"I’m sick and tired of being sick and tired.” Fannie Lou Hamer (1963).

Course Description:
Welcome to Women’s Studies 533: Special Topics in Women’s Health. Your work in this course should help you to better understand the special issues in women’s health, specifically African American women’s health. Although the course will deal with many health issues, simple time and space constraints suggest that not all health topics could possibly be covered. This course concentrates on the health issues that are unique to African American women’s experiences, on their status as undervalued (and sometimes victimized) consumers of health care, and on the medicalization of women’s health issues and concerns. The course stresses the potential for women to become empowered with respect to improving their health and the milieu in which they live and survive.

Course Objective:
To investigate the power that medicine has in shaping health experts’ and lay individuals’ understandings of health and health practices. Particular attention is paid to how women’s health issues come to be seen as "social problems," past and present.

Class time and office hours
The class meets Monday, Wednesday and Friday from 11:00 am until 11:50 am for 15 weeks in Ingraham Hall 224. My office located in Ingraham Hall will be announced, as well as, office hours. If needed, additional conference time maybe scheduled by sending an email to mcquirter@wisc.edu.

Reading Schedule:
The syllabus is subject to change. Any modifications to the syllabus will be announced in class. All readings should be completed prior to the class period under which they are listed. Completing your reading assignments before class is critically important to your success in this class. You will be expected to use your knowledge of the readings in lectures, discussions and exam. Make sure you arrange your time carefully to complete the readings on time. You must participate; it will make a difference in your grade. Be prepared to read, write, respond, think, question, collaborate, and contribute to our discussions and how you can become empowered in your own rights in respect to women and their health.
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Course Materials


Other materials
In addition to the textbooks, the course materials include a reading guide and a collection of articles on e reserves.

Supplementary/Highly recommended text to be used for oral book presentation


Note: The books by Farmer and Fadimen are books which focus on Haitians and Hmong immigrants. I felt that the importance of these works about interactions between Haitians and their health care system and Hmong immigrants and western medical systems are relevant to the similar exposure African American women have with our current medical systems and necessary works to be used for this course.

Evaluation
In keeping with the pedagogy of Women’s Studies, course requirements will include written and oral communication, teacher-student and a student-student collaboration, active learning, and real world involvement. To receive credit for this course, you must achieve a minimum grade of "C" (50 percent) on the final exam and an overall grade of "C" (50 percent) or better for the entire course. The weighting of the composite grade is as follows:

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<tr>
<th>Grade</th>
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<tr>
<th>Class Attendance</th>
<th>10 pts</th>
<th>Total Possible Points</th>
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<tr>
<td>Class Participation</td>
<td>10 pts</td>
<td>Final Take Home Exam</td>
<td>40 pts</td>
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<tr>
<td>Group Project Presentation</td>
<td>20 pts</td>
<td>Five-Page Synopsis of Book</td>
<td>20 pts</td>
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Description of Assignments
1. Attendance and Class participation (10pts/10pts each): Active participation in lectures is important. A consistent pattern of participation in lecture and evidence of critical insight will be significantly
rewarded. In assessing your grade, we will consider both the quantity and quality of comments made in class. Attendance is mandatory.

Any absence in lectures, other than officially excused absences by the university (i.e. for religious observances), will affect your attendance and participation grade. You are also expected to attend the entire class; partial absences will be counted in the formation of your attendance and participation grade. If you have to miss a class or part of a class, please notify me ahead of time if possible and arrange to make up the work covered during your absence.

You may miss the equivalent of one week (that is, 3 class periods) with no penalty. Your grade will be lowered by one point for each unexcused absence from 3-5 absences. If you miss the equivalent of 3 weeks (that is, 9 class periods) or more with unexcused absences, you may fail the course. If you have an excessive number of absences, even if they are excused, your grade may be lowered. In addition, if you are 20 or more minutes late to any class, it is considered an unexcused absence. In the case of an excused absence, you should notify me of the excuse before the missed class, and certainly no later than 24 hours after.

2a. Group Project Presentation (20pts): You will be required to work with a group of up to eight of your classmates and offer well-supported arguments based on your reading and findings from your assigned book. Your group will be responsible for preparing a 30 minute presentation on your book which relates to all four categories that have shaped African American women’s health, such as, their gender, their race, their class and their sexuality and how your book intersects with those categories. Your presentation will be in the format of an oral presentation and presented in the format of a newsletter. Your group will prepare a newsletter of the book you read. Choose a specific day from the book and have the main character's health problem/main focus of the book as the lead story. Include articles in your newsletter reflexive of the lead story. Your newsletter could contain specific ads, cartoons, a sports page, interviews, weather, and other newsworthy events that may have occurred during the period of the book. Finally include a full page promotional campaign ad in your newsletter to convince someone else that promoting healthy behavior is vital for African American women’s survival based on the conclusion from your book. Additional, have that full page ad as a separate ad to hand in as well. For those of you unfamiliar with African American newspapers and magazines, you will be given samples of newspapers, newsmagazine and or magazines as a guide. This group project presentation will be 30 minutes in length and presented throughout the course.

Presentations must be given on the day they are scheduled; if a problem arises, you must notify me in advance. The schedule and sign up for the group presentation will be provided the first day of class.

