

The Old View to the New View and Beyond:

Changing Priorities and Challenges of Teaching Women's Health

Jean Levitan, Ph.D. and Karen Hicks, Ph.D.



Hand out cards:

What do you see as changing priorities and challenges for teaching women's health topics in 2016 and moving forward?

Provide 1-2 critical resources that you use in your course
To teach women's healthy sexuality

Women's health courses began to enter the undergraduate curriculum in the 1970's.

Jean developed course in 1974...Karen in 1990.

Dr. Pat Hanson's dissertation at New York University in the late 1970's (completed early 1980's) looked at the curricular integration of women's health topics to other disciplines.

A brief history...

**How to use
birth control
pills**

**Finding the
cervix**

**Where to access
birth control methods**

**Expanding
childbirth
options**

**How to use a
diaphragm**

**Coming out
as lesbian**

Learning about orgasm

**Permission to
masturbate**

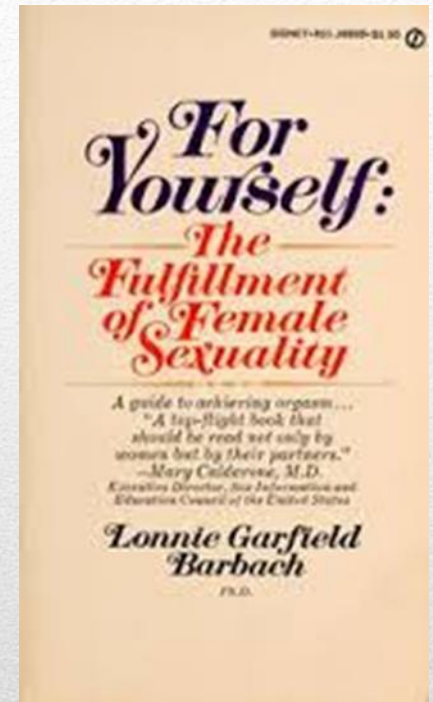
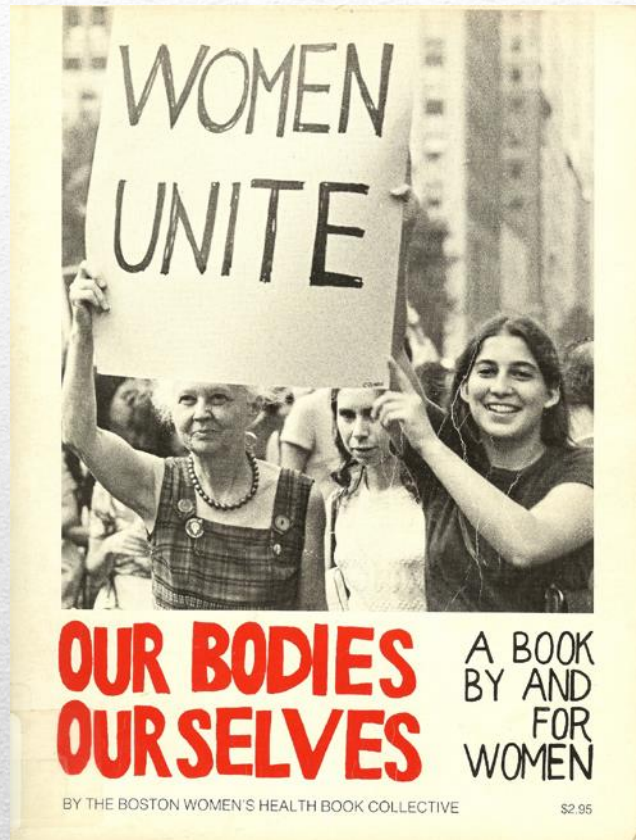
**Recommended
clinic for an
abortion**

Student priorities then

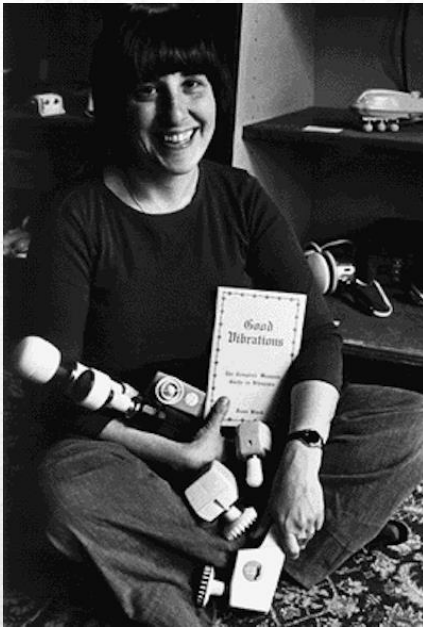
Exploring Sexuality



Betty Dodson's
Liberating Masturbation



Resources- 1970's



Joani Blank, M.P.H.
(died August, 2016)

Good Vibrations

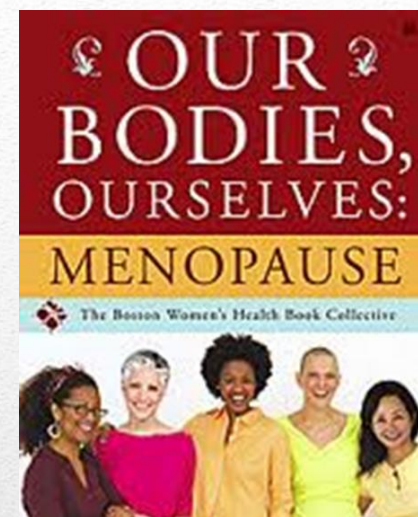
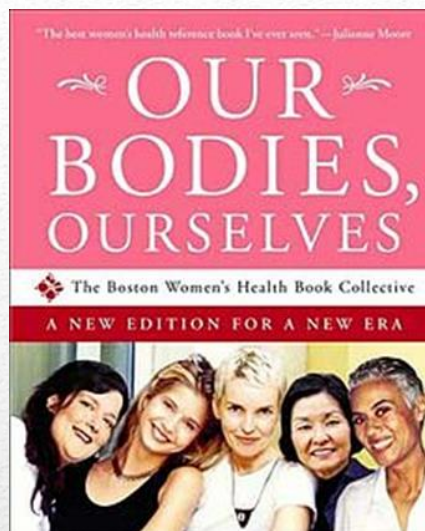
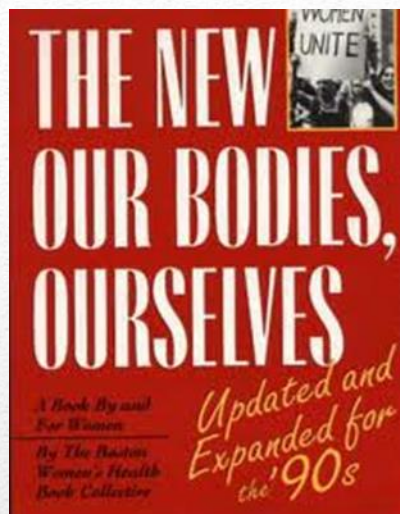
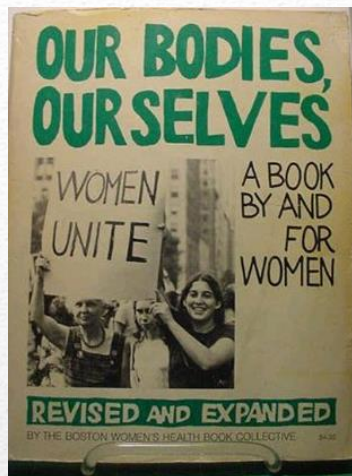
Store in San Francisco-1977
Catalogue



Eve's Garden

Dell Williams opened feminist sex shop
New York City - 1974
Catalogue

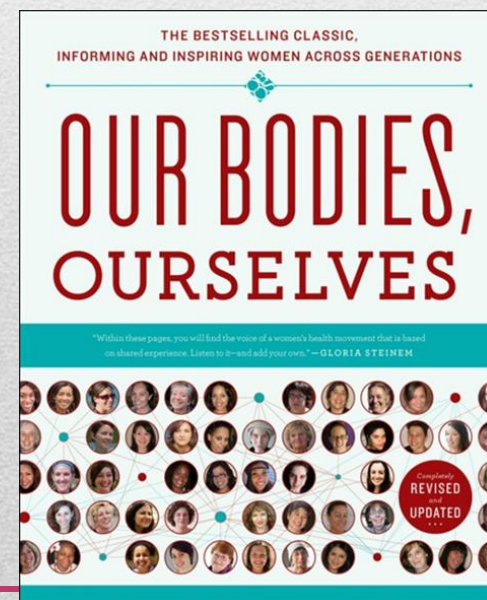
Welcome to vibrators...

