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## Women & Healthcare

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*WMST 101 - Fall 2018 - Chapman*



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# The Egg and the Sperm

An article by Emily Martin provides evidence that even science, which is thought of as objective and irrefutable, places men on a pedestal.



So, how is the egg and sperm represented in scientific literature?

## Egg

- "Sheds only a single gamete"
- Passive
- Waiting to be rescued
- Wasteful & Degenerated

## Sperm

- "Sheer magnitude"
- Burrows in the egg
- Remarkable hero
- Strong tails

Many biology textbooks use androcentrism to tell the "story" of fertilization through a male point of view which marginalizes femininity. The process emphasizes feminine and masculine stereotypes, thereby exposing the metaphor of the literal social implication of gender. Women are represented as the damsels in distress and that their life will only be fulfilled when a man is present.

**In Reality...** research suggests that the surface of the egg is actually designed to trap the sperm and prevent its escape using complex, adhesive molecules on the surface. It provokes the question: why isn't this presented in most modern scientific literature?

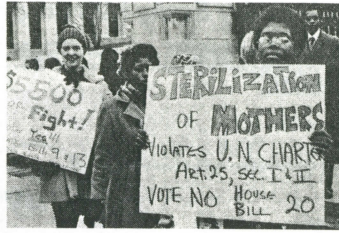


# Timeline

**1907**  
Involuntary sterilization act was signed into law

**1929-1941**  
More than 2,000 eugenic sterilizations in the US

**1940**  
Downfall eugenic movement, widespread uses of sterilization of black women



**1924**  
Virginia Sterilization Act was signed into law



**1931**  
Margaret Sanger wrote "My Fight for Birth Control"

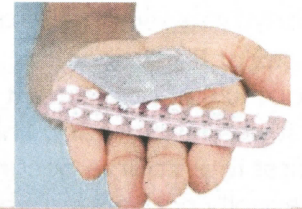
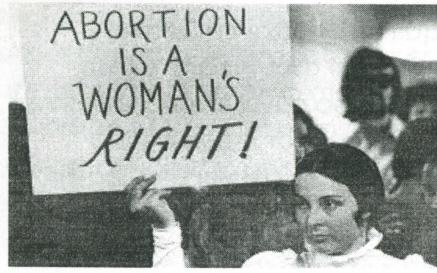


# Timeline

**1965**  
Griswold v. Connecticut ruled that married women were able to use birth control & condoms

**1973**  
Roe v. Wade ruled a woman's choice to have an abortion is protected by her right to privacy

**2004**  
"Unborn victims of violence act" was signed, giving zygotes, embryos, and fetus the same legal rights as a person



**1972**  
Single women were able to use birth control & condoms

**1977**  
Minors could use birth control & condoms

**2010**  
Affordable Care Act was signed into law by President Obama



## Healthcare Stats

### Sexual Education Experience

- Nearly **half (47.8%)** of all high school students in the US have had sex at least once.
- About 10% of adolescent girls who have sex before age 20 report that it was involuntary. This percentage increases the younger the first intercourse occurs.
- A sexually active teen who does not use contraception has a **90% chance** of becoming pregnant within a year.

A nine-year, **\$8-million** evaluation of federally funded **abstinence-only-until-marriage** programs found that these programs have **no beneficial impact** on young people's sexual behavior. Students who received abstinence-only sex education were no more likely to delay sexual initiation, have fewer partners, or use condoms when they did become sexually active than were students who received other forms of sex education.

### Teen Pregnancy and Contraception

- Between 1990–2005, the pregnancy rate for teens **declined by 41%** overall. However, the pregnancy rate for teens ages 15–19 **increased** from 69.5 per 1,000 in 2005 to 71.5 pregnancies per 1,000 in 2006, halting a decade-and-a-half decline.
- In 2006, the **US had the highest teen birth** rate among comparable countries. It is three times higher than the teen birth rate in Canada, seven times higher than in Denmark and Sweden, and eight times higher than in Japan.
- As of 2010, 26 states had some requirement (through laws, regulations, or attorney general opinions) that insurers that cover prescription drugs and services also cover contraceptive drugs, devices, and related services. Twenty of those states include an exemption allowing employers or insurers, or both entities, to **refuse to provide or pay for contraception** coverage if they object for religious reasons.

