



The Correctional Association of New York

Founded in 1844

Date: \_\_\_\_\_ Facility: \_\_\_\_\_

Name: \_\_\_\_\_ DIN#: \_\_\_\_\_

We're working on a report about conditions in women's prisons in New York and how they can be improved. We're sending this survey because we want you and all women to have a chance to share your thoughts and experiences. We already sent you a survey about general conditions. This one is about women's health/GYN care.

Your feedback on the surveys will help us make the report accurate and also advocate for better health care for incarcerated women.

The Women in Prison Project is part of the Correctional Association (CA), a non-profit organization. We are not part of DOCS. Our goal is to make conditions inside prison better for women. We have legal mail status, which, as you know, means that staff are not allowed to read mail you send us.

Please know that there is no penalty if you do or don't send this survey back.

We keep the information in the surveys private (confidential) and we don't put any names in our reports. While we don't use names, we'd like to use the things you write in this survey to help people understand what it's like in prison and what needs to be changed.

Can we use your words (but NOT your name) in our report?  YES  NO

Ud. necesita este encuesta en Espanol? Si la repuesta es sí, por favor mandanos la encuesta en el sobre adjunto y te mandamos uno en espanol.

We also have a special survey for women who have been pregnant, given birth, or had an abortion, miscarriage or stillbirth while they were incarcerated.

If you've had any of these experiences in a New York State prison in the past five (5) years, can we send you our survey?  YES  NO

Thank you for your time and consideration.

We send you and your loved ones our best wishes for good health now and in the future.

When you go through the survey, you'll see these sections:

- About You
- Reception
- Yearly GYN Check-Ups & Your Feelings About GYN Care
- Specific GYN Issues You've Had
- Overall GYN Care
- Vitamins, Exercise, and Nutrition
- Lesbian, Gay, Bisexual, Transgender, Questioning and/or Queer (LGBTQ) Issues
- Menopause
- Health Care After Age 50
- SHU and Keeplock
- Access to Health Information

## About You

- 1) How long have you been at this prison? \_\_\_\_\_ months/years (*circle one*)
- 2) How long have you been in DOCS in total during this bid? \_\_\_\_\_ months/years (*circle one*)
- 3) What number bid is this for you? \_\_\_\_\_
- 4) What is your birth date? \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_
- 5) How do you identify your race/ethnicity? (*Check all that apply to you*)
  - African American
  - Latina
  - White/Caucasian
  - Asian American
  - Other: \_\_\_\_\_
- 6) Do you have any serious or chronic illnesses (like asthma, diabetes, high blood pressure, HIV, Hepatitis C, heart diseases, seizures)?  YES  NO  
⇒ **If yes**, which one(s)? \_\_\_\_\_
- 7) Did you have Medicaid or other health insurance at the time you were arrested?  
 YES  NO  I'm not sure
- 8) Did you have a regular doctor or clinic you went to in the year before you were in prison?  
 YES  NO  
⇒ **If no**, how did you usually get medical care when you needed it?
  - I went to the emergency room
  - I didn't go to the doctor
  - Other: \_\_\_\_\_
- 9) When was the last time you saw a doctor before you were arrested?
  - I saw a doctor about \_\_\_\_\_ weeks/months/years (*circle one*) before I was arrested
  - I'm not sure
- 10) Did you have a regular gynecologist (GYN) or GYN clinic you went to in the year before you were in prison?  YES  NO  
⇒ **If no**, how did you usually get GYN care when you needed it?
  - I went to the emergency room
  - I went to a clinic (for example, Planned Parenthood)
  - I didn't go to the GYN
  - Other: \_\_\_\_\_

## About You (continued)

11) When was the last time you saw a GYN before you were arrested?

- I saw a GYN about \_\_\_\_\_ weeks/months/years (*circle one*) before I was arrested
- I have never seen a GYN
- I'm not sure

12) What were your top GYN health concerns when you got to prison?

13) Have you ever been pregnant in your life?     YES     NO

⇒ If no, please skip to [Question 16](#)

⇒ If yes, have you ever:

a) Had an abortion?

