

Don't get pregnant: Here's how



Internet

by Katie Morrison

Q: I want to start using a backup form of birth control with condoms. Any suggestions?

A: I can recommend a few things. But, the first thing that I would say is get yourself an appointment with your doctor, at home or here at the health centre on campus (which happens to be very accessible to all students). Not only does a doctor know a lot more than I do about birth control, but you should also be making sure to get yearly physicals whether you are sexually active or not, or you are over the age of 18.

Anyway, back to the question. There are many kinds of birth control available to us these days and each has its own perks. There is "the shot," which is an injection given to a woman by her doctor once every three months...that's right, once every three months. One of the perks to the shot is that you don't have to worry about remembering it everyday; one of the downsides is that in the off chance that the shot fails, you may not find out for months.

Another available option is "the implant." This is a small metal form of birth control that the doctor implants in the arm of the patient. To be honest, I have heard some very positive reviews about the implant. However, there has been some concern in the medical

world about future fertility issues that may be connected to the implant, but because of the newness of this form of birth control, we may not be aware of them yet.

"The patch" is also an option available to women today. The patch is relatively new on the market, but many people are now faithful users. The patch is changed once a week and then left off for one week to allow for the menstrual cycle.

And last, but not least...the pill." The pill has been available to women for many years now, and as it seems, it has a very large fan base. Many people have been happy with the pill for years; it's easy to use, and the side effects are relatively low, as long as you can remember to take it at about the same time every day.

There are tons of methods of birth control on the market today and the best thing I can suggest is talking to a professional about the method that is best for you. If you want more info before going, there are some books and flip charts that compare methods available in the Sexuality Centre.

Q: Everyone talks about proper condom use... Could you explain exactly what that is?

A: I sure can. It's a really great question that a lot of people fail to ask, but that can result in condom malfunctions, which,

besides being scary, can lead to some negative repercussions (STIs or HIV being among them). Latex or polyurethane condoms are the most effective, but if you have allergies, there are alternatives available (though they may not be as effective against STIs).

After checking the expiry date on the condoms, open the wrapper by pinching the condom to one side and tearing the package. This helps to ensure the condom doesn't get ripped. Either partner can put the condom on, and believe it or not, there are some pretty sexy ways it can be done. Make sure to pinch the tip of the condom and unroll the condom down the shaft of a fully erect penis. If you don't pinch the tip, it may cause the condom to burst on ejaculation.

For extra fun, feel free to use copious amounts of water-based lube to add to the sensation. DO NOT use oil-based products like Vaseline because they can deteriorate the condom, causing it to break. After the orgasm, make sure that the penis is pulled out while still semi-hard to ensure that the condom won't slip off the penis, spilling its contents. Throw away the condom. Make sure that you only use a condom once; reuse is not possible. Now that you have these simple instructions... Enjoy! If you have any more questions, stop by the Sexuality Centre (SUB room 203), where any of the volunteers would be happy to give you more information, or e-mail sexuality@unb.ca.

MacLean, however, said that even when he is given accommodation, there are still myths that need to be dispelled when it comes to marijuana, or what he wants to distinguish as "marihuana," as it is called under Health Canada regulations and academic studies.

"It's a stigmatizing circumstance. And I would hope that my colleagues recognize it for what it is -- a medical condition, however unusual," he said.

"I don't want people assuming that

because I have a medical condition that I can't perform my duties properly. It's completely wrong; it's completely unfair; it's completely contrary to the Human Rights Code of Ontario and the Charter of Rights and Freedoms."

MacLean, who has a PhD in sociology, has been teaching for almost 25 years. He currently lists "recent developments in the decriminalization of cannabis for medical use" as one of his many areas of substantive research interests.

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"I have strength in them... Imagine for someone who doesn't have the strength - how are you going to open the door? Just think about it. Your wheelchair will roll away while you open the door. You have to hold the chair in place while you're pushing the door open. This is what people don't think about."

Jane Fritz, Vice-President Academic for UNB, is also head of the UNB Accessibility Advisory Committee, which was established in May of 2005. She says that the University of New Brunswick is working towards the changes it needs through a proposed 10-year plan.

Currently, she says, the committee is working to address issues at hand that are identified every day. With the help of an accessibility audit that analyzed the entirety of UNB's accessibility issues a few years ago, the committee is working to make the campus more accessible. One of these issues is that of inaccessible doors, as mentioned by Lorey.

For instance, she says, "we added quite a lot of automatic doors, and it's become obvious that they're good for people with more than just mobility issues, such as for kids in strollers and delivery people."

Another recent attempt at working towards greater accessibility on campus was the addition of special accessible desks in several classrooms across campus. There was quite a strange reaction to that, though.

"They've been stolen," says Fritz. This leads to the unfortunate fact that apparently at UNB, "we have issues around people actually making things worse."

Aside from such adverse issues, Fritz says that the committee is still working towards doing whatever they can to make things better for students.

"People are starting to point out things to make life easier that aren't always huge," she says. One example she gives of that is "improving the accessories in the wheelchair accessible washrooms, so that everything you need to reach is actually at a lower level - like hooks."

The committee is also doing their best to get the elevator access needed in order to provide disabled students access to buildings like Carleton Hall, Old Head Hall and the Forestry Building. Though newer buildings, such as the new residence, have elevator access (and in this case, even special accessibility suites), many of UNB's older buildings suffer a lack of similar accessibility. Even the Old Arts Building, where Fritz's own office is located, is very difficult to access.

