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

Lucy, Samantha, Suzy, Teresa, and Winner
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. Please make sure it is clear on the envelope that your letter contains a submission. You can submit your work to this address:

Prison Health News
Attn: Submissions
1233 Locust Street
5th Floor
Philadelphia, PA 19107

WORDS TO LIVE BY
ADVICE FROM A FORMERLY INCARCERATED PERSON LIVING WITH HIV

1. Take care of yourself. Make your health your top priority. Ask for what you think you need. Don’t wait for someone to take care of you. Advocating for your health is a constant job, especially in prison or jail.

2. Become educated about the virus, your medical condition, medical treatments, and prevention. Find out where you can get HIV-related information while you’re in prison and get on that mailing list. If one place doesn’t write you back, write them again, but write other places as well. See if the prison library has any good information.

3. Join a prison support group if there is one. If not, see if it’s possible to start one. Find someone else who is living with HIV/AIDS in prison who you can trust to talk to.

4. Get to know the doctor or nurse who knows the most about HIV where you are. Ask a lot of questions. Don’t take medications if you don’t know why you’re taking them. Ask about side effects, how your medications interact, and what the medication is supposed to do for you. Make sure that you don’t run the risk of developing resistance to your treatment by missing doses. Ask the doctor or nurse to explain any words that you do not understand. Bring in articles you have that may be helpful.
5. Don’t miss any dosages. See if there is any way you can keep your meds in your cell. Train yourself to stick to the schedule, no matter how hard that is to do in prison or jail. Drinking or using drugs may make you miss doses, but it is important to stick to the schedule. Also, most of the HIV medication is safe to take while using if you’re not ready to stop using. The important thing is to keep the dose schedule.

6. Don’t wait to deal with having the virus. Get tested, and if you are HIV positive, search for any information that you can get your hands on.

7. Before you are released, try to make arrangements to see an HIV doctor on the outside as soon as you get out. Try to get the prison/jail medical department to mail your records to your new doctor, or at least write up a medical summary. If you are being released from a Pennsylvania State Correctional Institution, make sure you are given a 30-day supply of your medication and your medical summary from the medical department. If you can’t get your medication or make an appointment with a HIV doctor when you’re discharged, go to the emergency room right away.

8. Don’t take “No” for an answer. Be persistent, but not too persistent. Remember that you can get more if you are nice to the people that you need to be nice to. Use proper prison channels to complain.

9. Don’t get anyone else infected. Learn how to prevent HIV and only do the things that are safe.

10. Keep a positive attitude. Having HIV doesn’t mean you are going to get sick or die in prison or jail. Make sure you follow up on all test results. Sometimes the results are not forthcoming if you don’t pursue them.

11. People around you, either COs or inmates, may not understand what you are dealing with. Don’t let them negatively affect you.

12. After you get out, there are places that can help you get back on your feet, but it will require hard work on your part.

13. Find support while inside. The law might be more on your side than you realize. Use the grievance system. Explore the prison law library. Use it well and use it your advantage.
Hepatitis A

Hepatitis A is a virus that can make it harder for your liver to work. You can get hepatitis A from food or water contaminated with fecal matter (poop), being near someone who has hepatitis A, or having sex with someone who has hepatitis A. It is not spread by sneezing or coughing. Washing your hands often, especially after using the toilet, may help you avoid getting hepatitis A. You can also prevent it by getting a hepatitis A vaccination. It is important to speak to your doctor to be sure that you are properly vaccinated, as everyone’s vaccination needs and effectiveness can be different.

If you do get hepatitis A, you may feel very tired, vomit, have belly pain (especially on the upper right side below your lower ribs) not feel hungry, have dark urine, feel itchy, or have joint pain or yellowing of your skin and the whites of your eyes.

