

**Women and Health in American History
History of Medicine and Women's Studies 531
Spring 2008**

Prof. Judith A. Houck

Jahouck@facstaff.wisc.edu

263-6287

Office: 1426 Medical Sciences Center

Office Hours: Tuesday 2-4 and by appointment

Medhist531-1-s08@lists.wisc.edu

This course examines the health issues women have faced and their responses to them from the eighteenth through the twentieth centuries. In particular, it explores the personal experiences and the medical views of women's life-cycle events, the role of women as health care providers and activists, and the effect of gender on the perception of illness.

REQUIRED COURSE TEXTS:

(Ordered at Room of One's Own)

Judith Walzer Leavitt, ed., *Women and Health in America: Historical Readings*, 2nd ed. (Madison, WI: University of Wisconsin Press, 1999).

Audre Lorde, *The Cancer Journals*, (San Francisco: Aunt Lute Books, 1980).

531Reader reader available at History of Science Office, 7143 Social Sciences
Cash or check; nor refunds

COURSE REQUIREMENTS AND GRADING:

Participation:	20%
Domestic Health Research Paper	20%
Midterm	20%
Final	20%
Historical Roots of Contemporary Issues Paper	20%

1) Participation:

Because the discussion of readings is a major component of this course, you will be graded on your preparation for and involvement in class. This approach asks that you engage fully with the material and explore your own beliefs about historical events and processes. I evaluate participation by how well you talk about your ideas, listen and respond to others' ideas, remain sensitive to the feelings of other class members, and take responsibility for moving class discussion forward. Expressing one's ideas and getting reactions from others can help you evaluate your own opinions and ultimately sharpen your thinking. Although I set the grading criteria, you assign your own participation grade daily. (I do reserve the right to revise the grades.) Please note that the most valuable participation does not necessarily come from the student who speaks the most. Students who do not listen to their classmates, who do not make room for various viewpoints and speakers, should not earn the highest participation.

As part of your participation grade, I expect you to complete reading guides before you come to class and turn them in at the end of the discussion. I will provide the reading guides the class session before they are due. These are to help you approach the reading, provide a starting point for class discussion, and guide your study before the exams. **You will be expected to turn in 14 of these**, but feel free to do them

all. For days I do not provide reading guides, I have attached a few general guidelines (Appendix II) to help you think about the texts.

2) Domestic Health Advice Research Paper:

Find three domestic health guides, each separated by at least twenty years. Choose one issue (dress, pregnancy, menopause, menstruation, sex, diet, beauty, abortion, etc.) and identify and analyze how that issue has changed (or not changed) over time. Note that this is not merely a paper that compares and contrasts three texts. Your task is to create an argument about the comparison. Can you, for example, generalize from these three examples about the changing nature of medical advice to women? Can you make a claim about the changing assessment of women's bodies? Can you make a claim about the changing assessment of women's sexuality? Can you explain the origins of the change you see? When appropriate, use the course materials to provide context for your discussion. (Aim for about five pages. Eight pages are too many. Three pages are too few.) **First draft due Tuesday, February 19. Final draft due Tuesday, March 4.**

Grading Criteria: See Appendix III.

3) Historical Roots of Contemporary Issues Paper:

Over the course of the semester, be on the lookout for newspaper or magazine articles that address some aspect of women's health, particularly as it has been presented on this syllabus. I suggest that you collect some that look especially interesting. Choose one article, and discuss how the history you have learned informs the current issue. Again, you must make an argument about the role of history. You could, for example, create a thesis about how the past helps explain the present or you could argue how the past can help guide the future. Or you could try something else as the issue and article suggest. But your paper must have a thesis and it must connect historical analysis with a current issue. (Aim for about five pages. Eight pages are too many. Three pages are too few.) **First draft due Tuesday, April 22. Final draft due Tuesday, May 6.**

Grading Criteria: See Appendix III

3) Examinations:

The midterm and the final will be take-home essays. I will provide the questions for the midterm on **Tuesday, March 4**. It will be due on **Thursday, March 13 in my box near 1426 Medical Sciences Center**. I will provide the questions for the final on **Tuesday, May 6**. It will be due in my box on **May 16 at 12:05**.

