



2008

Free Space



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Education and Culture DG



Lancaster &
Morecambe
the College

Introduction

Our Project "Making Spaces for Change" has the main objective to create efficient educational spaces inside prisons. There, different learning activities are carried out which help to improve the quality of life and co-existence in penitentiary centres. These activities should include defeating the main problems of drug dependence and prison sub-culture, these place conditions on any type of educational and treatment intervention.

We must face drug addition and overcome it. Prisoners and staff must work together if we want to obtain a better prison. It is important that time spent in jail is useful and allows coexistence and personal development of the prison population. This, without a doubt, will help to contribute the re-insertion of offenders into society.

During this academic year and the next one, our learning partnership will develop health education activities. Our project is aware of the importance that health education has in prisons. Many serious health problems are found in these places, with their physical, psychological and social elements. We think that an educational and efficient intervention is absolutely necessary so we need to rely on prisoners' collaboration. They will act as educators amongst their peers. They will be used as a reference for their fellow prisoners. These "health agents" will not just transmit health and personal care information, but they will also listen to and support their fellow prisoners.

In this issue of "Free Space" magazine we intend to inform and share the activities which we carry out in the UTE (Therapeutic and Educative Unit) at the Villabona prison in Asturias, Spain.

Activities are also being carried out in Lancashire County prisons (United Kingdom), organized by Lancaster and Morecambe College (LMC). All these activities are done using different methods, such as education for health in our environment.

The Galli Group (Austria) and Festival of Friends (Germany) contribute to the Project by using their theatrical approach to treat addictions, solving interpersonal conflicts and different strategies of personal development.

In Lancashire, classes are given on dental health, healthy food, sport, men's health, mental health, parentcraft, tobacco addiction and drug-addiction. LMC are also working on some complementary teaching material to improve Skills for Life using health and sports concepts.

In the UTE in Villabona prison, the "Informative health education workshops" deal with prevention and develop healthy lifestyle habits from this free drug space. The "Emotional health workshop" offers important support to the patients with HIV-AIDS and Hepatitis C. Health workshops allow the existence of a correct follow up of medical treatment. The health workshop Theatre Group creates and acts out plays which deal with the most important health issues in prison, using drama as an informative, preventive and therapeutic tool.

We hope that the contents of "Free Space" will be interesting and useful to all those people who want to get to know our project on education in prisons, through this magazine. The project is funded by the Grundtvig program.

Suggestions and comments are welcome to: spacesfor@hotmail.com

Julio Florencio Fernández Rubio (UTE teacher. Project coordinator)



The Link Which Joins Us

I have had HIV for 14 years and consider myself to be very lucky apart from the fact that I feel very hurt inside. It all started in mid 1991. I was full of energy which you have when you are 14 years old. I grew up in a working class suburb where every day you had to struggle to survive. I was a very daring young man. I thought I could change the world but, in fact, the world changed me. More than that, it left me completely destroyed. Why? Well, drugs appeared on the scene and another way of life arrived with heroin. This way consisted of delinquency, prison and to be a complete drop-out in society. I was so worried that I never imagined that would be the worst thing that could ever happen to me. I was becoming what I never wanted to be: a slave!

My whole family broke-up. They went down and sank with us in that world and I say us because at that time my twin-brother, Ruben, still lived. But drugs smashed him and didn't give him the chance to carry on living (but that is another story). So finally nobody knew what was going on, it was the cancer of our society which only had time for superficial things, materialism, etc. When I was very small I began to pay for my own mistakes and being very young I lost my freedom that I would never get back. Many times I tried to fight against drugs in the prisons where I served, but it was always in vain. I never won the battle and, when I still hadn't go back on my feet, I caught AIDS 14 years ago. AIDS for me was equivalent to death. There was no information about it and I didn't know what to do. I think that a large part of that generation was taken by fear and uncertainty of not knowing what could happen.

Doctors began to medicate people with retroviral treatment and many of them didn't survive. I lost many of my friends on the way, in different prison infirmaries. So many wonderful people have passed away in the prime of their lives! Many people in society only remember those people on the first of December. After 14 years, almost 15, I ask myself: Why do young people still get hooked on heroin? Why do people still become infected by HIV?

As I said at the beginning, I consider myself to be a very lucky person because I'm still here, in this drug free space, living and sharing with you. I say living because I consider myself a survival in all aspects. Since 1991 I've had multiple diseases which came about because of the virus. I've had various pneumonias, three tuberculosis, a herpes zoster and a paralysis on the left side of my body. I even reached the terminal phase of AIDS in 2003 with less than seven defences in my immune system.

As I've never taken care of myself nor have I taken any medication until I arrived at this unit, I was always against the idea of medication because I didn't know how to live with this disease, I never knew how to take it. During my stay in this module I signed up for the Health workshop which helped me to vent my worries and emotions on my friends.

When I arrived at the Therapeutic and Educational Unit, I only had ten defences, almost a million viruses and weighed 53 kilos. I was desperate, but fortunately in this drug free space I met people who supported me without asking anything in exchange, which surprised me because I was used to moving in different prison yards where everything was



"give and take". I've been in this Unit for 14 months and I've been taking retroviral medication for almost one year. Today I feel very well with 310 defences with few viruses and weighing 20 kilos more. But the best of all is that thanks to the Emotional Health Workshop, I have begun to accept myself as I am with the disease I have and I can openly share my worries and concerns with my friends.

Miguel Expósito Leal (UTE de Villabona, Asturias, España)

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For the Health in the UTE

UTE. VILLABONA. ASTURIAS. SPAIN.

THE WORKSHOP OF EDUCATION FOR THE HEALTH IN THE UTE

At the present time, the Therapeutic and Educative Unit (UTE) of Villabona's Prison is formed by modules 1 and 2 (UTE 1), a mixed space (both men and women), and modules 3 and 4 (UTE 2). In these departments there are about 430 prisoners. UTE has been shaped, throughout its process of formation (it came about in 1992), and through consolidation and expansion, it is an alternative space to that of the traditional prison. UTE offers a free space from the prison subculture; and therefore of drugs. It provides a space where therapeutic and educative interventions are possible and effective in all its dimensions.

UTE represents a model of joint management and shared responsibility between prisoners and penitentiary professionals. Both groups have transformed the prison by eliminating the violence and improving the coexistence of staff and prisoners and therefore the quality of life within the prison. The relationship between prisoner and professional allows the therapeutic intervention to succeed. Prison Officers who used to be 'wardens' are now educators. This model, is then freed from tensions and disputes. This atmosphere is ideal for prisoners to achieve their hopes of returning to society. The inmates in UTE take advantage of their stay in prison by facing the problems that have lead them to delinquency (generally drug addiction), and being protagonists in their personal process of change.

In UTE cohabitation is possible. The problems and situations that a single prisoner may have, are immediately shared by the others, who will help him to get over it. They gather in groups to encourage one another to keep struggling on the road to a new life. The therapeutic groups are the fundamental piece in this jigsaw. Recidivism rates in UTE graduates that have been sent to external therapeutic communities represents no more than 10%. The national average (in Spain) is 60%`.

UTE's space is where we improve the lifestyles of the prisoners. We deal seriously with the treatment of disease (after diagnosis), but we also help their prevention by putting the tools and knowledge of healthy lifestyles into effect.

We think that if we talk about "Education for health", people are the main resource. Prisoners are the true agents of health in prison. That is why we use a group methodology that encourages participation and education between equals as a form of interpersonal learning, both on a didactic plane and on an emotional one.

The main objective for our intervention is to change the attitudes and the behaviour of offenders in order to prevent and to treat the typical health problems (difficult to prevent and to eradicate) of a closed system.. These include: HIV, VHC and STIs (sexually transmitted infections). We also want to spread healthy habits to improve the prisoners' quality of life.

INTERVENTION STRATEGIES:

The Education Workshop for the Health of UTE uses diverse strategies looking for a common objective: the prisoners are the people able to transmit health. These are:

1. - Groups of Formation. -

We work on the principle that the ideas which are generated by the group are richer than those which are individually obtained by the professional who is in charge of the workshop. This way, we try to sensitise the group of participating prisoners to the importance of health and its global and integral character. Diverse subjects are approached, through a process of joint management and interrelation between suppliers (professionals) and future health agents (prisoners). Both groups act like mediators and instructors.

2. - Emotional Support Groups. -

They are essentially integrated by HIV-positive people who share their own problems. In these groups prisoners show their doubts, fears and feelings. They talk about their attitudes to the disease. They look for solutions and they help mutually. "Helping others you also help yourself". This way, the necessity of relationship and membership is satisfied, contributing affection and understanding. "The negative emotions are sorted out" and stress is reduced.

The interchanging of experiences is very beneficial for new prisoners who join these groups because they verify that others have overcome similar situations. The prisoners who take part in "Emotional Support Groups" will be the most sensitised and empowered to act as health agents between equals.

3. - The Theatre Group. -

This has two objectives: one of them is therapeutic and the other one is educative. Through performance and the corporal expression prisoners are able to identify with different situations related to health. Scenes become a safe place where they can express a multitude of emotions and reflect on them.

