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RHM Author Interview: Dr. Lisa Meloncon, RHM Editor, interviews Dr. Abby Dubisar and Sara Davis on their persuasion brief, "Communicating Elective Sterilization: A Feminist Perspective"

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Dr. Lisa Meloncon, RHM Editor, interviews Dr. Abby Dubisar and Sara Davis on their persuasion brief, "Communicating Elective Sterilization: A Feminist Perspective"

LM: Lisa Meloncon

SD: Sara Davis

AD: Abby Dubisar

- LM: [00:02](#) Thank you so much for joining us today for the rhetoric of health and medicine kind of author interviews where we're trying to get behind the scenes, look at some of the work that we're publishing. I'm with Abby Dubisar and Sara Davis today, and they have a forthcoming piece, a persuasion brief that is talking about sterilization and women's rights. And so we're just going to jump right in with the first question. If you could just give us some background and talk through how this project started and what you kind of got interested in it.
- SD: [00:32](#) I was taking Dr Dubisar's gender communication class in the fall of 2017, and part of our final project that we had to create where the class was, um, a PK presentation. I'm not sure how to actually play the Pecha Kucha, where students create slides and there are times, yes. Yeah. So she encouraged us to find a topic that we didn't elaborate on in class, and I thought of a couple of ideas, and when I went to speak to her about my ideas, she said yes to sterilization. That one sounds great. So, um, what kind of her guidance, I was able to, I set up my project. I went to doctors' offices, took like pamphlets, I spoke to, um, the doctor that I'd, um, personally seen. I guess the reason I was interested in this subject is because I am personally sterilized, and when I went through that whole process, it was interesting to me that it was difficult.
- SD: [01:35](#) Um, I met with, or I was met with questions, um, "Are you sure you want to do this?" "Is this something that you've thought about?" "Have you considered other options?" And I had to wait additional time that, um, maybe a man wouldn't have to wait. My husband had, um, thought about being sterilized as well, but he backed down and that's why I ended up doing it. But his experience was completely different. He was able to call up the doctor, make the appointment, and he could've had it done the next day, and there was nothing else he needed to do. So I expected that same experience for myself, and that's not what I got. So it was an opportunity for me to kind of look into why

that happened. And in doing that, I was able to see that there's a large community out there: women who are interested in this subject who are facing kind of similar situations that I did, and they're wanting to talk about it. So that's how it got started. It started in this class as a research project and then we kind of kept talking about it, and, um Dr. Dubisar actually approached me later, and said, "I think we should work together on this. There is an opportunity for a grant that we can apply for, are you interested?" And I said, "Yes." So I probably would not have pursued this further had she not presented this to me as...

- LM: [03:00](#) So, Abby, what was just so intriguing? Or, or what was the moment where you just thought, "This needed to be pursued more? "
- LM: [03:07](#) What led to that?
- AD: [03:09](#) Because the topic that Sara pursued is an issue that rhetoric folks really need to know about.
- LM: [03:17](#) I agree.
- AD: [03:17](#) And so when I teach this course, which it's cross listed between speech comm and women's and gender studies, and on the first day of class when students are introducing themselves to each other, I ask them to think of a time in their life or in a friend's life or something they've read when gender, culture, and communication all interlink together. And we sort of keep track of these three issues and the orbits around them. And that was, this was Sara's example, and I just was so struck by this example. First of all, it has really high stakes, um, also is about communication at its core, and you know, I, like, Sara, is amazing in many ways, but the bravery and honesty on the first day of a class, when you were with 30 people you've never met and your professor, to say like, "I tried to, you know, to get this procedure done to my body, and I, you know, faced all of these challenges." I think it surprised students and was very dynamic, and, um, so that really, she really hit the ground running on, "I care about this topic, and Sara's an English Ed major, and she starts student teaching tomorrow.
- AD: [04:36](#) So, sort of thinking about the ways we communicate about issues in an array of other ways, she's very invested in addressing taboo topics. And again, like, that's what I see as the role of my teaching in providing, you know, classrooms can never truly be quote, unquote "safe spaces" or totally student-centered in the ways that many of our classrooms work these days, but by saying, like, "What are the issues that are

important to students that research has been done about? And "Where are there gaps in research that we can do more with?" Um, and then, too, the just very persuasive element and Sara's final presentation about having a personal experience, um, talking to people we know about this. I myself, like Sara, talked to my healthcare provider who I know identifies as a feminist, is trained as a midwife. And as soon as I brought this issue up to her, she said, "Well, some women may think they know, but they... You know, there's just..." And so, that has just struck me so dynamically.

