



DukeMed AlumniNews

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Woman to Woman

Female medical students reach out to inmates

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Medical Student Volunteers From left to right: Ambie Yesus, Lisa Gail-Thomas, Emily Wang, Victoria Mobley and Kim Gardner

Story by Miriam Sauls / Photography by Bruce Feeley

When third-year medical students Ambie Yesus and Emily Wang set out to teach a class at the North Carolina Correctional Institute for Women in Raleigh, they didn't know they would be learning at least as much as they taught. Such was the symbiosis of "Women's Exchange in Health and Well-Being," which Wang and Yesus pioneered in 2000.

"I had been reading a book about prisons and was interested in the social and racial inequities in the prison system," says Wang. Both she and Yesus were interested in women who have been marginalized. They obtained permission to adapt a curriculum they had used in an outreach program for high school students, and they tailored it for women and their health issues.

When the first class of 15 inmates arrived for the eight-session course, the medical students soon discovered that health is about more than functioning organs and annual physicals. "I realized health issues aren't just about prescriptions and illnesses, but also about the mental well-being associated with social

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Medical Students Reach Out to Inmates

and financial well-being," says Wang. "Until you address the issues of inequality and poverty and other social ills, you can't solve health issues."

Vicki Mobley, one of four students who taught classes in the second year of the program, agrees. "We were prepared with lessons on women's health," she says. "It turned into so much more." In fact, the name of the class changed to "Healthy Transitions" to reflect the broader scope of issues the classes began to address and the need to prepare inmates for life on the outside.

Mutual Respect

It took a great amount of trust for the inmates to share more delicate and personal issues with the medical students. Ground rules were laid out from the beginning.

"We told the inmates, 'We make no assumptions about you and you make no assumptions about us. We aren't here to judge or be judged,'" says Mobley.

Kia McLean, another of the students who taught the second-year program, adds, "If you don't treat the inmates with respect and as an equal, you won't get too far. The trust comes with the respect that we owe all these women, no matter what their circumstances."

Sometimes the inmates underestimated the experience of the students. "When the subject of HIV came up," recalls McLean, "one woman, in a really


angry voice, turned to us and said, 'You don't know anything about this!' We told her that all of us have seen patients suffering with HIV, and she backed off. But it helped us put ourselves in her shoes."

Confidentiality is stressed in the first class. All the Duke students were amazed at what came out when trust was finally established and the inmates began to open up.

"We found that more than 80 percent of the women had experienced physical or sexual abuse by family members or other well-acquainted people," says Mobley. "As one opened up, more and more opened up, many for the first time, and we sat back and witnessed the group beginning to comfort and counsel each other. That was unexpected for us. In class, one woman would ask a question, and before any of us could answer, another one would say, 'This happened to me, and this is what I did.' There was an advice network within class that surprised us."

The group of participants began to see the connections between the abuse they had suffered and the choices they went on to make—some of which, such as prostitution or drug dealing, contributed to their becoming incarcerated.

"For many of these women, the road to incarceration began with things that really weren't their fault," says Mobley. "But they found themselves in a situation that set them on a path. Some of them



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were my age and really weren't so different from me and my classmates except for the circumstances they grew up in."

"We feel one of the strengths of the program is getting the women to start thinking about their health and taking responsibility for it," says Lisa-Gail Thomas, a partner in the second-year classes. "They get health care at the facility, but later they will need the attitude of 'This is my body and it is up to me to take care of it' when they're out in the world dealing with rent and bills."

Keeping a Good Thing Going

Wang and Yesus received an AOA Medical Honor Society scholarship to get the program off the ground, but the students who took over the second year under Wang's tutelage realized they would need further funding to keep things running. So they began writing grant applications. They were successful beyond their dreams.

The team won a \$5,000 Secretary's Award for Innovation in Health Promotion from the U.S. Department of Health and Human Services. They placed second in the competition among all health professional schools in the United States for student papers that describe innovative projects for health promotion and disease prevention.

Their application had to make it through four rigorous reviews, but the review panel clearly recognized the merits of the program. "It was particularly exciting to win this award, not only for the money but because it acknowledges the work we're doing," says McLean.

More good news came when they were notified that they won a \$15,000 Caring for Community grant, an Association of American Medical Colleges award with support from Pfizer, Inc., and the Pfizer

Medical Humanities Initiative. The award is unique in its focus on projects initiated, developed, and run primarily by medical students.