The theatre also acts as a powerful educative tool. Prisoners are natural actors who recognise the different health problems which are taking place during the performance. They are the authors and actors. What is more, they design their own clothes, the scenery and all that is related to the staging of the show. Approximately every six months are committed together with the professionals in the creation of a play whose themes have relation with the diseases that are tried to approach. Once finalised the representation, a talk followed by a discussion with the public is made (inmates of UTE or other modules of the prison). An educative intervention is completed this way that tackles the prevention of the diseases and their suitable treatment, through the information, the awareness and sensitising the prisoners.

The Theatre Group the "Education Workshop for the Health" of UTE, produces an "impact between equals" necessary to break the spiral of PRISONER-ADDICTED TO DRUGS-HIV positive- RISK BEHAVIOUR.

4.-Tracking Groups (or support groups).-

There are a group of prisoners in the different modules of the UTE that take care of their mates by properly following the treatments prescribed by the Medical Team. The main target is to achieve a good follow-up of these treatments.

As for HIV-patients, the basic aim focuses on the awareness and adaptation to a HIV-positive condition which generates a good adherence to antiretroviral treatments. According to these four strategies it is possible to cover the three aspects that health must be included from a comprehensive point of view:

1.-Physical Health: Prevention is the best tool at this level. When the disease appears, the information about it as well as a proper medical supervision and the accurate adherence to the treatment are factors to be taken into account.

2.-Mental Health: When it comes to HIV-patients, it is vitally important to seek the HIV-positive state's normalisation through the emotional support groups.

3.-Social Health: The UTE is a healthy social cohabitation space. At the UTE, situations of social normalisation are constantly experienced through the different educational, recreational and occupational activities. In fact, it is in the therapeutic group that social integration and the sense of being part of the UTE begins.

The UTE also promotes indoor and outdoor activities, such as: "Meeting with Society" annual workshops, a weekly activity of "Alcohol and Drugs Prevention addressed to Secondary School students", the outings of the Theatre Group, the "Families Day", scheduled excursions, activities involving different groups and Asturian Institutions, etc.



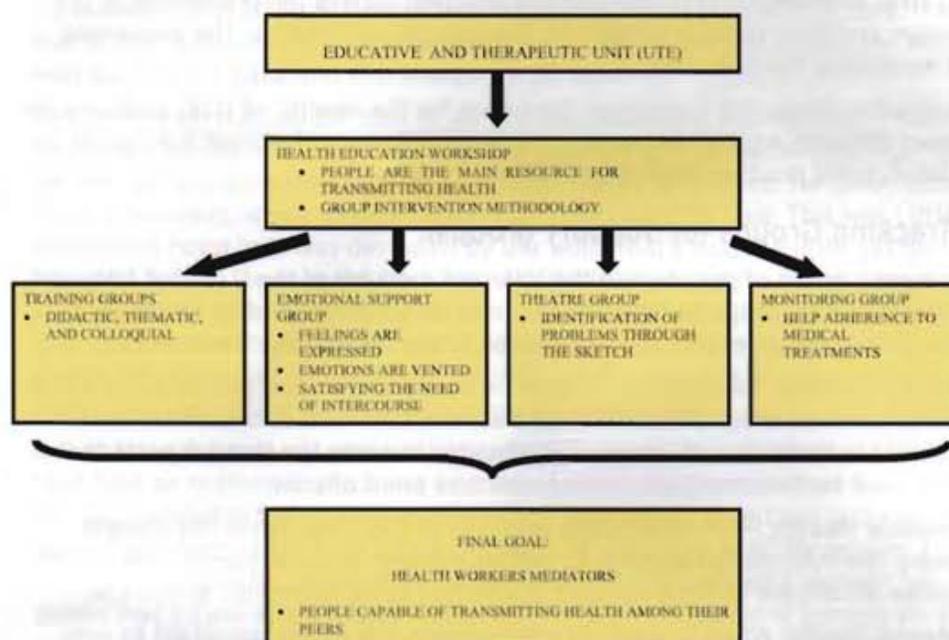
"KEY" FIGURES IN THE "EDUCATION FOR THE HEALTH'S WORKSHOP":

The Mediator: a prisoner or professional having some training course and information about health of scientific and institutional nature, who can develop educational plans of action which improve the health and standard of living in the prison.

The Health Agent: a prisoner with some knowledge of health and the capacity to pass it on in an effective and easy way. Listening, understanding and supporting their peers are some of their functions.

The Coordinator: a professional in charge of structuring and coordinating the training process. This person will be responsible for the setting in motion of all the Education for Health activities in the prison. Thus, they will collect the information provided by the Health Agent about the different needs that are detected. They will draw up suitable responses to the needs as well. In short, they will coordinate and energise The Educational Activities for Health.

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free space

The View of an Expert

THE VIEW OF THE EXPERT WE INTERVIEW DOCTOR JESÚS SÁNCHEZ DEL RIO

Dr. Sánchez Del Rio is a specialist in internal medicine in the Central Hospital of Asturias. He has looked after Villabona prisoners with HIV/AIDS and Hepatitis C for many years. He usually collaborates with the various events that take place in the UTE: lectures on health, "World AIDS day", and so on. He is a good friend of the UTE and a highly respected doctor in prison. His relationship with the prisoners is always friendly and close. Nobody knows better than him, these two diseases in prison, he gives us a scientist's vision and is at the same time available to them.

Lázaro Blanco: You have treated the inmates of Villabona affected by HIV/AIDS and Hepatitis C for many years. From your point of view, what is your opinion about the evolution of both diseases in the prison?

Dr. Sánchez Del Rio: Well, we have a long way to go but we go in a good direction with the correct treatments for both diseases and the level of awareness is on the rise. Nowadays, specialists of both pathologies are taking care of the prisoners and we believe that they are much more controlled and they are becoming aware of the problem.

Lázaro Blanco: Is there any difference in the evolution of the prisoners with this kind of difference between the UTE and the rest of the modules?

Dr. Sánchez Del Rio: Clearly the inmates of the UTE have become aware much better and they know what these diseases involve and they know the need for taking the treatments correctly.

Lázaro Blanco: What is the percentage of people infected by HIV among the penitentiary population? What is the percentage in the Spanish population?

Dr. Sánchez Del Rio: In our prison the infection HIV affects 10% of inmates. The Hepatitis C affects four times more, I do not know very well the reason but I promise you that I am commenting on it with colleagues of my profession and I am thinking of carrying out research in order to find out the reason. Among the Spanish population the proportion of people infected by HIV is 2 in every one thousand.

Lázaro Blanco: Do you think we are "lowering our guard" in the prevention and control of HIV, Hepatitis C, as well as other transmission diseases in the prisons? What more should be done?

Dr. Sánchez Del Rio: Currently, I believe we are working better but it is clear that in these diseases, like in all, prevention is the best. What could be done? Information, information, information... and being aware of them with all the risks of contagion.



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Lázaro Blanco: Do you think the current HIV is more aggressive than it used to be in its origins?

Dr. Sánchez Del Rio: Actually, HIV has more resistances accumulated to fight against the treatments, it has more mutations, but we also have a powerful therapeutic arsenal, more comfortable and perfected.

Lázaro Blanco: Prisons are, obviously, closed systems. Could HIV become more resistant inside the jail, turning the prisons into endemic areas? Can re-infections be much more dangerous in the prisons?

Dr. Sánchez Del Rio: If we do the things well, it will not have to be like that. Here we have the patients as "hospitalised", we can control them better in order to make sure of adherence to the treatment. The inmates of the UTE act as "health agents" and it is an advantage which can be spread to the rest of the prison.

Lázaro Blanco: We know that in the jail there are many people infected by HIV and Hepatitis C. In this case what treatment would be priority?

Dr. Sánchez Del Rio: With good body defences it is possible to initiate the Hepatitis C treatment in the first place with a control of HIV evolution in case it was necessary to initiate the treatment. If defences are low, firstly we will treat the HIV and when the patient becomes in good condition, we would initiate the Hepatitis treatment at the same time as we would continue keeping the anti-retroviral treatment. Both treatments can coexist at the same time.

Lázaro Blanco: In what way does lipodystrophy affect the HIV positive people who take medication? What advice would you give to relieve the effects?

Dr. Sánchez Del Rio: Nowadays we know more about the medicines which can induce the appearance of lipodystrophy. This way it continues being an important aesthetic problem and looks like a stigma of the disease. Unfortunately, an effective treatment does not exist and it is only possible to relieve it with cosmetic surgery that is not still free in the whole of Spain .

Lázaro Blanco: Why is the adherence to the anti-retroviral treatments so important? What happens if the treatment does not begin or if it is not followed suitably?

Dr. Sánchez Del Rio: I always comment that it is better not to begin an anti-retroviral treatment than to do it badly because it could cause the appearance of mutations in the virus, resistances and we "would burn" the mentioned treatment. In addition, there are crossed resistances .This means that the virus becomes resistant to other medicines which had not been taken by the patient before.

Lázaro Blanco: Dealing with HIV and Hepatitis C, what could be done in prison to improve the adherence to the treatments?

Dr. Sánchez Del Rio: I want to stress again the importance of the information. With a good adherence, the patient can be years with the same guideline of treatment and its effectiveness is going to continue. It is also important that the patient becomes aware of the problem. In some cases it is necessary to value the



supervised treatment to assure that it is being taken. When the patient verifies the improvement of his defences and the viral charge becomes undetectable, he encourages himself and becomes aware of the importance of the adherence.

Lázaro Blanco: Why is so important that the HIV-positive people have suitable nourishment? What is the relationship between HIV and nutrition?