The only way to know for sure if you have hepatitis A is to get a blood test. For a blood test, a small amount of blood is taken from your arm and sent to a laboratory to be tested for signs of the hepatitis A virus in your body. In most cases, your body will get rid of the virus on its own. If you find out you do have hepatitis A, you can control the symptoms by resting and not drinking alcohol. It is also very important to drink plenty of fluids such as water, fruit juice, and milk.

To prevent spreading hepatitis A to other people, avoid sexual activity (even with condoms) while you are sick and wash your hands carefully after using the toilet. If your job includes preparing food for others, and you are not allowed to stay out of the kitchen while you have hepatitis A, wear gloves, and make sure to wash your hands before putting them on.

Hepatitis B

Hepatitis B is a virus that can cause a serious liver infection. For some people, hepatitis B will last longer than 6 months and can increase their risk of liver failure, liver cancer, or permanent liver scarring. You can get hepatitis B from the blood, semen, or other body fluids of someone who has hepatitis B. It is often spread by sexual contact and sharing needles.

Hepatitis B is not spread by sneezing or coughing.
To avoid getting this virus, you can get a hepatitis B vaccine, avoid having sex where you could risk passing blood between you, use a new condom or plastic barrier every time you have sex, avoid sharing needles, and only use clean equipment for piercing and tattooing. It is important to speak to your doctor to be sure that you are properly vaccinated, as everyone’s vaccination needs and effectiveness can be different.

The hepatitis B vaccination is a series of three shots over a period of time, so it is important to receive a complete vaccination.

If you do get hepatitis B, you may have belly pain, dark urine, a fever, joint pain, and yellowing of your skin and the whites of your eyes. You may also feel weak, tired and less hungry. Hepatitis B can also make you vomit.

To find out if you have hepatitis B, a doctor will look for signs of liver damage. The doctor may use a physical exam, a blood test, an imaging study such as a liver ultrasound, or a liver biopsy. For a liver biopsy, the doctor will poke a thin needle through your skin to remove a small piece of your liver to test in a laboratory. If you are exposed to the hepatitis B virus, you may get an injection to help protect you from getting sick. If you do get hepatitis B, it may go away on its own, and you may not need treatment. Instead, you can rest and drink lots of fluids. If hepatitis B does not go away by itself, you can be treated with antiviral medications, injections, or a liver transplant.
I can safely say that at least six out of every 10 times I pick up an LGBTQI (lesbian, gay, bisexual, transgender, queer, questioning and intersex community) newsletter or magazine, there is a person in prison somewhere in the country who is being victimized by prison or jail staff from weaponized PREA standards. If you are unaware of what the acronym stands for, it means Prison Rape Elimination Act. PREA was written to provide a resource (anonymous or otherwise) for people confined in America’s gulags (prisons) and mini gulags (jails) to report rapes and sexual abuses committed by both inmates and staff. However, this policy is often used as a hammer against the very people it was written to protect, while at the same time serving to shield the violators of its policies.

In the California prison system, the PREA policies are weaponized by staunchly rooting them in the “blame the victim” principle. This is used with specially targeted emphasis on members of the LGBTQI community — transgender people specifically. Currently, I am housed in a facility whose policy is to put the victims cited in a PREA complaint in segregation once a complaint is made, ostensibly to protect the victim.

Ironically, one of the drawbacks of PREA being anonymous is that anyone can pick up the phone or drop a kite to make a PREA complaint, knowing the claim will have you removed from the yard. It’s a double-edged sword, because anonymity is essential to an incarcerated person’s comfort level when it comes to reporting rapes or sexual abuse. When I was raped in prison as a teen (many moons ago), PREA did not exist. My complaint to the staff got me first ignored, then repeatedly molested, by staff. In the end, to protect myself, I ramped up my level of violence and inflicted that violence upon anyone in my path. The problem is those actions (for a time) became normalized behavior.
The larger problem with the segregation policy is that not only is the victim segregated, but so is the accused, and once in segregation, the accused can alert everyone there that you are the one who accused him or her — thus placing your safety in jeopardy once you are released back to the yard you came from or to another yard at the prison.

