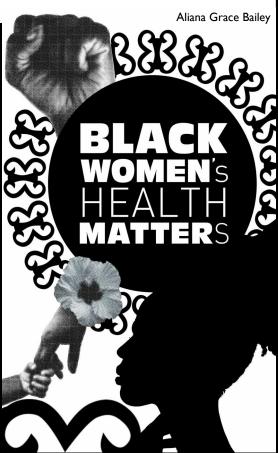
PRISON HEALTH NEWS

Issue 32 | Spring 2017

IN THIS ISSUE

HIV Meds2-3
Hepatitis C Legal Updates4-5
Polluted Prisons: When the building you live in is bad for your health6-7
Safety and After-care8-9
SSRIs/Antidepressants: What You Need to Know10-11
The Prison Cell12-13
Information and Support Resources14-15
Subscribe!16



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

Elisabeth, Lucy, Suzy, and Teresa

Write an Article or Send Us Your Art!

Would you like to see your art, writing or poetry in *Prison Health News?*

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? 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. Only for submitting your work, write to us at this address:

PHN Submissions C/o Institute for Community Justice 1207 Chestnut St, 2nd Floor Philadelphia, PA 19107

For all other inquiries write to the Locust Street address on page 16.

This article is going to break down the types of HIV drugs, and why people living with HIV need to take medications to control the virus.

HIV and AIDS

HIV, or human immunodeficiency virus, is a virus that attacks the body's **immune system**. People with weakened immune systems cannot fight infections or cancer as well, and are more likely to get sick. HIV specifically attacks a type of white blood cell called the CD4 cell.

When HIV progresses to its most severe form, it is called AIDS, or acquired immunodeficiency syndrome. People with HIV are diagnosed with AIDS when they have 200 or fewer **CD4 cells**, the kind of cell HIV attacks, or if they develop one of the illnesses associated with AIDS. Not everyone with HIV has AIDS.

Treatment can keep people healthy, control HIV, and prevent it from progressing to AIDS.

What is ART?

The medications that treat HIV are called antiretroviral therapy (ART). Most of these treatments interrupt the life cycle of the HIV virus, preventing it from growing in the body. The goal of ART is to reduce the viral load of HIV, which is basically the amount of HIV that is found in the blood. This helps keep the immune system strong. Blood tests for "viral load" and "CD4 count" are used to monitor a person's response to HIV treatment.

The standard of care is to treat everyone who is living with HIV with ART, because this saves lives, reduces AIDS-related disease and other complications, and decreases HIV transmission to other people.

Even people with a strong immune system, a high CD4 count, or with no symptoms are recommended to **start ART early** to decrease the rate of AIDS-related disease or other complications.



People with AIDS also live longer and have fewer AIDS-related complications when they take ART.

The ART regimen

Once someone is diagnosed with HIV, they will usually start on a 3-drug regimen. This usually means two nucleoside reverse transcriptase inhibitors (NRTIs) and one other type of infection. drug, like an integrase inhibitor (INSTI), protease inhibitor (PI), or nonnucleoside reverse transcriptase inhibitor (NNRTI). Two or three medications may be combined into a single pill, so patients on a 3-drug regimen may only have to take one or two different pills.

Factors such as other health conditions, side effects, the number of pills, and cost may affect which ART medications a person uses.

Some HIV medications interact badly with other medications people are taking, so the doctor may choose not to use certain therapies for that reason. Also, some drugs should be taken with food, while others must be taken on an empty stomach.

HIV can develop resistance to medication, which is why three medications of at least two different types are used to prevent resistance.

Resistance means the current ART treatment stops controlling the virus and new medications are needed.

It is important for people taking ART to take it as prescribed. Skipping doses or taking pills late runs the risk of causing treatment resistance and allowing the virus to grow again.

The doctor should get drug resistance genotype testing, which shows which

medications will work for you against the HIV infection, before starting ART. Some people have HIV that is already resistant to some medications before treatment is started.

PEP and PrEP

People who do not have HIV sometimes take antiretroviral drugs to prevent HIV

Post-exposure prophylaxis (PEP) means taking an antiretroviral drug after a possible exposure to HIV, like unprotected sex or needle sharing.

