

Development of an Undergraduate Course in Gender Issues in Health Care

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This paper describes the development of an undergraduate course in gender issues in health care coordinated by an instructor from the college of pharmacy. The goals of this course were to create an awareness among the students of the many issues and dimensions of women's health and to expand the perception that women's health issues are solely gynecological. The importance of studying women's health issues is discussed and course objectives, outline, resources and assignments are presented. Student response to the course has been favorable. Since its initial offering, the course has been taught at both the undergraduate and graduate levels. It is anticipated that this course might serve to stimulate future courses, or the incorporation of these topics into other classes within colleges of pharmacy.

INTRODUCTION

The purpose of this paper is to describe the development and implementation of a multi-disciplinary undergraduate course in women's health issues coordinated by an instructor from the college of pharmacy. It is hoped that this course might serve as a guide for future development of courses within colleges of pharmacy by offering suggestions for key topics, readings and ideas for assignments.

In colleges of pharmacy, students learn what they need to know in order to be a competent health care provider—pharmacology, therapeutics and pharmacokinetics. Yet, the knowledge of pharmacotherapy is based primarily upon studies of men's responses to medications. Pharmacy students must learn to cautiously apply the results of such research to female patients and be aware of potential differences in therapy or response to that treatment. Once in practice, pharmacists must use their knowledge of disease states and of medications in order to decide upon the appropriate treatment for a specific patient. They must also understand and address each patient's specific needs to provide proper care. Because women may require or respond differently to treatment and because women's needs differ from men's, pharmacy students must understand and be sensitive to those differences in order to care for their future patients.

In general, women's health issues are important to identify and study for several reasons including the fact that there has been a lack of focus on women's health concerns in clinical trials as well as a lack of women included in those clinical trials. Rodin and Ickovics (1) provide a review of the history of women's health research and suggest further

avenues for exploration. They propose that women have unique health concerns which have not been adequately addressed and that women are affected disproportionately when it comes to certain disease states. Specific examples of such disease states include diabetes, anemia, respiratory and gastro-intestinal problems, rheumatoid arthritis and systemic lupus erythematosus. Finally, women can be affected differently than men, as in the case of angina prior to myocardial infarction(2). The research that has been done on major disease states, while invaluable, leave questions about the findings' applicability to women.

Rosser(3) underscores these ideas by pointing out that the biases in clinical cardiac research have become imbedded systematically into management of disease, which leads to inequitable treatment of women. She also suggests that studies that have been conducted in women's health have not focused on women, rather on how diseases they carry affect others. For example, much of the research on women and HIV/AIDS focuses on women as vectors for transmission to men or to fetuses(4).

Women utilize health care differently than men, seeking health care one and a half times as often as men (5). Verbrugge(6) suggests that women suffer from more acute problems which are serious, but not life threatening, when compared to men. Men, on the other hand, are sick less often, but have higher rates of chronic illnesses which are leading causes of death. The apparent higher rate of morbidity in women is also affected by demographic changes in the

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Table I. Course objectives

Upon completion of the course of the course, the student will be able to:

1. Describe epidemiological differences in morbidity and mortality between men and women and explain how these differences contribute to treatment differences.
2. Identify gender differences in communication behavior of patients and health care professionals. Give examples of the consequences of such differences.
3. Discuss women's role as health care givers and how this role relates to health seeking behavior.
4. Explain cultural issues surrounding women's health care including alternative medicine and ethnic differences in morbidity, mortality, access to care, treatment and concept of medical care.
5. Describe the factors which affect access to care and how access to health care relates to morbidity and mortality of women.
6. Describe the global health problems associated with poverty.
7. Identify types of violence against women, and the impact of violence on women's health as well as what steps are being taken to combat the violence.
8. Discuss current gender research on disease states such as cancer, AIDS, heart disease as well as reproductive issues. Evaluate recent progress and trends in this type of research and explain why each disease state is particularly important to women.
9. Using examples from the medical literature, identify current trends in women's health care research and treatment.
10. Understand differences between the scientific and lay press' presentation of information regarding health and disease.
11. Understand the impact of the media on women's perception of health and wellness.

