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# THE NEW YORKER

*AIDS in the streets:*

*Dr. Joyce Wallace's crusade  
for New York's prostitutes*

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*The highbrow high life  
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A REPORTER AT LARGE

## WOMEN ON THE EDGE

*The prostitutes of New York have been afflicted by homelessness, physical abuse, drugs, AIDS, and the contempt of a society that chooses to ignore them. Now they have a champion. Dr. Joyce Wallace is fighting to reclaim their lives and pressuring the medical and judicial establishments to take action.*

BY BARBARA GOLDSMITH

EMBLAZONED in red letters on the white Dodge van are the words "LifeStyles Care-Van, Sponsored by LifeStyles Condoms," and underneath, in brown letters, "Foundation for Research on Sexually Transmitted Diseases." Inside in the rear is a comfortable couch, which has been covered with a terry-cloth bath sheet ever since the day a streetwalker urinated on it. In front of the couch is a round table resembling a ship's table, with small inserts that once held glasses; now they hold plastic cups containing venipuncture needles and butterfly needles, which are smaller and shorter than regular ones, for women whose veins are hard to puncture because of drug use. Other containers hold alcohol swabs, Band-Aids, and cc. vials for blood. On the floor are cartons filled with questionnaires and educational pamphlets on AIDS; rubber gloves and masks; and neatly arranged packages of condoms in plastic bags. A poster of Whoopi Goldberg proclaims, "Don't die of embarrassment . . . use a condom." Another poster says, "During sex, use a latex condom and a lubricant with nonoxynol-9."

Dr. Joyce Wallace, a perpetually disorganized crusader for streetwalking prostitutes, sits in the front passenger seat. This evening alone, she has managed to misplace a copy of data she recently compiled on the incidence of H.I.V. infection in crack-addicted prostitutes; her sandwich supper; and—twice—her huge red-rimmed glasses.

Wallace is a pale, stocky middle-aged woman with thinning short red-brown hair. As the driver of the Care-Van, Ricardo Ayala, stops it at the corner of Stanton and Allen Streets, on Manhattan's Lower East Side, three shabbily dressed streetwalkers approach Wallace's window. She hands them condoms.



*Wallace and her team have administered the H.I.V. test to more than three thousand streetwalking prostitutes in New York City. "They are our responsibility," she says. "These are not throwaway women."*

When they leave, one calls out to the driver, "So long, Ricardo! See you next week!"

On the next corner, a painfully thin woman climbs into the van. She has scabs on her nose and forehead and a barely healed gash on her right cheek. "If I take the test, do I get the McDonald's?" she asks, referring to a ten-dollar McDonald's food coupon that Wallace and her staff give women who agree to take an H.I.V. test.

"Sure," Wallace says.

"No way my dates will know?" (A "date" is a john.)

Dr. Wallace moves toward the couch, a test form in her hand. "No, it's confidential. You have to give your name, any name you want, and we give you a number. You can get your results from us in a

couple of weeks, and we'll give you another ten-dollar coupon." She adds casually, "So what happened to you?"

"Some crazy guy tried to rape me, and when I fought back he knocked me down and kicked me in the face. Everything kinda got rearranged."

Wallace hands her a card. "If you want, you could drop by my office. It won't cost you anything."

The van heads toward Broadway. In the back, Larry Palmer, a phlebotomist and the newest member of the Care-Van staff—he is a young black man with huge brown eyes—toys with the needles he uses to take blood. Palmer explains that he wants to go uptown with Wallace because he's looking for a particular streetwalker, a little blonde

who had approached the team the previous week. "When I say little, I mean little—she was under five feet," Palmer says. "She looked so beautiful, but when she got up close I could see she had open sores on her face and all around her mouth—she was wearing a scarf to hide them. She told a story about being raped at fourteen by her stepfather and running away from home and taking up with a woman lover who did drugs. Then they started doing drugs together,

but once she did a lot her lover kicked her out. She says she doesn't care anymore—she's given up. She uses any needle, she says—she just picks them up from the ground and if they're not blunt she uses them. She wouldn't even take a bleach kit. I tried to get blood from her, but she was dehydrated and I couldn't find a vein. I thought Dr. Wallace could—she's better at it than I am. I thought maybe Joyce could turn her around."

The van parks on Ninety-eighth Street just off Broadway. In the next two hours, several girls enter it. They come to be tested or to get their test results from a big red book that Ricardo Ayala holds. When one asks for her results, Ayala replies that she received them two weeks ago.

"Yeah, but I'm hungry. I need the McDonald's." It's a familiar refrain. Many streetwalkers ask to be retested or claim not to have received their results, so they can get the food coupon.

"I can't," Ayala says.

A girl visibly pregnant and wearing tattered bluejeans asks if this is a free health clinic. When Wallace tells her it isn't, she begins to cry. She is followed by a black woman with cornrow braids who has a tiny diamond stud in her nose. In answer to a personal-information questionnaire, she tells Wallace she has three children, seventeen, eleven, and ten. Then her words are cut off by a fit of coughing.

"Have you had that looked into?" Wallace asks.

"Yeah. They diagnosed me with t.b. at Brooklyn Hospital."

"Are you taking your medicine?"

"Taking it? Hell, no. I can't even sell that shit."

The van cruises upper Broadway while Palmer looks for the blonde. There's considerable activity. Women dash out into the street to flag down cars. On the side streets, in parked cars, one can see heads bobbing up and down. A girl jumps out of one parked car and into another so quickly that she might be in a "Road Runner" cartoon. "The compact Japanese car has transformed the sex business," Wallace remarks. "What they do is fellatio. Under the circumstances, you can't do much else."

At approximately 1 A.M., Wallace turns to Palmer and says, "About that

girl, forget it for tonight," and the Care-Van heads back downtown. As it nears its lot, on East Houston Street, it passes a girl in a trenchcoat, which she opens, with the regularity of a windshield wiper, to reveal her naked body.

MRS. VINCENT ASTOR, splendid in tailored blue jersey with a discreet sapphire-and-diamond pin perched on her right shoulder, stands under a seventeenth-century Flemish tapestry in the Trustees Room of the New York Public Library. A hundred and twelve guests have gathered for the presentation of the Brooke Russell Astor Award, which was endowed in 1987 by David Rockefeller in Mrs. Astor's honor. The award consists of ten thousand dollars, accompanied by an honorary citation, to an unsung hero who has contributed substantially to improving the quality of life in New York City. Mrs. Astor, reading from a typed sheet, lists the accomplishments of the winner, Dr. Joyce Wallace. In the last three years, as executive director of the Foundation for Research on Sexually Transmitted Diseases, Inc. (FROSTD), she has provided direct social services to streetwalking prostitutes and has embarked on a crusade to halt the spread of AIDS. Her efforts include the Care-Van, from which she provides free condoms, safe-sex education, H.I.V. testing, and food coupons; the Off the Street Mobile Unit, a Winnebago equipped to deliver social services; a needle-exchange project, offering sterile needles to addicts; a shelter for homeless people with AIDS; and a project at the Manhattan Criminal Court known as the Treatment Readiness Program, an alternative-sentencing program, which offers education in substance abuse, AIDS prevention, and drug-treatment referrals. When Mrs. Astor finishes rattling off all this information, she looks over at Dr. Wallace and remarks, "My goodness, how in the world do you have time to do all this?"

The answer to Mrs. Astor's question is that she doesn't. In spite of many sixteen-hour workdays and ambitious (some say too ambitious) plans, some of the projects mentioned have not come to fruition, possibly because Joyce Wallace tends to be viewed as an eccentric zealot who deals with an illegal, transient, and frequently despised group of women. As in the early days of the AIDS crisis, when

the establishment failed to respond, the burden of activism has fallen not to the most skilled or organized but to those who care. Wallace, one of the few who target the streetwalking population, will receive over a million dollars this year in grants. Throughout history, prostitutes have been perceived as vectors of infection, and much of the money comes from people who fear that these women will transmit the AIDS virus to their male clients, who, in turn, will carry it home to wives and lovers. Wallace is canny enough to realize this, and her grant proposals stress that her work will prevent the spread of AIDS both "to and from" prostitutes. On the surface, statistics support this supposition: authorities estimate that there are from five to eight thousand streetwalking prostitutes in New York City. Wallace says these women tend to inflate the number of the men they service, but just three contacts a day five days a week for a year by just five thousand streetwalkers would add up to 3.9 million contacts. However, her statistics also indicate that seventy-five per cent of these contacts are limited to fellatio, an activity that clearly puts a woman more at risk than a man: common sense tells us that the AIDS virus gains easy entry through mouths lacerated from crack smoking. Studies indicate entry is also gained through unprotected vaginal and anal intercourse and through the sharing of "works" with infected substance abusers. (The proportion of I.V.-drug-using prostitutes who are H.I.V.-positive is staggering: 61.2 per cent.) A recent National Research Council report on AIDS concluded that female prostitutes are not spreading the disease. A study by Wallace of male clients of prostitutes found that of men who engaged in no other type of risk behavior less than one per cent were H.I.V.-positive.

In the past three years in the Care-Van, Wallace and her staff have tested and interviewed more than three thousand streetwalking prostitutes. The group is half black, a quarter Hispanic, a quarter white. The average age of the streetwalkers is twenty-nine, the average education eleventh grade. Half have no fixed address. Almost three-quarters use illegal drugs. (National studies show that seventy-eight per cent of prostitutes underwent forced sexual intercourse before the age of fourteen, usually with a rela-

tive or someone close to the family.) Most have been battered or abused. In New York, seventy per cent are mothers, having, on an average, two children. After this, because of infections such as gonorrhea or syphilis, these women often become sterile. Only ten per cent of the children live with their mothers. Over all, thirty-five per cent of the prostitutes Wallace has tested are H.I.V.-positive. "Many people just want these women to disappear—they've dehumanized them and turned their backs on their suffering," Wallace says. "These women represent the failures of our society. They are the product of two decades of inadequate schools, dysfunctional families, domestic violence, incest, and, for that matter, the repressive ignorance of the Catholic Church. They are our responsibility. These are not throwaway women."

