

prison health news

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

Issue 23, Winter 2015



Artwork by Ramon, "Windows From Prison" Project

Who We Are...

We are on the outside, but some of us were inside before... and survived it. We're here to take your health questions seriously and make complicated health information understandable. We want to help you learn how to get better health care within your facility and how to get answers to your health questions. Be persistent—don't give up. Join us in our fight for the right to health care and health information.

Read on...

From Art, D., Dreadz, Elisabeth, Laura, Lorraine, Naseem, Suzy, Teresa, Tré and Wendy

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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 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

Healing After Police

by Alex Landau

I was a Black child raised by white parents—adopted at 2 days old by a loving, but naive, white couple. My sister Maya, Black like myself, came into our lives when I was 4. Our family always lived in white neighborhoods, in the suburbs or in small mountain communities. In our household, we never had in-depth discussions about race or race relations.

There were times my sister and I recognized both subtle and blatant differences in the way we were treated by people, usually when our parents weren't present. But it wasn't until January 14, 2009, that I would awaken to the cruel reality of racism and police brutality in this country.

A Damaging Assault

On this date, a white friend and I were pulled over by a Denver policeman for an alleged illegal left turn. When three cops wanted to search my trunk, I asked to see a warrant. They responded with racial slurs and a brutal physical assault. I was nearly beaten to death with fists, a radio and a Mag flashlight. One cop held a service revolver to my head and threatened to blow it off. As I regained consciousness, I heard officers laughing about what they had done. I overheard one say, “Where's that warrant now, you f***ing n****r.”

I went into shock in the ambulance, maybe in part because I refused treatment until photos could be taken. My injuries included facial lacerations (requiring 45 stitches) and serious head injuries (including a massive

Brutality

hematoma, a concussion and a hemorrhage in my right eye). I was later diagnosed with a brain injury and post-traumatic stress disorder.

The cops falsely charged me with criminal attempt to disarm a peace officer. Upon my release from the city jail, I went to the Internal Affairs Bureau, the division of the Denver Police Department responsible for investigating complaints of police misconduct. There I sat, 19 years old, badly damaged, seeking justice. Instead, the cops told me, “You need to own up to your action and be a man” and “It's not always a good idea to play the race card.”

My family and I fought back. Ultimately, the criminal charges were dismissed, and I won a large settlement against these officers and the city of Denver.

Despite the settlement, the cops who assaulted me were never disciplined for what they did. Within six months of my assault, in two separate incidents, two of the same officers were caught on video attacking other innocent Denver citizens.

How to Heal

Living day to day has been a constant reminder of how close to death I came. At first, I used writing as my escape route—poetry, rapping, and journaling.

I didn't realize how much my life would change as I began to take a front-line role in human rights activism. Working in solidarity with

activist groups, I help organize and lead protests, community actions, and “Know Your Rights” trainings. We want to raise public awareness of police misconduct and improve police accountability. We are also involved politically, in efforts to create legislative change around law enforcement transparency and accountability.

Public awareness of police brutality is growing. In Denver, our police chief, sheriff and manager of safety (in charge of police discipline) have all been replaced. There have been revisions to the discipline matrix. A handful of officers have been terminated. A majority of Denver cops are now equipped with body cameras.

Lyrical expression continues to fuel my work with youth, as well as my activism with the community. I also speak to audiences locally and nationally; reliving my experiences through speeches helps me to heal, to grow, to learn, and to educate.

I am thankful to be alive. On July 29, 2014, my beautiful daughter Maya was born. I love her beyond description. It's up to me to prepare her as well as I can for the possibilities and realities of being Black in the United States.

Alex Landau is a student at University of Colorado Denver and has taken a front-line role in police accountability and community education, primarily in Denver.

What Vitamin D3, Calcium and Omega-3

by Sara Rendell

VITAMIN D3:

Vitamin D3 is an important vitamin that we get from sunlight.

What does it do for the body?

Vitamin D3 helps our bodies absorb calcium to keep our bones strong. It also protects against high blood pressure, cancer, and other diseases. Vitamin D3 can keep your thoughts happy too.

What happens when your body lacks it? Many people do not get enough vitamin D3, especially in winter. When your body doesn't have enough vitamin D3, your bones can become so weak that they break easily, and your muscles may become weak. You can become depressed and forgetful and have trouble sleeping and thinking clearly.

