

HIGHLIGHTING WOMEN'S ISSUES

Mansfield University Women's Studies Program Newsletter

Vol. 15 No. 2 Spring 2008

Someday a Woman Will Be President, by Shawndra Holderby

Someday a woman will be president. I heard this as a young girl growing up in the suburbs of southern Ohio. I was born in 1966, which allowed me to watch the women's movement develop as a young girl. I have to admit that from a very young age, I was hooked on the message that women and men should have equal opportunities, receive equal pay for equal work and that in the not so distant future, a woman would be president. I was also lucky enough to grow up in a household where I was encouraged to try just about anything. Although I took ballet lessons, I grew up after Title IX, which allowed me to play softball and soccer throughout my junior high and high school years. My parents always planned on both of their children, one boy and one girl, attending college. So, I have to say that I am disappointed that I am still waiting for a woman to be president. In 2006, a CBS poll found that 92% of those asked said that they would support a woman for president. That was up from a 1955 Gallup poll that said only 52% would support a woman for president. So why has it taken so long? Women have faced a true uphill battle when it comes to politics. After all this country was founded with the words that all men are created equal. There is no mention of women. And although it is in fashion these days to say that they meant women too. In fact, they truly meant men and more specifically men like themselves- white and wealthy. Only the most radical, such as Mary Wollstonecraft publically called for women to have the right to a voice in any

government and almost no one took her seriously. After all women in that period were confined to what was known as the female sphere of home and family. They were not supposed to have ideas about politics and the world outside their homes. Women who did were often labeled at the very least as unfeminine and some even had their sanity questioned.

At the Second Continental Congress, Abigail Adams implored her husband, "to remember the ladies and be more generous and favorable to them than your ancestors." She wanted women to have some voice in the new government that would allow them the opportunity to improve their circumstances when it came to finances, divorce, and the custody of children. She turned the revolutionaries' own ideas and words back on them when she threatened that women would "ferment a revolution and will not hold ourselves bound by any laws in which we have no voice or representation," if the congress failed to grant women a voice in the new government. In his response to Abigail, John Adams said that he had to laugh at her suggestions. The idea of women actively participating in the politics of the new nation was not taken seriously. Women were not granted the right to vote until the passage of the 19th amendment in 1920, 144 years after the Declaration of Independence.

Women have also faced much more insidious obstacles as well. In 1995, Ann Ruben, a psychologist from Florida who works with kids on self esteem, thought it would a good idea to make up t-shirts with

Margaret from the Dennis the Menace comic strip proclaiming that one day a woman would be president. The shirts were sold at Walmart, until they were pulled due to customer complaints. The store claimed that customers had complained that the shirts were offensive and that they went against family values. I remember thinking that it was strange that the idea of a woman as president could offend anyone. I have to admit that I hurried to my own Walmart, that had not already pulled the shirts, purchased the shirt and still wear it proudly. In this case, it seems that the old idea of women not participating in politics reappeared or perhaps it has really never gone away at all. We don't refer to them as unfeminine anymore, now we question their family values.

Regardless of the obstacles, women have run for president since the nineteenth century. Although Hillary Clinton has been the most viable candidate for president to date, a number of women have run for the office of president. Some of the better known are Victoria Woodhull in 1872,

Protecting My Daughter

by Louise Sullivan-Blum

Much of the last 18 years of my life has been spent trying to protect my daughter – which is particularly obsessive when you take into account the fact that she is only 12 years old. I always knew that I wanted a child, and from the moment I first fell in love with another woman, I knew that, given the climate of American culture, life would always be a little more complicated for any child of ours.

