **Herbs** — the effectiveness of various herbs, especially New Zealand natives, in causing abortion is still being investigated. We recommend that you do not use herbs without expert guidance, and that you be prepared to resort to Australia.

4. **Vitamin C** — several New Zealand women claim success with this method. The procedure is as follows:

Take 600 mg of Vitamin C twice a day for 5 days at time period is due. (i.e. at the time of the period due either immediately after unprotected intercourse or the month after a missed period. Sometimes taking the Vitamin C on the second or third day of the period if it is late will work).

The Vitamin C method has some minor unpleasant side-effects (e.g. diarrhoea, frequent urination) but women who have used it report no

major ill effects. However, it does not always work and you must be alert to signs of continuing pregnancy and be prepared to go to Australia. Watch for signs of dehydration.

"Operations"

1. **Self-induced abortions with "instruments"** — a more effective (and usually more painful and dangerous) way to induce abortion is to insert something into the uterus, scrape or suck the contents out, or to force them to come out of their own accord. This is what doctors do. But doctors do (or should) have experience in the operation and perform it with the appropriate equipment, under sterile conditions, and with anaesthesia. Women attempting to abort themselves will fulfill none of these conditions. Women have traditionally tried to abort themselves by inserting thin sharp objects into the uterus. This procedure is fraught with dangers. It is often difficult to find the cervical os, the opening from the vagina to the uterus, through which the instrument must pass. The uterus will be softer than usual due to pregnancy and there are very real dangers of perforation (making a hole) of the cervix and/or uterus and internal bleeding. Such accidents require hospitalisation if the woman is to survive. The uterus may have to be removed, thus making the woman sterile. Other permanent damage may be done by attempts at self-induced abortion, for example, from infections introduced by non-sterile instruments. Most women who do it thoroughly require hospitalisation. Hospital staff are frequently unsympathetic in their treatment of such "miscarriages", despite the suffering of the woman concerned, and may even try and save the foetus.

2. **"Douches"** — some women attempt to abort themselves by forcing soap solution, caustic soda or other harsh liquids into the uterus. Again, this can be very dangerous and painful and lead to permanent damage.

3. **"Extraction"** — (a) never

attempt to suck out the contents of the uterus using a vacuum cleaner or similar. Vacuum techniques are for the experienced using the correct equipment *only*. You could introduce air into your bloodstream and die a rapid and very painful death. Also a vacuum cleaner inserted in the vagina could suck out the uterus altogether, causing death.

(b) Some women and doctors in New Zealand are familiar with a technique known as **menstrual extraction**. This involves removing the contents of the uterus very early in the pregnancy i.e. within one week of missing your period, or 3-4 weeks after conception, before pregnancy can be confirmed. Menstrual extraction is also a vacuum method, although it does not require the machinery which the vacuum aspiration abortion technique does. Consequently it is dangerous for the inexperienced and should not be attempted by anyone who has not been trained in the technique.

Back Street Abortions

What happens? Most back street abortionists attempt to induce a miscarriage by interfering with the foetus in the uterus by introducing a probe or similar object. They may move the probe around inside the woman, remove it, and then tell her to come back if she does not miscarry, or they may insert a probe, leave it in place for a day or two, then remove it. Still others may "inject" soap solution or other harsh fluids. All these methods are dangerous and frequently painful. Some back street abortionists are better than others — they vary from "butchers" to quite skilful ex-nurses and the like. Prices vary too.

We don't know what the back street situation in New Zealand is like at present but suspect that it will take a little while for back street abortionists to become as active as they were ten, twenty and thirty years ago (if the law is not repealed), because while the abortion clinic was open there seemed to be less demand for their services.

We do not recommend paying for a back street abortion if you can possibly raise the money for Australia.

Unfortunately, the law is now so tight that even the most sympathetic doctors, who would once have risked performing a slightly "shady" abortion, are now unable to do so. The penalty for performing an illegal abortion is up to 14 years in prison.

What to expect:

Many methods of illegal abortion (self and backstreet) will not be completed in a short time. In these methods the cervical canal is forced open and sometimes the bag of waters surrounding the foetus is pierced thus causing the uterus to expel the foetus. This is more like a miscarriage than a hospital abortion and it is usual to have bleeding and cramps while this process is going on. But watch out for the danger signs below.

Danger Signs

1. Infection — a temperature over 37.5° centigrade, heavy cramping, nausea and vomiting are all signs of infection. Antibiotics will clear this up in the early stages.

2. Haemorrhage — a heavy flow of blood with large clots. Some bleeding (like a heavy period) is normal for up to a week following an abortion.

3. Incomplete abortion — cramping and haemorrhage and often a foul-smelling vaginal discharge.

What not to do after an abortion:

1. Do not use tampons for 2 weeks.
2. Do not have heterosexual sexual intercourse for 2 weeks minimum.
3. Do not bathe — shower instead.
4. Go to a doctor at the first sign of complications, or to a hospital if symptoms are acute — e.g. haemorrhage.

You may consider taking the "products of conception" — (everything you pass from your uterus) to a sympathetic doctor for analysis and consultation to make sure your "miscarriage" is complete.

Precautions

If your chosen contraceptive method fails, there are two "contraceptive" methods which you can still consider.

1. **The Morning After Pill** — this "pill" (really a course of tablets) should be taken within 72 hours of unprotected intercourse. It consists of a massive dosage of hormones (estrogen) which prevents the fertilised egg from implanting itself in the uterus. The dangers of taking large amounts of estrogen are now being discovered and stressed, so this is not the ideal solution. However, you may prefer it to abortion, so consult your doctor or Family Planning Clinic immediately if you think you might need it.

2. **The I.U.D.** — if you are not already using an I.U.D., you may be able to persuade a doctor to insert one when you suspect pregnancy, which could cause a miscarriage. However, most doctors prefer to insert I.U.D.s during a period, to guard against this possibility. You may find a sympathetic one who doesn't mind being "mistaken". If the I.U.D. does not cause a miscarriage, however, the pregnancy should be terminated by other means, as insertion of the I.U.D. may have damaged the foetus.

So you think you're pregnant (and wish you weren't)

Here's what to do —

1. Go to your doctor or Family Planning Clinic as soon as possible for a pregnancy test (not accurate till 10 days after missed period) and internal examination. If you find that you are pregnant and want to discuss the options open to you, then get in touch with SOS, who can arrange Step 2 (optional).

2. Counselling — if you need help in deciding what to do, want to know about the abortion procedure, would like to know about adoption, the Domestic Purposes Benefit and other alternatives, or have any other worries/problems you would like to discuss, then SOS can find you a counsellor. Do *not* go to the "Pregnancy Help" counselling service which you may see advertised. It is run by the Society for the Protection of the Unborn Child, and will not honestly discuss the abortion option with you.

3. If you are sure that you want an abortion, then you have two alternatives — Australia and New Zealand.

(a) **Australia** — abortion is legal in New South Wales, but you have to pay. So first you must arrange finance, and then consult your nearest SOS, or contact Control in Sydney, about how to get an abortion in Australia, what you need to take, and other arrangements. (See above "Where to go for a safe abortion").

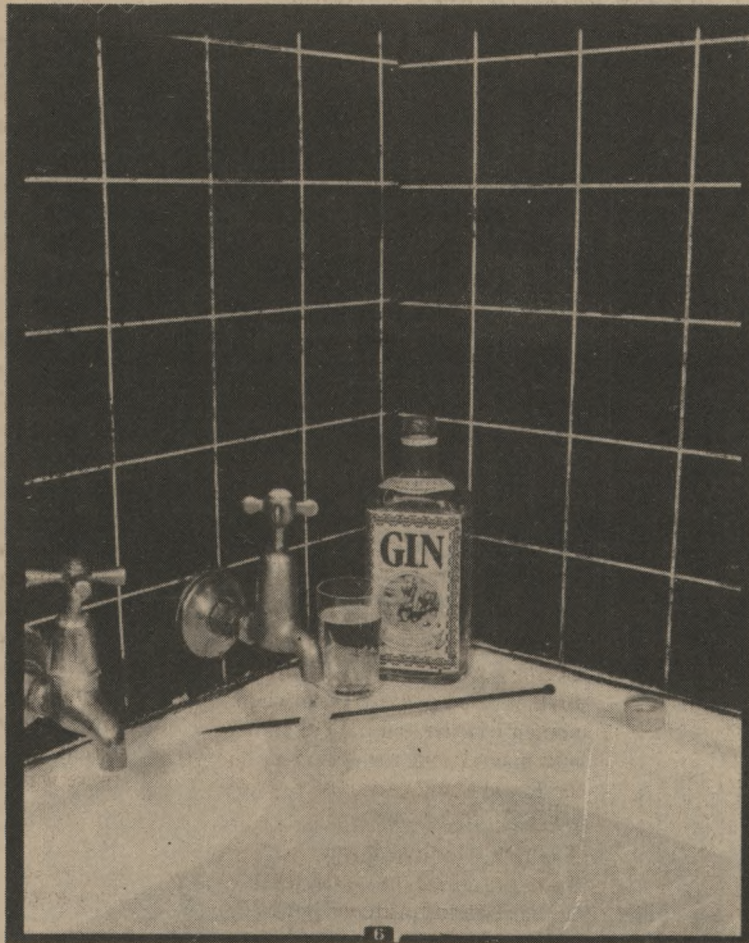
(b) **New Zealand** — Consult a sympathetic doctor (check with your local feminist group for names) or Family Planning Clinic doctor. Ask the doctor what your chances of getting a legal abortion in New Zealand are like. At present public hospitals have different policies on abortion. For example, National Women's in Auckland is not doing any abortions but hospitals elsewhere in New

Zealand are performing some abortions. If your doctor thinks you have a good chance of getting a hospital abortion, by all means try, but bear in mind the Australian "back-up". Also remember that the later you leave an abortion, the more chance of ill effects.