AD:

[05:40](#)

And this person also sent us some resources, like one of the communication bulletins about elective sterilization, and she's very eager to read our article once it's finished. So it's definitely increased dialogue between me and my friends, me and my colleagues, um, and me, my own health care provider, which is the exact purpose of why I want to do this work. Um, so yeah, I really, I think for me, being invested in undergraduate research, and I'm on the four C's board for undergraduate research, and the board of young scholars and writing, and working with undergraduate writers in those capacities, I think it's important for people like me to be, be very open and honest with undergraduate writers about how much work it takes to perform academic research and publish. And, "Is that really worth it to you?" You know, if you're not going to pursue, I think depending on what your future pursuits are, that sort of time commitments,

AD:

[06:38](#)

It's something to think about. So, and I've been very vocal on my own campus about undergraduate research and the humanities. Another project Sara and I could do is sort of the way undergraduate research here is imagined as a student working in a lab on a professor's project. And, exactly, just praise for the award we got. Even, um, the way we had to persuade power brokers about how much time writing takes research takes as opposed to being able to clock in and out of the lab. Um, so I, so this is very important to me as someone who wants to increase visibility of humanities scholarship with undergrads. So all of these, so having someone who's a very committed to students, um, an excellent writer, a passion for research, and then this grant possibility coming together, and Sara has had some other opportunities to talk about this research, which maybe we'll get into if it's interesting to you. Um, but, sort of all the different ways that she's been able to talk about her work to different audiences is what makes undergraduate research a high impact practice. And that's what I...

- LM: [07:45](#) And, and I love the fact that you've connected it to their broader educational goals, the high impact practice in the focus on humanities, which is so, so key today. Oh my God, it's so key. And it, and one of the reasons I wanted to do this interview, oftentimes our assistant editors do them, which is great because I don't have the time to do all of them, but I wanted to do this one because, um, when I read your piece, when you very first submitted it, it's so accessible, the language of it, which oftentimes, we may assign research pieces in our courses, but they're really hard for the students to get through. This one is so well-written and so straightforward, and it was like, okay, this is something I can use in my class. And then, um, we have a graduate student who works from the Journal, and so she reads everything and helps us with copyediting. And when she got done copyediting your piece, she said, "This is mortifying, this really happens?" And so, it all feeds together into, these sort of, these ideas. I know I want to use it, but how would you use it if you were teaching a class, a different class than the one that you took with Dr Dubisar, Sara, how would you tell somebody to, like, as a, from a student's perspective, what would you want to work with? How would you want to work with this piece? Does that make sense?
- SD: [09:14](#) Oh yeah. The student not as a teacher, right?
- LM: [09:16](#) Well, you can do both, because you're an, an, you're about to launch into a teaching career, so you can merge those things together if you want. I just really would love to hear how you would use it.
- SD: [09:28](#) Well, as a, as a student, if I had received this article and somebody else had written it when I was taking Dr Dubisar's class, I would have immediately related to it. And I think that's important. Um, one thing that I found doing the research is that there are multitudes, again, women out there who are considering sterilization, and they're between the ages of 18 and 30, which is the age when most physicians will say, "Absolutely no." And so, and even in, um, other conversations here on campus with young women, and I was able to present as a feminist Friday discussion, a couple of the women came up to me afterwards, and they were clearly younger, and they said, "This is something that I've wanted to do. And I've talked to my doctor about it, and I've been told, 'No'". So, I think the relate-ability of the piece is excellent for a classroom setting about gender and communication just because there's a lot more people out there thinking about it than we realize, because I think it is such a taboo subject,

