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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. ❖

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! ❖



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 an 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 Educational Programs in

by Michael Ninburg

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

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> ❖



Hands by Daryl Young, Books Through Bars, Contexts Collection

Undercover

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 women 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 anguishing 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. ❖

information resources for people in prison

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

Project Inform

Outreach and Education Department
205 13th Street, Suite 2001
San Francisco, CA 94103-2461
information & newsletters on HIV
*free to prisoners

Fortune News

Subscriptions
c/o The Fortune Society
53 West 23rd Street
New York, NY 10010
newsletter on criminal justice issues
*free to prisoners

National HCV Prison Coalition

Hepatitis C Awareness Project
PO Box 41803
Eugene, OR 97404
newsletter & information on hepatitis C
*free to prisoners

Prison Legal News

2400 NW 80th St. #148
Seattle, WA 98117
newsletter on prisoner rights & court rulings
*sample issue \$1. unused stamps OK.

Southern Poverty Law Center

PO Box 548
Montgomery, AL 36101
*Publish "Protecting Your Health and Safety:
A Litigation Guide for Inmates"*
*\$10 for inmates.

The Books 4 Prisoners Crew

P.O. Box 19065
Cincinnati, OH 45219
*Publishes "Inside Out" a prisoner resource
guide with over 600 listings for prisoner
support groups and a review of services
provided by each one.*
*\$6 for free world folk. Prisoners who
would like a copy should send one of the
following--\$0.60 in unused stamps, a
\$0.60 prisoner money order made out
to "Books For Prisoners," or 2 clean
embossed envelopes.

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 Miami, FL

Care Resource, Miami

225 N.E. 34th Street

Miami, FL 33137

(305) 573-5411--no collect calls

Contact: Pedro Torres

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 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 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 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 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.

prison
health
news

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Edited By:

Laura McTighe

John S. James

Tiffany Smith

John Bell

Waheedah

Shabazz-El

Patricia Green

Brian Lafferty

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