Grading Criteria: See exams.

Writing Fellows:

To help with the writing assignments this semester, we have the opportunity to work with the Undergraduate Writing Fellow Program. The Writing Fellows are gifted undergraduates who have received special training to offer critical evaluation and helpful suggestions on your drafts. After you turn in your drafts, I will give them to the Fellows who will read and provide written comments. You will then meet with your Fellow to discuss the paper and strategies for the rewrite. These meetings are mandatory.

This is a terrific opportunity for several reasons. First, our work is always improved by input from others. While the Fellows have no special training in the *content* of the course, they are trained to help you develop a well-constructed and persuasive essay. Second, good writing comes through practice and rewriting. The two-draft policy provides a chance for both. Finally, it helps your grade. Many of you are new to historical writing, and it can be surprisingly challenging. Getting two chances to get it right will

improve the quality of your final product. Our writing fellows are: Marcelle Richards (smrichards2@wisc.edu), Kerry Gabrielson (kgabrielson@wisc.edu), and Callie Hansen (cehansen@wisc.edu).

Late Paper Policy:

Assignments that are late, for whatever reason, will be docked 5 points per day unless I have granted prior approval. This applies to all final assignments, including the take-home exams. Assignments a week or more late will not be accepted. Late drafts will be accepted only in extraordinary cases and only with my prior approval. If you do not turn in a draft, your final paper will be lowered by a minimum of 10 points. Use the phone.

GRADING SCALE

93-100	A
88-92	AB
83-87	B
78-82	BC
70-77	C
60-69	D
0-59	F

If you have questions about a grade, speak first to the instructor (Houck). If the question is not resolved, speak with the chair of Medical History and Bioethics (Susan Lederer). She will attempt to resolve the issue informally and inform you of the Appeals Procedures if no resolution is reached informally.

I wish to include fully any students with special needs in this course. Please let me know if you need any special accommodations in the instruction or evaluation procedures in order to enable you to participate fully. The McBurney Center will provide useful assistance and documentation.

GRADUATE STUDENT COURSE REQUIREMENTS

Graduate students will be required to attend a separate seminar, read five additional books, write two book reviews (both due by **October 30**), write a 10-12 page research paper (draft due **April 17**; final due **May 8**), and take the final.

Graduate Readings:

- Johanna Schoen, *Choice and Coercion: Birth Control, Sterilization, and Abortion in Public Health and Welfare* (Chapel Hill: University of North Carolina Press, 2005)
- Marie Jenkins Schwartz, *Birthing a Slave: Motherhood and Medicine in the Antebellum South* (Cambridge: Harvard University Press, 2006)
- Janet Golden, *Message in A Bottle: The Making of Fetal Alcohol Syndrome* (Cambridge: Harvard University Press, 2005)
- Robert A. Aronowitz, *Unnatural History: Breast Cancer and American Society* (Cambridge: Harvard University Press, 2007)
- Kay Redfield Jamison, *An Unquiet Mind: A Memoir of Moods and Madness* (New York: Random House, 1995)

Seminar Participation, 30%; Book Reviews, 10% each; Final, 20%; Research paper, 30%.