How can you get it? You can get vitamin D3 from **letting the sun hit your skin**. The darker your skin, the more sunlight you need to get enough vitamin D3. Each week, you need 10 minutes of direct sunlight if you are white, 15 to 20 minutes if your skin is tan, and more than 20 minutes if your skin is black. Vitamin D3 is added to some foods, including almost all milk.

How do you find it in supplement form? Vitamin D3 is in capsule form. You need to take one capsule per day, with a meal. Vitamin D3 helps you get enough calcium, so take vitamin D3 and calcium together.

What about people living with HIV? People with HIV can have weak bones and be at a higher risk for **osteoporosis**, when your bones get so weak that

they break easily. Vitamin D3 protects your bones. Vitamin D3 also helps your body fight HIV or AIDS by decreasing inflammation in your body, strengthening your muscles, and strengthening your immune system so it can fight off viruses and bacteria.

CALCIUM:

Calcium is a mineral found everywhere in our bodies. Calcium needs vitamin D3 to do its job.

What does it do for the body?

Calcium is important for blood flow, muscles, brain cells, and many things that happen inside your body to keep it balanced.

What happens when your body lacks it? When you don't have enough calcium, your bones can become weak and break easily.

What foods is it found in? You can get calcium from yogurt, milk, sardines, and soy milk. To get enough calcium each day, you need to eat two yogurts, drink two glasses of milk or have three cans full of sardines.

How do you find it in supplement form?

1. Calcium carbonate is in Tums and Rolaids. This needs to be taken with food.
2. Calcium citrate is sold as Calcium citrate or Citracal. It can be taken with or without food. Take 500 mg of either of these supplements twice a day, in the morning and evening.

What should you watch out for?

Calcium can keep you from absorbing other medications if you take it at the

Can Do for You

same time. If you are taking antibiotics, Dilantin, ACE inhibitors (for high blood pressure), iron, or bisphosphonates, take them in the morning and take your calcium at night.

OMEGA-3:

Omega-3 fatty acids are fish oils, naturally found in fish. We should get 1,000 mg of omega-3 in our food every day, but most people only get 200 mg a day. You would have to eat three (4 oz) cans of tuna each day to get the healthy amount of omega-3 from your diet alone.

What does it do for the body?

Omega-3 fatty acids decrease the amount of bad fats in our bodies. This protects our hearts, improves depressed mood, reduces anxiety and helps with sleep problems. It also helps with the depression phases of bipolar disorder, but not necessarily with the mania phases.

What happens when your body lacks omega-3? When you don't have enough, you can have inflammation in your body from having too much bad fat. Fats that are bad for us are **LDL cholesterol** and **triglycerides**. Inflammation from these bad fats can lead to heart disease and psychiatric illnesses (like depression or bipolar disorder).

What foods have omega-3 fats?

Fatty fish have omega-3 fats. Albacore tuna, sardines, salmon, mackerel and herring have the most omega-3 fats out of all fish. Be careful if you have high blood pressure: eating these fish

smoked or canned adds a lot of sodium to your body and pushes blood pressure up.

How do you find it in supplement form? Capsules of omega-3 fatty acids may be available in the commissary. Check the bottle: if it is "EPA" or "DHA," these are the good kinds.

How much should you take? To help with depression or the depression phase of bipolar disorder, 1 capsule (1 gram) each day is enough. To lower the triglycerides or bad fats in your body, you can take either a single dose of four capsules (4 grams) once a day **or** you can take two capsules (2 grams) in the morning and two capsules (2 grams) again at night.

What about people living with HIV? Many people with HIV, treated or untreated, have too much bad fat in their bodies. These bad fats put your heart and blood vessels in danger. Studies have shown that taking 4 grams (4 capsules) of omega-3 fatty acids daily can protect your heart.

What should you watch out for? If you're allergic to fish, do not take omega-3 capsules. If you've ever had a blood clot or if you have a bleeding disorder, don't take omega-3 capsules without talking to your doctor. If you have bipolar disorder, don't take more than 6 capsules (6 grams) in one day.

*Check our website
<http://www.fight.org/programs-and-services/prison-health-news/>
for this article's references.*

Eliminating Stigma in the Prison System

by Mukaddim Prince

I am currently housed at Mule Creek State Prison in California doing 36 months. And I am diagnosed with HIV and hepatitis C.

