

THE NEWSLETTER OF THE MONTGOMERY COUNTY CHAPTER OF THE NATIONAL ORGANIZATION FOR WOMEN

Panel on Women's Health Care in Montgomery County

BY NANCY NYLAND

The Montgomery County chapter invited a panel of four experts to discuss aspects of women's health care in Montgomery County at the NOW chapter meeting on October 5:

1. Nancy Floreen, Councilmember at Large

Council member Floreen expects budget restrictions to result in cutbacks in services. The Commission for Women recently produced a report on single women and poverty in the County. Over 40,000 children are on free or reduced-price lunches in the Montgomery County Public Schools. Twenty-one per cent of single women have no health insurance. Twenty-four per cent of children whose families are below the poverty line have no health insurance. In the State of Maryland, 90,000 children who are eligible for subsidized health care are not enrolled.

The County Council is seeing a constantly increasing demand for services. Since women are at the bottom of the pay scale, they are also less likely to have access to health care. Councilmember Duchy Trachtenberg has put together a work group to address unmet needs for reproductive health care.

2. Gwen Emmons, Planned Parenthood of Metropolitan Washington, D.C.

Planned Parenthood has only two clinics in Montgomery County. They provide educational programming and information along with such services as mammograms and STD screening. Two-thirds of their patients qualify for subsidized health care. Eight percent of women in Montgomery County have no health care, on average, but 17% of African-American women have no health insurance, and 20% of Latina women. Thirty-one per cent of African-American women and 36% of Latina women have no pre-natal care. African-American women are diagnosed with AIDS at six times the rate of other groups.

Planned Parenthood is hearing reports that some of their patients are taking their birth control pills every other day to make them last longer. They know that in a county of 500 square miles with nearly one million people, two clinics are not enough.

3. Anne Burke, M.D., Medical Director, Ob-Gyn, Holy Cross Hospital

(see Women's Health, page 3)

National NOW President Terry O'Neill Speaks in Rockville

This June the Montgomery County chapter of NOW was very happy to welcome a fellow member and Montgomery County resident, Terry O'Neill, as President of national NOW. Terry has worked for women's rights for years as a feminist attorney, activist and professor. As national NOW President, she is also the head of the NOW Foundation. On Sunday, October 4, Terry spoke about some of NOW's priority issues in the City Council Hearing Room in Rockville.

Health care is the primary issue concerning women activists currently, along with the related issue of renewing the Violence Against Women Act in 2010. NOW has been on record since 1993 supporting single-payer health care. Women are over-represented in the part-time, minimum wage and non-union jobs that traditionally do not provide health care. Women have less access to health care because sometimes their only access is through their husband's job.

Health insurance companies further limit women's access by calling domestic violence a pre-existing condition. One C-section can be called a pre-existing condition, causing subsequent pregnancies to be excluded from coverage. Pregnancy is a pre-existing condition. All of this is legal, in spite of the fact that a woman is two to three times more likely to die in childbirth if she has not had pre-natal care. Her newborn is six times more likely to die if the mother has not had pre-natal care.

Even when women can get health insurance, they pay more for it. Health insurance companies can charge a 21-year-old woman 1.5 times what they charge a man for health insurance. Rather than being called gender discrimination, it is called "gender rating." Older people can be charged more

(see O'Neill, page 3)

MCNOW Chapter Meeting

Ending Racism and Embracing Diversity

Monday, November 2, 7:00 to 9:00 pm

Wheaton Library

11701 Georgia Ave, Wheaton, MD

Large downstairs conference room

See details page 6

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MC NOW President's Message

AFFORDABLE HEALTH CARE — A RIGHT OR A PRIVILEGE?



*Vanessa Ali
President, Montgomery
County Chapter, National
Organization for Women*

In the world's wealthiest nation, people are turned away from affordable health care coverage because of a pre-existing condition and families are just one illness away from bankruptcy! Opening up a not-for-profit public health plan like a "Medicare for all" to all Americans will ensure that every American has access to quality, affordable health care, regardless of his or her income. Affordable health care is a right and every American deserves affordable, high-quality coverage.