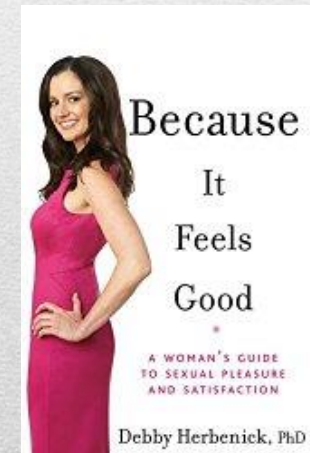
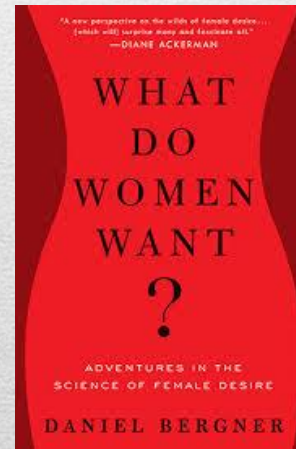
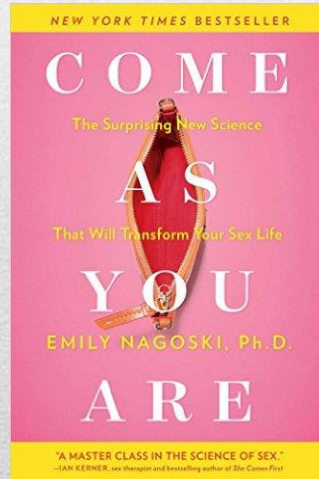
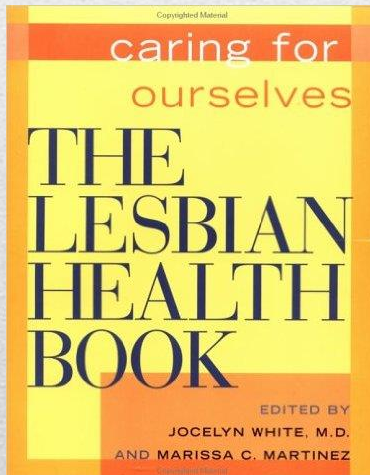
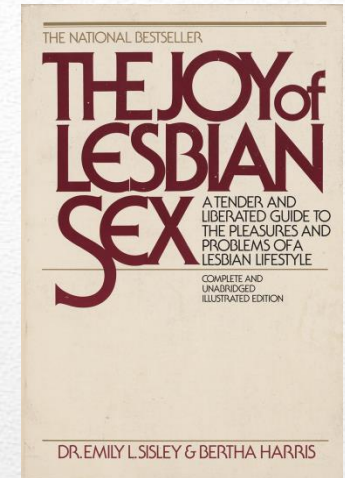
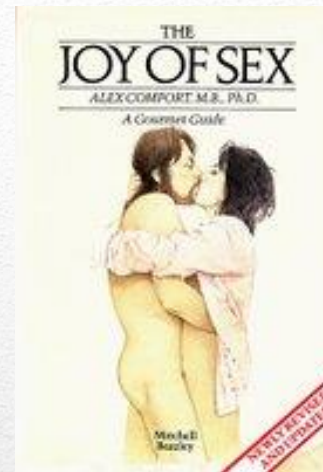
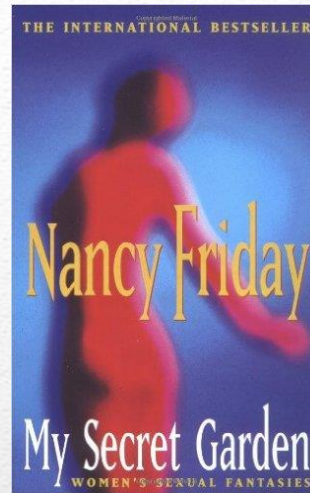
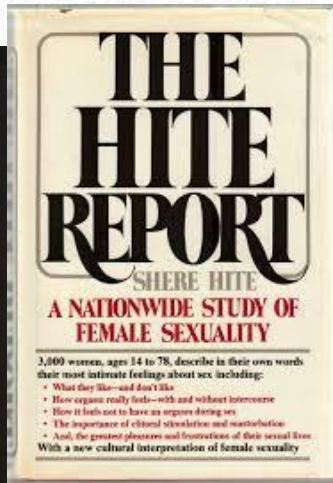
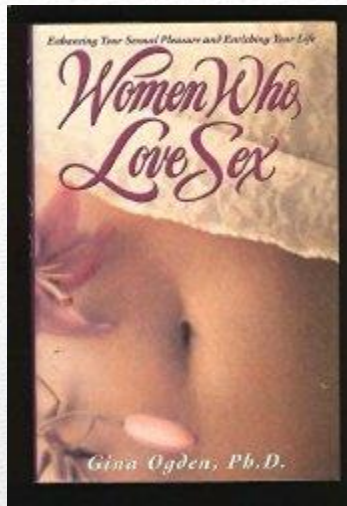