- YES     NO

b) Had a miscarriage? (This is when you lose your baby in the first 5 months or so of pregnancy.)

- YES     NO

c) Had a stillbirth? (This is when you lose your baby in the last 4 months or so of pregnancy.)

- YES     NO

d) Had a pregnancy somewhere outside your uterus (womb), like in your tubes or somewhere else? (This is called an “ectopic” pregnancy.)

- YES     NO

e) Given birth more than three weeks before your due date? (A “premature” birth.)

- YES     NO

f) Given birth through your vagina?

- YES     NO

g) Given birth by having a C-section? (A “Cesarean section” is when a doctor does surgery to open your uterus/womb to deliver the baby.)

- YES     NO

h) Given birth through your vagina after you had a C-section?

(This is sometimes called a “VBAC,” Vaginal Birth After Cesarean)

- YES     NO

14) Have you ever been pregnant in a New York State prison?     YES     NO

⇒ If no, please skip to [Question 16](#)

⇒ If yes:

a) How many times? \_\_\_\_\_ times

b) About how many years ago was your last pregnancy in a New York State prison? \_\_\_\_\_ years ago

c) What prison were you in? (*check one*)

Albion

Beacon

Taconic

Lakeview

Bayview

Bedford Hills

Willard

## About You (continued)

15) Are you pregnant now?  YES  NO

⇒ If yes, what is your due date? \_\_\_\_ / \_\_\_\_ / \_\_\_\_

⇒ If no, what happened with your pregnancy? Did you:

Have a pregnancy somewhere outside your uterus/womb? (An ectopic pregnancy.)

Have a miscarriage?

Have a stillbirth?

Have an abortion?

Give birth?

Other: \_\_\_\_\_

*We know that your health and your family's health are connected. We advocate for better health care in prison and for more visiting programs for children and families. The next few questions about you and your family will help us with our understanding and advocacy.*

16) Did you have any family members, relatives or other people — not including children — you took care of before you were arrested (for example, a parent or grandparent)?  YES  NO

17) Do you have children who are under 18 years old?  YES  NO

⇒ If no, please skip to [Question 21](#)

18) Did you take your children to a doctor or clinic for regular check-ups before you were arrested?

YES  NO

19) Were you the main person taking care of your children before you were arrested?  YES  NO

20) During this bid, how many times have you gotten a visit with your children:

a) In jail before you were sent to prison? \_\_\_\_\_ times

b) In a New York State prison during this bid? \_\_\_\_\_ times

c) At this facility? \_\_\_\_\_ times

21) We recently gave a lot of books for moms and children to your prison library and Children's Center. You can tell which ones are from us because they have a note on the inside cover or on the front page. If you've used any of these books, which ones were the most useful for you?



## Reception

*This section is about your experiences with medical services during Reception at Bedford Hills when you were first sent to prison on this bid.*

22) Did medical staff at Reception tell you they were going to give you a pregnancy test?

- YES    NO    I'm not sure

23) When did you get the results back from the pregnancy test?

- I got the results back right away, while I was still at Reception  
 I got the results back \_\_\_\_\_ days/weeks/months (*circle one*) after Reception  
 I'm still waiting. For how long? \_\_\_\_\_ days/weeks/months (*circle one*)  
 I'm not sure

24) Did medical staff at Reception tell you they were going test you for STDs (like Hepatitis C, herpes, chlamydia, genital warts)?

- YES    NO    I'm not sure

25) When did you get the results back from the STD tests?

- I got the results back right away, while I was still at Reception  
 I got the results back \_\_\_\_\_ days/weeks/months (*circle one*) after Reception  
 I'm still waiting. For how long? \_\_\_\_\_ days/weeks/months (*circle one*)  
 I'm not sure

26) Were you on birth control when you arrived at Reception?    YES    NO

⇒ **If yes:**

- a) Which kind of birth control?    The Pill    IUD    Other: \_\_\_\_\_
- b) Were you on birth control for birth control reasons or for other health reasons (like bad cramps when you get your period)? (*Check all that apply to you*)
- For birth control reasons  
 For other reasons
- c) Were you taken off the birth control at Reception?    YES    NO
- ⇒ **If yes**, were you ever put back on birth control in New York State prison during this bid?
- YES    NO   Please explain.