As you are probably aware, the current health care system is in desperate need of repair. After years of inaction, health care costs have skyrocketed and the problem now is worse than ever. Today, the cost of health care is the most significant financial burden that most U.S. families and small businesses face. Even worse, more Americans remain uninsured. Quality, affordable health care should be a right for every citizen, not a privilege, and I believe that creating a not-for-profit public health system to compete with the

private health insurance system is the only way to address America's health care crisis.

To add to this problem is the issue of disparity when it comes to women's health care. Women's health care needs are generally greater than men's, particularly in their reproductive years. Our current health care system makes it more difficult for women to obtain and afford the health care services they need. Our health care system is designed to rely heavily on employer-provided health care insurance. This works well when the population is gainfully employed by large companies that provide insurance and when employees are in positions that qualify them for insurance.

Overall, however, this system does not work well for our female population. About 40 percent of all women are employed full-time and many of those women working full-time are employed by small companies that do not provide health insurance. Other women – those who are either employed part-time or not employed at all – have little access to employer-provided insurance on their own behalf. That majority of women generally rely on private insurance, public programs, or insurance provided by a spouse or in some instances a significant other.

Finally, women overall have less income than men and therefore cannot afford health care to the same extent. Women employed full-time make about 80 percent of what men make. More employed women work part-time and are generally paid less hourly than full-time wages, so they will delay or avoid health care services because of income. Regardless of your political affiliations or opinion regarding affordable health care reform, you need to let your elected officials know that this will not be tolerated. We all know that the current health care system isn't working. Affordable health care is not a privilege, it is your right!

Pass It On, Act & Learn

Women's Health (continued from page 1)

Holy Cross Hospital established the South Silver Spring Health Center, another health center in Gaithersburg, and a health center opening in 2010 in Wheaton. Holy Cross has provided an average of \$9 million a year in charity care over the past six years. They have a shared common interest with other entities in the County in diversity, equality, economic justices, and protecting the dignity of patients.

Their income threshold for providing care is double the poverty level. Seventy percent of the uninsured pregnant women in the upcounty travel to Holy Cross for obstetrical care. Seventy-two percent of the inpatients at Holy Cross are women.

4. Leslie Calman, Ph.D, Executive Director, The Mautner Project, The National Lesbian Health Organization

The Mautner Project was founded in 1990 to honor Mary-Helen Mautner, a lawyer and activist who died of breast cancer. It was initially created by Mary-Helen Mautner's partner to provide services to lesbians with cancer. They now also provide other services such as "cultural competency training" for health care providers.

Lesbian women experience more violence from strangers, especially women who do not conform to gender stereotypes. Transgender women are the most likely to experience violence on the street. Some health insurance companies will not insure transgender people.

Lesbians smoke more than gay men, who smoke more than straight men and women. They experience more alcoholism and obesity. There has not been a lot of research into these issues. Obesity may be a rejection of heterosexual norms, and may not be a barrier to dating in the lesbian community in the way that it is in the heterosexual community.

Women are much more likely than men to be covered under someone else's policy, such as a husband's policy. Since gay women are not allowed to be married in most states, they are unable to have health insurance through a partner, or provide health insurance to their partner.

Gay women may be asked by health care providers whether they are single, married, divorced or widowed. Often lesbians feel that they fit in none of those categories. Gay women may be required to have a pregnancy test before getting an X-ray, in spite of the fact that they do not have sex with men.

Gay women may choose not to identify themselves as lesbian to health care providers.

Because of this lack of communication and trust toward health care providers, gay women may wait to go to the doctor until symptoms can no longer be ignored. They get fewer mammograms and PAP tests than straight women.

Better data collection is needed on these health care issues of gay women. Currently many health surveys and health censuses do not ask participants to identify as gay, lesbian, bisexual or transgendered.

The Mautner Project educates health care providers that they need to have non-discrimination policies prominently displayed. They have developed a curriculum with the Centers for Disease Control to educate health care providers on issues like these affecting their lesbian and transgender patients.