population. At the same time, as women work and live longer than they ever have before, their health care concerns will have ramifications throughout the health care system(7). More women at older ages are coping with chronic illness. Increasingly women's health care problems include substance abuse and addiction, acquired immunodeficiency syndrome (of which women are the fastest growing population of victims), sexually transmitted diseases, homelessness and mental illness. Women at all ages have unique health care needs. Teenage pregnancy, body image issues and alcohol or drug use can impact young women's health. In their middle years woman must deal with menopause and hormone replacement—a woman can expect to spend nearly one third of her life in the post-menopausal period(8). Heart disease and osteoporosis are two examples of diseases which women deal with later in life.

Throughout the life cycle, the feminization of poverty has had an enormous impact on health care utilization. Poor women appear to have more health problems, are less likely to be insured and have less access to care. The concept "feminization of poverty" has evolved due to the increase in divorce rates, the lack of child support from separated and divorced fathers and the resulting increase in female headed households with young children. A further contributing factor is that women working in the United States earn less than men. Women's health care can be affected even after the age of 65, because as Sofaer and Abel(9) suggest, Medicare provides better coverage for illnesses that predominantly affect men when compared to those that are predominant among women.

Women interact differently with their health care providers and can be affected by the gender of that provider.

For example, female physicians tend to engage in more positive talk, ask more questions and provide more information to the patient. Patients of female physicians also have been found to ask more questions and provide more information to their physicians(10,11). Early work by Wallen *et al.*(12) has shown that although women ask more questions in a medical encounter than men, they receive shorter and less technical answers. This research implies that health care providers approach and treat women differently. However, there is little information available at present about what effect these differences have. Because women face different medical problems than men at different times in their lives; because women may respond to treatment differently than men; and, because health care professionals often deal with female patients differently than male patients, women's health care needs are distinct.

The National Institutes of Health (NIH) has begun a massive research campaign via the Women's Health Initiative (WHI), to address critical issues related to women's health, but data will be unavailable for many years. The initiation of these studies serves to underscore the need to be aware of the lack of information in this area. Understanding the information needs of women is essential to establishing and maintaining a mutually profitable relationship with female patients. Offering women's health issues as a course or as topics in the current curriculum through the college of pharmacy will provide students with essential information for their future practice.

COURSE DESCRIPTION

The gender issues in health care course was implemented in the spring of 1995 through the center for women's studies and gender research at the University of Florida. It was a course offered to all undergraduates, but was taken primarily by Arts and Sciences students. The primary goals of the course were to create an awareness among the students of the many issues and dimensions of women's health and to expand the perception that women's health issues are primarily gynecological. To this end, it was designed to provide an overview of gender issues in health with a multidisciplinary approach. The specific objectives of the course are listed in Table I. Based on these objectives, faculty members across campus and members of the community were recruited to present lectures in their area of expertise. Faculty members presented current research in the areas of access to care, violence against women, women as care givers, living arrangements of elderly Latina women, and HIV prevention. Other lecturers shared their proficiency in the areas of nutrition, obesity and body image, mental health, women as health care professionals, menopause, osteoporosis and hormone replacement therapy, cancer, global and cultural issues, health related communication, prescription of psychotropic medications, women as health care providers, violence against women and epidemiology. See Appendix A for a full listing of the course topics and relevant readings. Unlike other courses that may be offered in this area, this course attempted to incorporate and balance the lay as well as the scientific perspectives on gender issues in health care. Topics of specific interest to pharmacy students, such as pharmacologic and pharmacokinetic differences were included. Additionally, the multidisciplinary approach facilitated deeper understanding of the issues at hand by combining rather than relying on a purely sociological or biomedical approach. Future courses or lectures within colleges of

