

prison health news

-better health care while you are in and when you get out-

Issue 14, Summer 2012

Who We Are...

We are on the outside, but many of us were inside before... and survived it. We are formerly incarcerated people and allies talking about health issues and trying to bring about a positive change for all people who are in prison now or ever have been in the past. This newsletter is about all of us.

We will be talking about health issues. For example, what is good nutrition? Where can you get services and information on the outside? We want to take your health questions seriously and break down complicated health information so that it is understandable.

We're also here to help you learn how to get better health care within your facility and how to get answers to your health questions. Don't get frustrated. Be persistent. In prison, it's often hard to get what you want, but with health information, it doesn't have to be impossible. Join us in our fight for our right to health care and health information.

Read on...

From,
Bernard, Gary, Gena,
George, Hannah, Kyle, Laura,
Naseem, Ralph, Samantha,
Stacey, Stan, Suzy, Teresa,
Theodore, Tre, and Tyrone



Freedom by Walter Ronkz, Safe Streets Arts

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write an article!

We know that everyone who reads this newsletter will have questions or their own story to tell.

If you want to write an article on something you think is important for prison health, send it and we will consider publishing it in *Prison Health News*.

Tell us your story of struggling to receive quality health care, either for yourself or others. Do you have tips and tricks for staying healthy and taking care of yourself behind the walls that could be useful to others in the same position? Or perhaps you are an artist or a poet and want to share your work with *Prison Health News* readers.

You can also write us first to discuss ideas for articles.

If you want your full name kept confidential, you can sign your article with your first name or "Anonymous."

Please keep in mind that we may make small changes to your article for length or clarity. For any major changes to your work, we will try to get in touch with you first.

To submit your work, or if you have more questions about any health issues or anything you read in *Prison Health News*, please write us at:

Prison Health News
c/o Philadelphia FIGHT
1233 Locust Street, 5th Floor
Philadelphia, PA 19107

Birthing Behind

by Victoria Law, with

"I never thought of advocating outside of prison. I just wanted to have some semblance of a normal life once I was released," stated Tina Reynolds, a mother and formerly incarcerated woman. But then she gave birth to her son while in prison for a parole violation:

"When I went into labor, my water broke. The prison van came to pick me up, and I was shackled. Once I was in the van, I was handcuffed. I was taken to the hospital. The handcuffs were taken off, but the shackles weren't. I walked to the wheelchair that they brought over to me and I sat in the wheelchair with shackles on me. They re-handcuffed me once I was in the wheelchair and took me up to the floor where women had their children.

"When I got there, I was handcuffed with one hand. At the last minute, before I gave birth, I was unshackled so that my feet were free. Then after I gave birth to him, the shackles went back on and the handcuffs stayed on while I held my son on my chest."

That treatment, she recalled later, was "the most egregious, dehumanizing, oppressive practice that I ever experienced while in prison." Her experience is standard procedure for the hundreds of women who enter jail or prison while pregnant each year.

Some years after her release, Reynolds started Women on the Rise Telling HerStory (WORTH) to give currently and formerly incarcerated women both a voice and a support system.

Bars

Tina Reynolds

In 2009, Reynolds and other WORTH members took up the challenge of fighting for legislation to end the practice of shackling women while in labor in New York State. At rallies and other public events, formerly incarcerated women spoke about being pregnant while in jail and prison, being handcuffed and shackled while in labor, and being separated from their newborn babies almost immediately. Their stories drew public attention to the issue and put human faces to the pending legislation. That year, New York became the seventh state to limit the shackling of incarcerated women during birth and delivery.

This past March, Arizona became the sixteenth state to pass anti-shackling legislation. Thirty-four states still lack legal protection for women who give birth while behind bars. In Georgia and in Massachusetts, formerly and currently incarcerated women and reproductive rights advocates are currently pushing for legislation to ban the shackling of incarcerated pregnant women during transport, labor, delivery and recovery.

Recognizing the power of women's individual stories to enact change, WORTH has launched Birthing Behind Bars, a project that collects stories from women nationwide who have experienced pregnancy while incarcerated. Birthing Behind Bars ties women's individual experiences to the broader issues of reproductive justice (or injustice) behind prison walls and helps push a state-by-state analysis of

the intersections of reproductive justice and incarceration.