O'Neill (continued from page 1)

for health insurance in the same way, called "age rating."

Terry O'Neill pointed out that "[w]omen are bearing the brunt of the health care crisis today." Patients are being discharged from the hospital earlier, sometimes still with tubes in them. Someone has to take care of them at home, usually a family member. Overwhelmingly it is female family members who provide this free, unpaid health care.

NOW's proposed solutions are:

- we must have a public option for health care
- gender rating and age rating must be eliminated
- exclusions for pre-existing conditions must be eliminated, and
- women must have a full range of health care, including the full range of reproductive health care options, including abortion.

NOW is actively opposed to any bill that does not lower premiums and make health care affordable. The Max Baucus bill creates 130 million new customers for the insurance companies without any expectation of making health care more accessible or affordable. NOW cannot support a bill that may put women in worse shape in five years than if Congress had done nothing.

To read more about bad health care bills and take action to contact Congress, visit the national NOW Web site at www.now.org.

VOLUNTEER AT THE NATIONAL NOW OFFICE

MCNOW Secretary Susan Martin has spent time volunteering at the NOW office, doing phoning as a follow-up to a fundraising letter to large donors. The National NOW officers are all very appreciative of volunteer efforts, especially Susan's, as she has become a regular.

The National NOW office is located at 1101 H St., NW, Washington, DC, approximately 1/2 block from the Metro Center Metro stop. Contact the Volunteer Coordinator Liz Newbury at (202) 628-8669 X115

Or join Linda Mahoney 5-7 on October 28, November 5 or November 18. There are other volunteer jobs to do, if you are phone-phobic.

Through the Feminist Lens

BY NANCY NYLAND

When it comes to the health care debate, the joke is on us: we already have death panels. They are called health insurance companies. But even the politically powerful health insurance companies will not be able to pull the plug on Granny, because Granny has Medicare, a federal government program.

The number of Americans without health insurance is estimated at somewhere above 45 million. Those 45 million people have somewhere between a 25 percent and a 40 percent increased chance of dying because they have no health insurance. Estimates of the number of people who die each year because they have no health insurance run from 18,000 to 45,000.

If these numbers are not enough to convince Americans that predatory capitalism has run amuck, consider the dilemma of Peggy Robertson of Centennial, Colorado, who testified in a recent Congressional hearing. An insurance company suggested to Ms. Robertson that they would consider insuring her if she agreed to be sterilized. They still would not guarantee coverage, but they might consider it. If you are a women of childbearing age, they might be willing to cover you for 1.5 to 2 times what a man pays, but reserve the right to later deny coverage for individual procedures.

Women who can't afford to pay for health care are forced to apply to hospitals for charity care. But if their local neighborhood hospital is one governed by restrictive religious health care directives, they may still be denied the health care they need. Our lack of a public health plan results in poor women being treated as second-class citizens who must apply to faith-based medical organizations for help. Such organizations may or may not provide the full range of services that their patients require, depending on whether it involves reproductive health care procedures that are only needed by women.

It is refreshing to hear a male politician state clearly and unequivocally that insurance companies discriminate against women, as Sen. Al Franken did in a recent Congressional hearing. There is no solution to such blatant and outrageous gender discrimination except a government-run health care plan. The government already runs plans for the elderly, the poor, the military, federal government employees and Congress. If the federal government can't give us the same plan that Congress has, then let them expand the plan for federal government employees and offer it to the rest of us.

Submissions to Newsletter Welcome

SUBMISSION DEADLINE FOR THE DEC ISSUE:
NOV 10, 2009

From NOW On reserves the right to edit submissions. Ads are accepted for nominal fees.

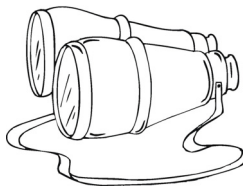
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As I See It

BY HOLLY JOSEPH (joseph.holly@gmail.com)



If you've heard enough about David Letterman, please skip this. I'm writing about him not because everyone has hazarded an opinion but because 1) I can't stop thinking about him, 2) this is unquestionably

a women's issue if it deals with how women interact with men, and 3) it is an example in the discussion of how to get people to do what they should.