Pre-exposure prophylaxis (PrEP) is a pill that is taken every day by a person who may be at high risk of getting HIV, to reduce the chance of infection. Truvada, the PrEP pill, can reduce the risk of getting HIV by more than 90 percent if taken daily. People taking PrEP should get regularly tested for HIV.

For more HIV drug fact sheets, write to us at

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

PENNSYLVANIA DOC ORDERED TO EVALUATE MUMIA ABU-JAMAL FOR HEP C TREATMENT

BY DEREK GILNA PUBLISHED IN PRISON LEGAL NEWS FEBRUARY, 2017

Pennsylvania state prisoner Mumia Abu-Jamal, serving a life sentence and diagnosed with hepatitis C, sued the state's Department of Corrections (DOC) in federal court when he was refused treatment for that life-threatening disease.

On January 3, 2017, U.S. District Court Judge Robert D. Mariani granted Abu-Jamal's motion for a preliminary injunction, ordering the DOC to let a doctor examine him within 14 days regarding his suitability for hep C treatment—an order which, given his diagnosis, effectively guarantees he will eventually receive medical care. Abu-Jamal, a well-known political prisoner who was successful in having his death sentence overturned, is a *Prison Legal News* columnist.

Incarcerated since 1981, Abu-Jamal filed suit in September 2016 seeking medical care after he began to exhibit symptoms of hepatitis C; however, the DOC maintained that he did not qualify for treatment. The latest generation hep C drugs cost around \$84,000 to \$90,000 per patient. Most medical experts agree that these drugs, including Harvoni and Solvaldi, are over 90% effective at curing hepatitis C. [See: *Prison Legal News*, Aug. 2015, p.22; July 2014, p.20]. Also named as a defendant in the lawsuit is the DOC's private medical services provider, Correct Care Solutions.

According to Judge Mariani's order, which relied heavily upon the testimony of Dr. Jay Cowan and other medical experts, "the Plaintiff has shown that Defendants have deliberately denied providing treatment to inmates with a serious medical condition and chosen a course of monitoring instead. They have done so with the knowledge that (1) the standard of care is to administer [hepatitis C] medications regardless of the disease's stage, (2) inmates would likely suffer from hepatitis C complications and disease progress without treatment, and (3) the delay in receiving...medications reduces their efficacy."

The DOC had argued that "monitoring" prisoners with hep C rather than providing them with treatment did not violate the Eighth Amendment, but the court rejected that defense. Although medical negligence or malpractice does not constitute an Eighth Amendment violation, "medical treatment may so deviate from the applicable standard of care as to evidence a physician's

deliberate indifference," the district court wrote, quoting McRaven v. Sanders, 577 F.3d 974 (8th Cir. 2009) [Prison Legal News, June 2011, p.46].



Photo by Joe Piette, from a recent demonstration in Philadelphia

The court further noted that Abu-Jamal had a serious medical condition and would continue to suffer if he were not treated, and that "[h]is liver will continue to scar and its functioning will continue to deteriorate." In granting the motion for a preliminary injunction, Judge Mariani observed that the "realities of civil litigation make it likely that waiting for resolution at trial will prolong Plaintiff's suffering for a significant period of time and result in an overall deterioration of his health."

The defendants appealed the ruling on January 12, 2017. Abu-Jamal is represented by Bret D. Grote with the Abolitionist Law Center and attorney Robert J. Boyle. See: Abu-Jamal v. Wetzel, U.S.D.C. (M.D. Penn.), Case No. 3:16-cv-02000-RDM; 2017 U.S. Dist. LEXIS 368.

Apparently, by denying hep C treatment to Abu-Jamal and appealing the preliminary injunction, DOC officials are trying to accomplish what they failed to achieve when Abu-Jamal won his appeals and was removed from death row.

Originally published by *Prison Legal News* (www.prisonlegalnews.org); reprinted with permission. To subscribe to *Prison Legal News* for a year, send a check or money order for \$30 to: Prison Legal News, P.O. Box 1151, Lake Worth, FL 33460. Or send \$5 for one sample issue.

