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The Maine Commission for Women

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Inform

COMMISSION SETS GOALS FOR 1987-1990

It is with a great sense of excitement and challenge that the Maine Commission for Women announces its three-year plan of initiatives. The development of this plan has occurred with the knowledge that rapid changes are taking place in our economy and social structures and that every effort must be made to address those changes directly and realistically.

Since 1984, when the Maine Commission for Women announced its agenda of priorities focusing on economic equity and violence against women, we have accomplished much. In the area of economic equity, we have been instrumental in raising the minimum wage, in securing increased funding for job training and job readiness programs through WEET and Displaced Homemakers, and negotiating increases — though still inadequate — in AFDC payments for single parents and their children. We also succeeded in creating an Office of Child Care in the Department of Human Services (DHS) and providing grant monies for model "latch-key" children programs.

Moreover, we developed and organized two very successful conferences entitled "Women and Economic Development" and the "Governor's Forum on the Changing Workforce", both of which provided specific recommendations and a sophisticated approach to defining issues affecting women primarily, such as child care, welfare, job training, equity in education — which have been traditionally viewed in only a social service context.

Further, we have printed and distributed thousands of our Job Search Guides and Non-Traditional Occupations brochures to insure that women

have the tools necessary to locate and secure a job.

In the second category, violence against women, the Commission has succeeded in removing the marital exemption in our rape statutes, worked legislatively for the creation of a new rape crisis center in Augusta and funds for the other eight centers, advocated for funding for the family violence projects to promote community education and programming for children, provided support for incest survivors and, in general, raised the level of awareness about the severity of the problems of violence against women.

The Commission for Women has strengthened its commitment to encourage more women to become involved in electoral and legislative processes. We continue to play a key role in the Women's Legislative Agenda Coalition which has presented an agenda of women's, children's, and family concerns the past three years. We have conducted hundreds of training sessions for people wanting to become familiar with the legislative process and, as we have done in the past, co-sponsored a day-long training session for women who are interested in running for elected office.

We are proud of our accomplishments and believe these efforts have improved women's lives. There are now more services available, more economic opportunities and, most importantly, more people involved in efforts to improve the lives of Maine women and girls, and thus, all Maine citizens.

But, there is still much to be done.

(continued on page 2)

Published by The Maine Commission for Women

NEW MCW CHAIR



Mary Cathcart

In July, Governor Brennan appointed Mary Cathcart of Orono to serve as Chair of the Maine Commission for Women. Other new Commission appointees on page three.

"I'd like to see the Commission for Women act as a model for women of all ages who seek to become more assertive and to improve their lives. I believe we should reach out to women throughout the state by establishing several regional commissions. I shall also encourage Commissioners to be active in their local communities by speaking to schools, women's clubs, and other civic organizations about the changes that must be made before women can achieve equality. The women of Maine expect their Commission to lead the way in eradicating battering, sexual abuse, economic inequities, and other forms of sexism. By educating more women about the issues we all face, we can empower ourselves to make these changes in our generation.

I believe also that the Commission for Women should seek a more direct and influential role in state government, and I look forward to working toward this goal with the next administration."

Commission Goals, continued. . .

Last year the Maine Commission for Women held a series of public forums around the state to get input in regards to the Commission's work. People in attendance at the forums testified about a wide variety of specific issues, most of which might be categorized in three areas: work, violence and civil rights. For each of these issues the overriding message to our organization was to be more vocal and assertive in leading the state to address these issues.

With that sentiment in mind, the Maine Commission for Women has developed three priority areas:

**** Women, Work and Family**

**** The Quest for Equality**

**** The Creation of a Non-Violent Future**

****WOMEN, WORK AND FAMILY**

The image of the average worker and the "normal" family is still based on Norman Rockwell's vision of America: man at work, woman at home taking care of the kids. That "vision" represents reality for only about 10% of our population. The statistics regarding women, work, and family indicate that dramatic changes have and will continue to take place. Women are entering the workforce in record numbers with 2/3 of the new entrants being women, 60% of married women are employed and there is a growing number (over 35,000) of female single heads of household. 59% of women with children under 18 are in the workforce.

These changes demand an appropriate governmental and private sector response, but as yet there has not been enough activity on the part of public and private institutions which continue to base policies and procedures on the reality of 10% of our population.

