Mailbox

July 1, 2004 By Staff

Jail Sentences

When Tim Murphy interviewed me about life in jail for "Getting Out Alive" [April 2004], I thought a magazine finally had the guts to expose what truly goes on in America's prisons. I was wrong. It seems *POZ* didn't want to piss off any departments of corrections with responses about this daily hell, like the ones I shared.

Prisoners already know the tricks you listed for surviving HIV in these cages. Non-incarcerated readers don't need to know how we should take care of ourselves. Instead, to motivate outsiders to help us get out alive, a magazine must reveal how this system is doing things to me that I once believed only Hitler could have thought of. I appreciate that you cared enough to help, but this is not the help we need. We need backbone. We need sacrifice. We need to be heard.

--Eddie Hatcher #0173499
Marion Correctional Institute
Marion, North Carolina

I was incarcerated in both federal and county prisons and experienced almost everything *POZ* covered—long pill lines, nonconfidentiality, low-quality physicians, supply interruptions and harassment. I missed numerous doses of HIV meds and was threatened with solitary confinement each time I inquired about them. Yet I noticed a genuine concern for diabetics and their treatment. Denial of health care and medications is a death sentence for positive inmates—the vast majority of whose crimes do not warrant death row.

--Lyndell Massengale
Ft. Lauderdale, Florida

I agree with Brad Peebles' implication that we prisoners are powerless [Publisher's Letter, April 2004]. It saddens me that the outside HIV community cares very little about positive inmates. It seems like AIDS activists who once concerned themselves with the welfare of HIVers now worry about a paycheck and a job. It's time to reach into the prisons. Inmates are ashamed and afraid of being tested because of the way they are treated after disclosure. After visiting my prison's medical area to get AIDS education materials and finding nothing, I was told that it was not of prison concern. There is little help for prisoners with HIV, so I'm trusting God to give me another chance to survive prison and give up my old addictions.

--Donald Wilson #FX-9420

State Correctional Institute
Graterford, Pennsylvania

POZ *responds:* POZ *intended the survivor's guide as a practical resource to assist prisoners with existing problems they frequently outline in letters to us, not as an exposé of the system's countless injustices.*

World's Fair?

Your consideration of the World Health Organization's 3 x 5 initiative ["3 x 5 Report Card," April 2004] offered a mixed message of hope and despair. Treating three million HIVers in developing countries by 2005 became a possibility only with the recent availability of generic drugs. But the control that pharmaceutical companies exert over the cost of meds separates HIV patients into two groups: those who can afford treatment and those who cannot. This is a painful reminder that world health is no longer something that everyone deserves, but rather a commodity that must be puchased.

--Christine Heidebrecht
Hamilton, Ontario

Malawi Zowle!

The Mbulumbudzi Support Group stumbled upon an [April 2003] issue of *POZ* that somehow found its way here to South Central Africa. In our village we have one clinic, no hospital—and 3,000 of the 15,000 residents have tested positive for HIV. More than 60 percent of Mbulum-budzi adults ages 15 to 45 are suspected of having the virus, and the average life expectancy here is 37 years. Your magazine has passed through many hands including those of the local *Médecins Sans Frontières* staff. We especially appreciated the stories about ordinary people and how they are managing their HIV, plus the information on opportunistic infections and medication side effects.

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