27) Did medical staff at Reception ask if anyone in your family had breast cancer before menopause? (Menopause is when you stop getting your period.)    YES    NO    I'm not sure

⇒ **If yes**, if someone in your family did have breast cancer before menopause and you were 35 or older at Reception, did you get a mammogram?

- YES    NO

## Yearly GYN Check-Ups & Your Feelings About GYN Care

*This section is about yearly check-ups with the GYN and your feelings about GYN care in prison. The next section is about other times you have seen the GYN about specific issues. A check-up is when the GYN gives you a full exam, including examining your breasts and vagina and checking you for any problems.*

28) Have you been in New York State prison for 1 year or more on this bid?  YES  NO

⇒ If no, please skip to [Question 38](#)

29) Have you had a check-up with the GYN in prison in the past year (not including Reception)?

YES  NO

⇒ If yes, did you request the GYN check-up or were you put on the call-out list without having to ask?

I requested it  I was put on the call-out list  I'm not sure

⇒ If no, please explain why you didn't have a check-up (then skip to [Question 38](#)):

30) What prison were you in when you had your last GYN check-up?

- |  |                                   |
|--|-----------------------------------|
| <input type="checkbox"/> Albion        | <input type="checkbox"/> Taconic  |
| <input type="checkbox"/> Bayview       | <input type="checkbox"/> Willard  |
| <input type="checkbox"/> Beacon        | <input type="checkbox"/> Lakeview |
| <input type="checkbox"/> Bedford Hills |                                   |

31) During your last check-up, did the GYN examine your vagina?

YES  NO  I'm not sure

⇒ If yes, did the GYN tell you what s/he was doing when s/he examined your vagina?

YES  NO  I'm not sure

⇒ If no, how did that make you feel?

## Yearly GYN Check-Ups & Your Feelings About GYN Care (continued)

32) Did the GYN give you a Pap smear? (This is when the doctor puts a metal or plastic instrument called a “speculum” into your vagina and collects cells from your cervix. It helps the doctor screen you for cancer.)

YES    NO    I’m not sure

⇒ If yes:

a) Did the GYN tell you what s/he was doing?    YES    NO

b) How long did it take to get your results back?

It took \_\_\_\_\_ days/weeks/months (*circle one*)

I’m still waiting. For how long? \_\_\_\_\_ days/weeks/months (*circle one*)

⇒ If you are still waiting, please skip to [Question 33](#)

I’m not sure

c) Did you have to ask for the results or did you get the results without having to ask?

I had to ask for them. How many times did you have to ask? \_\_\_\_\_ times

I found out without having to ask

I’m not sure

d) If you had an abnormal result, how long did it take to get a follow-up appointment?

It took \_\_\_\_\_ days/weeks/months (*circle one*)

I’m still waiting. For how long? \_\_\_\_\_ days/weeks/months (*circle one*)

I’m not sure

33) During your last check-up, did the GYN talk to you about getting tested for HIV, Hepatitis C and/or any other STDs?    YES    NO    I’m not sure

34) Did the GYN give you a breast exam? (This is when the doctor feels your breast and the area under your armpit to find lumps or anything else abnormal with your breasts.)

YES    NO    I’m not sure

⇒ If yes, did the GYN tell you what s/he was doing when s/he examined your breasts?    YES    NO

35) If the GYN found a lump in your breast: did s/he schedule you for follow-up to find out what it was?

YES    NO    I’m not sure

⇒ If yes:

a) What was the follow-up? (*Check all that apply to you*)

Ultrasound

Mammogram

Other: \_\_\_\_\_

b) How long did it take to get the follow-up?