New York's prostitute population is far from homogeneous. Some of the women sell sex for money, others for drugs; still others use sex to survive. Streetwalking prostitutes live in a vastly different world from call girls, who often refer to themselves as "sex workers" and tend to have a somewhat predictable private clientele. Escort-service girls also consider themselves superior to streetwalkers. Houses of prostitution are stratified as well, from the rarefied Belle de Jour, where men act out sexual fantasies, to the brothels of Park Avenue,

Third Avenue, and the Lower East Side; in Queens, there are also the South American illegal-alien women of Flushing and the Korean ones of Jackson Heights, who are conscripted as sex slaves.

Streetwalking prostitutes, too, have a hierarchy. In the Care-Van, one becomes familiar with streetwalker "strolls," or "tracks," as they are called. The common denominator is the slow crawl of cars, girls darting into the street, price negotiations at the drivers' windows. At the top are the women of Fifty-eighth Street and around the corner on Sixth Avenue. They wear ankle-length coyote or raccoon coats over Victoria's Secret-type chemises of shimmering satin, black stockings, and five-inch red heels or boots. Most are young, pimp-controlled, have their own doctors, and disdain Joyce Wallace's offer of condoms. "Not my brand," one says. These "girls" can be seen negotiating dates on the sidewalk and taking men into hotels such as the Park Savoy, on West Fifty-eighth Street, where they can service a john who wants vaginal, anal, fantasy, or S & M sex for between three hundred and five hundred dollars. As on the rest of the strolls, a ten-minute blow job is the mainstay of their business. Here the price is thirty to fifty dollars.

Eleventh Avenue was the mecca for the flashiest of the streetwalkers until two years ago, when neighborhood

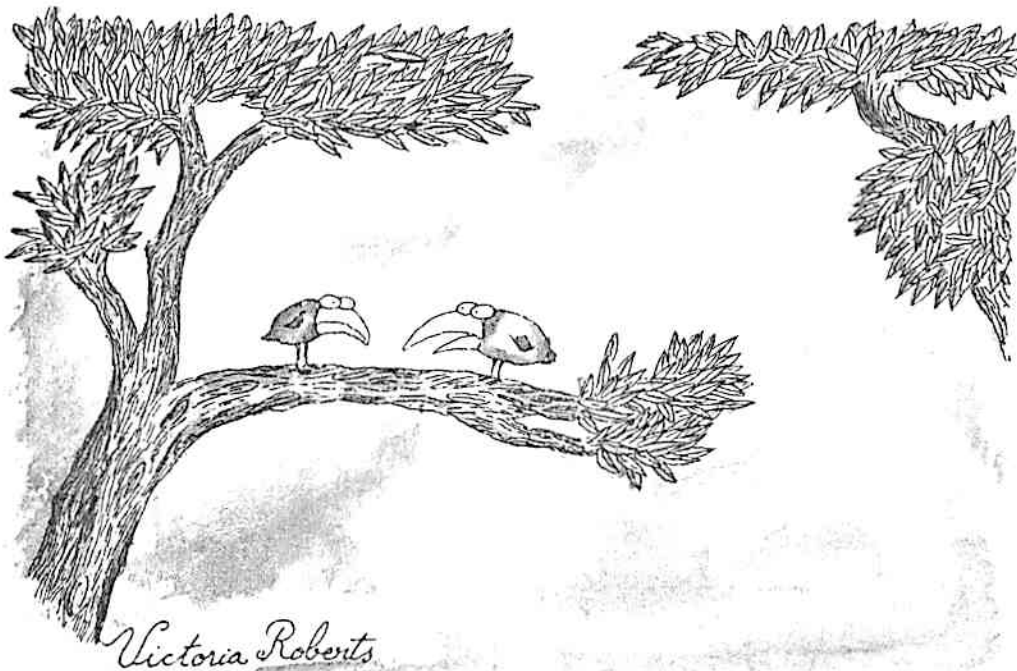
groups organized to expel them. Now it still has a concentration of flamboyant girls in G-strings with sparkling pasties on their nipples, or in lace panties and bras, who stand on the corners and in the side streets from Twenty-third to Thirty-second. They also work on Ninth and Tenth Avenues. Here teenage boys drive past—sometimes, according to the girls, masturbating and "getting it for free." Teen-agers also have been known to pose as johns in order to rob streetwalkers of their cash. The police, whom the streetwalkers call "blue-and-whites," seem to arrest the younger women most often, in the hope of discouraging them from staying on the track.

When a date requires more than fellatio, streetwalkers often take him to a hotel such as the Terminal Hotel, at Twenty-third Street and Eleventh Avenue—a place so steadily frequented that it has become one of Wallace's regular Care-Van stops. Streetwalkers also congregate around the entrance to the Lincoln Tunnel on Thirty-fourth Street. Here, too, parked Nissan, Mitsubishi, and Cadillac cars containing prostitutes at work have become a familiar sight.

There is a hiatus on Eleventh Avenue from Thirty-fourth to Thirty-ninth Streets, where the Jacob K. Javits Convention Center has been closely policed since it opened, in the spring of 1986, so that tourists will not see streetwalkers

working the area. Business picks up again between Thirty-ninth and Forty-fourth Streets, but then the streets from Forty-fourth to Forty-eighth and the avenues from Ninth to Eleventh are almost devoid of streetwalkers. This is due largely to the efforts of Residents Against Street Prostitution (RASP) and the West 47th/48th Streets Block Association, which work with community police in the Clinton area to keep streetwalkers out of their back yard. (These groups also discourage stops by the Care-Van in residential areas, because they believe that it attracts prostitutes and the pimps and drug dealers who often follow.)

The meat-market district, on Ninth and Tenth Avenues



"The Icarus story is just that—a story."



from Gansevoort to Sixteenth Streets, is populated by "true transvestites," or men, dressed as women, who have not attempted to change their gender with hormones or surgery; pre-op transsexuals, or men who have taken hormones to grow breasts but have not undergone castration; and post-op transsexuals, or men who have breasts as a result of hormones and have been castrated. These streetwalkers, with their large, unfeminine feet, thickly painted red lips, and extravagant wigs, wear brocaded jackets and fish-net stockings and totter on the inevitable five-inch heels. They perform primarily oral or masturbatory sex, and they receive twenty dollars for the requisite ten minutes.

On Eleventh, Twelfth, and Thirteenth Streets between Second and Third Avenues is an area associated with intravenous-drug use. Streetwalkers wear black stretch pants and brightly-colored high heels. Along the West Side Highway are more of these women, who for hotel service take johns to the Liberty Inn at Fourteenth Street and Tenth Avenue. When one telephones the hotel, a tape recording announces special three-hour rates on Friday and Saturday nights, convenient parking, and the acceptance of MasterCard, Visa, and American Express.

On the Lower East Side, the line between prostitution and desperation becomes blurred. One cannot fail to notice how drugs and streetwalking have become inextricably combined. In Sara Delano Roosevelt Park, at Houston, Delancey, and Stanton Streets, girls dressed in jeans, worn T-shirts, and sneakers stand waiting for cars to stop. The price for fellatio is negotiable, but it's usually the price of a vial of crack—five dollars.

At the bottom of the heap are the homeless, often substance abusers, who find streetwalking a way to survive. This is the desperate population that Joyce Wallace most wants to help. Under the



*"Actually, I'd written off the nineties before my conviction."*

Park Avenue elevated tracks, from 115th to 125th Streets, mostly black and Hispanic women congregate, waiting for a john to provide money or a fix. In the Bronx, Jerome Avenue near Fordham University has more of these women, and so, in Brooklyn, do Coney Island from West Fifteenth Street to West Twenty-second Street, Sheepshead Bay, Williamsburg, Bushwick, and Flatlands. At the Hunts Point market, in the Bronx, truckers park and wait patiently for their blow jobs, priced at five dollars.

Wallace's fight to keep the streetwalking prostitutes healthy is no small undertaking. AIDS is now the leading cause of death in New York City among women between twenty and thirty-nine. A landmark study on sexual practices, the most comprehensive in more than forty years, sponsored by the National Institutes of Health, recently found that the heterosexuals who are at highest risk of acquiring H.I.V. are still ignoring the need to change their behavior: almost forty per cent of the heterosexuals who frequent prostitutes never use condoms, and seventy per cent of the heterosexuals with a partner who they know is at risk of having H.I.V. also never use condoms.

"Condoms, condoms, condoms, we've got to get them to use them," Wallace says. "And not just streetwalkers. I've seen four hundred cases of

AIDS in my private practice, and a hundred and sixty H.I.V.-positive women. They come from all classes. AIDS is everywhere. Several new studies predict that by the year 2000 as many as fifty per cent of the people in this country who are H.I.V.-positive will be women."

Although half of the streetwalkers consistently use condoms with clients, most never use them with boyfriends and pimps. Wallace believes in straight talk. "People think that prostitutes know how to protect themselves, but it's simply not true," she says. "They think they can't get infected from their boyfriends, and they'll take a few extra bucks if a john doesn't want to wear a condom."

"I won't use those things with my man. If I did, how could I tell him from a john?" one streetwalker asks.

"He'd kill me," another says.

"The last time I asked him to do that, I got a black eye," says a third.