SD: [10:29](#) Not too many people are openly speaking about it. So in that sense, I think it's excellent for a classroom, and also to get the conversation started, um, to let young men and young women know that this is something that they could pursue if they want, that there are other options out there for them besides having children. And that's not something that's integral to your existence. And we want to let people know that this is an option for them and to kind of help them navigate that communication that they might have with a healthcare provider, so that they go in prepared and knowing what questions they might be asked, and having answers ready that will help them achieve the goal that they set out to achieve. And then, um, from a communications standpoint, it's an excellent subject to study when we're talking about, um, rhetoric and the way information is presented in a way that, um, can, is biased or that is unbiased.

SD: [11:30](#) So it's a good way for students to study actual communication and rhetoric of communication. So, in a medical way and the communications way, I think it's an excellent case to study. And if I were to use it in a future classroom, at maybe the secondary level, who knows? Maybe I'll go on to teach college one day. We'll see what happens. But, if I were to use it in a high school setting, which, like you said, the language is very accessible, I think we could definitely use it in a secondary setting. And I would use it for the same purpose: to address communication, to address gender equality, to address rhetoric. And it probably would need to be 11th to 12th grade, when they're more prepared to, um, read something of this magnitude. And it would also be, I think, empowering for young women to read, um, effective for young men to read. So I think it's, it's beneficial to both genders.

LM: [12:28](#) Yeah. That raises kind of a followup question for either one of you is, it is a taboo subject, and that is always hard to bring up in classrooms. And you know, Abby and I are more experienced teachers, but we have so many folks in higher education who are new or aren't experienced in dealing with, "How do you bring up a taboo subject?" So what would you suggest as an approach to newer teachers, or teachers who are just starting to move into these areas that are more difficult to teach? How would you start that?

SD: [13:02](#) I don't think kids are delicate and some people think they are.

LM: [13:06](#) Mmm. Excellent.

SD: [13:08](#) They shy away from taboo subjects, and I see myself getting into trouble teaching in more conservative areas like Iowa

because I, I don't see a problem with this subject. For me, it's not taboo for me. This is something that needs to be discussed. And the more taboo it is in this context, the more I think people should hear about it. And when somebody puts up a wall, or says, "I don't want to hear this," I say, "Well, obviously you need to hear it." So I think for me, I would just dive right in, but I can understand somebody else might be more sensitive, or they might be more apprehensive about sharing something that's taboo. So maybe starting um, small and introducing things like feminist perspective or introducing the idea of discussing rhetoric, and when we're looking at communication, these are some of the things we're going to look at. So maybe come at it in a softer way and then introduce the more difficult subjects and say, "You know what, at some of these things are taboo, some of them might be offensive, but we're looking at ideas. We're not looking at people necessarily, we're not making any attacks, any assumptions. We're looking at ideas, or we're going to add value with these ideas.

LM: [14:26](#)

Well that was great! Abby's going "I'm so proud!"

SD: [14:33](#)

Sara too, and, again, it's like class focused on gender, so that already sets the scene. Not that I haven't gotten teaching evaluations that say, "this has talked about women's issues too much," even though it's a women's and gender studies class, but that's another topics. So, um, so we watched the, documentary The Purity Myth, which summarizes Jessica Valenti's book by the same topic. So, one of my pedagogical strategies is having someone external to the class, an external expert, bring in, like, transition our discussions from, you know, "what are gender roles," and "how do those relate to appearance." So what Valenti does is she looks at the cultural construction of virginity, um, points out how it has no medical definition, how it's a very, very powerful cultural, ideological, um, myth that exists in various systems. And within, 40 or 50 minutes, she connects that to um, abstinence-only education and our tax dollars being spent to basically lie to students in public school. And so, for many of Sara's classmates, this is very shocking. And some of them have literally had the same abstinence educators that are featured in the documentary come to their schools. So, and, so, this leads to an assignment, once they've learned about different theories of gender and communication and they've learned about how gender is taught in schools,

AD: [16:06](#)

And we've watched this film, they are tasked in class with designing an ideal sex ed curriculum. And so, this just generates a lot of really interesting ideas of sort of, you know, how do we

ethically educate students about these issues? What are some of the creative ideas? And even in Sara's own class, like there was one student who was "out" to the class, identified as queer, and talked about, like, sex ed should address how to, you know, get pregnant if you don't have access to sperm, like, those sorts of issues, too. So the students always take it in directions that I can't necessarily predict. But this issue of what role does the government play in our access to health care always comes up because, um, Valenti gets into, like, the cervical cancer drug that was blocked because of, you know, conservative interests in promiscuity and purity.

