

ASUN constitution vote today

Voting on the proposed ASUN constitution takes place today in the City Campus Nebraska Union and the East Campus Activities Building, according to John McCollister, ASUN election commissioner.

Students may vote in the Nebraska Union from 8:15 a.m. until 7:15 p.m. and on East Campus from 8:30 a.m. until 4:30 p.m., McCollister said.

Election procedures will be similar to those of the past, where election officials will use ultraviolet lights and students ID cards as means of identification.

Students will vote to either accept or reject the proposed constitution. If less than 30 per cent of the students

vote, the number of approval votes necessary for passage will remain at 2,700.

Filing for next year's ASUN offices begins Monday. Positions are open for Student Senate, Advisory Boards and ASUN executive positions.

Apportionment and a clause expanding the powers of ASUN are the two major amendments to the constitution. The proposed revisions were adopted recently by the ASUN Constitutional Convention.

The representation of Senate is proposed to change from the present college system to a mixed system of representation of at-large, district and advisory board representation.

The proposed constitution includes several sections based on Government Bill 24, passed by Senate last fall. The sections are aimed at increasing the powers of ASUN.

The proposal would allow ASUN to exercise all powers over student life. This would include the power to establish rules, policies, and regulations over social and group life such as curfews, publications and parietal affairs.

ASUN would also have the power to participate equitably in the allocation and distribution of student fees. Similarly, ASUN would participate equitably with University Administration and faculty in the ex-

ercise of all power and responsibility over University housing policy and non-disciplinary matters.

The proposed reapportionment would have Senate composed of a maximum of 38 Senators, an increase of three over the existing Senate.

All University students would vote for eight senators elected at-large. Greeks would elect four senators based on a representation ratio of one senator for every 750 students.

Off-campus students would follow a one-per-1500-students ratio allowing for six off-campus senators. The five undergraduate advisory boards would each elect a senator.

King Week proclaimed

The week of March 31 through April 3 has been declared Martin Luther King Week in observance of King's assassination last April 4, according to Lonetta Harrold, University student.

Programs and activities for the four-day observance are being coordinated through Miss Harrold of the Afro-American Collegiate Society. Society members open the week Monday with a panel of black

students at a Hyde Park session.

The main observance will take place Wednesday afternoon. A program will be presented in the Nebraska Union ballroom featuring readings from King's works and views of the year since his death by Tom Windham of Nebraska Wesleyan and Phil Scribner of the University.

Films, a theater production, and Hyde Park sessions fill the week's programs.



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Modern conception prevention methods effective, sophisticated, readily available

By Joannell Ackerman
Nebraskan Staff Writer

Anyone leafing through volume 84 of the Ladies Home Journal located among the bound periodicals in the Love Library stacks may notice that in the July, 1967 issue, pages 46 and 47 are missing.

"The First Complete Guide to Modern Birth Control" is the title of that article, which someone decided to appropriate for his own files.

Dispensing information about birth control has come a long way since the first family planning clinic was opened 50 years ago in New York. Margaret Sanger and her sister, nurse Ethel Byrne, were promptly arrested for their activity.

HOW KNOWLEDGEABLE are college students on the subject?

One Lincoln gynecologist feels that "those students who are interested know about birth control methods. The ones who do not know the various methods just are not interested."

Patricia Knaub, who teaches a human development course, finds that student attitudes toward birth control

Editors Note

The significance of birth control to virtually all students is considerable. To many single students, knowledge of contraception may be crucial in preventing an unwanted child or an unwanted marriage. To married students and that majority of the population which will marry, decisions in family planning are of primary importance.

The Daily Nebraskan, through researched information and through the reporting of the knowledgeable opinion of doctors, sociologists, ministers and teachers, is attempting to inform the students on the past, present and future of family planning and birth control.

are sophisticated though there is also "a great deal of misinformation" on the subject.

Perhaps this misinformation is best reflected in the questions students ask.

"CAN A GIRL become pregnant if she has intercourse at the time of menstruation?" was one question a couple of coeds put to a Student Health staff member after a recent program at one of the dormitories.