It took \_\_\_\_\_ days/weeks/months (*circle one*)

I’m still waiting. For how long? \_\_\_\_\_ days/weeks/months (*circle one*)

I’m not sure

## Yearly GYN Check-Ups & Your Feelings About GYN Care (continued)

36) Did you need follow-up for anything else from your last check-up?

YES    NO    I'm not sure

⇒ If yes:

a) What did you need follow-up for? \_\_\_\_\_

b) How long did it take to get the follow-up you needed?

It took \_\_\_\_\_ days/weeks/months (*circle one*)

I'm still waiting. For how long? \_\_\_\_\_ days/weeks/months (*circle one*)

I'm not sure

37) Overall, how would you rate the last yearly GYN check-up you had?

Good    Fair    Poor

38) If you are 40 or older, have you had a mammogram while you were in prison during the past year?

YES    NO

⇒ If no, please skip to [Question 42](#)

39) Did you request the mammogram or was it scheduled for you?

I requested it

It was scheduled without me asking for it

I'm not sure

40) How long did it take to get the results back from the mammogram?

A medical staff person read them to me right after I had the mammogram done

It took \_\_\_\_\_ days/weeks/months (*circle one*)

I'm still waiting. For how long? \_\_\_\_\_ days/weeks/months (*please skip to Question 42*)

I'm not sure

41) If you had an abnormal result, how long did it take to get a follow-up appointment?

It took \_\_\_\_\_ days/weeks/months (*circle one*)

I'm still waiting. For how long? \_\_\_\_\_ days/weeks/months (*circle one*)

I'm not sure



## Yearly GYN Check-Ups & Your Feelings About GYN Care (continued)

42) In general, do you feel comfortable talking with the GYN at your facility?  YES  NO

Please explain.

43) Do you have enough privacy when you are having a GYN exam at your facility?  YES  NO

Please explain.

44) In general, how do you usually feel after a GYN exam at your facility? *(Check all that apply to you)*

I feel well-cared for

I feel alright/fine

I feel bad

Please explain.

45) Have you ever refused to go to the GYN since you've been in a New York State prison on this bid?

YES  NO

⇒ If yes, why?

46) Overall, how would you rate the GYN at your facility?

Good  Fair  Poor

## Specific GYN Issues

This section is about specific GYN issues you have had and your experiences trying to get the care you needed.

47) The last time you asked to see the GYN, how long did you have to wait?

\_\_\_\_\_ days/weeks/months (circle one)

48) In the past 5 years, have you had or thought you had any of these problems in a New York State prison?  
(Check all that apply to you)

- Lumps in your breast
- Problems with your period. For example, if your period:
  - comes too often or lasts too long
  - doesn't come at all sometimes
  - is painful/you have bad cramps
  - is very heavy
- Fibroids (These are tumors which do not cause cancer that grow in or around your uterus/womb and can cause bleeding, pain or other problems)
- Discharge, itching or burning from your vagina, and/or a yeast infection
- Bladder infection or Urinary Tract Infection (UTI)
- Sexually Transmitted Diseases (STDs, for example, HIV, Hepatitis C, herpes, syphilis, gonorrhea, chlamydia, trich (trichomoniasis), HPV, genital warts)
- An infection in your pelvis (called "Pelvic Inflammatory Disease/PID")
- Endometriosis (when tissue grows outside of your uterus/womb and causes pain)
- Serious pain in your pelvis, vagina or uterus/womb
- Cancer in your:
  - Breasts
  - Ovaries (Ovarian Cancer)
  - Uterus/womb
  - Vagina
  - Cervix (Cervical cancer)



⇒ If you did **NOT** check anything on the list above, please skip to the next section (**OVERALL GYN CARE, Question 68**)

⇒ If you **DID** check anything on the list above, please think about **the most recent time** you had one of these GYN problems and answer the following questions based on that experience.

49) Did you go to sick call because of your symptoms?  YES  NO

⇒ If no, please skip to **Question 64**

⇒ If yes:

a) How did the sick call nurses treat you?  Good  Fair  Poor

b) What did they say and do?

## Specific GYN Issues

50) How long did it take from the time you signed up for sick call until the time you saw a doctor or GYN for the GYN issue?