Table II. Selected World Wide Web sites on women's health

Site name	Description	URL
A Forum for Women's Health	Offers information, advice and suggestions to help women deal with their health concerns.	www.healthwire.com/women
Ask a Woman Doctor	Women physicians answer questions about women's health.	www.healthwire.com/ask.html
National Women's Resource Center	A national clearinghouse for information on drug and mental health issues for women.	www.nwrc.org
Women Space	A web site for young women and girls which provides information about growing up relationships, sexuality and health.	www.womenspace.com
Women's Medical Health Page	Provides information on current medical issues and recent publications in women's health.	www.best.com/~sirlou/wmhp.html
Women's Health Interactive	Offers an interactive learning environment for women to proactively learn about their health and health related issues.	www.womens-health.com
Defense Women's Health Resource Clearinghouse	Clearinghouse of women's health related issues and information	www.4women.org

pharmacy may provide additional emphasis on the pharmacologic and pharmacokinetic differences between the sexes.

COURSE FORMAT

The course included two hours per week of lecture and one hour per week of discussion covering both lectures and reading assignments. A primary focus of the course was to involve students in class discussion which would serve as an integration between lecture and reading, and would provide continuity in a course where many of the lectures were given by guest experts with different teaching styles. Students worked in teams of three to lead class discussion each week and were required to prepare questions they felt were important to pose to the class. These student discussion leaders were vital to the success of the discussions. Because many of the students were first year students, some assistance on the part of the instructor was required to stimulate the appropriate level of discussion. To encourage discussion and help the student discussion leaders, class participation was included in the students' grades.

The semester was planned according to a progression from general to specific topics building upon the knowledge presented first. For example, the general topics of access to health care and epidemiology were used to frame the content presented later on specific disease states including heart disease, cancer and AIDS.

STUDENT PROFILE

Many of the students enrolled in the course were majoring in pre-professional programs in health occupations. Their presence in the course reflected their desire to expand their understanding of their chosen profession. Some students were in their first year and had not yet declared a major. They were interested in the course solely because of their interest in women's issues. A few students admitted to waiting too long to register and were enrolled only because the course was open and fit their schedule. Course enrollment totaled 31 students including one male student. There were two women enrolled in graduate school at the time of

the course and several nontraditional undergraduate students. The wide range of students' educational and life experiences enhanced the class discussions.

ASSIGNMENTS

Exams

Both a midterm and final exam were used to evaluate students' comprehension of the materials presented through lectures and readings. The exams included both objective and essay questions to cover the range of information presented while allowing the student to demonstrate ability to synthesize the material. Some lecturers provided exam questions based on their lectures, however the course coordinator was responsible for preparing a final version of each exam.

Health Issue Portfolio (HIP)

To meet the objectives of the course concerning the media, a project was designed to facilitate student's thinking about the role media plays in defining, disseminating and controlling information about health and disease. The health issue portfolio was a semester-long assignment for which groups of students compiled a notebook on the health issue of their choice. Students were asked to include articles and advertisements from lay press sources and from community or other resources. A short paper required students to describe their findings, identify trends over the course of the semester and give a brief comparative analysis of the presentation of information in the lay versus scientific press. Topics chosen by the students included AIDS, violence against women, women as health care professionals, eating disorders, cancer, advertising and menopause.

Student response to this project was very favorable and the resulting portfolios were well done. Students presented their portfolios to the class at the end of the semester. Examples of students' creativity was evident in their completed portfolios and presentations. For example, one group conducted an informal survey which they developed to address the impact of advertising on women's perceptions of beauty and health. They were surprised by their results

which showed many women to be strongly influenced by advertising for women's products. One woman in the group focusing on AIDS had lost several close friends and relatives to the disease and spoke about her involvement in AIDS activism as well as her daily struggle to help care for the people in her life. The personal presentation certainly made an impact upon the class, bringing home the consequences of a disease usually regarded as affecting only others.