Editors' Note: Prison Health News will keep you informed about the progress of Mumia Abu-Jamal's hep C treatment case. He has not been treated for hep C yet, because the state of Pennsylvania has appealed. You can write to us at the Locust Street address on page 16 if you have health questions about hep C. However, we cannot answer legal questions.

POLLUTED PRISONS: WHEN THE BUILDING YOU LIVE IN IS BAD FOR YOUR HEALTH

BY SUZY SUBWAYS

Flint, Michigan residents and Native Americans at Standing Rock, North Dakota are demanding that their drinking water be protected from chemical poisons. The world has begun to hear their words: "Water is Life." People in prison are speaking up too.

Countless prisons and jails in the United States have contaminated water, but that's not the only problem. Many prisons were built under unsafe conditions and can cause health problems for people held in them. Like in Flint and Standing Rock, these health risks most often affect Black and Native American people, other people of color, and white people from poor communities.

Some prisons are contaminated with mold. Others were built near uranium processing facilities where the water and air contain radioactive waste. And some prisons do not have evacuation plans even though they are located near nuclear power plants or in danger areas for natural disasters such as flooding.

Coal ash

SCI Fayette in Pennsylvania was built on a massive dump of coal waste. People incarcerated there have reported chronic sore throats, extreme throat swelling, shortness of breath, headaches, dizziness, vision problems, stomach pain, and tumors. Many have been diagnosed with cancer or thyroid disorders.

According to a report by the Abolitionist Law Center and the Human Rights Coalition, "Situating a prison in the midst of a massive toxic coal waste dump may be impermissible under the Constitution if it is shown that prisoners face a substantial risk of serious harm caused by exposure to pollutants from the dump."

Valley fever

In California, Arizona and throughout the Southwest, people in prison are more vulnerable to Valley Fever than those outside prison. Valley Fever is caused by a fungus that lives in dry soil and is transmitted through the air. People of African, Filipino and Pacific Islander descent are at much higher risk of developing a severe form of the disease, which can be fatal.

Health officials recommend ventilators, door seals, and landscaping or concrete around the prisons to keep dust in the ground. Prisons should transfer out people who are at higher risk. Those imprisoned in affected areas should be tested for Valley Fever and given treatment if they have it.

Gas and spray

Tear gas and pepper spray are being used against people in prison more often in recent years. If you're exposed to CS tear gas, try this if possible:

- Use the inside of your coat or shirt to protect your mouth and nose
- Blow your nose, rinse your mouth, cough and spit. Try not to swallow.
- Put your face under the tap and rinse your eyes with cold water, from the inner corner to the outer corner, making sure your hands don't touch your eyes and the water doesn't run off onto your skin or clothes
- Shower in cold water—not hot water—and change your clothes

If pepper spray gets in your eyes, try to flush your eyes with water as soon as you can. Experts disagree about what to do next, but if you have access to any of these, they might help:

- Saline solution for the eyes
- Whole milk to stop the burning
- 3 parts cold water, I part detergent (the brand Dawn is best) to rinse the oils
 off
- I part water, I part Maalox (an aluminum- or magnesium hydroxide-based antacid, not a simethicone-based antacid)

Your facility's "use of force" guidelines can let you know whether it might help to file a grievance. The War Resisters League is pressuring the Department of Justice to end the use of tear gas and pepper spray in prisons. If you have a story to share, write to them at

War Resisters League 168 Canal St, Suite 600 New York, NY 10013

Lobbying for Protections

The job of the federal government's Environmental Protection Agency (EPA) is to protect the public's health from pollution. But the EPA ignores 2.4 million people simply because they are in prison. The Campaign to Fight Toxic Prisons and the Prison Ecology Project have brought together activists across the country to pressure the EPA to fix this. It will be a tough battle under incoming president Trump, who wants to take away environmental regulations. You can write to the EPA to ask them to investigate and stop environmentally unsafe conditions in prison:

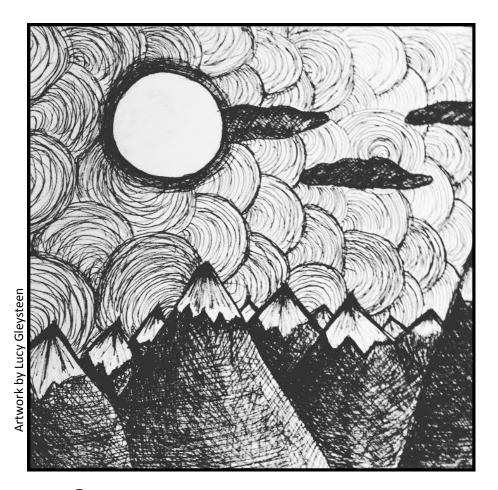
Office of Environmental Justice Environmental Protection Agency [Mail Code 2201A] I 200 Pennsylvania Avenue, NW Washington, DC 20460

One small victory at a time

In Texas, people incarcerated at the Wallace Pack Unit filed a lawsuit in 2014 because of unsafe drinking water and extreme heat. Finally, on June 21, 2016, U.S. District Court Judge Keith Ellison ordered the Texas Department of Criminal Justice to provide drinking water without unsafe levels of arsenic, a deadly poison that can cause cancer, skin lesions, diabetes and heart disease.

If you are housed in a facility where the water, air or other conditions threaten your health, you can write to the following address to report it. They may or may not be able to help you, but they can spread the word about the problem:

Campaign to Fight Toxic Prisons c/o Civic Media Center 433 South Main Street Gainesville, FL 32601



SAFETY AND AFTER-CARE

BY TRACEY HAMILTON

The primary fear most people express about getting tattooed in prison is that they may contract the HIV virus, which may cause AIDS. HIV is only one of many viruses that can be transmitted. Syphilis, tuberculosis, strep, staph, and hepatitis are just a few of the other diseases to take into consideration.

Since a tattoo gun with a motor cannot be sterilized properly, **germs and bacteria** can get inside it. My best tip would be to wrap it inside a latex glove and do short tattoo sessions to keep it cool. There is no perfect way to sterilize the needle, but I'll suggest a few things that'll help. A) Boil in water. B) Rinse with water and bleach, and clean with soap. C) Burn with fire at a high temperature.

Here is a checklist that should be followed to make it a little more safe and sterile for everybody involved.

- The artist will put on disposable latex gloves and lay out everything needed on a sterile surface. Ink, paper towels, etc.
- The area where the tattoo will be placed is shaved, using a disposable razor that has not been used before.
- Using paper towels, the area is cleaned with an antiseptic solution.
- Another paper towel is run across a stick of clear deodorant and then applied to the prepped skin, to apply the stencil.
- The tattoo stencil is placed on the skin.
- Everything must be disposable and used only once. Wiping down tattoo with new paper towel every time.
- When finished, the artist will clean it gently with an alcohol/water solution and wrap it in sterile gauze.

Prison tattoo ink is a misnomer, because black is the only actual ink used in tattooing. The rest of the colors are made from mixing dry pigments (made from vegetable matter) with a suspension fluid such as water or one of several kinds of alcohol. These risks are slight to none, except to people who have extreme sensitivities already. In prison, ink could be made from anything, even burning up an old comb or toothbrush into ash and mixing with shampoo, toothpaste, or mouthwash.

There are a lot of ways to make ink. You can't trust any. The best thing to do is ask some old school to help you make your own. You may be

able to order acrylic inks, and other kinds too. Not all are safe, and some can cause **allergic reactions**. If you're concerned about ink allergies, ask your tattooist to do a "patch test" on a discreet part of your body, punching a tiny bit of ink under your skin to see how your body reacts.

If you experience any out-of-the -ordinary symptoms (shortness of breath, rapid heartbeat, fever, swelling, rash, or dizziness) after being tattooed, seek medical attention immediately.