It all seemed worth it when I was playing Russian roulette with a loaded syringe back in 2006. But that is history.

And as a person diagnosed with HIV and a co-infection of hepatitis C, I can honestly say there are worse things in life. A person may say, “Well, what’s worse than being diagnosed with 2 chronic illnesses?!” I’ll tell you what is worse...

The attitudes of individuals who travel down the same paths that I’ve traveled down that got me where I am today. Who think HIV and hepatitis C won’t affect them or the ones they love.

Young men and women who go “owooo” [as in “disgusting”] when they know you’ve got the virus. And try to treat you like a leper.

Or prison staff giving you [me] a job in the kitchen and a guy yelling to his buddy across the yard, “Hey, man, they let people with AIDS work in the kitchen?” As if by sheer contact with a 6-inch stainless steel metal pan, they could get infected.

Or being bounced from cell to cell to cell, because nobody wants to live in a cell with somebody who is infected.

The pointing, the whispering, and the looks I receive from guys who are ignorant and afraid.

But I still get up and go to work every day, because to not do so is to let the “enemy” win. I tell people I am diagnosed and how HIV and hepatitis C are transmitted.

The world’s major religions teach compassion. Christ ministered to people like me when he walked this Earth. And the Prophet Muhammad said a Believer is someone who wants for his brother what he wants for himself. And I don’t want to see anybody get infected.

So I talk, and I share my story so that I can elevate someone’s consciousness to this issue and possibly help someone. I am currently working to get my AA degree as a psychology major to go into HIV/AIDS advocacy upon my release.



Status: Blessed & Invincible. We're all HIV equal.

Stemming Stigma

by Rod McCullom

The early days of AIDS were marked by fear fueled by ignorance.

Thankfully, much has changed since the introduction of effective treatment in 1996. Millions of lives have been saved in the United States and around the world. Nonetheless, HIV stigma remains pervasive.

Although negative and unfair beliefs about HIV/AIDS aren’t as openly expressed by most people as they used to be, current beliefs are stubbornly similar to those of years ago. For example, a 2011 Kaiser Family Foundation study found that, despite decades of education efforts, much of the public remains uncomfortable with HIV-positive people.

Advocates acknowledge fighting stigma isn’t easy—it’s like battling the Hydra monster of Greek mythology: Chop off one head of the dragon-like serpent, and two more grow back.

“Stigma is somewhat like smoke—you know it’s there, but it’s difficult to see and hold on to,” says David Ernesto Munar, president and chief executive officer of the Howard Brown Health Center, which serves the LGBT community in Chicago. “It’s a major driver in perpetuating the epidemic.”

Munar believes that stigma results in harm to everyone—people living with the virus, as well as those who are negative or of unknown status. As a person living with HIV, and the former head of the AIDS Foundation of Chicago, he has had a front-row seat. “People might not get the HIV testing they need,” he says. “They might lose

their income, housing, family and friends.”

Similarly, you might not want to be seen taking meds, so you skip doses—which can increase your viral load and the risk of transmitting HIV.

There are many ways to combat the illegal discrimination that results from stigma. However, the methods to stem stigma itself seem more elusive. Educating with one-to-one discussions perhaps remains the best, but many advocates continue to pursue more widespread methods, such as awareness campaigns.

HIV Equal was launched in 2013 by World Health Clinicians, and created by Project Runway star Jack Mackenroth with celebrity photographer Thomas Evans. Volunteers are photographed wearing an “HIV=” sticker. Their tagline: “Everyone has an HIV status. We’re all HIV equal.”

Also in 2013, Kevin Maloney, a social media consultant and digital activist, launched the *No Shame* campaign, which features not only Byanca Parker but more than 500 people on Facebook. He launched his first campaign, Rise Up to HIV, after he was diagnosed with HIV in 2010.

What can you do in the fight against HIV stigma? Talking one-to-one with people in your life about the virus is a great place to start.

Stemming Stigma by Rod McCullom. Excerpt from July/August 2014 POZ. Reprinted with permission. Copyright 2014 CDM Publishing, LLC.

Resisting Stress-Induced Illness

by Robert C. Wesner

Many of us, as prisoners, face serious health issues such as diabetes, HIV, hepatitis and high blood pressure, just to name a few. Also, a large percentage of us struggle to receive the minimum care we need to stay one step ahead of our physical afflictions. This leaves many of us frustrated and angry at a system that has been set in place and administered by a financially motivated imperialistic machine. There is seldom any compassion or empathy demonstrated and, more times than not, we are run in circles while trying to compel this same entity to provide us care.