Here's a fact that I gleaned from all the hype: 58% of his viewers are women. I'm not sure what that means but it is certainly interesting. I might be one of them if I watched late night television. As with so many people – in every walk of life – you either like him or don't. And I must tell you that until recently I liked him a lot. It's because he has gifted with me with so many laughs over the years. It may be his eye rolls, or perhaps his turn of a phrase. It may be his facial expressions or even that he reminds me of friends or of a possible friend. And it may be that I am fascinated by his romantic attractions – but I think this is farfetched. He just connected – so to speak.

That's why I was sorry that he was so cavalier in joking about Sarah Palin's daughter – Willow rather than Bristol – we all know better than he. There were so many great targets for jokes, why did he have to pick on a young girl, for heaven's sake? He puts me (and us all) on a roller-coaster. How can we not like someone who speaks out about his own shortcomings? How can we not like someone who takes ultimate responsibility for his actions, saying, "And when something happens like that, if you hurt a person and it's your responsibility, you try to fix it. At that point there is only two things that can happen, either you are going to make some progress and get it fixed or you're gonna fall short and perhaps not get it fixed. So let me tell you folks, I got my work cut out for me." Then, in almost the next breath, he apologizes again to the former governor of Alaska. Geez, David...what are you thinking about? your ratings?

How can we not sympathize with his suffering wife? And how can you not worry about the young son he is raising? His are human foibles writ large. To our question, "What was he thinking?" we may never get an answer. But, as he says, "People want to talk about it." And I do, reflecting on how this is someone walking the same earth as we do at the same time and provides some reflections in the ways of the world and instructions for us all.

Elizabeth Blackwell, First Woman Doctor

BY LINDA MAHONEY



Elizabeth Blackwell, born in Britain in 1821, was the first woman to graduate from medical school (M.D.), and she became a pioneer in educating women in medicine.

Elizabeth's father moved his family to the U.S., starting unsuccessful businesses in New York City, Jersey City and then Cincinnati.

He died in Cincinnati, leaving the

family without funds. To support themselves, Elizabeth Blackwell, her two older sisters, and their mother opened a private school. Elizabeth became interested in the idea of becoming a physician, to meet the needs of women who would prefer to consult with a woman about health problems. Her family religious and social radicalism, as well as the option of earning her own living as a "barrier" to matrimony, probably also influenced her decision.

Subsequently, Elizabeth got teaching jobs in Henderson, Kentucky and then in North and South Carolina, where she taught school while reading medicine on her own. In 1847 she began searching for a medical school that would admit her, but almost all the schools she applied to rejected her, based on her gender. However, when the students at Geneva Medical College at Geneva, New York were consulted, they

supported Elizabeth's admission, believing that the application was a practical joke by a competing school. Elizabeth was initially an outcast, having to overcome harsh treatment by students and faculty, who kept her from medical demonstrations – "inappropriate for a woman". Ultimately, most were impressed by her ability and persistence. Elizabeth Blackwell graduated first in her class in January 1849, becoming the first woman to graduate from medical school, the first woman doctor of medicine in the modern era.

After becoming a naturalized U.S. citizen, she moved first to England to further her medical studies, and then to Paris. There her plans to become a surgeon were derailed by an eye infection, which left her blind in one eye. Upon her return to the U.S. in 1851, Elizabeth was refused professional privileges at the hospitals and dispensaries, which were still granting these same privileges to doctors who had training but no medical degrees. She was forced to buy a house for her private practice, as landlords refused her lodging and rental office space when she raised the subject of setting up her own medical office.

Her patients were women and children. She also wrote lectures on health, which she published as *The Laws of Life; with Special Reference to the Physical Education of Girls*. In 1853 Elizabeth opened a dispensary in the New York slums. Later her sister Emily Blackwell, newly graduated from medical school, and Dr. Marie E. Zakrzewska, a Polish immigrant, joined Elizabeth at the dispensary (subsequently incorporated as the New York Infirmary for Women and Children). A number of leading male physicians supported their clinic by acting as consulting physicians.