AD: [17:09](#) So I think if, you know, she's not a perfect writer, as none of us are, and it's not a perfect book or film, but it does such a good job of connecting these first systems that show students how gender ideologies operate in these really powerful ways that block health care from us in the United States, even though many students in the class may think we have access to the healthcare we need to thrive in the United States. So that's another, um, context, just to give one example of using a sort of text that, within an 80 minute class period, can really push on our thinking about how power, communication and healthcare all, are all interlinked in ways that we may not even understand or fully appreciate on a day-to-day basis. So, um, so yeah, that's just one example of how I, ... I think you could use that in a variety of different classes, especially because they talk about sex ed and schooling and since gender and school are just so, you know

LM: [18:15](#) Oh absolutely. And I didn't know that there was a, a documentary that went with that book, so to speak. That's good to know, because I've read the book.

AD: [18:27](#) Right, it's super helpful as a teacher, you know, I try to be very aware of how much my students are spending on books, and to be able to get these very rich arguments in a documentary, and it's available through, like, the media commons, a full access database that our university uses, and so they can watch it on their own as well if they miss class. Just thinking about accessibility, um, although I do think there's value in showing such films in class together, but, um, yeah, I really recommend it.

LM: [18:59](#) Excellent. See, this is why I asked this question. It was really selfish. It was all about me, but these are important resources that the RHM community is trying to think through, is to, how, how can we make sure that we take all this stuff, great stuff that we're doing and enhance our teaching? And, and, Abby, as

you said, this notion of undergraduate research, so many of us are involved in that. It's like, how can we, how can we make that even better? Which kind of transfers, then, to the next question: Is, so the two of you, I think in some ways it was serendipity that you all came together, but could you think through and potentially offer some suggestions on how you can nurture this sort of collaboration that others can follow, or try to implement?

SD: [19:49](#) Well, one thing I think is unique about our situation is that I'm a nontraditional student, so I connected more with my professors than I did with my peers, because I'm 10 plus years older than most of my peers. So, I think, in that sense, it was a lot easier for me to work with Dr. Dubisar, and then maybe some of my younger peers might feel like, she's, I came to class the first day, and I was ready to just share everything that's happened to me. I've worked in a medical office for six years as a medical assistant. It was all very familiar to me, and I have no problem sharing my life story with people. So I think that was a positive for me. Um, but I also think that I might not have pursued this research outside of class had she not approached me and said, "I think we should do something more." So, when professors are interested in this kind of work with

SD: [20:48](#) their students, and they see something that can turn into something more, if they approach their students and offer their mentorship, I think that's very helpful, and that kind of helps foster these types of relationships.

AD: [21:06](#) For me, I think that, and I have done this in a different class, I teach a pop culture analysis class where I teach them seven forms of rhetorical criticism of pop culture. And I had nine students who had really interesting work in feminist criticism. So six of us, six of them elected to work with me, and I, we published in computers and composition. So my answer to this question for faculty is, assign projects that your colleagues in your field want to, um, I'm trying to think of the best very I can think of here, learn from. And so our students come with all this incredible knowledge and put the rhetorical tools to use that we teach them, and sort of thinking about, you know, keep, for faculty, keeping an awareness open constantly of, you know, "people in my field could really learn from Sara and what she's doing.

AD: [22:09](#) How can I amplify this work to broader audiences so that my colleagues in the field can learn from this person who's doing such smart work?" Which, in a perfect world, legitimizes classroom assignments, which can be very artificial.

