

Couples and money

Understanding money personalities is key to ending financial disputes

by *Katrin T. Bean*
Certified Financial Planner

Michael and Jane were a joy to work with from the moment they first came to consult me about their investments. They are a great team: They agree on spending, saving, investing. They don't worry about what they don't have, they know the difference between their needs and their wants, trust each other, give each other some autonomy, deal with each other fairly. A couple in their late thirties, they have roughly \$150,000 set aside for their children's college education and for their own retirement.

For many couples, however, money management is a constant source of conflict. There are, of course, some very difficult problems that no amount of good advice can solve: low income, unemployment, illness, as well as such issues as compulsive gambling or spending. But why is it that couples clash so often about money even when they do not face problems like this?

Just consider how people learn about money: Children learn from parents, peers, the media, church, and society around them, and the lessons are not always well-considered.

Parents may have fought over money, there may never have been enough, or there may have been too much money. Television, newspapers, and magazines all expose children to endless messages about getting and spending.

Roughly by age twelve, money attitudes are fixed. A couple that can't agree about money may need to examine the lessons they learned in their childhood and what money may represent to them: power, independence, love or self-esteem.

Men and women differ in their approach to money. Boys are raised to earn, provide, venture out, are given logical advice, while girls are more sheltered from testing their abilities, are taught to expect to be taken care of, to value relationships and safety. As adults, men tend to stress financial, women personal satisfaction. Men have more self-confidence in regard to money; many women feel incapable of making good money decisions and are more anxious and conservative investors. Yet women have strong reasons to learn about money: they outlive men by at least seven years; 47% of first marriages and 49% of second marriages end in

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Women's Center director Nancy Ransom congratulates Christa McDermott at the Kudos ceremony.

Study to focus on girls in other cultures

For graduating senior Christa McDermott, an interest in the socialization of girls will lead to a year-long adventure around the world.

McDermott was chosen to receive the Vanderbilt Traveling Fellowship, given annually to one senior for a year of international travel and study on a self-designed project. Her application proposed a cross-cultural examination of the ways girls are raised and how this leads to gender inequity.

With the \$9,000 stipend from the fellowship, McDermott tentatively plans to visit India, Morocco, Japan

and Hungary and talk to girls in each country about their goals and expectations in life, using pictures when necessary to circumvent language barriers.

"Cross-cultural things fascinate me," says McDermott, "because sometimes the best way of looking at your own culture is to examine the way things are done in other places."

While at Vanderbilt, McDermott served on the board of Students for Women's Concerns, organized the first Women's Leadership Retreat and started a body image and eating disorders group for students.

divorce. Nine out of ten women will have to make sound money decisions at some point.

The development of so many two-earner couples has increased stress and has raised new issues about autonomy vs. partnership and pooling money vs. keeping it separate. Women sometimes can't let go of the dangerous assumption that what's his is theirs, what's hers is hers.

Psychologists who specialize in money issues, such as Olivia Mellan, find that many people have developed money personalities, which, if extreme, can interfere seriously with relationships. Mellan lists these personalities:

- **Hoarders** for whom money equals security, who love goals, budgets and saving
- **Money Amassers** who want lots of money because it equals self-worth for them
- **Spenders** who are generous, but who can't get serious about planning, saving, investing (34% of all fights are about overspending!)
- **Worriers** who need control and order, but who have a hard time enjoying life
- **Avoiders** who can't get themselves to deal with money, don't pay their bills on time, can't start on saving and investing
- **Risk Takers** who gamble with their money because they enjoy risk in all forms
- **Money Monks** who consider spending sinful, thrive on frugality, and associate money with evil.

There are other dysfunctional attitudes that some engage in, such as helplessness: Poor me, I don't under-



"Fame? You say I'll have fame? Can I get a side order of fortune with that?"

stand, you had better take care of this. This can then lead to the "joy of blame": You made all the decisions, so it's all your fault.

The solution starts with the admission that there is a problem, and the

Katrin Bean will repeat her popular workshop on solving financial conflicts June 11 at the Women's Center. See calendar for details.

will to deal with it. Couples need to share what they learned about money in their childhood and consider how these lessons interfere with joint money management. They may have to keep a fight diary to pinpoint the

cause of their fights and to discover whether the disagreements are really about money or about other issues. They need to learn about money from books, seminars, magazines; they may want to hire a financial planner to get them started in the right direction. Counseling may help ferret out the emotional issues that interfere.

The procedures that bring about "financial peace," according to Adriane Berg, an attorney, family mediator, and financial planner, are communication, task allocation, and decision making.