As an illustration, child care services are grossly inadequate or unavailable in the State of Maine. There are too few day care services to fill the need of current infants and pre-schoolers, and the number of school-age children that come home to an empty house is rising.

Women who work in Maine earn 59.9% of every dollar earned by men and 80% of women in the workforce are employed in low-paying occupations. As Maine's economy shifts from manufacturing to trade and services more of our jobs will be in the low-paying, no benefits, trade and service sectors. The result of this economic shift has been a growing caste of "working poor" — mostly women — in Maine.

OUR PRIMARY OBJECTIVE IS TO ASSIST WOMEN IN ACHIEVING ECONOMIC EQUITY AND, IN THAT PROCESS, TO ENCOURAGE PRIVATE AND PUBLIC INSTITUTIONS TO ADAPT TO THE CHANGING ECONOMIC AND SO-

CIAL REALITIES OF TODAY'S WORKERS AND THEIR FAMILIES.

Specifically, we will:

- Insist the State become a model by providing child care services for state employees.
- Initiate programs to make the transition from welfare to work easier especially through the provision of support services.
- Increase AFDC payments and index them to the cost of living.
- Distribute our Non-Traditional Occupations brochure widely and develop a companion video and curriculum guide to insure that Maine students have the widest range of career choices possible.
- Produce and distribute fact sheets and public service announcements on the current economic status of women.
- Research the impact of the changing economy on wages, benefits and pensions.

****THE QUEST FOR EQUALITY**

We are dedicated to maintaining the rights that women have gained over the last fifty years. There are efforts on the Federal level to eliminate affirmative action, curtail the enforcement of Equal Employment Opportunity laws and Title IX, and there are continuous attempts to take away women's reproductive choice.

OUR PRIMARY OBJECTIVE IS TO PRESERVE CURRENT LAWS AND THEIR FULL ENFORCEMENT REGARDING AFFIRMATIVE ACTION, EQUAL OPPORTUNITY, PAY EQUITY, REPRODUCTIVE CHOICE AND HUMAN RIGHTS.

Specifically, we will:

- Oppose any state, federal laws, or public referendum that infringes on women's rights
- Support the Civil Rights Restoration Act on Federal level
- Educate women about the current legal rights through the publication of the 1987 edition of "Legal Rights of Maine Women" handbook.

****THE CREATION OF A NON-VIOLENT FUTURE**

Violence against women continues, it must be stopped. Since 1983, 1,200 sexual assault victims in Maine have sought help from our rape crisis centers. Nationwide, 1/3 of all homicide victims are women who were killed by a spouse or cohabitant, and one out of every four girls in Maine can expect to be raped or sexually abused in her lifetime. One of every four cases filed with the Maine Human Rights Commission involves sexual harassment.

The Commission for Women has

committed itself to the improvement of the social, political and economic status of women and girls in Maine. The most rudimentary basis for any form of development or improvement is physical safety.

HENCE, OUR OBJECTIVE IS TO EFFECT A CHANGE IN SOCIETAL ATTITUDES FROM ONE OF ALLOWING VIOLENCE AND EXCUSING OFFENDERS TO ONE THAT WILL NOT TOLERATE VIOLENCE AGAINST WOMEN AND PROVIDES SERVICES FOR THOSE WHO ARE VICTIMS.

Specifically, we will:

- Secure funding for full-time, paid staff at the rape crisis centers.
- Eliminate the voluntary social companion exemption in rape statutes.
- Extend the community education efforts and children's programs in the family violence shelters.

Overlaid on all of these specific initiatives is our continuous educational work, numerous public speaking engagements, media work and coalition building in which the Commission has been and will continue to be involved.

The three-year plan we offer today is indeed ambitious. It will require hard work, resources and the commitment of many citizens beyond our 17-member Commission to ensure success. To that end, the Commission is pleased to announce the development of regional Commissions for Women whose purpose will be to advocate for women on the local and regional levels, and provide the opportunity for broader participation in the Commission's work.

We are confident in our ability to achieve our objectives. This is a critical time in Maine. What we do in the next three years will set the framework that will move Maine into the 21st century. WE are at a historical crossroads. WE must adapt to changes occurring right now in our lives and present realistic alternatives for women and their families in the future. Only then can we realize a way of life that our foremothers only dreamed of.