No one could ever say I entered into this endeavor of parenthood recklessly. Connie and I were friends for nearly a year before taking our relationship to the next step. We were together two years before having a commitment ceremony, and it was

Senator Margaret Smith Chase in 1964, Representative Shirley Chisholm in 1968, Elizabeth Dole in 2000, and Carol Moseley Braun in 2004. As I have watched the debates and primaries to date, I must admit I have rooted for Hillary and not just because she is a woman. I have been impressed with her dedication to improving both health care and child care in this country. It is important that we elect female candidates at every level of government. Abigail Adams realized that women who had no female representation had little chance of having their concerns fully addressed. I believe that with women holding only 16% of the seats in the Senate (16/100) and 16.1 % in the House of Representatives (70/435) the same is true for us. As a Pennsylvania resident, I must wait until April 22 to cast my vote for a woman candidate for president. After all, I don't want my own daughter to grow up wondering why there hasn't been a woman president yet.

another two years, two months, and two days before our daughter was born – time I spent researching sperm banks, donors, doctors, and insemination options with the rigor of a defense analyst (well, maybe *more* rigor). This was followed by more years of investigative ardor, into everything from medical care to educational options. You could hardly expect my recent decision to have Zoë vaccinated against HPV to have been anything less than torturous.

From the moment Zoë was born, she received regular vaccinations. Before she'd even left the hospital, she'd been vaccinated against hepatitis B. Some of my friends were opposed to vaccines, but I believed in their ability to protect populations once routinely decimated by disease. Because of vaccination, smallpox, a disease which killed over a third of its victims, has been

eradicated. Polio killed and paralyzed its victims only a decade before my birth. I remember lining up with my classmates in elementary school and being handed the vaccine in a small paper cup. We joked with each other about what the nurses might really be giving us. But I'd grown up with stories about my father's brother, stricken with polio as a toddler. I drained the cup. Even then I believed in the power of medicine.

Besides, it was the 90s – an era of progressiveness and hope. Bill Clinton had come into the presidency on a wave of Gays in the Military, effectively dissipating the dark cloud of the Reagan-Bush era. Sure, there were genocides in Bosnia and Rwanda, but at least things in this country seemed to be moving forward. I had a close relationship with Zoë's pediatrician. I believed in his recommendations.

A decade later and those hazy-hormone days of breastfeeding had melted away like snow in the face of global warming. Voting had failed us. Democracy was a sham. A mediocre little Texan man that we hadn't elected had taken us to war in a part of the world where we had no business except, of course, business – capitalism, oil, and profit. "Support the troops" became a rhetoric that disenfranchised the people who opposed the war and had little to do with the reality of the returning veterans, shattered by post traumatic stress disorder, brain trauma, and limbs blown off by suicide bombs. The economy began an unwieldy and inevitable slide toward collapse. Marriage and its inherent benefits remained unreachable for most gay and lesbian people. The darkness was back. And the much loved doctor who had delivered my daughter and seen her through her early years had left the area, leaving me with a team of doctors with whom I had no special rapport.

When Gardasil, the first vaccine to protect against a potential cancer, became available two years ago, it was never mentioned during any of our appointments with Zoë's new pediatrician. Unlike the other routine childhood vaccinations like measles, polio, tetanus or diphtheria, the HPV vaccine seemed to be entirely irrelevant. It didn't even occur to me to wonder if Zoë should receive it until last summer, when three things happened: Zoë turned eleven, news about the vaccine hit the media, and my health care plan announced that it would cover it.

Gardasil was immediately engulfed in a firestorm of controversy. When the governor of Texas moved to add it to the list of mandatory childhood vaccinations, all hell broke loose. There was certainly reason to be concerned – after all, the vaccine was manufactured by Merck, the people who brought us Vioxx, a drug whose potential side effects had apparently been hidden from the public until those pesky heart attacks started happening. Poised on the brink of disaster, the giant pharmaceutical company needed a comeback. The fact that Merck had some dubious ties with the governor's campaign did not do much to assuage my apprehension.

Not surprisingly, however, the ensuing controversy had little to do with concerns about marketing and safety and everything to do with sex. Because HPV is spread by sexual contact, it evoked an outrage of Puritanical proportions. How could we even think about little 9 to 11 year old girls having sex? They shouldn't even be thinking about it. They should be off innocently playing with their amply breasted Barbies instead. In fact, vaccinating them against a sexually transmitted disease might cause them to run right out and have sex. We might as well hand them condoms and teach sex ed in the schools.

The fact that the people making this argument were the same people who also considered homosexuality a disease in need of a cure (or perhaps a vaccination) and opposed abortion only to lose any interest in the welfare of children once they vacated the womb did little to influence my thinking. I scheduled Zoë for the first of the three injections that made up the vaccine. When the nurse gave her the shot, she immediately became dizzy and nauseous. Her arm throbbed. The nurse had her lie down to keep from fainting, while assuring me this was a common reaction.