COURSE SCHEDULE

Tuesday, January 22	Introduction to Women and Health in American History
Thursday, January 24	Approaches to Women and Health
Tuesday, January 29	Menstruation in the Nineteenth Century: An Affliction
Thursday, January 31	Menstruation in the Twentieth Century
Tuesday, February 5	Nineteenth-Century Sexuality
Thursday, February 7	Twentieth-Century Sexuality: Pathology and Social Control
Tuesday February 12	Birth Control in the Nineteenth Century: Just Say No
Thursday, February 14	Birth Control: Twentieth Century
Tuesday, February 19	Abortion: Nineteenth and Early Twentieth Century (Draft of Domestic Health Guide Paper Due)
Thursday, February 21	Abortion: Twentieth Century
Tuesday, February 26	Infertility
Thursday, February 28	Fitness and Body Image
Tuesday, March 4	Childbirth, Nineteenth Century (Final Domestic Health Guide Paper Due)
Thursday, March 6	Childbirth, Twentieth Century
Tuesday, March 11	Hot Flashes and Mood Swings: Menopause
Thursday, March 13	Midterm Exam
March 17-21	Spring Break
Tuesday, March 25	White Women as Physicians
Thursday, March 27	Black Women as Physicians: Dual Oppression?
Tuesday, April 1	Not a Suitable Job for Ladies: White Women as Nurses
Thursday, April 3	Black Women as Nurses
Tuesday, April 8	Midwives in the Eighteenth Century
Thursday, April 10	African-American Midwives
Tuesday, April 15	Women's Health Activists
Thursday, April 17	Gendered Aspects of Disease
Tuesday, April 22	Invalidism (Draft of Historical Roots of Contemporary Issues Paper Due)
Thursday, April 24	Tuberculosis
Tuesday, April 29	Mental Illness
Thursday, May 1	AIDS
Tuesday, May 6	Breast Cancer (Final Historical Roots of Contemporary Issues Paper Due)
Thursday, May 8	Wrap-up and Evaluations
Friday, May 16	Final Exam Due (12:05)

Tuesday, January 22

Introduction to Women and Health in American History

UNIT I: WOMEN AND THEIR BODIES

Thursday, January 24

Approaches to Women and Health

Judith Walzer Leavitt, "Introduction to the Second Edition," *Women and Health in America: Historical Readings*, ed. Judith Walzer Leavitt, 2nd ed. (Madison, WI: University of Wisconsin Press, 1999), 3-8.

Catherine Beecher, *Letters to the People on Health and Happiness* (1855) in *Roots of Bitterness: Documents of the Social History of American Women*, eds. Nancy Cott, et al (Boston: Northeastern University Press, 1996), 293-297.

Sarah Pratt's Diary, 1846-7 (excerpts).

Emily Martin, "Medical Metaphors of Women's Bodies: Menstruation and Menopause," in *The Woman in the Body: A Cultural Analysis of Reproduction* (Boston: Beacon Press, 1987), 27-53.

Tuesday, January 29

Menstruation in the Nineteenth Century: An Affliction

Carroll Smith-Rosenberg and Charles Rosenberg, "The Female Animal: Medical and Biological Views of Woman and Her Role in Nineteenth-Century America," in *Women and Health*, 111-130.

George Wythe Cook, "Puberty in the Girl," *American Journal of Obstetrics and Diseases of Women and Children* 46 (1902): 804-807.

Edward H. Clarke, *Sex in Education, Or a Fair Chance for the Girls* (Boston: James R. Osgood and Company, 1873), 61-117.

Thursday, January 31

Menstruation in the Twentieth Century: The Need for "Sanitary Protection"

Joan Jacobs Brumberg, "'Something Happens to Girls': Menarche and the Emergence of the Modern American Hygienic Imperative," in *Women and Health*, 150-171.

Very Personally Yours (Neenah, WI: Kimberly-Clark Corp., 1961).

Toni Cade Bambara, "A Girl's Story," in *Trials, Tribulation and Celebrations*, ed. Marian Gray Secundy (Yarmouth, ME: Intercultural Press, 1992), 65-75.

Tuesday, February 5

Nineteenth-Century Sexuality

- Carl Degler, "What Ought to Be and What Was: Women's Sexuality in the Nineteenth Century," in *Women and Health*, 192-212.
- Carroll Smith-Rosenberg, "The Female World of Love and Ritual: Relations between Women in Nineteenth-Century America," *Signs* 1 (1975): 1-29.
- Evelynn M. Hammonds, "Toward a Genealogy of Black Female Sexuality: The Problematic of Silence, in *Feminist Theory and the Body: A Reader*, eds. Janet Price and Margrit Shildrick (New York: Routledge, 1999), 93-104.