- LM: [22:27](#) Yes.
- AD: [22:27](#) So for some, for many of my students, the, these our academic performances that are artificial to earn their academic credits to get their degree, but for other students, and something I'm always trying to be aware of as a teacher is, "Where all these different ways that we can look for other audiences who need to learn from our students?" And, for me, that comes in with assignment design. And so, even if no one in my field necessarily needs to see like, Sara's Pecha Kucha presentation, the way that served the rhetorical purpose in the classroom it needed to serve, that she did outside research about gender communication, could perform rhetorically in class to show her classmates,
- AD: [23:10](#) I mean, that, she did that, um, serves that purpose. But then there's all these other ways that that can be revised, which I think, I don't want to speak for Sara, but what she's done with this work, like leading the discussion at the women's Center for feminist Friday, she delivered a poster presentation at the undergraduate research symposium. We don't have funding for her to present at an academic conference, but we could try to get some, we haven't figured that part out yet. She's also written a personal essay. And so thinking about different genres, like, "What does RHM need to know," and "What in a personal essay can she tell people about her experience?"
- SD: [23:46](#) You know, that's why I love being in rhetoric, because you can teach students, like, audiences and what they need to know. So, yeah, the folks that feminists Friday and the questions they asked Sara were very different from the ones that she got at the undergraduate research symposium, which was, she was the only humanities student there, right? Out of over a hundred students. Right? So, um, so yeah, I don't know. I could go on, but that's...
- LM: [24:14](#) So, the two of you got a grant. Could you talk just a moment about that and the importance of those sorts of resources?
- SD: [24:24](#) I never heard of undergraduate research to this magnitude before. Um, my husband was working on his PhD, and that's why we came to Iowa State, so I knew there was tons of funding out there for Master's and PhD and publishing in that venue, but I never heard of undergraduates actually completing research and being published. And so that was exciting for me, especially since I am an older student and I feel like, maturity-wise, that's something that is fun for me. It's interesting to me, and I don't have the opportunity right now to pursue my

master's degree. So being able to conduct research, um, kind of original research and collaborate with a mentor has been an awesome experience for me. And I think this was the first year of this grant? So this is, we're kind of the inaugural class of this grant. Um, it was, it hadn't been offered before, and I think they're hoping to have even more students, um, apply and make use of this grant and starting, um, in the spring and the fall.

SD: [25:31](#) So Iowa State's doing a good job at looking for opportunities for their undergraduate students to participate in authentic research that is their own and not necessarily just, like, "I'm working in a lab." And I think humanities research is highly or dramatically different than other sciences because we aren't working in a lab or working, um, within literature, and we're writing and we're researching, um, in person with people, so it's very different. And I don't think there's a lot of emphasis placed on research within the humanities. We don't really see a lot of funding that's available for students like myself. So, it's nice to have these opportunities where our research is recognized, and I think that's going to be helpful for students in the future who also wants to pursue research.

LM: [26:22](#) I like that idea of recognition, because oftentimes when we start thinking about what resources do you need? Or what, what kind of infrastructure do you need to pursue these sorts of things? Sometimes just being acknowledged for the great work, and having somebody say, "Way to go!" It's vastly important to keep it going and then build that kind of culture. That's such a smart answer.

AD: [26:48](#) Yeah. We should talk about, um, so with the award, and even the words we use about the money, um, like grant versus award versus scholarship, this was something we had to figure out. What was your hourly wage, was it like \$12 an hour. ?

SD: [27:03](#) Yeah.

New Speaker: [27:03](#) So that's another thing like institutions, if they want to invest in undergraduate research, need to pay them a competitive wage. So it was worth, it was worth it to Sara to do this versus getting a different summer job. And so sort of thinking about, and for me, like getting \$500 of professional development money, that definitely helped me, right? And so to acknowledge that mentoring, while it is extremely rewarding, and I would definitely, you know, I continue to do it in many different contexts, to acknowledge that it is work and takes time. But even your, the way you started off with talking about the

accessibility of our writing, I mean in a very selfish way, I love working with Sara and undergraduate researchers because it makes me think about my writing in a new way, of just a collaborator who is new enough to, like, she's read many, many journal articles that are published by academic journals,