Dr. Sánchez Del Rio: The human body needs nutrients to work (it happens even in a healthy person) and when the body is suffering from a serious illness, nutrition acquires much more importance. The organism of the infected body, its immunological system, is constantly fighting against this invasion of virus that, in addition, they multiply to million every day. The body needs to be as strong as possible to defend itself. We help it with medications when it is necessary.

Lázaro Blanco: As a doctor used to treating people deprived of freedom, what doubts and fears do you find in the HIV-positive prisoners who come to your consulting room?

Dr. Sánchez Del Rio: Doubts continue to exist on the efficiency of the treatment and fears of being turned down by people in general. But with the help of all of us, we will achieve that society considers these diseases as chronic with the possibility of being treated. We know the way they are passed on and it is necessary to avoid risky practices. Having the patients controlled makes contagion more difficult. They are not transmitted in daily activities. I stress that information is the way of improving everything that has to do with these diseases.

Lázaro Blanco: How does the emotional aspect influence the evolution of the people with HIV/AIDS and Hepatitis C?

Dr. Sánchez Del Rio: The emotional aspect influences everything related to the human being. In this topic from the deterioration of the immunological system, caused by the stress, to the abandonment of the depression treatment. We have to try to get the patient encouraged, trusting, believing that doing things well, he is going to live and with quality of life.

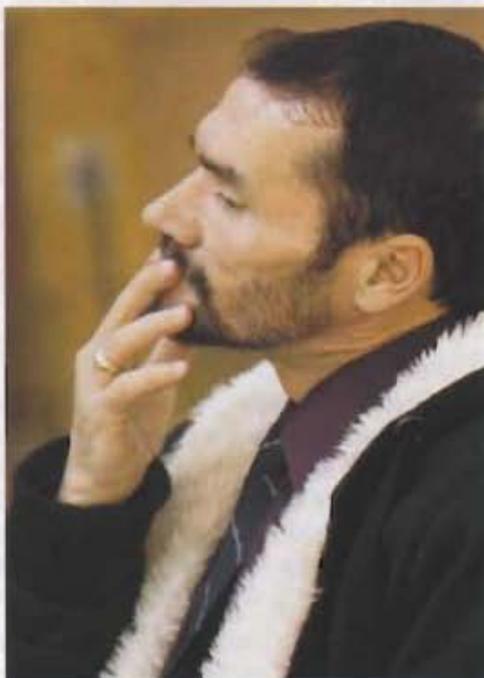
Lázaro Blanco: How do you value the labour of the "Workshop of Education for the health" in the prison and the role of the prisoners as "health agents" among equal?

Dr. Sánchez Del Rio: In a previous question I have already referred to the UTE (therapeutic and educational unit) in these terms. I believe they can have a very important role as agents of health and they can influence other prisoners in order to do things properly.

Lázaro Blanco: Had you wanted to be asked any other question? Which one? Please, answer it.

Dr. Sánchez Del Rio: The truth is that not many things were left unsaid .I would like to congratulate you on the great work you are carrying out, so important that it has already gone out both locally and nationally. At the moment you are a reference in prisons worldwide. You do things well, keenly, utilising the people and making them responsible for their life. I would also like to say, before ending, that I am at your disposal for whatever you may need and also I would like to have more joint meetings, some round tables throughout the year besides the institutional ones. Thank you for counting on me in this magnificent work that you are carrying out.

Interview done by Lázaro Blanco Savín, one of the inmates responsible of the UTE Health Education Workshop.



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A Breath of Life

Interview with Humberto Rom, joint playwright of the play "A breath for life" produced in the "Health workshop" of the UTE of Villabona

The play: "A breath for life" came out the 1st of Dec. 2007, on the AIDS World Day's celebrations. It approaches the disease in a truthful and optimistic way, as an effective instrument to deal with the prevention and treatment of the AIDS-HIV disease in prison. It is played not just in the UTE units, but in the different modules in the Villabona penitentiary.

Today we talk to one of the joint authors of the play.

José Luis Cuevas (J.L.C.): Nowadays your status in the UTE is quite satisfactory and you enjoy a most desired personal position. But this hasn't always been the case. In your opinion which has been the fact that helped you to become conscious of your situation and aware of your ill-health?

Humberto Ron (H.R.): When I arrived to the Unit in 2004, I was in a dreadful psychosomatic situation, quite a number of opportunistic diseases came along with my mental state, which was then at a critical point in every way. As soon as I got over all that, I realised that I had been given a second chance, I took it. Other different factors were decisive to determine the outcome of that process, my family and my friends, and of course, the Health workshop. I am a fighter, as my mother says.

J.L.C.: How did the idea of this play take shape?

H.R.: Julio, the teacher, had told us that the next two years of the European magazine were to be devoted to Health and that a different play was needed. One day sitting in the sun with Quique Reyero, we thought about the idea, and that same weekend we started. Quique is the other co-author; it was he who contributed with his imagination and literature, I was responsible for the technique, my personal experience and "A breath for life".

We wanted to write a play in which to show that the feelings, the struggle, the resolution as well as optimism, are essential factors to come out from such situation, and who other than myself? I had lived it personally.

J.L.C.: How did you feel the day your play was presented to the UTE?

H.R.: It was something very special, I felt satisfied, proud and happy, mainly when on turning round I could see my mates faces, some of them smiling... others standing and clapping, bloody hell!.... they were cheering us!

I want to thank Quique Reyero and all the actors, even those who did their jobs far from the spotlights. It has been something most special for me.

J.L.C.: As you are well aware, the play is now being shown in the regular units in the penitentiary, to inmates who do not belong to the UTE, do you think the play could be a way to awaken their consciences?

H.R.: We have already done it with other plays, is a way to get into their lives with something different. And we also do the same when visiting schools with drug prevention programs. What is important is that it reaches them, that they enjoy it, and get the message, and it is a means to approach the issue of health. On the other hand it is also a method to encourage people to come to the UTE.

J.L.C.: Does the outcome of the play accomplish all your expectations you had?

H.R.: You always look for more, you think this should have been different in this or that other way, but finally one gets the feeling of achievement, the feeling that you have done something important for the UTE and for those of us who live with HIV.

J.L.C.: Finally, now that you are on the first stage of your extra penitentiary therapeutic process, how do you rate the UTE, and the Health workshops they offer?

H.R.: Well, just imagine how important they have been to me, I got back to life here. I entered almost a "corpse" and now I am a happy man who leaves the prison every day in order to regain his life in freedom. I have never felt so alive and so free. On leaving, I'll take with me something from every Health workshop, in my opinion that school is the most valuable feature of the units, here I have fulfilled myself as a person, I have strengthened my principles and I have even learnt some more.

Interview done by José Luis Cuevas González (UTE prison officer, responsible for the theatre group of the UTE Health Education Workshop).

The Prevention Is The Message – The Rap

THE PREVENTION IS THE MESSAGE
THE PREVENTION IS THE MESSAGE,
THE DESIRE TO FIGHT FOR YOU IS THE PASSAGE,
MANY FRIENDS DIED BECAUSE OF THE CELEBRATIONS,
HEPATITIS AND HIV WALK BETWEEN US WITHOUT ASKING,
TO ASK FOR HELP IS NOT A SIGN OF COWARDICE BUT OF COURAGE,
THE HEALTH WORKSHOP PROVIDES THE LIFEBELT FOR THIS SURGE,

Refrain:

RELEASE YOUR NEGATIVE EMOTIONS, SHARE YOUR FEARS,
THAT IN THE HEALTH WORKSHOP WE HAVE PLENTY OF RESOURCES,
A HEALTHY AND WORTHY LIFE IS THE PRIZE,
I OFFER YOU A CHALLENGE ART-SHAPED,
FRIENDS, SYRINGES, MUST NOT BE SHARED,
MAKE UP YOUR MIND AND HOLD THE FRYING PAN BY THE HANDLE,
TO FUCK WITHOUT CONDOM IS LIKE TRYING TO STOP A TRAIN,
DO NOT ALLOW YOUR BAD IDEAS OF LIFE TO SEPARATE YOU,

Refrain:

RELEASE YOUR NEGATIVE EMOTIONS, SHARE YOUR FEARS,
THAT IN THE HEALTH WORKSHOP WE HAVE PLENTY OF RESOURCES,
A HEALTHY AND WORTHY LIFE IS THE PRIZE.
IGNORANCE DAMAGES ALL OF US,
TO TRANSMIT INFORMATION AND KNOWLEDGE IS OUR INSISTENCE,
THAT CLEAR REALITY, AS TOUGH AS A LOG,
IT DEPENDS ON YOU THAT IT IS JUST A BAD DREAM
TAKE YOUR MEDICINES DO NOT BE INGENIOUS,
AND RESPECT THE GUIDELINES OF THE RETROVIRALS THAT IT IS SERIOUS,
YOU ARE NOT ALONE IN HERE, AT YOUR SIDE THERE IS AN EMPIRE,
MY RHYMES DEFEND A CRITERION,
TO BE BURIED AS LATE AS POSSIBLE IN THE CEMETERY

Refrain:

RELEASE YOUR NEGATIVE EMOTIONS, SHARE YOUR FEARS,
ONCE WE WERE A BIT FOOLISH AND NOW WE ARE PAYING THE PRICE,
BUT IT IS NOT NECESSARY TO MAKE A BUSINESS WITH OUR HEALTH,
AND WITHOUT ANYTHING
MORE TO SAY I GO TO THE
DISCUSSION.