Term Paper (Optional)

Students were offered the option of writing a term paper to satisfy a University writing requirement rather than participating in the HIP project. These students selected a topic of interest to them based on the material presented in the course and prepared a 10-15 page term paper. Topics selected mirrored those chosen by students completing the HIP project and included: AIDS, violence against women, health care professionals, eating disorders, birth control & sex education, exercise and abortion. Students also presented their papers to the class at the end of the semester in conjunction with the HIP project presentations.

Health Literature

This non-graded assignment asked students to visit a library or bookstore and peruse the shelves for women's health books published in the lay press. They were asked to review tables of contents and come to class prepared to present one particular book they found of interest. The purpose of this assignment was to encourage students to search for information about women's health and to have them realize just how much information is available in print. Another key point of this assignment was to underscore how many people are unaware of the wealth of information available. In fact, many people rely solely on physicians and other health care providers for information. Sites on the World Wide Web (WWW) were also discussed during this class. Some examples of web sites are listed in Table II. Again, the point was made about the accessibility to this information. Only if people are aware of the information and are able to access it will they benefit from it.

RESOURCES

The textbook used for the course was Koblinsky, M. Timyan, and J. Gay (eds.) *The Health of Women: A Global Perspective*, Westview Press, Inc., Boulder, CO (1993). The textbook offered general readings appropriate at the undergraduate level. These general readings were supplemented with current readings from scientific journals. The balance between the specificity offered through the scientific papers and the lay approach of the textbook was complementary. Several videocassette presentations of women's health topics aired on PBS in the Fall of 1994 were also used. For example, presentations included "Getting ready for menopause: A guide for the 40-something woman," "A Woman's Heart," and "Inside Hunger," which discussed eating disorders. Appendix A lists the articles included as reading for each of the topic areas.

COURSE OUTCOMES

Through the evaluation of the course, students expressed positive opinions and offered suggestions for improvement. Overall, they enjoyed sharing their own experiences, which personalized the class. They felt they could benefit from additional time devoted to discussion. Comments indicated

that students felt that they benefited from the various lecturers and were impressed by the wide range of experts available on their campus. They felt, however, that more leadership in the discussions would be helpful and that because there were so many lecturers the class was a bit disjointed. Most students said they would have preferred a term paper to the exams and greatly enjoyed the HIP project.

Student's performance was quite good, with most receiving A's. They were very polite and attentive to the guest lecturers and involved in the discussions. Their questions of the guest experts and of each other were insightful and intelligent. They rated the most effective learning experiences as the HIP project and the interaction between the students who shared their own expertise from life. The response from students who had little interest in women's health issues at the beginning of the class was the most dramatic. Comments from them indicated that the course "enlightened" them about the importance of awareness of gender issues and the wealth of health information available to them. They were excited to share what they had learned with their mothers, grandmothers, other relatives and friends.

Since this course was initiated, it has been offered a second time coordinated by a medical sociology graduate student, with continued lecturers from faculty in the Health Sciences Center and Arts and Sciences. For two years, a national women's health conference has been convened on campus with leaders from the WHI and NIH. In the spring of 1997, the Gender and Health course was offered as a graduate seminar with required participation in the national conference. The texts used included: (i) Villarosa, L. (edit.) *Body and Soul: The Black Woman's Guide to Physical Health and Emotional Well Being*, Harper Collins: New York (1994); and (ii) *The Boston Women's Health Book Collective's The New Our Bodies, Ourselves*, Simon and Schuster, New York NY (1992).