Such tasks as bill-paying, filing, record keeping, check book balancing, and consulting with experts need to be allocated according to who has the time and skills, and who enjoys a task more. Berg urges couples to move all money decisions out of the bedroom and into a "board room" where only money matters are discussed. She suggests using business procedures: an agenda, information gathering, well-prepared presentations. Only then can sound and mutually satisfactory decisions be made.

The peace of mind that comes from successful money management is certainly worth the effort that it takes to develop the necessary teamwork. ■



Women's VU is published monthly September through June at the Margaret Cuninggim Women's Center, Vanderbilt University, Nashville, Tennessee. Campus address: 316 West Side Row. Mailing address: Box 1513, Station B, Nashville, TN 37235. Phone: (615) 322-4843. Fax: (615) 343-0940. E-mail address: womenctr@ctrvox.Vanderbilt.edu.

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Calendar of Events

Margaret
Cuninggim
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Please save and post. Individual flyers for these programs may not be sent.

JUNE 4 / TUESDAY

Creative Life Planning Group meets weekly on Tuesdays from noon until 1 p.m. to focus on ways to improve problem-solving skills and make life changes. Call Judy Helfer at 322-6518 for more information. Also meets June 11, 18 and 25 and on Tuesdays throughout the summer.



Cheryl Lison (left), Connie Flatt and Sarah Coode participate in a recent session of the Creative Life Planning Group.

JUNE 10 / MONDAY

Book Group will discuss *Traveler's Tale: A Woman's World* by Marybeth Bond. Facilitator is Martha Young. 5:15-6:15 p.m.

JUNE 11 / TUESDAY

"Couples and Money: What do you fight about?" Katrin Bean, Certified Financial Planner will offer tips on how couples can resolve money conflicts and achieve money harmony. 4:30-6 p.m. Registration required at 322-4843.

JUNE 25 / TUESDAY

Freelance Writers Group meets with Beth Grantham as facilitator. 5:30 to 7:30 p.m. New members welcome.

A newly formed **Women's Investment Club** is seeking a regular meeting date. For information, contact the Women's Center.

Unless otherwise stated, all programs are held at the Cuninggim Center, Franklin Building, 316 West Side Row. For more information, please call 322-4843.



Guests gather at the Women's Center during a reception for artist Arlyn Ende, whose show featured a collection of small collages.

Nominees sought for Mary Jane Werthan award

Nominations are now being accepted for the Mary Jane Werthan Award, given annually by the Women's Center to recognize an individual for contributing to the advancement of women at Vanderbilt.

The award honors a person with "vision, persistence, and extraordinary skill in interpersonal and institutional relations."

Nominations should include a *curriculum vitae* for the nominee and must be received by June 14.

The award was created in 1988 and named in honor of its first recipient, Mary Jane Werthan, who was the first woman to become a life member of the Vanderbilt Board of Trust. It will be presented in October at the annual Margaret Cuninggim Lecture.

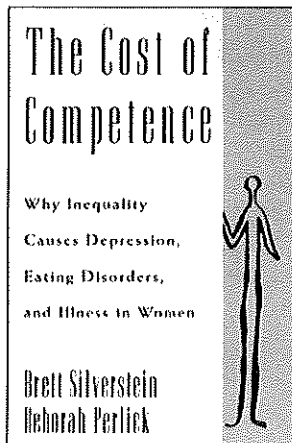
In the library...

Psychologists see historical trend in women's eating disorders

Barbara Clarke,
Women's Center
librarian



Some interesting theories on eating disorders are presented by psychologists Brett Silverstein and Deborah Perlick in *The Cost of Competence: Why Inequality Causes Depression, Eating Disorders, and Illness in Women* (Oxford University Press, 1995). The writers, who have been studying eating disorders for more than 15 years, base their research on studies of over 2,000 young American women, as well as on biographies of famous women in history.



The researchers believe that eating disorders are part of a range of symptoms that characterize a syndrome they call anxious somatic depression. Among the other symptoms are depression, anxiety, headaches, insomnia and mitral valve prolapse. While disordered eating is more prevalent today, the writers show it has existed for centuries.

The symptoms of anxious somatic depression usually show up in girls at adolescence, particularly in those who are doing well at school, who have high career goals, and who feel that their parents value their sons more than their daughters. Many of these young women have successful fathers with whom they identify, and mothers who are traditional homemakers. The writers believe that as the daughters approach womanhood they reject the

feminine body shape that appears to have limited their mothers' options to traditional roles. By remaining very thin, the girls resist a constraining feminine shape. Young women realize that many people associate a curvaceous female body with incompetence, lack of intellectual ability and lack of accomplishment.