It took \_\_\_\_\_ days/weeks/months (*circle one*)

a) Who did you see?

Doctor    GYN    Other: \_\_\_\_\_

I never saw a doctor/GYN (*please answer Question 51 and 52, and then skip to Question 64*)

51) Did your symptoms get worse because you had to wait to see a doctor/GYN?    YES    NO

⇒ **If yes**, what happened?

52) What were you told you had (what were you diagnosed with)?

53) Did the doctor/GYN discuss different treatment options with you before deciding what kind of treatment you should have?    YES    NO

Please explain.

54) Did you get any tests for the GYN issue?    YES    NO

⇒ **If no**, please skip to [Question 57](#)

55) How long did it take from the time you were told you needed to get a test until the time you actually got the test?

I got the test right away (immediately)

I got the test after \_\_\_\_\_ days/weeks/months (*circle one*)

I'm still waiting. For how long? \_\_\_\_\_ days/weeks/months (*please skip to Question 57*)

56) After you got the test, how long did it take to get the results back?

It took \_\_\_\_\_ days/weeks/months (*circle one*)

I'm still waiting. For how long? \_\_\_\_\_ days/weeks/months (*circle one*)

I'm not sure

57) Were you prescribed any medication for your GYN issue?    YES    NO

⇒ **If no**, please skip to [Question 60](#)

## Specific GYN Issues

- 58) How long did it take from the time you were told you needed medication until you actually got the medication?
- I got the medication right away (immediately)
  - It took \_\_\_\_\_ days/weeks/months (*circle one*)
  - I'm still waiting. For how long? \_\_\_\_\_ days/weeks/months (*circle one*)
  - I'm not sure
- 59) If you needed refills of this medication, did you ever run out and have to wait to get a refill?
- YES     NO     I'm not sure
- ⇒ **If yes**, how long did you have to wait, on average? \_\_\_\_\_ days/weeks/months (*circle one*)
- 60) Did you ever see a specialist for your GYN issue? (A specialist is a doctor who focuses on a particular area of medicine. For example, an oncologist is a doctor who specializes in treating cancer. There are also GYNs who specialize in certain areas. Depending on what kind of problem you have, the doctor or GYN at your facility may decide to send you to a specialist GYN.)
- YES     NO
- ⇒ **If no**, please skip to [Question 64](#)
- 61) How long did it take from the time the prison doctor/GYN said you needed to see a specialist until the time you actually saw a specialist?
- It took \_\_\_\_\_ days/weeks/months (*circle one*)
  - I am still waiting. For how long? \_\_\_\_\_ days/weeks/months (*circle one*)
  - I'm not sure
- 62) What did the specialist say and do?
- 63) Did the prison doctor/prison GYN do what the specialist said (did they follow the specialist's recommendations)?     YES     NO     I'm not sure  
Please explain.
- 64) Is your GYN issue still bothering you or has it been taken care of?

## Specific GYN Issues

65) What, if anything, could have improved your experience getting the care you needed?

66) Have you had a hysterectomy or one or both ovaries removed since you've been in prison? (A hysterectomy is when a doctor removes your uterus/womb.)

YES    NO

⇒ If yes:

a) Which procedure did you have? *(Check all that apply to you)*

Hysterectomy

Both ovaries removed

One ovary removed

Other: \_\_\_\_\_

b) Did the doctor tell you why you needed the procedure? What did s/he say?

c) Did the doctor explain that you would not be able to have children if you had a hysterectomy or both ovaries removed?    YES    NO

d) Did the doctor discuss with you other possible ways of treating your issue before you had the procedure? What did s/he say?

67) Overall, how would you rate the care you got for the specific GYN problems you talked about in this section?    Good    Fair    Poor

## Overall GYN Care

68) Overall, how would you rate the GYN care you've had since you've been in New York State prison on this bid?    Good    Fair    Poor

## Vitamins, Exercise, and Nutrition

69) Since you've been in state prison in New York, have you ever been prescribed vitamins?

