

## Elizabeth Waters: health activist

*The whole AIDS movement is very middle class.  
People operate in their own comfort zone.*

BY ANNDEE HOCHMAN

**T**his is why Elizabeth Waters works in health care: because 13 years ago, when she was pregnant with her daughter and living on welfare, bad health care put her life in jeopardy.

Then good health care — from a small clinic run by a collective — saved it.

### Profile

After her daughter was born, Waters began volunteering at the Fred Hampton Clinic (later the Fannie Lou Hamer Clinic) because she wanted to repay the staff for their commitment, for saving her life. The work showed her how critical health care should be, especially for poor clients with few resources. More than a decade later, she's still involved in the field.

At the end of a packed day, Waters sits in her tidy office at the Westside Clinic, where she is operations supervisor. She's dressed in tailored navy blue, her hair cut in a wedge over expressive eyes. The offices are hushed after five o'clock; the only sound is Waters' smooth voice, talking about health care and racism and downward mobility and class sensitivity. Exclamation marks creep into her voice about as often as her roots-revealing New York accent — which is to say, not very often. It's not that you can't imagine her angry, raising her voice; it's that you imagine she saves it up for the right occasions.

Waters does not mince words, though.

Her message, essentially, is this: people need to think about other people, not just themselves, not just people who look just like them. Pretty basic. But Elizabeth Waters sees people ignoring it time after time; even people who should know better. Especially people who should know better. So she will repeat this message, time after time, even when she's sick of saying it, until people hear. In the meantime, she will live out the principle in her own life, in her work. To show that it is possible. To show that it's right.

"When I worked at Fannie Lou Hamer, we gave people quality health care, and we did a lot of stuff to empower people, to let them know they had a right to be involved in decisions concerning their health care. In this clinic, also, that happens a lot. We have what are called triage nurses, or advice nurses. They might see a client and give him a Bandaid, and that will be well within what they're supposed to do. But if the person has been a victim of rape or is without food or needs a place to live, they deal with all those aspects, too. They'll spend an hour with one client, sometimes.

"One of the areas I would like to work in more is getting people to see what a priority health care is. I think it's something that we all take for granted. When you're talking about people who feel disenfranchised or feel powerless, in the scheme of things health care does not seem like a major issue. But it really is. So you see a lot of movements and community leaders talking about other issues. Health care is seldom up there, unless you have a health care professional involved in a leadership position.

"With AIDS, the focus depends on who



Photo by Anndee Hochman

you're talking to. For political groups, it's a political issue. If you're talking about health care professionals, it's a health care issue. For me, the primary issue is health care. Who has access to health care? Most of the people who are at risk, particularly when you talk about IV drug users and people of color, don't really have access to health care.

"With the Oregon Minority AIDS Coalition (OMAC) what we're doing primarily is trying to bring the information to people of color, to say, 'You really are at risk.' Amani [Jabari] and I, who basically started People of Color United Against AIDS [precursor to OMAC] kept hearing 'We're not seeing the numbers.' And of course our response was, 'We don't want to see the numbers.' This is about prevention. Unfortunately, that's not how it's handled when you look at funding.

"The message to communities of color, from the work we did at OMAC, was pretty much to say to people, 'You are at risk.' Because the informational level of people-of-color communities is the informational level where white gay men were eight years ago. Eight years ago you couldn't go in with this really scary stuff. People want you to take the message that you're giving to gay men now and put different-color faces on it. You can't do that because people are not at the same informational level.

"It's really crazy-making and frustrating because what I'd like to do, and what people who are AIDS activists would like to do, is go in and say, 'God damn it, you need to protect yourself. Do this!' But it's not going to work. You have to deal with people at the level they're at.

"I certainly don't see any of the existing AIDS organizations really doing very much in terms of including people of color. If you look at AIDS programs, regardless of where they are, they typically are all white, their staff is all white, with maybe one or two people of color. It's real easy to beat up on the state Health Division, on the ad campaign, but I think people need to look at what it is they're doing.

"I don't think people are sitting back deliberately saying, 'Let's not include people of color.' I think it happens by omission. What happens is that people look in the mirror and assume that everybody thinks and looks and acts like them. It goes beyond the issue of race; it's also a class issue. If I were a working class or a street person I could not relate to a lot of the material that's out there. It is not set up for people who aren't literate. Everything is word-focused. It certainly

leaves out people who are hearing impaired.