The answer is no because ovulation — the release of an egg by the ovary — does not occur during menstruation.

Currently information is available through several sources.

Student health staff members and consulting gynecologists have a program on birth control which is presented to campus living units upon request.

HUMAN DEVELOPMENT 191, a course on marriage and family relations, includes a unit about family planning and birth control methods.

The Planned Parenthood Committee in Omaha has family planning clinics as well as booklets, lectures and films concerning birth control. Family service organizations and public health offices are other sources of information.

The family doctor, a gynecologist or public health nurse have information on birth control methods and are able to answer individual questions.

A little research at the library will yield books and magazines with information on the subject.

The Pill

THE PILL, available only on a doctor's prescription, is the most reliable contraceptive. It is close to 100 per cent effective when taken as directed.

Pills contain two synthetic hormones, estrogen and progesterin, which closely resemble natural hormones produced by the ovaries. The estrogen-progesterin pills prevent ovulation. Since no eggs are produced by the ovaries, pregnancy cannot occur.

There are two types of pills. Combination pills contain both estrogen and progesterin. A pill is taken daily from the fifth day of the menstrual cycle to the 25th day.

Menstruation usually occurs one to three days after the pill is stopped. The pill is resumed on day five of the new cycle, which begins with the start of menstrual bleeding designated as day one.

WITH THE sequential pills, an estrogen pill is taken from the fifth day of the cycle to the 20th day and an estrogen-progesterin pill is taken from the 21st day to the 25th day. Because the woman receives less progesterin with the sequential pills, undesirable side effects are minimized. The lower progesterin dosage also makes these pills slightly less effective than the combined tablets if a pill is missed.

Side effects similar to those of early pregnancy which some pill users experience — weight gain, nausea, irregular bleeding, breast tenderness — have been minimized with lower dosage pills. Usually these side effects disappear after the first month.

The effects of long term, constant use of the pill are not known. Oral contraceptives have been in use since 1958, and U.S. Food and Drug Administration approval of pill prescription was given in June, 1960. About 6.5 million women are taking the pill in the U.S. today.

As to the pill's safety, one Lincoln gynecologist says that there are a relatively small number of complications from the pill considering the number of dosages that

have been taken during the 11 years it has been in use.

ANOTHER LINCOLN gynecologist feels that the pill is "more of a moral issue than a medical issue."

Prescription times vary. One doctor prescribes the pill on a yearly basis. If no complications arise during the year, he continues the prescription. Other doctors take their patients off of the pill for one or two months after they have used the pill two years in order "to let their cycles straighten out."

Doctors suggest annual or semi-annual checkups for women taking the pill, including a pelvic examination and a Pap smear (test for cancer of the cervix).

A month's pill supply costs between \$1.80 and \$2.50, depending on which one of the 12 brands issued. Married students may obtain pills from the Student Health pharmacy at lower rates.

THE STAFF at Student Health and doctors in Lincoln do not prescribe the pill to single girls for birth control purposes.

IUD'S

Intrauterine devices (IUD) are small loop, spiral or ring shaped objects made of plastic or stainless steel.

The main advantage of the IUD is that after it has been inserted in the uterus by a doctor, no further attention is needed. This makes it the simplest to use of all contraceptive methods. If pregnancy is desired, the doctor simply removes the device.

The IUD does not prevent ovulation. Instead, it acts as an irritant and prevents the egg from attaching itself to the uterine wall if fertilization occurs.

THOUGH IUD's are not 100 per cent effective they are considered to be the second most effective contraceptive device. There is about a two or three per cent chance of pregnancy occurring within the first year of use.

Initially, the IUD may cause heavier menstrual flow, cramps or bleeding between periods. These discomforts usually do not last long.

Not every woman can use the device. It is not recommended for women who have not had a pregnancy because insertion is difficult. However, smaller IUD's are made for women who have not been pregnant. A gynecologist at the Planned Parenthood clinic in Omaha says that the device is being used successfully by patients who have had no prior pregnancy.