WORTH wants to hear your stories of pregnancy behind bars. What was medical care like? Did you birth your baby while incarcerated? What was it like to hold your baby for the first time? What happened in the moments after?

To share your story, write to:
Women on the Rise Telling
HerStory (WORTH)
171 East 122 Street, #2R
New York, NY 10035

If you have access to a phone line, you can also call in your story anytime on our toll-free hotline: 877-518-0606. (Don't worry if you make a mistake, we edit all the calls.)

Let your friends and family members on the outside know about our campaign! Ask them to visit our website and sign on to our pledge to end shackling and other reproductive injustices behind bars: birthingbehindbars.org

Are you currently pregnant and behind bars? Not sure how to advocate for yourself and your baby? WORTH's Sister Inside project reaches back to women inside prison walls to help them with advocacy and leadership development. Sister Inside currently focuses on New York State women's prisons, but we are looking for ways to assist women nationally with relevant information, education and support. Contact us at the above address for more information.

Information on Asthma

by Naseem Bazargan and Mana Pirnia

What is Asthma? Asthma is a common, lifelong health condition that can be dangerous and even deadly if not treated properly and quickly, and it affects many incarcerated persons across the country. In New York alone, there are more incarcerated people in state prisons suffering from asthma than from HIV, hepatitis C, hypertension, or diabetes. Asthma causes your lungs' airways to swell and narrow, which leads to wheezing, coughing, chest tightness, and shortness of breath, making it difficult to breathe. Asthma usually starts early in childhood, but it can develop later in life if you have severe allergies. Although some children grow out of their asthma, there is no known cure. With proper self-care and medical treatment, however, asthma is manageable, and serious asthma attacks can be avoided.

If you are asthmatic or if you are housed with someone who is asthmatic, it's smart to know and be able to recognize the symptoms of an asthma attack *early*; doing so can help save your or your cellmate's life.

What Are Symptoms of Asthma? Asthma attacks can range from a mild nuisance to a serious emergency. Here are some symptoms of an asthma attack to look for:

Mild asthma attack: wheezing, breathing faster, faster heartbeat, and losing breath when walking.

Severe asthma attack: loud wheezing, losing breath when resting, hunching forward to breathe, inability to

speak in full sentences, using stomach muscles to breathe, and/or extremely fast breathing and heart rate.

An asthma attack becomes a serious **emergency** when the person turns blue in the face or lips and is having extreme difficulty breathing, anxiety, and rapid pulse and sweating.

Note: If you think you're having symptoms of asthma for the first time in your life, see medical. You may be showing early signs of COPD (chronic obstructive pulmonary disease), which is a lung disease similar to asthma that also makes it difficult to breathe. Smoking is the leading cause of COPD. It's important to get the right diagnosis from your doctor, so be sure to see medical if you're experiencing shortness of breath, wheezing, and/or many respiratory infections (like pneumonia or the common cold).

What Brings on an Asthma Attack? Asthma attacks can be brought on by many different "triggers" or allergens. The triggers are often chemicals in the air or food, extreme weather (most often cold weather), exercise, emotional stress, mold, cockroaches, pollen, animals, tobacco smoke, dust, and respiratory infections.

How Are Asthma Attacks Treated? Asthma attacks are treated with two types of medicine: rescue drugs and controller drugs.

If you have mild asthma, you will most likely be prescribed an inhaler medicine to use only when you have symptoms, such as wheezing or shortness of breath. These quick-relief

drugs, such as albuterol, open up your airways immediately, making it easier to breathe. These medications are very helpful, but if you have to use them more than twice a week, you most likely need a controller drug.

Controller drugs are for people with severe asthma or those who experience frequent asthma attacks. They are used to *prevent* attacks, but they must be taken on a daily basis in order to work. If you are using a daily steroid inhaler to control your asthma, you must make sure to brush your teeth and rinse your mouth after each use. This is to prevent getting a yeast infection of the mouth and throat called thrush, which looks like a thick white coating on the tongue.

A very severe asthma attack may require going to the doctor or medical to get oxygen, breathing assistance, and maybe even intravenous meds.