CONCLUSIONS

There is a need to train health care professionals, including pharmacists, with an appreciation of and sensitivity to gender issues. The course described exposes students to topics that will help them develop this sensitivity and covers a broad range of topics in women's health. Students learned about the many facets of women's health, how women's health care needs differ from men's, and began to understand the significance of the Women's Health Initiative. Such a course would enable pharmacy students to achieve a solid foundation in women's health and prepare them to better address the needs of their female patients. Finally, as a course open to the entire campus, diverse student enrollment would promote the sharing of different points of view which is consistent with the multidisciplinary approach to teaching. Both health care professional students and Arts and Sciences students could gain much from such a course and would bring with their educational backgrounds which would enrich the experience for all those involved.

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APPENDIX. COURSE TOPICS AND SUPPLEMENTAL READINGS

Epidemiology, Access to Care (Insurance)

Rodin, J and Ickovics, J.R., "Women's Health, Review and Research Agenda as We Approach the 21st Century," *American Psychologist Sept*: 1018-1034 (1990).

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Social Support

Friedman, M.M., "Social Support Sources and Psychological Well Being in Older Women with Heart Disease," *Research in Nursing and Health* **16**(6): 405-413 (1993).

Poverty and other Enabling Issues

Sorlie, P., Rogot, E., Anderson, R., Johnson, N. J. and Backlund, E., "Black-White Mortality Differences by Family Income," *Lancet* **340**(8815): 346-350 (1992).

Davidson, E.C., Gibbs, CD. and Chapin, J., "The Challenge of Care for the Poor and Underserved in the United States. An American College of Obstetrician and Gynecologists perspective on Access to Care for Undeserved Women," *American Journal of Diseases and Children* **145**(5): 546-549 (1991).

Guinan, M., "Women's Health and Poverty," *Journal of the American Women's Association* **49**(3): 91 (1994).

Nutrition

Gizis, F.C., "Nutrition in Women Across the Life Span," *Nursing Clinics of North America* **27**(4): 971-982 (1992).

Hankin, J.H., "Role of Nutrition in Women's Health: Diet and Breast Cancer," *Journal of the American Dietetic Association* **93**(9): 994-999 (1993).

Global and Cultural issues

Frye, B.A., "Cultural Themes in Health-Care Decision Making Among Cambodian Refugee Women," *Journal of Community Health Nursing* **8**(1): 33-44 (1991).

Gender and Psychotropic Drug Use

Trinkoff, A.M. and Anthony, J.C., "Gender Differences in Initiation of Psychotherapeutic Medicine Use," *ACTA Psychiatria Scandinavia* **31**: 32-38 (1990).

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Caregiving

Wykle, M.L., "The Physical and Mental Health of Women Caregivers of Older Adults," *Journal of Psychosocial Nursing and Mental Health Services* **32**(3): 41-42 (1994).

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Violence Against Women

Loring, M.T. and Smith, R.W., "Health Care Barriers and Interventions for Battered Women," *Public Health Reports* **109**(3): 328-338 (1994).

Gender and Communication

Hall, J.A., Irish, J.T., Roter, D.L., Ehrlich, CM. and Miller L.H., "Gender in Medical Encounters: An Analysis of Physician and Patient Communication in a Primary Care Setting," *Health Psychology* **13**(5): 384-392 (1994).

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Obesity and Body Image

Kuczmarski, R.J., "Prevalence of Overweight and Weight Gain in the United States," *American Journal of Clinical Nutrition* **55**(2 suppl): 495S-502S (1992).

St-Jeor, S.T., "The Role of Weight Management in the Health of Women," *Journal of the American Dietetic Association* **93**(9): 1007-1012(1993).

Heart Disease

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Ageing: Menopause, Osteoporosis, Hormone Replacement Therapy

Crosignani, P.G., "Effects of Hormone Replacement Therapy," *International Journal of Fertility* **37**(supl 2): 98-103 (1992).

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Cancer

Mathews, H.F., Lannin, D.R. and Mitchell, J.P., "Coming to Terms with Advance Breast Cancer: Black Women's Narratives from Eastern North Carolina," *Social Science and Medicine* **38**(6): 789-800 (1994).

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HIV/AIDS

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