Thursday, February 7

Twentieth-Century Sexuality: Pathology and Social Control

- Elizabeth Lunbeck, "'A New Generation of Women': Progressive Psychiatrists and the Hypersexual Female," in *Women and Health*, 229-249.
- Jennifer Terry, "Lesbians Under the Medical Gaze: Scientists Search for Remarkable Differences," *Journal of Sex Research* 27 (1990): 317-339.
- Marabel Morgan, *The Total Woman* (New York, Pocket Books, 1977), 111-133.

Tuesday February 12

Birth Control in the Nineteenth Century: Just Say No

- Linda Gordon, "Voluntary Motherhood: The Beginnings of Feminist Birth Control Ideas in the United States," in *Women and Health*, 253-268.
- John Harvey Kellogg, *Plain Facts for Old and Young* (Orig. 1877: reprint Buffalo, NY: The Heritage Press, 1974), 250-270.
- Eliza Mosher, "A Protest Against the Teaching of Birth Control," *Medical Woman's Journal* 32 (1925): 36.
- Adeline Riddle, "Birth Control," *Medical Woman's Journal* 26(1916): 286-288.
- Letters from Women to the *Birth Control Review* 1917-1918.

Thursday, February 14

Birth Control: Twentieth Century

- Andrea Tone, "Contraceptive Consumers: Gender and the Political Economy of Birth Control in the 1930s," in *Women and Health*, 306-325.
- Jessie M. Rodrique, "The Black Community and the Birth Control Movement," in *Women and Health*, 293-305.
- "A Negro Number," *Birth Control Review* 16 (1932): 163-167.

Tuesday, February 19

Abortion: Nineteenth and Early Twentieth Century

Leslie Reagan, "'About to Meet Her Maker': Women, Doctors, Dying Declarations, and the States Investigation of Abortion, Chicago, 1867-1940," in *Women and Health*, 269-292.

Loretta Ross, "African American Women and Abortion, 1800-1970," in *Theorizing Black Feminism: The Visionary Pragmatism of Black Women* (Routledge: London and New York: 1993).

Accounts of an 1862 abortion in the *Chicago Tribune*.

Thursday, February 21

Abortion: Twentieth Century

Rickie Solinger, "'A Complete Disaster': Abortion and the Politics of Hospital Abortion Committees, 1950-1970," in *Women and Health*, 659-680.

"Jane," *Voices*, June-November, 1973

Rita Arditti and Shelly Minden, "An Interview with Mirtha Quintanales, From the Third World Women's Archives," in *Test-Tube Women* ed. Rita Arditti, et al (Boston: Pandora Press, 1984), 119-130.

Tuesday, February 26

Infertility

Margaret Marsh, "Motherhood Denied: Women and Infertility in Historical Perspective," in *Mothers and Motherhood: Readings in American History* ed. Rima Apple and Janet Golden (Columbus: Ohio State University Press, 1997), 216-241.

Thursday, February 28

Fitness and Body Image

Martha Verbrugge, "'Stronger in Body as well as in Mind': Physical Education at Wellesley College, 1875-1900," in *Able-Bodied Womanhood* (Oxford University Press, 1988): 139-161.

Margaret A. Lowe, "From Robust Appetites to Calorie Counting: The Emergence of Dieting Among Smith College Students in the 1920s," in *Women and Health*, 172-189.

Tuesday, March 4

Childbirth, Nineteenth Century

Letters from Nettie Fowler McCormack to Anita McComick Blaine, from Anita to Nettie, and from Miss. Hammond to Mrs. McCormick, 1890 (McCormick papers).

Letters from Jane Savine to Elizabeth Gordon, 1846.

Judith Walzer Leavitt, "Under the Shadow of Maternity: American Women's Responses to Death and Debility Fears in Nineteenth-Century Childbirth, in *Women and Health*, 328-346.

Thursday, March 6

Childbirth, Twentieth Century

Charles Anthony Robinson, "Extern: How the Babies of the Slums are Brought into the World," *Century* 115 (1882): 551-60.

Judith Walzer Leavitt, "Birthing and Anesthesia: The Debate Over Twilight Sleep," in *Mothers and Motherhood: Readings in American History* ed. Rima Apple and Janet Golden (Columbus: Ohio State University Press, 1997), 242-258.