## Healthcare Stats

### Hysterectomies

- A Hysterectomy is the surgical removal of the uterus.
- Hysterectomy is the **second** most frequently performed major surgical procedure after cesarean delivery among reproductive-age women.
- In 2008, the four conditions most often associated with hysterectomy were uterine fibroids, menstrual disorders, uterine prolapse, and endometriosis.
- Only about **ten percent** of the more than 600,000 hysterectomies performed in the U.S. each year are considered potentially lifesaving.

### Genital Mutilation

Genital mutilation is also known as female genital cutting and female circumcision, is the ritual cutting or removal of some or all of the external female genitalia. The practice is found in Africa, Asia and the Middle East, and within communities from countries in which FGM is common. UNICEF estimated in 2016 that 200 million women living today in **30 countries**—27 African countries, Indonesia, Iraqi Kurdistan and Yemen—have undergone the procedures.

The practice is rooted in **gender inequality**, attempts to control women's sexuality, and ideas about purity, modesty and beauty. It is usually initiated and carried out by women, who see it as a source of honour and fear that failing to have their daughters and granddaughters cut will expose the girls to social exclusion. Adverse health effects depend on the type of procedure; they can include recurrent infections, difficulty urinating and passing menstrual flow, chronic pain, the development of cysts, an inability to get pregnant, complications during childbirth, and fatal bleeding. There are **no known health benefits**

# Healthcare for Men vs. Women

Women are more likely to be employed in work without health insurance benefits and are more likely, compared to men, to be covered as a dependent by another adult's employer-based insurance. The experience of receiving healthcare is different if you're a man or a woman—if you're a woman, you're out of luck. For example, the female mortality rate in coronary bypass surgery is higher than males because doctors often dismiss women and the disease is caught too late. Research also suggests that doctors are more likely to consider emotional factors and assume the cause is psychosomatic when diagnosing a female patient, prescribing more anti-anxiety and mood-altering medication for women than men.

As discussed in the Egg and the Sperm, **androcentrism** is the default lens in medicine, and this has repercussions when women are not properly supported and treated. Until recently, women were often not included in clinical trials because it was thought their hormones could skew trial results and excluding them would protect their fertility. Additionally, more money is spent on diseases that are more likely to afflict men.

**Medicalization**, the process in which normal functions of the body are seen as indicative of disease, puts women at risk as their natural bodily functions (changes due to childbearing) are viewed as problematic. Women's concerns are not genuinely listened to by both male and female doctors.

In discussing women's health, it is also to look at the issue of corporate responsibility and environmental justice. Women's lives and health are greatly affected by corporations' impact on the environment, especially the issue of breast cancer. While affecting men sometimes too, breast cancer rates have been increasing in women due to environmental estrogens, a result of factors such as pesticides and plastics.

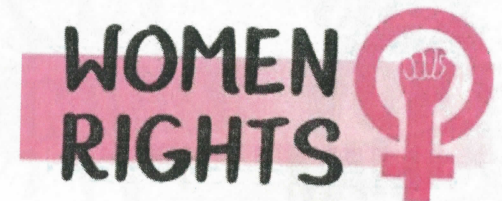
# "The Gender Gap in Pain"

Laurie Edward's article "The Gender Gap in Pain" spells out the differences in women's bodies and highlights the inequity in healthcare between men and women.

First, Edward makes clear that women's hormonal cycles, smaller organs, and higher body fat compositions play a role in how drugs affect our bodies. Drugs may work less effectively depending on sex, as women are less responsive to anesthesia and ibuprofen but with other medications women are at more risk for adverse side effects. These differences are important for millions of women living with chronic pain and who need these medications to get by. Edward cites that women are twice more likely to have multiple sclerosis, two to three times more likely to develop rheumatoid arthritis, four times more likely to have chronic fatigue syndrome, and autoimmune disease are three times more frequent than in men.

