

# AIDS Treatment, Steerage Class

*AIDS programs for women in (and out of) prison, say critics, are nonexistent or worse*

BY DOUG SADOWNICK

MARY LUCEY DISCOVERED SHE WAS HIV positive after she was released from an 18-month stint at the California Institution for Women at Frontera (CIW) for drug possession. She got herself a doctor who put her on AZT. A year ago, she went back to jail on a parole violation; AZT marked her as a "prisoner with AIDS." Although she stayed only a week, she learned how poorly women with HIV are treated in the nation's largest women's prison, and how this mirrors the substandard treatment that women with AIDS are often subject to as more and more women become infected.

What Lucey found was that life at Frontera for a woman with HIV can be a death warrant. Her AZT was confiscated. She was placed in a segregated ward, called "Walker A," which houses all of the HIV-infected incarcerated women in California. Lucey was fed "cold oatmeal for breakfast, cold ham for lunch and cold green franks for dinner — the kind of food women with HIV shouldn't eat." She adds that women in Walker A are not allowed to mingle with the general population, work or take classes. They are verbally abused by prison staffers, she says, and are deprived of overnight visits with children and spouses that other prisoners are allowed.

The most egregious problem, however, is the lack of adequate medical care. Lucey, a 32-year-old member of ACT UP/L.A.'s Women's Caucus, says that prisoners are not given AZT until they develop an opportunistic infection: "This goes against scientific practice, which says that early intervention can ward off infection and reduce costs." Adds Rebecca Jurado, an ACLU attorney who has been observing conditions at CIW since 1984, "The Department of Corrections is the largest-growing industry in the state of California, yet the women in Walker A have no access

to a licensed medical facility." (Male inmates in California have three licensed hospitals and one HIV/AIDS ward.)

In a November 15 report issued by the San Bernardino district of the state Department of Health Services, medical facilities at CIW were cited for failing to meet state regulations in physician and nursing care, pharmacy, dietary kitchen and patient handling. State inspectors documented cases in which doctors failed to send acutely ill inmates to the hospital. The *Orange County Register* ran an investigatory series revealing how five women died of treatable illness; three days before the report appeared, the chief medical officer was relieved of his duties pending the outcome of an investigation. The *Register* also documented the use of sexual favors as a means of barter between inmates and guards.

The ACLU, which filed a suit against the California Department of Corrections in August 1989, charges that women with HIV at Frontera face "cruel and unusual punishment." The ACLU's Jurado also says that the segregation of women with HIV from other prisoners violates their right to privacy based on their health status. Jurado also discusses a woman at Walker A whom she got to know, "who was left to die without care. She lay in her own excrement and was treated like a leper — never touched." Frontera prison spokesperson Lieutenant Floyd Huyler admits that there are problems at the facility, but says, "The prison is in the process of improving medical care."

ACT UP/L.A.'s LAUREN LEARY believes that prison medical care for women with HIV/AIDS reflects how women with HIV illness are treated in public health-care situations. "Fighting for the bottom-line health-care rights of prisoners," adds ACT UP/L.A.'s Jeri Deitrick, "sets a standard below which we as a society won't go."

Likewise, the standard of care for

women with HIV infection outside prison is much worse than for men outside prison. According to a November 17 "Women and AIDS" teach-in given by ACT UP/L.A.'s Women's Caucus, understanding the health problem posed by AIDS in women is distorted by the underrepresentation of women in official data. As of October 1990, according to the Centers for Disease Control (CDC) in Atlanta, there have been 14,816 reported cases of women with AIDS in the USA out of a total of 152,231 AIDS cases.

However, that figure doesn't reflect the number of women with serious manifestations of HIV, according to ACT UP/L.A.'s Judy Sisneros. Because the first cases of AIDS involved men, the CDC only identified how the disease was manifested



Mary Lucey on Frontera's AIDS ward: "Cold oatmeal for breakfast, cold ham for lunch, cold green franks for dinner."

in males. (The CDC defines AIDS not as HIV infection, but as the appearance of one of 24 opportunistic infections and cancers to which people with HIV are susceptible.) The CDC still doesn't recognize gynecological conditions — such as severe infections of Fallopian tubes, pelvic inflammatory disease, vaginal yeast infections and cervical cancer — as indicating an AIDS diagnosis, even though these can be symptoms of severe immune impairment. This means that seriously ill women are not eligible for AIDS drugs, Medicaid, Medicare, SSI and a variety of benefits and services that prolong life for people with AIDS.