Eating disorders appear to be more prevalent among girls who grow up in periods when gender roles are changing. Perlick and Silverstein believe that at adolescence many girls feel pressure to shed masculine goals and to adopt what society sees as more feminine roles; young women understand that these roles are considered inferior.

Queen Victoria, Queen Elizabeth I, Florence Nightingale, Emily Dickinson, Ruth Benedict, Simone de Beauvoir, Elizabeth Cady Stanton and Marie Curie are among notable women considered by the writers to have suffered from disordered eating. Because of the restrictions placed on them, most of these women felt very ambivalent about being female.

The researchers are aware that some of their conclusions and their methods may be controversial.

Adolescent girls discuss their lives, feelings and hopes in *Between Voice and Silence: Women and Girls, Race and Relationship* (Harvard University Press, 1995) by Jill McLean Taylor, Carol Gilligan and Amy M. Sullivan. This volume resulted from studies done at Harvard University on the development of girls and on women's psychological health.

The researchers focus on 26 girls who came from a variety of ethnic and racial backgrounds. All of the girls were considered to be at risk for dropping out of school or for teenage pregnancy; they were studied for a three-year period, beginning when they were in the eighth grade. Previously Gilligan and others had studied

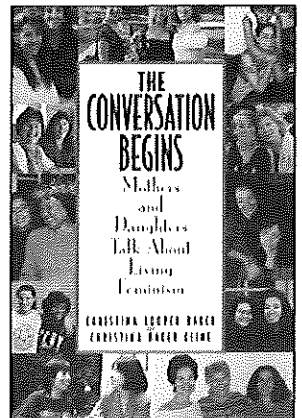
young women from more privileged backgrounds.

The teenagers in this study describe their relationships with their mothers and with their peers, their feelings about school, sexuality, race and ethnicity, and their plans for the future. They had fewer constraints on their behavior and their speech than did the more privileged girls. While the poor and working class girls were freer to speak honestly, they felt that few people listened to them or cared about what they said. They also had fewer safety nets when they made unwise choices or suffered any misfortune. The researchers found that these teenagers needed a good relationship with at least one woman — not necessarily their mothers — in order to remain psychologically healthy and to avoid many of the pitfalls likely to trap poorer girls.

A mother and daughter, Christina Looper Baker and Christina Baker Kline, are the authors of *The Conversation Begins: Mothers and Daughters Talk About Living Feminism* (Bantam Books, 1996). They interviewed

feminist mothers and daughters about their lives and influences, their development as feminists, and their relationships with other family members. The writers, both of whom are college teachers, believed it would be informative to see how these women were influenced by activist mothers or daughters.

Among the feminists included are Tillie Olsen, Naomi Wolf, Eleanor Smeal, Barbara Ehrenreich, Clarissa Pinkola Estes, Patsy Mink and Letty Cottin Pogrebin. ■





Health matters

Lesbians have special health concerns

by Lois J. Wagner, M.S.N., F.N.P.

Wagner is clinical research manager of the AIDS Vaccine Evaluation Unit at Vanderbilt Medical Center

Lesbians and gay men have historically faced the same stigmas of prejudice and discrimination as many other minority groups. These attitudes extend to the field of health care, where lesbians in particular have often been invisible in medical literature, research and services.

Neglect by medical professionals has obscured the fact that lesbians have special areas of concern in health promotion, disease screening and mental health. Compounding the problem is a reluctance by many lesbians to be open about their sexuality with health care providers who frequently assume heterosexuality or have homophobic attitudes.

To improve the quality of their medical care, lesbians and the health professionals who treat them need to be aware of health issues unique to the lesbian community.

Lesbians are as diverse as the population at large and cross all geographic, economic and racial boundaries. Though research to date has not fully represented the diversity of the lesbian community, a tentative health profile of lesbians from existing surveys suggests that they are more likely to forgo childbearing or to defer bearing children until after age 30, may have a higher body mass index, use more tobacco and alcohol, and are less likely to contract gynecological

infections and sexually transmitted diseases. If this is correct, then lesbians may be at increased risk for breast, uterine, ovarian and colon cancers, as well as heart disease and stroke.

Not having children or delaying childbearing is known to increase a woman's risk for ovarian, endometrial and breast cancer. Diets high in fat and alcohol further increase the risk for endometrial and breast cancer as well as colon cancer, the third most common cancer in women.