YES    NO

⇒ If yes, which ones? (Check all that apply to you)

Multi-vitamins    Calcium    Iron    Other: \_\_\_\_\_

⇒ If no, did you ever ask for vitamins?    YES    NO   What happened?

70) On average, how much exercise do you get each day?

I get about \_\_\_\_\_ minutes/hours (circle one) of exercise each day

71) Do you feel like you get enough exercise?    YES    NO

72) Since you've been in prison, have you gained or lost a lot of weight?

Gained a lot    Lost a lot    Stayed about the same

⇒ If you gained or lost a lot, why do you think this happened?

## Lesbian, Gay, Bisexual, Transgender, Questioning and/or Queer (LGBTQ)

*This section is about how your sexual orientation, the way you look, and the way you identify yourself affects your medical care in prison. If you identify as lesbian, gay, bisexual, stud, aggressor, butch, queer, questioning, transgender, or in another way, please answer the questions in this section. If you don't identify as LGBTQ, please skip to the next section (MENOPAUSE, Question 77).*

73) Have any medical staff ever called you names, treated you badly, or denied you services because of how you look or how you identify yourself?    YES    NO

⇒ If yes:

a) Which staff? (Check all the answers that apply)

Sick call nurses    GYN    Doctors    Other: \_\_\_\_\_

b) What did they say/do?

c) How did it make you feel?

## LGBTQ (continued)

74) Have you ever avoided or delayed asking for medical care because you felt embarrassed or because you thought staff would treat you badly or make fun of you because of the way you identify yourself?

YES  NO

⇒ If yes, please explain what happened.

75) Is there medical/GYN care you need that you haven't been able to get because of the way you identify yourself?  YES  NO

⇒ If yes, please explain.

76) What could be done to make medical and GYN services better for you and other incarcerated people who identify themselves the same way you do?

## Menopause

*This section is about menopause. As you may know, menopause is when you stop getting your period. Some women call it "the change" or "the change of life."*

77) Since you've been in New York State prison on this bid, have you gone through menopause or are you going through menopause now?  YES  NO

⇒ If no, please skip to [Question 81](#)

78) Did you ever go to sick call for your symptoms (like hot flashes)?  YES  NO

⇒ If yes:

a) How did the sick call nurses treat you?  Good  Fair  Poor

b) What did they say and do?

79) Did you ever see the doctor or GYN for your symptoms?  YES  NO

⇒ If yes:

a) Who did you see?  Doctor  GYN  Other: \_\_\_\_\_

b) What did s/he say and do?

## Menopause (continued)

80) What kind of medication, treatment, or advice about menopause did you get, if any?

81) Have you had a bone scan since you've been in prison on this bid?  YES  NO

82) Have you been diagnosed with osteoporosis ("weak bones" or "brittle bones")?  YES  NO

⇒ If yes:

a) Have any medical staff in prison treated you for it or given you advice? What did they say?

b) What kind of medication or treatment are you getting, if any?

83) Overall, how would you rate the care you got for menopause and/or osteoporosis in New York State prison on this bid?  Good  Fair  Poor

84) What was it like to go through menopause in prison? Is there any support or services you would have wanted that you didn't get?

## Health Care After Age 50

85) If you are 50 or over, have you had a colonoscopy in the last year? (This is a procedure to examine your colon and check for cancer.)  YES  NO

86) How many colonoscopies have you had since you've been in prison on this bid? \_\_\_\_\_

87) What could be done to make medical and GYN services better for you and other incarcerated women age 50 and over?



## GYN Care in SHU or Keeplock

This section is about your experiences with GYN care in Special Housing Unit (SHU) or Keeplock.

88) Have you ever been in SHU or Keeplock?  YES  NO

⇒ If yes, which one?

SHU  Keeplock  Both

⇒ If no, please skip to the next section ([ACCESS TO HEALTH INFORMATION, Question 110](#))

89) When was the last time you were in SHU or Keeplock?

I am in SHU/Keeplock now (*circle one*)

⇒ If you are in Keeplock, where are you?