Sisneros says that underreporting at the CDC means that less money is allocated to education, outreach and AIDS preven-

tion, and that many clinicians are still unaware that AIDS does afflict women. The CDC, which has not revised its definition of AIDS since 1987, acknowledges by its own reports that the total number of AIDS cases is underestimated by 40 percent. Sisneros believes that the majority of people excluded from the count are women and IV drug users who are poor, and people of color. According to testimony given by ACT UP/D.C.'s Linda Meredith to the National Commission on AIDS on July 30, "The average woman with AIDS survives 15½ weeks from diagnosis to death. The average white gay man lives 39 months." By the time a woman is diagnosed with AIDS by the CDC's definition, she has been sick — and ignored — for a very long time.

The problem of the "missing woman" in the epidemic comes at a time when AIDS is fast becoming the No. 1 killer among black women in New York and New Jersey. According to a July 1990 *Journal of the American Medical Association* article, women are the fastest-growing group with HIV/AIDS, increasing 45 percent since last year, with HIV/AIDS expected to become one of the five leading causes of death by 1991 for women of reproductive age. But the AIDS division at the National Institute of Allergies and Infectious Diseases (NIAID) "has taken no leadership role in advancing treatments for women with HIV/AIDS," according to a coalition of activist women from New York and Washington, D.C., who have been pressuring NIAID director Anthony Fauci to revise clinical studies to account for the disease's changing demographics.

Few women are enrolled in government-run AIDS clinical trials (ACTGs). According to a 1987 *New England Journal of Medicine* report, the original studies of AZT in 282 patients only included 13 women. Today, only 5 percent of all persons enrolled in the ACTGs are women. NIAID's Fauci has acknowledged that women "of child-bearing potential" have been excluded from ACTG studies; before enrolling in a trial a woman must provide evidence of adequate birth control. ACT UP's Jan Speller recounts reports of women who have gotten pregnant during the course of a clinical trial and who have been told that their involvement in the study will be discontinued unless they abort. Other clinical trials have been devised to assess the effects of a drug on a fetus without also assessing the effects on the woman herself; after delivery, the women's treatment is terminated. Fauci has called such procedures "totally crazy" when informed about them by ACT UP's Women's Caucus.

← 12 statement of the military aid previously cut by Congress. The department also "strongly condemns this military campaign, and deplores the fact the FMLN is again violating its commitment not to undertake military attacks that affect the civilian population." (In fairness, it should be noted that, since the U.N.-sponsored peace talks began early this year, the Salvadoran army has also conducted military operations throughout the country that have resulted in civilian casualties, yet no corresponding State Department denunciation has been issued.)

The criticism directed against the FMLN, however, also included denunciations by Auxiliary Bishop of San Salvador Gregory Rosa Chavez and some U.S. congressional supporters of the 50-percent cut in U.S. military aid. Jim McGovern, press secretary for Rep. Joseph Moakley (D-Mass.), said the operation was "most unwelcome. We deplore the violence and the civilian casualties. We feel it was unnecessary, a mistake and threatened the peace process."

How this offensive might affect the peace process is the

question that remains. Both the FMLN and the government say they are committed to going forward with talks to end the war. Diplomatic sources who spoke on condition of anonymity have told the Weekly the next round of talks between the government and the FMLN is expected to begin December 1 in Caracas, Venezuela. At those talks the U.N. delegate, Alvaro de Soto, will have a broad new mandate to "initiate proposals." It's hoped that this new approach will resolve the major stumbling block — that of "cleansing the armed forces and prosecuting those officers accused of human-rights abuses." One source said the U.N. has proposed establishing a commission with five nominees each from the government, the FMLN, the archdiocese and the legal political parties, among whom the U.N. will then select three individuals to compose the body. The commission will review the human-rights records of all military officers, and recommend those officers who should be "purged" from the ranks and those who should be "purged and tried for crimes." LA

WOMEN ACTIVISTS ACROSS the country are pressing ACT UP chapters to agitate more aggressively on behalf of women. ACT UP/L.A.'s Women's Caucus was instrumental in calling for a national action to take place on December 3 at the CDC in Atlanta to demand changes in the CDC's surveillance methods and AIDS definition. ACT UP/L.A. will also demonstrate at Frontera on Friday, November 30 at 1 p.m.; demands include an upgrading of the prison infirmary to meet criteria for state licensing. Support within ACT UP has been building for the Women's Caucuses, but if the poor turnout by men at the November teach-in was any indication, most people, including activists, have yet to acknowledge the full magnitude of the burgeoning women's epidemic. LA