www.ourbodiesourselves.org

Now a comprehensive website

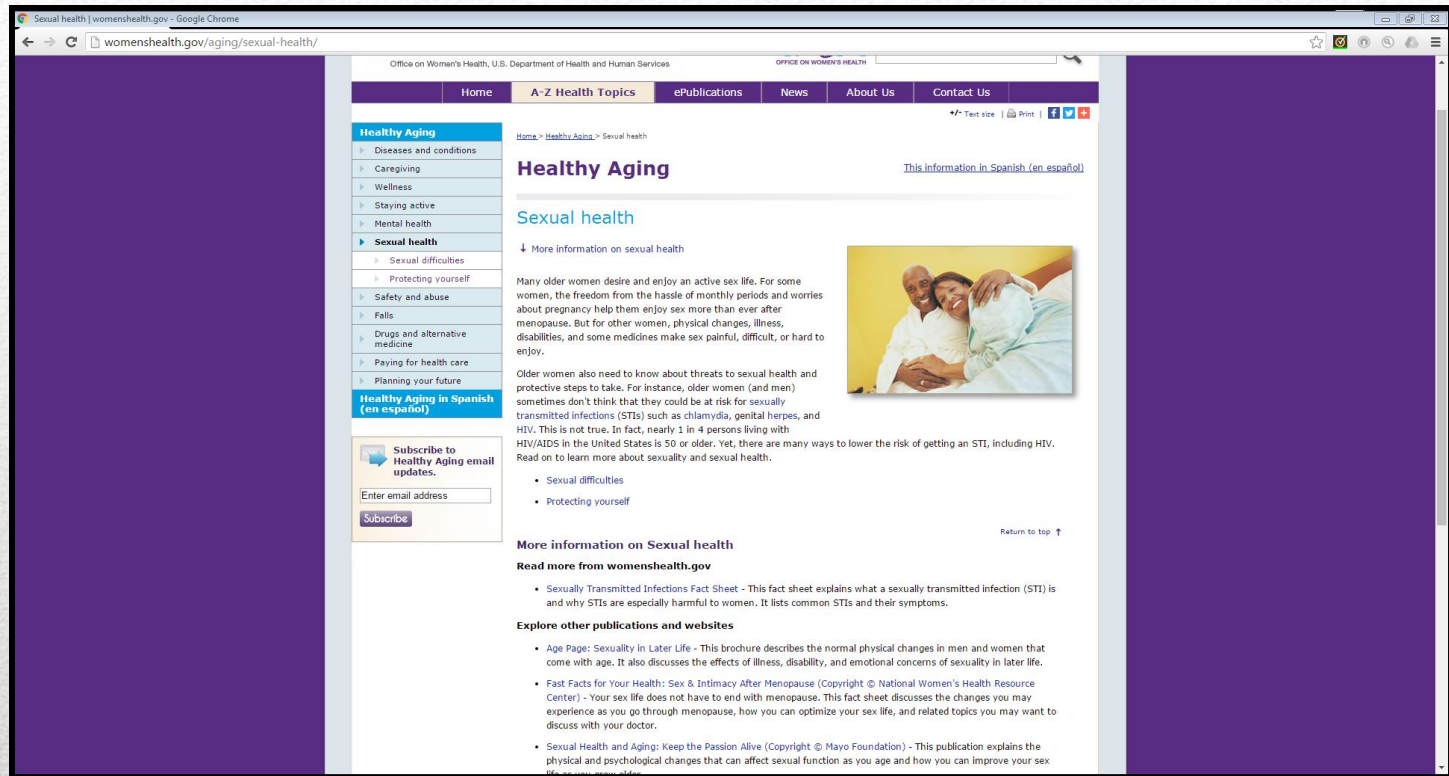
Moving through the decades



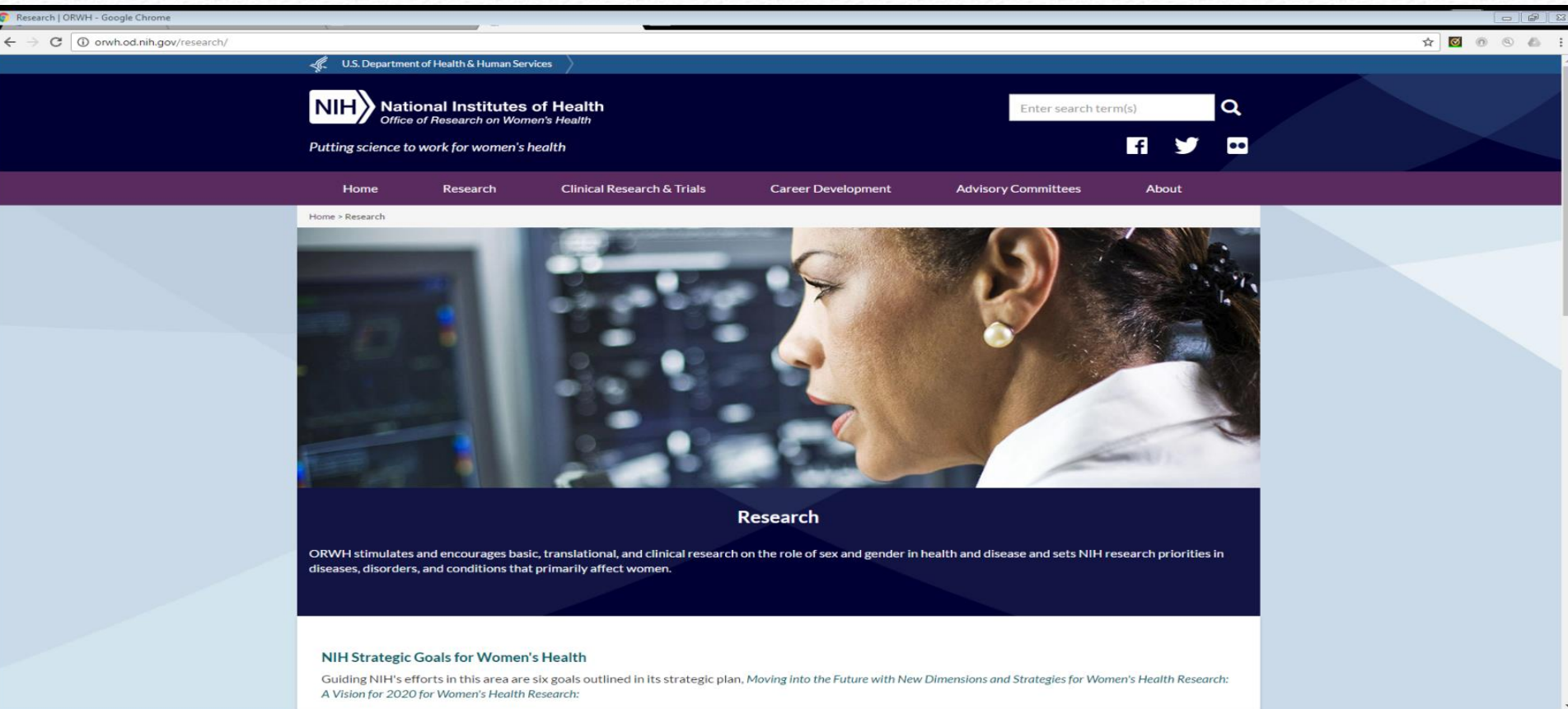


Growth in available books

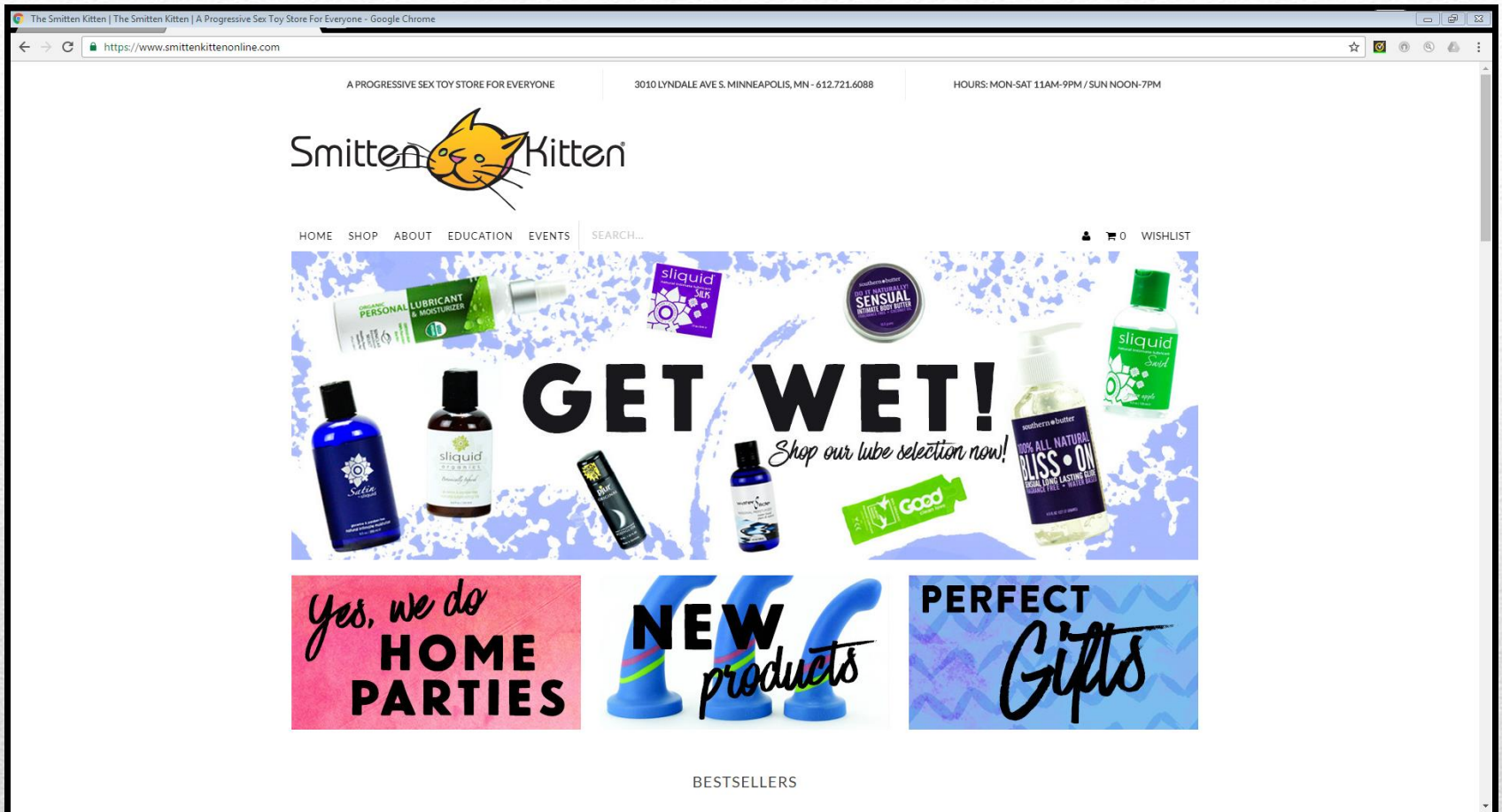
<http://womenshealth.gov/aging/sexual-health/>



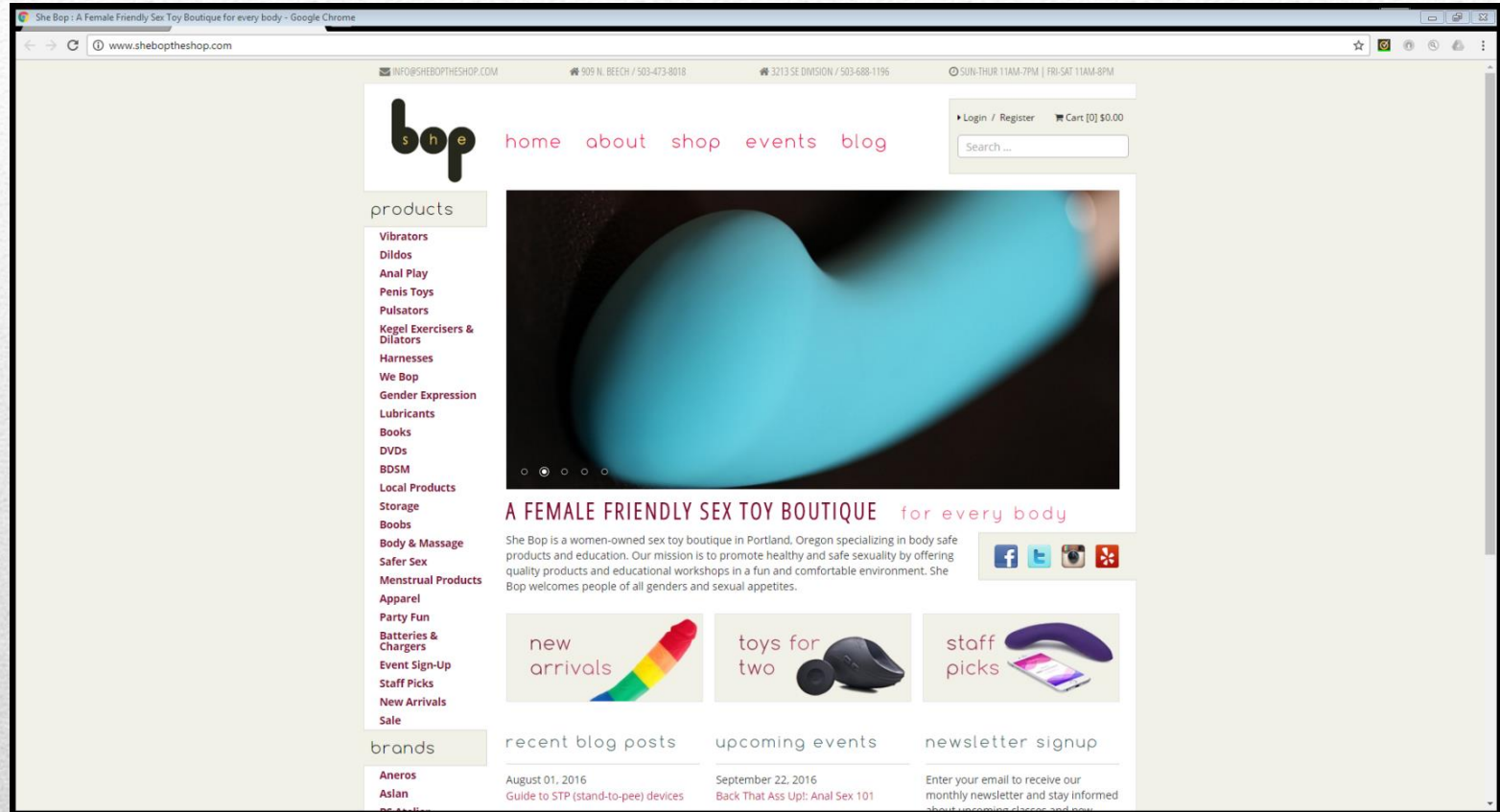
Office of Women's Health



Office of Research on Women's Health
<http://orwh.od.nih.gov/research>



<https://www.smittenkittenonline.com/>



<http://www.sheboptheshop.com/>

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ABOUT US

WHO WE ARE

Bitch Media is a nonprofit, independent, feminist media organization dedicated to providing and encouraging an engaged, thoughtful feminist response to mainstream media and popular culture.

We are best known for publishing the magazine *Bitch: Feminist Response to Pop Culture*, which started as a zine distributed out of the back of a station wagon in 1996. Today, in addition to the [quarterly magazine](#), we publish daily online articles, and [weekly podcasts](#). We house a [community lending library](#) at our HQ in Portland, Oregon, and work with students and educators through our [Bitch on Campus](#) program.

