Welcome to the Spring 2010 newsletter!

We are all happy and thriving at the CRWG, continuing to engage in national and international research projects, as well as program and community outreach activities. As part of our global health initiative we co-sponsored a global health research day, where we were honored to host the president of Doctors Without Borders/Medecins Sans Frontièrnes (MSF) as our keynote speaker to talk about the importance of increasing access to health care in poor countries—the challenges and the way forward. We also hosted our BIRCWH research day with the keynote speaker Dr. Carole Heilman, the Director of the Division of Microbiology and Infectious Diseases at the National Institute of Allergy and Infectious Diseases, NIH, who spoke on the importance of women’s health research, mentoring and career development.

I am certain that many of us are rejoicing in the President’s historic signing of a health care reform bill that will change the lives of millions of women and their families. While many of us worked for more, this is a beginning. This law will prevent insurance companies from charging women higher premiums than men—simply because they are women. It is a law that ensures that no insurance company can reject a woman for coverage due to domestic violence or sexual assault, or for having had a Caesarean section. But it is not all good news for women. Anti-choice members of Congress were able to maintain severe restrictions on abortion coverage and used their “yes” vote to compel the president to issue an executive order reaffirming the existing federal prohibition on abortion funding, known as the Hyde amendment. So while we applaud the passage of health care reform, serious limitations still exist for reproductive health care. The president and Congress believe it is acceptable to negotiate health care at the expense of women. As a women’s health advocate and a feminist, I find this unacceptable. We still have much work to do.

My best in good health,

Stacie Geller, Director
G. William Arends Professor of Obstetrics and Gynecology
Director, Center for Research on Women and Gender
Director, National Center of Excellence in Women’s Health
**Featured Researcher:**

**Bryna Harwood, MD**

Bryna Harwood is currently an Associate Professor in the Department of Obstetrics and Gynecology and the Director of the Family Planning Fellowship. She graduated from the University of Chicago Pritzker School of Medicine and completed her residency in Obstetrics and Gynecology at the Kaiser Foundation Hospital in San Francisco, California. She then completed a Fellowship in Contraceptive Research and Family Planning and a Masters degree in Epidemiology at the University of Southern California from 1999 to 2001. In her fellowship, Dr. Harwood participated in epidemiologic research and Phase I, II, and III clinical trials in contraception and medical abortion and completed an independent research project investigating the use of buccally-administered misoprostol as a single agent for medical abortion.

Dr. Harwood was appointed as a Building Interdisciplinary Research Careers in Women’s Health (BIRCWH) K12 scholar in January 2008. In September 2008, she was awarded a five-year NIH Mentored Patient-Oriented Research Career Development Award (K23) for her project titled “Contraceptive Decision-Making: Women’s Preferences for IUD-related Health States.” Her ongoing interests include research to evaluate the safety and efficacy of new methods of contraception, as well as research measuring the efficacy of such methods in different populations, research measuring health outcomes associated with different methods of contraception, and understanding patient and provider medical decision-making to improve choices, compliance, and efficacy.

**What was your path to becoming a family planning researcher?**

It's easier to understand my career retrospectively than prospectively. I always understood how important reproductive rights are for women if they are to achieve equal citizenship in society, but I didn’t set out to be a family planning researcher. When I was in medical school, I had a mentor who was interested in the liaison between women’s health and psychiatry. This is how I first got research experience in reproductive health. After I decided to specialize in obstetrics and gynecology, I conducted a research project on douching behavior and reproductive disorders.

I knew I wanted an academic career with a research focus, but I didn’t know what my career possibilities were. My mentor pointed out that if I wanted to be a researcher in obstetrics and gynecology, that meant I was choosing between studying reproductive infectious disease or family planning. Initially, I dismissed family planning because I thought, “Oh, the pill. What’s so interesting about that?” But I wasn’t really interested in infectious diseases. When my original plan for a fellowship after medical school fell through, I got a Family Planning Fellowship and I've been doing family planning work ever since.

**What do you tell people about your work?**

I've learned that it's really important to talk to people about my work in casual situations. The more, as scientists, we can articulate our work to the lay public, the better they understand what scientists do. It even makes you a better scientist. It’s hard for me to talk about my work, especially my work as an abortion provider, because I do this all day long. My sense is that what I do is marginalized in public simply because I'm taking care of women who are marginalized because of the care they need. We have an unacceptably high rate of unintended pregnancy and unplanned births. We have a mortality rate for women and infants that is discordant with our wealth and standing as a nation. The fact is that health care for women in America is not the best in the world, mostly because of reproductive health. If we can prevent women from having unplanned pregnancies, we can prevent a lot of morbidity and mortality. Chicago has a maternal mortality rate that is double the rate in the country as a whole. For women to achieve this notion of equal citizenship, it’s important to talk about women’s health in the public sphere.