In my cell  In a separate Keeplock unit  In the infirmary  Other: \_\_\_\_\_

The last time I was in SHU was \_\_\_\_\_ days/weeks/months/years ago (*circle one*)

a) Which prison were you in at that time?

Albion  Beacon  Taconic  Lakeview  
 Bayview  Bedford Hills  Willard

The last time I was in Keeplock was \_\_\_\_\_ days/weeks/months/years ago (*circle one*)

a) Which prison were you in at that time?

Albion  Beacon  Taconic  Lakeview  
 Bayview  Bedford Hills  Willard

b) Where were you?

In my cell  In a separate Keeplock unit  In the infirmary  Other: \_\_\_\_\_

90) How long is/was your sentence the last time you were in SHU/Keeplock?

Sentence for SHU: \_\_\_\_\_ days/weeks/months (*circle one*)

Sentence for Keeplock: \_\_\_\_\_ days/weeks/months (*circle one*)

I'm not sure

91) What was the charge that got you into SHU/Keeplock the last time you were there?  
(Check all that apply to you)

Disobeying a direct order

Creating a disturbance

Being out of place

Assault on another incarcerated person

Assault on staff

Threatening staff

Fighting

Contraband/weapon

Contraband/drugs

Other contraband

Other \_\_\_\_\_

I'm not sure

## GYN Care in SHU or Keeplock (continued)

92) In SHU/Keeplock did you ever sign up for sick call because you needed to see medical staff about at GYN issue?  YES  NO

⇒ If yes, what was the issue?

⇒ If no, please skip to the next section ([ACCESS TO HEALTH INFORMATION, Question 110](#))

93) Did have to tell a correction officer in SHU/Keeplock the specific details about why you wanted to see medical staff?  YES  NO

⇒ If yes:

How did that make you feel?

How did the officer respond?

94) Did the sick call nurse ever come to see you about the GYN issue while you were in SHU/Keeplock?

YES  NO

⇒ If no, please skip to [Question 100](#)

95) How did the sick call nurse treat you?  Good  Fair  Poor

96) What did the sick call nurse say and do?

97) Where did you speak to the nurse about your GYN issue?

Right outside of my cell

In a room outside my cell on the SHU/Keeplock unit

In the medical building

Other: \_\_\_\_\_

98) Were you put in restraints or cuffs during the meeting with the nurse?  YES  NO

⇒ If yes, which kind(s)? How did it affect your meeting?

## GYN Care in SHU or Keeplock (contintued)

99) Did you feel like you had enough privacy?  YES  NO

Please explain.

100) Did you ever see a doctor or GYN for your GYN issue while you were in SHU/Keeplock?  YES  NO

⇒ If no, please skip to [Question 108](#)

101) Who did you see?  Doctor  GYN  Other: \_\_\_\_\_

102) How long did it take from the time you signed up for sick call until you saw a doctor or GYN while you were in SHU/Keeplock?

\_\_\_\_\_ days/weeks/months (*circle one*)

103) Did your symptoms get worse while you were waiting to see the doctor/GYN?  YES  NO

⇒ If yes, what happened?

104) Where did you see the doctor/GYN?

Right outside of my cell

In a room outside my cell on the SHU/Keeplock unit

In the medical building

Other: \_\_\_\_\_

105) Were you put in restraints or cuffs during the meeting with the doctor/GYN?  YES  NO

⇒ If yes, which kind(s)? How did it affect your exam?

106) Did you feel like you had enough privacy?  YES  NO

Please explain.