By: SUFIAN

Note. This rap has been translated from Spanish into English. That is why many words do not rhyme with the others. But the important thing is the message.



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Health in Lancashire

Health trainers are to be used in 3 prisons in Lancashire - Garth, Kirkham, Lancaster Castle

The Health Promotion Agency, through Lancaster and Morecambe College, have set up a programme through which Prison Officers will be trained up to deliver an RIPH - Royal Inst in Public Health - qualification to prisoners in the above establishments. This qualification will enable prisoners to improve their understanding of opportunities for health improvement.

Specified prison officers will be signposts for the chosen prisoners. As well as the basic qualification in how to recognise opportunities for health improvement there will be an additional ten hours in the course for prisoners to learn more about healthy eating, physical activity, mental health, substance misuse and how to give up smoking.

The original ten hour course is to be supplemented by various departments in each prison. Prisoners will be trained too and will act as peer supporters and points of referral for their peers.

We hope to involve prisoners in the induction process of each prison, and offer prisoners the benefit and knowledge of what's available in prison, so they can signpost prisoners to the facility they need and also refer back to health care.

As part of the health workshop there will also be health fairs which will be managed by the gym - ensuring that the prisoners have access to exercise. The offender management unit and residential unit will also be involved - the health trainers will be led by the Head of Learning and Skills.

The purpose of the health sessions is to increase opportunity into health in prison and look at the wider determinants of health. This may include smoking cessation advice, but could also incorporate information about housing.

The main benefit of having the trainers is to implement a qualification for prison staff, and for prisoners that is recognised in the community. It will also foster good relations between prison staff and prisoners, enhancing the skills of both groups in the area of health and health awareness.

CARMEL FLAHERTY



HMP Lancaster Castle

Health Trainers at HMP Lancaster Castle.

The Department of Health produced a document called 'Choosing Health' in 2004, which aims to improve the health of people living in England and increase the average life expectancy. An important way to achieve this is to reduce the gap in life expectancy between the poorest populations and the richest.

An initiative to support this is the 'The Health Trainer Initiative'. This is essentially a buddy system, where members of the community support their peers in altering their lifestyle so that they can live a healthier life. For example, if an individual wishes to lose weight, the health trainer can make suggestions for local services that can support him/her in losing weight, can attend the classes with the individual and offer ongoing support and motivation to encourage that the behaviour change is maintained.

The prison is an ideal environment in which this initiative can be implemented. A majority of the prison population live in deprived areas and have complex health needs. 80% of the prison population smoke and 80% have a mental health problem, alcohol/substance misuse problem or both. Prison is an opportunity for individuals to change their lifestyle and potentially maintain that change once they are released back into the community.

HMP Lancaster Castle is in the progress of developing the health trainer initiative. The aims of the initiative are:

- To provide peer support to prisoners and encourage healthy lifestyle choices.
- To improve opportunities of employment for peer health trainers upon release.

In order to achieve this, Lancaster Castle will deliver the Royal Institute of Public Health Award (RIPH) in Understanding Health Improvement. Two members of staff from the Gym and Offender Management Unit have attended the RIPH train the trainer course and are in the process of developing the course to deliver to prisoners.

The prisoners will be given the opportunity to spend time finding out about all the services that are available in the prison, so that they can signpost their peers appropriately. These prisoners will then be employed on a part time basis to support their peers in making lifestyle changes. The initial project for the peer health trainers will be to develop a health fair to highlight all the services available in the prison and more importantly advertise their own service. On an on-going basis, the peer health trainers will have a slot on the induction programme to ensure that all prisoners are aware of the service. Prisoners can access the peer health trainers via self referral or referral from staff. The peer health trainers will meet with the individual, discuss their concerns and make recommendations of who to contact. Follow up meeting can provide ongoing support.

Lancaster Castle is currently in the process of developing the management systems for the peer health trainers; where they will be based, how they will be managed and how they will be funded.

However, the initiative has the potential for considerable positive outcomes in terms of improving the health of prisoners. There are also excellent opportunities for employment on release, as these roles will also be active in their home communities.

Gym and Health Education at HMP Lancaster Castle

Education and Gym staff at HMP Lancaster Castle are working together to improve prisoner health. The Gym has recently taken on the role of working with men who have Hepatitis C. They are running Peer Health Groups for men that may need information and emotional support because they are suffering from this disease.

The men then follow up this support with work in class, and in the Gym, which complements their knowledge. Gym courses look at: Healthy Eating, Stress Management and Exercise. Prisoners also have access to Smoking Cessation groups. Education Staff attend some Gym sessions so that they can help guide the learner to improve Literacy and Numeracy through the Gym curriculum.

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Opinions

In my opinion and experience, addiction starts at a very young age. It began for me well before I started taking any form of substance. Feelings of loneliness and rejection led me to look for acceptance in others. Eventually I found a way to suppress my feelings through the use of drugs. It started from alcohol and progressed to any mood altering chemical that I could lay my hands on.



Over the last 21 years I substituted one drug for another and tried many ways to combat my addiction and found that I could not. Nothing I tried worked. My custodial sentences were getting bigger and bigger and I needed to find a way out. While serving a sentence at HMP Garth I heard about the 12 step programme at Lancaster Castle and thought that I would give it a try. It was the best decision of my life.

Today, I am over 16 months clean and value myself as a person. I am able to show compassion and empathy towards other suffering addicts who wish to find recovery. I am also aware that there are many different ethos of recovery available. Recovery is possible, so don't wait for the ship to come in, swim out to it.

Ricky Owen, HMP Lancaster Castle

My name is Darren and I am a addict, I am 35 years old and currently serving a 4 year 4 month sentence, which of course is drug related!

My addiction started with alcohol when I was 13, but the behaviours and attitudes I have as an addict started long before that! My self-centred behaviour began to push people away and left me feeling isolated and alone! I then found new acceptance, in what my mother would call the 'wrong crowd.' By the time I'd reached the age of 15 I was completely off the wall, drinking heavily, smoking cannabis and generally terrorising the community!

Between the ages of 20-30 my addiction had progressed from ecstasy tablets to amphetamines, to cocaine, to heroin. It didn't really matter what I took as long as I got high. The more drugs I took, the more I needed to take to achieve the same results. My relationships began to suffer, as did my work. I would constantly make up excuses for my behaviour and lie to the people that loved me to keep them from knowing the truth.

At the height of my heroin addiction the drug had become the only focus in my life, heroin was my life, and my wife. I had it for breakfast, dinner and tea. It was my everything and I shared my darkest secrets with it, as I reached a new level of despair it was the only companion I had in my isolation, and the only crutch that took away my pain! I would do anything to get it.

By the time I was arrested I was on the brink of a mental breakdown, paranoia had set in all corners of my life. I couldn't talk to people on a normal level, I wouldn't look at myself in the mirror because I hated everything that I had become. For the first time in my life my companion wasn't there and I was left to face the guilt and shame of my past, without hope and understanding of my addiction.

I descended into a world of self-pity and anger. I realised that I'd had enough and decided to do something about it. I chose to come to Lancaster Castle and do the 12 steps of Narcotics Anonymous.

I have been here nine months and today I am 7 months clean and I've completed the program now. To be honest I did have a shaky start. I now realise that it isn't just about stopping drugs you need to change the behaviour patterns, negative attitudes and faulty thought processes - which is why the 12 step programme is a way of life rather than just a course! The programme has enabled me to gain self-awareness of which I improve on everyday. It has helped me understand why I took drugs and why I just couldn't simply stop!

Today I accept my past and know my place in the world. I am dealing with life on life's terms today and, although I am grateful for the good days I believe that I learn more from the bad ones. Sometimes I get things wrong and that's OK, as long as I don't repeat the same mistakes.

I am due for release in April 08 and I am really looking forward to a future without drugs, a life I am grateful for. I now have realistic goals and dreams. Anything is possible for me as long as I continue to do what the 12 steps suggest.

Today I am surrounded by people who care about me, which is a funny concept, considering that I am still in jail. My partner and family constantly tell me that I have changed for the better. I have meaningful conversations with my children. I guess it isn't just about me and the drugs anymore. For the first time in my life I have real freedom.

Darren, HMP Lancaster Castle

HMP Kirkham, UK

Thoughts from Sue Rich from HMP Kirkham, UK

We currently have a Men's Health Classes at Kirkham. We also have mental health classes within the Social and Life Skills provision. In fact Mental Health is very relevant in all of our Social and Life Skills classes. We also have a brilliant drama teacher who can do wonderful work with the prisoners.

The Gym at Kirkham also delivers very informative courses on the well-being of the body and mind. It also offers recognised professional certificates.

I offer Healthy Eating classes. Some thoughts of learners follow. As people we alter the thinking patterns of everyone we meet. As teachers we have the opportunity to 'make a difference,' to what is, for the most part, a receptive audience. What the Grundtvig project hopes to achieve can only better the lives of many. Proof is surely shown in Spain.

Would I like to be part of a health workshop in prison? The answer is most definitely yes. I have nurse training and several years of nursing experience under my belt. My chosen subjects to teach and assess are all health related; be it physical or through mental stimulation - Food Safety, First Aid, Healthy Eating, Budget Cookery, Food Nutrition and NVQ Catering.