Bitch seeks to be a fresh, revitalizing voice in contemporary feminism, one that welcomes complex arguments and refuses to ignore the contradictory and often uncomfortable realities of life in an unequivocally gendered world. We have a diverse audience, which keeps the dialogue and the movement we're a part of dynamic and strong. We are also uniquely situated to draw in young readers who are at a critical moment in their lives—a moment when they are discovering feminism and activism, finding answers to who they are, and questioning the definitions of gender, sexuality, power and agency prescribed by the mainstream media. Bitch not only plays a role in exploring these topics, it also provides a toolkit for engaging in analysis that promotes activism and impels social change. Bitch Media has a broad reach, with a community that has grown to over 6 million readers around the globe. [Click here for a timeline of Bitch Media's history!](#)

A FEMINIST RESPONSE TO POP CULTURE

Bitch looks at the media and its products through a lens that takes into account the historical and cultural representation of gender in pop culture. Movies, television, news magazines, fashion magazines, blogs,

Get award-winning feminist analysis straight to your inbox: Sign up for our Weekly Reader!

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SMITTEN KITTEN
 A feminist sex toy store for everybody!

<https://bitchmedia.org/article/oh-joy-sex-toy-dangers-douching>

UK 16 SEPTEMBER 2016

How a 3D printed clitoris could change women's sex lives



Learning the truth ...

17 Lies We Need to Stop Teaching Girls About Sex - Google Chrome


https://mic.com/articles/88029/17-lies-we-need-to-stop-teaching-girls-about-sex#.EUj25BMli

Identities.Mic

17 Lies We Need to Stop Teaching Girls About Sex

TWEET SHARE

6. Too much sex will stretch you out.



Nothing like the old "hot dog down a hallway" analogy to scare young women away from safe, consensual promiscuity. The truth is, women differ in size just like men do. The vagina is like a rubber band, and unless you're regularly getting down with fire hose, you should be fine.

Similarly, having a baby will not "ruin" your vagina. Many women report feeling [different](#) down there after childbirth (the post-baby healing process depends on a variety of factors like age, the size of the baby and your commitment to [Kegels](#)), but we should really be teaching girls to accept their differences as [normal and natural](#) — not as new-found flaws.

Image Credit: Bill Ebbesen via Flickr

7. Women don't think about sex very much.

The lies dissected..

<https://mic.com/articles/88029/17-lies-we-need-to-stop-teaching-girls-about-sex#.EUj25BMli>

Lesbian, Gay, Bisexual, Transgender-LGBT
The Mautner Project of Whitman-Walker Health
<http://www.whitman-walker.org/mautnerproject>


LGBTQ Resource Center

- <https://lavenderhealth.org/>

National Center for Transgender Equality

- <http://www.transequality.org/know-your-rights/healthcare>

Services expanded



Our colleagues will focus in greater depth on the intersectionality of race, class, gender, and orientation must be part of the discussion.

Back in the 1970's, there was clearly a white, middle class, heterosexual bias.

WoCSHN

WOMEN of COLOR SEXUAL HEALTH NETWORK



**Challenging the questions asked
and answers provided...**

Messages to women:

- Reduce reliance on cosmetics
- Consider not shaving- legs and armpits
- Go without a bra
- Love and accept your body
- Critique dangerous impact of advertising



Jean Kilbourne, 1979

1970's...Messages about body image

Challenges-

Tattoos, piercings, pube shaving

Labiaplasty

More plastic surgery options...and they're wanting them!

Link to: thevaginainstitute.com

2000's

- <http://everydayfeminism.com/2016/01/when-beauty-equals-white/>
- The Century Project.com
- You tube of Betty Dodson drawing genitalia
- You tube: clitoris: forbidden pleasure (film)
- Facebook: vulvart

Great resources on the internet...

- Female genital mutilation
- Female cosmetogynocology

The effect of pornography on girls/women

<http://thecentrefoldproject.virb.com>

Then and Now

- Vajazzling.com (decorating the labia, etc)
- Piercing the labia
- Anal bleaching
- Vaginal rejuvenation
- Vaginoplasty

Obsession with genitalia



The G Shot ca. 2008

O-SHOT Philadelphia, PA | Bala Cynwyd O-SHOT - Google Chrome
www.worldwellnesshealth.com/o-shot-philadelphia/

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WELLNESS CENTER

Home » Wellness Center » Sexual Rejuvenation » O-Shot®

O-Shot® in Philadelphia, PA

Women experience a lack of sexual desire as they go through menopause or as a side effect from certain health conditions or prescription drugs. Dr. Daniel Lebowitz, a board-certified physician at World Wellness Health Institute, offers the O-Shot® to women who want to enhance their sex life.

What is the O-Shot®?

The O-Shot® is a non-surgical, minimally invasive procedure to restore sexual desire and enhance the female orgasm in women as they age and experience a low libido. It is estimated that about 50 percent of all women deal with a lack of sexual desire. The O-Shot® uses platelet-rich plasma injected into the vaginal wall to increase tissue growth and blood flow, which in turn improves feelings and desires.

Benefits of the O-Shot®

Not only does the O-Shot® restore the female libido, it provides women with the following benefits:

Meet Doctor Daniel Lebowitz

The O-Shot (2013)

www.worldwellnesshealth.com/o-shot-philadelphia

Why More Teen Girls Are Getting Genital Plastic Surgery

Rachel Simmons, Time, May 12, 2016.

<http://time.com/4327126/teen-girls-implants-genital-plastic-surgery>

The Vagina Institute

www.thevaginainstitute.com

“The Vagina Institute specializes in collecting, analyzing and processing data relevant to human sexuality and sexual organs as well as related information focused on female and male preferences. The data and information consists of all visible external parts of human genitalia and internal structures of the reproductive system, as well as human sexual practices and rituals.”

Interest in labiaplasty



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Elective cosmetic vaginal surgery to make you look and feel your best.

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- FDA Approved

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providing the Mona Lisa Touch.

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Vaginal Rejuvenation

Vaginal rejuvenation surgery combines Labiaplasty and Vaginoplasty for a cosmetically enhanced and tightened vagina in one surgical visit.

Labiaplasty

Labiaplasty can enhance the cosmetic appearance of the outer vagina, providing greater confidence and self-esteem.

Vaginoplasty

Vaginoplasty surgery tightens the vagina and surrounding muscles, increasing friction that often enhances sexual satisfaction.

Hymenoplasty

Treatment for torn hymen is also known as Hymenoplasty, a type of vaginal surgery frequently done for religious or cultural reasons.

Live Chat

[Click Here](#)



Does Insurance Cover Labiaplasty?

csanchez brooklyn 7 years ago

Do gyn doctors also do this type of surgery? Is it covered by insurance or is it only done with cash?

insurance

Doctor Answers (22)

Promoted Local Answer

Insurance does not cover most labiaplasties

December 8th, 2014

Medical insurance covers the treatment of labial and vulvar diseases. While labiaplasty may occasionally be done to treat diseases that involve the labia (like cancer, hidradenitis, etc), most insurance companies will balk at covering the procedure for symptoms limited to discomfort or appearance issues. If you wish to undergo a labiaplasty for these common symptoms, you can usually obtaining financing through several national lenders or get a loan from a credit union if you have decent credit.

Web reference: <http://www.lvr-nj.com/labiaplasty.html>



Marco A. Pelosi III, MD
Jersey City OB/GYN
★★★★★ 19 reviews
www.LVR-NJ.com

1,403 Labiaplasty questions answered

Read Marco A. Pelosi III, MD's answers

Insurance does not cover most labiaplasties

December 8th, 2014

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Web reference: <http://www.lvr-nj.com/labiaplasty.html>



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LABIAPLASTY PICTURES



Before & afters from doctors (1390)



Photos from the community

SPONSORED DOCTOR



Pedy Ganchi, MD

Ridgewood Plastic Surgeon
★★★★★ 67 Reviews
(201) 345-1147 Visit Website >



SPONSORED DOCTOR



John R. Miklos, MD, MS

Atlanta Urogynecologist
★★★★★ 9 Reviews
(770) 467-3391 Visit Website >



What becomes normalized?

Contraception v. Contraception

Today's Choices

1960 birth control pill

1965 Griswold v. Connecticut

1972 Eisenstadt/Baird

1973 Roe v. Wade

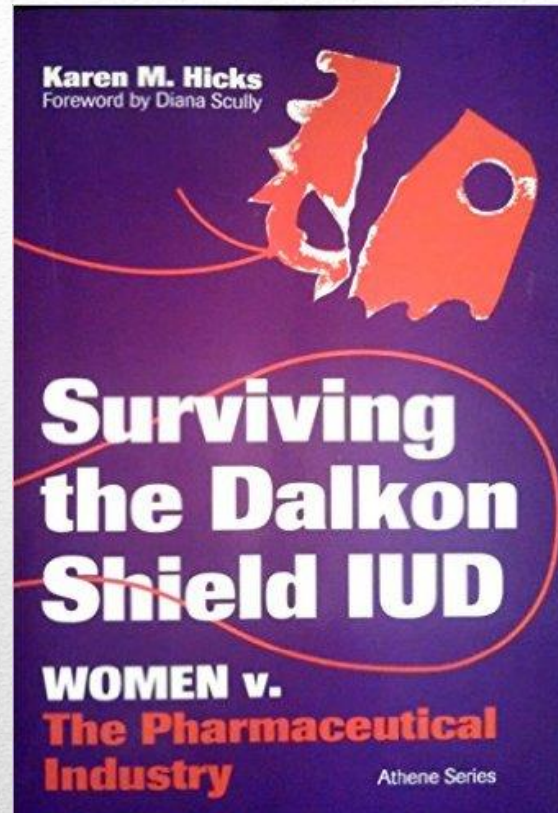
Major U.S. Supreme Court Cases 1965-2007

https://www.plannedparenthood.org/files/6113/9611/6576/major_scrulings_04-07.pdf

Contraception Evolution

- Diaphragm, creams/jellies
- Birth control pill
- IUDs

Popular methods in the 1970's



The Cadillac of Contraception

- LARCs (new name/new IUDs)- Skyla, Liletta, Mirena, Paraguard
- More pills – different dosing, continuous use
- Injectables – for whom?
- Inserts- Implanon
- Essure (sterilization)- 2015 bad press

And now?