Seasons Greetings

MEET THE NEW COMMISSIONERS



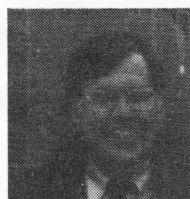
Laura A. Gordon

Dr. Gordon, a resident of Brunswick, Maine, is a practicing psychologist at the Veterans Administration Medical Center and Regional Office, Togus, Maine. She received her Ph.D. in Counseling Psychology from Columbia University, New York.

Dr. Gordon's past work experience has been as a consultant at Fordham University, the Bronx; a psychologist at the Veterans Administration Outpatient Clinic, Brooklyn, New York; consultant for New York State Department of Mental Hygiene in New York; a psychologist at Manhattan Developmental Center in New York; and an instructor in the Psychology Department of two New York colleges.

Dr. Gordon brings to the Commission her skills in family therapy and conducting training programs for VA employees on sexual harassment, discrimination, and prejudice. Her experience as a workshop presenter on such subjects as assertiveness training, post traumatic stress disorder, and women and self esteem will certain benefit the Maine Commission for Women.

Laura A. Gordon
19C Maple Street
Brunswick, Maine 04011



Robert J. Dworak

Robert J. Dworak is a resident of the Town of Mount Desert. He is a writer and researcher dealing primarily with social and public policy issues. He received the Doctor of Public Administration degree from the University of Southern California in 1970. Dr. Dworak is the author of such publications as *Taxpayers, Taxes, and Government Spending: Perspectives on the Taxpayer Revolt*, published by Praeger Publishers in 1980. He is currently working on a project dealing with management issues in public libraries.

His experience includes work for a variety of public agencies in California, Connecticut, Illinois, and Maine. Dr. Dworak has served on the faculties of four universities and most recently was Dean of the Graduate School and Professor of Management at Thomas College in Waterville.

Dr. Dworak's interests in working with the Commission include research on issues affecting the social and economic welfare of women and determining means of reducing sexual harassment and discrimination against women in the workplace.

Robert J. Dworak, D.P.A.
Bartlett Landing Road
Mount Desert, Maine 04660
(207) 244-5158



Sally D. Gibson

Ms. Sally Gibson is a resident of Harpswell, Maine and is the Office Manager and Treasurer of John G. Gibson, Inc. of Brunswick.

Sally Gibson attained her Bachelor of Science degree in Social Work from the University of Southern Maine in 1973. Since then she has managed to skillfully combine her education and interest in public policy. She served as ombudsman for the handicapped at the State Department of Rehabilitation. Ms. Gibson has been active in the Maine Women's Lobby, the Democratic Party, and the National Organization for Women.

The Maine Commission for Women welcomes Ms. Gibson's skills in business, social work, and politics and her participation on the Board.

Sally D. Gibson
Box 2208, R.F.D. 2
Brunswick, Maine 04011
(207) 833-5273



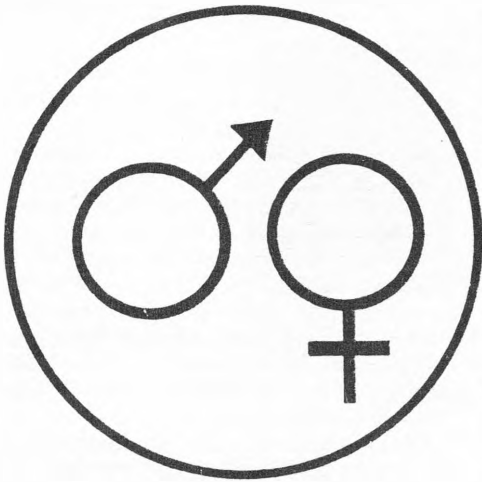
Sister Claudette V. Poulin

Sister Poulin of Winslow, Maine, is the present Administrator of the Christian Life Center in Winslow. She received her M.A. in Education from Boston College in 1974.

Since 1964, Sister Poulin has served as an elementary education teacher, religious education coordinator, a member of the Outreach Task Force for the Portland Maine Diocese, and as Assistant Provincial for the Maine Province. She is a volunteer with the Waterville Hospice and regional auditor for the Portland Diocese Tribunal.

Sister Poulin has a deep understanding of the needs of women and is most concerned with working to alleviate the immediate needs of the poor. The Commission welcomes her unique perspective on Maine women.

Claudette V. Poulin, CSJ
93 Halifax Street
Winslow, Maine 04901
(207) 873-1444



FAMILY LIFE EDUCATION TEACHER TRAINING PROJECT

School-based family life education is viewed as a controversial issue. Although most people (85%) support family life and sexuality education in the schools, many have legitimate concerns about who will teach their children and what will be taught.

