Shakespeare in Prison: affecting health and wellbeing

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Abstract
Purpose – This research aimed to investigate the impacts of the Queensland Shakespeare Ensemble Prison Project (QSEPP) on the health and wellbeing of participants, specifically with regard to social support.

Design/methodology/approach – Semi-structured interviews were conducted with prisoners participating in the project to gain insight into perceived sense of support within the QSEPP and across the prison context more broadly.

Findings – The QSEPP encouraged participants to foster a range of support networks through the development of relationships built on trust, respect and shared experiences. Participants also developed communication skills which may assist with establishing and maintaining supportive relationships inside and outside of prison.

Research limitations/implications – This research highlights the inevitable challenges for researchers working within the prison context, including: correctional services’ limitations, time and space restrictions and small sample sizes. This research offers some potentially innovative ways to combat such challenges.

Practical implications – The study highlights the potential of theatre-based interventions in the prison context and their role in fostering social support and enhancing wellbeing.

Social implications – The research explores the potential role theatre may play in improving the health and wellbeing of a disadvantaged and marginalised group, providing skills to enhance access to supportive networks inside and outside prison.

Originality/value – To the best of our knowledge this is the first research of its kind and provides valuable insights into the role that theatre may play in fostering social support in the prison context.

Keywords Health in prison, Offender health, Prisoners, Public health

Introduction
Prisoner health and wellbeing

Research investigating the impacts of incarceration outline that fear, anxiety, loneliness, trauma, depression, powerlessness and violence can all be a part of life in prison and have a deleterious impact on health and wellbeing (Cooper and Berwick, 2001; Cooper and Livingston, 1991; Irwin and Owen, 2005; Jewkes, 2005; Liebling and Maruna, 2005; Listwan et al., 2010; Zamble and Porporino, 1988). Viggiani (2007, p. 115) argues that through control and disempowerment, prisons put people at risk of emotional and psychological harm: “As agencies of disempowerment and deprivation, prisons epitomise the anti-thesis of a healthy setting”.

In Australia, a high proportion of the prison population (29,101 people were incarcerated in 2011) (Australian Bureau of Statistics (ABS), 2011) experience mental health problems, including high levels of psychological stress (Australian Institute for Health and Welfare (AIHW), 2011). Many use alcohol, tobacco and other drugs at risky levels and one in five reports a history of self-harm (AIHW, 2011). In line with international rates, Australia’s prison population also experiences high rates of chronic and communicable diseases: in 2011, 26 per cent had a chronic physical condition and 35 per cent tested positive to hepatitis C anti-bodies (AIHW, 2011).
Despite high rates of illness, evidence suggests prison can provide an opportunity to improve health and wellbeing by offering access to health services and encouraging the reduction of risky behaviours such as drug abuse, prostitution and violence; however, many prisoners return to the community untreated and unsupported (Fazel and Baillargeon, 2011). This shortfall in care requires careful consideration to redress significant health inequalities. Moreover, further understanding of this population and their broader experiences is needed to identify opportunities to enhance access to health services and augment support (Fazel and Baillargeon, 2011; Gignon et al., 2011; Viggiani, 2007; World Health Organisation (WHO), 2007).

Developing an understanding of the social determinants of health affecting this population may provide an avenue from which to respond. Social determinants play a key role in the health and wellbeing of prisoners as this population experiences inequality across a range of social factors: prison populations worldwide include high numbers of people from low socioeconomic backgrounds with limited education; in Australia, 35 per cent have not completed Year 10 education (ABS, 2011; Walmsley, 2009). There is also an overrepresentation of many traditionally marginalised groups, including people from culturally and linguistically diverse backgrounds and people who identify as Aboriginal and/or Torres Strait Islander (26 per cent of the prison population compared to 2.5 per cent of the general population) (ABS, 2011).

Social support

Positive social support is a key social determinant of health and wellbeing for prisoners, as it is associated with increased coping abilities in terms of chronic stress, depression and mental illness, all of which are significant health issues for prison populations (AIHW, 2011; Barton, 1966; Biggam and Power, 1997; Cooper and Livingston, 1991; Listwan et al., 2010). Social support also plays a critical role in the development of a positive sense of self through the provision of opportunities for belonging, contributing and receiving favourable feedback (Wilkinson, 2006).