What Do I Do During an Asthma Attack? If you or your cellmate is having an asthma attack, it's very important to stay calm. Try not to

panic. Use your rescue inhaler or whatever meds your doctor prescribed you to reverse the asthma attack. Try to breathe slowly and sit up; lying down will make it more difficult to breathe. If possible, get away from whatever trigger/allergen is causing the attack. Make sure to get to medical as soon as possible if your inhaler isn't helping, or if you're feeling drowsy and confused, having severe shortness of breath and chest pain, turning blue in your lips and face, and/or having extreme anxiety and difficulty breathing. These are signs of an emergency!

No matter how mild or severe your asthma, it's always best to know the medical staff so you can work closely with them to ask questions and make a plan in case of emergency. Knowing the ins and outs of asthma is the first step to being an advocate for yourself and others.

Continue to the next page to read about tips and tricks for managing asthma on the inside!

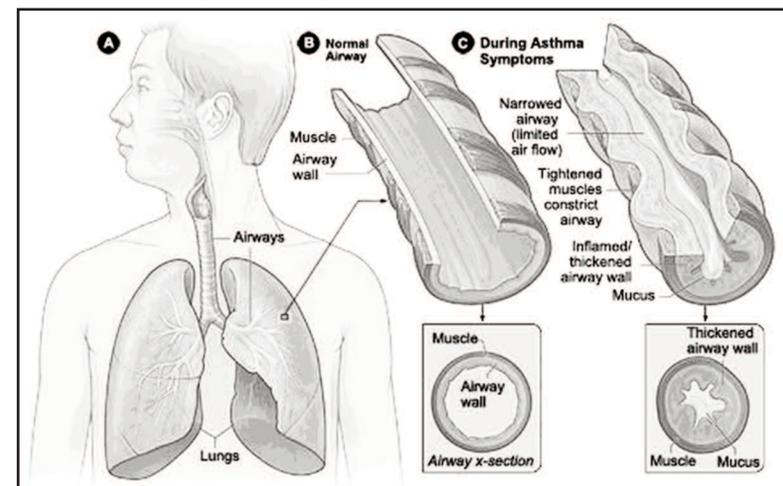


Figure A shows the location of the lungs and airways in the body.

Figure B shows a cross-section of a normal airway.

Figure C shows a cross-section of an airway during asthma symptoms.

Source: National Heart, Lung, and Blood Institute; National Institutes of Health; U.S. Department of Health and Human Services.

Managing Asthma on the Inside

by Naseem Bazargan and Mana Pirnia

While incarcerated, it's often difficult to avoid the allergens and triggers that can start asthma attacks. However, there are some things you can do to protect yourself if you are asthmatic:

Carry an inhaler: Let medical know from the very beginning that you are asthmatic. You should be allowed to carry an inhaler; just make sure it's labeled properly and has your name on it. You don't want it to get confiscated. This is very important, because an albuterol inhaler can save your life in case of an asthma attack!

Know your limits: If exercise triggers your asthma, consider using your inhaler 20 minutes before you participate in exercise activities.

Climb less: Ask if you can be housed in a lower tier and on the lower bunk. Less walking and stair climbing is better for avoiding asthma attacks. Sleeping on a lower bunk is best in case of an emergency.

Keep your area clean: Crumbs and food might attract cockroaches, which trigger asthma attacks.

Avoid chemicals: If you have to use chemical cleaning products, try to cover your mouth and nose with a cloth. If chemicals like tear gas are coming through the vents, use a damp cloth to block the vent.

Make a plan: If you have a panic button in your cell, find out if it is in working condition, as it can help in case of emergency. If it doesn't work, find out what you need to do to get help in an emergency medical situation like a severe asthma attack.

If your inhaler isn't working normally, put in a sick call and talk to the doctor to see if you need a refill or a different medicine.

Boost your immune system: Eat a daily diet of foods that are rich in vitamin E. Evidence shows that vitamin E promotes respiratory health, reduces inflammation, and makes your immune system stronger, which is good for asthmatics. Vitamin E is found in fruit, whole grains, leafy vegetables, kiwi, nuts, and vegetable oils. If you can't get these foods, try taking daily vitamins.

Avoid tobacco smoke: Smoking is bad for your health and especially bad for asthmatics. Even being around someone else smoking can trigger an asthma attack.

Take care of yourself: Keeping yourself healthy overall will help with your asthma and with any other illnesses you might have or may be at risk of developing.