Culture change--



Reliance on cellphones vs. computers
vs. books







There's an app for that

Video Visit :: Planned Parenthood - Google Chrome

https://www.plannedparenthood.org/get-care/online/video-visit

Planned Parenthood®
Care. No matter what.

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TAKE ACTION »
DONATE »

FOLLOW      

LEARN GET CARE GET INVOLVED ABOUT US


Hello.
We'll see you now.

If you live in Alaska, Hawaii, Idaho, Minnesota or Washington State, can have a video visit with one of our providers for birth control or UTI treatment. In some states, we also offer at-home STD testing. Discreet, secure, and conveniently available. Have health insurance? Your cost may be covered. [Watch our video](#) to see how it works.

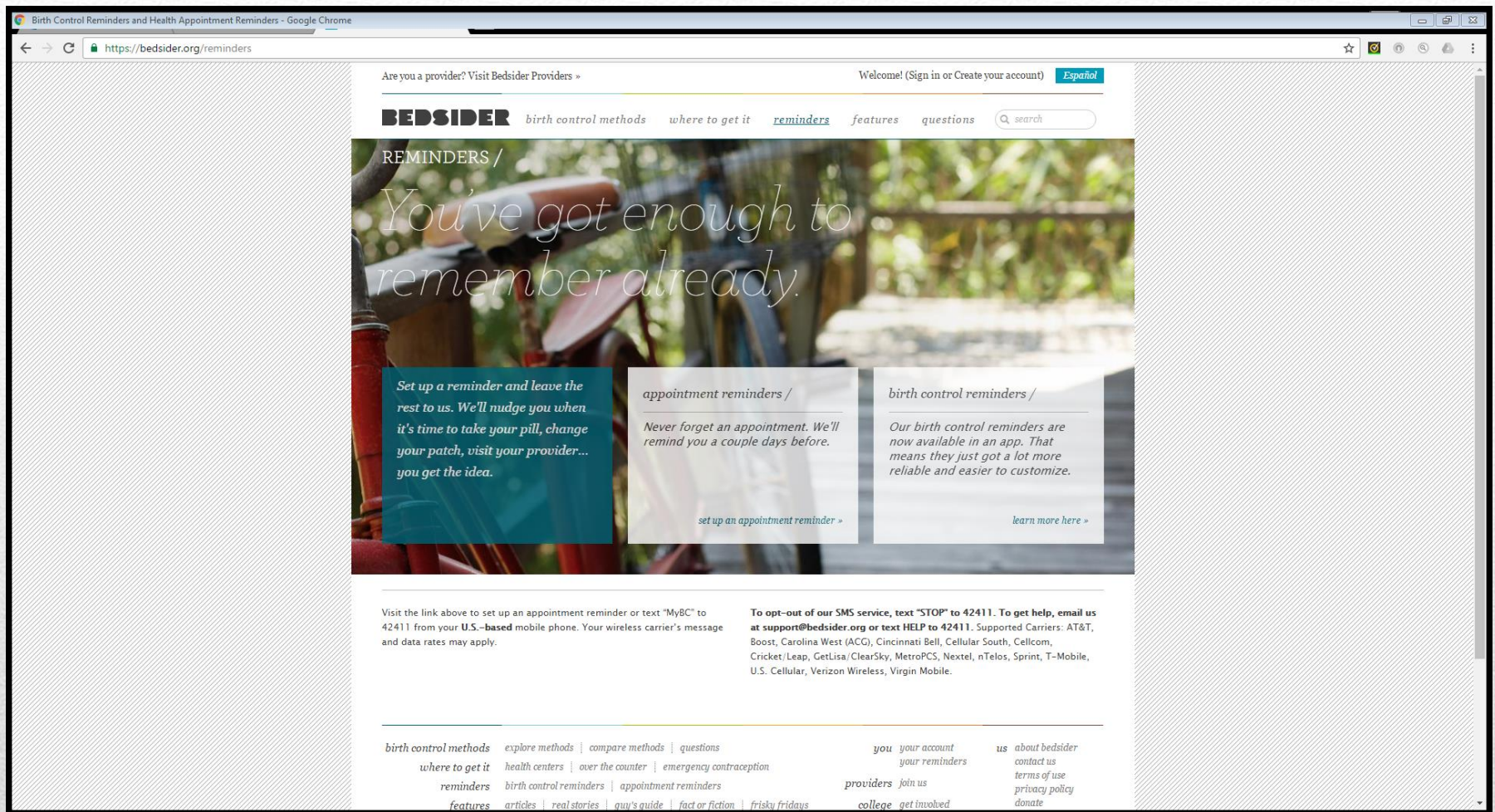
Available on the
App Store

ANDROID APP ON
Google play

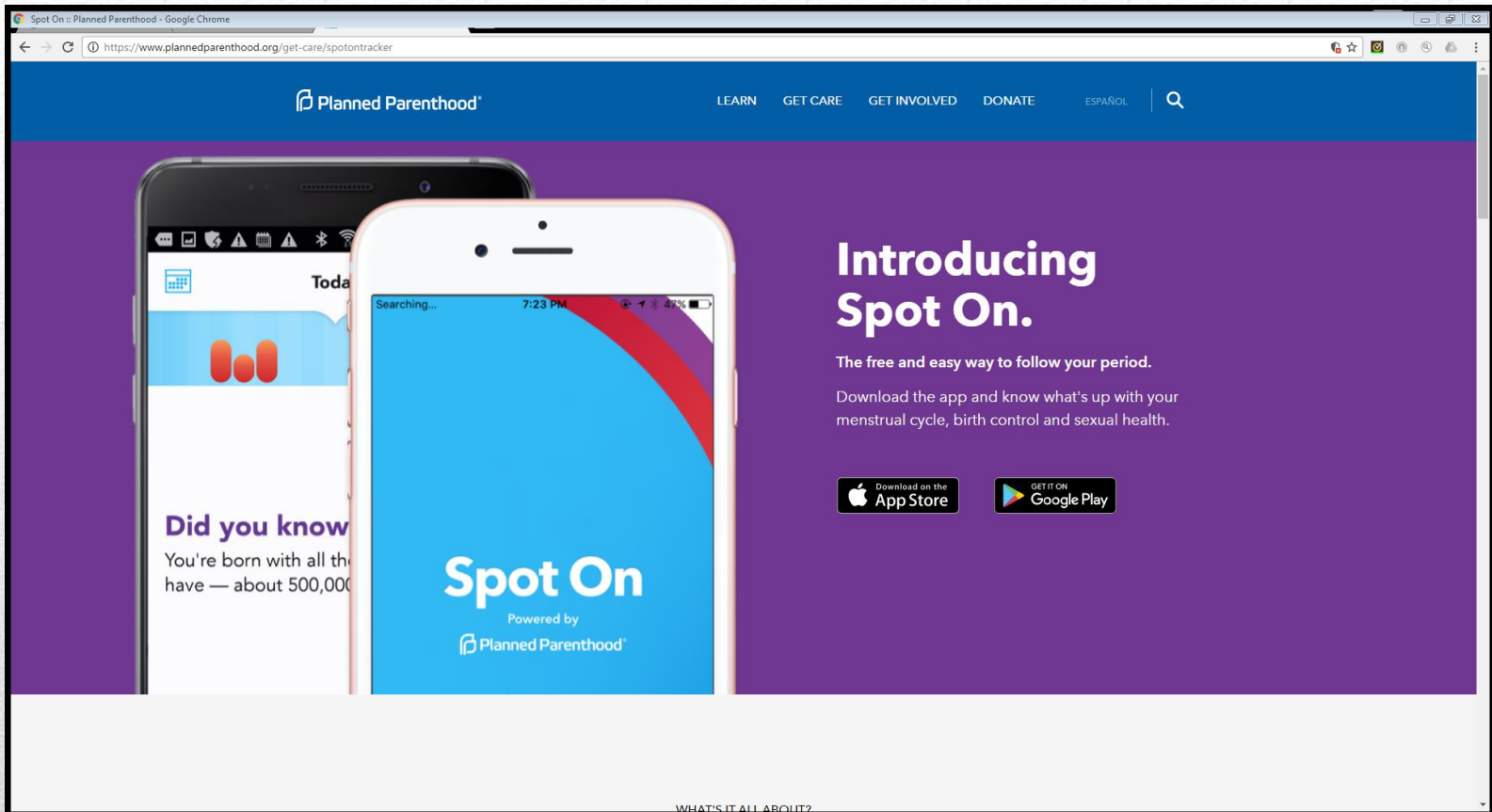
Start Visit
in Browser

 Questions? See our FAQs.

<https://www.plannedparenthood.org/get-care/online/video-visit>



Bedsider.org



Spot On

<https://www.plannedparenthood.org/get-care/spotontracker>

Two Days, Four Major Victories for Reproductive Rights at the Supreme Court

On the debates around abortion, contraception, and religion, the justices have said their piece.