While defined broadly across the literature, it is generally accepted that social support, in the form of emotional, informational and practical (i.e. tangible assistance) support, can provide some structure for investigating relationships with health (Cullen, 1994; Cohen et al., 2000; Stansfeld, 2006; Pettus-Davis et al., 2009). Social support can be positive or negative; the latter occurs when a relationship discourages a person’s positive sense of self or reinforces unhealthy behaviours (Coyne and Downey, 1991; Pettus-Davis et al., 2009; Stansfeld, 2006; Wilcox and Vemberg, 1985).

Extending this understanding, research highlights the importance of different social networks from which people source support (Smith and Christakis, 2008). Literature demonstrates that bonding (close family and friends), bridging (acquaintances) and linking (people outside individuals’ immediate social contexts) relationships each play different roles in providing support and are all integral for encouraging and maintaining healthy behaviours (Dominguez and Arford, 2010). Bonding relationships provide important emotional, informational and practical support (Rostila, 2011) and involve people from similar social backgrounds supplying information that is considered realistic and reasonable (Thorits, 1986). Bridging relationships offer new information and access to resources and can ensure that unhelpful or unhealthy information is not continually recycled, while linking relationships provide a further extension by assisting people to access opportunities which are outside their current context (Dominguez and Arford, 2010).

While the literature generally has not considered social network theories in the prison context, a small, diverse body of work examining social support within prison populations provides some insight into the types of relationships established and maintained by prisoners. Studies have shown many prisoners come from socially isolated backgrounds, often with limited social support networks (Murray, 2007; Social Exclusion Unit, 2002). Upon entering prison, inmates may experience both shock and stress as separation from any pre-existing social support networks makes coping increasingly difficult (Biggam and Power, 1997; Hobbs and Dear, 2000). The structural environment of prison further hinders people’s ability and opportunities to develop close, supportive relationships (Biggam and Power, 1997; Collica, 2010; Hobbs and Dear, 2000; Jiang, 2006). The lack of social support among prison populations is considered a key predictor of anxiety, depression and self-harm (Biggam and Power, 1997; Hobbs and Dear, 2000;
Marzano et al., 2011). Conversely, positive social support plays a key role in coping with incarceration (Biggam and Power, 1997).

Researchers have investigated the roles different networks, such as family and friends and prison staff, play in providing social support for prisoners. Results indicate perceived support from families and friends outside can positively affect the health and wellbeing of people who are incarcerated (Biggam and Power, 1997; Carlson, 1991; Naser and La Vigne, 2006). Research has also found prisoners rarely seek support from guards, but when they do, it is almost always for practical, rather than informational or emotional support (Biggam and Power, 1997; Hobbs and Dear, 2000). Little research has investigated the role fellow inmates play in providing support; however, Goldstein et al. (2004) investigated the idea of “pro-social gangs” suggesting that criminal gangs, while often associated with anti-social behaviour, can act as healthy and legitimate social groups, playing the role of extended family support networks.

**Prison theatre**

Given the importance of social support, identifying strategies to facilitate supportive relationships and enhance the health and wellbeing of prisoners is clearly a critical area of concern. A small body of research suggests theatre may have a role to play by providing opportunities to establish connections and relationships that are unencumbered by the restrictive social norms and forms of communicating that can characterise the prison environment (Balfour, 2004a; Fahy and King, 2003; Shailor, 2011a). The link between theatre and health appears to be grounded in a long history. The relationship between health and theatre dates back to ancient Greece where healing and arts were often interlinked at cultural centres such as Epidaurus, arguably the most celebrated healing centre of the ancient world (Prior, 2010). Over the last 20 years, the number of projects using theatre to promote health and wellbeing has expanded to tackle a range of health-related issues including trauma, depression, mental illness, domestic violence and alcoholism (Bundy, 2009; Etherton and Prentki, 2007; Landy, 2010; Prentki and Preston, 2009; Prior, 2010; Seguin and Rancourt, 1996). However, projects seeking to use theatre to facilitate and support health and wellbeing in a prison context are extremely limited.