If you have any questions about asthma, please write to us at:

Prison Health News
c/o Philadelphia FIGHT
1233 Locust St, 5th Floor
Philadelphia, PA 19107



Praying For Peace by Larry Walker,
Safe Streets Arts

Who Should Take HIV Meds & When?

by Naseem Bazargan and Teresa Sullivan

Making HIV treatment decisions can be challenging! Whether you are starting treatment for the first time, switching meds because of side effects or resistance, wanting to stop treatment or starting to run out of options, there is a lot to think about. You might ask yourself, how strong is my immune system? Are side effects too much to deal with? Are there people around me who don't know my status, and I wouldn't want them seeing my pills?

Every HIV medication has benefits and risks. They may reduce your viral load and strengthen your immune system, but they may also cause side effects (both short-term and long-term) and put you at risk for developing drug-resistant HIV. Fortunately, we have treatment guidelines to help with these decisions. Doctors and HIV positive community activists first wrote them to be the "standard of care" for people living with HIV/AIDS. In 1997, they became the Federal Treatment Guidelines. They were updated on March 27th, 2012.

The current guidelines recommend treatment for anyone who is HIV positive. In the past, they recommended treatment only for people with lower CD4 counts. Now, based on new research, experts suggest treatment for anyone who is positive, but the *strength* of the recommendation changes: **VERY STRONG:** Your CD4 count is below 350 or you are pregnant or have history of an opportunistic infection.

STRONG: Your CD4 count is between 350-500 or you have kidney disease or hepatitis B. **MODERATE:** Your CD4 count is higher than 500.

New research also showed that effective HIV treatment reduces the chances of transmitting HIV to your sexual partner. So the treatment recommendation is also "very strong" for people who are at risk of transmitting HIV to their partner.

Here are the **goals of HIV treatment** from the National Institutes of Health. Do your personal treatment goals align with these?

1) Reduce HIV related illness and death; 2) Improve quality and length of life; 3) Keep and/or bring back immune function; 4) Bring viral load down to undetectable; 5) Prevent HIV transmission.

Even though the guidelines say everyone who is HIV positive should be on medication, any decision about HIV treatments is still yours to make. When you decide to start treatment, you should be ready to stay on treatment. You may decide to focus your energy on other challenges right now, like your recovery, mental health, treating co-infections, or other more urgent situations. But remember, these meds can save your life. If you decide to delay treatment, monitor your CD4 count and viral load closely, and consider treatment if they get worse or you experience new symptoms of HIV. Work closely with your doctor. With proper treatment, you can live a long, healthy life with HIV!

Work on This

by Joseph Nusbaum

Today I am 47 and have now been incarcerated for 66 months (5 years and 6 months) because of years of negative behavior since age 13. When I was in county jails, I waited for counselors or volunteers to come to me and show me the way out of my negative behaviors. I began to realize that the counselors and volunteers knew nothing about me because I did not want to open up about my life. It took me two years to realize that only I can find my own answers to why I behaved in such negative ways.

There are so many organizations who will spend time assisting you through your rough life, misery, feelings of helplessness, addiction, and loss of employment. There is always someone in our life; loved ones, spouses, friends, workers, or just a stranger who will ask, "How are you doing today?" Many of us will say "OK" and be on our way to our daily routine. I realize that was my chance to open up and talk about what was making me sad. I did not believe people could help me change. I would not allow myself to trust others with the knowledge of my negative behaviors. But deeply I wanted to change.

First, I had to get past telling myself, "I am who I am." Then I had to invite myself into programs such as AOD (Alcohol and Other Drugs), NA (Narcotics Anonymous), financial groups, and counseling groups. I also had to get myself to read. I did not want to do anything but wait for all this to come to me and prove to me that these

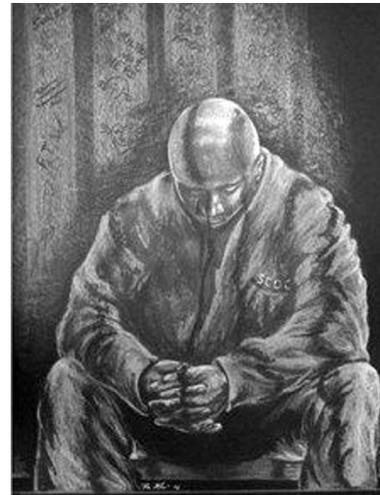
programs work. I had to get past telling myself these programs are useless. I have learned that the programs are only there to guide you toward positive thinking and positive behaviors. We all know we do not like other people or things controlling us, but in order to change and create a positive future for ourselves, we have to accept this guidance.