HANNAH LEVINTOVA JUN. 29, 2016 6:00 AM

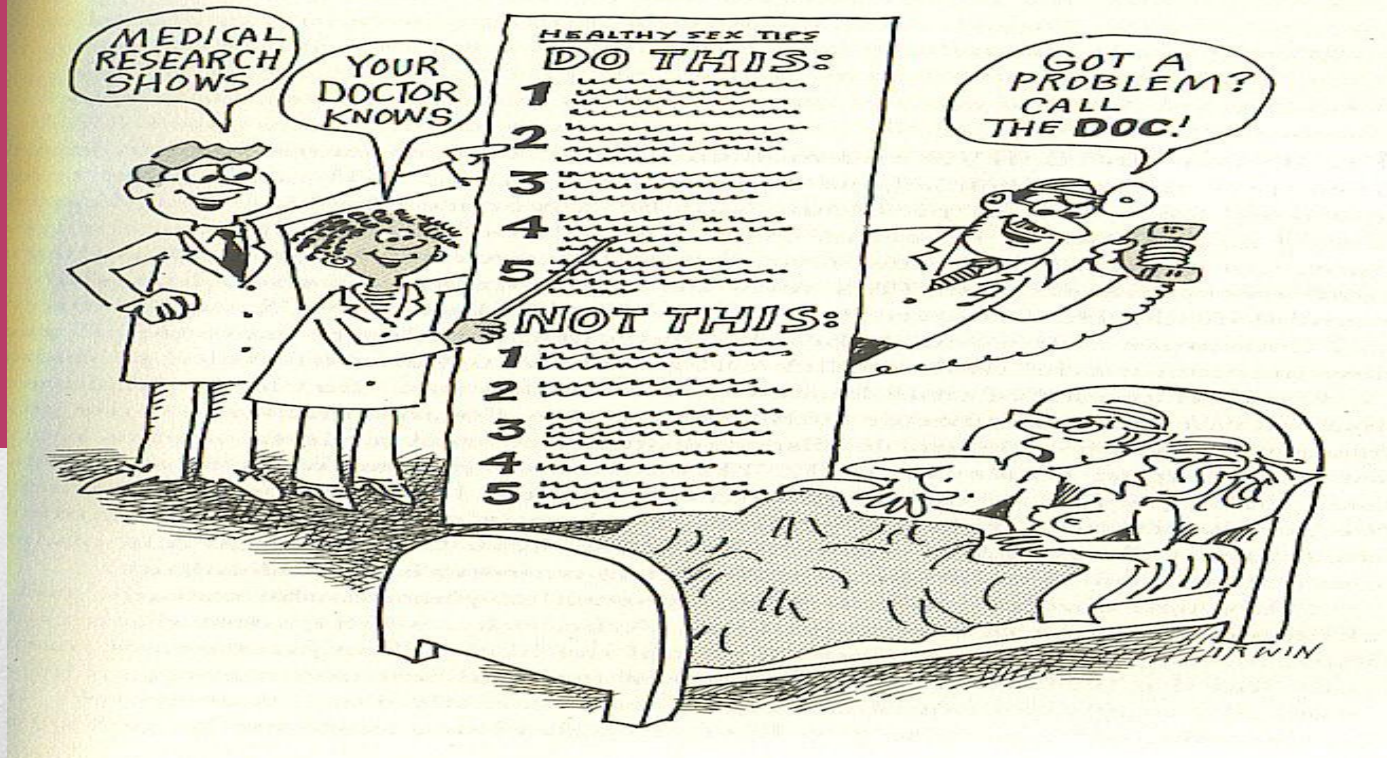


Mother Jones Report

<http://www.motherjones.com/politics/2016/06/two-days-four-victories-reproductive-rights-supreme-court>