It's men who must agree to wear condoms, and the majority don't. Kathleen Stoll, the director of the National Resource Center on Women and AIDS, notes that "when we talk about teaching women to negotiate condom use, we're really going to the heart of some of the most basic levels of sexism in our society." Recognizing this fact, Wallace sponsored a video by Vivian Kleiman to educate prostitutes not only on safe-sex practices but on how to

CLINTON'S

## IDES OF APRIL

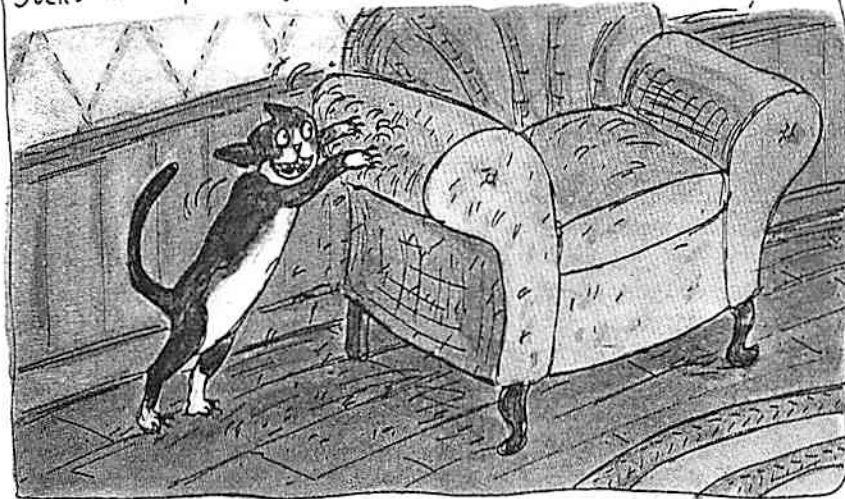
Hillary and Chelsea have it out in public.

Why don't you comb your hair and stand up straight?

Why don't you GET OFF MY BACK!



Socks destroys antique chair in the Lincoln sitting room.



Roger Clinton's album is released.

ROGER CLINTON

FEATURING

- Don't Mess with Bill
- He Ain't Heavy (He's My Brother)

and ten other best-loved songs!



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eroticize safe sex. One prostitute shows another how to hold a condom in her mouth and slide it down the penis with her tongue. There is a demonstration of a wet washcloth, with a condom concealed inside, washing a penis. The prostitute instructor says that in this manner one can put a condom in place without the john's knowing it. She also demonstrates how to lubricate one's hand with K-Y jelly or a similar product, and tuck it between the legs, manipulating the hand muscles so the john feels he has entered her body. "Ninety-five per cent of the guys don't know that this is not a vagina," she says. "Make noise, it's always better." The other prostitute replies that she would never do this, because if the john found out she'd tricked him she might be hurt. The choice between AIDS infection and violence is harsh.

**W**HAT my mother was, and wanted to be, was a nice Jewish matron living a nice life," explains Julie Wallace, Wallace's twenty-five-year-old daughter, from her first marriage. "She wanted a stimulating life—not necessarily intellectual, but active and fun. She loved nice things, the theatre, the activities of the temple, clothes, cooking, family, the sweet old ladies in her practice, the stimulation of her artistic patients. That's the way she was and would have remained, had it not been for AIDS."

The Joyce Wallace one encounters today moves through life at gale force. Even her smallest action—ordering a pastrami sandwich at Katz's Delicatessen ("Slice it thinner. I said cut off *all* the fat") or sending a fax ("It was blank again? You're telling me the writing goes down, not up?")—is imbued with a sense of high drama. In the space of a few minutes, she will exhibit contradictory behavior: She is known to scream at her employees and undermine their authority, then praise them lavishly. She will be by turns confrontational then charming, short-tempered then loving, proper then bawdy, insensitive then solicitous, manic then depressed. At a low point in her life, she was diagnosed as suffering from "depressive neurosis."

To keep AIDS and despair and death at bay, Wallace has had periods when she worked non-stop and slept only four hours a night. She plays tennis twice a week, obsessively watches mysteries on TV, has worked with a trainer and taken

tap-dancing and voice lessons to alleviate the pain of watching the Greenwich Village world she loved become "peopled with ghosts." For Wallace, there is never enough time to repair the damage. All the hours and the days and the years are not enough. The energy she expends on her efforts to meet the vast needs of streetwalkers often leaves her confused and forgetful. A neighbor keeps an extra set of keys to Wallace's house, because she so frequently forgets her own. She once telephoned a friend at 2 A.M. to report a missing parakeet. "Come right over and help me look," she commanded. She doesn't hesitate to disclose that her most recent study of prostitutes' sexual and drug behavior was rejected for publication in a medical journal. "They said my statistics were faulty and sloppy, so I'm doing it over. I guess they were right. I rushed it." Her son, Aryeh, called Ari, who is thirteen, says, "A kid has to realize that she's got a lot on her mind. She knows exactly what she wants to do, but doesn't know exactly how she wants to do it."

Wallace's background suggests the origin of that odd personal dichotomy—part dedication, part disorganization. As a child, Joyce lived in the South Ozone Park area of Queens. Her father, Samuel Malakoff, taught high school in the rough-and-tumble section of East New York. According to his daughter, he was a frightened man of broken dreams, a Depression child who, although he held an engineering degree and was a "near-genius" in automobile mechanics (he could determine what was wrong by listening to a car engine with a stethoscope), had opted for the security of a high-school teacher's job. Her mother, Henrietta, who dropped out of Brooklyn College to marry, was a housewife, absorbed in taking care of Joyce, her younger brothers Edward and Lee, who had a serious speech impediment, and Sam himself, who suffered from severe asthma. "Every year, my father spent time in the hospital, and once he was confined for forty days," Wallace recalls. She believes that her own fearless personality is a throwback to her father's mother, Rose Malakoff, who, rebelling when her father would not let her continue her education, though she was only thirteen, left her home, in the Jewish Pale of czarist Russia, came to the United States, found a relative in Pittsburgh, learned a new language, and

completed grades one through eight in a single year.

In 1953, when Joyce was twelve, Lee, who was eight, became seriously ill. She remembers endless blood-count tests being done at home. Lee died the following summer, of childhood lymphocytic leukemia. "Today, they save children like that," Wallace says. "If I'd been a doctor then, I'll bet I could have saved him."

With Lee's death, Henrietta Malakoff spiraled into what Wallace calls "an almost manic state"—one that some say her daughter also evinces. Henrietta slept only two hours a night, first studying to be a medical-laboratory technician, then a school secretary. "She learned Pitman shorthand in two weeks," her daughter says. Finally, after an eighteen-year absence, she returned to Brooklyn College, completed her education, and began working for the Board of Education, specializing in children with speech and brain defects. "She was always trying to make up for Lee's death," Wallace says.

Joyce spent much of her time trying to excel at activities her mother favored, including membership in the Girl Scout troop where Henrietta was active, but little attention was paid to her formal education, at public schools in Queens. "It never occurred to me that that was important for a woman," her mother says. When a teacher remarked that Joyce was not smart enough to pass the examination for Manhattan's Hunter High School, she took the test, was accepted, and attended the school for two years, before deciding that it was too much of a commute. At nineteen, she became engaged to a law student, a match that she felt would please her parents, but one day she asked herself, "What am I doing? I could *be* a lawyer or a doctor instead of marrying one," and the engagement was broken off.

Although her parents had offered to pay for her brother Edward's college education, they refused to pay for hers, so she went to work for the Girl Scouts for a year and a half while attending Queens College. After that, feeling fragmented, depressed, unable to concentrate, and in acute distress over the direction her life was taking, she sought the help of the psychiatrist Joseph Meiers. He encouraged her to become a doctor. When, in the summer of 1964,

she was accepted at the Medical College of Pennsylvania, Henrietta, who could not even imagine her daughter becoming a doctor, said, "Joyce, for once in your life, listen to your mother. Be a teacher." When no financial help was forthcoming, Grandma Rose Malakoff, who had not been permitted an education beyond the eighth grade, began giving Joyce ten thousand dollars a year.

Six weeks before receiving her medical-school acceptance, Joyce had married Lance Wallace, a twenty-six-year-old graduate of the University of Washington, who worked as a researcher for the Crowell-Collier Educational Corporation. The following year, she transferred to Brooklyn's Downstate Medical Center, and in 1968, two months before her graduation, gave birth to Julie. She breast-fed the infant for fourteen months while simultaneously pursuing a rigorous "part-time" internship at St. Vincent's Hospital and Medical Center, in Manhattan, working, she said, "eight and a half hours a day, five and a half days a week, fifty weeks a year, for two years." In July of 1972, Wallace began a residency at the Nassau County Medical Center. When she worked in the Emergency Room, she often stayed through the night. In 1973, with the completion of her residency, Joyce Wallace's annual salary of twelve thousand dollars ceased. Under the pressures of work and lack of money, her marriage began to turn sour.



In September, the Wallaces separated, amid bitter arguments over money and responsibility. During the next frantic year, Joyce Wallace worked eighty hours a week. She tried to study for her Boards but had little time and less concentration. She failed the examination. The following year, still unable to concentrate for an adequate length of time, she went so far as to visit a hypnotist. After that visit, she settled down, and in June of 1976 she took the exam again and passed.

A HOLE in a heavy wire fence that surrounds a lot around the corner from the Bush Terminal, in an industrial area near the waterfront in the Sunset Park section of Brooklyn, is jagged and barely wide enough for a person to climb through. Ricardo Ayala, the Care-Van

driver, leans against the wire, enlarging the gap so Wallace can enter. Underfoot, trampled into the mud, is some Care-Van literature that was left there two weeks ago. The mud is a carpet in which are embedded shreds of clothing, sneakers, bottle tops, plastic cups, soda cans, cigarette butts, shards of corroded iron pipe, bits of food. To the left, supported by a fence of rusty corrugated metal, is a mountain of discarded truck and car tires. In the middle of the lot are two decaying trucks and two gutted cars, one with a mattress oozing brown cotton wedged into the back seat. Shattered glass from the windshield covers the hood. At the rear of the lot, under four ragged ailanthus trees, are three Dumpsters, black with orange trim. A chalky-complexioned girl in stained sweatpants and a T-shirt printed with the word "Hope" is struggling to close a makeshift door cut into the overturned middle Dumpster, which is inscribed "N.Y.C. Department of Sanitation 25, Coney Island Rubbish Removal, 282-6633." Inside are a single mattress, a folding chair with a gold velvet seat, and a rusted tin garbage pail filled with charcoal. A scrawny black cat with white feet, as emaciated as the girl herself, crouches in one corner. Wallace marches up and helps the girl push the heavy door. It doesn't budge.

"So how's it going?"

"You got anything free on the van?"

