Women and Health in American History  
History of Medicine and Women’s Studies 531  
Spring 2008  

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This course examines the health issues women have faced and their responses to them from the eighteenth through the twentieth centuries. In particular, it explores the personal experiences and the medical views of women’s life-cycle events, the role of women as health care providers and activists, and the effect of gender on the perception of illness.

REQUIRED COURSE TEXTS:  
(Ordered at Room of One’s Own)  

531 Reader reader available at History of Science Office, 7143 Social Sciences  
Cash or check; nor refunds  

COURSE REQUIREMENTS AND GRADING:  
Participation: 20%  
Domestic Health Research Paper 20%  
Midterm 20%  
Final 20%  
Historical Roots of Contemporary Issues Paper 20%  

1) Participation:  
Because the discussion of readings is a major component of this course, you will be graded on your preparation for and involvement in class. This approach asks that you engage fully with the material and explore your own beliefs about historical events and processes. I evaluate participation by how well you talk about your ideas, listen and respond to others’ ideas, remain sensitive to the feelings of other class members, and take responsibility for moving class discussion forward. Expressing one’s ideas and getting reactions from others can help you evaluate your own opinions and ultimately sharpen your thinking. Although I set the grading criteria, you assign your own participation grade daily. (I do reserve the right to revise the grades.) Please note that the most valuable participation does not necessarily come from the student who speaks the most. Students who do not listen to their classmates, who do not make room for various viewpoints and speakers, should not earn the highest participation.  

As part of your participation grade, I expect you to complete reading guides before you come to class and turn them in at the end of the discussion. I will provide the reading guides the class session before they are due. These are to help you approach the reading, provide a starting point for class discussion, and guide your study before the exams. You will be expected to turn in 14 of these, but feel free to do them
all. For days I do not provide reading guides, I have attached a few general guidelines (Appendix II) to help you think about the texts.

2) Domestic Health Advice Research Paper:
Find three domestic health guides, each separated by at least twenty years. Choose one issue (dress, pregnancy, menopause, menstruation, sex, diet, beauty, abortion, etc.) and identify and analyze how that issue has changed (or not changed) over time. Note that this is not merely a paper that compares and contrasts three texts. Your task is to create an argument about the comparison. Can you, for example, generalize from these three examples about the changing nature of medical advice to women? Can you make a claim about the changing assessment of women’s bodies? Can you make a claim about the changing assessment of women’s sexuality? Can you explain the origins of the change you see? When appropriate, use the course materials to provide context for your discussion. (Aim for about five pages. Eight pages are too many. Three pages are too few.) First draft due Tuesday, February 19. Final draft due Tuesday, March 4.

Grading Criteria: See Appendix III.

3) Historical Roots of Contemporary Issues Paper:
Over the course of the semester, be on the lookout for newspaper or magazine articles that address some aspect of women’s health, particularly as it has been presented on this syllabus. I suggest that you collect some that look especially interesting. Choose one article, and discuss how the history you have learned informs the current issue. Again, you must make an argument about the role of history. You could, for example, create a thesis about how the past helps explain the present or you could argue how the past can help guide the future. Or you could try something else as the issue and article suggest. But your paper must have a thesis and it must connect historical analysis with a current issue. (Aim for about five pages. Eight pages are too many. Three pages are too few.) First draft due Tuesday, April 22. Final draft due Tuesday, May 6.

Grading Criteria: See Appendix III

3) Examinations:
The midterm and the final will be take-home essays. I will provide the questions for the midterm on Tuesday, March 4. It will be due on Thursday, March 13 in my box near 1426 Medical Sciences Center. I will provide the questions for the final on Tuesday, May 6. It will be due in my box on May 16 at 12:05.

Grading Criteria: See exams.

Writing Fellows:
To help with the writing assignments this semester, we have the opportunity to work with the Undergraduate Writing Fellow Program. The Writing Fellows are gifted undergraduates who have received special training to offer critical evaluation and helpful suggestions on your drafts. After you turn in your drafts, I will give them to the Fellows who will read and provide written comments. You will then meet with your Fellow to discuss the paper and strategies for the rewrite. These meetings are mandatory.