On the day her second injection was scheduled, a friend happened to be visiting. A health care lobbyist, she was appalled by the choice I'd made. "We don't know anything about the long-term effects of this vaccine," she told me, heatedly. She wasn't vaccinating her daughter, who was the same age as Zoë. "They say it could cause paralysis," she said. "Or worse!" Unease shot through me. I saw my daughter, lying on that table in the pediatrician's office, rubbing her vaccination site. Maybe I'd made the wrong decision. What if I was in fact jeopardizing my daughter's long term health? I cancelled the appointment and spent a few grueling weeks attempting to find some objective information.

Of course, in a country where pharmaceutical research is generally funded by pharmaceutical companies and the internet is teeming with bloggers of every political persuasion, objective answers are not always easy to find. One woman was convinced her daughter's death was tied to the vaccine. Some parents reported cases of Guillian-Barre, a neurological disorder that some link to vaccinations. Others warned against the use of mercury-containing preservatives, which they blamed for the rise of autism, despite a statement by the Centers for Disease Control that the vaccine contains no mercury. Some believed that girls who

fainted were at an even higher risk. I pictured Zoë again, the way the color had drained from her face when the nurse gave her the shot. My stomach churned.

Merck has run a multimillion-dollar ad campaign, citing clinical trials of 20,000 women and insisting that there have been no adverse health effects. Organizations like Planned Parenthood have commended the FDA for approving Gardasil and currently offer the vaccine at their clinics. According to Louise Richardson, Vice-President for External Affairs of Planned Parenthood of the Southern Finger Lakes, "this is an amazing breakthrough – people should be dancing on the rooftops." Not only does the vaccine protect against the strains of HPV that cause 70 percent of cervical cancer, it also protects against the strains that cause 90 percent of genital warts.

Though the CDC notes that Gardasil is most effective prior to exposure to HPV, a recent *Newsweek* article noted that only two out of every 10 women between the ages of 9 and 26 have been vaccinated so far. The cost is high – around \$360 for the three injections. Insurance programs tend to cover the vaccine, but over 46 million Americans have no insurance coverage. While children under 18 are covered by the CDC's Vaccines for Children program, 27 percent of women ages 19-26 are uninsured. Though the price is staggering compared to other vaccines, Richardson notes that the cost is about the same as that for a colposcopy, the first diagnostic test ordered following an abnormal Pap smear.

I still don't know if I made the right choice to have Zoë vaccinated. I don't know if this will all turn out to have been a grand hoax perpetrated on the American people by a soulless pharmaceutical monster. But I do know that cervical cancer is the second leading cause of cancer deaths among women. According to the American Cancer Society, over 11,000 cases of

invasive cervical cancer will be diagnosed in 2008. Of those, nearly 4,000 women will die. Early screening such as Pap smears can detect cervical cancer, but only if women have access to that screening.

I only have so much more time left to protect my daughter. One day she will grow up and one day she will have sex, and it won't necessarily happen in that order. When she grows up, she might not have health insurance, and it is this, more than anything else, that influenced my choice to have her vaccinated. I imagine my daughter as a young woman: tall and lovely, full of grace. Her dark eyes are sparkling. She is smiling delightedly, with an ironic sense of humor that is all her own. Her life is before her. I have held this picture in my mind since the moment I knew that I was pregnant with her. I have done everything in my power to give her a good start on her life. To imagine her suffering, in pain, denied the medical treatments that could save her because we live in a country whose opportunities and benefits are selective, is inconceivable to me. I cannot bear this alternate picture. This is all I know. This is all I have to work with.

Why It Is Important To Be “One Less” by Whitney McKnight

She is 21, a college student, and a mother. She could be your daughter, sister, mother, girlfriend, or wife. She also has high risk cervical cancer. I met her in high school. Her cancer is so progressive that she is looking at a hysterectomy. The virus that caused her cancer could have been prevented had she known that it existed. She, along with 20,000 other women in the United States, is infected with the human papillomavirus also known as HPV.

What Is HPV?