From April a new (and even more restrictive) set of possibilities will apply in New Zealand. "The Certifying Consultants Circus", or panels of doctors which will decide who has grounds for an abortion, will begin to operate on April 1. (See the May *Broadsheet* for information on how these panels are working).

All other options — are *illegal*. We have outlined the dangers involved in illegal procedures, and the penalties. Please read all this information carefully before deciding what to do about your unwanted pregnancy.

THIS IS DANGEROUS!



WOMEN DEMAND SAFE, LEGAL ABORTIONS.

ABORTION TACTICS

New Zealand women are dismayed, outraged, shocked, furious — about the new abortion law. But what can we do about getting rid of this atrocious law and replacing it by what we really want? In place of our usual editorial, *Broadsheet* offers three different comments on what can be done.

Mary Sinclair discusses how the parliamentary campaign failed, and argues for a return to suffragist tactics.

At the tail end of an already horrific year for women, the Parliamentary Gang of 44 imposed the final insult on the majority of NZ women.

The enactment of the Contraception, Sterilisation and Abortion Bill was the culmination of some of the worst scenes a New Zealand parliament has ever seen, as a group of white, bourgeois, aging misogynists (women-haters — what else could they be?) forced yet another repressive act through the House against the expressed will of the people.

Many of them will live to rue that night's work.

How did it happen?

It happened because four vicious, carefree men, who, as Mary Batchelor commented, would never carry anything heavier in their bellies than a good meal (and God knows, some of them must have already had a few) led the SPUC cause — one from outside the House, the others from within.

It happened, sisters, because we allowed men to take over our battle, and because we were powerless to stop them on either side of the House. However, now that it has happened, we may have the beginnings of some *real* allies, like the MP who admitted after the event that he had never really analysed before what he stood *for*, only what he stood *against*.

I think the key to both the recent defeat, and the coming victory for women lies there. We have failed to put the message of woman's choice across in sufficiently clear and uncompromising terms for male MP's to understand the real battle lines,

and plan their tactics accordingly. There could not have been a better example of the need for strong women to get into the system than the debacle of the recent abortion debate in Parliament.

I think the defeat for women was particularly hard to bear because although women orchestrated the battles, they had no control over the tactics of the war. Even the women fighting for a woman's right to choose were dominated and manipulated by the male parliamentarians. When we argued about tactics, we were told that we 'didn't understand' and that 'they knew the procedures best'.

During the course of the abortion debate, I was present at several meetings where male politicians talked down women activists, and where women who were more concerned with maintaining the status quo before the Royal Commission also talked other women down.

The SPUC lobbyists were no better. The men called the shots, while the women sat and watched admiringly. As well they might — without the big guns and Catholic backers, they would have failed.

Very few feminists managed to stay objective in the midst of lobbying, machinations and recriminations.

There was always the feeling that one only knew half the story, that the decisions were being made by men who were stooping to defend frail creatures and knew much better than we did which tactics would be effective.

Even in the final defeat of the 'liberal' amendments, the parliamentarians were *not* to shrug their shoulders and

talk of 'losing with honour' and 'maintaining integrity'. That didn't mean they were honourable enough to vote for the one amendment which *did* claim the right for women to choose. Whetu Tirikatene-Sullivan's courageous stand went virtually unsupported by people who were so scared of their own political positions and the so-called 'Catholic vote' in their electorates that they crawled back into the woodwork after a barely token resistance.

The basic rules of negotiation had gone out the window before the debate even started. Instead of asking for what 60% of women had stated that they wanted, the liberal lobby started their bargaining from a fallback position. The only thing the Gair amendment had going for it was that the alternatives as embodied in the Bill based on the Royal Commission's report, and the Birch, Brill, Wall and Arthur Amendments were so much worse. Given the mental abilities of many parliamentarians and their attitudes to women, there was no way a more liberal position could have succeeded. That was still no excuse for the cowardly performances women had to watch in Parliament.

Many women have accused the women lobbyists for a woman's right to choose of fighting the wrong battle and trying to keep the Clinic open at all costs. Many women in Parliament were *not* fighting that battle, but were continually sidetracked into defending it by the others who were. The confusion in MP's minds was not helped by divergent opinions among the lobbyists, either. More women who support liberalisation of the abortion laws now see the need to stand behind the slogan 'a woman's right to choose'. Faced with half-awake sheepish MP's playing follow-the-leader, quite a few women were radicalised overnight.

What do we do now?

So at last we are now fighting the right battle. For this reason I believe that we must think out the strategies for action carefully and make them fully effective.

One of the few good results of the December debacle was the clear indication of where the enemy lies. The ballot box is the most potent weapon we have, and we should remember well the courageous and exhausting battle the suffragist women waged in order to win us the right to use our democratic right, not only to elect people to represent us in Parliament, but to **THROW OUT** those who misrepresent the will of the majority for their own means.

If we are to use the ballot box effectively, we need to know how the so-called representatives voted. I sat down and compiled a voting list of all MPs for Broadsheet. Now it's up to you and me to canvass the other candidates to find out their views, make them state them publicly, and to encourage women to vote accordingly in November 1978.

There are many other good strategies to get involved in. Among these are door-to-door canvassing, getting petitions signed, giving donations to the various SOS groups and trusts throughout the country. Hopefully a national link-up of electorate committees will soon be set up to feed information and ideas from group to group and channel the anger of New Zealand women into action.

Many people will say you shouldn't vote on only one issue when electing an MP. My feeling is that your average man's attitude to abortion and women's rights in the matter is a very good indication of his attitudes on a whole related series of social issues.

There is so little difference between the two major parties on the economy, the unions, financial affairs and many other issues that it seems quite sensible for a woman to vote for the person who will at least pay heed to the wishes of his/her electorate.

The strongest weapon women have in our battle for the right to self-determination is the vote, won after courageous and hard-fought years of battle by determined suffragists. They also had to beat a male-dominated parliament and their eventual victory

should inspire today's feminists in today's battles.

There seem to be a lot of politicians around denying that they had anything to do with the abortion debate other than to cast a vote one way or the other. Some of them can't even remember which amendments they

voted on or *how* they voted.

When one of these politicians turns out to be the PM and the nominal Leader of the House, one does tend to get a bit curious about his comments.

Word has it that a certain lawyer friend of Mr Muldoon's flew into town from overseas on the Monday before the sudden appearance of the

National Candidates for 1978 and how they voted

	3rd READING	BIRCH	WALL	ARTHUR
Adams-Schneider		+	+	+
Allen	+	Leave	Leave	Leave
Austin H.N.	+	+	+	+
Austin W.R: Sick				
Bell		+	+	-
** Birch	+	+	+	+
Bolger	+	+	+	+
** Brill	+	+	+	+
Comber	+	+	+	+
Cooper	+	+	+	+
Couch	+	+	+	+
Dewe	-	-	-	-
Downie	+	+	+	+
Elliott		-	-	-
* Elworthy		+	+	+
* Falloon	+	+	+	+
Fenton	+	+	+	+
Friedlander	-	-	-	-
Gair	-	-	-	-
Gandar	-	Sick	Sick	Sick
** Gill	+	+	+	+
Harrison	Leave	Leave	+	+
Highet	-	-		
Holland	-	-	+	-
* Jones, D.M.	+	+	+	+
Jones, N.P.	-	-		
* Lambert	+	+	+	+
Latter	+	+	+	+
Lithgow	-	-	-	-
Luxton	+	Chair	Chair	Chair
MacIntyre	-		-	-
McLachlan	+	+		
McLay	-	-	-	-
* Malcolm	+	+		+
Minogue	-	-	-	-
** Muldoon	+	+		
Quigley	-	-	-	-
Schultz		+	+	+
Shearer	-	-	-	-
Talbot	+	+	+	+
Talboys	-	-	-	-
Templeton	-	-		
** Thompson	+	+	+	+
Walker	+	+	+	+
Walls	-	-	-	-
Waring	-	-	-	-
* Wellington	+	+	+	+
Wilkinson	+	+		
** Young	+	+	+	+
Young, W.L.	+	+	+	+

N.B. Gordon and La Varis: overseas. Jack: Sick.

+ = for

- = against

* Many MP's, old and young, voted the way their more powerful colleagues did, in unthinking loyalty to the party machine. Most of these MP's will never make good representatives of their electors because they find it safer to tailor what little conscience they have to the Boss. The Mafia mentality is very strong.

** What I call the Medievalists. The prime targets for feminists in these electorates.

Any MP who voted for all clauses is medieval.

Any MP who didn't vote on all clauses, for or against, is suspect.

Careful, though, he may have a cast-iron excuse.

Contraception, Sterilisation and Abortion Bill on the order paper, cast his eye over the leave lists for MP s, and decided that the time was ripe for a chat about abortion.

The leave books for that Tuesday contained the names. Of those 14, six MP s were overseas, and five were sick. A further three MP s had leave for functions outside Parliament, which unlike many others, including Gair, they had not cancelled.

Of the 11 MP s who were overseas or sick, 8 would almost certainly have voted against the Birch Amendment and its repressive successors.

The final count of the liberal lobby on the Tuesday morning was 38 for Birch, 33 against. So those 8 votes could have made a vital difference. As it was, when the liberals withdrew their amendments but did not have the courage to withdraw their presence as originally planned, to show up the contemptuous way in which Parliament was being run, several of the swingers timidly swung back into position behind SPUC.