This is a terrific opportunity for several reasons. First, our work is always improved by input from others. While the Fellows have no special training in the content of the course, they are trained to help you develop a well-constructed and persuasive essay. Second, good writing comes through practice and rewriting. The two-draft policy provides a chance for both. Finally, it helps your grade. Many of you are new to historical writing, and it can be surprisingly challenging. Getting two chances to get it right will
improve the quality of your final product. Our writing fellows are: Marcelle Richards (smrichards2@wisc.edu), Kerry Gabrielson (kgabrielson@wisc.edu), and Callie Hansen (cehansen@wisc.edu).

Late Paper Policy:
Assignments that are late, for whatever reason, will be docked 5 points per day unless I have granted prior approval. This applies to all final assignments, including the take-home exams. Assignments a week or more late will not be accepted. Late drafts will be accepted only in extraordinary cases and only with my prior approval. If you do not turn in a draft, your final paper will be lowered by a minimum of 10 points. Use the phone.

GRADING SCALE
93-100  A
88-92   AB
83-87   B
78-82   BC
70-77   C
60-69   D
0-59    F

If you have questions about a grade, speak first to the instructor (Houck). If the question is not resolved, speak with the chair of Medical History and Bioethics (Susan Lederer). She will attempt to resolve the issue informally and inform you of the Appeals Procedures if no resolution is reached informally.

I wish to include fully any students with special needs in this course. Please let me know if you need any special accommodations in the instruction or evaluation procedures in order to enable you to participate fully. The McBurney Center will provide useful assistance and documentation.

GRADUATE STUDENT COURSE REQUIREMENTS
Graduate students will be required to attend a separate seminar, read five additional books, write two book reviews (both due by October 30), write a 10-12 page research paper (draft due April 17; final due May 8), and take the final.

Graduate Readings:

Seminar Participation, 30%; Book Reviews, 10% each; Final, 20%; Research paper, 30%.
COURSE SCHEDULE

Tuesday, January 22  Introduction to Women and Health in American History
Thursday, January 24  Approaches to Women and Health
Tuesday, January 29  Menstruation in the Nineteenth Century: An Affliction
Thursday, January 31  Menstruation in the Twentieth Century
Tuesday, February 5  Nineteenth-Century Sexuality
Thursday, February 7  Twentieth-Century Sexuality: Pathology and Social Control
Tuesday, February 12  Birth Control in the Nineteenth Century: Just Say No
Thursday, February 14  Birth Control: Twentieth Century
Tuesday, February 19  Abortion: Nineteenth and Early Twentieth Century

Draft of Domestic Health Guide Paper Due

Thursday, February 21  Abortion: Twentieth Century
Tuesday, February 26  Infertility
Thursday, February 28  Fitness and Body Image
Tuesday, March 4  Childbirth, Nineteenth Century

Final Domestic Health Guide Paper Due

Thursday, March 6  Childbirth, Twentieth Century
Tuesday, March 11  Hot Flashes and Mood Swings: Menopause
Thursday, March 13  Midterm Exam
March 17-21  Spring Break
Tuesday, March 25  White Women as Physicians
Thursday, March 27  Black Women as Physicians: Dual Oppression?
Tuesday, April 1  Not a Suitable Job for Ladies: White Women as Nurses
Thursday, April 3  Black Women as Nurses
Tuesday, April 8  Midwives in the Eighteenth Century
Thursday, April 10  African-American Midwives
Tuesday, April 15  Women’s Health Activists
Thursday, April 17  Gendered Aspects of Disease
Tuesday, April 22  Invalidism

Draft of Historical Roots of Contemporary Issues Paper Due

Thursday, April 24  Tuberculosis
Tuesday, April 29  Mental Illness
Thursday, May 1  AIDS
Tuesday, May 6  Breast Cancer

Final Historical Roots of Contemporary Issues Paper Due

Thursday, May 8  Wrap-up and Evaluations
Friday, May 16  Final Exam Due (12:05)
Tuesday, January 22

**Introduction to Women and Health in American History**

**UNIT I: WOMEN AND THEIR BODIES**

Thursday, January 24

**Approaches to Women and Health**


Sarah Pratt’s Diary, 1846-7 (excerpts).


Tuesday, January 29

**Menstruation in the Nineteenth Century: An Affliction**

Carroll Smith-Rosenberg and Charles Rosenberg, “The Female Animal: Medical and Biological Views of Woman and Her Role in Nineteenth-Century America,” in *Women and Health*, 111-130.