HPV is a sexually transmitted disease that has been silently sweeping the nation since its discovery in the last 1980's. The virus is transmitted through any type of skin to skin contact where an active infection is present. There are currently 110 known strands of the virus that infect the body. Forty of these strands can cause cancer in both men and women.

“I was mortified when I found out”, she said, “I thought I was careful.” She discovered that she had HPV during a routine PAP test at her local clinic. She was one of the lucky few that did not have the genital warts that coincided with some HPV infections. She described how she stared out the window on the way home unable to comprehend how something like this could have happened to her.

How Do You Know?

Genital warts are the first sign that you have an HPV infection. The warts are flesh colored bumps that can be seen on the skin. They are most often found in the genital region, but can also infect the mouth. Not having visible warts does not mean they do not exist. Some warts can be found on the cervix. These can only be seen by your healthcare provider. Women can be tested for HPV during a regular PAP test. However, if your PAP test comes back normal, it does not mean that you do not have HPV. Normal results mean that you do not have an active infection. Without an active infection, the HPV virus can not be detected in women. It can lay dormant in your system for a few days, weeks, years, or even your entire life.

There is no PAP test for men. Medical professionals are aware that they cervix of a female is the site affected by HPV. They are unsure as to where the virus affects men. The only evidence of an HPV infection in males is through genital warts.

HPV can also cause certain anal and penile cancers in men.

She was unfortunate enough to have over half of her cervix removed by cone biopsy at the age of 20. The biopsy was unsuccessful in removing the cancer. She is now faced with the decision to have another biopsy which will make it impossible for her to have children, or have another child at 21, and a hysterectomy. She feels as though her infection could have been prevented had she, or her partner known that the virus existed.

How Do You Protect Yourself?

“Abstinence regarding all sexual activity is the only way to prevent HPV” Chris DeHaven the Family Planning Coordinator at the Guthrie Clinic said, “85% of women will have HPV sometime in their life with only 50% finding out through a PAP test.”

For those who chose not to remain abstinent, it is important to use condoms, have any visible changes in the genital region checked by a doctor, and stay honest with your partners. Women should have PAP tests every year. It is also important for both men and women to be honest regarding their sexual history in order to ensure maximum safety since there is no cure for HPV.

Merck is a pharmaceutical company that has discovered the only form of prevention for HPV. The Gardasil shot. The shot does not protect against all strands of HPV, but does protect against the four most common strands that cause cervical cancer. The shot is being administered to girls as young as 10, and is covered by most insurance companies.

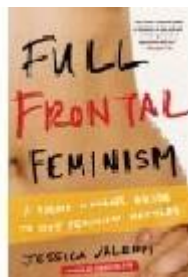
She has come to terms with having HPV. “It’s not as emotionally devastating as you would think”, she said. More education regarding HPV could have prevented her from its devastating effects.

Had she known about the virus, how it is transmitted, and that the Gardasil shot existed she would not be a 21 year old woman with cervical cancer. The strand that she contracted could have been prevented by Gardasil. Although she is not the only person in her relationship infected with HPV, she is the only one suffering its consequences. “Men carry it too. They need to be just as responsible as women are. I am coming to understand that if you have only had one partner, but your partner has had as few as one before you, you can still get the virus.” she said, “People are not aware of how serious this is because no one will be the face for it. Everyone is too afraid to admit that they have it. You can not have a ghost with a disease.” Her name is Megan Wells. She is a student at Mansfield University. She is real, and if someone had informed her, she too could have been “one less”.

Not Your Mother’s Feminism

On March 20, 2008, the author of *Full Frontal Feminism* and founder of the popular blog Feministing.com spoke to an audience of approximately 160 students, faculty, and community members.

The 29-year-old speaker had no trouble engaging her audience as she talked about stereotypes of feminists and feminism. “What is the first word you think of when you think of a feminist?” she asked. “Pissed,” “ugly,” “hairy,” “man-hating,” audience members answered. Valenti went on to explain that these stereotypes are perpetuated by the media in order to discourage



from considering themselves feminists.

Valenti spoke about the genesis of her blog as an effort to allow women who didn't have access to Women's Studies programs or classes to learn about feminism today. She also read from her book *Full Frontal Feminism: A Young Woman's Guide to Why Feminism Matters*. Some of the book's chapter titles reveal the flavor of Valenti's writing as well as her talk: "You're a Hardcore Feminist, I Swear," "Boys Do Cry," and "My Big Fat Unnecessary Wedding and Other Dating Diseases."