The Family Life Education Teacher Training Project, which began in June 1983, and is administered by the Family Planning Association, sought to respond to these concerns expressed by Maine communities. Through a carefully designed program, which includes a philosophy supportive of community and parental values and involvement of school administrators, the Project has successfully trained 325 school professionals and parents since 1983.

The Family Life Education Teacher Training Project was designed also in response to the Family Planning Community Educators' need for support. Community Educators staff the Association's Community Education and Information Program, a statewide service to communities providing information and education about adolescent sexuality which aims to prevent teen pregnancy. The Educators found that the same schools were requesting their services from year to year, making them virtually unavailable to unserved communities and schools. The need for well trained teachers to work with students on a daily basis was clear to staff working in Maine schools. As a result, more schools and communities will have access to training in Family Life Education for their teachers.

Because Family Life Education is an important part of comprehensive school-based health education, in 1986 the Project will become part of the services offered through Maine's Department of Education and Cultural Services. The institutionalizing of this vital aspect of education will assure its longevity and reflect the commitment of Maine to its young people.

The following is reprinted, with permission, from the Spring 1986 issue of The Family Planning Association of Maine Newsletter.

FACTS OF LIFE FOR TEENS IN MAINE

- 173,390 teens in Maine, age 10-19
- The average age teens begin sexual activity is age 16.2 for girls and 15.6 for boys.
- 27,130 or 50% of Maine teenagers between ages 15-17 are estimated to be sexually active and at risk of unintended pregnancy.
- 3,283 teens age 10-19 became pregnant in Maine in 1984.
2,028 resulted in live births (60%)
1,148 resulted in induced abortion (34%)
- **ONLY 36%** of sexually active teenagers report they consistently use contraception. (National)
- 1,060 or 52% of live births were to single teens.
- Maine ranks within the top ten states in the United States having the highest percent of births to single teens.
- Of teens who marry, one in five experience divorce within the first year; one in three within two years. (National)

The Consequences of Adolescent Pregnancy and Parenthood

For the Mother:

- Risk of maternal death and labor complications, especially for younger teens.
- Fifty percent greater chance of dropping out of school.
- Unemployment due to low level education and skills.
- Nine times greater chance of living in poverty than young women without children.
- If married, teens are twice as likely to divorce as couples who marry in their twenties.

For the Child:

- Thirty percent greater chance of being of low birth weight.
- If of low birth weight, a baby is twenty times more likely to die than if of normal weight.
- Greater risk of congenital anomalies, mental retardation and malnutrition.
- Increased chance of lower social and intellectual function.
- One in five chance of living in poverty.

HELP FOR TEENAGE PREGNANCY

The Maine Commission for Women, in conjunction with and funded by the Division of Maternal and Child Health of the Dept. of Human Services, is pleased to announce the release of two teenage pregnancy brochures. The brochures, one for boys and one for girls, address the young person who is worried about a pregnancy but at the mo-

ment choosing to ignore the signs. The information given encourages them to take steps immediately to determine if there is a pregnancy and then offers suggestions of people and places to turn for help. If you work in an environment that includes teenagers, these brochures may be a useful tool.

To receive free brochures or additional information, please call the Maine Commission for Women office at 289-3417.

DOONESBURY

by Garry Trudeau



GOVERNOR'S TASK FORCE ON PREVENTION OF TEENAGE PREGNANCY PRESENTS RECOMMENDATIONS

The Governor's Task Force on the Prevention of Teenage Pregnancy and Parenting has presented to Governor Brennan its fourfold approach towards reducing the numbers of teenage pregnancies and the adverse effects of teen parenting in Maine.

The 37-member Task Force represented by Chairperson Reverend Richard Sheesley of Cumberland presented the recommendations section of their report which includes dozens of specific recommendations for ten groups of people within Maine's society.

"We address our recommendations," Sheesley said, "to the family, recognizing all its various forms, to the teenage woman and teenage man, and to the community at large. We have involved the educational system, clergy and religious organizations and the media. We conclude with the systems that can most directly effect the well-being of the family and its children: health and medical services; social services; business and employers; and state and federal government."

Sheesley pointed to government for leadership and direction, stating, "We believe that government can act as enabler, funder, facilitator and planner. But government is not the only answer; everyone involved with children and youth must help."