Theatre in prison also has a long history (Balfour, 2004b) and is now seen in a number of countries incorporating a variety of styles with varying aims, objectives and outcomes (e.g. see Balfour, 2004a; Fahy and King, 2003; Prentki and Preston, 2009; Shailor, 2011a). Theatre in prison has been used to address basic human needs including: self-expression, self-esteem, identity development, exploration of emotions, dealing with the past and creating hope for the future (Balfour, 2004a; Fahy and King, 2003; Prentki and Preston, 2009; Shailor, 2011a). Theatre has also been used to foster skill development and support reintegration into the community (Centre for Conflict Resolution, 2004; Harkins et al., 2011; Shailor, 2011b; Wilcox, 2011). However, to date the use of prison theatre to promote health and wellbeing is limited, with research in the area restricted to facilitator observations and basic participant feedback (e.g. see Balfour, 2004a; Fahy and King, 2003; Shailor, 2011a; Trounstine, 2004). In 2011, an established theatre company, Geese Theatre, investigated the impacts of the theatre programme Re-Connect on the wellbeing of prisoners in the UK. Results showed increases in self-efficacy and motivation to change, as well as improved confidence in a number of areas including social skills, dealing with authority, alternatives to aggression and self-control (Harkins et al., 2011). While Geese Theatre’s Re-Connect programme focused on rehabilitation and reintegration rather than measuring specific health outcomes, the study demonstrates the role theatre can play in a number of critical areas linked to prisoner wellbeing, including self-efficacy and social support.

While prison theatre takes many formats, work with Shakespearean texts have shown particular promise in this context. Shakespeare has been used in a range of prison theatre projects internationally. Initial, albeit limited, investigations indicate its potential as a tool to support key aspects of wellbeing including: personal growth and development, self-confidence, self-reflection, encouraging compassion and empathy and exploring alternatives to violence (Bates, 2011; Blair, 2009; Maggli, 2009; Rogerson, 2006). Shailor (2011b) conducted an evaluation of the Shakespeare Project at Racine Correctional Institution in the USA. The study found the project had significant impacts for participants in terms of reflection, increasing critical thinking skills, encouraging compassion and empathy and the ability to apply lessons to real life.
situations (Shailor, 2011b). Again, this evaluation was not focused on health outcomes, but is a useful example of theatre positively affecting broader factors which impact on health and wellbeing including social skills, rehabilitation and coping skills.

Shakespeare holds particular potential for developing social support networks as it encourages and engages people in a vocabulary through which emotions and feelings can be expressed. Gilligan (1996, p. 61) highlights the difficulty associated with expressing one’s self as a key cause of violent behaviour and argues violent action can proceed and replace conscious thoughts: “Understanding violence ultimately requires learning how to translate violent actions into words”. Through Shakespearean language violent offenders are exposed to new ways of expressing themselves and understanding their actions and the wider world, which is paramount for developing support networks and maintaining healthy relationships. Responses from participants of Shakespeare projects in prisons in both Australia and the USA indicate these projects can facilitate self-reflection and self-esteem, encouraging people to exercise self-control and develop respectful and meaningful relationships (Pensalfini, 2012; Rogerson, 2006).

In sum, theatre appears to hold promise as an intervention for prison populations seeking to address a range of health, social and personal issues; however, to date research is limited and efforts to use prison theatre as a conduit to facilitate social support, a critical social determinant of health and key resource for supporting wellbeing (Dominguez and Arford, 2010; Rostila, 2011) are almost non-existent. To investigate this potential in more detail, the current study aimed to explore the impact of a Shakespeare-based prison project on the development of social support and associated networks.

Methods

The Queensland Shakespeare Ensemble (QSE) Prison Project

The QSE Prison Project was implemented at Borallon Correctional Centre; a maximum-security men’s prison located on the outskirts of Brisbane, Australia. The programme ran over 12 weeks and involved weekly workshops that combined a range of theatre activities with Shakespearean texts. The project culminated in a performance of Shakespearean work by the participants for other inmates, prison staff and invited guests from the wider community. The QSE Prison Project was funded by the Queensland Government and SERCO – a private company contracted by Queensland Correctional Services to run and manage the Centre. This research did not receive funding.

Developed in 2006, the QSE Prison Project was run for the fourth time in 2011. Facilitators of the project included QSE core ensemble members (professional actors and theatre makers) and affiliated theatre practitioners. Two of the researchers (E.H. and R.P.) were present for the entire project and assisted with facilitating activities and participating in the final performance. This was an important aspect of the research as it allowed for positive relationships to be built between researchers and participants (Silverman, 2010).

Qualitative methods were chosen to explore participants’ perceived sense of support within the QSE Prison Project and across the prison context more broadly. Semi-structured interviews provided the foundations for a conversation which explored key aspects of social support and support networks as defined by the literature (Hawthorne, 2006; Mitchell et al., 2003; Zimet et al., 1988). This conversation also allowed the researcher and participants the opportunity to expand on and clarify perceptions and points of view (Silverman, 2010).