Following her talk, Valenti signed copies of her book and spoke informally to audience members. One testimony to the success of her talk was that the bookstore representative who was selling copies of her book reported that they not only sold out but also could have sold more copies. "That's the first time this has happened," she said.

Director Passes Torch

Beginning with the Fall 2008 semester, Dr. Shawndra Holderby, History, will be the new director of the Women's Studies Program. Holderby has developed and taught many popular Women's Studies courses in the last five years including American Women's History, European Women's History, History of Witches, and History of Women through Television. She replaces outgoing director Dr. Judith Sornberger, English.

Vel Phillips Marches On (and on) By Lynn Pifer



Former Milwaukee Alder, Vel Phillips, addressing the

crowd at the WI Black Historical Society on September 28, 2007.

Many Americans know about racial segregation in the South before the Civil Rights Movement. But how many of us realize the extent of racial segregation in Northern cities? Restricted housing practices were a problem in a number of cities, including Milwaukee, WI, where African Americans could not buy or rent homes in white neighborhoods, regardless of their income, social status, or service in the U.S. military.

Vel Phillips was the first African American and the first woman to be elected to the Milwaukee City Council. She and her husband--the first husband-and-wife law team to be admitted to the Eastern District of the federal bar--were well off financially, but they could not buy a house outside of the overcrowded "core" section of the city (Timm 20). In 1962 Phillips proposed a Fair Housing ordinance to overturn the restrictive housing practices in the city. She proposed this ordinance three more times between 1963 and 1967, and the entire time she was the only alder to vote for it. She was the victim of many threats and hate mail, including a letter streaked brown with a P.S. that indicated it had been used as toilet paper (Timm 22).

In 1967, Father James Groppi and the N.A.A.C.P. Youth Council, with members as young as nine years old, volunteered to help Alder Phillips by marching from the African American neighborhood across the 16th St. Viaduct -- locally known as the Mason-Dixon line--and into an all white neighborhood. The nearly 200 peaceful marchers were met with an angry white mob of at least 5000 (Rozga 34). The mob threw bricks and bottles and threatened to kill everyone, especially Father Groppi, for whom they'd brought a casket with "God is White" and "Father Groppi

Rest in Hell" painted on the sides (Rozga 30). Groppi, Phillips, and the Youth Council returned the next night with 300 marchers, and met an even larger white mob.

Despite the violence, these Northern Civil Rights protesters marched for 200 consecutive nights. They always marched with Commandos—a disciplined group of volunteers who strategized every march, surrounded the marchers for their protection, and remained nonviolent themselves – unless someone attacked the marchers. Then they hit back. It was a new Northern take on King's nonviolent philosophy. Some nights the Youth Council marched in the Mayor's neighborhood. Other nights they would pick an alderman or other city official to serenade. Father Groppi and Vel Phillips were both arrested for violating the mayor's injunction against marching, but the marches continued. And Alder Phillips continued to introduce her Fair Housing Ordinance.

Milwaukee's marches didn't end until several days after Martin Luther King, Jr. was assassinated. Race riots had broken out in other cities across the country, but in Milwaukee, people marched with the Youth Council, aligning themselves with a specific demand: fair housing. This time the city council listened, and passed a fair housing ordinance that was tougher than the federal law recently signed by President Johnson (Timm 22).

Vel Phillips still lives in Milwaukee. I was lucky enough to meet her last September, when she was honored at a March on Milwaukee Community Conference and a Commemorative March across the 16th St. Viaduct, which has been renamed The Father Groppi Unity Bridge¹. Groppi's widow, activist Peggy Rozga, pronounces "March on Milwaukee" not as a noun phrase (like The March on Washington), but as a command: "March *on*,

¹ Father Groppi died of cancer in 1985 (Rozga 38). The bridge was renamed in 1987.

Milwaukee!" At 81 years old, strutting along at the front of the line, Phillips was the embodiment of this command. She addressed the crowd and recalled the situation she faced year after year on the city council: "It's hard enough having to deal with a bigot," she said, "but when you've got to deal with a whole bunch of *dumb* bigots, you're in trouble."

