At the time of the preparation of the current issue (Vol. VII, Issue 1), the US is going through a very public and a very tense process of primaries for the election of a president which will replace the 2nd term presidency of George W. Bush. The reasons why these particular primaries are crucially important in the US history are many fold, but two need special attention. First and foremost, under the aggressively militant and isolationist foreign policies of the Bush administration, the image of the US as a ‘military and economic super-power of the world’ has suffered a serious blow. To finance its thinly scattered military machine over Iraq, Afghanistan and numerous other conflict zones in the world and through alienation of its friends and foes alike by starting a pre-emptive war, the Bush administration has done much injustice to the US image and much injustice to the world. Moreover, with its skyrocketing expenditures which are estimated to surpass 700 billion dollars, the Bush administration has transformed itself into a bust administration, girdling many future generations of Americans with substantial national and international debt. The long term implications of a shaky economy, unhealthy US currency and the implications for the future generations aside, the existing social programs that are aimed to buffer the poor and the vulnerable have also suffered. Although US continues to boast of its superpower status in the world, about 30 million of its own citizens, mostly the working poor and their children, live without health-care coverage and send their children to increasingly failing schools. Violent crimes in the US, after a long period of either relative stability or a decline are again on the rise. Youth crimes and crimes against women are at an all time high.

The second and perhaps, equally important aspect of the current US primaries encapsulates the fact that for the first time ever, an Afro-American man (B. Obama) and a woman candidate (H. Clinton) are competing as viable candidates in the presidential race from the Democratic party side. One may be inclined to think that this unique composition would bring into the foreground issues about gender, race, equality and equity as they pertain to women, visible minorities, legal or illegal immigrants and other disenfranchised minority populations. However, Republicans are still supporting the white male privilege amongst the faces of their numerous candidates and the important social issues of race/gender and marginality remain in the background. Instead, the pendulum swings from issues of the Iraq war, declining buying power of the middle classes, the troubled housing market and the ‘non-welcome’ status of immigrants from Latin America. Understandably, the top two Democratic candidates are fearful of using the race or gender card, insist-
ing on presenting themselves as ‘generically’ excellent contenders to the Oval Office. Their fears might indeed be well-founded in the conservative milieu they compete in. The US, as well as other developed and developing societies of the world seem to be still ‘uncomfortable’ about challenging either racial or gendered inequalities. So, even when the top contenders are representatives of the two respective marginalized groups, their social analyses and political positions are neither critically gendered nor pointedly anti-racialized.

The US still serves as a model for other countries to emulate, even under conditions that stretch its military might and challenge its economic privilege. For example, there is increased conservatism both at the political and economic dimensions in countries such as Canada. Even in the much praised Canadian social welfare system which is a point of pride for most Canadians, cracks are starting to appear in safety networks such as social welfare, affordable housing and health care. Overburdened shelters are trying to do their best to deal with the fall-out.

The first paper in the current issue is about women users of shelters. Within a milieu of inflexible conservatism and declining social supports both in ideology and social policy, Richter and Chaw-Kant’s analysis of homeless women in Edmonton, Alberta is insightful. The study is based on 660 shelter-user files from 1985-2004. The authors rightly point out that poverty victimizes various groups (the infirm, the aged, the sick, the substance abuser, etc.). This general vulnerability notwithstanding, women and their dependent children are particularly vulnerable to poverty and homelessness. Moreover, women and young girls are vulnerable to poverty and homelessness because of childhood violence and/or partner violence that they may have suffered. What is discerning in the current findings is that the proportion of homeless women is on a dramatic rise, at least in Edmonton, Alberta. The authors explain away some of this pattern through the migration and immigration patterns to an oil-rich province which acts as a magnet to employment-hungry youth and young adults. However, their own data show that at least 50% of the chronically poor and repeatedly homeless are Aboriginal women, implying that poverty and violence related problems are much closer to home than migratory shifts can account for. In the current study, over 62% of women report housing problems and violence as the reason behind their shelter use. Moreover, the link between health (physical and mental illnesses) and homelessness is of concern, although the direction of causality is not clear in the current paper. Shelter users do report a wide range of health problems, but whether these health problems have caused their homelessness, or their homelessness has caused some of these health problems needs further investigation.