The medicalization of sexual problems

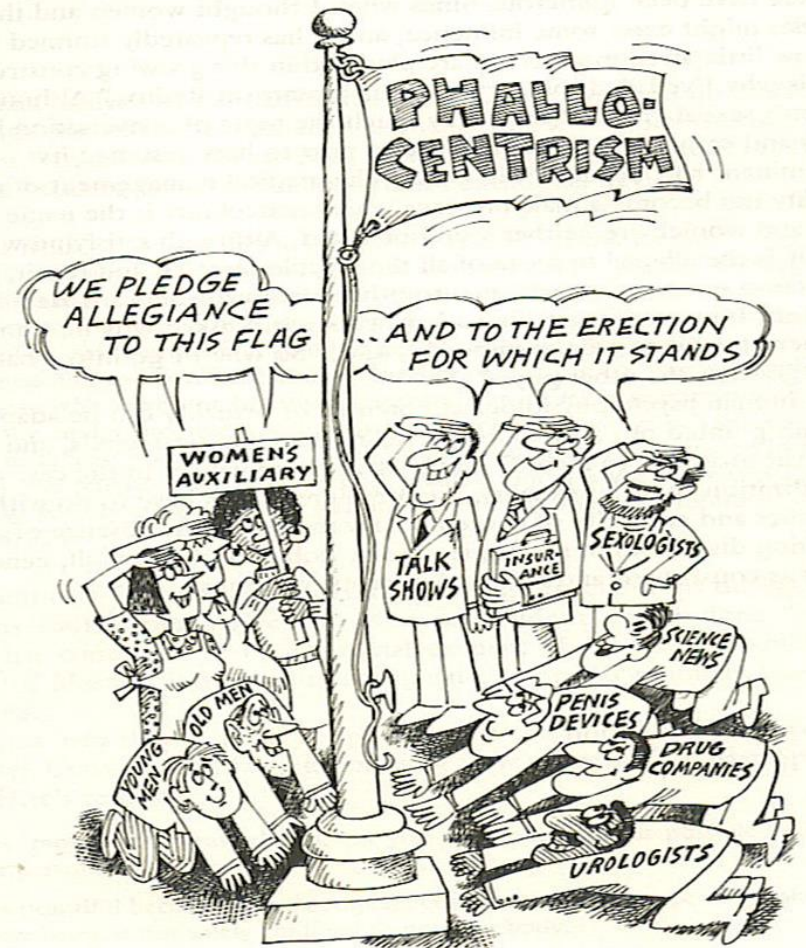
THE MEDICALIZATION OF SEXUALITY



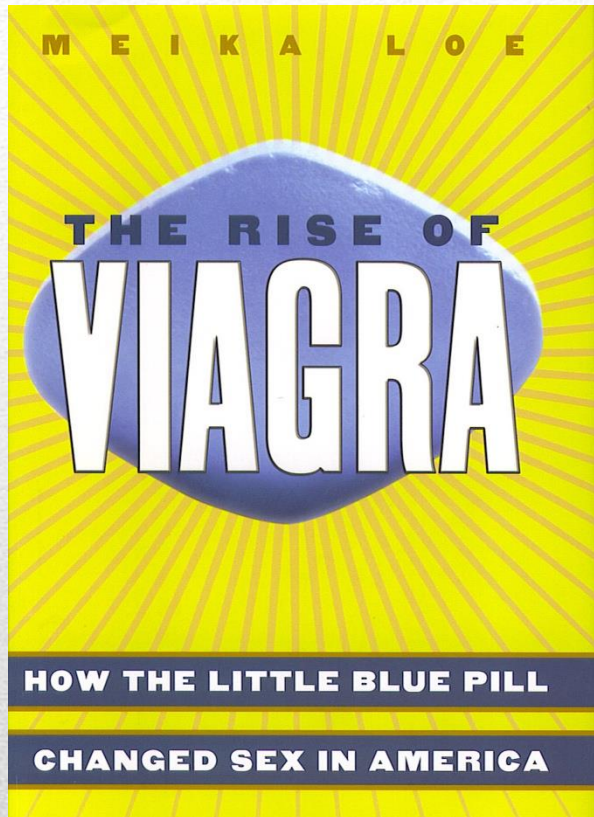
Cartoon by Frank Irwin

Begins in earnest ca. 1990s

POPULAR WRITINGS
ON THE THEME

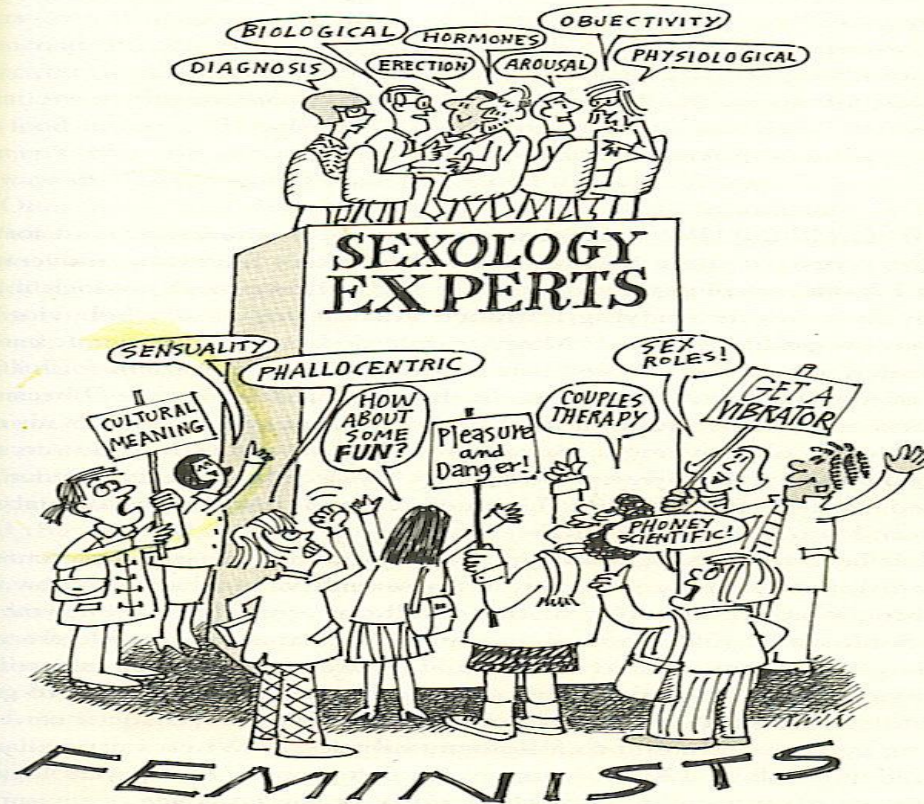


Cartoons by Frank Irwin



1998 Viagra Revolution

FEMINISM AND SEXUALITY

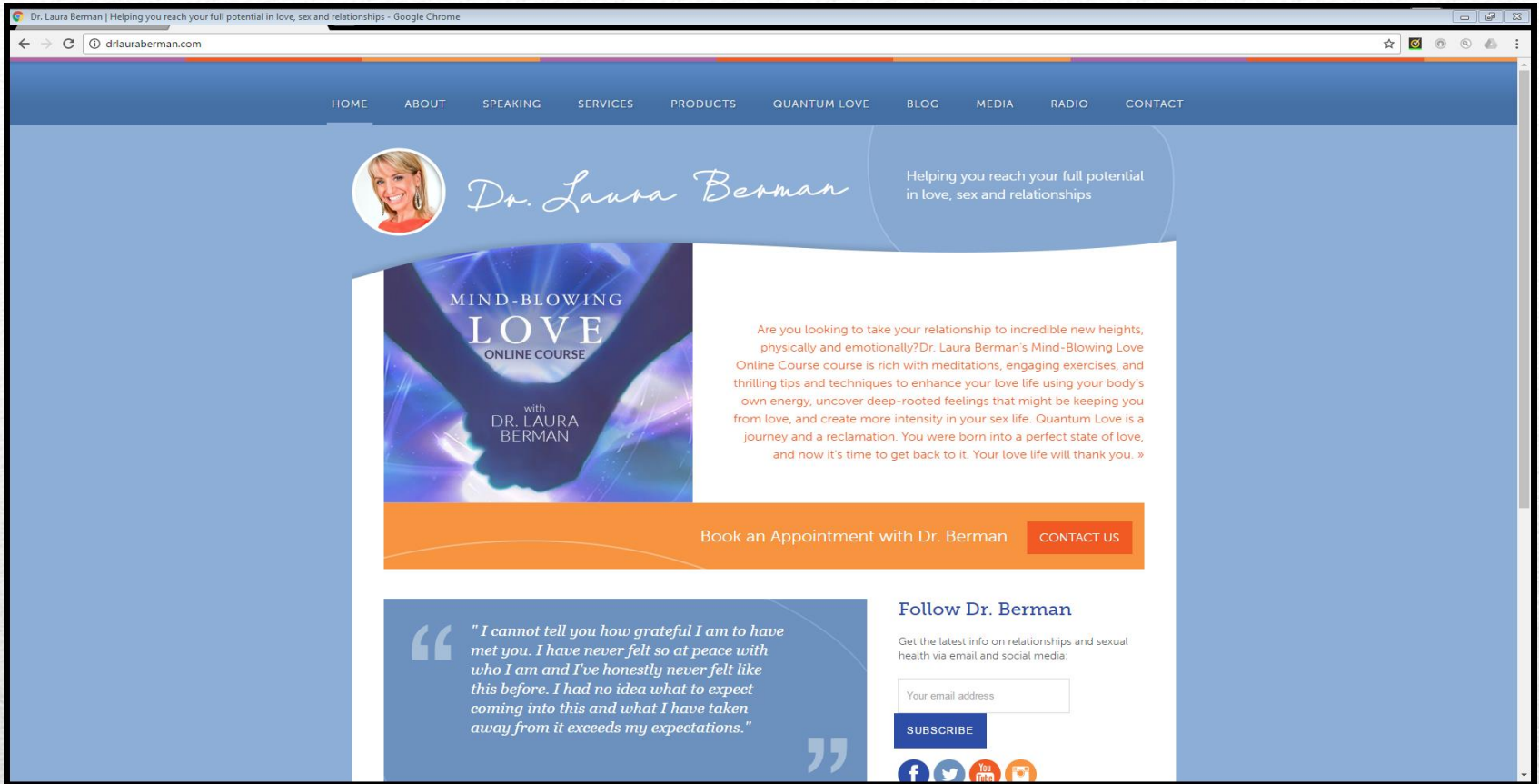


Cartoon by Frank Irwin

But what CAUSES women's dysfunctions??

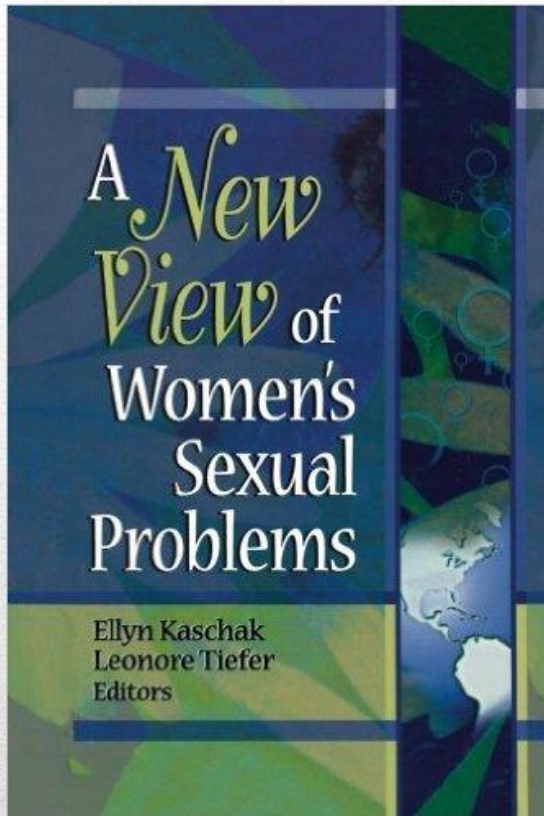


Androgen deficiency?
Neurotransmitters?



Laura Berman - Viagra For Women

For Women Only (first edition pub. 2000)



www.newviewcampaign.org

New View Debut 2001



A "Maxine" cartoon by Marian Henley. Reprinted by permission of the artist.

Consider deleting?

2004

Testosterone patch Intrinsa (Proctor & Gamble)

2010

Flibanserin #1 (Boehringer-Ingelheim)

2013-2015

Flibanserin #2 #3 #4 (Sprout Pharmaceutical)

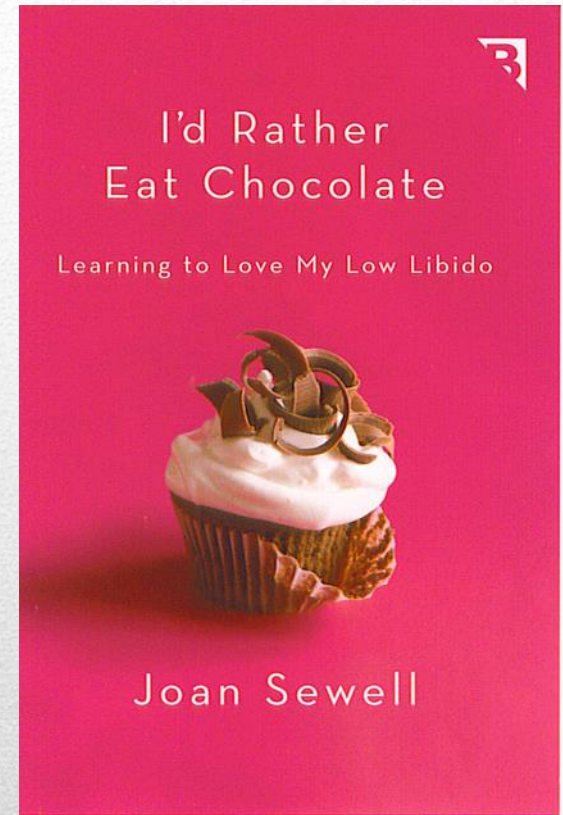
FDA Hearings 2010, 2014

Novelty: FDA Patient Focused Drug Development meeting-October

On to the FDA



Liz Canner, 2009



2008

August 2015 FDA announcement

“Addyi is a serotonin 1A receptor agonist and a serotonin 2A receptor antagonist, but the mechanism by which the drug improves sexual desire and related distress is not known. Addyi is taken once daily. It is dosed at bedtime to help decrease the risk of adverse events occurring due to possible hypotension, syncope and central nervous system depression (such as sleepiness and sedation). “

FDA Approves Addyi

Top 10 Things To Know About

Addyi

Addyi is the first FDA approved drug to treat hypoactive sexual desire disorder (HSDD) in premenopausal women. Whether you're considering speaking with your clinician about Addyi or just interested in learning more about this new drug, it is important to know the facts.

1 Addyi has only been tested in a small subset of women.

The participants who enrolled in the initial clinical trials for Addyi were premenopausal, heterosexual, and generally very healthy women. The overwhelming majority of these women identified as White (>85%), non-Hispanic (>86%), and non-smokers (>85%). Given the extensive list of exclusion criteria for the trials, the extent to which the trials' results can be generalized to the public is unknown.

WHITE
HETEROSEXUAL
100%
NON-SMOKER



2

Addyi may cause sudden prolonged unconsciousness.

Addyi causes central nervous system depression. During clinical trials, women who used Addyi were more likely to experience dangerously low blood pressure, dizziness, and even loss of consciousness than women taking placebo. These studies also revealed a higher incidence of accidental injury in women who used Addyi.

3 Alcohol should be avoided when taking Addyi.

Women may experience fatigue, low blood pressure, and fainting when using Addyi, all conditions which may be exacerbated when drinking alcohol. Women who are moderate drinkers (compared to heavy drinkers) may experience these effects more dramatically. The FDA asked Sprout (the company that owed Addyi) to conduct a safety study assessing these risks, but only two of the 25 participants in the alcohol safety study were women. Because the risks of using alcohol with Addyi are still unknown, the FDA is counting on women to abstain from alcohol permanently despite there being no known strategy to ensure people are able to do this in the long term.



Addyi

4

Hormonal contraceptives may interfere with Addyi.

Some adverse events, including sleepiness (somnolence), dizziness and fatigue, were reported more often in women who used hormonal contraceptives. Hormonal

National Women's Health Network

https://www.nwhn.org/wp-content/uploads/2015/10/NWHN_Addyi_Fact_Sheet_P2.pdf

1 Year Later: What's the Score?

clinical trials show that 9 out of 10 women experience no improvement in sexual desire when taking Addyi over placebo.² That's a lot of risk for almost no reward. One year later, we went back to see how well Addyi has done.