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Healthy Eating Students

Z. Hussain

Living a healthy lifestyle is a very important thing, as it could increase your life, give you healthier organs and also benefit your skin/appearance. Whilst being on this course I have learnt about healthier food and how the human body works. This will help me a lot after being released in due course.



Farny, Bolton

Before arriving at HMP Kirkham I had dabbled in a bit of cookery, but never really had an idea about set recipes. The Budget Cooking and Healthy Eating courses that we attend here have certainly expanded my knowledge on how to make several sweet dishes and main course meals. I will most definitely be putting these into practise on my release from prison.

By DB

Before I came to HMP Kirkham I could not, and would not cook anything. I was used to being 'looked after' by my girlfriend and by the chef/waitress at the local 2-4-1 pub! After one day of sessions in Healthy Eating I have learnt to prepare really good meals that are healthy and nutritious - and also tasty (extra, extra tasty when compared to prison foods!) I've learnt that visits to the local Chinese and Indian takeaways can be replaced by something healthier - and cheaper. Also, being able to 'rustle up' the odd meal at home is going to get me good 'brownie points.*'

*His wife will be pleased with him.

BJH

On coming to HMP Kirkham I felt that I had quite a good knowledge of cooking and healthy eating but I wanted to improve. I started the Healthy Eating course. The course has helped me look at healthy eating from a totally new perspective. Before, I believed it meant the reduction of calories and fat content in meals. Now I have been shown that healthy eating involves many more aspects, and doesn't mean a reduction in flavour.

I now feel that the main emphasis in anyone's diet should be to vary the amount of ingredients so that your body can take what it needs from all the different food types. Balance and moderation is the key! My favourite example of this was the 'mostly vegetable lasagne' that we made. By adding a lot of different vegetables to the dish and reducing the amount of meat, we produced a meal that was full of flavour, and full of goodness. I will leave HMP Kirkham now with a much more rounded and complete understanding of healthy eating, with the practical skills to introduce this knowledge into everyday life.



Healthy Lifestyles

Promoting Healthy Lifestyles

It is now widely recognised that an inactive lifestyle is harmful to health and wellbeing.

Whilst you are in custody, it gives you the chance to make the best out of a bad situation.

You have plenty of opportunity to exercise, also most prisons run some type of informative courses, ranging from Community Sports Leaders Award, Healthy Living and more in-depth courses like Focus 1, 2 and 3, which lead to your being a personal trainer. The Focus 3 is widely recognised throughout the UK's gyms and sports centers.

Within the prison environment, you sometimes get depressed with what is happening around you in and out of prison. It is proven that cardio vascular training releases endorphins in the brain. These endorphins help relieve depression and give you a feel good factor.

It is recommended by the Health Education Guideline that we do least 30 minutes of moderately intensive activity, at least 5 days a week. This combined with a healthy eating approach.

It is not much help if you are eating all the wrong types of food. So how did I find out about the right types of foods? I joined the Healthy Eating Course in the Education Department at HMP Kirkham, run by Sue Rich.

This is where you find out what carbohydrates, fats, proteins, minerals and vitamins do when they enter your body and what quantity of each you should be taking. You also, amongst a multitude of other information, get the chance to adapt everyday recipes to make them healthier and then you can cook and eat them - yum yum!

I've learnt a lot about my body and mind whilst in prison. I have now completed my Personal Trainers Certificate in the hope I can one day run my own fitness centre - who knows? I now set myself realistic goals in my new lifestyle, in order to reap the benefits of the new and improved ME.

Graeme McGregor 24/1/08

Graeme has just completed both the budget and healthy eating, open college courses @ Hmp Kirkham.



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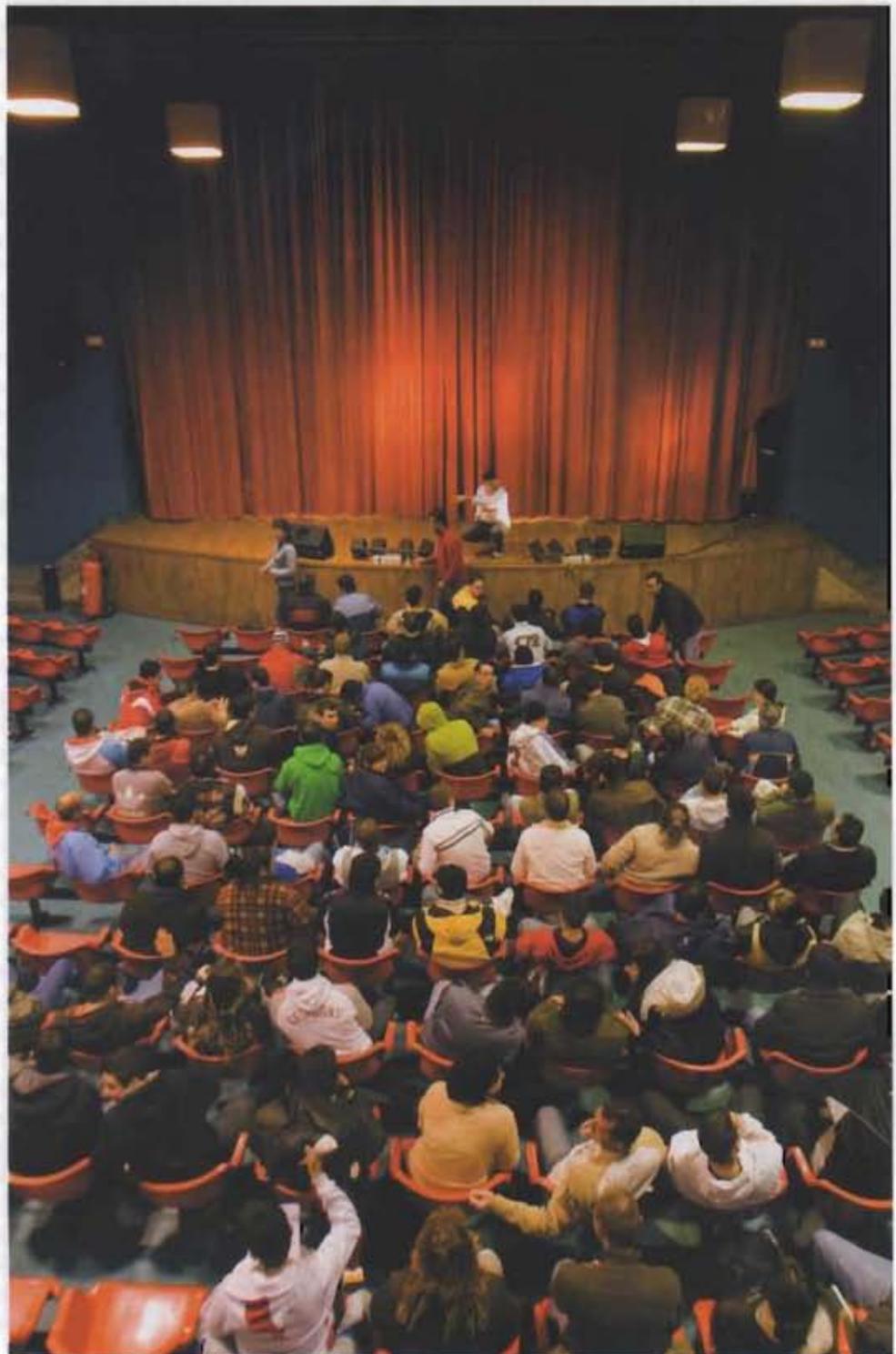
Lancaster Farms YO1

Development and partnership work is still taking place between education and prison staff at Lancaster Farms to promote Health Workshops for young men in custody.

Lancaster Farms Education Manager Sue Breeze said: 'There has been much valid developmental work between the education department and the prison.'

Sue has put her Social and Life Team at the ready; offering them in an advisory and practical facility to the prison. They are giving input into lesson plans and schemes of work so that the prison can facilitate Health Workshops where the prisoners and the officers can work together to achieve a shared goal. The goal is to raise awareness about how to live a healthy lifestyle, both in and out of prison. They will also gain the opportunity to achieve a qualification which will mean that they can find employment in a variety of health settings e.g. a gym, when they are released.