Labour Candidates for 1978 and how they voted.

LABOUR CANDIDATES FOR 1978 AND HOW THEY VOTED

	3rd READING	BIRCH	WALL	ARTHUR
Arthur	+	+	+	+
Bailey	+	+	+	+
Christie	-	-	-	-
Coleman	+	+	+	+
Connelly	+	+	+	+
Courtney	+	+	+	+
Faulkner	+	Leave	+	Leave
Finlay	-	-	Duped into Leave	-
Fraser	+	+	+	-
Freer	-	-	-	-
Isbey	-	-	-	-
Kirk	-	-	-	-
Lange	-	+	-	-
MacDonald	-	+	+	+
Marshall	-	-	-	-
O'Brien	+	+	+	+
Prebble	-	Abstained	-	-
Rata	+	+	+	+
Reweti	-	+	-	-
Rogers	-	-	-	-
Tirikatene-Sullivan	-	-	-	-
Tizard	-	-	-	-
Wall	+	+	+	+
Wetere	+	+	+	+
Young	+	Leave	+	-

N.B. Batchelor, Douglas, Hunt, Rowling: overseas.
Barclay, Blanchfield: sick.

+ = for
- = against

GISBORNE ACTION



In Gisborne, demonstrators marched on the home of local National MP, Bob Bell, protesting at the Wall and Arthur amendments to the abortion sections of the Crimes Act.

This was the first time local women had taken to the streets and 70 of them marched on Bell's home. When he was not "at home" the protestors moved to Radio Gisborne head-quarters to await Bell's arrival for his monthly talk-back show. A Gisborne woman reports:

"No prizes for guessing the topic of his talk-back show. With few exceptions his anti-abortion stance was castigated. Bell, back-peddalling, admitted he had been conned by the "pro-life" people. He never anticipated that the legislation would go so far. Of course, no one had warned him in advance!"

Gisborne March.

Marianne Doczi discusses the ways in which the abortion campaign can be used to introduce women to other Women's Liberation ideas.

The basic dissatisfaction I have with the abortion struggle as it has been fought in Auckland is that it has been defined too narrowly, consequently limiting the pay-offs which might have otherwise occurred for the Women's Liberation Movement. We should not have directed so much energy towards asking Parliament to grant us our 'rights'. Would liberal abortion laws have given us control over our own bodies? What guarantee would there have been that clinics would not continue to be economically and psychologically oppressive to women, that the theory of WL would have had any impact over their structure and functioning. (Take the example of PSI clinics in Australia where capitalistic males are reaping the benefits of years of WL rhetoric and activism). I believe the abortion movement should, and hopefully still can, move out in two other directions.

The first is to investigate the political implications of directing women's energy into side stepping the power structure, i.e. Parliament, and setting up women's health self-help clinics where we can offer help and

advice on non-hospital methods of abortion and organise referral services. This could be the first step in showing women how they can take power into their own hands. Of course this will not be of help to those women who are 15 or so weeks pregnant but the women's movement here must start creating alternative areas for women's anger and energy to be directed. There will always be groups prepared to wage battle with the power structure on a liberal or reformist basis but those of us prepared to stop hoping for change from that approach should defy, through alternative action, the right of men to pass such legislation. There is a danger of radical women being co-opted into fighting abortion on reformist terms, that is, without considering the implications such actions have for the WLM, because of our emotional response to the situation of the women who are desperate for abortions right now. The WLM has to remain strong in its conviction that the means by which we fight are very relevant to our ends.

The second direction brings us back to some of the techniques used to create a pro-abortion movement. Take the tactic of marching — which I do not condemn per se — but rather mention to express a concern that we question where it fits in as one tactic of a political strategy rather than being the strategy in itself. It seems to be

being misused as a CR technique to reach the women 'out there'. In my mind marches are publicity vehicles. But do they in fact actually inform or educate people as to our cause and the motivation behind it? To be effective surely they have to be preceded and backed up by consciousness raising mechanisms and not attempt to be the sole mechanism in operation. Overly frequent marches render less impact than a few carefully planned ones which are supported by the mass of women, who have to have the impetus to march.

How best then to reach out to those women who expressed anger over recent legislation; how best to convert that frustrated energy to our longterm cause, i.e. WL. The women who set up stalls in shopping areas in the suburbs met with an enthusiastic response but also the request of "Where do we go from here?"

Having signed petitions and written to MPs they were at a dead end. A worthwhile response could have been to harness their anger and energy to the wider cause of WL. Now is the time to suggest that these angry women get together with other women in their districts who are sharing that anger to discuss how and why they are reacting, why a government which preaches democratic individualism takes so little notice of those who are to be most acutely affected by legislation. If they felt unable to start this questioning process themselves women's liberationists could have gone out to these groups, sent them literature and kept them in contact with what the university based abortion action groups were doing. That way when we did have a tactic planned the women power would be there to carry it out. There was, and is, a strong need to decentralise our activities. Furthermore, there is a need to expand the questioning beyond the immediate issue of abortion, to get women demanding control over their sexuality and reproduction — the question of abortion must be the stone that ripples the surface of women's apparent acquiescence to their fate as an oppressed class. And if it succeeds in getting women 'on the move' then we must have some direction and goal available for them to identify with.

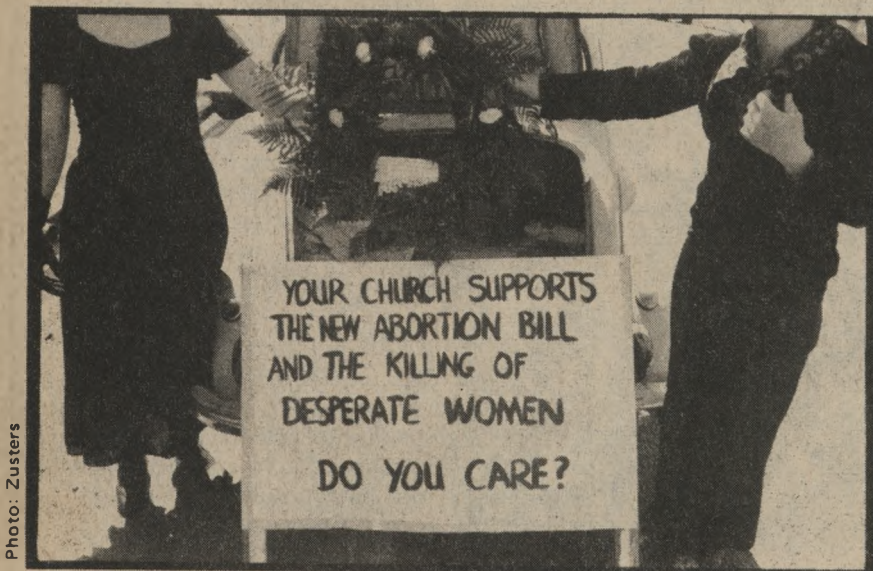


Photo: Zusters

Christchurch women lay a wreath at Catholic Cathedral.

Val Cole considers that repeal of the present law is not enough, and that we should be making more radical demands.

In the wake of the recent abortion legislation many feminists are taking a long cold look at the abortion campaign and our recent 'failure'. Rather than thinking of the legislation in those terms, I see it as more a part of the battle. Our rights to abortion will not be recognised until our right to be strong, proud, autonomous women is recognised, and until then we'll never 'win'.

How the Women's Liberation Movement presents itself in the abortion struggle is how it is seen by people outside the Movement. This is because it is the one issue around which, when it comes to the crunch, most feminists will rally, and the Movement becomes visible. Therefore it is the issue which has the most potential for building the mass base that the WLM needs. Women are liberalised by liberal demands and radicalised by radical demands. The 'Repeal' petition being circulated at the moment is liberal; it uses the word 'repeal' (rather than 'reform') but limits this to the December legislation. A return to the status quo is not what we want; the resurrection of AMAC is not what we want; a "woman and her doctor" is not what we want. So why ask for it?

We want abortion on demand, free, in independent, feminist-run, state-financed women's health centres. I don't like men poking and prodding up my cunt — and don't think that their MD makes them any different from other men. We want more than abortions for women who don't want to be pregnant. We want the Government, the medical profession and the patriarchy to *get off our backs*. We shouldn't tone down our demands, we should be toning them up.

If we did flout the law and set up our own clinics, we'd still need the equipment and we'd constantly be under the threat of the police, the army, courts, gaols and associated paraphernalia power. *But* all the time we acquiesce to the law, try to change the law, fight the law, we continue to reinforce their right to *make* such laws. Under our analysis they do not have that right, and every time we sag

under the weight of our 'defeat' we reinforce their power over us.

All the time we are dependent on the man's laws and the man's technology, we are dependent on the man.

They have concentrated power. We need to base power on individual actions and by-pass institutionalised power. For example, if Vitamin C was an effective abortifacient (I don't know if it is), what would they do — ban it? Slash and burn every citrus fruit tree in the country, withdraw manufactured Vitamin C from sale? No. Because they'd be fighting themselves. Pharmaceutical firms are falling over themselves to say that

Vitamin C can't interrupt a pregnancy, in case the Government bans it (like menstrual extraction). They are caught in a double bind. If it was an abortifacient, they'd want to charge \$10 a tablet for it, but if they did that, they'd lose millions they'd make on it as a cold cure.

This is how to fight them — not with a head-on collision with a power structure far stronger than ours, but with what is freely available to all women. Something cheap, simple and effective (which is what menstrual extraction is, incidentally). We need to *know* about such things.