The Task Force identified 18 goals and summarized those goals in their fourfold approach.

"First," said Sheesley, "we must strengthen families through education and basic supports so that children can learn to make healthy decisions about their futures."

For families the Task Force recommended:

Parent Education classes to improve parent/child communication, teach decision-making skills and build self-esteem and high aspirations in youth.

Sheesley said, "We must resist the temptation to label children as illegitimate, juvenile delinquent, fatherless, or failures without providing them with supports and opportunities for the success they deserve."

Other goals in Strategy One include: Provide essential health, economic and family supports, improve family relationships and organize communities.

"Second," said Sheesley, "we must encourage teenagers to delay sexual activity and, for those who become sexually active, provide effective contraceptive services. Teenagers who are sexually active need accessible and affordable contraceptive services. While no one on the Task Force wanted to encourage early sexual activity, the majority believed that some teenagers

will have sexual relationships regardless of what their parents wish. These teenagers need accurate information and effective methods for preventing pregnancy. Barriers of cost, transportation and accessibility, together with teenagers' own fear and embarrassment about seeking out these services, contribute to the problem."

The Task Force recommends providing primary health care for non-Medicaid and non-insured families; providing adequate funding for peer counseling programs, and family planning programs; exploring the comprehensive school-based health clinic as a new model; improving teenagers' decision-making skills about sexual behavior by strengthening family life and sexuality education for both parents and children.

"A minority of the Task Force," said Sheesley, "disagreed with improving contraceptive services to unmarried teens, believing that abstinence was the only right choice for teenagers. In the interest of reflecting this diversity of views, the Task Force developed a process for explaining minority views in their report."

Sheesley added, "Third, we must provide pregnant teens with comprehensive non-directive pregnancy options counseling and early, affordable prenatal health care. When a teenager suspects she is pregnant, it is often a frightening and confusing time. She needs counseling to help her decide about the pregnancy — should she become a single parent, married parent, choose adoption or abortion? This decision requires comprehensive non-directive pregnancy options to assure the decision is based on accurate information and her own ethical values. During pregnancy adolescents need good prenatal care to protect their own health and the health of the baby."

"And fourth," said Sheesley, "we must provide teenage parents with financial, educational, emotional, health and social service supports to be the best parents they can be."

Services recommended include: meeting their financial needs, including AFDC, Medicaid and Food Stamps, developing parenting skills, child care, alternative housing, health and social services. In all of these areas, they need skilled professionals who are sensitized to the special needs of adolescents. Perhaps the most important support is enabling teen parents to complete their education so that they have a chance to escape the poverty which so many of these young families experience.

The Task Force recommended that media be organized on a statewide

level to offer positive healthy information to children and youth, free of sexual exploitation, and to promote responsible behavior and good parenting.

"Government should take the leadership to convene such a media advisory group and work with it to improve the messages given to youth about sexual relationships and parenting."

In terms of money, the Task Force recommended the allocation of \$10 million in state funds to address the problem of teenage pregnancy.

"This is a modest investment in prevention," Sheesley added, "when weighed against the \$60 million minimum it now costs the state to counteract the adverse effects of teenage pregnancy and parenting each year."

The Governor called the Task Force report, "An important step towards building more hopeful futures for our youth — futures worth protecting from the hardships of teenage pregnancy and parenting. I welcome the document and urge the people of Maine to work together to put these recommendations into action."



WOMEN'S SELF-ESTEEM

by Sally Rose

Studies have concluded that male and female children basically have the same level of self-esteem until the age of 12. At this time, that level drops for everybody. In a few years boys begin increasing their self-esteem and eventually surpass the level they had as children. Girls, however, retain this low level of self-esteem. This fact suggests much about our gender values in this culture. What is happening to create a society wherein 53% of the population must battle their own low self-concept? The following information is offered to help reclaim our self-worth.

First, let us decipher the difference between self-concept and self-esteem. A woman's self-concept is a collection of beliefs about oneself. Picture it as a collage made up of your own perception about yourself.

Self-esteem is how you feel about this self-concept you have. What do you think about that person you've created? This self-esteem is made up of two parts: 1) a core center that consists of the beliefs you hold to be most dearly true, 2) a periphery of beliefs in which you are not as invested.