Thursday, January 31

**Menstruation in the Twentieth Century: The Need for “Sanitary Protection”**


Tuesday, February 5

**Nineteenth-Century Sexuality**


Thursday, February 7

**Twentieth-Century Sexuality: Pathology and Social Control**


Tuesday February 12

**Birth Control in the Nineteenth Century: Just Say No**


Letters from Women to the *Birth Control Review* 1917-1918.

Thursday, February 14

**Birth Control: Twentieth Century**

Andrea Tone, “Contraceptive Consumers: Gender and the Political Economy of Birth Control in the 1930s,” in *Women and Health*, 306-325.


Tuesday, February 19

**Abortion: Nineteenth and Early Twentieth Century**


 Accounts of an 1862 abortion in the *Chicago Tribune*.

Thursday, February 21

**Abortion: Twentieth Century**


“Jane,” *Voices*, June-November, 1973


Tuesday, February 26

**Infertility**


Thursday, February 28

**Fitness and Body Image**


Margaret A. Lowe, “From Robust Appetites to Calorie Counting: The Emergence of Dieting Among Smith College Students in the 1920s,” in *Women and Health*, 172-189.
Tuesday, March 4

**Childbirth, Nineteenth Century**

Letters from Nettie Fowler McCormack to Anita McComick Blaine, from Anita to Nettie, and from Miss. Hammond to Mrs. McCormick, 1890 (McCormick papers).
Letters from Jane Savine to Elizabeth Gordon, 1846.

Thursday, March 6

**Childbirth, Twentieth Century**


Tuesday, March 11

**Hot Flashes and Mood Swings: Menopause**

Letter from Mrs. Blindt to the American Medical Association, November 9, 1970.
Survey responses re menopause c. 1950, Dorothy Brush Papers.
Letters and questionnaire responses to Women in Midstream, c. 1975.

Thursday, March 13

**Midterm Exam**

March 17-21 **Spring Break**

**UNIT II: WOMEN AS HEALTH CARE PROVIDERS**

Tuesday, March 25
**White Women as Physicians**


**Thursday, March 27**

**Black Women as Physicians: Dual Oppression?**


**Tuesday, April 1**

**Not a Suitable Job for Ladies: White Women as Nurses**


**Thursday, April 3**

**Black Women as Nurses**


**Tuesday, April 8**

**Midwives in the Eighteenth Century**


**Thursday, April 10**

**African-American Midwives**


**Tuesday, April 15**

**Women’s Health Activists**


**UNIT III: GENDER AND DISEASE**

**Thursday, April 17**

**Gendered Aspects of Disease**


**Tuesday, April 22**

**Invalidism**


Thursday, April 24

**Tuberculosis**


Tuesday, April 29

**Mental Illness**

Charlotte Perkins Gilman, *The Yellow Wallpaper*.

Thursday, May 1

**AIDS**


Tuesday, May 6

**Breast Cancer**


Thursday, May 8

**Wrap-up and Evaluation**

**Appendix I: How to Grade Your Participation**

1) Attendance points  3
If you show up on time and stay the whole class period, you earn full credit. If not, adjust accordingly.

2) Attention points

If you pay attention to the conversation, give yourself full credit. If you read a magazine, do a crossword puzzle, or take a nap, adjust accordingly.

3) Preparation points

If you read all the readings, give yourself full credit. If not, adjust accordingly.

4) Participation

Participation points gauge several aspects of course involvement. They reflect whether you have understood the basic issues, engaged with the material, volunteered your opinions, and listened to your classmates. Choose the category (and the point assignment) that best fits your situation.