SAVE THE DATE: **Sunday, January 31, 2010**

Women's Legislative Briefing



2010 Women's Legislative Briefing

KEYNOTE SPEAKER:

Lilly Ledbetter, Pay Equity Advocate

TIME: 12:30 P.M. - 5:00 P.M.

LOCATION: University of Maryland, Shady Grove Campus, Bldg II
9630 Gudelsky Drive, Rockville, Maryland

The Women's Legislative Briefing will conclude with a reception providing guests the opportunity to meet with County and State elected officials, and to network with advocates and representatives of other women's organizations.

GENERAL ADMISSIONS \$10; STUDENTS \$5

ONLINE REGISTRATION IS REQUIRED. REGISTRATION OPENS NOVEMBER 2009.

For more information, please contact the Montgomery County Commission for Women at 240-777-8330.

www.montgomerycountymd.gov/cfw

Elizabeth Blackwell went on a year-long lecture tour of Great Britain, resulting in her becoming the first woman to have her name on the British medical register (January 1859). These lectures, and her personal example, inspired other women to pursue the profession of medicine.

When Elizabeth returned to the United States, she resumed work with the Infirmary. During the Civil War, the Blackwell sisters helped to organize the Women's Central Association of Relief to select and train nurses. This inspired the creation of the United States Sanitary Commission, where Dr. Blackwell served with several women, including Clara Barton.

After the war ended, Elizabeth Blackwell and her sister Emily, upon the advice of Florence Nightingale in England, started the Women's Medical College at the infirmary, with Elizabeth teaching hygiene herself. This college continued for 31 years, but Elizabeth moved the next year to England, where she founded the London School of Medicine for Women and helped organize the National Health Society. In 1875, Elizabeth Blackwell was appointed professor of gynecology at the London School of Medicine for Children. She remained there until 1907, when she retired after a serious fall. She died in Sussex in 1910.

During her career Elizabeth Blackwell published several books in addition to the 1852 book:

- 1871: *The Religion of Health*
- 1878: *Counsel to Parents on the Moral Education of Their Children*
- 1884: *The Human Element in Sex*
- 1895: *Pioneer Work in Opening the Medical Profession to Women (autobiography)*
- 1902: *Essays in Medical Sociology*

Elizabeth Blackwell Family Connections

- Elizabeth's sister Emily was a pioneer woman medical doctor.
- Her sister Anna became an artist, translator, and newspaper columnist.
- Her brother Henry married pioneer feminist Lucy Stone.
- Her brother Samuel C. was married to pioneer woman minister and science writer Antoinette Brown Blackwell.
- Her sister Sarah became a writer and artist.

Selected Elizabeth Blackwell Quotations

- For what is done or learned by one class of women becomes, by virtue of their common womanhood, the property of all women.
- If society will not admit of woman's free development, then society must be remodeled.
- It is not easy to be a pioneer — but oh, it is fascinating! I would not trade one moment, even the worst moment, for all the riches in the world.
- A blank wall of social and professional antagonism faces the woman physician that forms a situation of singular and painful loneliness, leaving her without support, respect or professional counsel.
- Our school education ignores, in a thousand ways, the rules of healthy development.

Sources:

http://womenshistory.about.com/od/blackwellelizabeth/a/eliz_blackwell.htm

<http://www.nlm.nih.gov/hmd/blackwell/>

<http://campus.hws.edu/his/blackwell/>

<http://www.greatwomen.org/women.php?action=viewone&id=20>

MC NOW Chapter Meeting Monday, November 2

7 – 9:00, Wheaton Library
11701 Georgia Ave., Wheaton, MD

Join us for a panel on Ending Racism and Embracing Diversity:

Barbara Talley is a Speaker, Poet, Author, and Publisher. She speaks nationally and specializes in goal setting, balancing work and family, values, diversity, women's Issues and other motivational topics for businesses, associations, community groups, colleges, and government organizations.