**What has your career been like at UIC?**

I was on the faculty at the University of Pittsburgh for five years, but came to UIC in 2006 when I had the opportunity to re-establish the Family Planning Fellowship here. It was a great opportunity to come back to Chicago and have my dream job! I feel very, very lucky! Since I have been at UIC, I have found mentorship that has been amazing for my career. I received tenure in August 2009. Going up for tenure was a wonderful process because it really helped me clarify my academic goals. I have a much better understanding of what I’m doing and where I’m going. The research for my K award has been really fun. This is the biggest project I've worked on that is my own intellectual effort. It's thrilling to ask the questions and then answer them yourself! This is a career development award and I’m working with great mentors, so I'm learning all the way through. The BIRCWH was incredibly helpful for getting started in my own work. I had already worked with many of the people involved in the BIRCWH, but it was a great opportunity to work with more people and to get to know them better. The BIRCWH was also instrumental in getting my individual K award. NIH could see the incredible institutional commitment that UIC had already made towards my career development.

The best thing I’ve learned from having great mentors is not to listen to people who tell you that you can’t do something. When someone tells you that you need to do something, though, you should listen and then do it!

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1 The tablet that is placed between the cheek and gum for 30 minutes, and the medication is absorbed directly into the bloodstream.
March is a big month for women. It’s Women’s History Month. March 8th is International Women’s Day, and March 10th is National Women and Girls HIV/AIDS Awareness Day. For the past 5 years, the Center for Research on Women and Gender (CRWG) has recognized National Women and Girls HIV/AIDS Awareness Day with the support of funding from the U.S. Department of Health and Human Services’ Office of Women’s Health. This year, the CRWG was proud to organize UIC’s first Safer Sex Fest, an informational and social activity fair open to the entire UIC community, but focused on students.

An estimated 1 in 500 college students in the United States are infected with HIV, but only 12% of students have been tested for HIV (Gayle, 1990; Augustine & Bridges 2008). In fact, youth are more likely than other population to not get tested for HIV (Augustine & Bridges 2008). At the same time, the sexual behaviors of young people put them at increased risk. Approximately 80% of college students have engaged in sexual intercourse, yet only about one-third report that they regularly use condoms (Wechsler et al., 2000). As a college campus in an urban area with a diverse student and faculty population, HIV/AIDS awareness and education is especially important here at UIC.

Safer Sex Fest provided a relaxed, comfortable and fun environment for approximately 150 students and volunteers to learn about HIV/AIDS, HIV prevention, and condom use through games and activities. Games included:

- **Male and Female Condom Card Line Up**: Participants identified the steps for using a male condom and female condom in the proper order.
- **Condom Relay Race**: Teams competed to correctly put a condom on an anatomical model.
- **Safer Sex Jeopardy**: Participants tested their knowledge about condoms, safer sex, contraception, sexually transmitted infections and HIV/AIDS.
- **Pin the Protection**: Blindfolded participants pinned the male/female condom or dental dam on the genital area of the male or female plastic cut out.
- **Blow It Up**: Participants competed to blow up the largest condom in 30 seconds.

For each game, students won raffle tickets and prizes. Part of the event’s success came from the Center for Research on Women and Gender’s partnership with many other campus organizations. The Wellness Center, Gender and Sexuality Center, Public Health Student Association, Medical Students for Choice, Health Oriented Latino Association, American Medical Women’s Association and Lambda Theta Alpha Latin Sorority hosted informational, activity and game tables. Volunteers from the American Medical Student Association, New Life Volunteering Society, Omega Delta National Fraternity and International Football Club ran games and supported CRWG staff.

**References:**

WIN Awardee Lacy Simons Reflects on Nanotechnology Careers

The Women in Nanotechnology (WIN) program is a demonstration project of the Region V Women's Bureau, U.S. Department of Labor in cooperation with the University of Illinois at Chicago, the College of DuPage, and Truman College to encourage women in these colleges to develop an interest in careers involving nanoscale science and technology.

The main objective of the program is to assist the existing college/university programs to increase the number of women interested in studying nanotechnology through developing nano-related courses, lab tours, seminar series, mentoring and internship access. Lacy Simons, Program Coordinator for the Department of Biological Sciences at Harry S. Truman College and an Advisory Board Member for the Women in Nanotechnology program was one of the first WIN awardees in 2008 and was interviewed by program director Sarah Shirk from WISE about how the program has influenced her career and education decisions.

WIN: Why did you join Women in Nanotechnology (WIN) and how has it contributed to your career goals?