We must take the lead in radicalising the women of New Zealand and we must find ways of becoming independent of the patriarchy. We shouldn't need to ask; we should *take*.



Christchurch demonstration, December, 1977.

Photo: Julie Lambie

A study of the novels used in most New Zealand co-educational secondary English classes would probably show that in most books used, the major characters are males. Do "Shane", "The Boy who was Afraid", "Lord of the Flies", "Kes", "The Day of the Triffids" and the "God Boy" sound familiar? The fact that half our school rolls are made up of girls who get rather tired of studying male-oriented books seems to escape many Heads of English departments. When I pointed out to one HOD English that the books in his department were exclusively male-oriented, his defence was: "I think books should be of general interest". This is a common attitude — books by males and about them are real literature, books by and about females are "women's books" and by implication inferior.

I can guess that by now some readers will be asking — Does it matter if girls read books about male characters? Surely the worth of the book should determine whether it's bought or not, not whether it has male or female characters?

Hopefully, we read fiction to enlarge our understanding of human existence in general and our own characters and lives in particular as well as for entertainment. Through novels, we can enter into the experience of people of other times, circumstances, ages and sex and as a result become more sensitive and understanding individuals. A novel has the ability to change our way of looking at the world forever. It can also be personally supportive and illuminating by showing us that our thoughts and conflicts are not unique to ourselves, but shared by other people.

Whether because of environmental or innate differences, males and females view the world differently in many areas. Why should girls spend all their time reading and studying literature by male authors who inevitably give a male view of the world and write about male concerns? Few male writers create convincing and strong female characters just as it is often argued female writers can't create male ones. So let's have a balance — Why shouldn't girls and boys know that women can write just as well as men and that female characters can be just as interesting as male ones? And why shouldn't boys consider the world as seen by women for a change?

Girls will read books about male characters dutifully and even enjoy them (one of my very favourite writers is Herman Melville!), but their delight when given books with female characters they can identify with convinces me they deserve to have a fair share of the readers to suit them. Boys are more reluctant to read books about females, a fact which merely reflects male attitudes generally, but I think teachers should

A novel has the ability to change our way of looking at the world forever.

try to get them to do so. After all, a country which has a high divorce and family breakdown rate and which considers mental health a serious problem, needs to try anything to improve personal relationships.

The second objection that some male teachers raise is that there aren't many suitable books with female characters. In my years as a Teacher Librarian, I have noticed a reluctance on the part of English graduates and also those other teachers who find themselves teaching English classes because of the fallacious assumption of principals that anyone can teach English, to take an interest in books for teenagers. Primary trained teachers make much more effort to concern themselves with what children like reading. There are plenty of books being written today with interesting and strong female characters, mostly by women writers it is true. Fiction has always had a good proportion of female writers, for the reasons Virginia Woolf delineated in "A Room of One's Own" almost 50 years ago. Also women have always had closer contact with children than men so it is natural that many of the best writers for children and adolescents have been, and are, women.

I will now suggest some novels that do appeal to girls and would be rewarding to study in English classes or be read for individual enjoyment. I have read all of these books myself and have found many as absorbing as much adult reading. No doubt there are other writers and books I have omitted so I make no pretence to be the definitive authority on teenage reading. I am also not dealing with books aimed at adult readers, which may also be enjoyed by senior girls, although many of the books I suggest, although intended for readers up to 15, can be enjoyed by older readers.

Stories set during the Second World War are always popular and are often based on the personal experiences of the authors. Perhaps war gives girls opportunities of adventure and excitement denied to them in peacetime. "The Endless Steppe" by Esther Hautzig is an extremely moving story of the removal of her Polish Jewish family to Siberia in the period of German-Russian alliance just before the war. Hautzig shows herself to have been determined, intellig-



ent and ambitious and one can only admire her will to survive. "I am Fifteen and Do Not Want to Die" by Christine Abernathy tells of her experiences in Budapest in 1945 when the Russians liberated the city. "Miriam" by Aimee Sommerfelt describes the life of a teenage girl in German-occupied Norway. Two novels, somewhat related in subject, and both well-written are "The Backwater War" by Peggy Woodford and "Summer of My German Soldier" by Bette Greene. Woodford's book is set in the Channel Islands when occupied by the Germans, and besides creating suspense with the escape of a Polish POW from a German camp and his friendship with a local girl, the reader learns about life in the Channel Islands and about adjusting to a situation of uncertainty and deprivation. Greene is an American writer and her book is set in a small Southern town which has a camp of Italian POWs outside it. Patty, the major character, befriends a young escaped prisoner at great personal risk as her family and the community are narrow and intolerant. I found this book totally involving and have had great success in introducing it to girls at 4th and 5th form level. "A Town Like Alice" is well-known but still popular.

Many girls, especially the more academic, enjoy novels with an historical background. These, of course, provide interesting information as well as often showing strong female characters – for example, Margaret Irwin's novels about Elizabeth I. Anya Seton's books are still very popular with 5th formers, as is that perennial favourite "Gone With the Wind". Nearly everyone knows "Island of the Blue Dolphins" by Scott O'Dell but may

not know a more recent book by him – "Sing Down the Moon" – about the forced march of the Navahos from their homes to an arid reservation. The major character, Bright Morning, is resourceful and brave but although the ending is personally optimistic for her, there is a pervading atmosphere of sadness and loss in this book which haunts you for long afterwards. I consider O'Dell to be a very fine writer. Another fine American book is "Garrett's Crossing" by Jane O'Daniel which is set during the Revolution. Lizzie is a young orphan, apprenticed to an itinerant dressmaker, who gets involved with a family in conflict over the colonists' struggle for independence. Once again, I found it compellingly written. An English novel with a more recent setting is "A Question of Courage" by Marjorie Darke. In it, a young working-class seamstress gets caught up in the Suffragette Movement. It is not of the same literary quality of the previous two books, but still very readable.

In the last few years there has been a great increase in the novels written about "Teenage Problems". These books vary in quality and sometimes appear rather didactic and contrived to the adult reader, but are most acceptable to the less critical teenager. Such an example is "Young Mother" by Josephine Kamm. The popularity of books dealing with unwanted pregnancy, problems with parents and boy-girl relationships proves to me the urgent need for Human Development programmes in schools. There are a few Danish books which have been translated which deal very realistically with these problems and even discuss abortion. The English translation tends to be stilted but the books' virtue is that they are not moralistic. Three of these books are "Mia" and "Mia Alone" by Gunnel Beckman and "Fourteen Days Overdue" by Inge Krog. The enormously popular "My Darling My Hamburger" also skirts round the subject of abortion but is a much more moralising tale. One book which has aroused some opposition is an American book, "Forever" by Judy Blume. The heroine is about 18 and Blume describes explicitly her sexual initiation and relationship with a boy her own age, her suspected pregnancy and her subsequent efforts to inform herself about contraception. It is obvious the author wants to convey a good deal of information and some people may feel the school library should not have this book but I would argue that if any girl learnt something from this book that saved her distress, it justifies its presence.

Some books explore the problems of unmarried mothers. "The Longest Weekend" by Honor Arundel does this quite well but the ending is

too easy. "The L-Shaped Room" and its two sequels by Lynne Reid Banks are popular with better readers from the fourth form upwards. Other books attempt to show the difficulty of premature marriage – "The Two Sisters" by Honor Arundel, "Sam and Me" by Joan Tate, and "The Starting Point" by Josephine Kamm, although "Clipper" by Joan Tate makes it seem lovely.

Heinemann's Pyramid series has many books which are short, easily read, convincingly written and with attractive covers, which deal with teenage problems. They are directed at teenagers who are reluctant readers but will be read by good readers as well. Examples are "Penny Black" and "Marie Alone" by Madeleine Kaye and "East, West" by Pamela Sykes. Feminists could criticise them for their acceptance of female stereotypes but the characters usually learn self-reliance, tolerance and increased perception about people so I think they are very worthwhile. A novel about falling in love for the first time I thought was well written is "Please Don't Go" by Peggy Woodford. It is very realistically written and as much of it is set in France has the added bonus for French students of French phrases and background.

A major problem for many teenagers seems to be getting on with parents who often seem to be intolerant and restrictive. Three American books which treat this in an entertaining way are "Dinky Hocker Shoots Smack" by M.E. Kerr, "Nobody's Family's Going to Change", by Louise Fitzhugh and "Freaky Friday" by Mary Redgers. Dinky Hocker is a fat, articulate and imaginative girl whose trendy parents are so busy doing good for others, they have no time for her. She also has a genuine friendship with a boy who is also a misfit. This book is most amusing. Fitzhugh's book describes a Negro middle-class family in which the boy wants to be a dancer and the girl a lawyer, much to their parents' despair. The characters are credible and the family scenes, in the phrase of the SLS list, "wilyly observed". "Freaky Friday", which I read is being filmed, explores the novel idea of a girl waking up in her mother's body.

A book for better readers which has a very strong and determined girl of 16 for the major character is "Nancekuku" by John Branfield. Her father has died of leukemia which she is sure is related to his work at an experimental nerve gas station. Her mother is finding it difficult to cope with the family and refuses to investigate the circumstances of her husband's death. The girl determinedly sets out to find the true facts. The book has, however, much more than this – the girl acquires increased under-

standing of her own feelings and those of others in the course of her crusade and by the end of it has a firm direction for her life.

It is easy to forget how hard it was for girls to get education at all before the days of free, compulsory education. The TV dramatisation of "South Riding" showed this excellently. I found all three of the following books intensely moving and to be enjoyed by many girls. I have not been able, alas, to get a boy to read any of them!