REPORT CARD FOR: Addyi AUGUST 2016 (One Year Review)

SUBJECT	GRADE
Provider Education Because of life-threatening complications, the FDA required Addyi's maker to provide safety training for doctors and pharmacists: that training is just a PowerPoint and a 4-question test on the company's website. ³	D
Practicality The only study of Addyi and alcohol—conducted primarily on men—found serious complications such as severe and sudden drops in blood pressure resulting in loss of consciousness. Now women taking Addyi must promise to avoid alcohol. ⁴	D
Promised Studies The FDA required Addyi's maker to conduct three new studies on the effect of alcohol consumption in women taking Addyi. No studies have yet been released. ⁵	I
Unknown Risks No studies have looked at the risks of taking Addyi long-term or during pregnancy. Data on these risks won't be available until 2021—if at all. ⁶	I
Contraindications Women on Addyi shouldn't take common medicines used to treat yeast infections, chlamydia infections, syphilis, HIV, and Hepatitis C. ⁷	D
Birth Control Safety Addyi is marketed to women ages 18–44, but the only available data show that taking hormonal birth control while on Addyi increases the risk of serious complications. ⁸	I
Product Demand At its sales peak in March 2016, only 1,500 Addyi prescriptions were written. In contrast, Viagra sold half a million prescriptions in its first month on the market. ⁹	F
Affordability Prescriptions run \$800 per month, making Addyi costly to take daily as directed. ¹⁰	F

I=Incomplete

References are available at www.nwhn.org/addyi-1-year-later/.
The National Women's Health Network is supported by our members and by choice, we do not accept financial support from drug companies or medical device manufacturers. We bring the voices, concerns and needs of women consumers to

NATIONAL WOMEN'S HEALTH

Addyi Report Card- 1 year later

<https://www.nwhn.org/addyi-1-year-later>

Microsoft Word - Final Don't need drugs to score fact sheet.docx - Google Chrome

newviewcampaign.org/userfiles/file/Pharmed%20Out.pdf

#DON'T NEED DRUGS TO SCORE

MYTH: There is a gender disparity regarding FDA-approved treatments for sexual dysfunction.

FACT: The FDA has never approved any drug for "male sexual dysfunction." No drug for men has been FDA-approved specifically for increasing libido. The FDA has approved drugs to treat erectile dysfunction or hypogonadism in conditions such as Klinefelter's, a genetic disorder in which men have an extra chromosome. No drug for men has been approved specifically for any sexual dysfunction other than erectile dysfunction.

MYTH: There are 26 drugs that are FDA-approved for male sexual dysfunction and no drugs approved for women.

FACT: This is false. Eight products have been FDA-approved for erectile dysfunction and some of these drugs are identical (see table). The "26 drugs" have never been disclosed.

MYTH: Women's groups support the concept that the FDA is sexist.

FACT: Women's groups that don't take money from pharmaceutical companies support the FDA's decision on flibanserin.²

MYTH: The FDA is sexist for not approving drugs for female sexual dysfunction.

FACT: As a coalition of consumer advocacy groups puts it: "The problem with flibanserin is not gender bias at the FDA but the drug itself...The FDA wisely rejected flibanserin in 2010 because it failed to meet effectiveness standards... In 2013, the FDA again did not approve flibanserin because the minimal benefits in increasing women's sexual satisfaction were offset by a worrisome side effect."

"Even the score" is not a grassroots feminist movement: it is an industry-funded social media campaign to promote flibanserin.

MYTH: 43% of women suffer from sexual dysfunction.

FACT: A 15-year-old study reported that 43% of women have a sexual concern; however, concerns ranged from trivial and temporary to persistent and distressing. The lead author stated that the study was never repeated.

PharmedOUT.ORG

Just Say NO to Drugs?

<http://newviewcampaign.org/userfiles/file/Pharmed%20Out.pdf>

- Topical alprostadil
- Bremelanotide
- Intranasal testosterone
- Intravaginal DHEA
- Sublingual testosterone with sildenafil
- Apomorphine
- Bupropion
- Trazadone

In the Pharma Pipeline

How to be effective?

How to connect with students?

Teaching Sexuality Today

Students may major or complete a minor in Women's and Gender Studies.

Reproductive choice, body image, sexuality spectrum, big Pharma...discussed not just in women's health classes.

Today

- Undergraduates are predominantly 18-23
- What topics interest them? Where do instructors put their emphasis?

Body image?

Sexual identity?

Pregnancy/childbirth/lactation ?

Birth Control Methods/abortion- choice, politics?

Menstruation/menopause?

New sexual medicines?

Developmental Issues

Books?

Social Media?

Internet sites?

- *Government websites*
- *Non-profit websites*
- *YouTube links*
- *Blogs*

Course Resources

Can they critically assess sources?

- Few sexuality-trained experts (Ph.D)
- Interdisciplinary mandate
- Electives v. required courses
- Sexual health and public health imperative
- “Diversity” of sexual orientations/expressions
- Socioeconomic factors/differences

Teaching Health Today

Conversation with Professor 1 – social work

- Feminism is not the primary template
- Social/environmental impacts on sexual health
- Lifespan differences
- Reproductive justice
- Intersection with SES/ethnicity/race
- Power dynamics in health care
- Students mostly in biological sciences and women and gender

Teaching Health Today

conversation with Professor 2 – Public Health

- Little knowledge of herstory in sexual activism
 - Fairly unfamiliar with in-depth anatomical information
 - Sex saturated and learning from porn
 - Uncritical acceptance of sexual medicine experts
 - Pop culture icons
 - Electronic/Internet resources dependent
-
- Not enough anger
 - Little evidence of a reduction in the harmful messages
 - More, not less, cosmetic surgery options and more openness to trying things

Our frustrations...



From left, Eileen Kelly, Laci Green and Shannon Boodram.

“The very thing that makes their work so compelling also risks limiting their careers. For the internet’s sex-ed personalities, getting older may be the only taboo.”

The Sex-Ed Queens of YouTube Don’t Need a Ph.D.

<http://nyti.ms/2d1WuAH>

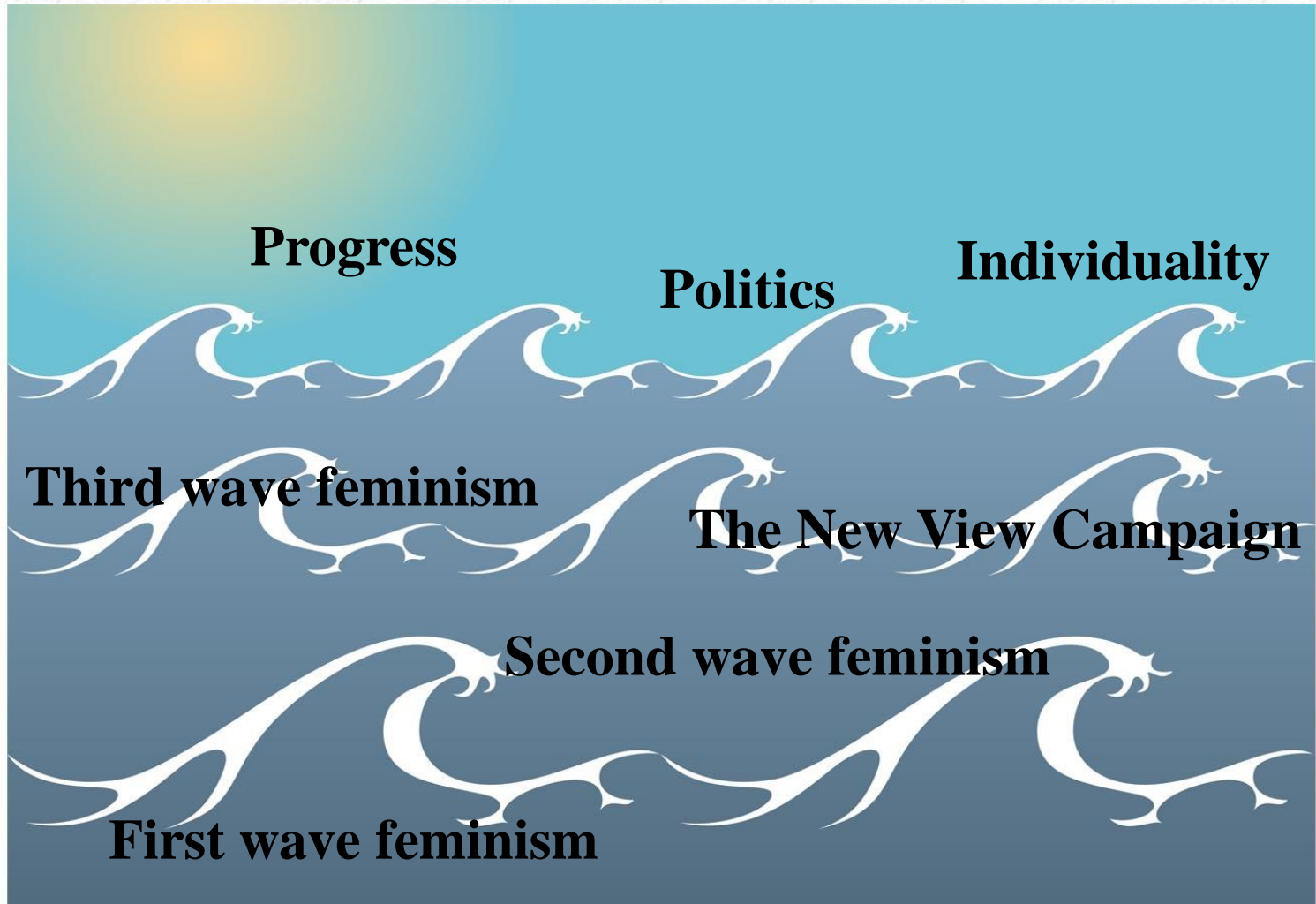
Amanda Hess, NY Times 9-30-16

Handout: Textbooks, Selected books, suggested websites (.org), documentaries and drama

Expanding options-- TED talks, “.com” sites, YouTube clips, etc.

- www.sexgeekdom.com
- The-clitoris.com and 3dvulva.com (no longer on web)
- <http://afterdinnerparty.com>
- www.sexsmartfilms.com

Resources



Continue to ride the waves...