It is known that all of these beliefs are learned. We are told "we are" and we internalize that to think "I am." It is also known that whatever is learned can be unlearned. However, it is a slow and delicate process and one must have compassion for herself as she goes through this painful process. To feel successful, it is suggested you should measure the process rather than the outcome.

People go into therapy because the way they were as kids and the way they think about themselves isn't working in the adult world. Women think their low self-esteem and not caring about themselves is only important to them. This is not true. Low self-esteem translates into behavior and this behavior affects the choices we make in life. We are in need of a balance between our internal beliefs about ourselves and what is going on on the outside. If we do not have this balance, we usually make the external world match up with our negative internal world and life becomes painful.

A woman with low self-esteem operates out of fear and defensiveness and this self-esteem influences the worlds' view of us. If we believe and continue to try to prove we aren't worth much, others will finally agree "she knows herself well."

For some women there is a pay off for not liking yourself. It is familiar, you don't have to try hard or risk and, woman to woman, we can talk about it for hours.

Women define themselves by comparison and this comparison is based on incomplete information. If they are good at something, they discount it by saying these are things that don't matter. In this way they can continue to be comfortable in the familiarity of suffering. Women also must face the fear that if they do the abnormal and actually like themselves, they may be labeled narcissistic or conceited.

Major life changes can cause a self-concept dislocation. Things such as divorce, death, getting your BA, losing your job, all contribute to the concept that you are not the person you were or who you think you should be. The greater the gap between what you **think** the self-concept should be and what the self-concept is, the greater the loss of self-esteem. Do not strive for more to right this imbalance, but rather adjust what you **think** you should be.

There are six requirements for a positive childhood self-esteem.

- 1) We need a sense of our own significance. Because **we are** should be enough.
- 2) A sense of competence is important — a mastery of the world. Life doesn't happen to you.
- 3) We must have a sense of connectedness and also a sense of individuation. Women's self-esteem comes mostly from our sense of connectedness.
- 4) A sense of reality is important. Most women do not trust what they know but rather accept another's version. Instead of saying what is wrong with this institution or situation, women say, "what is wrong with me." We label ourselves as underachievers or having fear of success rather

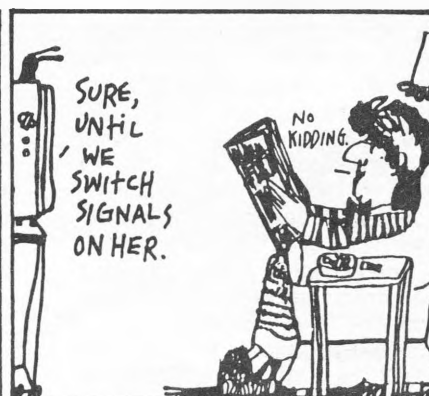
than facing the reality of the patriarchy.

- 5) We must have a set of values and ethics. As kids we cannot evaluate our parent's behavior, yet the parent's behavior does not always work.
- 6) We must have positive role models. Many adult women who are successful people feel they are merely children dressed up in adult's clothes and that they will eventually be found out. Because our role models were mothers who stayed at home, we feel we are not adults because we are not doing this.

It is suggested that women also suffer from cognitive disorders, defined by these six points:

- 1) "The black cloud distortion" — We take a past event and exaggerate it to give us our low self-esteem; Someone says "You look tired today" at which time we immediately assume they do not like us.
- 2) Our "critical tape distortion" — A voice inside of us that suddenly says something negative about us. The voice often rescues us from a good feeling we are experiencing.
- 3) The inability to accept a compliment. This problem stems from the balance talked about earlier. We need to have our external world match our inner voice, consequently we discount the compliment.
- 4) We compare ourselves to others.
- 5) Distortion by expectation of perfection. We should not measure ourselves by what we didn't do, but rather what we did do.
- 6) Expectations of doom. Some women live with fear and anxiety all the time. We think if we have a catastrophic event then people will help us and be with us.

All of these negative behaviors and thoughts serve a purpose for women with low self-esteem. If they are guilty and responsible for all these helpless behaviors, they can at least feel in control. We fulfill these negative behavior expectations because it is the one way society will recognize us.



REGIONAL COMMISSIONS FOR WOMEN

The Maine Commission for Women has slated a very ambitious plan of action for the next three years. It will take hard work, resources, and commitment of many citizens beyond the 17-member Commission now in existence to fulfill the goals that have been set. To that end, it is with a great sense of excitement and challenge that the Maine Commission for Women announces that it will implement the development of regional Commissions for Women. By fall of 1987 we will have three regional commissions in place in Bangor, Portland, and Northern Maine.