Lacy: Before joining Women in Nanotechnology I had some knowledge that nanotechnology was an emergent science in many fields, but I did not really understand what it was or the vast application it has. I have always had an interest in pharmacology and medicinal chemistry, and through the WIN program I really became interested in the use of nanotechnology in drug development and treatment of diseases. I am currently pursuing a dual degree in Bio-Physics and Molecular Biology at Loyola University, Chicago to prepare me for a Ph.D. in medicinal chemistry with a nanotechnology emphasis.

WIN: What have been some of your biggest challenges to achieve these goals (either personal challenges or challenges in the world of bench science)?

Lacy: Some of the biggest challenges I have faced in achieving these goals is balancing my roles as a single mother, working two jobs and being a full time student. I have always believed in facing my challenges head on and working 110% towards my goals. I think that one of the major challenges in working towards the goal of having more experience in the realm of nanotechnology is the limited access to laboratories and quality instruction in nanotechnology.

WIN: You have really stepped up as a leader for the WIN club after receiving the WIN award in 2008. What encouraged you to take on the challenge of leading the WIN club in 2009-2010?

Lacy: As an award recipient I felt it was my duty to encourage others to take advantage of the wonderful opportunities I had been offered through the WIN program. I feel that everyone should have the same opportunities and the same chance to take advantage of them. Education and research are two areas that I feel very passionate about. So when the opportunity came up to step into a leadership position I did not hesitate. I felt that I could offer a unique perspective of being both a past student and current staff member [for Triton College’s WIN program].

WIN: What would you like to see the WIN club do in the future to keep it growing and serving students?

Lacy: One of the things I would like to see developed in the future is a general nanotechnology lecture/lab course that students can take. I think offering an opportunity like this would tremendously increase awareness and interest. The lecture series that we offered in spring 2009 was a great way to introduce students to nanotechnology. I think by offering more hands on experiences students will become more engaged. [Also] the idea of offering internships instead of a monetary award is great. This will truly allow students to get a feel for the field of nanotechnology.

For more information about the Women in Nanotechnology (WIN) program, visit http://www.uic.edu/orgs/win/.

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Update on WISE Wing Students

The spring semester flew by!

The WISE Wing students have taken full control of programming and had outstanding February and March dinners. The Valentine’s dinner guest was Kathleen Corcos, program coordinator for the College of Engineering Career Center. The students really enjoyed learning about this invaluable resource.

The Women in Science and Engineering program is excited to announce that we received a Google RISE grant. WISE will partner with the UIC Women in Computer Science organization to create a women and girls in computer science day. Watch our website (www.uicwise.org) for details.

WISE wrapped up the semester with our annual End of the Year celebration on April 7. Cecelia Gerber, Associate Professor, Earth and Environmental Sciences, shared her story with WISE scholars and leaders. Dr. Cecelia Gerber of the UIC Department of Physics and Fermi National Accelerator Laboratory was the guest speaker for the 2010 WISE End of the Year celebration. She shared with the students, staff and friends gathered an accessible presentation of her work on the top quark (an elementary particle of an atom and far smaller than an electron) and the latest on the Cern project to replicate the Big Bang.

The Ann Sluzas Martin scholarship was awarded to Denice Serrano by Arlene Norsym, Vice President and Associate Chancellor, Alumni Relations and funder of the award.

The Midwest Generation scholarships were awarded to Ana Nungo and Patricia Harris by Susan Olavarria, Director, Communications Government Relations. The Northrop Grumman scholarship was awarded to Anna Pablo by Nora Lin, Manager of Supportability Engineering at Northrop Grumman and current President of the Society of Women Engineers.
Gender and Classroom Dynamics “Townhall” held February 18, 2010

An audience of over 50 faculty members attended the townhall on February 18, convened by Provost Michael Tanner and facilitated by Professor Emeritus Eric Gislason. The production, entitled “Gender Stereotyping: Student-Faculty Interactions,” featured theatrical vignettes and a panel discussion to explore how gender schemas and unconscious bias can influence the interactions between students and their professors, and offer solutions and resources to address gender bias in the classroom. This townhall was the third in a series of WISEST events this academic year focusing on the dynamics of gender in the classroom. The first two events were leadership seminars focused on the student evaluations of teaching through the lens of gender schemas.

In the vignettes, volunteer staff portrayed professors and students in a classroom setting and in a typical faculty office hours meeting. The vignettes helped illustrate how unconscious gender bias may influence how students react differently toward a male or female professor. The script was developed and edited by several STEM faculty and the WISEST facilitators. Staff from the department of Electrical and Computer Engineering, the department of Math, Statistics and Computer Science and the College of Liberal Arts and Sciences volunteered their time to act as faculty and students in the theatrical production. The WISEST Director coordinated the production and rehearsals.