Sample

In total, 15 men participated in the QSE Prison Project and all were invited to take part in this research. Ten men agreed to be interviewed, four were unable to participate as they were moved to another centre or paroled and one did not wish to be involved. Research participants included six men who performed in the final showing, two who did not wish to participate in the final performance and two who had only attended part of the project.
The majority of participants were from a Pacific Islander background, while a smaller number were of Asian, Aboriginal and Caucasian heritage. Most of the men were in their 20s; the youngest participant was 18 and the eldest in his mid-40s.

Interviews

Face-to-face, semi-structured interviews were conducted during the final week of the QSE Prison Project sessions. Interviews with participants who performed in the final performance were conducted the day after the show and all others were interviewed prior to the final performance. The interview schedule was developed following a comprehensive review of the literature and included questions designed to explore key aspects of social support, including perceived emotional, practical and informational support, as well as sources of support and supportive networks. This project received ethical clearance from the University of Queensland Behavioural and Social Sciences Ethical Review Committee and was approved by the Queensland Correctional Services’ Research Committee.

Data analysis

Interviews were approximately 15-20 minutes in length and, in accordance with Queensland Correctional Service’s policies and procedures, were not recorded. The researcher took comprehensive notes and placed considerable emphasis on recording conversations verbatim. This method produced valid, reliable and transparent data while maintaining trust and openness with participants (Clausen, 2012; Kendall et al., 2005; Persson et al., 2010). Thematic data analysis, which involved highlighting key themes that emerged from the data, were conducted (Silverman, 2010). An inductive approach was taken whereby the data were read and re-read to investigate and understand participant responses in detail. Initial themes were identified and compared with those identified by two other researchers to ensure validity (Dey, 2003). In order to extend the analysis from a descriptive account, the researcher then used a deductive approach, reading the interviews in light of key concepts from the literature. From here, a final set of sub-themes was identified and each interview was re-read with a specific focus on each sub-theme. Interviews were again re-read by two other researchers ensuring consistency. Such a rigorous process of inter-rater reliability enhanced the validity of results (Dey, 2003). A coding system was used to ensure anonymity; respondents were allocated a letter (A-J).

Findings

The findings highlight the potential benefits of theatre in the prison context. Participants built bonding relationships with each other which provided important emotional and informational support. Bridging networks were extended as participants developed communication skills which assisted in accessing potential support from prison staff and other inmates. Facilitators provided important and unique support, extending the traditional role of “linkers” to include the provision of emotional support. Finally, participants developed a range of resources including communication skills and respect for oneself and others which appeared to assist with the initiation and maintenance of new supportive relationships, inside and outside prison.

Social support networks

The development of new social support networks through the project was a critical finding. Literature highlights the important role social support plays in developing and maintaining a positive sense of self and the implications this has on a person’s health and wellbeing (Marmot and Wilkinson, 2006). Participants highlighted how the QSE Prison Project had facilitated the development of positive social networks in the form of bonding, bridging and linking relationships which provided emotional and informational support.

Bonding networks. New bonding networks, which provided important emotional and informational support, were forged between the prisoners as they participated in the project. Many had not established such links with fellow prisoners before. All participants stated they felt care for, supported by, and connected to the other members of the group:
C: We’d see each other after in the walkway; it was weird, like we had our own social network, group. We would say hi, have a chat […] It was a spin out. We weren’t associated before and we still are now.

J: The group itself was also beneficial. The group became a circle of trust where we could share honestly in a non-judgemental environment about how we were doing, travelling in life, without the worry of being punished or having our words used against us.

Supportive relationships with inmates can mitigate stress and reduce the risk of psychological distress for prisoners (Sarason et al., 1990). Participants spoke of how the QSE Prison Project had given them the opportunity to develop such bonds:

G: I learnt a lot about myself, how to share emotions with other people, feelings and that. I’m doing my time a bit better now, with a clearer head.

E: At the end of the day we all came together to accomplish something as a team. Other programs have really been separate but Shakespeare has been all about working together.

The QSE Prison Project also fostered the sharing of informational support as participants felt comfortable and confident asking each other for help. This is particularly significant as these bonding networks can provide information and advice which is considered both useful and realistic (Thorits, 1986):

G: A lot of times we get stuck we tell each other and help each other. Because we’ve come together it’s easier to ask each other for help.