"Freedom for Priscilla" (a rather unfortunate title) by an Australian, Joyce Nicholson, starts rather staidly but gathers momentum and finally becomes very involving. It is set in Melbourne at the turn of the century and tells of a middle-class girl's determination to become a doctor despite her father's opposition. "The Rock and the Willow" by Mildred Lee is set in the poor Appalachian mountain area in the 1940s. The major character has to leave school when her mother dies, to care for the family although she is very gifted and wants to go to college. It sounds sentimental, but this book has some of the best writing about a family struggling to survive I have read, except, of course, for "Yonnonadio" by Tillie Olsen. This is a wonderful book which I must mention because it is not very well-known, although it is likely to appeal to fifth-formers upwards. Olsen wrote this book during the Depression but did not have it published until the 1960s when she had some short stories published. This is hardship from the point of view of women and children and I defy anyone to read it unmoved.

A French book, "A Gap in the Wall", by Gabrielle Estivals, is set in Algeria and gives readers an insight into the oppression faced by women in other cultures. The girl in it has to leave school at puberty and her attempts to continue her education end in tragedy. It is unfortunately out of print but available from the SLS.

I hope these books I have mentioned provide sufficient proof that there are books of good literary quality with interesting female characters, suitable for use in schools at third to fifth form level. I am firmly convinced of the value of teaching literature at all levels of the school and novels especially give children opportunities to discover more about themselves and the world, past, present, and future. So let's pay more attention to the needs and interests of girls in the field of literature. Just because girls tend to be more docile and more likely to work at something they don't find very interesting is no excuse for assuming they don't want something different – writing that shows women to have the abilities and strengths our society is reluctantly and belatedly admitting they possess.

The Feminist Eye

Virago arrives in New Zealand

Virago Books is a British feminist imprint which has been publishing original works and reprints of important out-of-print books for a couple of years now. Initially Virago was associated with Quartet and books published during this time are distributed in New Zealand by Hutchinsons. Now the independent Virago has arranged distribution through Ross Haines and Sons Ltd and the books should be available in New Zealand bookshops now. Below we publish reviews of some of the Virago books we have received so far.

If you have trouble locating the books we suggest you contact the distributor Ross Haines & Son Ltd, 104 Fanshawe Street, Auckland 1.

Life as we have known it, Co-operative Working Women, Introduction by Virginia Woolf, Virago, 1977.

Writing books is largely an activity of the middle-class and they largely write about themselves. When they do cast their eyes beneath them, they tend to describe the lives of those less blessed by Mammon in rosy and romantic terms. This book, written by working women (and those, mind you, who managed to elevate themselves by learning to read and write) contains the real lives of English working women in the later part of the 19th century and the early part of this one. They were poor and oppressed beyond our wildest imaginings. Sugar was rationed out by mother at the rate of a teaspoon a child per day; milk was only allowed in tea when visitors came; bread was bought by the slice. Little children began to work in the fields at 5 years-old, presided over by a man with a whip "which he didn't forget to use". Girls were put into service at ten or eleven and worked fourteen hours a day, sleeping in a cellar with bugs. Women had baby after baby and they were also in service, with the older children bringing the newest baby to the big house every four hours to be breast fed, or they sewed from dawn to dusk doing outwork for a few pennies. As one of them says: "We feel sometimes that we are not living but just existing somehow."

The pleasures of this life were few and cheap — they had to be. Getting out into the country for a walk, being able to see the daybreak over the hills through the window of a factory — "they are always such a comfort and help." All the women in this book had a keen sense of the injustice of

their lot and a burning desire to improve themselves. Most were self-educated and all owed much of the improvement in their situations to the Women's Co-operative Guilds to which they all belonged. At the time of the original publication of this book (1930) there were 1,400 branches of the Guild and 67,000 women members. They ran co-operative shops, held meetings, heard speakers, swapped literature and gave women "the unity and force which enable them to become a power in the Movement (the Co-operative Movement) and to share its administration". Unfortunately, the book doesn't give us up-to-date information on what has happened to the Guild now — has it entirely died out, or are there still remnants here and there?

While these women came from totally unsophisticated backgrounds they show a very clear understanding of the nature of oppression and our tools for overcoming it — education and solidarity of persons in the same situation. In the book a felt-hat worker describes how by persuading her fellow-workmates to join the trade union, improvements were made in the conditions of their work. There is also an understanding of the way in which the economic dependence of woman ensured her helplessness. For although most of these women had a real partnership in struggle with their husbands, they understood how dependent personal survival was on something as irrational as what sort of man your husband turned out to be — whether a solid worker, or a drinker and wastral. And how I cheered when I read of a woman who trained herself and worked as a midwife for many years, saved up enough money to buy a house and determined to put it into

her own name. "This caused a little friction between my husband and myself. He thought that although I had earned and saved this money, the house should certainly be bought in his name. He said it did not look respectful for a woman's name to be put on deeds when she had a husband alive. I thought different, and so the house is mine."

If you are interested in our herstory, and this is genuine herstory in that it is written by the women themselves, get hold of this book and feed your outrage.

Sandra Coney.

The Gender Trap — A Closer Look at Sex Roles,

Book I : Education and Work (illustrated),

Book II : Sex and Marriage (illustrated),

Carol Adams and Rae Laurikietis, Virago.

The authors of these books, who teach history/social studies and English respectively at a London school, use a text-book method of setting out questions at the end of each chapter. The books are primarily intended for senior school pupils, university students, young people beginning work and teachers; although anyone interested in male/female relations, the education of children or the women's movement, will appreciate the worth of these books.

The authors give convincing evidence for the belief that sex discrimination begins in the pram and is reinforced through the education system. For example, they consider that such re-

marks from a teacher as "I want two strong boys to help me", or "What language from a lady", help to classify boys and girls into their stereotyped roles — roles which restrict men as well as women in their day-to-day living and emotional experiences. The authors see Women's Liberation as being part of a wider movement which suggests that men as well as women question their accepted roles in society.

Book I — "Education and Work" looks at the unjust and restrictive programming in schools which encourages men and women to lead different and separate lives, limiting the options of girls at an early age and channelling their expectations into careers with low prospects.

The authors examine discrimination in job training and take a critical look at the organization of male-dominated trade unions.

It is undoubtedly true that people rise to meet what is expected of them and when so little is expected of girls they are discouraged from reaching their full capabilities. When boys and girls are taught to be different it is difficult for either sex to see the other as an equal. This conflict, which frequently turns into hostility, is carried over into the most sensitive areas of human relationships.

Book II — "Sex and Marriage" covers such issues as the attitude of doctors towards women, courtship, social conventions, chivalric customs ("a symbolic way of saying that men and women are unequal"), rape, the married woman's loss of personal autonomy and the Ms campaign. Motherhood is deglamorised and the isolation and demoralising routine of housework scrutinised.

The reader will find a number of depressing similarities in the discrimination obtaining in England and here, and — even more depressing — find that in some respects we lag behind England in our attempts to combat it.

These books are well-researched and well-reasoned. Each is liberally sprinkled with interviews, facts, figures, poems and stories. If they say little that is particularly new, they analyse very well women's status and behaviour and clearly indicate how and why things could be different.

Ruth Collins.

The Tamarisk Tree - My Quest for Liberty and Love, Dora Russell, Virago 1976.

Dora Russell's autobiography, first published in 1975, has just been brought out by Virago, a feminist publishing company. Russell's story of her life is both an education and an inspiration. Nowadays, to live with a man without a marriage licence is to be subjected to the sneers and pinpricks of the Mrs Grundies and other self-styled moralists in society. In the 1920s and 30s, when Russell blazed a trail, it was tantamount to

social excommunication. Mind you, you couldn't win either way. Married women were not employed, so that economic independence had to be sacrificed to social acceptability, or vice versa for the unmarried. A hard blow for Russell, who had begun a successful academic career of her own when she met Bertrand Russell. Fortunately, she wished to have children, and was able to employ nurses and nannies to help care for them so that she had time for her many other interests. It is impossible to summarise in a short review how many projects and successes Russell was involved in. As well as mothering four



Dora Russell

Photo: Sally Greenhill from "SpareRib".

children and writing four books she found time for lecture tours, extended visits to revolutionary Russia and China, setting up women's health and family planning clinics, running a progressive school, involvement in left-wing politics and coping with relationships with Bertrand Russell and other demanding people.

The story of her twelve year marriage to Bertrand Russell and their subsequent divorce is a sad warning. From Bertrand Russell's autobiography one gets little idea of how intelligent and active his second wife was, of how much of a thinker in her own right she was, and how much she did for him. In the end, he abandoned the principles with which they had begun their relationship, and afterwards behaved so badly that Dora was very hurt by his betrayal. But from this blow and from the other knocks which a male-dominated world dealt her, Dora Russell managed to recover and keep on, never deserting her principles. She does not deny the advantages which her middle-class background gave her, but she is a fine example of how to use those advantages for others, principally women and workers, and not for selfish gain.

Christine Dann

Daughter of Earth,
Agnes Smedley,
Feminist Press, 1973, \$4.70.

This autobiographical novel is the most moving main work of U.S. proletarian literature.

Daughter of Earth has been rediscovered after being forgotten due to World War Two and the anti-Communist hysteria of the 1950's.

The story is of a remarkable woman whose life was a dedicated struggle against ignorance, poverty, and every form of oppression. Born in 1894 in Northern Missouri, Agnes Smedley was the second of five children fathered by a casual labourer of native American (Indian) descent. She experienced all the depressing humiliations of a child born into a family in which the mother was a joyless, mindless woman and the father never earned enough money to keep them from poverty.