The vignettes were followed by a panel discussion facilitated by Professor and Head of the Department of Sociology, Barbara Risman. Panel members included Farzad Mashayek, Professor and Head of the Department of Mechanical and Industrial Engineering, Caryn Bills-Windt, Director of the Office of Access and Equity, and William Rodriguez, Associate Dean of Student Affairs.

The townhall was sponsored by the Vice Provost for Faculty Affairs and WISEST, and co-sponsored by CRWG, the Deans Committee on Faculty Academic Advancement (FAAC) in the College of Medicine, and the Office of the Special Assistant to the Provost for Diversity.

Please visit http://www.uicwisest.org to learn more about the UIC WISEST Program.
Religious and cultural beliefs of Muslim women impact health care needs and often create barriers for seeking routine health care. There is an unusual intersection of culture, religion, and health for Muslim women that has been somewhat ignored, and will continue to produce negative health outcomes for future generations. One’s culture, which shapes one’s beliefs and perceptions of self and others, affects how that person experiences life, and their social and physical environment. I distinguish culture from religion to point out that religion is often experienced internally, while culture is exposed (dress, food, and language) and evolves from generation to generation and from one community to another community. I am a first generation American Muslim of Pakistani descent. It’s a long title, but each adjective is tantamount to my identity. Being of Pakistani descent means that I can speak another language, I enjoy spicy foods and I have unique outfits. Being Muslim implies I have some dietary restrictions as well as some modest modifications to my dress code. This much I knew well growing up, but what no one told me was the impact culture and religion has on perceptions of health and health practices. In no way am I criticizing my community; rather, my public health education and knowledge of health issues have made me aware of the impact of religious and cultural practices on health behaviors in American Muslim women. I believe it is my responsibility, as an American Muslim woman, to help bridge the barriers between health professionals and my community to help create opportunities for health care that is culturally appropriate. This article is my attempt to bring a few of these gaps to the forefront, and offer suggestions for health care providers.

Relationship between Dress Code of American Muslim women and Vitamin D deficiency
There is a silent epidemic among Muslim women that is especially problematic because it extends beyond a mere health issue to one of culture and religion - it involves the way in which Muslim women dress. The issue in question is vitamin D deficiency (specifically D3) and how a person’s exposure to sunlight, or rather her lack of exposure, can lead to a host of other more serious health concerns, including bone pain, weak bones and muscles, low energy and fatigue, depression and mood swings. Health professionals and the community alike must be attuned to recognize the documented health effects of vitamin D deficiency, and that Muslim women are particularly susceptible to this condition. Health professionals must also be mindful to order blood tests to determine vitamin D levels when administering physical exams.

By virtue of wearing pants and long sleeve shirts, imagine all the times I saved myself from harmful sun rays, but also, all the missed opportunities for vitamin D. Certainly, someone residing in the Midwest also has a predisposition to low levels of vitamin D. Nevertheless, knowing my particular predisposition to D3 deficiency, I take supplements. As an aside, after a recent workshop on health and wellness, several of my female Muslim friends promptly got tested, and all of them were severely vitamin D deficient. Thankfully, my level was barely normal, presumably because I had been taking supplements.

Barriers to Physical Activity in Schools for American Muslim Women
In junior high school, I wasn’t allowed to be on the volleyball team – even though I made the final cut – because I refused to wear shorts, and the school would not allow me to wear pants or tights (some sort of vague school policy). Unashamed by my personal dress code, I floated through high school sports and encouraged (and educated) my coaches to allow me to wear pants/tights, for religious reasons, while competing in tennis or track. They obliged. While my parents encouraged me to seek out tennis and track as an after school activity, they did not watch me compete. Conversely, they never missed an academic event or an opportunity for a parent teacher meeting, but a sport event? Not important. This is a symptom of my parent’s culture where running around and increasing your heart rate was never valued. Lucky for my children, running around and increasing my heart rate is right up my alley.
Physical education is undervalued in the immigrant Muslim community, and can be attributed to the conundrum of ‘what to wear’ while exercising in public. Female only gyms are an option, but are not plentiful. The Muslim community needs to get creative on finding ways to adhere to their personal dress code so that they may exercise regularly. I am hopeful that my community will begin to make some changes on how it values physical education. Healthcare practitioners should also recognize that Muslims have traditionally placed little value in physical exercise, and must therefore work with patients and the community to not only understand these underlying beliefs, but also provide education on the positive health outcomes and improved quality of life associated with regular physical activity. Additionally, healthcare providers can offer helpful exercise tips for women who prefer to exercise in their homes such as using weights, stairs and other small equipment.

