Who We Are...

We are on the outside, but we were inside before. We’ve been where you are now and know what it’s like...and survived it. We are ex-offenders 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, John, Waheedah, Patricia, Brian, Jaci, & Sam

In this Issue:

Who We Are.................................1
Write An Article!...........................2
Mom, What’s Wrong?......................2
The Way To A Happy New Year.......2
Sleep, It Is Your Health..................3
Hepatitis C Educational Programs in Washington State Prisons........4-5
Outside Looking In......................6-7
Information Resources for People in Prison..........................7
Advocacy and Support Resources for People in Prison......8
Subscribe!..................................8
The stare in your eyes,
The look like you have something to hide.
Went up the stairs
Could not bare the sight before my face,
She tried to keep it a secret and
Not leave a trace.
Combivir, Crixivan, Sustiva, AZT.
Could it be!  Could it be!
My mother has HIV!!!!
So worried about what I would think,
To protect me she kept it hidden.
Felt like it was no longer worth living.
Wasn’t sure if I would panic or remain calm.
But one thing that will never change,
You will always be my mom.  ❖

Mom, What’s Wrong?
-By Valerie Collett

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The Way to a Happy New Year
-By Dennis King

To leave the old with a burst of song
To recall the right and forgive the wrong
To forget the things that bind you fast
The main regrets of the year that's past
To have the strength to let go your hold
Of the net worth while of the days grown old
To dare go forth with a purpose true
To the unknown task of the year that's new
To help your sister or brother along the road
To do her or his work and lift the load
To add your gift to the world's good cheer
Is to have and give a Happy New Year!  ❖

Dennis King #047576
C3-108
PO Box 94-9000
Miami, FL 33194-9000

Hand by Daryl Young,
Books Through Bars, Contexts Collection
Sleep Basics
Sleep is interwoven with every facet of daily life. It affects our health and well being, our moods and behavior, our energy and emotions—our very sanity and happiness. If our sleep is limited, our health and daytime potential is significantly reduced if not destroyed.

Sleep Loss
Sleep loss accumulates; a person with a big sleep debt is slower to recover from stress and is much more vulnerable to infections and other illnesses. Countless studies have shown that even a modest sleep reduces the body’s immune responses; also, it is important to avoid sleep that is fragmented with awakenings.

Sleep In Prison
For those of us in prison, even more so for those as I am who are in total lock-up, sleep can be especially difficult. The 24-7 lights, constant banging of metal doors, screaming and more. Good sleep hygiene is difficult, but not impossible, to obtain.

To help achieve your much needed sleep, every morning turn on the bright light (dim light never goes off) and roll up your mattress and leave them that way until your scheduled bedtime. Then not less than a hour before laying down to sleep do not engage in any muscle activity, intense thinking (including mail), or other stimuli that activates your arousal system—in turn, keeps you awake. Best of all, at this point when you finally roll back out your mattress and turn off the bright light, the body acts on this cue and knows it is time for sleep.

More Information
There is no short supply of material verifying the above, including by writing to: National Center on Sleep Disorders Research, Two Rockledge Center, 6701 Rockledge Drive, MSC 7920, Bethesda, MD 20892-7920.
Hepatitis C in Prison
Hepatitis C is currently the most common health problem affecting men and women in prison in the U.S. It is estimated that 1 out of every 3 prisoners has hepatitis C, and in some prisons more than half the people are infected.

The Hepatitis Education Project (HEP) takes great pride in being part of solution to this problem. HEP is a non-profit organization based in Seattle, Washington, dedicated to helping those affected by hepatitis. Working closely with the Washington State Department of Corrections (DOC), HEP helped to develop a hepatitis C treatment and education protocol for Washington prisons.

Protocol in Washington State
In 2003, the Washington State DOC brought together a committee to revise its hepatitis C protocol to screen and treat individuals for hepatitis C. The result was a much more inclusive approach that allows more people in prison to qualify for treatment. The new protocol also assures that all prisoners are educated about the risks and outcomes of hepatitis C. This education is a major unifying thread, integrated into all parts of the protocol.

Information Needs
Everyone entering the DOC takes part in hepatitis C educational programs—from one-on-one conversations to group presentations to support groups to videos. Health care providers, non-DOC health educators and the prisoners themselves act as resources to better educate the population about modes of disease transmission, methods of prevention (including risk reduction and immunization), disease outcomes and options for treatment.

Education at All Stages
We are now well into our second year of this program, incorporating educational components at all stages of incarceration from intake to release. Here is an outline of the protocol:

Intake Screening. Individuals will view a short informational video about hepatitis C and should be provided with appropriate handout(s).

Health Care Providers. Will deliver messages aimed at hepatitis C transmission, progression and prevention at each medical visit during treatment.

Non-DOC Patient Advocate Groups. Should hold group support and didactic classes at each treating facility at least semi-annually. The Hepatitis Education Project is currently fulfilling this role.

Peer Education. Each facility should establish support groups for prisoners. Peer educators will be trained by DOC and volunteer non-DOC personnel to be advocates for these support groups. The DOC will provide organizational (approval to meet, a place and time to meet) and technical support (DOC approved content, means for group to have questions answered). Participation will determine success.

Television. The DOC cable network (alternately utilizing existing closed circuit TV equipment at some institutions) should air the proscribed informational video monthly.

Review of Materials. The Hepatitis C Protocol Review Committee will be responsible for viewing and approving the content of these programs.
While some of the educational components have been implemented better than others, the important part is that the DOC is moving forward with these recommendations. We think that these components and the treatment protocol as a whole can serve as a model to be replicated around the country.

