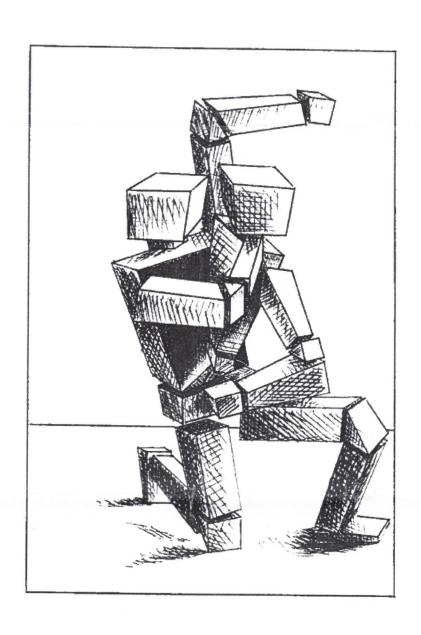
## Convict Chronicles: The Battle Within By Leo Cardez



## HOW TO FIGHT FOR YOUR RIGHTS TO ADEQUATE HEALTHCARE IN PRISON

## Leo Cardez

Months later, I still remember the way the nurse looked at me when I described my recent weight gain, hair loss, and depression. It was clear she either wasn't listening or didn't believe; me; or, more likely, simply didn't care.

Almost two years later, I was diagnosed with overactive thyroid, but not before months of fighting for treatment. The struggle inspired me to train to become an Illinois Department of Healthcare certified Healthcare Peer Educator. As a peer educator, I speak to newly incarcerated persons during their onboarding orientation about specific health risks in prison. Also, I explain their options when they are dissatisfied with the level of their healthcare treatment.

Communication issues between prison healthcare workers and persons in custody isn't new, quite the opposite. As a peer educator, I've noticed "not feeling heard" is a common refrain among my community. They feel dismissed. My old cellmate Liam McCauley (35) has been suffering from severe eye issues for almost a decade. He told me, "It's ridiculous to the point of the absurd. I'm suffering every day. My mother is a healthcare worker and I've consulted outside literature about my symptoms , everything points toward a serious disease, but I need to see a specialist. But being referred and then given an appointment to see a specialist is it's own gauntlet." I'm no doctor, but his bright red blood shot eyes and constant struggles to see make it pretty clear the eye drops they keep giving him aren't doing enough. So, he presses on with homemade solutions, hot water compresses and the like; hoping something will help ease the pain. He's not the exception.

Joshua Wilson (40) notes a litany of back problems going back several years: pinched nerve, slipped disk, sciatica, etc.

"If, since I got to prison, I had a dollar for every time the nurses and docs have blown me off or told me there wasn't anything to be done, I'd be Bezos rich." Wilson explains. "That's not even the worst part, the worst part is when they eyeball you up and down as is they had x=ray vision and then determine, 'You look okay, take a couple aspirin, and drink more water.'" Like many who suffer from chronic issues in prison, he often feels overlooked and ignored. That type of blatent disregard for our pain, our humanity, isn't just frustrating: it often leads to misdiagnosis, delayed care, and permanent, avoidable, damage.

This is what I tell my class to do if they believe they aren't getting the most from their interactions with the prison health professionals.

- 1. Prepare for your appointment:
  - a. Create and practice a one-minute summary of your symptoms including
    - \* What was going on when you first noticed the issue?
    - \* How long have you been feeling the symptoms?
    - \* Does anything make the issue worse or better?
    - \* Rate the pain from a 1-10
    - \* Don't just say, Oh, my stomach hurts; be specific in your choice of words, like jabbing or stinging, to describe your symptoms.
- 2. Ask questions (and have a pen and paper handy to write down the responses)
  - a. Ask questions that require a response and then wait silently until they are answered, for example:
    - \* What are some potential diagnosises for my issue?
    - \* Will I have to see a specialist?
    - \* Have you dealt with something similar in the past, and if so, what was the result?
    - \* Is this something that will require medication, and
- if so if so for how long? Is it curable?
  - \* Are there future symptoms I should look out for?
  - \* When will I be called in to see or hear my test results?
  - \* Can you explain that in simpler terms?
  - \* Can you repeat that?
  - \* Can you give me more details or send me an informational print-out of the illness/disease?

- 3. Never give up: If your doctor or nurse isn't answering your questions to your satisfaction, try asking them in a novel, but direct manner, for example:
- A. I see we may have a disconnect. Please understand, this is my health we're talking about and I need you to address my concerns before I leave today.
- B. I'm worried and in pain, I need to know more about what is happening to me.
- C. I get that you're swamped, but I'm not comfortable that you understand my condition. What can we do to avoid me having to put in a complaint or grievance; or involve my outside network to get involved and start calling places. I would prefer not to have to go that route and continue to have to drop sick call slips, as I'm sure you are.
- 4. Speak up: You've done everything I've recommended to no avail; it's time to follow through on your threats.
- A. File an emergency grievance, using your notes to fill out specific days, times, and people involved.
- B. Solicit the help of your outside network to call the facility and ask to speak to the Head Warden, Healthcare Supervisor, and doctor. Ask them to send emails to create a paper trail.
- Supervisors, and their bosses or state/national ombudsman offices to spark action. Ask for a new doctor, a second-opinion, a specialist consult; remember, you have a right to adequate healthcare and only you can insist that your needs are being met.