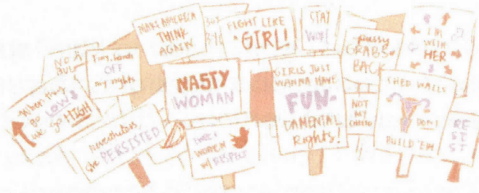
The main issue and argument in this article is that women appear to suffer from more pain, but their reports were more likely to be dismissed. Instead of caring for the physical pain, women are treated for mental health issues that might not even exist. Antidepressants further complicate this issue as they are absorbed differently in women and vary in effectiveness, depending on hormonal cycles.

A 2008 study found that women complaining of abdominal pain were 13 to 25 percent less likely than men to receive high-strength opioid pain medication. Conditions like fibromyalgia or chronic fatigue syndrome, diagnoses which disproportionately are attributed to women, illustrate the problem associated with the perceived reliability of the patient as narrator of her pain.



*"Never underestimate the power of a girl."*

# Abortion



In the 19th century, the US started to ban abortion and it was common for women to get abortions, illegally. They originally decided to ban abortions for "therapeutic reasons" that was ultimately up to the legal system to determine.

Eventually, there was a need for the repeal of abortion banning and this drive was initially because doctors were complaining about women trying to do abortions on their own at other clinics without the proper medical training. Feminists decided that women should have the right to do whatever they wanted to their body and every child welcomed in this world should be a wanted child. Gradually, abortion rights migrated to the top of the women's rights agenda.

In 1973, the hearing of Roe v. Wade ruled that the constitution protects the right to privacy of all citizens in America. This case proved that the banning of abortion violated that right and it was unconstitutional to ban what women could do with their bodies. On just one day, the 19th century bans were wiped and the final conclusion was that personal privacy included abortion and banning that would violate this right, but that right must be considered under state regulations. Meaning that the state has ultimate power of this right.

Today, half of Americans say abortion should be legal under certain circumstances. Statistics prove that 1 in 4 women will have an abortion by the age of 45, but the number has come closer to 1 in 3. There are many anti-abortion activists that wants the procedure to be illegal and this view has become the mainstream.

# Birth Control: *My Fight for Birth Control* (Margaret Sanger)

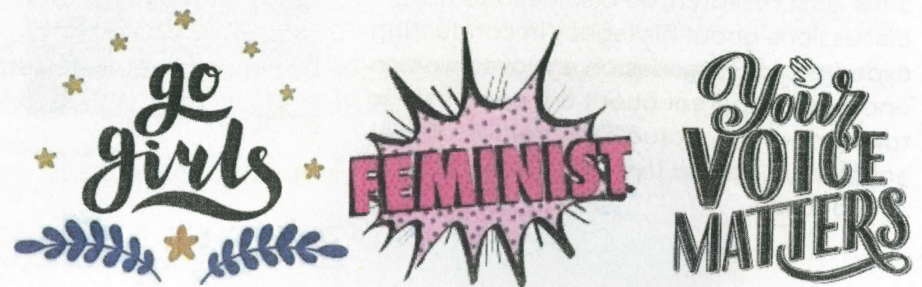
> *My Fight for Birth Control* is a telling story regarding the Sacks family, Mrs. Sacks had become pregnant with an unwanted child. The family struggled financially so instead of getting an abortion she used tolls from a neighbor to carry out the procedure. This led to severe health problems for her resulting in house doctors and nurses being called in to aide her.

> The doctor aided her to recovery, however when she asked how she could prevent unplanned pregnancy the medical staffs' remarks were: "Tell Jake [her husband] to sleep on the roof ... He can't say no so you have to".