Carolyn Leonard Carson, "And the Results Showed Promise . . . Physicians, Childbirth and Southern Black Migrant Women, 1916-1930: Pittsburgh as a Case Study," in *Women and Health*, 347-370.

Tuesday, March 11

Hot Flashes and Mood Swings: Menopause

Robert A. Wilson, "A Key to Staying Young," *Look*, January 11, 1966, 66+.

Letter from Mrs. Blindt to the American Medical Association, November 9, 1970.

Survey responses re menopause c. 1950, Dorothy Brush Papers.

Letters and questionnaire responses to Women in Midstream, c. 1975.

Judith A. Houck, "'What Do These Women Want?': Feminist Responses to *Feminine Forever*, 1963-1980," *Bulletin of the History of Medicine* 77 (2003): 103-132.

Thursday, March 13

Midterm Exam

March 17-21 **Spring Break**

UNIT II: WOMEN AS HEALTH CARE PROVIDERS

Tuesday, March 25

White Women as Physicians

- Regina Morantz-Sanchez, "The Gendering of Empathic Expertise: How Women Physicians Became Empathic Than Men," in *Women and Health*, 526-539.
- Emily Blackwell Diary excerpts, 1852-3.
- "Dear Mrs. _____," September 2, 1964 letter from unnamed medical school.
- Florence Brown Sherbon, "Women in Medicine," *The Medical Woman's Journal* (1925): 240-243.

Thursday, March 27

Black Women as Physicians: Dual Oppression?

- Darlene Clark Hine, "Co-Laborers in the Work of the Lord: Nineteenth-Century Black Women Physicians," in *Send Us a Lady Physician: Women Doctors in America, 1835-1920*, ed. Ruth Abram (W. W. Norton and Co., 1985), 107-120.
- Isabella Vandervall, "Some Problems of the Colored Woman Physician," *The Woman's Medical Journal* 27 (1917): 156-158.
- "Can a Colored Woman Be a Physician," *The Crisis*, February 1933, 33-34.

Tuesday, April 1

Not a Suitable Job for Ladies: White Women as Nurses

- Susan Reverby, "'Neither for the Drawing Room nor for the Kitchen': Private Duty Nursing in Boston, 1873-1920," in *Women and Health*, 460-474.
- "Female Nurses in Military Hospitals," *American Medical Times* 3 (July-December 1861): 25-26.
- "Duties of the Army Surgeon: Females Not Suitable for Nurses," *American Medical Times* 3 (July-December 1861): 30.

Thursday, April 3

Black Women as Nurses

- Nina Gage and Alma Haupt, "Some Observations on Negro Nursing in the South," *Public Health Nurse* 24 (1932): 674-680.
- Darlene Clark Hine, "'They Shall Mount Up With Wings as Eagles': Historical Images of Black Nurses, 1890-1950," in *Women and Health*, 475-488.

Tuesday, April 8

Midwives in the Eighteenth Century

Charles Nash, *The History of Augusta, First Settlement and Early Days as a Town, including the Diary of Mrs. Martha Moore Ballard (1785-1812)* (Augusta, ME: Charles Nash and Sons, 1904), 260-283.

Laurel Thatcher Ulrich, "'The Living Mother of a Living Child': Midwifery and Mortality in Postrevolutionary New England," in *Women and Health*, 48-64.

Thursday, April 10

African-American Midwives

"Official Midwife" and "Birth Practices," in *Listen to Me Good: The Life Story of an Alabama Midwife*, Margaret Charles Smith and Linda Janet Holmes (Columbus: Ohio State University Press, 1996), 63-112.

Susan L. Smith, "White Nurses, Black Midwives, and Public Health in Mississippi, 1920-1950," in *Women and Health*, 444-458.

"The Story of Aunt Easter," in *Roots of Bitterness: Documents of the Social History of American Women*, eds. Nancy Cott, et al (Boston: Northeastern University Press, 1996), 341-343.