When you make your ink, you have to put it in a bottle. Most use an eye drop bottle, which I believe is as safe as we can get, since it's sterile already, just empty and fill. When you're ready to start, you need an ink cup to put a few drops of ink into while you work. My favorite technique is to dig a pit in a new bar of soap and use that as an ink holder. Never reuse old ink or try to put any back into the bottle. Used ink can transmit hepatitis C, even weeks after it was used last.

Some ink won't be as dark once it heals. A second session will be needed.

After-care procedure

- Gently clean area twice daily with antibacterial soap, using your fingertips.
- Apply thin layer of A&E ointment or bacitracin, or even a water-based, additive-free lotion.
- Continue regimen for two weeks. If you notice any swelling, redness or burning that doesn't go away after a few days, consult a doctor.

Tracey Hamilton 847563 Baraga Correctional Facility 13924 Wadaga Road Baraga, MI 49908

SSRIs/Antidepressants: What You Need to Know

By Mark Morales

Editors' Note: People in prison have a right to **informed consent,** according to the Handbook of Correctional Mental Health. For psychiatric medications, this means the healthcare provider who prescribes a drug must explain why they're giving you the drug, and what the risks and benefits might be. They need to tell you about any other drugs that you could possibly take to treat the condition, because you may have more than one option to choose from. They also need to tell you the risks and benefits of not taking the drug, so that you can make an informed choice. This discussion and your consent to be given the drug should be documented in the medical record. You have a right to refuse treatment.

Selective serotonin reuptake inhibitors, commonly known as SSRIs, are usually the first medicines that doctors will use to treat depression and other mental illnesses. SSRIs are also called "antidepressants," but they can be used to treat other mental illnesses besides depression. If you suffer from anxiety, post-traumatic stress disorder (PTSD), panic attacks, or obsessive-compulsive disorder (OCD), you may also benefit from taking SSRIs.

Unsure if you are currently taking an SSRI? Here is a list of SSRIs, with brand names in parentheses:

- Citalopram (Celexa)
- Escitalopram (Lexapro)
- Fluoxetine (Prozac)
- Fluvoxamine (Luvox)
- Paroxetine (Paxil)Sertraline (Zoloft)

How do SSRIs work?

These drugs work by raising the level of serotonin in your brain. Serotonin is a chemical that relays signals in the brain. By increasing the amount of serotonin available for signaling, SSRIs can improve symptoms of depression and anxiety.

How do I know if the drug is working? How long will it take?

SSRIs can improve your mood and reduce your symptoms of

depression or anxiety. Many people report that they "feel like themselves" again when the medication is working. While your mood may improve during the first two weeks taking the drug, it can take anywhere from 3-8 weeks before you feel the full benefit of the drug. SSRIs must be taken **every day**, not just when you are feeling sad or anxious.

What if the drug is not working?

If your mood or anxiety level does not feel any better after 4 weeks, your doctor may decide to slowly increase the dose. Your doctor should start you on the lowest effective dose of the drug, then gradually increase the dose as needed. This gives your body and brain time to adjust to the medication, which lessens the chance that you will have negative side effects. If you are still not feeling better on a higher dose of the drug, then the doctor might decide to switch you to a different SSRI. Sometimes you have to try two or even three different SSRIs before finding the one that works for you. It can be a process of trial and error.

Are there negative side effects?

SSRIs are generally safe medications, and they have fewer side effects than other classes of drugs that are used to treat depression and anxiety. Side effects are

10

most common in the first 3 months of treatment. In many cases, the side effects diminish or go away completely as your body adjusts to the drug. But for others, the side effects may last. Here are the most common side effects of SSRIs:

- Decreased sex drive/difficulty reaching orgasm
- Trouble falling asleep at night
- Daytime sleepiness
- Weight gain
- Headache/nausea
- Dry mouth

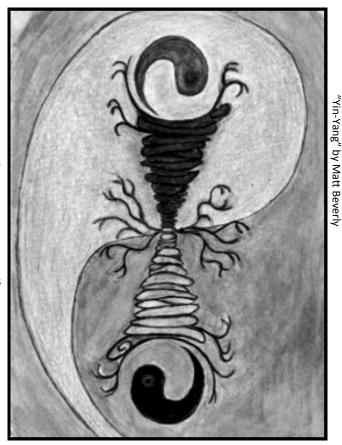
If you're having side effects, you can ask your healthcare provider if there are ways to treat the side effect, or if the drug dose can be lowered,

or if you can switch to a different SSRI.