This state of confusion, anger and, yes, apathy that we find ourselves embroiled in can, in and of itself, be a very unhealthy state to be in. This condition can induce a psychosomatic, stress-caused illness. This is a real danger to us all. Psychosomatic illnesses can manifest themselves in many ways—most notably, high blood pressure, insomnia, weight gain/loss and anxiety disorders. Again, these are but a few complications often attributed to psychosomosis.

Webster's defines *psychosomatic* as, "adj: of or noting a physical disorder caused or influenced by emotional factors" (Random House Webster's Dictionary, 4th edition).

Who of us can't recall a time when we have been at our wit's end filing informal complaints, grievances and appeals, just to be run in circles by the medical department and/or the administration of our respective institutions?

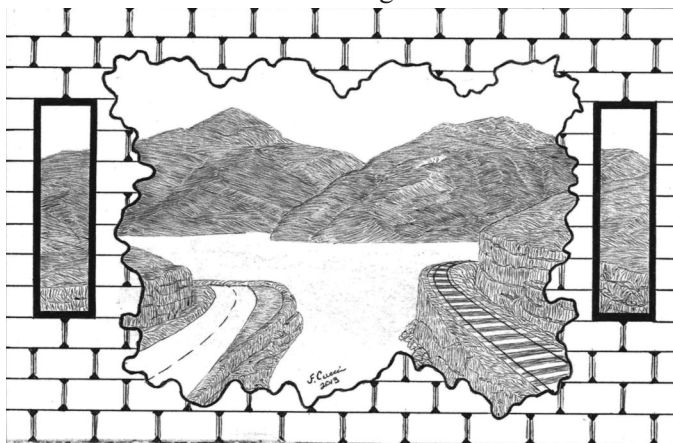
The bottom line is that **we must remain emotionally healthy if we hope to maintain physical health.**

The first step to gaining emotional freedom is to simply acknowledge that the system we seek to gain relief from is set up to deny us that same relief at all costs.

With this knowledge, you can begin to separate your legal struggles to get treatment from your emotions.

Remember, anger, resentment and indignation must be tempered into concise, unemotional legal arguments. Once we begin to master our negative emotions, we can begin to accept some small responsibility for our health.

We are mistreated. Those of us in solitary confinement are being systematically tortured on a daily basis. It is illegal and unconstitutional



A Road Going Somewhere, by James Currie

—and, yes! It makes me angry! We must persevere, resist, and continue the fight. However, if we allow ourselves to be ruled by our blind anger towards the system, we only feed into that system's antipathy.

I have myself taken my own advice (so to speak). By practicing breathing exercises, meditation, and free expression through poetry and prose, I have been able, for the most part, to manage my emotions (without medication).

As prisoners, we must take upon ourselves the mantle of self-preservation. Whenever possible, we must assert our responsibility to maintain emotional health and, in return, gain and/or maintain physical health.

I encourage all of us to challenge the caste system into which we have been placed. Via peaceful resistance and constant communication with society, we can expose the illegal treatment and mistreatment of human beings. The consistently subjective torture of prisoners housed in sensory deprivation chambers for years under the guise of security must be vigilantly opposed.

So remember, psychosomatic illness is real and fueled by emotion. Control your emotional response and help control your health!

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I Was Not

by William Morgan Herring, 1996 Death Row Reflections

I was not born a killer or a murderer
Society taught me as I grew
From the moment the hand slapped my
Semilifeless body into a (unknown then)
Conscious and constant journey of violence
And pain...Isn't that strange!

I was not born an alcoholic or a drug addict
Family holiday gatherings, television, movies
Friends and trends I thought were "groovy"
Taught me!

I was not born a "little nigger"
A coca-cola bottle filled with urine
From white teenagers in a passing Car in Wilson, North Carolina
Smashing against the side of my head
Taught me that.

I was not born violent
Family strife, the shotgun defending home,
The quickly drawn butcher knife, when mom
Wanted her "boyfriend" to leave her alone.
Uncle Sam in Vietnam with Walter Cronkite
Every night, Road Runner and Bugs Bunny
Wile E. Coyote getting smashed time and time
Again seemed so funny way back then. Cowboys
That were quick to shoot and fight, Combat, Rat Patrol
And the FBI. Now you sit and judge me, but who
Put the bloodlust in my eyes. I was not born for this
You've sentenced me to die.