Tuesday, April 15

Women's Health Activists

Byllye Y. Avery, "Breathing Life Into Ourselves: The Evolution of the National Black Women's Health Project," in *Black Women's Health Book: Speaking for Ourselves*, new, expanded edition, ed. Evelyn White (Seattle: Seal, 1994), 4-10.

Helen Marieskind, "The Women's Health Movement," *International Journal of Health Services* 5 (1975): 217-223.

Barbara Seaman, "Physician Heel [sic] Thyself," *Proceedings of the 1975 Conference on Women and Health*.

UNIT III: GENDER AND DISEASE

Thursday, April 17

Gendered Aspects of Disease

Judith Walzer Leavitt, "Gendered Expectation: Women and Early Twentieth-Century Public Health," in *Women and Health*, 612-633.

Tuesday, April 22

Invalidism

Diane Price Herndl, "The Invisible (Invalid) Woman: African-American Women, Illness, and Nineteenth-Century Narrative," in *Women and Health*, 131-145.

Heather D. Curtis, "Houses of Healing: Sacred Space, Spiritual Practice, and the Transformation of Female Suffering in the Faith Cure Movement, 1870-1990," 75 (2006): 598-611.

Thursday, April 24

Tuberculosis

Sheila Rothman, "The Female Invalid: The Narrative of Deborah Vinal Fiske, 1806-1844," in *Living in the Shadow of Death: Tuberculosis and the Social Experience of Illness in American History* (Baltimore: Johns Hopkins University Press, 1995), 75-127.

Tuesday, April 29

Mental Illness

Charlotte Perkins Gilman, *The Yellow Wallpaper*.

Elaine S. Abelson, "The Invention of Kleptomania," in *Women and Health*, 390-404.

Thursday, May 1

AIDS

Paula Treichler, "AIDS, Gender, and Biomedical Discourse: Current Contests for Meaning," *AIDS: The Burden of History*, ed. Elizabeth Fee and Daniel Fox (Berkeley: University of California Press, 1988), 190-266.

Evelynn Hammonds, "Missing Persons: African American Women, AIDS, and the History of Disease," *Radical America* 24 (1990): 7-23.

Tuesday, May 6

Breast Cancer

Audre Lorde *The Cancer Journals* (San Francisco: Aunt Lute Books, 1980)

Thursday, May 8

Wrap-up and Evaluation

Appendix I: How to Grade Your Participation

1) Attendance points

3

If you show up on time and stay the whole class period, you earn full credit.
If not, adjust accordingly.

2) Attention points 2

If you pay attention to the conversation, give yourself full credit.
If you read a magazine, do a crossword puzzle, or take a nap,
adjust accordingly.

3) Preparation points 2

If you read all the readings, give yourself full credit. If not, adjust
accordingly.

4) Participation

Participation points gauge several aspects of course involvement. They reflect whether you have understood the basic issues, engaged with the material, volunteered your opinions, and listened to your classmates. Choose the category (and the point assignment) that best fits your situation.

Category A—no participation 0

did not participate in discussion

Category B—good participation 1

answered a question when directly asked
volunteered an item for a board list

Category C—better participation 2

asked a question
participated in small groups discussion
voluntarily offered an interpretation of an event or reading
voluntarily responded to a classmates comment
voluntarily offered a summary of a reading

The discussion format is based upon the notion that students can and do learn from each other. To acknowledge this, **one discussion point will be assigned by your peers.** After every discussion, you will indicate which two people you believe contributed most valuably to discussion that day and explain why. Please note that this is not a reward for sheer quantity. Instead, perhaps someone asked one question that you made you rethink an issue. Perhaps somebody brought two disparate strains together in a way that enlivened discussion. So carefully consider which of your classmates helped you engage and analyze the material.

MEDICAL HISTORY 531
Women and Health in American History
Spring 2008
Appendix II: Approaching Texts

As you read:

Decide whether the source is a primary source or a secondary source. (In general, a primary source is a text generated at the time of the event or issue or person discussed. A secondary source is a document that analyzes that event, issue, or person from a historical perspective. If the topic of discussion is tuberculosis in the early 19th century, primary sources might include medical literature, newspaper articles, journal entries, short stories, domestic health guides, and personal letters from the early 19th century. Secondary sources might include a historian's account of tuberculosis in the early 19th century that was written in the 20th century. There are cases where the differences are more fuzzy, but start from this rough distinction.