James L. Stowe serves as the Executive Director for Montgomery County Maryland Office of Human Rights. The agency, established in 1992, provides leadership to the people of Montgomery County toward educating the citizens about cultural diversity; identifying and resolving community tensions; and eliminating racism/discrimination, as it works toward Building a Community for All.

Christina M. Tchen serves as the Director for the White House Office of Public Engagement and was previously a partner in corporate litigation and represented public agencies in state and federal class actions. Tchen is the recipient of many awards, including the Leadership Award from the Women's Bar Association of Illinois; "Women of Achievement" award from the Anti-Defamation League; and Chicago Lawyer "Person of the Year".

Herman Taylor is a Maryland State Delegate. Herman is a young man who has quickly established a reputation as an enthusiastic, friendly, dynamic, exciting, personable legislator who works tirelessly to make life better for families and all citizens in Maryland. Delegate Taylor was elected to the Maryland House of Delegates in 2002 from Maryland's 14th Legislative District, which covers eastern and northern Montgomery County. In 2007 Herman Taylor successfully handled the "Living Wage Bill" to help working families.

Catholic Health Care

BY NANCY NYLAND

Catholic health care facilities are governed by *Ethical and Religious Directives for Catholic Health Care Services*. The Catholic directives were not written by doctors, but by the U.S. Conference of Catholic Bishops (www.usccb.org). They apply to all patients in Catholic hospitals, not only Catholic patients.

The directives read like a legal document, and it helps to have an interpreter. Catholics for Choice explains the meaning of the directives in *The State of Catholic Health Care in Maryland* (www.catholicsforchoice.org):

The establishment and expansion of a Catholic health care presence has major implications for public health in any hosting community. Catholic health care institutions ... follow a set of ... guidelines that are separate from established medical norms.

The directives prohibit provision of contraceptive devices or birth control pills. They prohibit education about the use of condoms, either for prevention of pregnancy or for prevention of sexually transmitted diseases such as AIDS. The directives prohibit both sterilization to prevent pregnancy and infertility treatments to achieve pregnancy.

The directives prohibit the provision of emergency contraception, even to victims of sexual assault. An exception may be made in the case of a victim of sexual assault if she can "prove" that she was not made pregnant by taking a pregnancy test. However, the directives give the hospital the option not to use this exception.

The Commission for Women (CFW) published a list of health care priorities for Montgomery County (www.montgomerycountymd.gov/CFW) in 2007, including:

The CFW urges strengthening collaborative efforts ... to ensure that adequate resources are available to provide high quality, comprehensive and effective AIDS prevention, diagnosis, and treatment programs to county residents.

The directives prohibit Catholic health facilities from participating in effective AIDS prevention, or even effective AIDS prevention education.

Teenage motherhood makes it much more difficult for young women to get an education or work their way out of poverty. Single mothers are so overrepresented among the poor that the CFW has a special agenda to assist single mothers. The religious directives prohibit Catholic health care facilities from assisting Montgomery County communities in reducing the rate of teen pregnancy among any group, or even providing effective education.

The State of Catholic Health Care in Maryland points out: "Many people are not aware of these restrictions at Catholic hospitals in their communities until they are in need of the services that are banned. Often, they believe the name of the hospital to be a name only and not to indicate a different brand of health care." This is not surprising, given that Catholic hospitals do not advertise that they are governed by religious directives. For example, the Holy Cross Hospital Web site mentions them in one sentence on their "Health Library" Web page (www.holycrosshealth.org.) There is no link to the directives, or any explanation of what the directives are, or what they mean.

Holy Cross Hospital is currently planning to expand into the upcounty region of Montgomery County. Residents were not consulted about whether a Catholic hospital is the health facility that they would choose. Holy Cross is requesting zoning accommodations and exemptions to land-use planning requirements.

County citizens, especially women, need to educate themselves, and determine for themselves whether these religious restrictions are acceptable in a hospital serving the public, which is proposed to be built on publicly-funded land. All of the documents mentioned above are available free on the Web at the URLs in parentheses.