107) Did you need any follow-up for this GYN issue while you were in SHU/Keeplock?  YES  NO

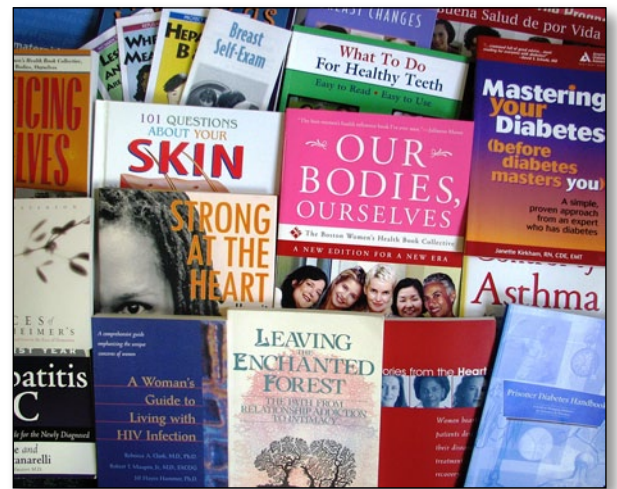
⇒ If yes, did you get the follow-up? Please explain.

## GYN Care in SHU or Keeplock (contintued)

- 108) Overall, how would you rate the GYN care you got while you were in SHU/Keeplock?  
 Good    Fair    Poor
- 109) What would you change to make getting care for GYN/medical issues easier for women in SHU/Keeplock?

## Access to Health Information

- 110) We recently gave a lot of books and pamphlets about women's health to your prison library. You can tell which ones are from us because they have a note on the inside cover or on the front page. If you've used any of these books, which ones were the most useful to you?



- 111) What are the top 3 health issues you still need more information on?

- 112) Since you've been in New York State prison, has anyone ever talked with you about STDs, HIV and/or safe sex?    YES    NO

⇒ If yes, was it helpful? Why or why not?

## Access to Health Information (continued)

- 113) Since you've been in New York State prison, has medical staff ever talked to you about birth control and/or your options if you were pregnant in prison?  YES  NO  
⇒ If yes, was it helpful? Why or why not?
- 114) Since you've been in New York State prison, have you ever been on:
- a) Family Reunion Program (overnight trailer visit) with your spouse or child's guardian?  YES  NO
  - b) Work Release?  YES  NO
  - c) Another kind of temporary release (like a funeral or deathbed visit)?  YES  NO
- ⇒ If you've never participated in any of the above, please skip to [Question 122](#)
- 115) Did medical staff prescribe/give you birth control before you went on: *(check all that apply to you)*
- Family Reunion Program?
  - Work Release?
  - Another kind of temporary release?
- ⇒ If no, please skip to [Question 120](#)
- 116) Did you ask for birth control or was it offered to you?  I asked  It was offered to me  
Please explain.
- 117) Which kind of birth control did you get before you went on: *(check all that apply to you)*
- a) Family Reunion Program?  The Pill  Condoms  Other: \_\_\_\_\_
  - b) Work Release?  The Pill  Condoms  Other: \_\_\_\_\_
  - c) Another kind of temporary release?  The Pill  Condoms  Other: \_\_\_\_\_
- 118) Did medical staff discuss the health risks and benefits of the different birth control methods?  
 YES  NO
- 119) Did you get the kind of birth control you wanted?  YES  NO
- 120) Did medical staff ever offer you the "morning after" pill? (This is sometimes called "emergency contraception" or "Plan B." It prevents pregnancy after you've had sex without birth control or if a condom broke.)  YES  NO
- 121) Did medical staff ever offer you dental dams? (This is a thin piece of latex rubber that helps prevent STDs during oral sex.)  YES  NO

## Access to Health Information (continued)

122) Are you three months or less from your earliest release date?  YES  NO

⇒ If no, please skip to [Question 124](#)

123) Has anyone given you information about: *(Check all that apply to you)*

- How to access health services and GYN care in the community you're going back to?
- How to get a prescription for birth control or a supply to take with you when you are released?
- How to protect yourself from STDs and have safe sex?

⇒ If you answered yes to any of the above:

a) Who talked to you? What did they say?

b) What was offered to you, if anything? Was it helpful?

124) Overall, how would you rate the health information you've gotten since you've been in prison?

- Good  Fair  Poor

## Number One Improvement

125) Out of all the issues you talked about in this survey, what do you think is the most important thing that should be done to improve women's health care/GYN care for women in New York State prisons?

126) Is there anything else you would like to share that you haven't already?

*Thank you for your time!*