There are many reasons for establishing these regional commissions. Regional commissions can be more effective advocates for women on the local and regional level. Many more people than the presently appointed 17 commissioners will have the opportunity to be involved in the Commission's important work. In addition, the MCW will have a more efficient and effective way to extend our work into local communities and reach many more with the resources we have to offer. With the involvement of more women on the grassroots level, we will insure that local issues receive state attention. With regional commissions as a vehicle we can provide more educational opportunities for the public on issues that

are important to women which in turn can stimulate local action on these issues.

Regional groups will be able to develop and work on their own initiatives as well as serve as a major source of information for the MCW on state issues. In essence, we hope to enable the establishment of broader coalitions and networks that will work to promote the interests of women and girls in the State of Maine.

Information on how you can become a regional commissioner will be available soon in Bangor, Portland, and Northern Maine. Watch your papers for details or call the MCW (289-3417) for more information.

WAS IT SOMETHING I SAID?

To be their most effective, speakers need to be aware of hidden meanings in their choice of words. Some remarks and words can be interpreted to imply that racial and ethnic groups, women, men or handicapped persons are superior or inferior to others. A speaker who makes remarks or uses words which stereotype people can do more harm than good.

This guide for speakers offers brief tips on how to correct those phrases most commonly used.

Sentence Exchange

Biased:

Ask the girls to type the report.

A good mechanic knows his customers.

Infants need a mother's care.

Epileptics* are dependable workers.

Nonbiased:

Ask the secretaries to type the report.

A good mechanic knows his or her customers. Good mechanics know their customers.

Infants need parental care.

People who have epilepsy are dependable workers.

* *Racial, ethnic, color, sex or handicapping condition of a person should be avoided unless it is pertinent to the context of your message.*

Word Exchange

Biased:

breadwinner

businessman

cleaning lady

congressman

crippled

fits

freshman

Gal Friday

housewife

man-hours

mongoloid

women's lib

Nonbiased:

family wage-earner(s)

business manager or executive

housekeeper, custodian

members of congress, congressional representative

differently-abled

seizures

first-year student

assistant

homemaker

staff-hours, working hours

Down's Syndrome

women's movement

For copies write: Rhode Island Department of Education, Office for Civil Rights, 22 Hayes St., Providence, RI 02908.



FEMINIST NO LONGER A DIRTY WORD TO MAJORITY OF WOMEN

Newsweek recently conducted a poll and found that most women work because they have to and they want to but would prefer flexible arrangements. Perhaps the most interesting result was that a majority of those women polled considered themselves feminists and feel the women's movement has improved their lives. The statistics are broken down as follows:

Attitudes Toward Feminism

Do you consider yourself a feminist?

	Total Women	White Women	Non-White Women	Working Women	Non-Working Women
Yes	56%	55%	64%	59%	48%
No	28%	29%	19%	29%	31%
Anti-feminist	4%	4%	3%	6%	7%

**ADDRESS CHANGE OR ADDITION?
PLEASE LET US KNOW!**

- ☐ Change of name or address
☐ Please send **Inform** to person listed below

Name _____

Address _____

Zip Code _____

**MAINE COMMISSION
FOR WOMEN**

Patti Bourgojn, Augusta
F. Celeste Branham, Lewiston
Yolanda Bulley, Millinocket
Mary Cathcart, Orono
Joanne Clarey, Portland
Joanne D'Arcangelo, Portland
Robert Dworak, Mt. Desert
Gwen Gatcomb, Winthrop
Caroline Gentile, Presque Isle
Sally Gibson, Harpswell
Laura Gordon, Brunswick
Stephanie Irvine, Blue Hill
Ruth Joseph, Waterville
Wendy Kindred, Fort Kent
Stephanie Locke, Dover-Foxcroft
Sister Claudette Poulin, Winslow

Inform Staff:

Betsey Sweet
Peg Ricker
Sally Rose

"The simple step of women meeting together, however small or large the group, inevitably begins a process of change, both for the women meeting and for those who know they are meeting, as well as for the relationships between the two. Whatever the level of initial involvement, the experience for most of us has been like stepping on an endless escalator that goes only up — an ever heightening sense of awareness, self identity, direction, and strength."

Ruth Bleier, *College English*, Oct., 1972.

Inform

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