What happens if I stop taking the drug abruptly?

It is important to talk to your doctor before stopping your SSRI. If you stop the drug abruptly, you will likely experience symptoms of withdrawal. These can include changes in mood, suicidal feelings, dizziness, fatigue, upset stomach, muscle aches, and chills. You are not "addicted" to the SSRI, but your body needs the right amount of time to adjust. To prevent these symptoms of withdrawal, your doctor should slowly lower your dose of the SSRI over a few weeks before stopping it completely. This is called "tapering" the drug.

If you are having feelings of depression or anxiety, it may help to talk to your doctor.



You do not need to suffer in silence! Your mental health is just as important as your physical health, and antidepressant medication may help improve your quality of life.

If you are having thoughts of suicide, or if someone you know is and you want to help, we can send you a free pamphlet on suicide prevention written by and for people in prison. Send your request to us at: PHN c/o Institute for Community Justice, 1207 Chestnut St., 2nd Floor, Philadelphia PA 19107.

For those who are having thoughts of suicide and can call a toll-free number, the National Suicide Prevention Lifeline is **I-800-273-TALK (8255),** 24 hours a day, 7 days a week. Most cities have a local suicide or crisis hotline number.



Artwork by Ruben Radillo

THE PRISON CELL

BY MAHMOUD DARWISH

It is possible...
It is possible at least sometimes...
It is possible especially now
To ride a horse
Inside a prison cell
And run away...

It is possible for prison walls
To disappear,
For the cell to become a distant
land
Without frontiers:

What did you do with the walls? I gave them back to the rocks. And what did you do with the ceiling? I turned it into a saddle. And your chain? I turned it into a pencil.

The prison guard got angry.

He put an end to my dialogue.

He said he didn't care for poetry,

And bolted the door of my cell.

He came back to see me
In the morning,
He shouted at me:
Where did all this water come
from?
I brought it from the Nile.
And the trees?
From the orchards of Damascus.
And the music?
From my heartbeat.

The prison guard got mad; He put an end to my dialogue. He said he didn't like my poetry, And bolted the door of my cell.

But he returned in the evening:

Where did this moon come from? From the nights of Baghdad. And the wine? From the vineyards of Algiers. And this freedom? From the chain you tied me with last night.

The prison guard grew so sad... He begged me to give him back His freedom.

Information and Support Resources

AIDS Library

Philadelphia FIGHT 1233 Locust Street, 2nd Floor Philadelphia, PA 19107

The library will answer questions about any health condition, not just HIV/AIDS. If you're in Pennsylvania, you can also request info for re-entry planning.

Center for Health Justice

900 Avila Street #301 Los Angeles, CA 90012

Prison Hotline: 213-229-0979

Free HIV prevention and treatment hotline Monday to Friday, 8 a.m. to 3 p.m. Those being released to Los Angeles County can get help with health care and insurance.

AIDS InfoNet

International Association of Providers of AIDS Care
2200 Pennsylvania Ave., NW,
4th Floor East
Washington, DC 20037
Free factsheets on HIV prevention and treatment in English and 10 other languages. Please ask for "Factsheet 1000."
You can also request summaries of HIV and hepatitis C treatment guidelines, which tell doctors what care to provide in different medical situations.

POZ Magazine

212 West 35th Street, 8th Floor New York, NY 10001 A lifestyle, treatment and advocacy magazine for people living with HIV/AIDS. Published 8 times a year. Free subscriptions to HIV-positive people in prison.

Hepatitis Education Project

1621 South Jackson Street, Suite 201Seattle, WA 98144

Write to request info about viral hepatitis and how you can advocate for yourself to get the treatment you need.