If the source is a primary source:

- a) Note the date. What else happened at the same time? Make sure you understand the chronology of the sources for any given topic.
- b) What perspective does it illuminate? Was it written by a middle-class woman facing childbirth? Was it written by a physician advising women how to cope with childbirth?
- c) What is the author's goal? Is she trying to persuade? Inform? Seduce? Scold?
- d) Who is the intended audience for the piece?
- e) Look up words and phrases you don't know.
- f) Can you identify a take-home message?

If the source is a secondary source:

- a) Figure out the author's argument. Every article has a main point. Make sure you know what it is. (Knowing the argument is different than knowing what the article is about).
- b) What kind of evidence does the author use? (Prescriptive literature, diary entries, medical journals?) Is the evidence appropriate for the argument?
- c) Is the argument persuasive? Has the author proven his or her claim?
- d) Keep track of the chronology. In other words, if the author is describing change over time, make sure you understand how, when, and why things change.
- e) Look up words and phrases you don't know.

MEDICAL HISTORY 531
Women and Health in American History
 Paper Grading Criteria
 Appendix III

Grading Criteria:

The paper will be evaluated on the specificity of its thesis, the soundness of its organization, the strength of its analysis, the effectiveness of its evidence, the originality of its ideas, and the grace of its style.

Thesis: A thesis is the reason a paper exists; it is the point you are trying to make. A thesis should not merely describe what the paper does (“This paper examines the validity of the biological understandings of gendered behaviors”). Instead, your thesis statement establishes your claim (“The efforts to link gendered behavior and biology always rely on culturally and historically specific notions of gender. The failure to recognize the culture-bound definitions of gender weakens the claims that gendered behaviors--such as playing with truck--are biologically based.”)

Organization: The organization of your paper should revolve around your thesis. Each paragraph should build an argument in support of the thesis. Consider every paragraph a mini-argument. It should have one main idea (presented in the topic sentence) and three to five sentences (or so) that clearly support the topic sentence. Each paragraph should be connected to the one above it by a transition. End with a conclusion that explains how your paper contributes to the history of the American body.

Evidence: For the critical reaction paper, your evidence will come from the course reader. For the research project, you will need to track down the evidence yourself. In both cases, I will evaluate the appropriateness of the evidence for the claims you are trying to make.

Analysis: Your paper should analyze and interpret the evidence to support your claim. Imagine for a moment a courtroom drama on TV. The gun, the barking dog, the tire tracks are all deployed by the prosecutor to support her case. But she does not merely describe the evidence; she uses it to make a point. She claims that the fingerprints on the gun, coupled with the tire tracks that match Jane Doe’s car prove that Jane murdered Hello Kitty. Or pretend you are the defense attorney who analyzes the same evidence to prove Jane is innocent. The defense attorney notes that the finger prints provided only a three-point match, and besides, Jane shoots regularly at the firing range. Further, he claims that Jane loaned her car to her friend Willy that night so he could attend a “Dance, Dance Revolution” tournament. In other words, evidence does not speak for itself; your analysis gives evidence meaning. In the same way, you must analyze your sources, you must interpret them, to make a convincing case.

Originality: A first-rate essay will not just reiterate the claims made in the readings or the ideas raised in discussion. Instead, the best essays will use the readings and discussions as the starting point to explore and create your own interpretations of a topic.

Style: The best ideas can fail to impress if packaged carelessly or imprecisely. Vague or messy prose tends to leave the reader puzzled and frustrated rather than persuaded and enlightened. Take care that your prose illuminates your ideas rather than obscures them. Take your work seriously enough to pay attention to the way it is packaged.

Some particular items to keep in mind.

Strive for clarity

If a reader must read a sentence three times to understand it, the writing hinders the idea.

Sometimes hazy prose reflects hazy thinking. Make sure you know exactly what you are trying to say before you say it.