Smedley's bitter childhood memories chronicle her attempts to free herself from this background - her fight to attend schools and, eventually, university.

In 1919 she left America and went to live in Berlin for the next nine years. There she worked as a university lecturer, and co-operated in the establishing of a birth-control clinic.

Later she became a correspondent for the Frankfurter Zeitung newspaper and as such went to China in 1928 where she actively participated in the Chinese liberation struggle.

In 1941 she returned to the U.S. but was suspected of being a Soviet spy and continuously hindered in her journalistic work. Depressed, she left the States. She died May 6, 1950, at the age of 56, in London, enroute to Peking, where her remains are buried.

Daughter of Earth was her first work, written during an existential crisis. It was, she said, "a story of a human life told in desperation and misery." Nevertheless it is not a book without hope. On the contrary, it is deeply encouraging to witness her struggle, through all the pain and defeats, to new beginnings.

The conditions under which Smedley grew up were extremely dispiriting. Even as a child she learned of miners' villages in the remote parts of the American West, where "to eat and to sleep was all there was to survival." Her aunt became a prostitute, in order to help support the family. Her mother died of total overwork and exhaustion. At 16, Agnes Smedley had to make up her mind whether to share the fates of her aunt or mother - or to leave her younger brothers and sisters as her father's responsibility and to make her own way, away from poverty and ignorance. She chose the latter, and left, with various strong resolutions. Among them, never to become dependent on a man, never to love or to marry. (Marriage she believed to be "a relic of human slavery" which she rejected, refusing "to be destroyed like all the others.")

With ruthless self-denial she attempted to stand firmly by her resolutions, but could not repress either her love for her family, nor her own seeking of

Whatever's for Us — Women singers and songwriters will be back next month. Reviews (500–800 words) are still needed of the following women singers — Linda Ronstadt, Bonnie Rait, Phoebe Snow, Meg Christian, Willie Tyson, Patti Smith, BeBe K'Roche and others.

love and tenderness. She supported her younger sister financially as she studied to become a teacher. She married herself, hoping to be able to retain freedom and independence in marriage. The marriage collapsed, after a pregnancy and ensuing abortion.

Later in New York, working as a journalist, she sympathised with the socialist movement and supported the independence movement in India.

She married again - her great love. And again: failure.

The book ends on this point of a new beginning: "To die would have been beautiful. But I belong to those who do not die for the sake of beauty. I belong to those who die from other causes - exhausted by poverty, victims of wealth and power, fighters in a great cause. A few of us die, desperate from the pain or disillusionment of love, but for most of us 'the earthquake but discloseth new fountains'. For we are of the earth and our struggle is the struggle of earth."

Raewyn McDonald

The Women's Room

by Marilyn French
 "A gift to women"

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.....

EXHIBITION

A Season's Diaries

Christchurch and Wellington women mounted an exhibition of the visual and written diaries they kept in Spring 1977.

"For it is in days and nights that the world is spent."

The initial impetus to make the diaries came from Joanna Paul, who saw them as a continuation of the group expression realised at the CSA Womens Show in Christchurch during the United Women's Convention.

Notes from Joanna: "The diary piece came at a time when I was breaking new ground in my own life and feeling strongly interconnected with friends."

An experiment — with some surprises in the event. The simplicity and differences running through the similarity of women's lives, their highs and lows, ways of relating to feelings. Words/marks/images to form an inner/outer record of the makers lives.

"Art may well have been invented by women for the purpose of sketching their shadow selves rather than those of their lovers. Self portrait as self identity: like diaries, one of the few ways women have to leave their side of the story. Looking at art by women has for us been like looking in a mirror." ¹

Joanna's suggestion of using a regular grid, numbered like a calendar, as a form to fit the changes of each day, was followed enough to give a rhythm to the work, but each of us used a different media, and gave her feelings their own form. Paint, collage, fabric, pencil drawing — a book, a painting and explanatory notes.

Documenting your life in this way poses certain problems. It is hard being honest about your life knowing the results of that honesty are going to be seen by a lot of people. The whole process of selection was difficult — sifting for the happening/feeling which most characterised each particular day and then finding the words and images to convey it.

My sense of visual balance or con-

tinuity would often see my work as requiring something (i.e. an area of bright colour) which was at odds with the truth of that day.

Many women keep journals or diaries; organising some of this material so that it is accessible to other women enables us to make connections between our private realities.

"Although many women in the arts have struggled to give voice to their experience as women, their forms, like mine, have been so transposed (into the language of sophisticated art making) that they could be ignored by a culture that doesn't understand or accept the simplest facts of women's lives, much less subtle and transformed imagery." ²

Most of the diaries require some effort; there is much to look at and even more to read. We have provided a book for your additions/comments.

Anna Keir.



"A Seasons Diaries" was on display at Victoria University, Wellington, in December and can be seen at Waikato University, Hamilton, throughout March.

Participants: Bridie Lonie, Joanna Paul, Marion McKay, Allie Eagle, Gladys Gurney, Anna Keir, Heather McPherson.

Photos: Gaylene Preston.

Quotation: 1. Karen Petersen in "Women Artists".

2. Judy Chicago "Through the Flower".



BroadSheet on the Arts

Healthy Women

MENOPAUSE part one

All of us will grow older, yet how much do we know of the process we will all experience — the menopause. SARAH CALVERT looks at facts and fallacies surrounding this life stage.

All women will experience the menopause. For most of us it will herald the beginning of the aging process. Aging, in our culture, is not an esteemed process for either males or females, but for females, especially, this life stage is a time of considerable stress and trauma.

Women generally ignore the menopause to an even greater degree than other health issues. Perhaps long-standing attitudes towards the 'older' woman, fear of physical and psychological changes and the hinted-at problems of this time mean it has become a taboo subject. We need to be aware that the literature and research on the menopause has generally been approached from a subjective and personal viewpoint. Much of the little we 'know' about the menopause is not fact but fallacy. The human female is the only animal to experience a gradual decrease in fertility and hormonal production. 80% of all women will experience mild symptoms as a result of this change, 10% of women will have no symptoms and 10% of women will have symptoms severe enough to effect their daily lives in a major way. We experience menopause between the ages of 45 and 55. During this time our hormonal production gradually decreases and we stop menstruating. Menopause has occurred when we have had 12 months without a period (usually around the ages 50-54).

Most of us 'know' about the menopause from what society says of it and particularly important are the attitudes of members of the medical profession. Their views ensure that we are treated as 'sick' during and after this period. For

example:

"Menopausal women are a caricature of their young selves at their emotional worst." Quote doctor 1971.

"Most women suffer some symptoms whether they are aware of them or not, so I prescribe estrogen for virtually all menopausal women for an indefinite period."

Physical symptoms and problem areas

Menopause entails a profound biological readjustment for the body. Menstruation permanently ceases, the ovaries stop their cyclic production of estrogen and ovum. There is a decrease in the production of progesterone. Estrogen is still produced, in small but significant quantities, but most of the unpleasant side-effects associated with menopause are caused by the decrease in hormonal levels.

Menopause as a physical change is usually gradual, taking a few years to complete. It usually occurs between 48 and 52 dependent on national and geographic factors, but not on factors like age at first menstruation or 'promiscuity' as sometimes claimed.

Early menopause

This can occur if a woman has her ovaries removed (oophorectomy) or as a result of ovarian disease. A hysterectomy (removal of the uterus) does not bring on menopause unless the ovaries are also removed. The removal of one ovary will not cause the menopause because the other ovary continues to produce estrogen. When the ovaries are removed in a younger woman she will usually be given estrogen to maintain a 'normal' cycle. If this is not given she will experience menopause.

Physical symptoms

There are two major symptoms of menopause.

1. Hot flushes.
2. Vaginal atrophy.

1. Hot flushes

A hot flush is a sudden sensation of heat in the upper body, often accompanied by a rash and perspiration. It usually lasts a few seconds and a woman going through menopause may average 4-5 of these a day. They often occur at night. It is not understood what happens or why but the most widely accepted theory suggests that the changing hormonal levels affect the sympathetic nervous system, dilating the small blood vessels of the skin and so causing the rash and the sensations of heat and perspiration. Once the body has achieved a balance in its hormonal/glandular system the hot flushes stop. Hot flushes are uncomfortable and a nuisance but nothing more.

2. Vaginal atrophy

Vaginal atrophy is caused by the drying out and shrinking of vaginal tissue as the hormonal levels decrease. This decrease leads to a drop in the amount of vaginal secretion and thus the vagina seems dry and the walls very thin. Sometimes the bladder is affected. Vaginal atrophy is a slow process, it does not usually occur at the onset of menopause but slowly over the years (often 5-10 years after the cessation of periods, so that many women do not associate it with the menopause).

Vaginal atrophy causes irritation and an increased susceptibility to vaginal infections. For this reason it is sensible to use a jelly as a lubricant during heterosexual intercourse. Women who have a special problem may find it useful to use a jelly regularly — stretching of the vagina with the hand using a lubricant has been found to help. Diet and good exercise also help. Using the pubococcygeus muscle, which is the muscle that controls urination, will also help. To do this, try stopping the flow of urine and then allowing it to start

again — once you have learnt how to do this you can do it without pissing. Vaginal atrophy is one condition that does respond to estrogen treatment, and creams are especially effective while being less traumatic for the body.

Other physical symptoms

Many women suffer from all or some of the following:

Menstrual irregularity, longer or shorter periods, lighter or heavier flows, greater or less time between periods. Dizziness, nausea, sleeplessness, problems with concentration, memory loss, depression, irritability, arthritis, muscular aches, thinning of the hair, loss of skin tone, weight gain or loss, high blood pressure, blood circulation problems, heart palpitations, headaches, problems with vision, lack of energy, gastro-intestinal problems, increased vaginal infections, problems with itching of the sexual organs.