Revolution in birth control questions nature of marriage

by Connie Winkler
Nebraskan Staff Writer

The contraceptive revolution has raised many questions about the nature of woman, marriage and motherhood. Such things as religion and family environment seem to enter in to how a person answers these questions.

Modern birth control methods have given women freedom to choose the life they want to lead, said Mrs. Patricia Knaub, Human Development and the Family course instructor. Individuals can do their own thing and don't have to fit into a prescribed role, including motherhood, she continued.

The pill allows women to approach sex on a more equal basis with men; also, their personalities are no longer submerged in their femininity. Sex is no longer something that nice women don't enjoy, she said.

SINCE CONTRACEPTIVES free the female from fear of pregnancy, she is more able to enjoy sexual union, Mrs. Knaub continued. Effective birth control has also meant that a woman's life can be more predictable and that she takes on more responsibility for planning her life.

In the wake of the contraceptive revolution, attitudes toward pre-marital sex are changing, Mrs. Knaub continued. "There is a greater ability to accept behavior in other people, that may be unacceptable in yourself. Attitudes are changing but we don't really know how much behavior is changing," she said.

Sex is an emotional experience and its effect cannot be projected, Mrs. Knaub continued. In the case of pre-marital sex there might be guilt feelings afterward. She feels it is well to remember that sex is not an isolated experience — that successive sexual experiences effect further sexual relations.

When approaching any sexual act one must consider the consequences and responsibilities. "I do not think everyone is destined to be a parent, each individual needs to choose if he wants to cast himself in the role of parenthood," she said.

MARRIAGES CAN survive and grow without children and the presence of children does not necessarily mean that the relationship is growing. In certain marriages it might be better not to have children, she explained.

If the couple decides to have children they should be spaced and planned for, the Human Development and the Family instructor said. A child is disruptive to the marital relationship and is a financial liability.

About 15 to 20 per cent of the women who have tried the IUD could not use it because of excessive uterine bleeding, excessive cramping or because the device was spontaneously expelled from the uterus. (Most IUD's have thin plastic strings attached which can be felt with the fingers to make sure the device is in place). In rare cases, the IUD has perforated the uterine wall or caused infection of the reproductive tract.

THE DEVICE costs about \$32 and insertion fees start at about \$25. IUD's are inserted by the gynecologist at his office. Annual checkups are recommended.

Not all doctors recommend the IUD. One Lincoln gynecologist will not prescribe the device for his patients. "Everytime a foreign body is inserted in the uterus, there is a reaction. The IUD causes cramps and bleeding. I do not approve of this method," he says.

About one million U.S. women use the IUD. In other parts of the world where the population problem is critical, the IUD is widely used as the simplest, least costly and most effective means of birth control. In Russia, family planning programs favor the IUD.

The diaphragm

A birth control method which antedates the pill and the IUD is the diaphragm used with a contraceptive jelly or cream.

Doctors widely recommended this method before the pill and IUD were available because its 97 per cent effectiveness (when used properly) made the diaphragm the most reliable method then in use.

The diaphragm, a rubber dome-shaped device about two inches in diameter, is placed in the vagina to cover the cervix and prevent sperm from entering the uterus. The jelly or cream is spermicidal and serves as an added protection.

The diaphragm may be inserted some hours before intercourse and must be left in place for at least six hours after the last sexual relation.

THERE ARE no undesirable side effects connected with the diaphragm method, though some females find insertion unappealing.

Cost of a diaphragm is \$3 to \$4.50 plus a doctor's fee for fitting the device. A new fitting is required after giving birth. The jelly or cream costs about \$3.50 for 20 applications.

Many times when the woman cannot use the pill for medical reasons or if she chooses to discontinue the pill, the couple will choose the diaphragm method.

Some birth control methods do not require a doctor's prescription.

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She feels that whether or not the couple will have children is a basic value and should be determined before marriage because the decision represents two different life styles.

Birth control should also be a mutual decision of the couple, she said. Often the responsibility of birth control is placed on the female, but this also should be shared. Science is working on contraceptive hormones for males, she added.

"I DON'T think society is quite ready to say if contraceptives should be more readily available," Mrs.

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