2b. Individual report on the book: Five-Page Synopsis of Book (20pts): Students will choose or be assigned to read one of the books from the Supplementary/highly recommend reading list and write a 5 page book review. Book reviews should include a summary and critique (how was the book helpful or why it was not helpful) and how it relates to African American Women’s health concerns raised while reading your book. This will be due the day of your group presentation. Please refer to the Writing Center webpage for information on paper documentation of sources used in preparing your paper: http://www.wisc.edu/writing or contact the Writing Center for additional help.
Exam:
1. Final Exam (40pts) is due in class MONDAY, DECEMBER 15, 2008 by 1:25pm. Specific details of the final will be handed out after Week Ten.

Course Outline and reading guide:
Introductions and Sign up for Book Review Oral Presentations during class period # 1
Listen to Pearl Cleage’s book, *We Speak Your Names: A Celebration* audio reading.

Byle Avery. Breathing life into Ourselves: The Evolution of the National Black Women’s Health Project,” (The Black Women’s Health Book, 4-10.) The Black Women’s Health Project.

Weeks One - Three
Unit 1: Historical snapshot of African American Women’s Health
   Section 1.1: How did we get here?
   Section 1.2: Who speaks for us?
   Section 1.3 Pregnancy and childbirth

Reading Assignment


Week Four -Six
Unit 2: Hypertension and Diabetes in African-American Women
   Section 2.1: They told me I had “Pressure”, pass the salt.
   Section 2.2: Power to End Stroke-Stroke Ambassador, Yolanda King, last appearance in Madison
Section 2.3: I got suga!
Section 2.4: Sunday dinners and soul food

Reading Assignment


Week Seven- Nine
Unit 3: Breast cancer and African American women
   Section 3.1: Is this a disease Black women can get?
   Section 3.2: The Witness Project®

Reading Assignment
Audre Lorde, The Cancer Journals, excerpts


Group 1 and 2 Oral Presentation

Week Ten -Twelve
Unit 4: HIV/AIDS and African-American Women
   Section 4.1: Sexually transmitted disease and the down low brothers
   Section 4.2: Sometimes I CRY
Reading Assignment


Group 3 and 4 Oral Presentation

Week Thirteen- Fifteen
Unit 5: Domestic Violence and African American women
   Section 5.1: What’s love got to do with it?
   Section 5.2: The straw that broke the camel’s back
Sounds of Blackness, “She Is Love” video recording and “King and Queens” audio recording.

Reading Assignment


Group 5 Oral Presentation

Resource you may want to review:

Borrowed from The Black Women’s Health Imperative
“The Health Imperatives for Black Women

The Black Women’s Health Imperative is a national, not-for-profit educational, advocacy and leadership development organization that's committed to eliminating the health disparities that exist for Black women. These five "Health Imperatives for Black Women" are guided by our mission - optimum health for Black women - and are reflected in every action step we take as an organization. Please review them and then join us in our efforts to optimize the physical, mental and spiritual wellness of all Black women.

1. Make Black women’s health an imperative for federal and state governments and communities.

Black women’s lives are at risk. Historically, they have had the worst health on nearly every health index
when compared to other groups of women, despite advances in medicine - and continue to die needlessly or to suffer unnecessarily from preventable and treatable causes. In its recent report, Unequal Treatment, the Institute of Medicine concluded that minority groups receive the poorest quality of care, even when they have health insurance, and that Black women receive the “poorest of the poor” care in comparison with White men, White women and even Black men. Lawmakers at every level must ensure that the latest and most aggressive diagnostic procedures and treatments are offered to Black women, to end even the appearance of sexism and racism.

2. Work to eliminate the enormous health disparities that exist for Black women

Black women have the highest or near highest rates of most major chronic conditions (hypertension, diabetes, stroke, most cancers, glaucoma, arthritis and lupus) and risk factors for poor health (obesity, sedentary lifestyles, drug dependence, tobacco use, depression, sexually transmitted diseases, low immunization rates and partner violence). This is not surprising given the barriers created by government health and welfare policies to comprehensive health services for women. There are welfare policies that discourage pregnancy by denying dependent care coverage for subsequent children; and "reforms" that force women into the minimum wage workforce without affordable childcare, job training or family supports. These barriers must be pulled down.

3. Ensure that Black women have access to the broad range of reproductive health options, are empowered to make real choices and are assured of privacy in reproductive decision-making.

The steady chipping away at the reproductive rights of women, including the availability of safe abortion services, has an unequal impact on Black women, who are also disproportionately poor. Black women will bear the greatest burden if there is a return to back alley practices.

4. Reduce the high death rates among Black women from preventable causes.

Soaring death rates from preventable causes shame us as a society. Black women have the highest death rates from heart disease, AIDS, breast cancer, stroke and pregnancy-related causes compared to all other women - most of these preventable or, with timely and proper treatment, treatable. They have the shortest life expectancy and die from pregnancy-related causes more than any other group of women, at four times the rate of White women. They also have the highest prevalence of low birth-weight babies and infant mortality; higher than many underdeveloped countries. Improving access to health care could save untold lives.

5. Increase access to health insurance coverage for all Black women and their families.

One out of three Black women has no health insurance. Unlike most Americans, who depend on employer-provided coverage for their health care, substantial numbers of Black women have part-time or low-paying jobs with no job-based insurance coverage, and no assured access to life-saving or preventive care. We cannot tolerate the persistence of a class system in basic health care.