The authors recommend that community nurses and health-care workers must be trained to respond to the counselling needs of the shel-
ter users. Of course, this type of intervention is necessary and probably helpful at the micro level. However, the causes of poverty, the declining social support systems and the particular vulnerabilities of women which intersect with race/ethnicity/immigration status cannot be resolved through counselling. These macro level problems require macro level solutions at the federal and provincial levels. The problem is that conservative governments do not have the foresight or resolve to tackle poverty which intersects with gendered and racial inequalities.

Women’s health, race/ethnicity and issues of marginalization are also addressed in Nelson and Macias’s paper. What is at issue here is breast cancer and the dominant ideologies that are ingrained within systems of western medicine, which unintentionally (or carelessly) omit, ignore, exclude or even disrespect the special needs and cultural sensitivities of women who are living with this ‘white disease’. Of course, the ‘white disease’ does not mean cancer afflicts primarily white women—far from it. What it underscores is that the medical establishment and its offshoots, even with the best of intentions, give off cues as if it were so. Thus, poor women, immigrant women and women of colour are especially short-changed and excluded from the dominant assumptions and medical constructions of white bodies, middle class affluence and exclusively western views about health and well-being.

The authors argue that the implications of constructing cancer as a ‘white disease’ go beyond just exclusion of non-white women. It may also involve self-questioning, confusion, resentment, misleading information which may all combine to impact one’s chances for re-gaining one’s health versus being placed at additional risks for survival. For example, offering a black woman a ‘white’ prosthetic breast to replace the breast she may have lost is insensitive and exclusionary. However, offering a non-English-speaking patient information on her serious disease in a language she does not understand and cannot quickly learn is much more detrimental. Another example might be making suggestions about food intake which ignores cultural food selection and preparation variations, or suggesting nutritional alternatives that the poor cannot afford beyond insensitivity and exclusion: These patterns outright disempower already marginalized populations and increase their health risks. Women of colour and other minority women do not get to see themselves in the discourse of their frightening disease, although the disease so very personally affects them all. Stated differently, women are made powerless in the matrix of their potentially life-threatening disease that the ‘medical experts’ expect them to take control over. One of the most interesting findings of this study is women’s complex reactions to the dominant discourse, without actually confronting the irrelevance of the dominant ‘white’ discourse in their day-by-day lives. In a way, each patient seems to try ways of fitting-in (the authors apply the concept of ‘mimicry’).
rather than trying to dismantle the discourse that ‘others’ them and makes them appear as ‘deviants’. In doing so, they still preserve some kind of ‘agency’ in dealing with their disease, although they are by no means equal players in relation to the dominant medical establishment. This is the reason, the authors suggest, that social sciences must turn their critical gaze on the dominant group and analyze how it short changes and fails the marginalized women. Marginalized women who are battling a potentially deadly disease cannot be expected to bring about the necessary change on their own, even when they struggle to have some agency over their own lives.

‘Othering’ and being treated as ‘deviants’ also comes to play in Oosterhoff et al.’s paper on 14 HIV+ women in Northern Vietnam. After devastating the African continent and carving out the productive and reproductive adult male and female segments from the population distribution of many African states, HIV/AIDS is increasingly playing havoc with women’s lives in south and eastern Asia. The HIV+ participants in this micro-credit study are women who are chronically burdened by many social and economic ills such as poverty, unemployment, sick/drug-dependent and/or abusive husbands in addition to the HIV virus they carry. Their HIV+ status brings additional challenges to them such as hostility and prejudice from family members and neighbours, unemployability and discrimination within the medical establishment if/when they become pregnant. What Oosterhoff and her colleagues have done is to trace the empowerment micro-credit brings to the otherwise absolutely disempowered lives of the HIV+ women. Empowerment is measured in terms of economic, socio-cultural, health, legal-political and psychological realms.