Support When Coming Home

An extension of education while incarcerated is continuity with community resources at release. This essential discharge planning begins when someone is identified as being at risk for HCV infection. Messages about transmission modes, risk reduction and harm reduction are emphasized at each interaction and again before the person is released. A community support group list as well as linkages to community and public health facilities are offered at release.

So Far...

Our experience so far has been very positive. HEP began offering blood borne infections education last summer at each of sixteen Washington State prisons and work camps. To date we have visited more than half of the state correctional facilities and our program has been enthusiastically received by both prisoners and staff.

Our Sessions

Here is what our sessions cover:

- HCV, HIV, HBV. What are they?
- Transmission/Prevention, Outcomes
- Hepatitis C in prison.
- Epidemiology/Rates, Transmission
- Hepatitis C the illness. Symptoms, Progression, Transmission
- Hepatitis C treatment. Indications, Side Effects, Outcomes
- Family and social issues.
- Resources upon release.

Spread the Word!

We are excited that the Washington State DOC has taken great strides in addressing the hepatitis C in prison health care crisis, and we would love to see this treatment and education protocol replicated in other DOCs. Please contact us with any questions about our program or hepatitis C in general. We are happy to share any of the materials we have developed.

Hepatitis Education Project
4603 Aurora Avenue. N.
Seattle, WA 98103
http://www.hepeducation.org
Recently Oprah Winfrey did a show where three ordinary women spent a week in prison undercover, assuming the identities of newly sentenced prisoners. Cameras followed the women through the processing phase, which included a strip search as well as a check for hair and body lice.

Next, the cameras followed the women as they were given uniforms and cell assignments. The 2x4 windowless cells had only a commode sticking out of a far wall and a cot. In the background you could hear women's voices calling out, calling to one another, all sharing the same fate.

**The Response**

It was an intimate look at the lives of female prisoners inside a maximum-security prison. One of the women shared, "I felt like some kind of animal. It was degrading and dehumanizing." Another woman talked about the process of getting her prison number and uniform. "I was ashamed," she said, her voice trembling.

**The Big Picture**

As I sat there watching this, I thought about what to make of this in the larger context, and what effect does it have on our society.

The incarceration rate among women in the U.S is astounding--surpassing that of men every year since the early 90s. There are more women in prison than ever before—women of all colors and nationalities, young and old, Black, white, Latino, Asian.

Most of these women are doing time for drugs or drug related crimes, some due to effects of years of oppression and abuse. Few states have budgets that favor contributing to social programs that help to keep women out of prison. Instead, states invest more and more money in building prisons.

**Children**

For a mother serving time, the most anguish aspect of incarceration is...
the separation from her children. Her worries about their welfare are magnified while in prison, because children of incarcerated mothers often become wards of the state. Her children may be bounced from home to home, losing stability, support and guidance.

This difficulty is rarely eased when mothers come home. Once these women are released, the process of reuniting with their children is an uphill battle. Women have to meet conditions that are nearly impossible for anyone just coming home. Moreover, these conditions may directly conflict with restrictions at their halfway houses, making it impossible for them to get their children back while remaining compliant with the terms of their release.

**Coming Home**

Anyone who has been incarcerated knows how many difficult challenges lay ahead once you come home. Programs that offer assistance and help with reintegration are few and far in between, and even fewer offer support around the specific challenges women face.

Like all people coming home, women need help with housing and employment, but women must also deal with the cycles of physical abuse and drug use if they are to make the changes they want to see in their lives. For most, all of these issues contributed to their incarceration. Without support, many women will end back up in the correctional system they just left.

**Time for a Change**

As a society, we are judged not by our words, but by the actions that follow. The prison system is in dire need of change. Without change, we can expect nothing less than the increases we are witnessing today. We must begin the dialogue.
advocacy and support resources for people in prison

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

In Philadelphia, PA
Philadelphia FIGHT
1233 Locust Street, 5th Floor
Philadelphia PA 19107
(215) 985-4448—no collect calls
Contact: Laura McTighe

In New York City, NY
Women Prison Association
& Home Inc.
175 Remsen Street, 9th Floor
Brooklyn, NY 11201
(718) 797-0300—for collect calls from inside New York Jails/Prisons
(718) 637-6818—no collect calls
Contact: Leah Bundy

In New Brunswick, NJ
Project Connect
PO Box 824
New Brunswick, NJ 08901
999-999-9999—for free calls from inside New Jersey State Prisons
1-800-433-0254—toll free in NJ
Contact: Nadia Matar

In San Francisco, CA
Continuum Springboard
225 Golden Gate Avenue
San Francisco, CA 94102
(415) 823-0414—no collect calls
(415) 823-0415—no collect calls
Contact: Helen Lin or Charlie Wilson

In Miami, FL
Care Resource, Miami
225 N.E. 34th Street
Miami, FL 33137
(305) 573-5411—no collect calls
Contact: Pedro Torres

In Houston, TX
Houston Montrose Clinic
215 Westheimer
Houston, TX 77006
(713) 830-3000—no collect calls
Contact: Chris Jimmerson

Every organization on this list provides case management, medical care and support services for people when they get out of prison. Most of these organizations specialize in HIV care. Every organization distributes Prison Health News.

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

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 a great organization that is missing from this list.

If you would like to have Prison Health News mailed to you, write to:

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

All subscriptions are free, and are mailed First Class.