Carmel Flaherty



To Heal with the Kellerkinder

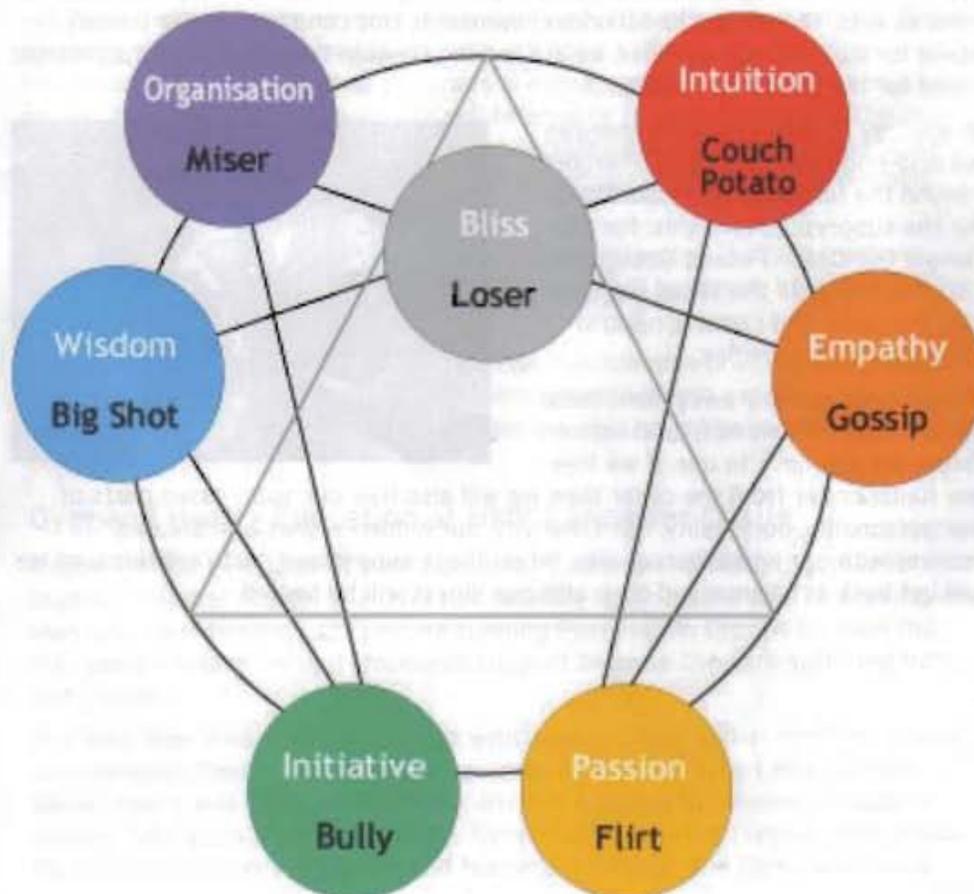
With my method one can heal

This is not just a allegation, but a well proven fact. To begin I would like to explain my concept of healing. I assume that illness is not just a phenomenon of the body, but of the whole human being, meaning: the body, the mind and the soul. Illness evolves when man is physically and psychologically out of balance. This can happen when one suppresses certain parts of his/her personality and lives those unconsciously. Those repressed forces who are suppressed to the unconsciousness work and proliferate. They can become so strong that they control the ways thinking and behaviour of a person without him being aware of it. My idea of healing involves, developing the ability to discover those suppressed parts of our personality and freeing them. This can be done perfectly through spontaneous acting. While acting we can jump into very different roles and discover the different parts of the personality, in a way that not possible in daily live. Acting also brings distance to and more easily enables access to the unconscious sphere of our own person.

The stage is a secure place, where the actor can open himself, because no daily duties, demands and expectations can disturb him on his inner discovery or inhibit him to drop the daily bonds. To act makes one vivid, creative and free, refreshes the body, spirit and the soul and brings courage and trust for the own forces. It brings the actor to his deepest, inner core, back to himself. The acting itself strengthens the personality and frees the human being - it vitalises and makes one healthy.

Acting is one way to find oneself and to discover and free suppressed parts of the personality. But to make this way more effective I differentiated my method more. In the many years as Facilitator and trainer I was looking for a tool to bring the knowledge about the human beings and their characters into an image. Finally I succeeded and developed the seven Kellerkinder.

Johannes Galli, founder of the Galli Method



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The Seven Kellerkinder

During the course of a very long process I discovered that the human being had seven basic energies. The three female energies are intuition, empathy and passion. The three male energies are structure, wisdom and initiative.



The seventh energy is bliss. Bliss describes the successful connection between female and male energy. I do not tire of repeating that every

human being has all seven. A woman outwardly exhibits the female energies while the male energies although concealed, are as much effective as the blatant female energies. A man displays the male energies, but the female energies are concealed. When a human being, either female or male succeeds in keeping his male and female energies in a constant exchange, the energy we are all looking for, bliss is created in him.

This point of view may bring a new light to the fact why people have love affairs: To experience those energy forms which are concealed within us.

These seven basic energies are only pure in its initial form, in children and with healthy development, they can unfold completely. Unfortunately healthy development of those energies is often disturbed and affected in many ways. For example a child is active and wants to live his initiative, but is stopped - the child is told to be silent and calm. The initiative can not be developed, it is suppressed. That's why most of the time adults do not have the developed basic energy, but the stunted and damaged energies, which are suppressed. If they are suppressed they act and proliferate unconsciously.



We lock those energies into the cellar even though they can be very creative and vivid as kids. The phrase Kellerkinder represents this condition. Keller (cellar) stand for suppression, because we are locking them in the cellar, Kinder (children) stand for the positive potential.

In analogy to the pure basic energies we also find the suppressed energies. I found the following correspondence for the suppressed energies: For the female the Coach Potato, Gossip and Flirt, for the male the Miser, Big Shot and the Bully. The Loser is neutral between those energies.



Please don't shy away from these Kellerkinder - its wonderful creative forces we just have to use. If we free

our Kellerkinder from the cellar then we will also free our suppressed parts of our personality, our vitality, our creativity, our hidden wishes and dreams. We recover with our whole personality. When those suppressed parts are released we will get back in balance and then also our illness will be healed.

Miser
--> structure



Coach Potato
--> Intuition



Big Shot
--> Wisdom



Loser
--> Bliss



Gossip
--> Empathy



Bully
--> initiative



Flirt
--> Passion

Clown as Healer

The Interview on the theme: The Clown as Healer.

The following interview was in Munich by a freelancer of the Radio Station in Hessen. It was broadcast in a series called "Mandala" throughout Germany.

The reporter was most interested in the healing aspect of laughter. She prepared a large series on this theme. However, during the course of the interview, she changed her views and became more interested in the whole variety of my method and my occupation. It was interesting for me to see what kind of questions would be asked from someone who knows very little about my work.



Johannes Galli

In the following interview, JG will stand for Johannes Galli and HR for the Hessen Radio Station.

HR Laughing is an expression of joy. There is a popular saying, "Laughing is healthy!" Mr. Galli, this laughing is surely an expression of something completely different.

JG Plain and simply said, it is gloating. A clown lives off of others laughing at him, of others laughing at the harm done to him, for a person fundamentally laughs when something goes wrong for someone else.

HR And do things constantly go wrong for the clown?

JG Yes! The clown is a funny figure at which you laugh because some mishap constantly happens to him or harm is constantly done to him, which luckily doesn't happen to you. That is why you can laugh, because the thing, which you are afraid of, happens to someone else.

HR Does it really not happen to me or is that only an identification that happens? The clown is as stupid as I am; it's only that I try to hide it.

JG Yes and no. The clown is as stupid as I am, that is the right starting point, but then the clown is even more stupid. That is the decisive moment, which leads to laughter. As part of the audience, I identify with the clown because things in my life have also gone wrong. For example, let us take the traditional clown number in the circus.

In my life, I have walked into things, but I have never walked into a cream pie. But the clown in the front, in the circus ring, clearly and visibly walks ankle-deep right into the pie and in doing so, he also slips so that he falls - of course, headfirst, landing with his face in the pie. The clown exaggerates my faux pas, in that he adds one more thing to it. I can laugh at my little faux pas by laughing loudly and publicly at his big faux pas.

HR And then I feel relaxed?

JG Yes!

HR And how does the clown feel when others laugh at him?

JG Not relaxed. The clown is a garbage can, which collects this gloating laughter. He has to have a large heart, otherwise, sooner or later, he will go to rack and ruin as a clown and as a person. He has to liberate himself from the things for which he is laughed at through exercises, thoughts and movements.

HR How do you do that?

JG I run a lot. I run through the woods and do exercises. That's how I can digest the things for which I am laughed at.

HR On the one hand, you are a garbage can, but on the other, you bring other people joy in allowing them to gloat.

JG Yes.

HR That is absurd.

JG I don't think it's absurd. If you throw away your garbage your house is clean, that's nice. Then joy comes into your house.

HR How would you feel if the others didn't laugh at you?

JG If the others didn't laugh at me as a clown, I would feel terrible. Then they would still have their garbage and their house would only get fuller and that would be no reason to be happy. It is my job to make people laugh. I want to repeat that the principle is that something goes wrong for me, which could also go wrong for someone else. When it goes wrong for me, the other has the chance to laugh freely because it didn't go wrong for him. That relaxes him and that is the function of laughing. The person laughing gets rid of a lot of tension.

HR That is a therapeutic moment.

JG Yes, if you want to call it that. The clown is an incredible therapist. He gives the audience the chance to admit mishaps. I can't imagine anything in this world more healthy than when one admits mishaps, faux pas, and mistakes. When you do not have to push them aside anymore, but bring them into consciousness in order to work on them, you can digest them and in the process become healthy.

HR Who becomes aware of them, the clown or the audience?

JG Both. The clown plays the mishap and in the fact that the others laugh, they signal that they know what the clown is acting out. In that moment, both can cope with the mishap and that is the connection between the clown and the audience: both experience a mishap, the clown in a more drastic way, but when a member of the audience laughs, he signals to the clown, "I know what you are acting out. Even I know of such mishaps, but your performance exceeds every mishap that has ever happened to me." Now the audience can admit, through laughing at the clown, their own mishap in the framework of an even greater mishap, that which is presented by the clown. This is for me an incredibly healing effect.

HR So it is a kind of confession.

