## Summaries

Marquérite Corporaal

## Each word she said... shall be the food on which my heart is fed'.

The representation of the female voice in Elizabeth Cary's The tragedie of Mariam

In Renaissance England a woman would risk her sexual reputation by asserting her voice, as woman's speech was considered to be mark of lewd conduct and sexual incontinence. Women who took up the pen instead of the needle equally endangered their sexual reputation. since the woman writer was associated with the prostitute. This made the position of women who wished to trust their thoughts to paper and, in some cases, have them published, problematic. Although particular literary genres were held more acceptable for women, because they were related to the social sphere to which the female sex was assigned, some women were bold enough to take up the essentially public, hence 'masculine' genre of drama. In the light of the dilemmas faced by women writers, and female playwrights in particular, it is not remarkable that the issue of woman's transgressive voice is central to the plot of the first original play written by an Englishwoman, Elizabeth Cary's The Tragedie of Mariam (1613). In the domestic setting of the Palestinian court, Cary explores the conflict between a woman's desire to speak her mind and society's ban on woman's speech. Cary does not only test the rule proscribing public voice for women by negotiating contrary views and discourses on woman's voice. She actually legitimises the public female voice by adopting current discourses of sexuality and religion, in particular those used by other women writers from her period. In this process of legitimising female discursive agency, Cary rewrites the tragic conventions of female subjectivity at the closure of the play.

Barbara van Balen en Annelies van Vianen

## Old boys network in the academy. Social closure in universities

The number of women in top academic positions in universities in the Netherlands is extremely small: hardly 5 percent. In this study, three universities in different countries have been compared in order to find the main reasons for the disadvantaged position of women in Dutch universities. First, we assumed that several characteristics of universities would hamper the access of women to those universities. Therefore, we examined the characteristics of universities with a rela-

tively small proportion of women in higher academic positions and compared these with the characteristics of universities with a larger proportion of women in higher positions. Secondly, we examined gender differences in academic networking, based on theories about social closure. Gender specific mechanisms of social closure were found. Furthermore, the results showed that social closure within organizations flourishes under certain conditions.

Annemiek Richters

## The leaky body. Diversity research on urinary incontinence

This article is the second in a series in this journal on 'diversity in health care'. By elaborating on the example of urinary incontinence, it is illustrated that a material-discursive approach to health problems - in particular somatic ones - can be used to study differences that should be taken into account in the development of good health care for a heterogeneous patient population in a multicultural society. After a presentation of various material, discursive and experiential aspects of urinary incontinence in a western cultural context, an overview is given of possible similarities and differences in these aspects cross-culturally. The incontinent body has long been a taboo subject in society as well as in medicine and the social sciences, including feminist studies. During the last decade the taboo has been lifted gradually. Even though the scientific knowledge on the urinary incontinent body is still relatively scarce, it is sufficient to justify a call for further study of this subject from a diversity perspective. A deconstruction of women as the leaky gender can help to take away the shame that seems to prevent many women cross-culturally to seek care, and prevent health personnel to identify urinary incontinence as a problem and respond to it in a way that conforms with the standards set by feminist health care.