Category A–no participation

did not participate in discussion

Category B–good participation

answered a question when directly asked
volunteered an item for a board list

Category C–better participation

asked a question
participated in small groups discussion
voluntarily offered an interpretation of an event or reading
voluntarily responded to a classmates comment
voluntarily offered a summary of a reading

The discussion format is based upon the notion that students can and do learn from each other. To acknowledge this, one discussion point will be assigned by your peers. After every discussion, you will indicate which two people you believe contributed most valuably to discussion that day and explain why. Please note that this is not a reward for sheer quantity. Instead, perhaps someone asked one question that you made you rethink an issue. Perhaps somebody brought two disparate strains together in a way that enlivened discussion. So carefully consider which of your classmates helped you engage and analyze the material.
As you read:

Decide whether the source is a primary source or a secondary source. (In general, a primary source is a text generated at the time of the event or issue or person discussed. A secondary source is a document that analyzes that event, issue, or person from a historical perspective. If the topic of discussion is tuberculosis in the early 19th century, primary sources might include medical literature, newspaper articles, journal entries, short stories, domestic health guides, and personal letters from the early 19th century. Secondary sources might include a historian’s account of tuberculosis in the early 19th century that was written in the 20th century. There are cases where the differences are more fuzzy, but start from this rough distinction.

If the source is a primary source:

a) Note the date. What else happened at the same time? Make sure you understand the chronology of the sources for any given topic.

b) What perspective does it illuminate? Was it written by a middle-class woman facing childbirth? Was it written by a physician advising women how to cope with childbirth?

c) What is the author’s goal? Is she trying to persuade? Inform? Seduce? Scold?

d) Who is the intended audience for the piece?

e) Look up words and phrases you don’t know.

f) Can you identify a take-home message?

If the source is a secondary source:

a) Figure out the author’s argument. Every article has a main point. Make sure you know what it is. (Knowing the argument is different than knowing what the article is about).

b) What kind of evidence does the author use? (Prescriptive literature, diary entries, medical journals?) Is the evidence appropriate for the argument?

c) Is the argument persuasive? Has the author proven his or her claim?

d) Keep track of the chronology. In other words, if the author is describing change over time, make sure you understand how, when, and why things change.

e) Look up words and phrases you don’t know.
Grading Criteria:

The paper will be evaluated on the specificity of its thesis, the soundness of its organization, the strength of its analysis, the effectiveness of its evidence, the originality of its ideas, and the grace of its style.

**Thesis:** A thesis is the reason a paper exists; it is the point you are trying to make. A thesis should not merely describe what the paper does (“This paper examines the validity of the biological understandings of gendered behaviors”). Instead, your thesis statement establishes your claim (“The efforts to link gendered behavior and biology always rely on culturally and historically specific notions of gender. The failure to recognize the culture-bound definitions of gender weakens the claims that gendered behaviors--such as playing with truck--are biologically based.”)

**Organization:** The organization of your paper should revolve around your thesis. Each paragraph should build an argument in support of the thesis. Consider every paragraph a mini-argument. It should have one main idea (presented in the topic sentence) and three to five sentences (or so) that clearly support the topic sentence. Each paragraph should be connected to the one above it by a transition. End with a conclusion that explains how your paper contributes to the history of the American body.

**Evidence:** For the critical reaction paper, your evidence will come from the course reader. For the research project, you will need to track down the evidence yourself. In both cases, I will evaluate the appropriateness of the evidence for the claims you are trying to make.

**Analysis:** Your paper should analyze and interpret the evidence to support your claim. Imagine for a moment a courtroom drama on TV. The gun, the barking dog, the tire tracks are all deployed by the prosecutor to support her case. But she does not merely describe the evidence; she uses it to make a point. She claims that the fingerprints on the gun, coupled with the tire tracks that match Jane Doe’s car prove that Jane murdered Hello Kitty. Or pretend you are the defense attorney who analyzes the same evidence to prove Jane is innocent. The defense attorney notes that the finger prints provided only a three-point match, and besides, Jane shoots regularly at the firing range. Further, he claims that Jane loaned her car to her friend Willy that night so he could attend a “Dance, Dance Revolution” tournament. In other words, evidence does not speak for itself; your analysis gives evidence meaning. In the same way, you must analyze your sources, you must interpret them, to make a convincing case.

**Originality:** A first-rate essay will not just reiterate the claims made in the readings or the ideas raised in discussion. Instead, the best essays will use the readings and discussions as the starting point to explore and create your own interpretations of a topic.

**Style:** The best ideas can fail to impress if packaged carelessly or imprecisely. Vague or messy prose tends to leave the reader puzzled and frustrated rather than persuaded and enlightened. Take care that your prose illuminates your ideas rather than obscures them. Take your work seriously enough to pay attention to the way it is packaged.