Strive for precision

Avoid claims like “people thought,” “doctors argued,” “women dieted.” Which people, doctors, or women? All of them?

Avoid baggy sentences

Good prose is direct prose. As a result, good writers rid their sentences of all extraneous words. For example, I could advise you that if there is any way at all to get rid of extra words in your sentences that are not absolutely necessary, they should be gotten rid of if you can. Or in the words of Strunck and White, "Omit needless words."

Use active voice

Instead of saying "The study was conducted," try "Mr. Smith conducted the study." This is desirable for several reasons. 1) It often allows you to omit needless words. 2) It forces you to identify the historical actors. "It was generally believed..." is a dead give-away that you only have a vague idea who believed. 3) Active voice forces you to use punchy verbs rather than the drab and generally unhelpful form of the verb "to be." (See next point.)

Use vigorous verbs

Verbs provide the foundation of good writing. Unfortunately we often use verbs that provide no action such as forms of the verb "to be" or its helper verbs (am, is, was, were, are, be, been, being, have, has, had, do, does, did). These are perfectly fine, but try replacing them with something jazzier or omit them altogether. "She was a good student," provides basic but bland information. "She excelled in math and science," adds verve and specificity. Further, "he laughed" can usually replace "he was laughing." Finally, avoid turning perfectly good verbs into nouns. Consider the following: "The mirror *had* a *reflection* of the lake on it." "The mirror reflected the lake," is stronger.

Avoid careless stuff

Run a spell check. Check for run-on sentences and sentence fragments. Proof-read.

What do grades mean?

- A (93-100) For outstanding papers only. Thesis and argument are clear, thought-provoking, and persuasive; research is thorough, appropriate, and creative; relationships drawn between evidence and ideas are sophisticated, subtle, and/or original. The paper also connects to larger trends addressed by the course. Writing is grammatically correct and succinct. The argument flows well from point to point, without any puffery or wasted words.
- AB (88-92) For very good papers that for some reason fall short of the criteria listed above. For example, the argument may be murky in one place; information may be presented that doesn't directly or clearly contribute to the argument; writing style may be awkward here and there, or flawed by one or two consistent (if minor) grammatical errors.
- B (83-87) Your basic good grade. The paper may pursue a straightforward but not especially deep or sophisticated argument; it is okay as far as it goes, but it doesn't penetrate the material very far. It may lack enough primary research to make the argument completely persuasive. It may have a flash of brilliance that is unfulfilled, counterbalanced by minor grammatical problems, a weakness in argumentation, and/or a significant misunderstanding of events or chronology.
- BC (78-82) The paper shows some of the basics of the ideal paper, but is weakened by a lack of serious think-work, evidence gathering, or writing problems. It may make superficial connections without offering sufficient evidence to make the connections plausible or persuasive, or it may have what is in principle a good argument supported by incorrect facts or chronology. Alternatively, it may provide a fairly solid argument with minor flaws, from which the reader is repeatedly distracted by awkward or ungrammatical prose.
- C (70-77) A grade signifying some serious problems in paper design, expository writing, or primary research. It may deliver facts without a recognizable thesis or argument; it may wander away from the point; or it may be a thoughtful attempt so weakened by writing problems (grammar, punctuation, word choice) that it is difficult for the reader to understand a crucial point you are trying to make. Alternatively, it may offer an strong thesis without providing sufficient primary evidence. Also used for papers that do not ask historical questions.
- D (60-69) A marginal grade. This grade usually indicates a paper does not meet the requirements of the assignment in two or more ways: the paper does not ask an historical question, lacks an original thesis, and/or relies almost exclusively on secondary sources. There may be some evidence of reading in the secondary literature, but the paper indicates no effort at synthesis or critical engagement. Also used for essays that are just barely coherent.
- F (0-59) For unacceptable essays. An essay may be judged unacceptable if it contains plagiarism (see below); if it fails to meet three of the major requirements for the paper; if it consists primarily of content inappropriate to the themes of the course; or if the writing fails to meet standard college-level requirements of basic communication in English.

