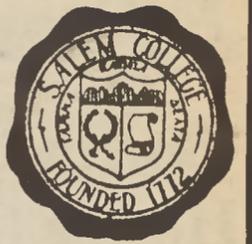




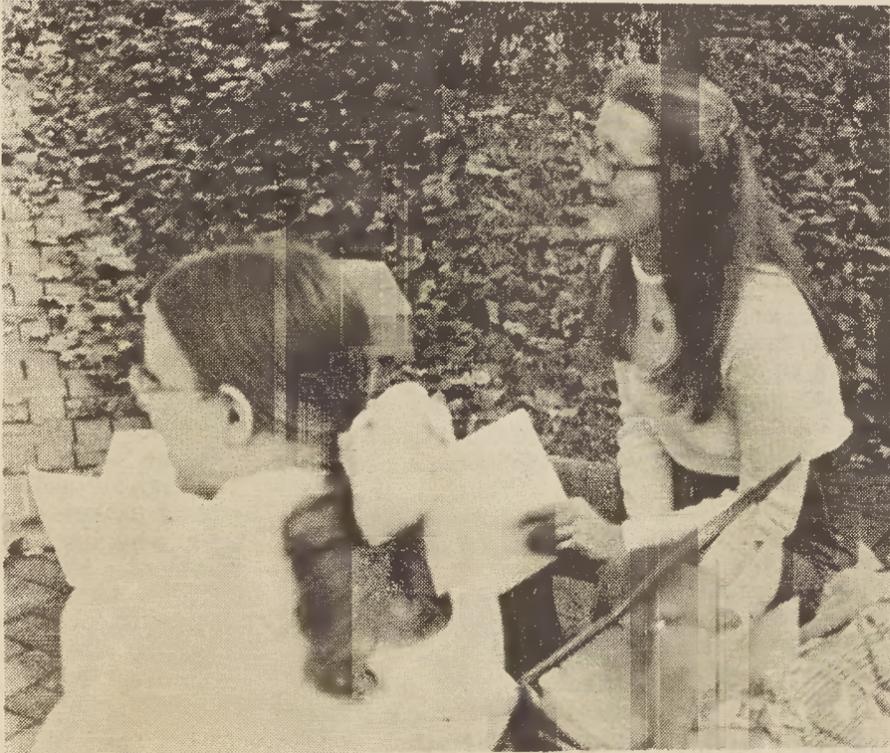
The Salemite



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Outdoor class - Ice and snow seemed far away as students Paula Ford and Dawn Scott (l-r) recently enjoyed the balmy weather.

Byers Lecture

Women's Movement Divided in Britain

By Margaretta Yarborough

If the British women's movement prides itself on autonomy, it is succeeding with a flourish. At the second national meeting, the delegates nearly ripped the whole place apart. They demolished the coordinating committee, and different factions agreed to meet separately as much as possible.

In her recent lecture on the British women's movement today, entitled "Victoria, You'd Hardly Know Us," Dr. Inzer Byers presented the findings of her research last summer in Great Britain. Having located only two articles on the subject in this country, Dr. Byers received a special grant which allowed her to take her work to Britain.

In two generations, the movement has come from the house with the blue door on Gower Street, decorated with all

the quintessential furnishings, to an apartment in a run-down section of London, in chaotic disorder. But, as Dr. Byers noted, much of the movement's history can be illustrated by the transition from suffragette Millicent Fawcett's classic interior to the flat of Sheila Rowbotham, a radical theorist for the present-day movement. The movement has lost direction; it has become disorderly.

On the surface, great legislative achievements have been made in behalf of British women: an equal pay act, an equal opportunity act, liberalized abortion, a new family allowance plan. But the effectiveness of these laws is another matter.

Some people say that things are being done backwards. It is good to have an equal opportunity commission, but it can do little to solve the job segregation

inherent in the market. Roughly 20 percent of working women have jobs equivalent to those held by men. But the commission works out of Manchester, which is, removed from the political mainstream, and has hired only two lawyers in two years of existence. "Does it matter," Dr. Byers asks, "to have an equal pay act on the books if the equal opportunity commission has only two lawyers for all of Britain?"

The British women's movement is composed roughly of both radical and moderate elements. Nothing exists resembling a coherent moderate theory to counteract the radical views of those persons agreeing with Sheila Rowbotham. Radicals believe that current advances are pyrrhic victories at best, while moderates think that change can occur without extremes. At this point in both the

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Many Students Question Infirmary Confidentiality

By Charles Bolton, Sherry Frye, Galyn Fulton, Dr. Nancy Gilliland

Editor's note: This article resulted from a study conducted by Dr. Nancy Gilliland last spring. Results from the sociological medical survey were included in a paper entitled "Factors" Affecting Utilization of a College Infirmary." For further statistics or a complete copy of the paper, please contact The Salemite editor.

Once a person decides from his symptoms that he is ill, he must then decide whether to seek medical care or choose some other alternative (i.e., do nothing, go to a faith healer, etc.). According to Franklin and Melmore (1970), this is called the primary symptom-response decision. Having made the decision to seek professional treatment, one must choose from the available resources what best suits both the illness and personal preference. This "secondary symptom-response decision" is the focus of this paper. In the case of college students, the secondary symptom-response decision would be to choose treatment at the college infirmary (Student Health Center) or to go off campus for professional care.

A number of social factors have been found to be related to satisfaction with and utilization of college health centers. King (1973), for example, found that women students tended to be less satisfied with the University Health Services at Harvard than the men. Burke (1974) reported that in a coeducational environment women had more days of restricted activity during the year than male students did, and they also utilized the health services more.

Given the nature of the Salem student population, the proximity of the infirmary to student housing, and the fact that the infirmary is paid for by student fees, this investigation focused on social-psychological variables such as attitudes toward and

satisfaction with the services at the infirmary as the major determinants in deciding whether to use the college health center.

On the basis of a review of the literature and exploratory interviews with selected students, two hypotheses were formulated. The first is that students with positive attitudes toward the infirmary will be more likely to utilize its services than students with negative attitudes.

Expressions of fears and concern regarding lack of confidentiality and invasion of privacy were evident on this campus and prompted the second hypothesis, that students with gynecological problems will seek care off campus rather than utilize the infirmary.

The Salem infirmary is located near student housing, is open 5 days a week, and is equipped with 10 beds. Nurses are on duty 24 hours a day, 5 days a week, and are on call on the weekends. The Salem college physician (a surgeon) comes 3 afternoons a week unless there are no patients to be seen. This is determined by the nursing staff who treat patients if, in their professional judgment, the doctor is not needed. Thus, not every student who goes to the infirmary sees the doctor.

METHOD

A sample of 60 was randomly selected from the 453 boarding students at Salem. The sample was limited to boarding students because of the infirmary's close proximity to the dormitories. This controlled for ease of access and convenience (it also limited the age range, since college policy places the upper limit of age for boarding students at 22.) Since the study was done at the end of the school year, all students, including freshmen, had had adequate time to use the services of the infirmary and to form attitudes toward it.

Data collected by means of a personal interview included 1) college class, 2) age, 3) religion, 4) church attendance, 5) birth order, 6) whether the respondent has a family doctor, 7) whether the respondent views herself as a healthy person, and 8) whether she has utilized the infirmary.

General attitude toward the college health service was measured by the Student Health

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Thanksgiving Service Planned

Monday, Nov. 21, the YWCA will host a Thanksgiving Communion Service. Dr. Clark Thompson will deliver a devotion followed by Communion. Special music will be provided. Everyone is invited to the Club Dining Room at 7 p.m.