JG That is a powerful word and rather out of date, but if you ask me, I would answer, "Yes". It is a confession. The encounter with the clown is the admission of every individual mishap, mistake, straying, abnormality, all that which one has to manage in one's life, without normally being able to tell anyone about it. But everything, which one represses, grows rampant in the dark and this rank growth can cause illness.

HR So, the clown is like a mirror.

JG Absolutely. The clown had a different name in the Middle Ages. Back then, he was called a fool and had three symbols, through which he was always presented: the fool's cap, the fool's bells, and the fool's mirror. We can see this very clearly by the great fool's figure of the Middle Ages, Till Owlmirror. Let's go through these symbols once in order: The fool's cap was nothing other than the presentation of two donkey ears which were supposed to represent the stupid obstinacy of the donkey. The fool's bells were supposed to show that the fool was an outsider in society. Lepers, the mentally ill and others isolated from the community had to wear bells so that they could be heard from a distance, warning children, for example, to get out of the way. We have to bear in mind that back then, there were neither hospitals nor psychiatry and the village community also took care of the "not so normal people", but for security they put a spell on them. And finally the fool's deepest symbol: the fool's mirror. The mirror as a symbol that the fool reflects the truth, completely bare and directly to the one who asks for it - or also to the one who doesn't ask for it. By the way, the name Owlmirror is a very nice explanation of the fool's purpose. The owl is the symbol of the subconscious because it is active at night in the dark.

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HR I thought owls stood for wisdom.

JG Where is the contradiction? Aren't we all wise in our subconscious? To go back to Owlmirror, this wonderful fool, who, by the way, has a relative in the orient: Mullah Nasreddin. Owlmirror means: The mirror of the subconscious. Such a nice and difficult job and the whole thing is supposed to be funny and stimulate laughter.

HR If we say, "Laughing is healthy", what do we mean by it?

JG We mean that by laughing we get rid of a state of tension which presses our bodies painfully together. If we laugh, our diaphragm vibrates and afterwards we feel very relaxed. Tensions are, so to speak, laughed away. We call that a good, curative feeling. We label this kind of laughing as healthy.

HR Maybe you know the story of Norman Cousins. He is an American, who was laid up with an incurable weakness in connective tissue - at least the doctor's diagnosis was that it was incurable - and Norman Cousins decided to heal himself. He rented videos from Charlie Chaplin, the Marx Brothers, and Buster Keaton and laughed for many hours every day. He laughed himself to good health. Can you believe that?

JG Absolutely. The three names, which you mentioned, Buster Keaton, Charlie Chaplin, and the Marx Brothers are great comedians. As comedians and clowns, they dominate their trade and if you watch the movies, you will see that the actors stumble from one catastrophe into the next. The audience must, whether they want to or not, laugh at their clumsiness in these really well made movies. Through this laughter, the audience can break through the tension, which beforehand had been oppressive and in this way laugh toward a cure.

HR Earlier on, you said that the clown exposes something, which is being repressed. What happens then is basically like Psychotherapy. The clown reflects the repressed thing to the audience and brings it out. Basically that is also what a Psychotherapist does.

JG Exactly. That is also what they do.

HR But the difference is that you just don't take up the issue.

JG Yes I do take up the issue, but I don't make a big deal about it. The cure should never be the goal. It is best when healing happens unexpectedly, so to speak. But let's look at what happens in my clown courses. When people in these courses decide to bring out a problem, I am absolutely ready to help because every problem, as cruel as it may sound, is an excellent clown number. Every problem, which embarrasses someone, is, on closer examination, a ridiculously well set-up clown number. And if they are presented with courage and exactness, there is no limit to the laughter from others.

HR But that hurts.

JG Whom does it hurt?



HR It hurts the person who is presenting his pain.

JG A person will never be able to present current pain. Real acute illnesses, whether mental or physical, are not presented. It doesn't work because the presenter is too close to the subject. But he can present, as clown numbers, mishaps from his childhood or youth, which he has generally kind of digested. These naturally receive a lot of laughter. Please take a minute to imagine what kind of wonderful mishaps have happened in the area of "early love". This laughter, however, doesn't hurt, on the contrary, the actor finds it really liberating because he also laughs with the audience. It suddenly becomes clear to him that when he was in the situation back then, he saw it as a problem that couldn't be solved, but now, with a new, more mature perspective, he sees it as an amusing clown number.

HR You just mentioned your courses. A short while ago, we talked about the stage. So on the one hand, you make public appearances, and on the other, you teach people.

JG Exactly.

HR Maybe you can tell us a little bit about that. What do the people learn there? Do they learn to be clowns?

JG Yes! The journey to becoming a clown is very long and very difficult. But one weekend can be very fun if you plan to act out a problem. When the course participants then put on the red nose and start acting, they will suddenly experience everything from a new point of view and that is an enormous gain within a short time like a weekend. Many of the letters, which I receive afterwards show me that the gain is a lasting one. In the letters, they say, "When I saw myself as a clown, this was like a light-bulb moment!"

HR So it is a kind of Psychodrama.

JG I see the whole thing from the perspective of a clown and must confess that I don't exactly know what Psychodrama is. That's why I can't say yes or no. I am a passionate clown and in my development, I concentrated only on being a clown.

HR You said the red nose by itself is not enough and many people try to be clowns. What are the requirements?

JG Courage. Only courage. Nothing else is necessary.

HR Courage, what for?

JG Courage to act out weaknesses.



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The View of an Expert

THE VIEW OF THE EXPERT WE INTERVIEW DOCTOR JESÚS SÁNCHEZ DEL RIO

Dr. Sánchez Del Rio is a specialist in internal medicine in the Central Hospital of Asturias. He has looked after Villabona prisoners with HIV/AIDS and Hepatitis C for many years. He usually collaborates with the various events that take place in the UTE: lectures on health, "World AIDS day", and so on. He is a good friend of the UTE and a highly respected doctor in prison. His relationship with the prisoners is always friendly and close. Nobody knows better than him, these two diseases in prison, he gives us a scientist's vision and is at the same time available to them.

Lázaro Blanco: You have treated the inmates of Villabona affected by HIV/AIDS and Hepatitis C for many years. From your point of view, what is your opinion about the evolution of both diseases in the prison?

Dr. Sánchez Del Rio: Well, we have a long way to go but we go in a good direction with the correct treatments for both diseases and the level of awareness is on the rise. Nowadays, specialists of both pathologies are taking care of the prisoners and we believe that they are much more controlled and they are becoming aware of the problem.

Lázaro Blanco: Is there any difference in the evolution of the prisoners with this kind of difference between the UTE and the rest of the modules?

Dr. Sánchez Del Rio: Clearly the inmates of the UTE have become aware much better and they know what these diseases involve and they know the need for taking the treatments correctly.

Lázaro Blanco: What is the percentage of people infected by HIV among the penitentiary population? What is the percentage in the Spanish population?

Dr. Sánchez Del Rio: In our prison the infection HIV affects 10% of inmates. The Hepatitis C affects four times more, I do not know very well the reason but I promise you that I am commenting on it with colleagues of my profession and I am thinking of carrying out research in order to find out the reason. Among the Spanish population the proportion of people infected by HIV is 2 in every one thousand.

Lázaro Blanco: Do you think we are "lowering our guard" in the prevention and control of HIV, Hepatitis C, as well as other transmission diseases in the prisons? What more should be done?

Dr. Sánchez Del Rio: Currently, I believe we are working better but it is clear that in these diseases, like in all, prevention is the best. What could be done? Information, information, information... and being aware of them with all the risks of contagion.



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HR Why did you become a clown?

JG It developed like this: Earlier I was in Bavaria and was a very good high school student and had a very high position in my class. My parents then moved to Hessen, another province, and I of course with them. This was the year of this short school year and I skipped a class. In the new class there were various popular roles, like the women hero, the soccer hero, the math hero, the foreign language genius, etc. But all of these positions were already taken when I came into the class. So far, so good. Unfortunately I fell in love and had to get a reputation as somebody and not a nobody, in order to approach her. Then, by accident, two or three remarks slipped out of me in class and the other pupils laughed. I noticed that I was getting a profile then and in this moment the clown was born for me. Apart from specific fundamental character traits, with which I am endowed, like not understanding many things in this world and this "not understanding" saving me, it was at that time the right moment for me to find my identity as the class clown.

HR And that's how you also got attention.

JG Right. I had found my style, my way. It was many years later that I discovered that the clown holds a deep moment. I used him back then to get myself a profile. I wanted to be a somebody instead of a nobody. I discovered much later that I was trying to become a somebody by playing the big nobody. But when I realised that I already stood onstage and the reputation convinced me that it is also good to be a big Zero.

HR ...who is a somebody.

JG laughing Right, who through that, is a somebody.

HR Your book is titled, "Clown - The Joy of Failure". That is a very provocative title.

JG Let me tell you, it scares a lot of people off. Many people don't buy this book because they are afraid that they will then also fail.

HR Well, what is your joy of failure?

JG I believe that failure is an unbelievably big moment because it is determined by truth. Failure is human to me. We are all going to fail completely at the end of our days. Our bodies are going to decompose and become dirt again. And this complete failure is a key to happiness for me. If you learn to accept this failure, what more can happen to you? There is no certainty in life except that death temporarily ends it. To encounter this death in a funny, joyful way, as the end of an accomplished life is the key to happiness for me.

HR Do you like to laugh?