Access to Health Education/Information for American Muslim Girls in Parochial Schools
I co-hosted a 1-day health and wellness workshop in November with 100 participants. Sixty were girls ages 12-18, their mothers or teachers comprised of the remaining 40. The participants in the workshop welcomed the variety of topics presented and asked for a second workshop. Many of the participants told the organizers they were happy to receive information about health and wellness, and that they wished they had the opportunity to learn such things at school. For example, there is a lack of health education around reproductive health in private Islamic schools, as a result of parents not wanting their children to learn about reproductive health and the school administrators complying with parent demands. The Muslim community, however, needs to make an effort to break down this barrier to health education, and must realize it can provide this information while incorporating religious tenets where necessary. Health care providers must be mindful of this health education gap when meeting with patients and when giving health directives.

While the girls who attended the workshop are first generation American Muslims, there are other significant barriers to health information in this immigrant population. A recent study of immigrant Muslim women showed that many of them had no idea whether or not they had a yeast infection. Many immigrant Muslim women have not had important conversations pertaining to menstruation or reproductive education with their own mothers, and unfortunately, are not having these important conversations (or other conversations about health) with their own daughters. As a result, these adult women do not have the tools to recognize a lump in the breast, or symptoms of vitamin D deficiency, and most certainly none of this information is being passed down to the next generation. Additionally, many Muslim women do not seek routine annual screening tests such as PAP smears or mammograms.

Muslim women across the world face so many stigmas in the home and community regarding physical and mental health issues, for a multitude of socio-cultural and religious reasons. As public health professionals, we have the opportunity to address these barriers and create culturally-sensitive solutions which respect one’s culture and religion, but also incorporate health and wellness. With the changing demographics and the diversity of culture and religion in our country today, we need to acknowledge our differences and understand and accept each other’s cultural histories and its impact on health and wellness.

Resources:
http://www.altmuslimah.com
Altmuslimah explores the dimensions of gender in Islam, and provides a platform for intra- and inter-community dialogue on a wide variety of gender-related issues. In particular, it looks at the intersection of female and male sexuality and gender identity with society, politics, economics, and culture.

http://www.amhp.us
American Muslim Health Professionals (AMHP) is an organization dedicated to empowering Muslim health professionals to improve the quality and delivery of health services and increase access to care.

http://www.HEARTwomenandgirls.org
HEART Women & Girls Project is an emerging nonprofit organization committed to empowering women and girls in faith -based community settings by providing health promotion programming and services and promoting strategies to teach women and girls to connect a healthy mind, body, and soul and achieve an overall sense of well-being.

WISE Mentors Participate in Let’s Do Launch at NASA SEMAA Lab

WISE mentors LaToya Bailey and Karima Russell attended the event, and discussed their educational journeys and research at the UIC College of Engineering. “Let’s Do Launch” was a luncheon and open lab opportunity hosted by UIC Alumnus Pamela Greyer, Director of NASA SEMAA Chicago, with grant support from the Midwest Girls Collaborative Project, an NSF-funded grade school and high school outreach program. The hands-on activities took place in the NASA SEMAA Aerospace Education Laboratory (AEL) at Marine Military Academy in Chicago.

The AEL is a state-of-the-art, electronically enhanced, computerized classroom that puts cutting-edge technology at the fingertips of NASA SEMAA students in middle and high school. The AEL engages students in real world challenges relative to both aeronautics and space exploration, and houses real aerospace hardware and software including an Advanced Flight Simulator, a laboratory-grade research wind tunnel, a working, short-wave radio receiver, and hand-held global positioning systems, or GPS, for aviation. Young women with a curiosity about aerospace careers signed up for the workshop, discussed career options, and were invited to join in the UIC mentoring program for high school students.
In December, 2009, President Obama signed the *Consolidated Appropriations Act* which provides $100 million for teen pregnancy prevention, mostly through evidence-based teen pregnancy prevention programs. These programs are to be implemented throughout the United States beginning this fall. The newly created Office on Adolescent Health (OAH) in the US Department of Health and Human Services is overseeing the funding allocation and has issued a request for proposals to select around 180 programs (see details here [http://www.hhs.gov/ophs/oah/prevention/grants/announcements/index.html]).

Seventy-five million dollars will support approximately 150 programs to implement teen pregnancy prevention interventions that have *scientific evidence demonstrating success*. Twenty-five million dollars will support about 30 studies on *promising programs* that do not yet have teen pregnancy-reducing evidence. This is an exciting opportunity for those of us at CRWG with long standing interests in sexual and reproductive health of adolescents, especially girls.