My next three years I went to these programs, I went to school, I went to counseling, and I retrieved books from the library. I also wrote to organizations for assistance for particular issues such as a home plan, job searches, and counseling within particular areas. I made positive steps for myself. It's not easy, and it's not fun, but I do ask myself, "Did I really like my negative behavior lifestyle?" My advice is that prison is no life. Open up and seek out guidance because "jail is a pail of nails ready to spill out if you don't find a way to hammer down your negative lifestyles." It may be enjoyable to get away with breaking laws, but being in prison takes a toll on what you miss and lose.

Some incarcerated persons have let prison life become part of them, and that is painful for me to see. I remind myself of days from my childhood, before incarceration, and how enjoyable the outside world is. I stay active in sports to keep my mind occupied about my health. I stay working to allow myself to know working is part of our life. I join educational programs to give me

knowledge in new fields related to jobs that may be available in my future. We need to do all this so we do not adapt to prison life. All this tough man/woman attitude of being a prisoner really is shameful, embarrassing and undignified, and it comes from a society that has you believing there are no second chances.

What we do here in prison allows us to create a positive future path, and we have to stay on that positive path, even on the days when your minimum is denied. We have to stay positive no matter how many incarcerated persons come and go or how many come back again, because I can only imagine that in life outside prison walls, we can be better men and women. We must have faith that we are human and we have a choice. We can change. I know I'm a changed man. Even though I was denied my minimum parole, I will not stop improving my life, and I hope you do the best you can too.



Solitary Reflections by Ras Mosi, Safe Streets Arts

Dandelions

by Mary Bowman

A dandelion in the midst of rose bushes would stick out like a sore thumb to ignorant souls
But I know the road this dandelion endured

This weed that all gardeners want to destroy is more appreciated by God than any seemingly beautiful bush of roses

Though that misunderstood dandelion won't for long last
Let it be known that God gave it the role of the outcast for divine importance

My mother was a dandelion in the midst of roses

Ignorant of her purpose she uprooted her soul and unknowingly left herself for dead

It has been said that my mother when above the influence transmuted broken hearts into smiles
All the while dying on the inside
AIDS didn't kill my mother

It put her at rest
Now this song bird whistles in the key of silence

And I the latter of five write poems documenting the struggle unknown to my family

The sickness she denied lies in my blood with a lesser value
People speak I don't know how you can live with knowing nothing but owning the growing disease that your mother for so long fought

But see that's the difference between a rose and a dandelion

(continued on page 10)

Dandelions

by Mary Bowman

(continued from page 9)

Roses were created with thorns to warn hand approaching without caution

Dandelions were not given that option But they were created by an all-knowing God

And that all-knowing God created dandelions with the strength to withstand ignorance and hatred

Dandelions live in this matrix of life understanding the price

Roses live like the world was handed Dandelions take the world and won't

leave a rose stranded

But my mother died before she got the chance to realize that dandelions are blessings in disguise

She I dare say died before her time

That thought lingers in my mind conflicting my belief in the divine

My mama raised me in the faith that the day God sweeps you away is a day proclaimed way before the manifestation



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A Mother's Love by Joe Upchurch

But I can't help but experience devastation knowing nothing about the woman who carried me toting guns in the defense of my father

It is even harder knowing nothing about her but knowing the reason the hospital has become my second home is because this dandelion chose to roam with the buffalo

But I seek serenity in the fact that she just didn't know

That she a dandelion was just as beautiful as a rose

And I will go forth knowing my purpose as a dandelion

This life is worth all the crying and all the dying I have to do just so someone in my shoes can live

I will gladly give myself as the sacrifice if it means that all the dandelions in the world become viewed as more than the consequence of sins behind closed doors

You can lay me on my back and present me life less to God if it means that dandelions with unseen scars will not be viewed as odd But as gifts from God to show the world that beauty lies not in the petals of flowers but in the power of unconditional love

And in the strength of the untouched, un-hugged, sometimes unloved but most important of all un-budged dandelions

Mary Bowman is a 23-year-old poet, singer, and author living with HIV, and is the founder of Purpose Over Entertainment (P.O.E.T.), which uses art and technology as a way to advocate for those living with and affected by HIV/AIDS.

information resources for people in prison

If you need information while you are locked up, contact:

Black and Pink

c/o Community Church of Boston
565 Boylston Street
Boston, MA 02116
monthly newsletter & pen pal program for incarcerated LGBTQ people; expect replies to take about 2 months.