Jailhouse Lawyers' Handbook c/o Center for Constitutional Rights 666 Broadway, 7th Floor New York, NY 10012 Write for a free copy of The Jailhouse Lawyer's Handbook: How to Bring a Federal Lawsuit to Challenge Violations

Inside Books Project

of Your Rights in Prison.

c/o 12th Street Books 827 West 12th Street Austin, Texas 78701

Free national resource guide for people in prison. It contains contact information for other organizations that can provide free books and information on finding legal help, pen pals, publications, and more.

SERO Project

P.O. Box 1233 Milford, PA 18337

A network of people with HIV and allies fighting inappropriate criminal prosecutions of people with HIV for nondisclosure of their HIV status, potential or perceived HIV exposure, or HIV transmission.

Just Detention International

3325 Wilshire Blvd, #340 Los Angeles, CA 90010 If you have experienced sexual harm in custody, write for their packet of info about rape and other sexual abuse, prisoners' rights, and how to get help via mail and phone. Survivors can write via **confidential, legal mail** to Cynthia Totten, Attorney at Law, CA Attorney Reg. #199266 at the above address.

Black and Pink

LGBTQ people.

614 Columbia Rd.
Dorchester, MA 02125
An open family of LGBTQ
prisoners and "free world" allies who support each other. Free newsletter and pen pal program for incarcerated

Men and Women in Prison Ministries

10 W. 35th Street # 9C5-2 Chicago, IL 60616 For those returning home to the Chicago area, they can answer questions about re-entry, faith, health, and other organizations that can help.

Reproductive Health, Living and Wellness Project

Justice Now
1322 Webster St #210
Oakland, CA 94612
A free 50+ page manual about incarcerated women's reproductive health. Another manual, Navigating the Medical System, is for women in California prisons.

PEN Writing Program for Prisoners

PEN American Center 588 Broadway, Suite 303 New York, NY 10012

Provides incarcerated people with skilled writing mentors and audiences for their work. Write for a free Handbook for Writers in Prison.

HCV Advocate

P.O. Box 15144

Sacramento, CA 95813

Write to ask for their frequently updated, free factsheets on hepatitis C: HCV Basics (available in English and Spanish), Hepatitis C Treatments, Exposure, Prevention, and/or Side Effects. They can also send one free sample copy of their monthly newsletter.

If you need resources that are 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.

Write to this address for the 3 resources on the right:

PLN
P.O. Box 1151
1013 Lucerne
Ave
Lake Worth, FL

33460

Prison Legal News

Monthly 72-page magazine on the rights of people in prison and recent court rulings. Sample issue: \$5, unused stamps are OK. Subscription: \$30/year.

Protecting Your Health & Safety: A Litigation Guide for Inmates

325-page manual explains legal rights to health and safety in prison, and how to advocate for those rights when they are violated. A publication of the Southern Poverty Law Center. Make a \$16 check or money order out to *Prison Legal News*.

Prisoner Diabetes Handbook

A 37-page handbook written by and for people in prison. Free for one copy.

SEEKING TIPS ON EATING HEALTHIER MEALS WITH LIMITED RESOURCES:

In general, it's a large challenge to eat meals that are healthy while serving time in a prison facility. Getting all the daily nutrition that is required to sustain a healthy body is limited with the choices in the dining hall and on the prison commissary food list, but it's not impossible. *Prison Health News* would like to hear from people on the inside on their tips that work for planning healthy meals with limited resources.

We want to share your tips with others who are struggling to eat healthy meals while serving their time beyond the prison walls.

If you have tips on eating healthier with limited resources on the inside and would like to share them with *Prison Health News*, we encourage you to write to us with your ideas and tips. Your ideas and tips would be printed and shared with others in *Prison Health News*.

Write to us at PHN Submissions, c/o Institute for Community Justice, 1207 Chestnut St., 2nd Floor Philadelphia PA 19107

PHN is a project of the AIDS Library and the Institute for Community Justice (ICJ) 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

Please write to us if your address changes.

All subscriptions are **FREE**

Edited By:

Elisabeth Long

Lucy Gleysteen
Suzy Subways

Teresa Sullivan

Envelopes stuffed and sealed with care by ICJ Volunteers.
Extra thank you to Warren
Lane for going above and beyond in his commitment to
Prison Health News.