One hundred million dollars is a sizeable amount that makes the statement that the US is once again serious about tackling its teen pregnancy problems. For a wealthy industrial nation, our teen pregnancy rates are still embarrassingly high. Countries like Canada, Japan, France, United Kingdom, Italy and Sweden have far lower teen pregnancy rates than the US. Overall, fewer teens are having babies compared to a decade ago, but significant racial and economic disparities in teen pregnancies continue to exist. Black and Latino girls are still far more likely to give birth before age 20 than White girls. This dramatically affects their academic and social progress. The same can be said for poor girls who are more likely to give birth than girls that are more affluent.

The allocation of $100 million for teen pregnancy prevention is a gift to women. Having a baby as a teen places a far greater burden on girls than boys. The teen mother will probably struggle to make ends meet and have a decreased chance of getting married, remaining a single overworked parent. Other women in these teens’ lives may also be affected. For example, grandmothers will likely be pulled into help. Usually, these are older women that want rest and freedom, not diapers and lost sleep.

Schools also benefit if fewer teens have pregnancies. Pregnant and parenting teens need support programs to complete school and that costs money. If fewer teens have babies the need for parenting support decreases and savings can be routed to something else. Communities struggling to help its citizens in need will also benefit if fewer teens have babies. In essence, with the allocation of $100 million to reduce teen pregnancies everybody wins—teens, their families, schools and communities.

While we at CRWG are happy to see significant resources being committed to reducing teen pregnancies, we also question whether this particular initiative is too narrowly drawn. Three-quarters of this funding is reserved for the replication of 20 programs that have been shown to have a positive, statistically significant impact on at least one priority outcome (sexual activity, contraceptive use, STIs, pregnancy or births). (see full program list here [http://www.hhs.gov/ophs/oah/prevention/research/programs/index.html]). Many of the recommended programs are *sexual risk reduction* programs and not *comprehensive sex education* in the fullest sense. Adding *comprehensive sex education* to teen pregnancy prevention programs would provide youth with significant more information that informs a holistic and responsible view of sex.

*Comprehensive sex education* should be age appropriate and support a range of strategies and skills to reduce early and unintended pregnancies and sexual diseases. This includes helping youth refrain from early sexual involvement to develop themselves in other areas; understanding contraception choices; providing young women with education on self-worth and freedom of choice as important elements in sexuality; and avoiding sexual victimization. These are only a few aspects, beyond a focus on pregnancy and sexually transmitted diseases that inform a complete understanding of sexual health. *Comprehensive sex education* should aim to help teens to fully appreciate the benefits that mature and responsible sexuality offers, while decreasing sexual risks. Such education should also challenge destructive sexual templates that are informed by current messages to teens, especially driven by the entertainment media. But *comprehensive sex education* is not a one-shot deal (as the recommended list of programs suggests). *Comprehensive sex education* should begin early, should be age appropriate, and should provide youth with detailed information and strategies, not just to prevent pregnancy and diseases, but also to pursue life-long sexual health.

At the CRWG, we endorse the need for age-appropriate *comprehensive sex education* for adolescents that fully explores a range of issues in human sexuality (e.g., puberty, reproduction). Such education must be endorsed by important stakeholders in sexual health of teens - the youth themselves, their parents, health educators, and policymakers. This funding allocation is a strong investment in the lives of young people, especially girls. If it works as intended it will have a significant and positive impact.
During the 2009-2010 academic year, CRWG had the pleasure of working with 3 students from UIC’s Psychology 331 class under psychology professor, Dr. Karina Reyes. Two of the students, Lydia and Rosanna, who worked with CRWG in the fall semester, were able to expand on their project through an independent study during the spring semester. We asked the students to describe their experience working with CRWG.

My name is Qiaoying Ye, but I usually go by Lydia. I’m a fourth year Psychology major with a minor in Anthropology. I’m a first generation college student in my family and will also be the first to graduate out of a four year university. To say that these four years at UIC have been confusing at times would be an understatement, since I started my college career as a biochemistry major. But it has also been very rewarding now that I have found something that truly interests me in the field of psychology.

My name is Rosanna Lopez. I’m a fourth year undergraduate, graduating this May 2010 with a Bachelor of Arts in Psychology. I also volunteer as a youth group teacher at my church and work at a senior community’s healthcare center as a certified nursing assistant.

My name is Jessica Vergara. I am a senior here at UIC, I am a Psychology major with minors in Sociology and Biology. I am also currently working as a research assistant with Dr. Sabine French in the Department of Psychology.

**BRC: What is Psychology 331?**

**Jessica (JV):** Psychology 331 is the laboratory portion to Community Psychology, but it focuses on Community Psychology and Prevention.