When staff is involved, PREA investigators (other in-house staff members) take the position that the victim must be mistaken, because facility staff are trained in these matters, so the victim must have misunderstood what took place in the “alleged encounter.” The PREA investigator usually meets with the victim with a pre-written statement for the victim to sign off on. I know this to be true, because before the facility started putting victims in segregation, I filed a staff complaint and PREA violation against a staff member who (at the behest of the then female yard sergeant) strip-searched me to ascertain whether my breasts are real.

The larger issue concerning staff complaints is that although the inmate is confined in administrative segregation, the accused staff member is never removed from inmate contact, leaving them to continue violating PREA policy willfully. Policies like this where no real checks and balances exist make PREA counterintuitive, to some degree. PREA is also the designated go-to when it comes to policy that ideally should manage how incarcerated people (transgender people specifically) are treated, including how we should be addressed as well as provisions to promote modesty in restrooms, shower usage and spaces to change clothing. Despite these policies being in place in writing, the administration consistently shirks its duty in this regard.

The modesty curtains at this prison are still basically see-through and only come into compliance with PREA standards with regard to this being a “men’s” prison, not taking into account transgender women who either through hormones or surgical intervention have pronounced physical features (like breasts). It took the better part of two years to get modesty panels, which were inadequate, now curtains, also inadequate, and those exist as a result of a quick fix to appease the recent PREA auditors.

Until PREA officials themselves step in and impose strict sanctions for violations of their policies, prison administrations will continue to weaponize the PREA policies, and victims of sexual abuse will continue to go unheard — and continue to suffer from anxiety, depression and suicidal tendencies. I encourage all of you reading this to not shirk your duty, and to understand that sacrifice is often necessary in efforts to achieve proper care and treatment, not to mention well-earned justice.

If you wear the cloak of leadership, make your leadership account for something strong and positive. Know you are not alone, so reach out for support, and you will find it.

In forever Solidarity,
Fatima Malika Shabazz
Imagine you have just been released from prison. What do you plan to do with your freedom? Finally eat some real food? Buy some Jordans? Get laid? Engage in your other favorite past-times? And then go report in at the parole office? If this sounds like a good parole plan, you obviously did not spend enough time planning for your future. Maybe what you need is to devise an effective parole plan to enhance your chances for success.

The faulty parole plan that I mentioned above was one that I used many times. I even changed the order and reported to the PO first, but I always ended up with a parole violation, or a new term. Failure to plan is planning to fail. As convicted felons, the odds are stacked against us. If you are a high-school dropout, woman, or a minority, the opportunity for legal and financial advancement are already adversely affected, but there are ways to level the playing field and put the odds back in your favor.

Many prisons have pre-release classes and re-entry services available. If your institution offers such programs, take advantage of the opportunity. If not, check your prison’s library for resource guides that often provide the addresses of transitional housing and re-entry services in your area. Residential drug programs are also a good place to build a foundation once you are released. Due to the demand for these services, there usually are waiting lists, so start writing to them when you’re about a year to the house. Many have classes for life skills, computers, parenting, and resume building, while also providing you with a safe, clean, and drug-free environment to reside, oftentimes at little or no cost to you. If you do not have a GED, make an effort to get it while you’re still incarcerated. If you do have a GED, sign up for vocational or college courses. This will optimize your time by turning unproductive time into a constructive endeavor. A transitional re-entry plan is also an excellent way to plan for your release. You know your weaknesses, but you have the power to correct your faults. Below is an example of how I have developed my re-entry plan. Each plan is different, and you may not have the same goals I do, but you can use this as a template to create your own.
My Re-entry Plan

First Day Goals:
- Report to the parole office to discuss parole conditions and any issues pertaining to the expectations of a successful parole
- Abstain from drugs and alcohol
- Check into transitional housing
- Call family