"I think the whole AIDS movement, as it exists, is very middle-class. Part of the reason for that is that people operate in their own comfort zone. I can understand that. One of the things I really like about OMAC is that what we have said is, 'We can't be all things to all people.' There are certain areas we don't know about, that we can't work in or have any desire to work in. So we need to bring in the experts in those areas. And if they are women who have been involved in prostitution, or people who've been involved in IV drug use, they are the people best to develop those messages. Not us.

"I go into the prisons and work with those guys in there. Hopefully they will develop some audio-visual stuff, delivering a message to reach people who are like them. It's not effective for me to think that I can go into a shooting gallery and people are going to listen to me. They're going to say, 'Get the fuck out of here.' It's not going to work. I know what my limits are.

"It's hard to work with people who are different than we are. We want to surround ourselves with people who are like us. I mean, I want to do that, too. But to me, the issue becomes: do I want to get this message out, or do I want to feel comfortable?

"You see that in all movements. Look at the women's movement, look at the lesbian and gay movement. People — especially people who are oppressed — think just because they have been oppressed, that they should just focus on themselves and not look at other people. When you take people who feel powerless, although they fight, they still feel powerless. They want to feel a sense of power, as opposed to feeling *powerful*. I think the difference is: to feel a sense of power means you want to do something to someone or have something over someone. Whereas if you're feeling powerful, and you can assert yourself and have control, then you don't have the need to do those kinds of things to people.

"The other thing I've seen is this whole thing called 'let's be downwardly mobile, let's dress as bad as we can, let's ostracize and criticize women who have money or professional women.' It's like this obligation to being poor, thinking that if you're poor, you're politically correct. Which is another crazy-making thing for me. No one who's poor wants to be poor. Being poor doesn't give you any monopoly on being culturally sensitive or humane. I see that a lot in the lesbian community.

"I don't think people should be judged by what they have, or how they look, or what their jobs are. It's so basic. But it happens all the time. A lot of that comes out of people feeling powerless. It's really easy for us to beat each other up.

"It's very basic. If the issue is human rights, then you look at all the people who are affected by that. If the work you're doing is going to free you individually, or as a group, you need to think about the person next to you who looks different from you, how it's going to free them. If it's not going to free them, then you need to expand what you're doing. You can't assume that because you are advocating for lesbian and gay rights that

that's going to benefit people of color who are lesbians and gays because they're still going to be discriminated against on the basis of race. Or that it's going to benefit lesbians because they're still going to be discriminated against on the basis of sex.

"I think we all need to broaden our perspectives. I certainly have worked with so many different movements. I've been involved in every movement that there is to be involved in. And I have come back to a place where we're talking about human rights. We're talking about basic human rights for people. I think it's okay for people to have a focus, but if your focus somehow doesn't bring in the broader issue, then I don't think it will ever work.

"I don't think it's any impossible thing to accomplish. I just think a lot of people want to think about 'What can be done for me and my community? Fuck all the other communities.'

"One of the reasons I do AIDS work is that, in spite of all the sad things that happen with AIDS, the one positive thing is that it has potential to bring many communities together. You see that when you go to conferences; there are people who ordinarily would not be in the same room talking to each other. I think it's unfortunate that it's taken such a tragic occurrence as AIDS to do that. But potentially it will unify people who have never been unified.

"I think a lot of activists use social issues to escape dealing with who we are and working out our own shit. And so we want to save everybody else. Once I got over my missionary complex and no longer had a desire to save anybody but myself, I sort of calmed down and said, 'I don't need to be all these places.' I started pacing myself. I still overextend sometimes, and I have to pull back and say, 'What are you doing?' But I think I've done a lot better. It's learning to say no, learning to say to people, 'I'm not the only black woman in Portland. Find another one.'

"At one point, I did burn out. I burned out and became very disillusioned because I was very, very naive. I just thought people who are oppressed would not mistreat people. I got to the point where I said, 'I don't want to work on anything, I don't care about anything, I'm not going to do anything.' That came a lot from being hurt. It's not easy to go and always be angry, to feel like I'm fighting to raise issues about people of color. I just got really tired of it. And regardless of what you say, at some point you start to think, 'Is it me? What's going on with me?' And so you internalize a lot of that stuff. So I got very burned out and felt like 'Nothing matters; I just want to take an annual vacation. I don't want to do this.' And I tried that.

"Then I went to the first Martin Luther King celebration that they had at the state Capitol. And I was sitting there. I was very moved by the whole thing. What I realized was that I was there because of my mother. When I was in the second grade, my mother used to drive us to picket Woolworth's. We wanted to watch cartoons on Saturday afternoons. But she took us there from a very young age. And she told us, she ingrained in us, 'You have to stand up for your rights.' That is very much a part of who I am." ▼

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