So, does micro-finance change the crushing constraints in these women’s lives? The answer in the current study is ‘mostly yes’. Although the sample is very small, the individual stories are very different and there are two exceptions, 12 of the 14 women have benefited from establishing some kind of independence through the monetary credit they have received. Moreover, most women have been able to shift the money they have earned to better their own and their husbands’ health status. This is good news indeed, especially when there are some findings in the current literature that argue that micro credit does not really help women. The challenging studies put forth three important points against micro credit: 1) the ‘double burden’ of women, not only to carry all the household and childcare duties in their patriarchal households, but also struggle to make a go of their ‘business’ ventures, with little or no help, 2) the fact that men use women to get micro-credit and then usurp its economic fruits, leaving the women responsible for the debt and 3) that micro-credit ventures are almost always in marginalized fields, thus reinforcing women’s traditional work for very low income. The positive outcomes
observed in this study are encouraging, but not capable of addressing some of these more macro-level concerns.

In the current study, all women were married to men who had histories of drug use, visits to sex workers and a whole host of other ailments. The authors do not analyze why it is that women marry and stay married to such undesirable men who bring them many social and economic ills, including possibly deadly sexually-transmitted diseases. One of their findings—the fact that micro credit did not alter the powerlessness of women over their own bodies in sexual and reproductive aspects—also begs for a feminist analysis. Thus, as interesting as the analysis of women’s personal efforts through micro opportunities may be, a more critical analysis is required of the gendered nature of the labour markets, women’s subjugated position in patriarchal societies and patriarchal choke-holds on sexuality and reproduction. A more in-depth feminist analysis will ground some of the interesting observations made here. The help through micro efforts, as important as they are to serve as temporary relief, cannot alter the structural inequalities that ail women.

Sevér’s paper is about injustices and violence against women in India in dowry related crimes, sex ratio imbalances and foeticide/infanticide. She traces the historical roots of dowry systems and establishes links with other measures of women’s general status and life chances. The measures she uses are violence by husbands and husbands’ kin and sex ratios for overall and under six-years of age populations. Indeed, despite much hype about India’s booming economy mainly due to its information technology and manufacturing strengths, the newly found riches of the upwardly mobile segment have not trickled down to establish gender parities. On the contrary, if anything, in the affluent states/Union Territories, there are higher levels of dowry violence, cruelty by husbands and their kin, higher levels of sex ratio imbalances than in more traditional and less affluent regions of this gargantuan country.

Sevér explores the reasons behind the rise of violence and basically ineffective state policies that are meant to deal with them. Amongst others, the country’s colonized history, although illegalized, the practical remnants of the cast system and the rampant move into a class-based society from a feudal existence are seen as the culprits. Moreover, the socialization of women into docile roles, the burdens placed on families of daughters who feel entrapped in the dowry demands, the patriarchal biases of the criminal justice system also help in the continuation of the status quo and creating life and death challenges to women and girls. According to Sevér’s analysis, within the relatively gloomy picture, there may be a few bright spots. For one, the formal educational attainment of both girls and boys are on the rise, at least, amongst the quickly urbanizing populations. One outcome of this trend is the increased paid labour force participation of women. Currently, this number stands at 28%. It is
possible that working women who have some socioeconomic independ-
ence may be able to negotiate a slightly more positive space for them-
selves in family and marital relations than their economically dependent
sisters. Another positive development that Sev’er mentions is the vibrant
women’s initiatives, both at the grass-roots and NGO levels. At least,
some Indian women are speaking out, loudly and eloquently, against the
injustices and violence against their more docile sisters. The third bright
spot, according to Sev’er, is the global gaze that the Indian society is
increasingly under. One way or another, India will have to address the
archaic traditions that subjugate its female population such as dowry
related crimes and sex ratio imbalances.

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