**Rosanna (RL):** Community psychology looks at the interaction between the person and the environment.

**JV:** We learn about the theories of community psychology and the concept of intervention. We also learn how to intervene into an organization and learn how to work with an organization using Community Psychology principles.

**Qiaoying Ye (QY):** This class gives students firsthand experience in what it’s like to conduct an organizational assessment, which a Community Psychologist would do. Also this class gave us a chance to experience carrying out a project the way psychologist would.

**BRC: Why does the class require that you work with a UIC department? What are you expected to learn from the experience?**

**JV:** This class requires us to intervene at a UIC department in order to apply the concepts we learn in class to the organization. We are expected to learn how working with an organization and attending class can help us understand how organizations work but in a community psychology perspective.

**QY:** The requirement for students to work with a UIC department is not only because they have to complete an organizational assessment, but also to help the organization carry out a project that they may not have the resources for. In this class I was expected to carry-out a project that would still be useful after my time here at CRWG.

**RL:** Through this class, I learned how to collaborate with an organization, the importance of knowing the history and structure of the organization, and how to work with organization in conducting an intervention.

**BRC: How are placements made, and why did you choose CRWG for your placement?**

**QY:** For the placement, different organizations throughout UIC came to our class and introduce their organization. After everyone was done then the students had a chance to speak with the representative of the organizations and get to know them better. After all the students met all the organizations they chose their top three choices and Dr. Reyes matched the students that shared the same interests with one of the organizations of their choice. Working at a center that researched on women and gender was something that interested me a lot.

**RL:** I found an interest in working with CRWG because they desired to improve the experience of high school students that intern with them during the school year. I have an interest in working with youth. I am thankful that I got placed at CRWG.

**JV:** I chose CRWG for its research based background. I was also interested to learn more about this program and what it had to offer not only to myself but to UIC.
**BRC: Could you describe your projects at CRWG?**

**QY:** Last semester my partner Rosanna and I worked on making a high school internship for CRWG. This was then split into two parts, the application and a manual for the interns. Some of the things that were included in the manual were CRWG’s mission statement, program description, SMART goals, evaluations and etc. After presenting this project, Beth (a CRWG Graduate Research Assistant) suggested that GAs/RAs would also benefit from a manual.

**RL:** This semester, we are implementing the application and manual with the high school interns from Young Women’s Leadership Charter School. We will be revising the application and manual as we take part in supervising the interns. Also this semester, we are working on creating a GA/RA manual. The GA/RA manual is being created in collaboration with Kris Zimmermann and Sarah Shirk, and by getting insights from graduate assistants/research assistants and other staff and supervisors at CRWG.

**JV:** My project will focus on the Safer Sex Event that was held on March 10 at Student Center East. It is a fun event that also helps educate and promote safe sex to college students. I will be working on a manual that will map out the event from games, to organizations that can help and add to the event to make the event easy to replicate in the future.

**BRC: What have you learned from working at CRWG?**

**QY:** Working at CRWG has given me a chance to experience developing a project and also being able to implement it. Also, I have learned a lot about the workings of an organization by getting to know CRWG through the organizational assessment.

**RL:** As I have been working at CRWG, I have been learning how to work under multiple supervisors, work with a partner and other members of the organization, and supervise high school students. I also learned how to do research and implement ideas into actions.

**JV:** I have learned more about what CRWG has to offer and their position here at UIC. I have never heard of CRWG and it has helped me get to know they type of research that goes on at UIC since I am involved in research myself. I also have learned how CRWG works not only for UIC but also for the community and interacts with other organizations to promote better living and health for women.

**BRC: What do you enjoy about working at CRWG?**

**RL:** All of the experiences and skills that I have been learning are enjoyable. Beyond the experience and skills, I enjoy working on projects that have long-term fruit especially for the younger generation. For instance, working on the high school internship program has long-term fruits for the students that take part in it. I hope that the students will learn and obtain skills through their internship experience.

**QY:** One of the things that I enjoy about working at CRWG is that CRWG has an independent work environment. Also the time was very flexible and everyone here was very nice, helpful and supportive of what we were and are doing.

**JV:** I enjoy the people here, and the energy they bring when new projects arise. I enjoy the atmosphere as well.

**BRC: What are your plans for after graduation?**

**QY:** After graduation I plan on going to graduate school and continuing my education in the field of psychology.

**RL:** After graduation, I plan on finding a job in a healthcare center as a behavioral technician or working in a community organization that works with youths. I am also planning to go to graduate school for either social work or public health.

**JV:** After graduation I do plan to work conducting and working on research. I also plan to pursue graduate school. I am not sure exactly in what concentration I would be focusing on but I am sure it will be a Community or Social Psychology.