"We knew we had something really good in this program," says Kim Gardner, a second-year program partner. "We just hoped others thought so too." The funding assures the continuation of the program, just as the creativity, adaptability, and responsiveness of the students assures the continued popularity of the course for inmates. And based on the response of the Correctional Institute's administration, future students can count on being invited back.

"It is a great service these students provide," says Pat Vincitorio, head of the social work department at the Institute. "They were energetic, enthusiastic, well prepared, and flexible when they needed to be, which was often. And they were patient with a system that isn't always user-friendly.

"The inmates responded quickly and with a trust level that usually takes several months to develop. Maybe the closeness of age between many of the inmates and the medical students was a factor—maybe they spoke the same generational language, but they created an environment where the inmates felt they could relax and open up," she continues. "And the students never seemed disconcerted when they were hearing really tough stories."

Facing Up to the Past

Tina Bumpass, a 31-year-old inmate from Durham, felt that she had something in common with the medical students because they were all from Durham. She was candid about her life and the reasons the course was so good for her. "I was just getting off the streets and I was clueless about a lot of things," she says. "We talked a lot about AIDS and STDs in women and the different ways to catch them and about the danger of having so many different partners."

She says the course also helped her see her behavior in prison differently. "When they came, I was getting in a lot of trouble around here. They helped me slow down," she says. "I have five kids, and I realized I wanted to see my kids grow up."

Bumpass, who goes home in one month, says she also learned a lot about parenting. "They taught me how to sit down to help my children with their homework. I had never taken the time to worry about them and school, and I realize now that education is something they need," she says. "The students made me realize your kids are gonna love you regardless, 'cause you're their mother, but you got to

put forth some effort and at least show them you're trying," she explains. "Now it's time for me to settle down and be a mother to my kids."

While she learned a lot about parenting and sexual diseases, Bumpass said what may have helped her the most was talking about her personal experience with rape.

"When we started talking about rape, a lot of us were holding on to the past—we didn't want to open up. But when you're still holding on to it, you keep living with it," she says. "They helped us come face to face with our past and then we could let go. They told us 'no means no' and that we didn't deserve what happened to us.

"Yes, the concern for kids and the concerns for women's rights in regard to rape were the most important for me. I will talk to my kids about all this when I get out, but right now they don't have much trust in me—I have to earn that back.

"These girls were young, but they were very intelligent. They weren't trying to knock nobody. We cried a lot and they were there to comfort and they were there for one-on-one if you needed them," says Bumpass.

Armed for the Outside

Kim Gardner and Lisa-Gail Thomas were so moved by their experience at the Correctional Institute that they came back for more. They returned this past summer for a six-week internship to fulfill a field-training requirement for the Masters in Public Health degree they pursued during their third year of medical school.

They proposed designing a resource manual for the department of social work for inmates who are transitioning out of the system. "Many of these inmates have had no experience with basic things like paying for housing and job hunting," says Gardner. "So we have pulled together many of the things they will need to know when they get out.

"For instance, there is information on how to budget money, how to fill out job applications, how to dress for job interviews, how to obtain a birth certificate, how to get a driver's license, and the location of hospitals," she explains. "But we have included portions of the eight-week curriculum also, like the importance of breast exams and Pap smears and the information about sexually transmitted diseases and HIV."

"We have made the manuals specific to different counties and have personally talked to every agency that we list as a resource in those counties," explains

Thomas. "We wanted to do every county in the state but were only able to finish 15 so far—it is very time-consuming to make sure all the information is accurate and up-to-date. When we checked leads we found that many agencies no longer existed."

The social work department is thrilled with the resource manual. "Kim and Lisa worked so hard and were so committed. The manual will be useful across the state. It is truly a great resource," says Pat Vincitorio. Thomas adds, "One of the rewarding things is that not only the inmates really appreciate our work, but the staff appreciate it and say they have learned things too."

Spreading the Word

A new series of classes started in October with 15 new inmates. Vicki Mobley stayed on to train new med school recruits who had heard about the program and were anxious to be a part of carrying it on.

"The word has spread in the prison too," says Mobley. "An increasing number are applying to be in the class, so the next trained students can expand if they need to and want to."



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And when the program is featured in an upcoming Health and Human Services publication, chances are the phone will start ringing as other schools across the country recognize the course as a model.

"This is probably the most rewarding thing I've done in med school," says Kia McLean. "You can get so bogged down with grades and stress, you can forget you went into medicine to make a difference in people's lives. This gives you a chance to do that."

Tina Bumpass confirms that the students indeed made a difference: "I encourage them to come back and do the classes again, and if they can't come here, they should keep talking other places—because people will listen." 🍷