AD: [28:00](#) But that writing of, how do we make this clear to each other, to our readers, is so selfishly valuable to me to just help me, um, make sure like this is, I'm an over-introduced. I have all these writing problems that, working with someone like Sara helps me deal with even more. So, yeah, I think that's something else that's, that institutions need to think through is, and Sara did keep a time sheet and we did, you know, even thinking about writing and time and research and time, um, humanities research can be very messy because the lab looks different and so, you know, even thinking about, Does she have to be in a specific location while she's doing this work? Even though we have all the, all this access to materials and things like that, was just a really interesting conversation, you know, ongoing conversations that we had to have, and, recently,

AD: [30:51](#) Sara spoke with, um, the advisory board for our college, and I don't know who any of these people are a faculty member. I would probably never meet these folks. But among the student panelists who'd all received awards like Sara's, even though I think all of the half dozen or so are pursuing publication in some way, Sara was the only student who's the first author. And, to me, that is just again, so significant that we must legitimize what we value in academic publishing contexts with undergraduate researchers, if we're really going to say "we're doing this, and undergraduate perspectives, their research is so important," and, actually one of the advisory board members, so this, a member of the community that's invested in liberal arts and sciences in some way, literally asked this question: "Were you actually pursuing your own research, or did the faculty member you were working with tell you your findings?" And I just wanted to stand up and thank this person as they were asking it, because that, I was really so just pleased that my dean got to hear that question, because that's the sort of question I'm asking, too,

AD: [30:05](#) um, when these issues come up, and when I'm trying to be more vocal about the importance of supporting the humanities in these ways, and I'm very, like, there is definitely power from the margins, and I'm very invested in this. At a research university that's known for ag and tech work, but we're also a land grant institution invested in the common good for all people. That is like, that includes elective sterilization, so, and

so being able to hear other people sort of buttress what I've been working on, too, was just, and that's all possible because Sara was willing to talk to this panel of folks. So, or this group of folks. So that's another audience that she got to talk to you. Because to the best of my knowledge, this award is funded by donors. Um, so

- LM: [30:52](#) Wow, that's great.
- AD: [30:54](#) And this is also, like, these sorts of stories of undergraduates doing research are very persuasive to donors. And so the more, the greater visibility we can bring to those, so that audience, that was most, where this topic would be the most taboo, as far as we know, because we just don't know them as well as some of the other audiences she's spoken to. So that was really interesting.
- LM: [31:19](#) But it also goes to to show the power of what rhetoric is, the, the everydayness of it. And the fact that in a women and gender studies course, which had as an interdiscipline has received all sorts of flack on all different sorts of levels, but to show that there is a very practical and applied and important takeaway from a course on gender and communication: The power of rhetoric! My heart's all full!
- AD: [31:51](#) And it fulfills a diversity requirement. So there are majors from all across the university, there are future accountants in there, computer scientists. I had a software engineer most recently, too. Um, but yeah, so that's another thing, too. Like, I love this idea of "applied women's and gender studies" and applied, you know, just say that, you know, women deserve to, you know, within a set of constraints, get what they need for their bodies, is "diversity" or is like something extra, you know, it's something that needs discussion in these classes, too. So that's something we talk about as well. Um, yeah, it's a really great course.
- LM: [32:31](#) So the final question, and I'm going to word it in kind of two different ways for each of you. So, Sara, if you were standing in front of a room of a hundred OBGyn doctors, what is the one thing, based on your research, you want them to know?
- SD: [32:50](#) Your personal bias does not have a place in your office.
- LM: [32:56](#) Wow. That's good.
- SD: [32:59](#) A takaway from this is that, um, I worked for an OBGyn, um, and so I have a close and personal experience with some of this

position, patient discourse, and I made phone calls to planned parenthood, and I set patients up with various doctors. Um, I set up elective sterilizations with a general surgeon. You know, I've, I've done things like that for patients. And so I just, having been in that environment, and being on both sides now, I, I want doctors to really understand that, yes, They may have their ideas. Yes, they may feel like they don't want this to happen, but if they are trained to do it, and they are offering this service, I don't think they have a right to turn someone down because they think that that person might change their mind in the future. I don't think they should be projecting their feelings on their patients. And yes, you have to address many different things when you're talking to a patient and evaluating them for surgery because surgery comes with risks. And we're not saying that this is a surgery without possible complications and possible risks, but any surgery comes with risk. You should, there's just is a lot surrounding this subject.