"Lesbians wait three times longer between Pap smears than heterosexual women, and many have never had a Pap smear. . . ."

While lesbians share with all women the need for preventative care, in the areas of cancer and heart disease, sexually transmitted disease, reproduction and parenting, and mental health concerns, lesbians may have specific needs for additional screening based on the health profile presented above. For example, lesbians who smoke or are overweight should receive regular screening for heart disease and high blood pressure.

Surveys show that lesbians wait three times longer between Pap smears than heterosexual women, and many have never had a Pap smear or had their last one more than 10 years ago. Many lesbians, and uninformed physicians, believe lesbians don't require Pap smears because

they're not having sex with men. In fact, most lesbians have had sexual experience with men, a major risk factor for cervical cancer.

Exclusively lesbian sexual activity is associated with low rates of all types of vaginal and sexually transmitted infections. Although women are, in general, less likely to transmit the AIDS virus, there are documented cases of woman-to-woman transmission of HIV. Like other women, lesbians should be educated about safer sex practices and avoidance of injected drug use and needle sharing.

Many health care professionals and others in society are slowly becoming aware of the parenting and reproductive needs of lesbians. Many lesbians have children from previous heterosexual relationships or are having children through adoption, foster care or artificial insemination. Some lesbians choose impregnation by sperm donation outside of sperm banks, risking custody disputes and exposure to infectious diseases. Though lesbian parents and families share the same concerns as traditional families, they

have special concerns and anxieties engendered by the fears, prejudices and misinformation of society regarding gay parenting.

Though psychological illness is no more common in lesbians than in heterosexual women, lesbians must deal with the stigmatization and abuse of a homophobic society.

They may face rejection by family, friends and co-workers and may be denied employment, housing, custody and legal representation. Lesbians may internalize societal homophobia, resulting in low self-esteem and isolation. Lesbian youth are at particular risk for depression and suicide.

While homophobia has been a major health hazard for gay men and lesbians, changing attitudes through education and legislation will promote improved access to health care, integration into family and society and heightened self-esteem and good health. ■

The National Lesbian and Gay Health Association (202-939-1880) is an excellent resource for more information.

Announcements

Conferences

Beyond Beijing: From Words to Action, the Seventh International Association for Women in Development Forum, will be Sept 5-8 in Washington, D.C. The forum will focus on strategies for implementing the platform adopted at the United Nations Fourth World Conference on Women. Four plenary sessions will feature key topics from the Beijing conference: women and human rights, globalization of the economy, political participation and health and reproductive rights. For information, contact the AWID program chair, Karen Mulhauser at 202-463-0180.

The 1996 Leadership Conference on Women, the Economy and the Elections will be July 25 in Washington, D.C. This full-day forum, sponsored by the Institute for Women's Policy Research, will examine the economic issues important to women in the November elections. Cost is \$145 for nonmembers of IWPR. For information, call 202-785-5100.

Calls for Papers

Heroic and Outrageous Women will be the topic of the 1996 Morehead State University Symposium for the Advancement of Women to be held Nov. 7-9 on the Morehead, Ky., campus. Ideas are sought for workshops, papers and panel discussions on heroic women and their struggles for social change. Submissions are due by June 14. For information, contact program chair Cathy Thomas at 606-783-2712.

Manuscripts on **Ethics in Feminist Pedagogy** are being sought by *Transformations*, the academic journal of the New Jersey Project. Established in 1986, the New Jersey Project focuses on ways to integrate gender, race, class, culture and sexuality into the curriculum at all levels from kindergarten to postsecondary. Relevant manuscripts of research papers, personal narratives or successfully implemented syllabi are due by November 15. For information, contact *Transformations* Co-Editor Donna Crawley at 201-529-7624.

Programs

Breast Cancer Journal: Walking with the Ghosts of My Grandmothers will be on display June 7-26 in the Vanderbilt Hospital second floor lobby. Reproductions of 14 paintings by Hollis Sigler depict her own struggle with breast cancer and detail the pain of her family's experience with the disease. For information on group tours, call Bunny Burson at 936-1234. The exhibit will tour other hospitals during the summer and return for a display at the Vanderbilt Breast Center Aug. 19-26.

Through a Woman's Voice: Ten Women from Tennessee, will be presented at 7 p.m. June 7 at Blair Recital Hall in a benefit performance for Jo Ann Graves, candidate for the 18th District State Senate seat in Sumner County. Written by Candace Anderson with support from the Tennessee Humanities Council, the production tells the stories of 10 noted Tennessee women through ballads based on their personal diaries. For ticket information, call 451-4480.

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