"You want a peanut-butter-and-jelly sandwich?" Wallace asks. "You want a test?"

The girl, who gives her name as Millie, follows Wallace to the Care-Van. The sandwich goes down fast. She refuses the H.I.V. test, saying, "I don't want to know."

"What if I told you that even if you were positive there's a lot you could do to keep healthy for a long, long time," Wallace says.

"I can't keep healthy now, but so what? Can you do it fast?"

As Wallace runs through the personal-information questionnaire, Millie answers willingly. She says she's eighteen.

Does she use condoms?

"Yes, when they're given to me. I like those mint-flavored ones for blow jobs." But she adds that most of the guys won't wear condoms, and she never uses them with men she knows. She says she'll do a blow job for two dollars or for "good"

## THE ALLIGATOR WRESTLER

The alligator waits in her aluminum case, shaped to hold the odd length of her like a troubled trombone. When her keeper cracks open the lid, anger leaches out in hopeless coils, like the roots of mangroves buckled and snarled.

Her mouth's tied. Two men heave her pale body, bear it to the clearing, and cut her free. Stunned by the dry grass and the trampled light, she hisses— is she dying of a punctured heart?

Her jaws unfold, pink and gleaming

and strange as a porcelain ironing board. She fills herself with sunlight till the keeper makes a move on her. Then she slams herself shut. Grabbing her snout, he sinks his fingers under her creamy jaw and straddles her.

Her throat is mild and naked as a glove. Flipped on her back, she's out cold. Now we admire her head, slim as a beak, her moon-white belly tiled like the floor of the shower in some dingy Y. "In this position,"

says her keeper, "the blood is leaving her brain. In this position, she could die." He nuzzles her cobbled ear, calling in the sweet tongue by which alligators choose each other. Her tail twitches. She's back. The show is over.

—NANCY WILLARD

drugs. She drinks alcohol, snorts heroin. Obliging, she rolls up her sweatpants to show Wallace the black bruises and craters on her legs from speedballing (injecting cocaine and heroin under the skin). "Do you think you can help me get rid of these?" she asks.

"Do you want to stop using?"

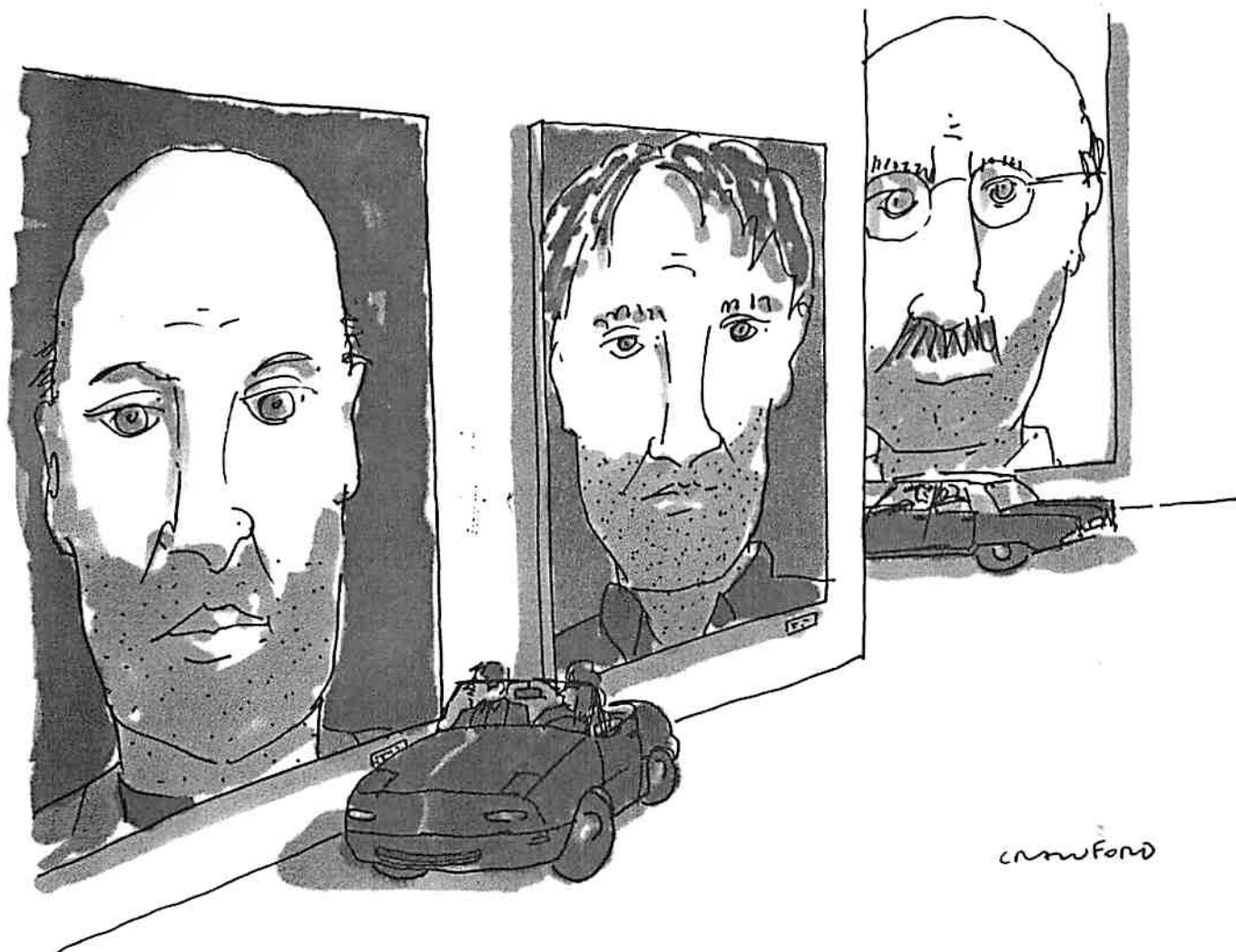
"I do. I want to stop. One day, I went all the way to Prospect Place to Phoenix House, 'cause I heard they could get me clean, clean in every way. I stood outside and watched people going in. It wasn't my type of place, if you know what I mean. They looked real high-up for me. I walked away." (Both Dr. Wallace and Dr. Mitchell Rosenthal, the president of the Phoenix House Foun-

ation, say that this is a typical denial response.)

Wallace hands her a card. "Here's our new 800 number. It's free. You can call us any time you're ready, and we'll pick you up and get you in somewhere. When you're *really* ready, call."

A woman in red tights approaches the van. She has matted black hair extending almost to her waist. She asks for an H.I.V. test, but as she is about to enter the van a slim man steps forward and jerks her back by the shoulder, speaking angrily to her in Spanish. Ricardo Ayala steps forward and talks Spanish to the man. He calms down, turns to Wallace, and says, "You give me the free condoms, I'll give you the girl."





*"He's big, but he's no Chuck Close."*

The questions begin. "Any sexually transmitted diseases?" Wallace asks the woman.

"No."

"How about hepatitis?"

"Oh, yeah, I had that."

"And herpes?"

"Yeah, yeah."

"Syphilis?"

"No. Maybe. I did get those three shots."

"How old were you when you first had sex?"

"I don't remember."

Wallace is a skillful interviewer. She now asks a question not on the questionnaire: "Was it your choice or his?"

The woman begins to cry. "Listen, Doc, guys have been doin' this to me since I was a kid, but now I've done something really stupid. I've been sharing works with a guy and he just died of AIDS. That's why I need the test. Can you help me?"

"Let's start with the test, and we'll take it from there. I want to know where you'll be, or you can call that 800 number to the office."

In the next hour, several men and women approach the van seeking free condoms. As Wallace hands a package to a burly, ruddy-faced, lumber-jacketed man, she remarks, "You've got two kinds in there."

"What for?"

"The lubricated are for fucking. The other kind are oral."

The man says, "Boy, oh boy, lady, are you straight up."

**I** THOUGHT even if I didn't see interesting diseases, I'd meet interesting patients," Dr. Wallace says of her medical practice, which she purchased in 1976 from a retiring physician, on West Twelfth Street in Greenwich Village. In 1978, she met Arthur Kahn, a stockbro-

ker now at Prudential Securities, and they married the following year. A son, Ari, was born in March of 1980, and Wallace became caught up in motherhood and her new practice. The charts left by her predecessor were for "all sorts of patients—families, old widows, and lots of gay men and lesbians," she says. "The sexual scene was wide open in those days. My practice was at least one-third gay men, and we'd order penicillin by the boxcar. I could diagnose a case of gonorrhea in thirty seconds flat."

By 1980, Wallace had begun to notice cases of unusual nonspecific lymphadenopathy (enlargement of the lymph nodes in response to disease) in her homosexual male patients. Rumors had begun to circulate about a new disease associated with decreased cellular immunity and affecting homosexual men. In March of 1981, Wallace examined a fifty-three-year-old homosexual male

patient who suffered from a variety of ailments. She noticed that his second and fourth toes had a bluish discoloration. "What did you do?" she inquired.

"I don't remember," he said. "I must have dropped something on them."

"But these two are blue, and the one in the middle is normal. The only thing you could have dropped is a two-pronged fork."

Wallace, who had accepted a position as an attending physician at St. Vincent's and had acquired admitting privileges, immediately put the patient in the hospital. There the chief of pathology, Dr. John F. Gillooley, did a biopsy and diagnosed Kaposi's sarcoma, a disease so rare that it occurred in approximately one out of five million people. That afternoon, Wallace called the National Cancer Institute for more information. They referred her to Dr. Charles Vogel, an expert on Kaposi's sarcoma, who had recently returned from Africa. She called Vogel and began questioning him. In passing, he mentioned that there were five cases of Kaposi's sarcoma in New York University Hospital. Before the week was out, Wallace had learned that there were twenty-seven cases of the disease in New York City. She was named among the researchers who published their findings in the *Morbidity and Mortality Weekly Report* of July 3, 1981—the earliest mention of this disease in connection with immunodeficient homosexual men.