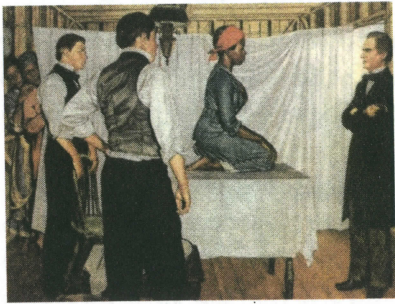
> A few months later the exact same series of events occurred however this time Mrs. Sacks tragically passed away

> This narrative illustrates how sexist medical practices can lead to horrendous consequences as well as how the woman in a relationship is expected to be submissive to the man. Medical information was purposefully being withheld from the woman, rejecting her own agency.



## Medical Experimentation on Black Women

An important detail is neglected from the history of Dr. Sims, or so called "father of gynecology": he conducted medical experiments on enslaved women in the 1800s in Montgomery, Alabama.



Sims completed these painful experiments without anesthesia to enslaved African American women who were no longer of value to slave owners because they could not give birth to future slaves. The surgery was performed on women to repair a condition of an opening between the vagina and bladder (or rectum) which usually comes after traumatic childbirth. The woman's dignity would be stripped from her as she lied naked while

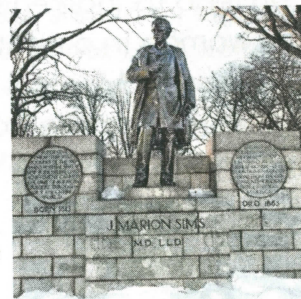
the experiment was done. She would be awake during the surgery because there was the ignorant belief by many White doctors that Black people did not feel the same pain.

### 3 WOMEN OF EXCEPTIONAL BRAVERY

Three known names of enslaved women who underwent experimental surgeries by Dr. Sims are Anarcha, Lucy, and Betsey. Anarcha was a seventeen-year-old girl who had a very traumatic labor. Lucy cried out in pain and recalled that she felt as if she were going to die during the surgery.

### A STORY UNTOLD-

The foundations of modern gynecology and how it was built upon the body and pain of African American women is muted. There are several statues of Dr. Sims that falsely claim he treated Black and White women alike. While it is okay to acknowledge that some women today are benefiting from Sims' past research, we also need to have discussions about his legacy in conducting experimental surgeries on enslaved women and be transparent about the past. Instead of taking down his statue, the addition of the entire story behind the concealed past is proposed.



<http://www.thusd.com/exhibition-of-giants-community-gardens-public-space-for-marion-sims-statue/>

## Intersectionality and Healthcare

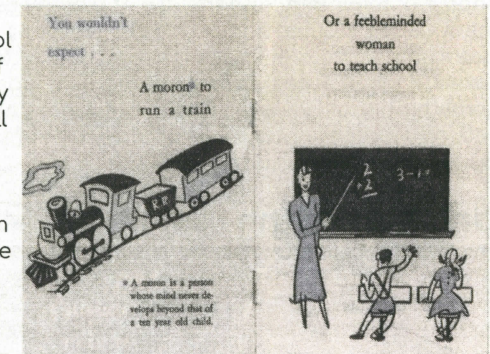
Due to the continuing of institutionalized racism and the history of reproductive oppression, many African American women today have limited access to adequate reproductive healthcare, higher rates of reproductive health issues, and are disproportionately impacted by restrictions on health services. Low-income people are especially likely to lack control over their reproductive choices. In 2011, 25.9% of African-Americans lived at or below the poverty level, compared to 10.6% of caucasians in America. Women, specifically, are at a much higher risk of becoming impoverished as well. The poverty level effects what kind of insurance and health care individuals can afford, if any at all.

### Modern Day Eugenics

The concept of "improving" a gene pool through sterilization or the practice of eugenics, didn't begin in Nazi Germany as many believe. In the 1927 Buck v. Bell case, a young black woman who was raped by a family member, becoming pregnant out of wedlock, was deemed "feebleminded" and taken to an asylum where she was sterilized. These forcible operations were justified by avoiding "morons" being born into future generations. Ultimately, about 70,000 Americans were sterilized.

#### 1950s Propaganda for Forced Sterilization\*

On top of this, many women were taken away and kept in separated colonies where they would not be able to reproduce. Those who were sterilized were disproportionately women of color. They were comprised of young "promiscuous" women, children of Mexican, Italian, and Japanese immigrants, and women and men who infringed the sexual norms of society.