- LM: [34:21](#) It goes back to the idea of taboo and stigma, and, I, and I, yeah, and the cultural notion that we're supposed to have children, no matter what, and, and we don't have to. So, that was the other thing that I was really drawn to this piece about, because I do not have children, and that's a story for another day, but it's also this ongoing sort of thing. It's like, "Why do you no have children?" "Fuck off!" So, I love that answer. Um, for Abby, I would just shift the question just a little bit. If you were talking to her room of rhetoricians who have, um, decided they're going to try to do projects kind of like this with their students, um, and you had this as an example text, what would be the one thing that you really want them to know?
- AD: [35:15](#) I think it would be to see your undergraduate students as potential collaborators, which sounds really simple, but try to talk through the constraints that prevent faculty from seeing their undergraduate students as potential collaborators. But I think sort of the
- AD: [35:38](#) piece is a great model. So what we said initially, I mean the fact that your journal exists is a huge gift to us, and I know you do so much work on it, so we're very, very grateful, because, without your journal, I'm not sure what we would've done. Like, you made it possible. So thank you.
- LM: [35:54](#) Yes, you are very welcome.
- AD: [35:57](#) So, being able to say to Sara, you know, "I know why folks in rhetoric need to know about your project. You're the experts on the arguments that need to be made about this issue." And

thinking through the connections between expertise in rhetoric and expertise in a different topic, and how those can connect with our students really well, and then I could break down the article looking at how collaboration is possible. Because I think, for some faculty, if they don't understand their undergraduate students as potential collaborators, they might just think it's too much work to teach someone, mentor someone through the process of academic publishing.

AD: [36:39](#) They might have their own insecurities about writing and research as well. Um, their institution may not value collaboration with students. So there are these infrastructural issues that need to be considered as well. So, even like talking with your department chair about such issues might be part of it, too. But I think our piece serves as a model for seeing how the evolution from a classroom assignment. To a student's more expanded research on that classroom assignment, to something your field needs to know about, it could be charted in a really interesting visual way that attends to how our collaboration worked as that evolved. Um, ...

LM: [37:19](#) That's so lovely. It really is. I'm, I'm sort of, it's a new year. I'm feeling invigorated after this conversation, I have, you know, my hope has been restored in many things, so I'm so thankful for your time.

Appendices from Dr. Abby Dubisar and Sara Davis for their persuasion brief, “Communicating Elective Sterilization: A Feminist Perspective”

Appendix A: Advice for OBGYNs

1. Rethink risk: When the topic of TL arises, many bring up its status as risky. Contextualize such risk in comparison to the conditions TL prevents. Consider the following example:

A female patient approaches her physician and confides in them a desire to become pregnant. The patient then requests information about becoming pregnant, and the physician hands her a patient education pamphlet. The physician details the various risks associated with pregnancy, and the potential long-term complications that may arise during pregnancy, childbirth, and childrearing. The physician then proceeds to offer alternatives to the patient (have you considered a new career? or perhaps getting a dog?) as a way to help the patient understand that pregnancy is not her only option to have a fulfilling life (for example: you may regret your choice to have children later, and it cannot be reversed).

This may sound far-fetched, but consider that physicians essentially follow the same rhetorical pattern when counseling patients about sterilization. It is also worth noting that the United States has the highest maternal mortality rate of the developed world (24 per 100,00 live births) (Martin, 2017), and the CDC indicates that at least 60% of these deaths are preventable (MacDorman et al., 2016). These are staggering statistics for a society that places so much value on the role of motherhood. One such example of this elevated value, the perceived “angel mother,” is a mother of five in Utah who died in childbirth, and was heralded as a “selfless” woman who was a “blessing” to her children (Iyamba, 2013). Further, it can be difficult for women to refuse the role of mother, even if they have previous children, when physicians impose their own personal ideologies on women seeking sterilization. One example was recently highlighted by a viral Twitter thread in which a woman shared the story of her own mother’s experience asking for TL and her physician responding by asking her to consider her husband’s feelings (Strangelove, 2018).