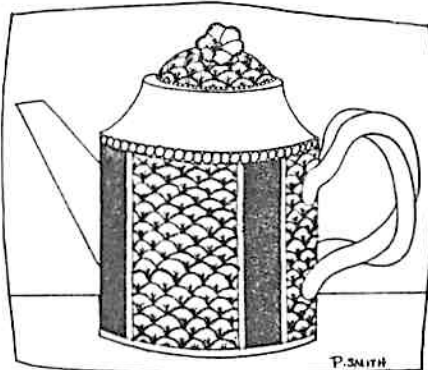
In early 1982, a New Jersey doctor who knew of Wallace's skill in treating sexually transmitted diseases and of her interest in women with multiple partners sent her "an interesting patient," a clean-cut, bright engineering student from the Midwest called Barbara, who had worked in a New Jersey brothel for three months the previous summer to earn her graduate-school tuition, turning up to twenty-five tricks a night—"twenty-five deposits of semen," as Wallace puts it. Worried about her co-workers' health, Barbara sent six of her fellow-prostitutes to Wallace.

In what was to become typical of her *modus operandi*, Wallace—having heard that the Department of Health, in order to study a new strain of gonorrhea, had been allowed entry into six Manhattan brothels—persuaded the investigators to draw an extra vial of blood from twenty-five of these prostitutes, so she could

study their T-cells, the lymphatic cells that initiate or halt an immune response. She also took blood samples from the seven private patients who worked in the New Jersey brothel. Unable to raise funds from traditional sources, Wallace applied to the Gay Men's Health Crisis, and was awarded one of its first grants—a thousand dollars to study the immune status of these women.

In this very limited sample, an immunodepression rate of nineteen per cent was found. One woman in Wallace's study tested positive for H.I.V. It was Barbara, whose sexual contacts after three summers' work in the brothel numbered fifteen hundred. Barbara died at twenty-three, two weeks after she graduated from engineering school.

In August of 1982, the *Journal of the American Medical Women's Association* interviewed Wallace. While other doctors were saying that this new disease would run its course, Wallace told the interviewer, "It's imperative that research be done on this problem now." She added, "And it is possible we're just getting the tip of the iceberg. So far we have found no way to reverse the immune problem." She began openly criticizing St. Vincent's hospital workers and administrators for the manner in which they were handling this threatening new disease—"hiding it, so that patients would not stampede from the hospital." Over the next few years, her relationship with the hospital's hierarchy was frequently stormy and strident. She suggested that St. Vincent's change the isolation status of AIDS patients, so that they could be given hot meals. At the time, they were served cold food on paper trays, with plastic knives and forks. The food was left outside the door, and desperately sick patients often had to crawl into the hallway to retrieve it. Doctors referred to this as "the grazing syndrome."



Wallace decided to apply for another grant, and received twenty-five thousand dollars from the Cancer Research Institute to pursue a study she devised on the immunologic parameters in women who practice anal sex. One of Wallace's bisexual patients agreed to take part in the study and arranged for nine of her friends to volunteer as well. These women belonged to a sadomasochistic group that attended twice-weekly S & M nights at the Saint, a sex club on lower Second Avenue, where they had anal intercourse with multiple partners. Some of these women admitted to upward of a thousand such encounters. But because there was no control group the study turned out to be unworkable. Unable to pursue it further, and with five thousand dollars left from her grant, she persuaded the institute to allow her to test her theory that women with multiple partners were at higher risk of contracting AIDS.

Wallace's marriage to Arthur Kahn had lasted less than four years; the two separated in 1983. (Today, Kahn says, "She's got a lot of energy—she's in constant motion. Her personality expresses itself in her immersion in her work.") During a routine office visit, one of her patients, Nicholas Christonikos, who worked at the United Nations library, asked, "How are you doin', Doc?" She replied, "Not bad, considering I'm going through a messy divorce." Christonikos recalls, "She'd been my doctor for ten years, but I could see that she was sending me a different signal. I called her that afternoon. Joyce is a force. She's extremely outgoing and dedicated, but sometimes she tends to outsmart herself in her zeal and rush to get things done. Life with Joyce was never dull; she worked continuously—a meal meant snatching a bite and out we'd go." With her new boyfriend at her side, Joyce Wallace hit the streets.

In 1984, the virus that causes AIDS was discovered. Subsequently, when an H.I.V.-antibody test became available, Wallace would walk up to a prostitute and offer her twenty dollars for allowing her to take a test blood sample and ask a few simple questions. "It was what they'd get for a blow job, and it took about the same amount of time." At first streetwalkers were wary, and in the first year only twenty-one agreed to be tested. But Christonikos learned to talk to the

pimps, and the women began to trust Wallace. In 1987, she studied sixty-eight streetwalking prostitutes, most of whom were on the Eleventh Avenue stroll.

The most ambitious study that Wallace undertook was one in which she received a grant of two hundred and thirty-eight thousand dollars, from the AIDS Institute of the New York State Department of Health, to become the principal investigator in a study of the rate of H.I.V. infection in former I.V.-drug-using streetwalkers and other women. In a group of a hundred and ten former female drug-users who showed no symptoms of disease, forty-six per cent tested H.I.V.-positive. These women reported an astounding lifetime mean of 3,062 sexual partners per individual. The women who were H.I.V.-negative reported only a third as many partners. Intravenous-drug use and promiscuous sex were proving to be a deadly combination, but the worst was still ahead. By 1987, New York City was caught in a crack epidemic.

Gena Corea, the associate director of the Institute on Women and Technology, has observed in her recently published book, "The Invisible Epidemic: The Story of Women and AIDS," that

early sexual abuse "is a setup for drug addiction." Joyce Wallace confirms this statement. "My studies show that over eighty per cent of crack-addicted streetwalkers have been sexually abused before the age of twelve," she says. Sex and crack exist in a symbiotic relationship. Crack is found to stimulate hypersexuality in men. Crack-addicted women are looking not for sexual excitement but for a way to feel briefly empowered or protected, or to wall out pain. In a classic Catch-22, the crack high, which lasts about twenty minutes, makes each sex act that a streetwalker performs bearable, and she performs such acts to get more crack: In a horrifying account of male domination Dr. Mary E. Guinan, of the Centers for Disease Control and Prevention, writes, "Women crack addicts are sometimes kept at crack houses and given the drug in exchange for sex with the dealers or clients. The women become virtual slaves to both the drug and the dealers." In these houses, a crack-addicted woman is often referred to as a "toss-up"—a woman to be used for sex acts, then "tossed" away. The women are gang-raped, forced to perform fellatio on every man in the room, and even to perform sex acts with dogs. In this atmo-

sphere, Wallace asserts, two out of every five of these traumatized women become infected with H.I.V.

AROUND the Care-Van, parked at the corner of Jerome Avenue and 182nd Street, the crack dance commences: a café-au-lait girl in a brocaded jacket moves spasmodically, her arms flying out at random angles, her eyes darting from the van to the street, where cars move slowly past. She wants an H.I.V. test, but she doesn't want to miss turning a trick. Standing on the corner, and leaning in to the mirror next to the driver's seat, another girl, her face a Benin mask, her breasts bare under an open red silk jacket, applies lipstick. Around and around the lipstick goes, until her mouth is a red gash. Then she begins picking at her face, her nails raking her cheeks. Outside the window, a rail-thin, sallow woman bobs rhythmically up and down, as if on a spring. "Hey, you gotta box of Kleenex?" she asks. "I wanna get this fuckin' cum offa my face."

Fran Davis, a case manager and a driver of the Care-Van, whom Wallace met through her Thursday tennis game, points to a group of women waiting to be tested. "See how they twitch?" she says. "What you see is a lack of muscle control, an automatic response. That's what crack does to them."

A transvestite comes to the window of the van, asks for a double helping of condoms, says, "Thank you, sweetie," and smiles, revealing great gaps where teeth are missing. A few minutes later, a girl rolls up her sleeve and extends her arm in preparation for the blood test; on the palm of her hand are thick swirls of scar tissue. She says that when she was a kid she did something "bad," so her mother's boyfriend held her hand on the stove. Around one o'clock, the last girl of the evening approaches the Care-Van. Her name is Carmen and she says she wants to get out of the van "real fast, 'cause I have to pee." She says she's on crack and nasal heroin, but wants to get off. "I need help, I'm



"Well, Stoddard, I think I've bounced enough ideas off you for one day."



emotionally messed up and I want to get off these streets." Allannah Thomas, who used to be Wallace's private-practice phlebotomist and is now the Care-Van manager, gives Carmen a card with the FROST'D toll-free number and says, "Make sure you phone me in the morning. If I'm not there, I'm in the bathroom—tell them to go in and get me."

IN 1985, after the *Times* wrote that Wallace had received a two-hundred-and-twenty-thousand-dollar grant, her landlord tripled her rent. Wallace went looking for a house where she could pull together the strands of her life, and bought a place on West Twelfth Street. Next to the laundry room in the basement, she set up an office for the writing of grant proposals. A medical office and an examining room were on the first floor. (Her private patients became accustomed to her habit of suddenly interrupting an examination to tend to her laundry or dictate sections of a grant proposal.) On the top two floors Wallace lives with Ari. (Julie lived there briefly before getting her own apartment.) By August of 1987, Wallace had broken up with Christonikos and was using a car service, testing prostitutes in the back seat while Ari often sat in the front next to the driver, doing his homework. After the *News* ran a sympathetic article about her, the company that makes LifeStyles condoms volunteered to buy her a van for fifteen thousand dollars and offered to donate condoms for her to distribute. After a full day's work, Joyce Wallace would round up her exhausted medical-office staff and take the Care-Van out on the Eleventh Avenue track, but soon the pace became too hectic even for her. Finally, she stored the unused condoms, put the van in a garage, and went back to her basement office to find funding for a proper program.