Some particular items to keep in mind.

*Strive for clarity*

If a reader must read a sentence three times to understand it, the writing hinders the idea. Sometimes hazy prose reflects hazy thinking. Make sure you know exactly what you are trying to say before you say it.

*Strive for precision*

Avoid claims like “people thought,” “doctors argued,” “women dieted.” Which people, doctors, or women? All of them?
Avoid baggy sentences
Good prose is direct prose. As a result, good writers rid their sentences of all extraneous words. For example, I could advise you that if there is any way at all to get rid of extra words in your sentences that are not absolutely necessary, they should be gotten rid of if you can. Or in the words of Strunk and White, “Omit needless words.”

Use active voice
Instead of saying “The study was conducted,” try “Mr. Smith conducted the study.” This is desirable for several reasons. 1) It often allows you to omit needless words. 2) It forces you to identify the historical actors. “It was generally believed...” is a dead give-away that you only have a vague idea who believed. 3) Active voice forces you to use punchy verbs rather than the drab and generally unhelpful form of the verb “to be.” (See next point.)

Use vigorous verbs
Verbs provide the foundation of good writing. Unfortunately we often use verbs that provide no action such as forms of the verb “to be” or its helper verbs (am, is, was, were, are, be, been, being, have, has, had, do, does, did). These are perfectly fine, but try replacing them with something jazzier or omit them altogether. “She was a good student,” provides basic but bland information. “She excelled in math and science,” adds verve and specificity. Further, “he laughed” can usually replace “he was laughing.” Finally, avoid turning perfectly good verbs into nouns. Consider the following: “The mirror had a reflection of the lake on it.” “The mirror reflected the lake,” is stronger.

Avoid careless stuff
Run a spell check. Check for run-on sentences and sentence fragments. Proof-read.
What do grades mean?

A (93-100) For outstanding papers only. Thesis and argument are clear, thought-provoking, and persuasive; research is thorough, appropriate, and creative; relationships drawn between evidence and ideas are sophisticated, subtle, and/or original. The paper also connects to larger trends addressed by the course. Writing is grammatically correct and succinct. The argument flows well from point to point, without any puffery or wasted words.

AB (88-92) For very good papers that for some reason fall short of the criteria listed above. For example, the argument may be murky in one place; information may be presented that doesn’t directly or clearly contribute to the argument; writing style may be awkward here and there, or flawed by one or two consistent (if minor) grammatical errors.

B (83-87) Your basic good grade. The paper may pursue a straightforward but not especially deep or sophisticated argument; it is okay as far as it goes, but it doesn’t penetrate the material very far. It may lack enough primary research to make the argument completely persuasive. It may have a flash of brilliance that is unfulfilled, counterbalanced by minor grammatical problems, a weakness in argumentation, and/or a significant misunderstanding of events or chronology.

BC (78-82) The paper shows some of the basics of the ideal paper, but is weakened by a lack of serious think-work, evidence gathering, or writing problems. It may make superficial connections without offering sufficient evidence to make the connections plausible or persuasive, or it may have what is in principle a good argument supported by incorrect facts or chronology. Alternatively, it may provide a fairly solid argument with minor flaws, from which the reader is repeatedly distracted by awkward or ungrammatical prose.

C (70-77) A grade signifying some serious problems in paper design, expository writing, or primary research. It may deliver facts without a recognizable thesis or argument; it may wander away from the point; or it may be a thoughtful attempt so weakened by writing problems (grammar, punctuation, word choice) that it is difficult for the reader to understand a crucial point you are trying to make. Alternatively, it may offer an strong thesis without providing sufficient primary evidence. Also used for papers that do not ask historical questions.

D (60-69) A marginal grade. This grade usually indicates a paper does not meet the requirements of the assignment in two or more ways: the paper does not ask an historical question, lacks an original thesis, and/or relies almost exclusively on secondary sources. There may be some evidence of reading in the secondary literature, but the paper indicates no effort at synthesis or critical engagement. Also used for essays that are just barely coherent.

F (0-59) For unacceptable essays. An essay may be judged unacceptable if it contains plagiarism (see below); if it fails to meet three of the major requirements for the paper; if it consists primarily of content inappropriate to the themes of the course; or if the writing fails to meet standard college-level requirements of basic communication in English.