She also reminds us, "we still need activists--people who are willing to make sacrifices for positive change" (Phillips qtd. in Timms 22). March on, Vel Phillips. *March on.*

Vel Phillips and Peggy Rozga lead the Commemorative March across the Father Groppi Unity Bridge.

Works Cited

Rozga, Margaret. "March on Milwaukee." *Wisconsin Magazine of History*. Summer 2007. 28-39.

Timm, Michael. "The Fight for Fairness: Remembering the 19667 Open-Housing

Summer Women's Studies Courses

Summer Session IA

WS 1100 Introduction to Women's Studies

Cross-disciplinary and cross-cultural examination of the ways that language, images, and socialization have constructed women's roles. Examines contemporary women's issues (work and family, sexuality, violence against women), as well as the women's movement. Emphasis is on students (both female and male) working to discover the impact of these roles and issues in their own lives as well as in the

larger world. 8:30-11:55 Dr. Shawn Holderby

COM 3334, Gender and Communication
This course is designed to introduce students to the concepts of gender and how those concepts relate to communication. The course introduces students to important gender communication concepts such as gendered verbal and non-verbal communications, the social shaping of gender, gendered power and violence, sexual harassment, and gendered communication in educational, organizational, media, and relationship settings.

8:30-11:55. Dr. K. Sue Young

COM 3309-191, Gay and Lesbian Film
Based on the concepts and constructs of Queer Theory, this course looks at the relationships of the electronic media of film to minority sexual communities with a focus on gays and lesbians. Through on-line lecture notes, discussions, and viewing of select films students explore minority sexual images, specifically concentrating on gays and lesbians, in both mainstream and independent films. Minority sexual audiences are viewed within the cultural context in which these images and media developed and eventually flourished. Working under the concept of Queer Theory, that minority sexual cultures only begin to flourish after World War II, this course concentrates on minority sexualities, films and culture of the post World War II period to the present with a historical look at the period prior to World War II. Chuck Hoy, **online**.

Summer Session II

NUR 4402--summer session II--online--
3 credits

This course is designed to explore and analyze a wide range of women's health issues from a multidisciplinary perspective. Issues of interest to the participants in the class will be the primary focus, with expected concentration on occupational health, the influence of the mass media, mental health and substance abuse, acute disease, chronic disease, poverty, political issues, cultural issues, gender issues, sexual and reproductive health and research. The instructor will encourage the use of feminist pedagogy throughout the duration of the class. This implies that students are expected to contribute to the class at a high level. Assignments include a research paper, group project, active participation on discussion boards and 2 online exams. Dr. Denise Seigart

Psy 4422 Psychology of Women
Designed to introduce students to the myriad factors influencing the development of girls and women in a variety of cultures and societies. Areas covered include feminist scholarship and research; gender socialization, women's biology and health; sexuality, relationships and family, work, career, and power issues. Prerequisite: PSY 1101. Dr. Margaret Launius: online

Fall 2008 Women's Studies Courses

ENG 2220W/HON 2255W Civil Rights Autobiography

This course examines the Civil Rights Autobiography as a genre as well as the motivations people have for writing about their experiences in the Civil Rights Movement. It considers both the literary and historical concerns of a variety of texts written by Movement leaders such as Dr.

Martin Luther King, Jr. and self-described “foot soldiers” such as Anne Moody or Melba Patillo Beals. Students will develop critical reading skills and a greater knowledge of an important era of recent American history as they read, write about, and discuss a selection of autobiographies. Both formal and informal writing, and an oral presentation is expected in this course. Prerequisites: None. T-Th 10-11:15, Dr. Lynn Pifer

ENG 3320 Woman as Hero

The course is an examination of the ways in which women “fit into” but more often alter the archetypal (and patriarchal) hero construct in literature. The course also contrasts this construct with the matriarchal (or at least matrifocal) Virgin/Mother/Crone construct. When I have taught this course in the past, I’ve sectioned it in the following manner: The Traditional Hero and “His” Journey, The Woman as Traditional Hero, Women Heroic Buddies, Woman as Other, Reconsiderations and Alternatives. W 6:30, Dr. Bruce Barton