J: I know I can ask for help from people in the group.

In addition to initiating bonds within prison, participants described how they had developed new communication skills which strengthened and renewed important support networks with family (Naser and La Vigne, 2006):

G: I’m communicating more with the outside than before. I’m more confident, showing more affection to the little ones. They [family] could see the change.

C: My mother – I was explaining what I was doing and she knows I have changed.

Bridging relationships. Participants also built bridging ties with inmates outside the project. Research suggests such ties are generally outside most prisoners’ experiences (Marzano et al., 2011; Pettus-Davis et al., 2009) and, thus these relationships have the potential to provide support which was not available prior to involvement with the QSE Prison Project:

F: I see that some of the other prisoners look at us differently. Some of the things we have done here. I’m proud of it; they see I have a heart, not just so hard.

Participants discussed the development of communication skills which appeared to play a key role in facilitating bridging relationships with prison staff. This is of particular importance as research shows prison staff can provide important informational and practical support for coping with incarceration; however, prisoners rarely seek such support (Biggam and Power, 1997):

A: I speak more to people now, especially the staff members. I never wanted to talk to staff members before.

D: [Now I can communicate] more directly. If you have to talk to officers, you can do more than raise your voice.

Linking relationships. As people completely outside participants’ normal social settings, the QSE Prison Project facilitators were able to provide key support by linking participants with opportunities and resources that were not previously accessible. Participants talked about continuing to use Shakespeare to explore their emotions and capabilities and some expressed interest in pursuing theatre outside prison.

These linking relationships were unique in this context as facilitators were able to offer emotional support, which is not traditionally associated with linking networks (Dominguez and
Arford, 2010). These ties also provided informational and practical support drawing participants and facilitators together through a bond of trust, not generally experienced in the prison context:

D: You don’t have people you don’t know care about you, care how you are, what you are doing. No one, outside family, shows you any love or care; I’ve had that from you guys [facilitators].

B: Youse [the facilitators] in general talk to us like normal people. Talk to us like you want to be talked to. You are doing it for real, not just teaching it out of a book. Other teachers just do it because it’s their job, not cos they actually want to.

**Resources to support new relationships**

A number of critical factors, particularly in relation to communication and respect, appeared to significantly contribute to the development of new support networks. Participants discussed how engaging in the QSE Prison Project had increased their repertoire of responses, allowing them to address situations with an open mind, use resources available to them and continue to try in the face of setbacks or barriers:

F: It helped me approach situations a lot better, a bit smoother. I usually approach situations with the outcome already in my mind. Now I am more open-minded. Like not judging a book by its cover.

E: Say, the facilitators, I would have maybe said hello, but not given them the time of day [...] Now I look at people differently, not so judgemental, no stereotypes. There is good in everyone and its good because they [the facilitators] want you to succeed.

**Communication skills.** All participants acknowledged the programme assisted in the development of communication skills which are critical for initiating and maintaining supportive relationships (Riggio et al., 1993). Participants highlighted how they would use these communication skills to develop linking relationships beyond prison:

C: The social skills are really important, being in different social networks. So that when I am out it’s easy for me to approach a uni student or a doctor or a police officer, because they are just trying to uphold the law and I want to be able to talk to them.

There was evidence that working with Shakespearean text played a key role in increasing participants’ repertoire of responses and encouraging them to use language to express themselves. Through Shakespearean text, participants accessed new ways to vocalise their thoughts and emotions and developed confidence to express themselves. Such skills are integral for the development of bonding, bridging and linking networks as they assist in the initiation and maintenance of healthy relationships (Dominguez and Arford, 2010; Rostila, 2011):

A: Before coming in to prison I was really a ‘yes/no’ kind of person, I would never have used this sort of language or performed or anything like that. It’s taken me out of my comfort zone a lot.

F: My vocabulary is a lot cleaner and sometimes, it spins me out the things I say, like I’m really educated or something.

Participants discussed how their work in the QSE Prison Project had impacted on their ability to express emotions which is an integral part of dealing with violence (Gilligan, 1996). Expressing oneself and exploring alternatives to violence plays a key role in developing and maintaining healthy relationships, fosters openness to new social networks and creates opportunities to access emotional, information and practical support from a wider range of confidants:

J: Usually I would have gotten really frustrated and angry, lost my temper but I didn’t get agro, I didn’t lose it. Maybe Shakespeare has given me a bigger vocabulary to express my emotions.