Two more serious side effects are:

Osteoporosis — brittle or porous bones. Estrogen is held to improve this condition but there is considerable debate about this and alternative treatments such as calcium are suggested (See section on ERT next month).

Atherosclerosis — fatty deposits on the arteries. These may lead to serious heart problems. Good diet and exercise are very effective in preventing this condition.

Treatment

Most of these conditions are said to respond to estrogen (ERT) but this is debatable to say the least. Good diet, the use of vitamins, minerals such as calcium and good exercise are far more likely to keep you healthy. Vidal Clay's book has good information on alternative treatments, but be aware that until more research is done no real answers to these problems can be suggested.

Sexuality

The work of Masters and Johnson demonstrated clearly that advancing age draws no limits on female sexuality. Although it is generally thought that people over 60 do not have an active sex life, this is quite untrue. Women over the age of 60 are as sexual and sensual as other women, however most women feel hesitant and uncertain about sexual activity after the menopause. One point to remember is that sexual activity appears to be sustained by the regularity of intercourse (naturally none of the references even

considers lesbian relationships but problems such as vaginal atrophy are similar for both heterosexuals and lesbians and therefore this advice is probably good for lesbians) both in order to sustain the sexual relationship and to make sure that the vagina and outer lips are well 'stretched' regularly. With vaginal atrophy the thinning of the vaginal wall and irregular sexual activity will lead to pain and dryness and possible tearing of the wall.

Another point to remember is that research indicates that the more regularly and frequently sexual intercourse takes place the more likely it is that it will continue into old age (ie. well past 60).

Heterosexual women who have been used to penile penetration may have to experiment with alternative methods of sexual activity since inability to obtain an erection is a problem with older men, however there are a variety of alternatives to this, the fun comes in working them out!

Problems

Vaginal atrophy leads to shortening of the vagina and the shrinking of the major labia. This is painful and also causes infections of the bladder and urethra (passage from bladder) because these are no longer protected. Precautions are to piss prior to and immediately after intercourse and to use a jelly as a lubricant.

Contractions of the uterus. These also occur during intercourse and as a woman ages may become more painful. As yet no way to overcome this is known.

At present it is not clear what other symptoms are directly related to menopause. However with regards to your physical health Dr R.W. Kistner writing in *Clinical Obstetrics and Gynaecology* Vol 16:4 1973 notes "Every woman in the pre and post menopausal period should have an annual Pap smear and a Cornification index (a test of estrogen levels) and a Schiller test (a test on the cervix which

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involves staining the cervix to check for irregularities)".

Psychological aspects of the menopause

There are two major works on the menopause; one by Susan Sontag called 'The Double Standard of Aging' and one by Pauline Bart called 'Portnoys Mothers Complaint'. The first emphasizes the social consequences for women of the aging process and the other is a psychological study of the menopause. Many other studies have been done on areas related to the menopause. Most of these point out that depression and psychological problems surfacing around menopause are related to social problems, particularly marriage and reproduction. Few psychological problems are associated with the physical problems of menopause. That is not to say that some women do not get depressed because of hot flushes that interfere with and challenge lifestyles, or that vaginal atrophy doesn't cause problems that make us depressed. However, it is mostly social attitudes to women, particularly towards older women, that create psychological problems. Susan Sontag suggests that over the age of 45 women are not even seen as spare parts, their usefulness is over. Ours is a youth-oriented culture but getting older is more damaging for a woman; a man looks to the aging process as the start of a new role, as a status-gaining situation. Women tend to experience aging as distasteful.

There are no rewards for the older woman in western society: women do not tend to have careers and new horizons and challenges don't come their way at this age. Older women are not seen as being sexually desirable. Indeed, for women the aging process represents an identification with the physical aspects of life, not the mental (as is the case with men and aging). In our society women 'are' and 'appear' rather than 'do'. This situation means that many women do not see themselves as of value and worth. There are no challenges facing them from which to obtain satisfaction.

It is this feeling of worthlessness that Pauline Bart has looked at. Her work has concentrated on the psychological aspects of middle age, taking menopause as the tangible signal for women that age is upon them. She sees menopause as a time of psychological risk for women. This is especially true for those women who have put everything into their traditional role of wife and mother, that is, those women who stay at home raising a family, putting their energy into husband and family and being identified through them. These women experience menopause at the very time that their children are growing up and leaving home (after a period often characterized by conflict between mother and child). Also this may be a time when their husbands are often reaching a peak in a career or have grown away from them in interests

and friends. Suddenly, for these women, menopause signals a time when nothing is left of the life into which they have put all of themselves. For these women the psychiatric 'career' is one which is available and one which retains much of the 'femaleness' of their lives: the dependency, the helplessness, the devaluation of self. This 'career' allows them to receive reinforcement and attention for this role.

Bart comments that many of these women are confronted with the meaninglessness of their lives. They experience role stress because of their changed status, a change which gives them little direction or focus. They experience physical symptoms that are a disconcerting reminder of the changes. They experience a diminishing of status as they grow older and further away from the 'sex symbol' or 'mother' esteemed(?) by society.

Next month, in the second part of this article, Sarah Calvert discusses the controversy surrounding some treatments of the menopause and suggests alternatives.

Please note: In the space available in Broadsheet it is impossible to go into greater detail. This article is therefore an overview. Further information can be obtained from the author, c/- Broadsheet or from the sources listed at the end of the second half of this article to be published next month.

Menrium treats
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that bother him
most.



The menopause is a time when many women experience a variety of symptoms. These symptoms can be very bothersome and can affect a woman's quality of life. Menrium is a natural hormone replacement therapy that can help relieve these symptoms. Menrium is made from natural plant sources and is safe for use. It can help relieve hot flashes, night sweats, mood swings, and other symptoms of the menopause. Menrium is available in tablet form and can be taken daily. It is a natural and safe way to manage the symptoms of the menopause.



Send your contributions for the
Hogwash pages to Broadsheet,
P.O. Box 47261, Auckland.

hogwash

*Contributors:
Mandy Hawkins
Marjorie Manthei
Linda Erikson
Lots of contributions
to Hogwash are
Xerox copies.
Unfortunately these
don't print, so
please could you
send in originals
only. Ta.*

Sir. — With the increasing number of road accidents occurring, I think a detailed investigation of the causes of them is necessary.

Recently, I conducted a small survey and found that women drivers are the major threat on the roads and, therefore, the chief cause of accidents — not alcohol.

Rather than just complain, I have compiled a list of measures which I'm sure will prove beneficial.

A woman over the age of 30 should be tested every year until the age of 45, when she should be banned from the roads.

All women should be put off the roads during working hours and a special licence should be necessary to drive at night time. — SAFETY FIRST.

chch. Star.

'Milkshake' girls pacy

By JOHN MANCER

WOMEN libbers would have brought the heavens down in anger if they'd been in the seaside resort of Whangamata during the week.

The local surf lifesaving club staged its usual carnival, and listed among it all was the women's beach sprint labelled "The milkshake, Derby."

It would appear the girls over that way were not put off by such a title as 15 of them lined up and local lass Sue Glentworth scrambled home ahead of the field.

Afterwards she was not available for comment but a club spokesman said that the title was meant as a joke and hadn't stopped girls from entering.

The men also participated in a beach sprint but that was simply tagged as the men's beach sprint.

When asked why it wasn't given a title as was the females' event the Whangamata surf club joker said:

"There was too much swinging on it."

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WOMEN POETS

Alicia Stammers, 67 Albert St., East Brunswick 3057, Victoria, Australia publishes women's poems on leaflets and hands them out at concerts, fairs, etc. If you would like her to publish your poetry, send it to the above address.

Female student (20), smoker, requires accommodation vicinity Waikato University (\$10-15), 1978. Contact Val Marshall, 37 De Vere Crescent, Hamilton.

Visual Arts Workshop.

I would like to form a Wimmin's Collective with a view to setting up a workshop environment. All the practical work will need to be decided and acted upon by a collective. The way in which the collective will function will be determined by wimmin interested in committing themselves to a visual arts workshop. The possibilities are open and infinite. Ideas and wimmin vision are needed. Basically, the environment could be one of sharing creative growth with other wimmin in a working environment. The space (Auckland) is almost definitely available. I hope to secure it by February 12 therefore a collective will need to be formed as soon as possible after the 12th.

Sharon Alston, Waiheke Island.
All enquiries to Sandra Coney at
Broadsheet, Phone 378-954 Mon-Wed.

Christchurch Women Artists

still require \$60.00 to cover remaining costs of hiring CSA Gallery, Christchurch, for the Women Show during the '77 Convention. Would any woman who went to, and enjoyed, the show consider making a small donation towards this.

Send C/o Anna Keir, Flat 6, 896 Colombo Street, Christchurch, 1.

Consciousness Raising

A lot of women have been expressing interest in joining or forming consciousness-raising groups.

Delwyn Lowen has offered to act as co-ordinator to put women from centres throughout NZ in touch with each other.

If you are interested, please send your name, address and phone number to Delwyn, P.O. Box 47-157, Ponsonby, Auckland.

Australian Women — continued from page 9

facilities. The Australian Government and society have recognised the need for the provision of child-care facilities.

"This does not mean that they are trying to provide day-care services for every child in Australia and are scattering them all over the country. But they do have a lot of women in the work force whose children need care, and they are trying to make sure these children are adequately cared for."