Old Head Hall is currently seeing the addition of its elevator now, which, says Fritz, "is actually an elevator that provides access to upper buildings that weren't accessible before."

The design work is currently being done on the elevator that is meant to jointly cover Carleton and Tilley.

"It's two different buildings that aren't

at the same level. You always have to climb a few stairs... It's got to have something like seven stops. They're very complex, and that's unfortunately why they're so expensive."

One issue that has arisen with the idea of elevator installation is the fact that the installation will likely mean one will not be able to travel between the two buildings indoors during the construction.

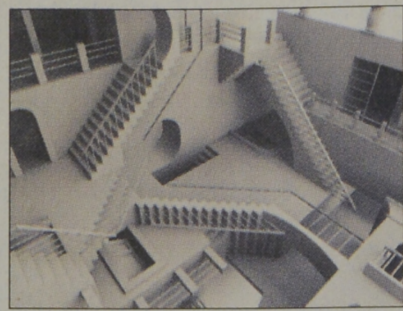
As well, says Fritz, "it disrupts offices nearby and classrooms nearby. There's a lot of scheduling to be done. It will undoubtedly impact classes next fall... We will work hard to minimize impact on faculty, staff and students by rescheduling classrooms."

Diana Austin is a professor of English whose office is also in Carleton Hall. Diagnosed 12 years ago with multiple sclerosis, she has a very difficult time going up and down stairs. As often as she can, she will stay in a classroom after teaching has finished and wait for the halls to clear out before she makes an attempt to confront the stairs to her office.

She initially declined to tell people about her affliction unless they needed to know.

"I just coped," she says.

A few months after the accessibility committee was created, Austin wrote a letter to the president with a copy to Fritz



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about her concerns with accessibility issues, and they eventually spoke. One issue that came up was that an elevator should go into Carleton as early as the next summer.

"The audit says that in the summer of 2006, a Carleton Hall elevator was to go in as the number one priority for UNB, but instead they put it down in Head Hall. They have their own audit and they're not following it."

However, according to Fritz, when the report of the audit was released, Head Hall was actually omitted, regardless of the accessibility issues therein, and it was decided to work on that foremost.

Fritz says, though, that for the Carleton/Tilley elevator, "we're hoping to have the money in place as soon as classes end in April."

The money is the issue that Austin is worried about.

She believes Jane Fritz is more than willing to tackle the issues, but the funding isn't very adequate.

"Jane Fritz is a huge advocate, she just isn't given the money. She's really sympathetic, but if she's not given the money - she maybe gets \$100,000 a year, maybe \$200,000 - how can they possibly make that go very far?"

"The money is there," says Austin, "it just depends what you choose to spend it on."

"They say, 'we'd like to do it, but we can't afford it.' Is it 'can't', or is it 'won't'? I believe it's 'won't', because they won't make it their number one priority."

UNB managed to rack up over \$100 million through the Forging Our Futures campaign, and, according to Austin, they have \$5 or \$6 million that hasn't been designated.

"That \$5 or 6 million would put elevators and other needed changes into all the buildings that are now physically inaccessible - and still leave a big chunk of change," she says.

"That fundraising campaign ran for a few years, years coinciding with the well known difficulties of my wheelchair-bound colleague upstairs in Carleton Hall, and so the university could even have chosen to make physical accessibility one of the specific projects they were raising funds for."

"I'm sure many wealthy, older alumni would have been very sympathetic to such a cause, because of themselves perhaps having to face such issues, and other alumni of any age might well have had friends and family with accessibility issues and so might also have been delighted to be asked to chip in for such a useful project."

One interesting issue that came up was that the Harriet Irving Library's new wheelchair-accessible ramp was considered a major step forward for the accessibility committee, on a three-part documentary on CBC that featured both Austin and Lorey. What was not mentioned was that this wasn't put forward by UNB, but was in fact funded as a project helmed by UNB's Grad Class of 2006.

What makes Austin angry is the effect that lack of accessibility has on the students at large.

"Every year, I see a different group of students trying to manage the staircases here with legs in casts or limping for whatever reasons, and one of my current students has told me of a friend dropping out because of these stairs."

"That doesn't even begin to include all the students one never happens to see or hear about, the ones who just quietly drop their classes without ever complaining because they don't want to make a fuss."

This is also an issue or worry to Lorey, who encounters many disabled young people in his daily life.

"When I go up to the Stan Cassidy Centre to do my workout," he says, "all of a sudden you see 50-60 people in wheelchairs with all sorts of disabilities, and you wonder, 'where are you guys during the week?'"

"It's because so many other places are inaccessible, people don't go out. But you see that in Halifax. You see people wheeling by you."

For more information about the members and actions of the UNB Fredericton Accessibility Advisory Committee, please check out the website at <http://www.unb.ca/vp/learn/access/>.

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After CBC News made an Oct. 19 report that exposed MacLean's illness and treatment, he felt that there was no longer any reason for him to hide, and came to campus only to smoke pot in the "peripheries" of university grounds.

Two weeks later, after discussions between the union, his employer, labour relations and facilities managements, MacLean was notified that a room was available for him.

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