F: I learnt that if I just put the gangster bullshit aside I can do it. There’s no need to be hard all of the time. In my family you have to be hard, everyone is really tough, no emotions or anything like that.

**Respect.** Mutual respect is integral to the development of support networks and social skills (Rostila, 2011). Each participant highlighted the respect they felt as a result of participating in the project:

C: 100%. There is no judgement here, nothing. You give and get given respect.
J: From the onset we were not treated like criminals in need of punishment, but people who are capable of good and great things.

Participants further highlighted how it was important to gain respect from people outside of the project. As Shakespeare is well respected and often considered “highbrow”, it offers a unique opportunity for inmates to demonstrate their abilities and talents. Shakespearean texts are challenging and participants felt it important to demonstrate such capabilities to the wider community. This could play a key role in fostering linking relationships through building mutual respect between inmates and the community:

F: The performance. To see the visitors’, the audience’s, reactions to what we have done, what we are doing. To see we are not bad people.

Overall, each of these elements of social support and social networks played an important role in building confidence and resilience among the participants. The increased support received from other participants, other inmates, facilitators, friends and family outside prison, gave participants the opportunity and confidence for self-exploration and a safe place to experiment with new ways of being. This, in turn, encouraged a strong sense of achievement that could be carried into other aspects of participants’ lives:

E: It gives me the confidence that I can do it if I want to. It’s Shakespeare, it’s supposed to be hard but I can do it.

J: It’s shown me I’m capable of much more […] I finished what I started. It has renewed my sense of achievement.

I: If I could do this, I could do anything, give anything a go.

Discussion

Literature highlights the important role that social support plays in supporting the health and wellbeing of prison populations (Biggam and Power, 1997; Cooper and Livingston, 1991; Marzano et al., 2011). In order to make such support available, it is clear that opportunities for developing social networks must be provided. The QSE Prison Project has shown the potential role theatre could play in supporting the development and maintenance of bonding networks among inmates. In this case, theatre, with a specific focus on Shakespearean work, provided a new form of communication, allowing participants to develop new modes of expression and access alternative ways to understand themselves and the world around them. As a result, strong bonding relationships were built between participants which could play an integral role in dealing with stress, developing and maintaining healthy behaviours and coping with psychological distress (Biggam and Power, 1997; Marzano et al., 2011; Thorits, 1986).

The QSE Prison Project was an important catalyst in the development of bridging relationships (acquaintances) across a diverse range of social networks including, prison staff and the wider community. The current findings highlight the development of communication skills that enabled participants to seek and develop a range of supportive relationships with prison staff, as well as family and friends outside prison. Research demonstrates that many prisoners come from socially isolated backgrounds (Murray, 2007; Social Exclusion Unit, 2002) and this study indicates that theatre can provide tools for fostering skills which will assist in developing and maintaining supportive networks both inside and outside prison. Bridging relationships are integral for accessing new information and resources (Dominguez and Arford, 2010) and are characterised by mutual respect between people from different social demographics (Rostila, 2011). Through showcasing their work, participants felt they had the opportunity to demonstrate their strengths and gain respect from the audience. Their achievements provided a sense of confidence and self-worth which will be useful for developing bridging relationships. Such respect and sense of achievement may have been heightened by the use of Shakespeare, a well-established and respected set of work. The potential role of theatre in developing bonding and bridging relationships in this context clearly warrants further investigation.

The QSE Project also provided participants with new opportunities to develop linking relationships with the QSE Prison Project facilitators; a group of people outside participants’
usual social context. These relationships were particularly significant, as the facilitators would not previously have been considered potential confidants. This assisted in expanding participants’ perceptions of potential sources of support and offered the opportunity to develop communication skills essential for accessing new social networks and building supportive ties.

Theatre played a key role in the development of supportive relationships, serving as a tool for both facilitators and participants to engage as equals in a process of learning and exploration. Such an approach engendered respect, trust and honesty within the group, allowing facilitators to be accepted as equals and for emotional, informational and practical support to be shared. Such trusting and cooperative relations are key elements of bonding relationships, but not generally associated with linking networks (Rostila, 2011), which demonstrates the unique nature of these new ties.