*"The caterers haven't shown up, the musicians are late, and the elevator is broken.  
We might as well be living in a Third World country."*

Under the strain of her many projects, Wallace's private practice had grown increasingly chaotic. Patients recall waiting what seemed endlessly in an office that was part Groucho Marx, part Grand Guignol. When one asked for a magazine, a receptionist suggested that perhaps she'd prefer "War and Peace." "On a typical day, dying men with AIDS would be sitting there, and an old lady having her ears cleaned would be screaming in the examining room," an employee recalls. "Prostitutes would drop in for their H.I.V.-test results. One locked herself in the bathroom, got high, and wouldn't come out." A new receptionist would arrive on Monday, go out to lunch, and never reappear. Along about Thursday, Wallace would bellow, "What ever happened to that girl?" Within the next year and a half, employees came and went. Word of mouth brought nurses from St. Vincent's, friends, babysitters, acquaintances. "All the world's a shtetl," Wallace says of her recruitment methods. In the basement, a team worked on grant proposals. When a woman who had been a copy editor at Harper & Row drafted a grant proposal to the

Centers for Disease Control, Wallace asked the advice of friends, patients, and her cleaning woman, Josephine. The proposal was due in Albany at 3 P.M. on a Friday. At 2:30 A.M., a cousin of Wallace's who was a biochemist, and whom Wallace terms "the country's leading expert on dental plaque," read the proposal and suggested that it should be completely rewritten. The revision was completed by 8 A.M., and Wallace hired a retired social worker to take it by train to Albany, but not before arguing that a hundred dollars was too much money to pay for a job that was worth only eighty. The proposal was received, and Wallace was granted two hundred and seventy thousand dollars for an eighteen-month study of prostitutes and the men who use their services. The study, which was named the Counseling, Testing, Referral and Partner Notification Project, mandated a massive outreach, budgeted at five thousand dollars a month. Wallace was to test a thousand streetwalkers a year.

Wallace reclaimed the Care-Van, and on the night of April 22, 1989, she set out on a journey up Park Avenue to

126th Street. After one or two prostitutes found the courage to visit the van, word spread at once that someone was giving out twenty-dollar bills. Suddenly, the street was swarming with people clamoring to get in, pounding on the windows and pulling at the door. When the phlebotomist locked the door, a prostitute inside the van became hysterical because she couldn't get out. Men and women climbed on the hood, pressing their faces against the windshield. Terrified, Wallace drove away, and people clinging to the van jumped or fell off. Finally, the Care-Van stopped to let the streetwalker out.

A later trip was also disastrous. Wallace drove the van toward the Hispanic section of Williamsburg, in Brooklyn, but soon found that all the signs were in Yiddish. She had taken a wrong turn, and she ended up in the midst of a Hasidic procession celebrating Succoth. The celebrants began shouting and making menacing gestures as Wallace made her escape.

After this rocky beginning, Wallace hired a Care-Van driver, a phlebotomist, and two H.I.V. counsellors, who had taken a four-day training course provided by the AIDS Institute. She replaced the twenty-dollar bills with McDonald's food coupons, and the van settled into a schedule, targeting thirteen prostitute strolls. Now that Wallace was in daily contact with great numbers of streetwalkers, she began to perceive their vast needs and the ineffectuality of our society in meeting them. She recalls the first time she encountered a streetwalker living in a Dumpster. The woman, who was covered with dirt and lice, told her, "If only I could get clean, then maybe I could get out of this life." Desperate to help, and believing that AIDS would eventually permeate every segment of our society, Wallace utilized her foundation, FROST'D, to meet streetwalkers' most urgent needs. Her goal was a drop-in center, where these women could acquire a mailing address and so begin the process of becoming eligible for social services, and where they could shower, get a meal, medical help, and counseling, and "start to remake their lives." A grant proposal went to the New York State Division of Substance Abuse Services, and in July of 1990 Wallace received a letter of intent saying that she was to receive two hundred and fifty

## A BOY'S LIFE

The thinnest pencil beam of light slices the tent's floor, cuts across the rice cakes and canteen, falters a moment on the butane tin, then halts altogether and goes out, inventory over. The bout of sickness—for home, for conversation even—settles into the familiar labored breathing of asthma and no one near. The map's X keeps insisting: You Are Here. If only someone else could see it—not a grownup, necessarily, another kid navigating the same terrain with the same compass points—but now the rain's begun and that practical twin has unrolled his poncho like a tarp, turned in (incongruous phrase) for the night and won't, in any case, be needed when it's light.

—LYNNE MCMAHON

thousand dollars annually for such a drop-in center.

Wallace found a four-story building at 175 East Houston Street, a former brothel that had been padlocked by police for a year's term. Behind an iron grille a staircase rose steeply to a landing that faced a wall where crude murals depicted interracial sexual intercourse. There were iron cages around the stairwell—"so the johns wouldn't toss the girls down the stairs," she explains. The smell of urine still permeated the place. Stained mattresses and filthy hand towels remained in each of the cubiclelike rooms. But Wallace considered the building's rental a bargain—four thousand dollars a month for the first three years of a ten-year lease. There was so much space that Wallace's plans expanded accordingly: in addition to a drop-in center, she would provide transitional housing for nineteen drug-free streetwalkers who wanted to make a new life. These rehabilitated women would clean their own rooms, cook for themselves, and inspire streetwalkers who visited the drop-in center to follow their example.

However, Wallace had not counted on the negative community reaction. Local residents had banded together to work with law-enforcement agencies to rid their Lower East Side neighborhoods of crime, drugs, and prostitu-

tion—a fight that had culminated in the padlocking of the very brothel that Wallace had just rented. As they saw it, in their area were concentrated one-third of all the borough's social-service agencies. They felt that they'd done more than their share, and that the problems had been largely solved. Now Joyce Wallace proposed to bring prostitutes back, not only from the immediate area but from all over the city. The residents protested to the local Community Board. In the summer of 1991, after she had removed walls and reconstructed rooms, Wallace began to realize that perhaps the drop-in center might not happen after all. "I started to wake up at three o'clock in the morning with a feeling of terror."

Troubles compounded: In December of 1989, Julio A. Martinez, the state commissioner for drug treatment, was forced to step down after it was found that he had allowed hundreds of thousands of dollars to be spent on inoperative programs, some of which were run by his friends, and that many expenditures had gone unrecorded. At the beginning of the nineties, proposals were put on hold, and programs were cut back dramatically. The elimination of two mobile programs left five Winnebago buses equipped for community service sitting unused in the Brooklyn Navy

Yard. Frank McCorry, the state's director of H.I.V. Services at the Office of Alcoholism and Substance Abuse Services, suggested that, in return for Wallace's giving up the idea of the drop-in center, his agency would contribute one of these buses, along with the two hundred and fifty thousand dollars annually that Wallace had been promised, so that she could service the streetwalker population from a mobile unit. Wallace had no choice but to accept. "He made us into medical gypsies," she says unhappily.

**T**HE Care-Van is parked at the corner of West Twenty-first Street and Surf Avenue in Coney Island. Across the street is the parachute jump, and in the distance one can see the boarded-up Thunderbolt roller coaster, a deserted Ferris wheel, and the Atlantic Ocean beyond. The day is warm, and a prostitute named Wanda and a man she introduces as "my husband, Carlos," are sitting on the steps of the Care-Van while Wallace stands nearby with a mobile phone pressed to her ear. Wanda wears a fake-raccoon jacket and black tights. A scar runs from her forehead to the top of her right cheekbone; part of her right eyelid is missing. Wanda says that while she and her husband were living in the streets she was raped, that she was pregnant at the time and lost the baby, and that the rapist took all their money and identification. Carlos doesn't

like her hooking, she says, and they want to get off the streets and into a shelter. "We want to go in today." Since Wanda says she was born in Puerto Rico and has a Social Security number, Wallace wants to put the couple in a shelter until she can get a Social Security card for them, a necessary step in making them eligible for social services.

Now Wallace is standing on the sidewalk, screaming into the mobile phone. "No, she won't leave him! What do you mean, they need a marriage certificate? Well, what about the Catherine Street shelter? Aren't there any shelters in this whole city that'll take them? Don't tell me that, Charlie. I don't want to hear that."

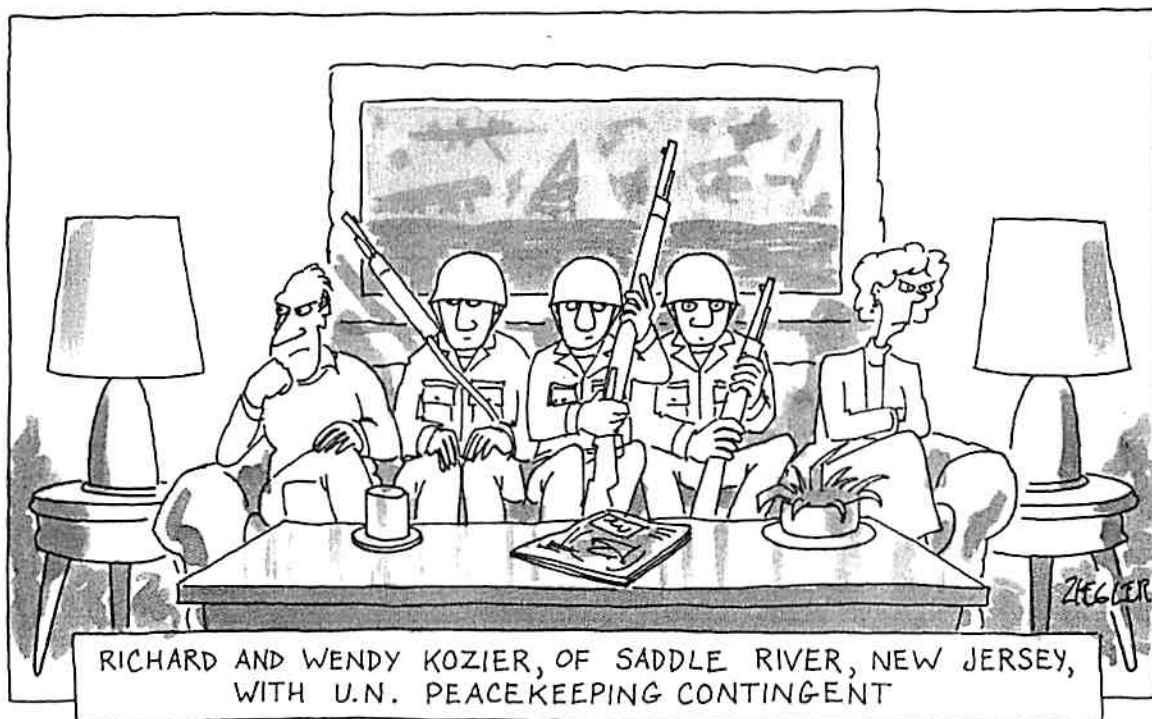
Wanda stands up. She seems resigned. "There's no way we can go in together," she says. "I need Carlos, he needs me. Forget it." Before anything further can be said, the two walk away at a fast clip.