First Week Goals:
- Obtain a social security card
- Obtain a library card for free from my local library
- Obtain a bus pass
- Register with organizations that provide help with employment
- Update my resume or ask someone to help me create one
- Apply for assistance (health insurance, food stamps, etc.)
- Continue to try and not use drugs and alcohol
- Locate and attend an Alcoholics Anonymous or Narcotics Anonymous meeting
- Obtain a cellphone
- Attend church or any other type of community gathering
- Visit family

First Month Goals:
- Stay within the structured program of the transitional housing program
- Obtain a part-time job
- Continued participation in Alcoholics Anonymous and Narcotics Anonymous
- Open a bank account
- Obey all laws and report to parole officer as scheduled
- Meet other positive people
- Continue living alcohol- and drug-free
- Be punctual in work and school

Six Month Goals:
- Continue following the program rules of transitional housing
- Report to parole office as required
- Excel at work and at school
- Maintain sobriety
- Stay active in the church
- Do volunteer work in the community

One Year Goals:
- Be an exemplary resident of the transitional home
- Obey all laws and comply with parole conditions
- Continue participation in recovery support groups
- Stay active in church
- Help others

Five Year Goals:
- Obtain a stable residence
- Get off parole
- Obtain a degree
- Get married or engaged
- Continue church involvement
- Be a productive, respectable member of society
- Make my family proud
Step One: Finding Out if You Have Hepatitis C
First, you should write to your institution’s medical department to request testing to determine if you have hepatitis C. This response from your institution’s health care provider(s) should answer your request in a relatively short period of time.

If you do not receive an answer, you may wish to formally submit a Sick Call Slip, even if it costs several dollars to do so. Upon meeting your health care provider, please be clear on what you want, a hepatitis C blood test.

Initially, this blood test will determine if you are, or are not, hepatitis C positive. Some medical staff provide viral loads, but don’t be fooled, for such a measure has little impact on hep C cases. The viral load only means that the infection is present in one’s system.

You may wish to find out what your “F Scale” level is. F Scales are: F0-F1-F2 -F3-F4. F0 represents the lowest level, while F4 represents the highest level, ranging from no fibrosis to cirrhosis of the liver. Cirrhosis of the liver is a serious condition where normal tissue is replaced by scar tissue (fibrosis). This makes it more difficult for the liver to function the way it needs to. Cirrhosis of the liver can lead to liver cancer and death.

If the medical staff consents to treat you and treats you with direct acting antiviral medications (like Harvoni, Sovaldi, or Epclusa) your hepatitis problems should be over (although it should be noted that some people have side effects, although these drugs are a vast improvement over the former hep C treatments.) In any event, if you do get treated, your hep C problems should be over after some 12 weeks of treatment with the DAAV meds. So good for you!

Step Two: Responding to the Denial of Treatment
If they return any response which denies (or unreasonably delays) treatment, or states that you are not sick enough to be treated, it is a violation of the principles set forth in Estelle v. Gamble {429 U.S. 97 (1976)} and Abu-Jamal v. Wetzel {2017 WL 34700 (M.D., Pa. Jan. 3, 2017)}, where the Court, applying Estelle, found that the state defendants, by denying curative treatment for hep C, were “deliberately indifferent” to the prisoners’ “serious medical needs.”
Hepatitis C if left untreated can lead to suffering from what are called “extra hepatic” (liver related) symptoms and maladies. Therefore, an active hepatitis C infection is a serious medical need that requires curative treatment by DAAV meds (direct-acting antivirals) to avoid further destabilization and liver dysfunction.

Question: “What do I do when I get a denial back?”

Don’t panic. Don’t shrug. Don’t stop.

Appeal. (“Well, who do I appeal to?”)

Answer: All the way up!

According to the Prison Litigation Reform Act {(PLRA) Tit. 42 U.S.C. 1997e(a)}, a prisoner seeking to sue in federal court must exhaust all administrative remedies available. If you fail to go through this process, your civil rights complaint, and possibly your Motion for a Preliminary Injunction, will be dismissed.