PTSD: The Enemy Within

by S. Muhammad Hyland

Post-traumatic stress disorder (PTSD), an anxiety disorder that can arise after an actual or threatened death or serious injury to self or others, too often goes undiagnosed. Formerly known as shell shock syndrome, PTSD was once considered to plague only soldiers. Today, statistics tell a different story.

Neighborhood Violence

Denizens of inner cities across America also suffer from this dangerous disorder but routinely go unnoticed. If PTSD can be successfully used to defend violent criminal behavior perpetrated by current or former troops, it should work that same way for inner-city minorities. Both groups of people are subject to the same feelings created by their respective environments.

During a tour of duty, troops may or may not see combat. Either way, if they survive, they get to return home. No doubt, many of them are affected by the atrocities that they've witnessed firsthand. And by all means, they do deserve medical attention. Yet what about the teenager born and raised in the ghetto, who sees every type of violent act carried out on a daily basis, sometimes against their own family?

Can you imagine the impact of this violence on an undeveloped mind? They come to believe that what takes place in the ghetto is normal, not aware of the toll their environment is taking on their mind, body, and soul. The inner-city youth wakes up to daily reminders of where they

are and what took place the night before, causing them to live in a constant state of intense fear, helplessness and horror.

Undiagnosed and untreated, PTSD wreaks havoc—families impacted become concerned, frightened and withdrawn. Stress at home leads to stress inside the workplace. PTSD causes much of the tension behind violence in the Black community.

Prevention and Treatment

Health officials should be more vigilant in finding ways to implement mental health education into typical school curriculum. Teaching prevention would motivate those not afflicted to help others.

That most people in prison suffer from PTSD is a reality that judicial-level officials refuse to consider. If testing for this disorder were part of the pre-sentencing evaluation, defendants would have better chances in the courtroom and happier, healthier lives and lifestyles upon release. Instead, people in prison are subjected to conditions so harsh that it only exacerbates their symptoms.

Conceivably, prevention would help to reduce the crime rate, which would in turn reduce the prison population, saving billions of dollars in the short-term and millions of lives in the long-term. It's not too late to do the right thing, by first acknowledging that most people in prison suffer from PTSD, and next by beginning to treat all affected by it.

information resources for people in prison

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

Black and Pink

614 Columbia Rd.

Dorchester, MA 02125

free monthly newsletter & pen pal program for incarcerated LGBTQ people; expect replies to take about 2 months.

Center for Health Justice

Phone: (213) 229-0979 collect

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

free newsletter on criminal justice issues; to subscribe, send your first name, last name, ID number, correctional facility, address, city, state, zipcode.

HCV Advocate

PO Bos 15144

Sacramento, CA 95813

Online monthly newsletter on hepatitis C events, research, and educational materials (some materials also available in Spanish). One sample issue free to people in prison.

Inside Books Project

c/o 12th Street Books

827 West 12th Street

Austin, Texas 78701

free National Resource Guide for people in prison and their loved ones; people in Texas prisons can also receive free books.

Just Detention International

3325 Wilshire Blvd, Ste 340

Los Angeles, CA 90010

free support, resources and advocacy to address sexual violence behind bars; survivors should address Legal Mail to Cynthia Totten, Esq. CA Attorney Reg. #199266.

The National Hepatitis Corrections Network

911 Western Ave, Suite 302
Seattle, WA 98104

free information and care resources for prisoners living with viral hepatitis, including fact sheets and treatment information; responses to mail may take time but NHCN will respond!

Prison Legal News

P.O. Box 1151

Lake Worth, FL 33460

Phone: (561) 360-2523 no collect calls
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 1151

Lake Worth, FL 33460.

***\$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.

SERO Project

P.O. Box 1233

Milford, PA 18337

network fighting criminal prosecutions of people with HIV for non-disclosure of their HIV status, potential or perceived HIV exposure or HIV transmission; empowers people to tell their compelling stories and to advocate on their own behalf.

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
1001 S. Broad Street, Suite 200
New Orleans, LA 70125
Phone: (504) 301-0428
Web: www.wwav-no.org

In New York, NY:

New York Harm Reduction Educators
155 E. 149th Street
Bronx, NY 10451
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

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