**BRC: Has working at CRWG changed your thoughts about what you would like to do in the future?**

**RL:** Working at CRWG has helped me confirm my interest in working in facility or organization that works with the community to promote physical, social and mental well-being.

**QY:** Working at CRWG has made me interested in instructional design, person-organization fit, and also working with manuals. Because of this and my Industrial/Organizational (I/O) psychology class I will be pursuing a graduate degree in I/O psychology.

**JV:** It has broadened my understanding on what types of research there are. I now know that there is a research that just focuses on women and gender, and my understanding of the types of research that have been conducted have gotten me interested in what types of research I can possibly become involved with and learn more about.
The 9th Annual Alice J. Dan Dissertation Research Award encourages original and significant research about sex, gender and/or women by UIC students. The award is open to UIC doctoral students in any field who have completed the requirements for candidacy and have an approved dissertation proposal by the application deadline.

With new support from the UIC Center for Clinical and Translational Science (CCTS), we will also be funding 3-4 additional awards to fund dissertation research to advance clinical/translational research related to women and/or sex, gender.

Award(s) will range from $500-$1,000.

Applications must include:
- A dissertation summary of no more than 5 double spaced pages which includes:
  - an abstract (200 words or less)
  - significance of research for women and/or gender
  - research methods
  - progress to date
  - timetable for completion
  - budget

- Additional supporting materials:
  - 2 reference letters (one reference letter documenting approval for dissertation proposal and one must be from dissertation advisor)
  - Identify whether it is an application for the Alice Dan Award or the Clinical Translational research (CCTS) award.

Review criteria include:
- potential for contribution to research on women and/or gender
- originality and significance to the major field
- clinical/translational significance (only for the CCTS award applicants)
- research methodology
- academic preparation and ability to accomplish the work
- feasibility of timetable for completion
- feasibility of budget

Applications should be emailed to Dr. Manorama Khare at mkhare1@uic.edu or mailed or delivered to:
UIC-CRWG
ATTN: Dan Dissertation Award
1640 West Roosevelt Road (M/C 980), Room 503
Chicago, IL 60608

The submission deadline is Friday, May 14, 2010 and winners will be announced in July, 2010. For more information call or e-mail the co-chairs: Manorama Khare at (312) 413-7342 or mkhare1@uic.edu; Sarah Shirk at (312)413-1636 or sshirk1@uic.edu.
CRWG Updates

Veronica Arreola Receives Award from the Chicago Foundation for Women

Veronica Arreola, Director of WISE and Assistant Director of CRWG was a recipient of a Chicago Foundation for Women 2010 Impact Award! The 2010 Impact Awards recognized 25 visionary women and men who are improving Chicago-area communities for women and girls. For more information, visit http://www.cfw.org/impact. Congratulations, Veronica!

CRWG is on Facebook!

CRWG now as a Facebook page! Find us at www.facebook.com/uic.crwg. Facebook is a registered trademark of Facebook, Inc.

CRWG Staff Changes

CRWG welcomes Jinal Gangar, a graduate student in the UIC School of Public Health, joined us at CRWG in January as a graduate research assistant.

Chisina Kapungu, PhD, a CRWG project coordinator, was offered a faculty position in the UIC College of Medicine, Department of Obstetrics and Gynecology. Dr. Kapungu will continue to work with CRWG on international health projects.

Congratulations Graduates!

Former graduate assistant Regina Rust completed her master of public health degree in December 2009.

Several students who work with CRWG are graduating in Spring 2010. Ayesha Akhtar, Jessica Bushar, Jinal Gangar, Beth Pellettieri, and Yue Yu will be receiving master's degrees from the UIC School of Public Health.

Students Rosanna Lopez and Qiaoying Ye are both graduating with undergraduate degrees in psychology.

Help Us Reach Our Goal of Raising $25,000 for the Alice J. Dan Dissertation Research Award

In 2007, Alice Dan, founding director of the CRWG and UIC Professor Emerita made a remarkable commitment. She presented the CRWG with a gift - 40% of the money that we need to raise to endow the Alice J. Dan Dissertation Research Award. With her seed money, Dr. Dan has challenged us to raise the additional $15,000 by 2011. The endowment will sustain the Dan Dissertation Research Award indefinitely, allowing the CRWG to support women and gender research at a time in a scholar's career when funding opportunities are limited.

We need your help to reach our goal. To give to the endowment, visit our website at http://www.uic.edu/depts/crwg/give.shtml and select "Alice Dan Dissertation Awards".
We would like to thank everyone who has provided support to CRWG. To learn more about giving to CRWG, visit http://www.uic.edu/depts/crwg/give.shtml