So, what do you do?

Step Three: Filing Grievances and Appeals

Once you receive your request slip or statement by the healthcare professional (Dr., RN, NP, etc.) denying treatment, write your grievance stating when you learned you were hepatitis C positive, the date you were refused treatment, and the reasons given to you for such denial (such as not sick enough.)

Next, appeal, appeal, appeal—to the final level of the DOC or prison system in your state. Once you get that final denial, you can then go to court. (If you have any questions about your institution’s grievance process/procedure, read your handbook).

Remember, when you file your suit, be sure to name every person who denied treatment, DOC staff and medical staff alike. If you notice any symptoms that may be the result of your hep C infection (for example, increased urination, headaches, or fevers), list or recite them in your grievance.

To be absolutely clear, and to ensure that all necessary steps are taken, we are preparing checklists for you. Make a Xerox copy or simply rewrite in this handbook. Make doubly sure that you have checked the necessary boxes to ensure your best chance of preparing, writing, and filing your suit for the state’s violation of your 8th Amendment (cruel and unusual punishments) and medical claims.

NOTE: At this point you may file your grievance with the institution. You have 15 days to file a grievance (under Pennsylvania’s rules), but knowing how time (and attention) flies, we suggest you check your notes and checklist—and file as quickly as possible.

2ND NOTE: Request immediate treatment for your Hep C infection, and state that med staff (names!) informed you why they denied treatment. Under grievance rules, you may request any relief that a court may grant, such as preliminary judgement, immediate treatment, and unspecified money damages for pain, suffering, and denial of treatment.

(continued on pages 12-13)
Keep your checklist handy so that you can put in your own facts, names, dates, and events that happened in your own case. The checklist will prove invaluable to you in writing your actual Complaint and also preparing your Motion for Preliminary Injunction (or Temporary restraining order), for example.

If you are in a cell sick, suffering from the symptoms of hepatitis C, don’t panic. Don’t freak out. Get your ink pen and get to work, ok?

Remember, denial of treatment for your Hep C infection, for any reason, is a violation of your Eighth Amendment, constitutional rights, under Estelle v. Gamble, where the U.S. Supreme Court ruled that states cannot show “deliberate indifference” to a prisoner’s “serious medical needs.”

Anything that can kill you is “serious.” But you must prepare the ground. You must take the first steps to forcing the DOC to treat your “serious medical need.”

Step Four: Waiting

Some of you who will read this Manual are Jailhouse Lawyers, and therefore, this isn’t your first rodeo. You’ve filed a suit or two, and you know the ropes.

But because hepatitis C is such a commonly occurring viral infection, many of you have never filed a civil suit before, and the prospect of going back to court—even for a civil case (instead of a criminal case)—is downright intimidating.

To you, we offer these last words before you leap into the legal abyss.

Have no fear, for thousands of people have filed suits before you. In fact, I’d bet that, percentage-wise, given the extraordinary number of prisoners in America (‘mass incarceration’ right?) the average prisoner is more litigious than the average ‘free’ person.

Fear not. Read these words, scan the exhibits and sample pleadings [in the Litigation Manual from Abolitionist Law Center], and imagine putting your name on the captions (or headings naming the lawsuit). Remember that old saying about the lottery: “You gotta play to win!”

The laws that made these suits possible were written into law by a Congress sitting after the U.S. Civil War. Why did they do this? Because state courts were notorious and blatant in denying the so-called ‘freedmen’ to prevail in their courts. Think about it.

When you think from an historical perspective, that means these laws were literally written for many of your ancestors! But no matter who you are, you are able to use these laws to make the State begin to do the right thing: to treat your hepatitis C infection—with cures!

If you have trusted friends or family in the free world, especially those with access to a computer, please have them go to NLG.org. This is the website for the National Lawyers Guild, which publishes something called the Jailhouse Lawyers Handbook. Your friends or loved ones can download that Handbook from the website for free and send you a copy. It’ll show you a step by step of how to litigate in America’s federal courts.