While writing this brief we could not identify an article published in a medical journal that compared the risk of permanent sterilization to pregnancy and childbirth. We welcome such a study.

2. Review and follow the ACOG guidelines, committee opinion number 695 (2017), on the sterilization of women. Make it available to your staff and patients. Additionally, the 13-page ACOG Practice Bulletin 133 (2013b) can assuage your concern about risk. Page 395 includes the question, “How Safe is Laparoscopic Sterilization?” The answer reads: “Tubal occlusion via laparoscopy is a safe and effective method of permanent contraception. Overall complication rates are low, and procedure-related death is a rare event.”

3. Resist suggesting that women speak to their husbands about getting a vasectomy as an alternative to TL. Do not make assumptions about a patient's relationship status, interest in discussing sterilization with her partners, and other non-medical factors. Such suggestions and assumptions are paternalistic, dismissive, and also violate the patient's privacy since she may not want her husband or other partners to know that she is requesting a TL. Such suggestions also assume the requesting patient is monogamous.
4. Normalize elective sterilization when patients ask for it. Position yourself simply as an informant rather than counselors guided by "hypothetical future feelings." For example, when a patient approaches you requesting information about sterilization, you could respond by focusing on these aspects:
 - a. it is a permanent form of contraception,
 - b. it is performed by these methods,
 - c. these are the risks with surgery,
 - d. what other questions can I answer?

With this sequence you would leave out assertions of regret or uncertainty as well as alternative methods of contraception, allowing the patient to inquire about them if she desires. We agree that it is your prerogative to perform a non-emergent elective procedure as you find it appropriate, but we contend that personal biases have no place within physician and patient discourse.

Appendix B: Advice to Individuals Seeking Sterilization

1. Research the laws regarding elective sterilization in your state before talking to your physician,
2. Read the ACOG guidelines, committee opinion number 695, on the sterilization of women, to better understand the professional recommendations issued to physicians. It is available for free online via any search engine. Consider taking it to your appointment when you speak with your physician.
3. Read the 13-page ACOG Practice Bulletin 133 (2013b). On p. 395 there is an answer to the question "How Safe is Laparoscopic Sterilization?" It reads: "Tubal occlusion via laparoscopy is a safe and effective method of permanent contraception. Overall complication rates are low, and procedure-related death is a rare event." This detail may be important in your conversations with your OBGYN if they describe the procedure as risky.
4. Realize that because efforts have been made to prevent forced sterilization, you may have to complete procedures to fulfill regulations around this practice. While they may seem inconvenient or unnecessary to you, their intentions are justice-oriented to prevent women from being sterilized against their will.

Appendix C: Advice to Scholars in Rhetoric of Health and Medicine

1. Study taboo topics. For us, especially, creating contexts to discuss women's reproductive freedom is an obligation as reproductive rights increasingly come under fire. Movements such as "shout your abortion," which reject the shame and secrecy around women's reproductive autonomy, provide rich and important communication contexts from which rhetoric scholars can learn.
2. Work with technical communicators to revise pamphlets so they are respectful of patients and promote gender equity. Identifying how pamphlets and other patient-facing texts norm gender, race, class, ability, and other identity factors can reveal how power and ideology are embedded in so-called objective medical materials.
3. Teach this persuasion brief to your students and discover what they think about this issue. Students in Abby's class have been surprised to learn about the barriers facing women who seek sterilization, which they have learned about from Sara. Likewise, students may be in the very early stages of learning about a variety of related issues, including government legislation about access to contraception, the science behind fertility, and other taboo topics that we often do not communicate about effectively, if at all. As the United States frequently legislates abstinence-only sex education, students often lack knowledge about human reproduction as well as contraception. If you teach this brief, please write to us to let us know how it went.