Center for Health Justice

(213) 229-0979 collect
a free national HIV prevention & treatment hotline service that accepts collect calls from people in prison Monday-Friday, 8am-3pm

Fortune News

The Fortune Society
ATTN: Fortune News Subscriptions
29-76 Northern Boulevard
Long Island City, NY 11101
newsletter on criminal justice issues; to subscribe, send your first name, last name, ID number, correctional facility, address, city, state, zipcode
*free to people in prison

HCV Advocate

PO Box 427037
San Francisco, CA 94142
monthly newsletter on hepatitis C events, clinical research, and education (materials also available in Spanish).
*sample issue free to people in prison;
\$10 for a year's subscription

Just Detention International

3325 Wilshire Blvd, Ste 340
Los Angeles, CA 90010
support, resources and advocacy to address sexual violence behind bars; survivors should address Legal Mail to Cynthia Totten, Esq.
*free to people in prison

Partnership for Safety and Justice

825 NE 20th Avenue, #250
Portland, OR 97232
support directory with health and legal organizations, prison book programs, resources for LGBT people, and more!
*free to people in prison

Prison Legal News

P.O. Box 2420
West Brattleboro, VT 05303
newsletter on the legal rights of people in prison & recent court rulings
*sample issue \$3.50, unused stamps OK;
\$30 for 1-year subscription

Protecting Your Health & Safety: Prisoners' Rights

325-pg bound manual explains the legal rights to health and safety in prison, and how to enforce those rights when they are violated; publication of the Southern Poverty Law Center, distributed by: Prison Legal News
P.O. Box 2420
West Brattleboro, VT 05303
*\$16 for people in prison

Safe Streets Arts

PO Box 58043
Washington DC 20037
resource for incarcerated artists and writers who seek an agent to present their work, free of charge; write to the address above or call 202-393-1511



Birthing Behind Bars by Cristen Gomez
For more information, contact:
Women on the Rise Telling HerStory (WORTH)
171 East 122 Street, #2R
New York, NY 10035

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advocacy and support resources for people in prison

If you need help while you are locked up, or when you get out, contact:

In Austin, TX:

AIDS Services of Austin
P.O. Box 4874
Austin, TX 78765
Phone: (512) 458-2437
Web: www.asaustin.org

In Boston, MA:

SPAN Inc.
105 Chauncy Street, 6th Floor
Boston, MA 02111
Phone: (617) 423-0750
Web: www.spaninc.org

In Chicago, IL:

Men and Women in Prison Ministries
10 W. 35th Street # 9C5-2
Chicago, IL 60616
Phone: (312) 328-9610
Web: www.mwipm.com

In Los Angeles, CA:

Center for Health Justice
900 Avila Street #301
Los Angeles, CA 90012
Phone: (213) 229-0985
Prison Hotline: (213) 229-0979 collect
Web: www.centerforhealthjustice.org

In New Orleans, LA:

Women With A Vision
215 N Jeff Davis Pkwy
New Orleans, LA 70119
Phone: (504) 301-0428
Web: www.wwav-no.org

In New York, NY:

New York Harm Reduction Educators
953 Southern Boulevard, Suite 302
Bronx, NY 10459
Phone: (718) 842-6050
Web: www.nyhre.org

In Philadelphia, PA:

Philadelphia FIGHT
1233 Locust Street, 5th Floor
Philadelphia, PA 19107
Phone: (215) 985-4448
Web: www.fight.org

If you need resources in a city not listed here, **write to us!** We will help you track down answers to your specific questions.

Write to us if you know about a great organization that is not yet listed here as a PHN partner.

**prison
health
news**

Edited By:

Naseem Bazargan
Teresa Sullivan
Suzy Subways
Laura McTighe
Tre Alexander

PHN is a project of *Reaching Out: A Support Group with Action* and the *Institute for Community Justice* at Philadelphia FIGHT.

For subscriptions, resources and all other inquiries write to us at:

**Prison Health News
c/o Philadelphia FIGHT
1233 Locust Street, 5th Floor
Philadelphia PA 19107**

All subscriptions are FREE!