WS 1100 Introduction to Women’s Studies

A cross-disciplinary examination of the ways that language, images, and socialization have constructed women’s roles. Examines contemporary women’s issues (work and family, sexuality, violence against women) as well as the women’s movement. Emphasis is on students (both female and male) working to discover the impact of these roles and issues in their own lives as well as in the larger world. T-Th 2:30, Dr. Judith Sornberger

CELEBRATIONS

Renee Scoviak (Elementary Education major/WS Minor) is planning a July 2010 wedding. Her fiancé Ryan P. Albert is currently attending Lycoming college with a major in art Ed. He plans to get his MFA and teach at the

college level. Renee will graduate in December '08 and is planning to attend Bloomsburg University to get her reading specialist Master's degree.

Linda Rashidi (English and Modern Languages) has had her article “Translation of a Wild Tale” accepted for publication in the *LACUS Forum 2007*. She co-authored this paper with Christo Stamenov, her counterpart at Sofia University during her Fulbright leave last year. On March 7th, she also spoke to the 7th grade geography classes at Williamson Junior Senior High about Morocco and Afghanistan. She was invited by Bobbi Button, a former English major who now teaches English there.

Margaret Launius (Psychology) co-presented a workshop (with colleagues Drs. Peter Keller, Brian Loher, & Francis Craig) on designing undergraduate program assessment at the American Psychological Association’s annual convention. She also co-presented at this convention with a national panel of members of the Division 2 Society of Teacher’s of Psychology’s Project Syllabus on the best practices in syllabus development.

Lynn Pifer (English and Modern Languages) delivered her paper, “Broken Glass, Shattered Dreams: Birmingham 1963 in Fiction and Film,” at the 36th Annual Louisville Conference on Literature and Culture Since 1900 at the University of Louisville on February 22, 2008. This paper is part of a book chapter Dr. Pifer is writing about the literary depiction of events from the Civil Rights Movement, specifically Dr. King’s Birmingham campaign of 1963. Dr. Pifer also chaired the “Pop Culture: Reifications and Possibilities” panel at the Louisville Conference on February 23, 2008.

Kristin Sanner’s (English and Modern Languages) article “‘A man makin’ pies out of sorrell’: Exploring Issues of Gender and Family in Mary Wilkins Freeman’s Pembroke,” will be published in *You Are What You Eat: Literary Probes into the Palate*, which will be released this April. She will also present her essay “A Disturbingly Hearty Meal: Race, Consumerism and Cannibalism in Chesnut’s ‘Dave’s Neckliss,’” at the NEMLA Conference this spring.

Judith Sornberger (English and Modern Languages) has a poem “December 26” in the

current issue of *Ekphrasis* magazine. She has three poems forthcoming in *Sing Heavenly Muse*, a poem forthcoming in *Rock and Sling*, a poem forthcoming in *Ascent* and a two poems forthcoming in *Snowy Egret*.

Women's Studies Minor: 18 s.h.

PROGRAM REQUIREMENTS

WS 1100 Introduction to Women's Studies
3

Choose one Humanities course: 3

ENG 3326 Women's Literature
ENG 3328 Lesbian and Gay Literature
HST 2210 American Women's History
HST 3313 European Women's History
HST 3325 History of Witches
MU 2205 Women in Music

Choose one Social Sciences course: 3

COM 3334 Gender and Communication
NUR 4402 Women's Health Issues
PSY 4422 Psychology of Women

Choose two electives (6 s.h.) from the courses listed below, any of the courses listed above, and/or courses cross-listed with Women's Studies: 6

ENG 2220* Special Topics in Literature
(*when offered with Women's Studies content)
ENG 3305* Comparative Literature
(*when offered with Women's Studies content)
ENG 3307* Literature in English from around the World
(*when offered with Women's Studies content)
ENG 3320* Special Topics in Literature
(*when offered with Women's Studies content)
ENG 4401* Seminar in Literary Studies

(*when offered with Women's Studies content)
HST 3294* Topics in American History
(*when offered with Women's Studies content)
HST 3295* Topics in Global History
(*when offered with Women's Studies content)
HST 3296* Topics in European History
(*when offered with Women's Studies content)

WS 4410 Seminar in Women's Studies 3