MCNOW NEW OR RENEW MEMBERSHIP APPLICATION

- Yes**, sign me up for _____ years of NOW membership @ \$35/1 yr, \$65/2 yrs, \$95/3 yrs
- I am a New Member
- I am a Renewing Member
- Member # _____
- (Please fill in if you know your number. If not, MCNOW Membership Chair can find and fill in.)*

- Yes**, I would like to join/renew, but have limited resources. I am enclosing \$ _____
- (\$15-\$34/year sliding scale: what you can afford)*

- Yes**, I would like to affiliate with MCNOW (chapter # MD0200)

- I am enclosing an additional contribution to MCNOW in the amount of \$ _____

Name _____

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State _____ Zip _____

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Email* _____

* By giving us your email address, you will receive a periodic MCNOW Feminist Calendar, keeping you up to date on local news and events of interest to women.

Please make your check payable to **Montgomery County NOW** and mail along with this application to: **MCNOW**, P.O. Box 2301, Rockville, MD 20847-2301 (To renew online with credit card, visit www.mcnow.org)



**Montgomery County Chapter of the
National Organization for Women**

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MC NOW Calendar of Events

Chapter Meetings generally take place on the first or second Monday of each month. All members are welcome.

OCTOBER 2009

- 27 (Tue) 9:30 am–4:00 pm, Maryland Network Against Domestic Violence (MNADV) Statewide Conference on Teen Dating Abuse, Healthy Relationships, and the Effects of Domestic Violence on Children. Visit the conference Web page at www.mnadv.org/conference.html.
- 27 (Tue) 12–2 pm, Planned Parenthood of Metropolitan Washington, DC, Champions of Choice Annual Awards Luncheon. For more information, visit www.championsofchoice.com.

NOVEMBER 2009

- 2 (Mon) 7–9:00 pm. MCNOW Chapter Meeting. Bring a friend! Wheaton Library, large conference room downstairs, 11701 Georgia Ave., Wheaton, MD 20902. Join us for a panel on Ending Racism and Embracing Diversity. For more information, contact info@mcmdnow.org
- 14 (Sat) 9:30 am–3:00 pm. Maryland Network Against Domestic Violence Conference: Choose Respect Montgomery. Montgomery College, Rockville Campus, Rockville, MD 20850. Conference will feature workshops for teens ages 12-18 on healthy dating behaviors, recognizing abuse, and misuse of technology. Workshops for parents in English and Spanish. Free. Contact: Judge Marielsa Bernard (240) 777-9366 or Cindy Mogel (240) 777-7121.
- 14 (Sat) 9 am-2:15 pm. League of Women Voters of Maryland Citizens' Lobbying Course THE ART OF ADVOCACY. Miller

Senate Office Bldg, Presidents Conference Room, W1, Annapolis, MD. Program includes effective lobbying techniques, building relationships, gaining influence, how to impact the budget (with the experts). Cost \$25 includes tour of the Legislative Complex. 12:15-2:15 pm, Luncheon at Ram's Head Tavern, 33 West Street, with Keynote Speaker: Congressman John Sarbanes, member of the Energy and Commerce Committee, the lead House Committee on Health Care Reform, will speak on the status of efforts to improve health care in this country. \$35 includes tour of the Legislative Complex. For mor information, visit LWVMD.org or contact info@lwvmd.org or web@lwvmd.org.

DECEMBER 2009

- 6 (Sun) 3pm. League of Women Voters of Montgomery County Fall Fundraiser. AFI Silver Theatre, Downtown Silver Spring. www.lwvmd.org/mont or lwvmc@erols.com

JANUARY 2010

- 31 (Sun) Women's Legislative Briefing. University of Maryland, Shady Grove Campus, 9630 Gudelsky Drive, Rockville, MD 20850. Keynote speaker will be pay equity heroine Lilly Ledbetter. For more information about co-sponsorship, volunteering, and general questions, call 240-777-8331 or visit www.montgomerycountymd.gov/cfw.