Wallace is clearly frustrated, and furious. She begins dialling once again, and barks into the phone, "I want that chest of drawers picked up at my mother's house at Lake Mohegan. We'll be back with the van in two hours. Then Fran can go right up there and get it." This, at least, is one thing that Wallace feels she can control.

**W**ALLACE'S most unqualified success has been the Treatment Readiness Program, an alternative-

sentencing program at the Manhattan Criminal Court, at 100 Centre Street, which she feels combats the insensitivity and "revolving-door justice" meted out by our criminal-court system. In 1992, there were 8,600 arraignments for prostitution in New York City. Twelve hundred dollars is the estimated cost of processing, from arrest to arraignment. In other words, more than ten million dollars was spent to harass streetwalkers by jailing them, churning them through the courts, and then turning them back out onto the streets. Many prostitutes who are arrested say they have been arrested more than thirty times in a year.

The statute that is invoked prohibits soliciting for the purpose of prostitution. By law, an arresting officer must observe the streetwalker soliciting a customer, but great numbers of streetwalkers complain of being dragged out of restaurants and stores so that officers could meet their arrest quotas. If prostitutes resist arrest, the treatment is often harsh. At 2 A.M. one day in November, a streetwalker named Aires sat in a 100 Centre Street courtroom waiting for her papers to be processed. Her grossly swollen right hand was wrapped in a bloodstained scarf, and her ankle-length coyote coat was stained with tar. The arresting officer, she said, had chased her down the block, knocked her to the pavement, then yanked her up by her hair, and dragged her to a waiting van. "How fast





# WHACK!



can you run in five-inch heels, anyway?" she asked ruefully.

A few minutes later, Aires stood at the rear of the courtroom engaged in quiet, intense conversation with a young, blond, crew-cut officer. When she returned, a friend asked, "What was that all about?"

"He wants me and Liz to work a stag party for him next Friday."

With so many prostitutes arrested, the system has been honed to bureaucratic perfection. Streetwalkers' fingerprints are sent to Albany by Fax-IV, a high-speed digital system. Previously, fingerprints were beamed to Albany by an older technology, and if it was raining, or too many microwave ovens were in operation, the signal would be scrambled, which sometimes left streetwalkers in the pens for as long as three days. The new process is the result of a federal lawsuit challenging the city's right to detain defendants more than twenty-four hours.

Last October, conditions in the holding pens in the basement of the criminal-court building were also improved. A coat of cream paint covered the cage-like iron bars, there was fresh linoleum on the floors, and fans had been installed in the windowless space, as had two twenty-five-inch color televisions. Prisoners could reach a telephone by stretching a hand through the bars. There was a stainless-steel half-door in front of the toilet, and one small sink in each pen with a thin cake of soap resting on the side. (Before these improvements, the pens had been infested with rats and roaches, and the toilets had been exposed, so prisoners had to move a large trash can in front of the toilet for privacy.) The women were given cheese and bologna sandwiches, often moldy and inedible, and a cup of tea. Pregnant women could request milk. Two green vinyl gym mats had been added to each of the larger pens to accommodate pregnant women, but there were often so many pregnant women that some had to lie directly on the floor with the other prisoners. Since October, more mats have been added, and there is now a phone inside the pens. Some streetwalkers go to work with a track suit and sneakers in a gym bag, so that they will not have to sleep on the floor, or appear in court, in the flimsy garb of their profession.

Once the fingerprints are returned,

no matter what time of day or night, the prostitutes, as a group, are taken from the pens and marched upstairs through a brightly lit narrow tunnel that leads directly to the courtroom door. Once inside, they may wait several hours, seated on a bench, before being processed. This procedure goes on seven days a week, in three shifts around the clock.

Until 1990, when the concept of community policing was introduced and the criminal-justice system began to respond to the needs of neighborhood residents, streetwalkers were generally sentenced to "time served"—that is, the time they had been held in custody—and now and then to a fine averaging a hundred dollars. But that year the police initiated the Safe Streets, Safe City program, which attempted to address the law-enforcement needs of particular communities. A year later, under pressure from community groups, the Manhattan District Attorney's office announced that it was prepared to prosecute prostitution cases actively, and seek fines of two hundred and fifty to five hundred dollars and some jail time. Judges, however, being free to pronounce any sentence they saw fit, proved reluctant to follow this practice. One, Judge Gustin L. Reichbach, felt he was simply playing a role "in a vulgar spectacle. We'd drink lots of coffee, and at 6 A.M. someone would say, 'Bring out the girls!' They'd march in the streetwalkers and there'd be such comments as 'Bring it over here, sister.' Nobody was accomplishing anything." Reichbach decided to call Joyce Wallace.

Early one morning in March of 1991, Reichbach sentenced nine startled prostitutes to "thirty-six hours off the streets to think about what we're doing here." He suggested that they could voluntarily talk to Wallace, who was seated at a table in the rear of the courtroom. She handed out condoms and literature on AIDS prevention and drug rehabilitation, and told the prostitutes that the Care-Van was parked outside the courthouse for free H.I.V. testing. Seven of the nine women agreed to be tested. One prostitute started to leave the courtroom, then turned, approached the bench, and said, "Judge, I've been in court hundreds of times and this is the first time anyone ever treated me like a human being."

Reichbach and Wallace had provided the genesis for the Treatment Readiness Program. Reichbach was reassigned to

Civil Court, and Wallace, with Barbara Hoffmann, a Ph.D. candidate at the John Jay College of Criminal Justice, applied for a grant of a hundred and fifteen thousand dollars from the Medical and Health Research Association of New York, to administer a two-day alternative-sentencing program addressing the need for sex and AIDS education and drug rehabilitation.

**R**OOM 1600-A of the Manhattan Criminal Court is an airy chamber resembling a schoolroom, with a counter on which there are coffee, mugs, a container of milk, and four boxes of granulated sugar. (Substance abusers use great quantities of sugar in their coffee.) Gathered around brown rectangular tables are twenty-eight low-level-misdemeanor offenders (no felony offenses are permitted) who have been sentenced to the Treatment Readiness Program. Guy Wolf, a drug-treatment and counselling expert, holds up various types of condoms and explains their properties. He warns that H.I.V. can penetrate condoms made of animal membrane, and that the only reliable condoms are of latex, used with a water-based lubricant that contains nonoxynol-9. Oil-based lubricants such as Vaseline or hand lotion weaken condoms, he says.

"Or mayonnaise," one of the prostitutes says. "I had a date who wanted to use that."

"Why doesn't the F.D.A. get in on this and only approve latex condoms?" another streetwalker asks.

Barbara Hoffmann discusses the patterns of addiction, and provides information about the services available to aid in rehabilitation. Arrangements are made for those convicted of drug possession to visit a rehabilitation program the following afternoon, and for the prostitutes to meet for a discussion group.

"**L**ET'S face it, who likes to suck dick for a living?" The speaker, whose street name is Krystle (after a "Dynasty" character; often streetwalkers adopt names with celebrity or fantasy connotations), is a slight girl with pale skin, green eyes, and black-rooted hair descending into a long bright-gold ponytail. On Eleventh Avenue, her working clothes are a G-string and an unzipped, easily opened blue silk parka over bare breasts. Today, she wears a size-6 tracksuit jacket, tie-dyed in a melange of pas-

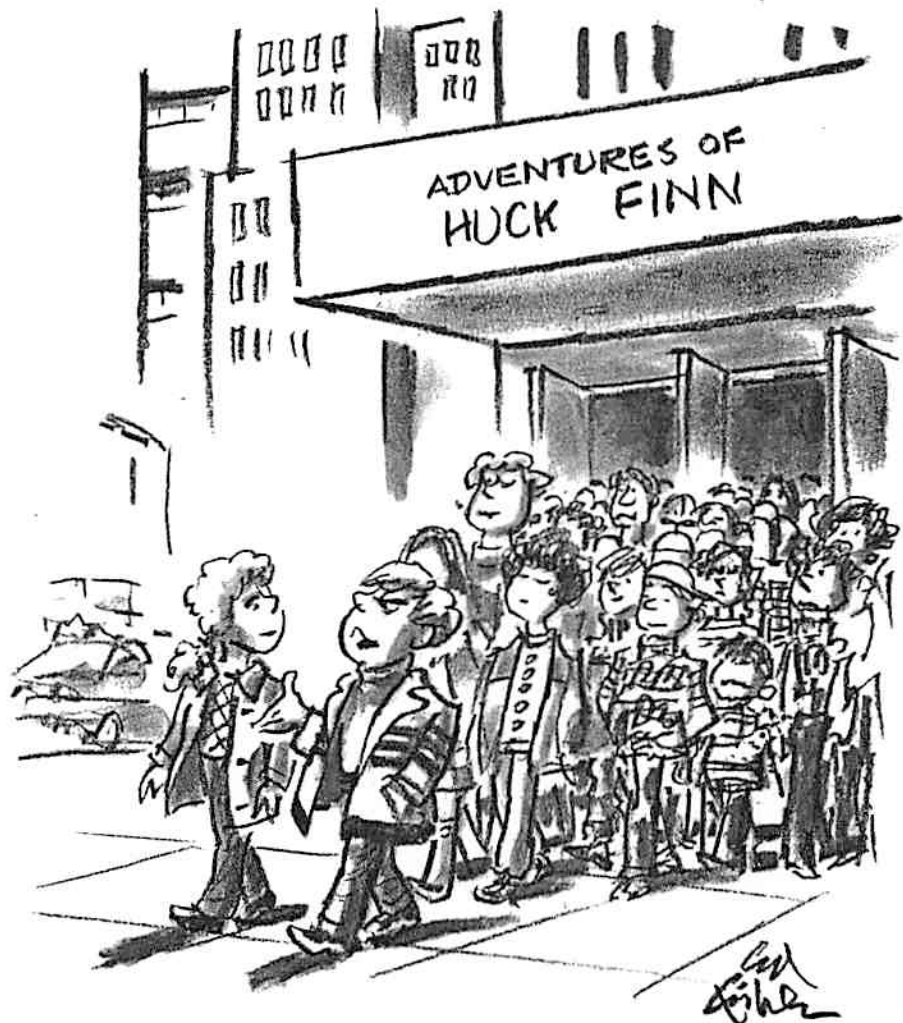
tel blue, aqua, and mauve, over aqua pants, aqua socks, and clean white Reeboks. Krystle lives in New Jersey, in an apartment with two "wife-in-laws"—prostitutes who share the same pimp. She has a daughter of two (who lives in Ohio with Krystle's mother), is drug-free, has a private doctor, likes to shop at Riverside Square Mall, and owns a 1987 Mercedes 560SL white convertible, which she says she bought with only three months' earnings. In the four years she has been on the street, she has been arrested more than seventy times. At the time of her first arrest, she told the police she was nineteen, but she was really fifteen. For her nineteenth birthday, she explains amid giggles, her pimp took her and her wife-in-laws to Great Adventure. "You shoulda seen him laughing and goin' on the rides. You wouldanah believed it."