Dr McDonald was impressed with the Office of Child Care in the Social Security Department. "The office is concerned with the whole range of children's services, not just what we call child-care, but with pre-school,

kindergartens, play groups and child minders.

"It is not possible for any one type of service to suit every child. What this particular office tries to do is to encourage services that will suit whatever kind of child or family you have. This means that in planning you have got to get away from rigid patterns of child-care and look for new innovative ones."

Dr McDonald's visit to Australia made it evident that women are coping with similar problems across the Tasman. Apart from the lead Australia has in the provision of child-care facilities, she didn't think there were many differences at all between the two countries.

AUCKLAND

Halfway House (Auckland),
P.O. Box 47-157,
Auckland.
Ph: 767-635

NOW,
P.O. Box 2946,
Auckland.

WEL,
P.O. Box 17021,
Greenlane.

The Council for the Single
Mother and her Child,
P.O. Box 47-090,
Ponsonby.
Ph: 760-476

ALRANZ,
P.O. Box 47-169,
Ponsonby.

Broadsheet,
P.O. Box 47-261,
Auckland.
Ph: 378-954

Wages for Housework,
P.O. Box 72035,
Northcote Pt.

WONAAC
P.O. Box 68-266,
Newton,
Auckland.

Jigsaw,
P.O. Box 47090,
Ponsonby.
Ph: 760-001

CHRISTCHURCH

Women's Union,
Box 2258,
Christchurch.

Womens Refuge Centre
P.O. Box 7299
Sydenham. Contact Ph:
328-286, 41-669, 287-121
515-772, 598-441, 33-289

WEL,
P.O. Box 1798,
Christchurch.
Ph: 389-527

NOW,
P.O. Box 2720,
Christchurch.
Ph: 841-728

Canterbury University Feminists,
Student Union Building,
Private Bag,
Christchurch.

Christchurch Feminists,
51 Browns Road,
Christchurch,
Ph: 554-746

ALRANZ,
P.O. Box 13-129,
Armargh St,
Christchurch.

WONAAC
C/o P.O. Box 1770
Christchurch

DUNEDIN

Dunedin Collective for Woman,
P.O. Box 446,
Ph: 37-490

Working Women's Alliance,
20 Gillespie Street,
Dunedin.

Dunedin Lesbian Group,
P.O. Box 6105,
Dunedin North.
Phone: 77212.

WONAAC,
P.O. Box 446,
Dunedin.

ALRANZ,
P.O. Box 1289,
Dunedin.

GISBORNE

NOW,
3 Dickson Street,
Gisborne.

WONAAC,
P.O. Box 4026,
Gisborne.

WEL,
c/- Penny Isherwood (Secretary),
22 Elm Street,
Gisborne. Ph: 84-670

GREYMOUTH

ALRANZ,
P.O. Box 421,
Greymouth.

WEL,
7 Domain Tce,
Karoro,
Greyhound.

HAMILTON

NOW,
P.O. Box 350,
Hamilton.

Hamilton Feminists,
P.O. Box 751,
Hamilton.
Ph: 83381

ALRANZ,
P.O. Box 1246,
Hamilton.

WEL (Waikato),
P.O. Box 9581,
Hamilton North. Ph: 59-333

Waikato Abortion
Action Committee,
P.O. Box 7106,
Hamilton. Ph: 84-355

Women's Studies Association,
P.O. Box 13023,
University of Waikato P.O.,
Hamilton.

LOWER HUTT

Hutt Valley Feminists,
c/- 3 Taka Grove,
Normandale,
Lower Hutt.

MARLBOROUGH

NOW Marlborough,
P.O. Box 607,
Blenheim.

MOTUEKA

Motueka District WEL
Box 145
Motueka

NAPIER

Halfway House Action Committee
c/- 15 Chambers St,
Napier. Ph: 56263

NOW,
ALRANZ,
P.O. Box 1222,
Hastings.

NELSON

ALRANZ,
P.O. Box 476,
Nelson.

WEL Nelson,
Ph: Nelson 87410

Women's Emergency Centre,
(Refuge House)
Ph: Nelson 88605

NEW PLYMOUTH

Women's Centre
66 Brougham St.
New Plymouth
Ph: 79-532
or
P.O. Box 4030

*New Plymouth
Hours 10 am - 3 pm weekdays

Working Women's Alliance,
c/- P.O. Box 4030, N.P.
Margaret Medley - 83354
Elaine Gill - 84584
Gail Potroz - Eltham 8612

Women's Action Group
P.O. Box 4030 N.P.
Carol McLachlan - 88654

WEL Taranaki,
c/- Jann Iworth,
37 Ropiha St,
New Plymouth. Ph: 82-802

ALRANZ,
P.O. Box 5006,
Westown,
New Plymouth.

PALMERSTON NORTH

Gay Women's Group,
P.O. Box 1482,
Palmerston North.

Palmerston North Women's
Liberation,
38 Kimberly Grove,
Palmerston North.

ALRANZ,
P.O. Box 639,
Palmerston North.

ROTORUA

WEL,
91a Eruera Street,
Rotorua.

TAURANGA

WEL,
103 Grange Rd,
Tauranga.
Ph: 63260

TE AWAMUTU

Te Awamutu Feminists,
111 Hazelmere Cres,
Te Awamutu.
or Phone Carol Jeffcoat 432C
Jill O'Dwir 7249
Jenny Mossier 6334

TOKOROA

WEL Tokoroa,
P.O. Box 699,
Tokoroa.

ALRANZ,
P.O. Box 380,
Tokoroa.

UPPER HUTT

NOW,
18 Cruickshank Road,
Upper Hutt.

Upper Hutt Feminists
c/- 10 McHattie Lane,
Upper Hutt.

WELLINGTON

Rape Crisis Centre,
P.O. Box 3871 G.P.O.,
Telephone: 898-288

SHE & Circle,
P.O. Box 427,
Wellington.

Phone 851-540, 738-722

ALRANZ,
P.O. Box 19052,
Wellington.

WEL,
Room 2, 2nd floor,
Majestic Theatre Building,
Willis Street, Wellington.
Box 11-285,
Manners Street.
Ph: 739-321,
(Weekdays 10 am - 2 pm)

Herstory Press,
P.O. Box 3871,
Wellington. Ph 847-583

Wellington Lesbians & Circle,
P.O. Box 427, Wellington.
Ph: 851-540, 738-722

Working Women's Alliance,
P.O. Box 9012,
Wellington.

Wellington Feminists,
38 Wright St,
Newtown,
Wellington. Ph: 858-534

Wellington Feminist Collective,
c/- Women's Centre,
P.O. Box 3871,
Wellington.

WONAAC,
P.O. Box 2669,
Wellington.

Kidsarus,
P.O. Box 3871,
Ph: 847-583, 728-250

WEL Kapiti,
c/- 31 Callendar Terrace,
Paraparaumu Beach.

Media Women's Action Group,
Hilary Sinclair,
22 Warwick St,
Wellington.

WHAKATANE

WONAAC (Whakatane),
47 Lord Cobham Ave,
Whakatane.

Whakatane Women's Collective,
Theatre Action Group,
15 Victoria Ave,
Whakatane.

WANGANUI

Wanganui Abortion Action Group,
Ph: 34-130,
Wanganui.

WHANGAREI

NOW,
P.O. Box 1313,
Whangarei

Gay Women's Group,
P.O. Box 5083,
Regent,
Whangarei.

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Full set of back issues: \$15

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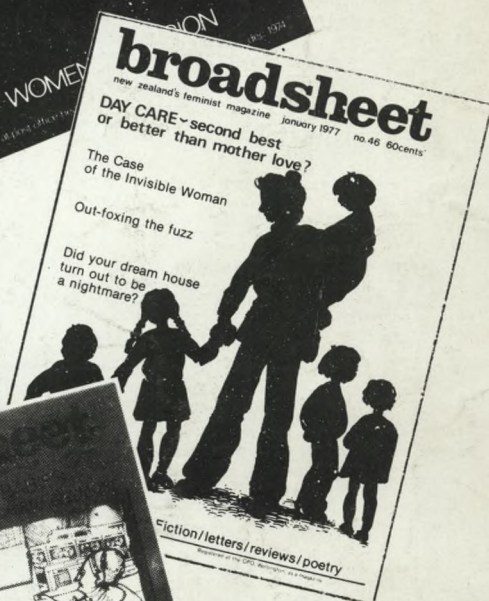
No 22 September 1974: Women in the arts in New Zealand, women writers, Robin White, Sue Holmes, Katherine Mansfield and others.
 No 23 October 1974: Women in advertising, models, airline advertising, working in the freezing works.
 No 24 November 1974: Aging and older women, interview with Freda Cook, psychiatric hospitals, turning thirty.
 No 25 December 1974: Women and religion, muslims, women in the Catholic church, Virgin Mary or fallen woman.
 No 29 May 1975: Chinese women, interview Robin Morgan, women lawyers, IUDs, separatism.
 No 30 June 1975: Payment for housework, consciousness-raising, IWY, Vietnamese women.
 No 31 July 1975: Women's Centres, how Broadsheet operates, abortion counselling, Greer, Reid on IWY, Sue Kedgley on NZ.
 No 32 September 1975: Mastectomies, female offenders, report on Select Committee on Women's Rights.
 No 33 October 1975: Rape, the morality of abortion, women and politics.
 No 34 November 1975: Solo mothers, mothers' benefit, demystifying parliament, separatism revisited.
 No 35 December 1975: Home delivery, Bobigny abortion trial in France, baby wage, hating housework.
 No 36 January 1976: IUDs, politics of housework, feminists bringing up daughters, unemployment benefit.

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