JG I love to laugh. Otherwise, I wouldn't be able to stick it out in this world, where the newspapers and the news are specialising more and more to presenting catastrophes. In order to stay healthy, you have to indulge yourself with a joke every once in a while, in order to be able to laugh about it. I think that something funny should be briefly presented on the news every night under the heading, "The mishap of the country". Then the mood for the night would be saved and people would be cheered up.

HR So we in Radio Broadcasting should also laugh for a minute about the television station.

JG Yes, tell a joke. Regularly every day from 12:00 to 12:05 PM, a joke should be told. That is my advice in gradually healing the broadcasting system. But instead, with a serious voice, reports are given about fronts, wars, and deaths. Death is only worth reporting once there have been at least three victims.

HR We will take that as a hint.

JG Please do.

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Galli Method for Conflict Resolution

Fairy Tale Play: Little Red Riding Hood

Location:	Shangrila Centre, Maui, Hawaii
Organizer:	Galli Publishing and Agency Inc., USA
Date:	Beginning of February 2002
Title:	The Galli Method in conflict resolution A one-day training
Target Group:	The group consisted of therapists, physicians and healers. There were fifteen people, five men and ten women. The training was conducted in English.
Trainer:	Johannes Galli

After a one-hour lecture on the Galli Method there was half an hour left before the lunch break. I asked for any comments and a sixty-year-old man responded. He looked a little bloated. I asked him directly for the reason and he said: "I am manic-depressive and have to take medication, this is the side effect; the water is kept back in the body and that makes me bloated."

I asked him for the real life play to act out the manic and the depressive state of his illness. We did not need to choose any partners at this moment as Phil, how we will call him, came on stage and sat down totally depressed. He talked about the big darkness, which has come over him, and I had the idea: This was Little Red Riding Hood who was devoured by the wolf! That's how the little girl must have felt: totally alone in the darkness. As Phil then played his manic phase and with gleaming eyes and got into his omnipotent fantasies, I knew: that's how the wolf talks. I asked him whether he could imagine seducing a young woman in the woods. There he laughed and said: "When I am in the phase of my omnipotence, then I do imagine that I can seduce women however I like."

Naturally he felt uneasy with the topic of the conversation and his openness. But I felt that he realised that he now had the chance to make a decisive leap in his life. As I believe in the healing energy of the play and of fairy tales and myths I encouraged him to act. First he should play the seductive wolf. He needed a bit of pressing, because he said that he had never in his life seduced a woman; he always had totally equal relationships. A forty-year-old therapist jumped up and said: "I will help you." He gave Phil a dark silk scarf, which he put around his neck. As I put on dark music a beautiful young African woman got up and danced. Phil's eyes started to gleam! He approached her and talked to her in a really dark voice. The young woman turned around to me and said: "Wow, he is cool!" The audience applauded and Phil was astonished how perfectly he had acted out a magical man.

I wanted to go on with the fairy tale in order to achieve healing and asked an older, around sixty year old female physician, to sit down next to Phil and he should cover himself and her with the black scarf. I explained: Now you are Phil, the devoured Little Red Riding Hood and beside you is your grandmother. They became silent beneath the scarf, then we could see some movements, then again there was silence. Then Phil sobbed. I lifted the scarf and we all saw that Phil had cuddled up to the "grandmother" and he was weeping. I asked him how he felt and he answered that for the first time in his life he had learned to be patient with himself. I waited another while and when he asked me why he had felt like this I explained: Little Red Riding Hood is a symbol for the feelings. When grandmother (soul) and Little Red Riding Hood (feelings) are connected again, then wholeness is developed which we experience as psychic health. Many people have their feelings separated from their soul and stray around in the woods like Little Red Riding Hood until the wolf comes. But the wolf is actually doing something good: He devours both, and then soul and feelings come together in the darkness until they get rescued. But until then they can only wait.

It was a challenge to stop the discussion about terms such as "feelings" and "soul". I wanted to avoid in any case that the beautiful experience was talked down. The "grandmother" moved from Phil and went back to her seat. Her task was over and I thanked her. Now I asked Phil to talk about his illness after this experience. He stood on stage and wiped the tears of his eyes as he said: "I am determined: I will stop my medication, I will be able to do it." Nobody doubted in this moment that he would manage. He had discovered the reason for his illness and his will to heal had awakened.

I recommended that he reflect on the fairy tale Little Red Riding Hood to deepen his experience. I promised him to have "Little Red Riding Hood" in the GAME chapter "Language of Feelings" translated as soon as possible and send it to him.



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Kellerkinder Play: Overcoming Addiction

Location:	Wall Street Hotel, New York, USA
Organiser:	Galli Publishing and Agency Inc., USA
Date:	Mid June 2001
Title:	The Galli Method - An introductory one-day workshop
Target Group:	We had fourteen participants, mainly therapists, physicians, a secretary, and two management trainers. The participants hailed from Jamaica, Latin America, and the USA, all together eight women and six men. The one-day training was conducted in English.
Trainer:	Johannes Galli

An introductory speech about the Galli Method in conflict resolution and the seven Kellerkinder had already caused a lot of laughter and liveliness among the participants. The ice was broken and the participants trusted me. In the introductory exercises the participants had already had the chance to encounter their own seven Kellerkinder. This was the right time to ask who was ready to work on a conflict. A young woman from Somalia immediately raised her hand. She explained her problem simply: "I smoke a lot and don't want to smoke anymore."

This was a commendable resolution, but we all know that a resolution is not enough to overcome something as difficult as an addiction. Also, the way the woman kept repeating the negative sentence: "I don't want to smoke anymore." was very problematic. It supports addiction rather than overcoming it. I explained: "Our feelings do not understand negative expressions, because the feelings cannot feel 'no'." When the participant keeps saying to her that she does not want to smoke anymore, the image of a smoking person is created before her inner eye; the feelings consist of inner images. Images can never be seen in the negative. Sabah, how we will call the woman, agreed, but wanted to start acting something out.

I suggested playing a typical situation in which she is smoking. She decided to play a private situation and developed the play scene herself. She is at home and waits - smoking - for her husband to return from work. She chose a fifty-year-old man to play the role of her husband and they started.

Very soon it was obvious that by smoking she tried to hide the insecurity she had in relation to her husband. Again and again she started a communication with her husband. First she asked him how his work day had been, then she offered to share her experiences about their nine-year-old daughter, and then she wanted to tell him about her work. The man played that he was really tired. He said that he had worked the whole day and did not want to respond to her. This was the moment when she took a cigarette.... As the transformational play I suggested a Kellerkinder Constellation. With the help of a Kellerkinder Constellation it is very simple to work out, which Kellerkind is responsible for the addiction and also leads us to the solution.

Sabah chose seven actors; each of them represented one Kellerkind. A young therapist from Jamaica played Flirt, Bully was acted out by an American management trainer, about 50 years old, Gossip was played by a Latin American secretary of around 45, an American physician played Big Shot; Miser was played by an American hair dresser, Couch Potato by a Latin American therapist, both around 40 years old. For her Loser she chose a participant from Jamaica, around 35 years old, who was a management trainer in the USA.

The seven Kellerkinder went into a position on stage according to their position in the enneagram. Sabah turned towards them and asked the question: "What can I do to stop smoking?"



First she looked at her Bully. He supported her in quitting smoking because he wanted to be in a better shape for jogging. Flirt told her that she felt underprivileged and needed more space. She likes smoking, because that's a way for her to feel "cool"; she feels erotic playing with her lips and the cigarette while smoking. Big Shot agreed that he felt great when he smoked and he would never want to stop it. Miser kept calculating how much money she spent on cigarettes a day. Couch Potato didn't like the smell of smoke, otherwise she did not care. Gossip loved smoking, she said she felt stimulated. Sabah had her little conversation with all of those Kellerkinder. She was open and clear. But it was noticeable that she was avoiding Loser. I pointed that out and asked her to confront the Loser. She followed my instructions and got into an exciting dialogue: "How do you feel?", she asked Loser. He answered without hesitating: "I feel like shit!" Loser explained that he felt like a Zero and when he was smoking he felt better. Then he could relax, lean backwards and the problem of feeling like shit would then just disappear. It was totally obvious: Loser was the problem Kellerkind! In the following conversation with Loser Sabah realised that she smoked when she thought that she had lost her dignity. So she smoked to not "feel like shit".

Already when she was choosing her Kellerkinder I realised that she had chosen a person from Jamaica to play her Loser. He was black, and she was also black. She agreed with my thesis that the smoking was not just a personal conflict but also a racial conflict. Sabah felt like shit, she had deep doubts and inferiority feelings and had lost the belief in her dignity. She was weeping as she spoke. She had already released the Kellerkinder and was alone on stage. It was deeply moving what pain was emerging from within.

I asked her to repeat the real life play. This time she was very courageous and when her husband came home she said: "Please talk to me." She said it in such an honest and pure way that her husband embraced her. Sabah was delighted and had no time to light a cigarette.

I suggested her to regularly practice the Body Language Exercise and the Dance Meditation Kellerkinder to enhance her awareness for inner processes.

Three weeks later she called me and told me that she had observed herself and that it was right, she always smoked, when she felt rejected in a conversation. She also said that sometimes she still needs to take a cigarette, but she had managed to cut down the number to 1/3.

Recently she called again: for half a year she has been a nonsmoker.



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