Barbara Hoffmann and a female psychotherapist named Randy Kasper fre-

quently alternate as discussion leaders. "These women exist behind an emotional wall—they take drugs to preserve their illusions," Kasper explains. "They act as if their job is like any other. And it's frustrating. We can't do much in one session, but we can open the door a bit, so they'll know we're here when they're ready."

On the street, danger is omnipresent. If a prostitute disappears, no one asks any questions; many prostitute deaths go unnoted. The girls have their own rules, which they discuss in the Treatment Readiness Program: Never enter a car with more than one man in it. Check under the seat for a weapon. Make sure the keys are out of the ignition when you start. Tell him to put his hands on the dashboard, or one on your back and you hold the other. Make sure the doors are unlocked. Don't work if you're high—it can cause an error in judgment.

Streetwalkers' defenses are few. They



*"At last! A cinematic version of Twain's classic tale that truly represents our generation's ethos."*

explain that instinct means survival. "If a john doesn't smell right, I pass him up," one says, and another says, "Watch out if he offers too much money."

At a break in the session, Krystle tells, over a cup of coffee, how she was picked up by a john the previous evening: "We parked. I was in the back seat and he said, 'I want to give you more money.' Then he reached over and came back up with this big knife. 'I'm going to give you what you deserve,' he said, and pinned me under him. I thought, This is *it*, but I said, calmlike, 'Look, honey, I can't do you when you're on top of me—you sit up so I can.' He got up offa me, and I grabbed the door handle, opened the door, and got the hell out. You shoulda seen me run. Man, it was fuckin' fast!" Three times during the session, Krystle compulsively repeats this story.

Kasper asks, "How many of you would like to get out of this life?"

Maria, a Hispanic girl with striking, almond-shaped, amber eyes, and dark brown hair dyed to a rusty dull orange, speaks up. "It's not that simple. I got no skills, no schoolin'."

"That's right," says Shirley, a pregnant, freckle-faced redhead wearing a

heart-shaped locket that contains a snapshot of a smiling blond boy. "Don't ask me to leave the life. I can't do nine to five—I tried it for three years. I like the action. You get used to it. I like the life. If you asked me to change one five-dollar-an-hour job for another, I'd say sure, so what? But, let's face it, where else can I make this kind of money? Some weeks, I take in three thousand dollars, and that's tax-free." She giggles.

"What do you do with the money?" Kasper asks.

"Me? I'm going to open up a beauty salon as soon as I get ten thousand dollars," Shirley says.

"But if you make three thousand dollars a week surely you've earned that many times over."

"I guess, but something always happens."

THE iron grille at 175 East Houston Street has been replaced with a wood door. On the first floor, to the left of the narrow staircase, is a large office. Its center area contains a small refrigerator, a counter, and a copier. To the rear are two more offices. Vivid floral paintings decorate the walls. From the floor above, the incessant pounding of reno-

vators can be heard as they install an extra bathroom. Unable to find funding for transitional housing for drug-free streetwalkers, Wallace has instead managed to get a five-hundred-thousand-dollar grant to house fifteen homeless people with AIDS.

In the back office, Allannah Thomas is on the telephone trying to place a streetwalker in detox. None of the centers she calls has a place, but, finally, St. Luke's says that it might have a bed if her client comes in tomorrow between 6 and 6:30 A.M.

"There's a bottleneck in detox," Wallace says. Like much else concerning social services, the problem is complicated by the fact that most drug-treatment facilities do not accommodate homeless streetwalkers. Detoxification facilities are effective for heroin addicts only. Some agencies feel that even heroin detoxification is an unnecessary step, in that one can go immediately into a methadone program, but for streetwalkers who have no place to live a detox bed provides a safe harbor.

Detoxification itself is the last step in a long bureaucratic process—one that few streetwalking prostitutes complete. The majority of these women have none of the necessary paperwork: no Social Security card, no Medicaid, no way into the system. To qualify for Medicaid, a citizen must first secure a birth certificate—if she is a native, from the Division of Vital Records of the City of New York; the fee is fifteen dollars. She has to get a Social Security card; it takes four to six weeks by mail, or standing in line at the local Social Security office. Of course, one must provide an address, and for the homeless this becomes a problem. Once these documents arrive, an appointment must be made (and not broken) to secure a letter stating that Medicaid is being processed. Only then does one become eligible for most detoxification beds. During this time, efforts may have been made to put the streetwalker in a shelter—one in which people are not shooting heroin or smoking crack.

The same red tape applies to H.I.V.-infected streetwalkers. Services are hard to come by until AIDS is full-blown (after which the women live an average of fifteen months). At this point, Wallace may give a streetwalker a complete physical and fill out an M-11q form



*"If this will help your ratings, Jay, I think your listeners would be interested to learn that while I was breaking into show business I constructed an A-bomb, which I dismantled after I got my first major part."*



from the Office of Home Care Services. If it indicates that one of the stipulated conditions is in evidence, she now qualifies for assistance. But FROST'D's outreach workers tell of entire days spent accompanying streetwalkers to the various agencies that they could not hope to negotiate on their own.

**I**N the space of nine months, Wallace's organization expanded from a small research-and-humanitarian effort administering one project to a multipurpose service agency. The growing pains have been acute. One FROST'D board member, an ex-prostitute and ex-heroin addict who also works with a prostitute-advocacy organization, says of Wallace, "Joyce is the quintessential Jewish mama. Metaphorically, she runs everything out of her purse. You could just as soon see her reach in for a condom, a kid's lollipop, or an aspirin. She wants to do everything, and right away. She can't prioritize or delegate responsibility—she's all over the lot, burned out by death and responsibility. She doesn't believe in the establishment, because it's failed her. But what she has is a vision."

Dr. Mathilde Krim, the chairman of AmFAR, the American Foundation for AIDS Research, has known Wallace since the early eighties. "Wallace never worked within an institution," she says. "She has trouble letting go of certain details. She's tempted to do too much. But when you see that population you do want to do it all, and they need so many things: medical care, clean clothes, counselling, job training, AIDS education. The list is endless."

In June of last year, Wallace received \$17,448 from AmFAR, as the first payment on a seventy-thousand-dollar grant to operate a needle-exchange program. However, AmFAR personnel who made site visits to the Care-Van submitted critical reports, questioning not only whether the Care-Van staff could properly administer syringe-exchange services but also whether the services they already provided were efficient. In No-



*"Well, at least he died doing what he loved best—flippin' the bird at some eighteen-wheeler on I-95."*

ember, the grant was suspended for a period of six months, after which AmFAR will schedule another visit to determine whether the areas of concern have been addressed. Also, the operation of the Off the Street Mobile Unit has been delayed for a year and a half by red tape, vandalism, and just plain bad luck: when the Winnebago made a recent trip to the Hunts Point market, its heating unit was still inoperable and a water tank for its shower needed cleaning and repair. But the streetwalkers welcomed the sandwiches, warm sweaters, and counselling that were provided. On the Winnebago are Social Security and birth-certificate forms that will be processed by FROST'D personnel, thereby moving streetwalkers through the system.

The logistics are formidable, but logistics aren't the only problem. In trying to help these women, activists are also trying to repair core problems of society—sexual abuse, drug addiction, legal malfunctions—that may be irreparable. It's little wonder, perhaps, that the workers can become abrasive, opinionated, and extremely annoying to scientists, who pride themselves on methodological purity, and to administrators,

who prefer bureaucratic steadiness to imtemperate zeal.

"Maybe I should take a course in administration," Wallace says during a telephone conversation. Nevertheless, she feels that things are beginning to fall into place, and she still has utopian plans for the future. "I am going to have a drop-in center somewhere. I have permission from Community Board 4, but so far I have no money. There should be drop-in centers near every stroll—at least seven of them. And I want a safe house—an apartment in a nice building with six or eight beds and a resident manager. There's a real need for an emergency medical center where streetwalkers, pimps, drug addicts—any people who feel they might harm themselves or others or commit a crime—can get immediate attention. Wait a second—I've got to put some clothes in the washing machine." Several minutes pass before Wallace comes back on. She resumes as if nothing had happened. "That'll cost two and a half million dollars. Let's see, I have to apply under Article 28 to have FROST'D licensed as a health-care provider, and then maybe I can get a million and a half from the Rockefeller Foundation. Do you know anyone there?" ♦