But these papers will get you into court and in the perfect position to whip the state and the state’s contractors (medical health corporations) in your battle to get treated. With this brief Manual and the attached exhibits [in the Litigation Manual from Abolitionist Law Center], you can get in
**Additional Advice**

Don't be shy about asking questions about your health to infirmary/healthcare staff. When you are told anything, it's a good idea to keep clear notes—and date them. Given the havoc of prison life, keep your notes together, as in a notebook or brown envelope so you can retrieve them for when you are preparing your civil suit, or grievance appeals.

It's important for you to know that the private company (known as the medical contractor), that operates in your prison is engaged more in a business than in medicine. To make money—to save money—they will deny you treatment that you need, and watch you die in a prison cell.

Thanks to Bret Grote, Esq., Robert Boyle, Esq., and Dr. Joseph Harris, MD (our expert witness), who prevailed in *Abu-Jamal v. Wetzel et al.*, there is hope.

**Good luck to you all!** Remember: You Can Do This.

M. Abu-Jamal @ Mahanoy Joint.

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**Editors' Note:** This is an excerpt from the 52-page Hepatitis C Pro Se Litigation Manual created by the Abolitionist Law Center in Pennsylvania. If you are in PA, you can write to Abolitionist Law Center, P.O. Box 8654, Pittsburgh, PA 15221 asking for a copy. If you are in another state or the federal system, the only way to get a copy is for someone on the outside to email info@abolitionistlawcenter.org with the subject "Hep C Litigation Manual" to ask for a copy, then print it and mail it to you.

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**MY HEP-C CHECKLIST**

1. Date Filing of Sick Call Request: __________________
2. Date of Sick Call up to Medical: __________________
3. Date of Request for Hep C Blood Test: __________________
4. Date blood taken: __________________
5. Date blood test returned: __________________
6. Date blood test refused: __________________
   Dr./Nurse name: __________________
7. Date blood test noted positive for Hep C: __________________
   Dr./Nurse name: __________________
8. File another Sick Call Slip requesting DAAV meds for Hep C
   Date: __________________
9. Note by date and name of denial of DAAV meds: __________________
   Dr./Nurse name: __________________
10. Note Hep C viral load #: __________________
    Date: __________________
    Dr./Nurse name: __________________
11. Note reason given for denial of DAAV treatment:
    ________________________________________________________________________
    Date: __________________
12. Name of person giving reasons for denial: __________________
Information and Support Resources

Critical Path Learning Center
Philadelphia FIGHT
1233 Locust Street, 2nd Floor
Philadelphia, PA 19107
Answers questions about any health condition. 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 201
Seattle, 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

National Prisoner Resource Directory
Prison Activist Resource Center
PO Box 70447
Oakland, CA 94612
Free 24-page 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, publications, resources for women and LGBT people, 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
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 LGBTQ people.

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 information pamphlet, 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.

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.
Prison Health News Updates

Update 1: Prison Health News is unable to respond to health questions at this time. We apologize to our readers who have written us letters asking about their health. We are working on responding to health questions we have already received but we are not responding to new letters at the moment. We will continue to provide updates about our ability to answer health questions.

Update 2: We would like to alert our readers that the Florida Department of Corrections has banned all issues of Prison Legal News since 2009. Attorneys from Prison Legal News and the Human Rights Defense Center have been fighting this in the courts for almost ten years, and they hope to take it to the U.S. Supreme Court this year. We hope our readers in Florida will have access to Prison Legal News in the future.

Edited By:
Lucy Gleysteen
Samantha Burton
Suzy Subways
Teresa Sullivan
Winner Bell

Envelopes stuffed and sealed with care by volunteers of Philadelphia FIGHT

PHN is a project of the Critical Path Learning Center and the Institute for Community Justice (ICJ) at Philadelphia FIGHT.

For subscriptions write to us at:

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

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