### Sterilization Today

Although California's eugenic sterilization law was repealed in 1979, there was still existing legislation that allowed for these operations in state prisons in accordance with certain criteria. In 2013, it was uncovered that three dozen unauthorized tubal ligations were performed. The majority of these inmates were African-American or Latina and were first-time offenders. The physician who was responsible for the sterilizations disgustingly remarked that the state would ultimately be saving money because they wouldn't have to pay for the potentially unwanted children's welfare. This breaking story led to the bill banning all sterilizations in California state prisons.

\*retrieved from <http://america.ojazeera.com/watch/shows/america-tonight/articles/2014/3/24/forced-sterilizationnursei-canseenothatitwassowrong.html>



# Women and Their Periods

"If men could menstruate...guys would invent slang ("He's a three pad man")... Clearly menstruation would become an enviable, boast-worthy, masculine event" -Gloria Steinam

When most girls begin their period, they begin a long journey of silence, embarrassment, and dread. Feminist Gloria Steinam uses satire to expose the shame of femininity and the use of biology as a justification for gender inequalities. Women shove pads or tampons on their sleeves on their way to the bathroom so no one knows it's their time of the month. Period products are taxed in most states while adult diapers, Viagra, and Rogaine are not. For something that has over 5,000 slang terms, like Bloody Mary, shark week, code red, and mother nature, it is actually one of the most ignored human rights issues around the globe.

## Uncovering the History of PMS

The following chart demonstrates the selective nature of biological difference

| Time  | Context of Era                         | Is PMS Debilitating? |
|-------|--|----------------------|
| 1930s | Great Depression                       | Yes                  |
| 1940s | WWII                                   | No                   |
| 1950s | Soldiers return                        | Yes                  |
| 1970s | Women's advancement; 2nd wave feminism | Yes                  |

The changing opinion of whether PMS is debilitating or not illustrates the patriarchal nature of women and work. PMS is not considered debilitating during WWII, when it was necessary for women to enter the labor force because men were off at war. The proposed Cult of Invalidism perpetuated the concept that women were not fit to work, as they were thought to be biologically different and would have fainting spells or nausea fits. However through analysis, we can uncover the hypocrisy behind the androcentric beliefs of femininity. Feminist Emily Martin says that menstruation is not a liability in the workplace- if women use up all of their sick days, they will go to work just as any other worker, even if uncomfortable.

## Passive Resistance

Emily Martin proposes that when women temporarily let go of their traditional roles of working a double-day due to PMS or their period, they are actually using "Passive Resistance". Not only does this release them from their daily burden, but it actually reinforces power relations.

# Affordable Care Act

In 2013, approximately 19 million women were uninsured. One study found that the lack of healthcare coverage results in 45,000 excess annual deaths. Being uninsured raises a women's risk of bad health, and this increases costs for public health care services, resulting in adverse long-term implications for families and society.

Before the Affordable Care Act (ACA, or Obamacare), women buying on the individual market were routinely charged up to 50 percent more for monthly premiums than men, a practice called gender rating. Now, this is illegal and insurance companies are required to cover the total costs of certain key preventative services specific to women's health, such as wellness visits and contraception.

Also before the ACA passed:

- Companies could deny you coverage based on pre-existing conditions, such as diabetes, high blood pressure, cancer, and even pregnancy
- Companies could place an annual or lifetime cap, meaning they could cancel your coverage if, say, you spent \$120k in medical services in a year
- About 79 million (1 in 4) Americans were uninsured or underinsured
- Coverage was inadequate as immunizations and other preventative services were not covered

The ACA protected those with pre-existing conditions, eliminated lifetime caps, and led to better coverage. The ACA also came with an individual mandate, which requires every person to purchase coverage or face a tax penalty; this was to increase the risk pool.

The ACA may have extended protections, but there is still a long way to go. One problem is equity, as poor women are less healthy than those who are better off, and unfortunately even with the ACA, healthcare costs are rising and low-income people are not supported.

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