This research has highlighted theatre as a potential tool for enhancing support offered by linking networks and creating ties based on respect, trust and shared experiences. This is a critical point as it highlights the possibility for extending the standard role of linking networks by broadening the support offered and available through people outside immediate social contexts. Building elements of respect, trust and shared experiences into linking relationships can further increase the meaningfulness of information and support provided.

Results from this research provide insight into the potential role theatre can play in building social support networks and developing meaningful relationships which transcend traditional ties. Some key principles which were cornerstones to the development of social support networks in this case included: building supportive environments based on mutual respect, trust and honesty; exposing participants to new experiences; and providing opportunities to investigate and explore new ways of doing and being. While the QSE Prison Project highlighted how theatre can be used as a medium for promoting these principles, there is potential for other prison programmes to draw from this and enhance the information and support offered by ensuring trust, mutual respect and shared experiences are integrated into the learning environment. By providing opportunities for linking networks to engage with prisoners as equals, prison programming could significantly enhance the support available and thus potentially impact on the health and wellbeing of prison populations by increasing access to key sources of support which provide opportunities and advice that encourage healthy behaviours and promote a strong sense self.

The QSE Prison Project was not developed as a health promotion activity; however, the findings of this exploratory research highlight the potential for drama to be used as a tool for health education and promotion. In particular, further understanding of how theatre in prison can develop social networks that positively influence prisoner health and how to facilitate these networks would inform health promotion practice in the prison context. Although not the focus of this paper, it is interesting that the QSE Prison Project could be situated into an empowerment model of health promotion through fostering an environment whereby a dialogue was created between the facilitators and the participants and real life emotions, states of being and experiences were explored and “played with” through theatre. Bandura (1986) states it is dialogue that creates a sense of empowerment and self-efficacy, encouraging one to take control of and responsibility for one’s health (Ross, 2010). This is an important point for health promotion in the prison context because of the potential for inmates to view health promotion activities as another agenda imposed on them by authorities, thus rendering it useless or meaningless (Ross, 2010). How empowerment and self-efficacy can be encouraged through participation in prison theatre programmes warrants further investigation.

**Research limitations**

While this study provides insight into the potential role of theatre in prison as a mechanism to enhance social support, the results must be considered within the context of a number of limitations, some of which are unique to the prison context. The study was restricted by constraints imposed by QSE Prison Project timelines and Queensland Correctional Services’ policies and procedures. As a result, pre-project data from the QSE Prison Project participants were not collected. While this limited the scope and approach of the research, the post interview design did allow for a comprehensive exploration of participants’ perceptions, thoughts and feelings about the QSE Prison Project and the supports it facilitated. As a result of correctional policy, the researcher also had to manage sample attrition as four participants were moved.
unexpectedly between correctional centres or paroled (clearly a positive for the participant). As a result of these challenges the small sample size is a critical limitation; however, as an exploratory study the data gathered were rich and demonstrated points of saturation.

The physical space and timing of the QSE Prison Project also provided a number of challenges for the interview process: interviews were conducted in an open, public space during QSE Prison Project session times. This made it difficult for some participants to focus and feel completely at ease during the interview. Some interviews were interrupted or cut short due to project activities or prison rules and regulations. Despite this, the opportunity for the interviewer to form strong bonds based on the trust developed through the project was integral to the data collection process and facilitated the collection of rich data. It is also important to note that despite the limitations, the setting provided a creative way to combat safety considerations and correctional regulations around conducting research in this context, particularly for female researchers.

Overall, these limitations placed restrictions on the study; however the value of this exploratory piece of work remains. It is, to the best of our knowledge, the first study of its kind in this area and provides valuable insight into the potential role of prison theatre in affecting positive changes in social support and wellbeing. Moreover, the challenges experienced serve to highlight important considerations for further research working with corrections and demonstrate the need to develop innovative methods to combat the inevitable barriers faced when working within this context.

Conclusions

This study highlights the potential role theatre could play in building social support networks for prison populations. The QSE Prison Project encouraged participants to develop bonding, bridging and linking relationships with a diverse range of confidants. Through developing relationships based on respect, trust and shared experiences, supportive linking bonds which extended traditional roles were developed. This highlights the potential for enhancing the support available from “linkers” within the prison context and more broadly. From a public health perspective, through innovative programmes such as the QSE Prison Project, prison policy and programme development could make positive steps towards improving the health and wellbeing of a marginalised and disadvantaged group by providing opportunities for the development of positive social support networks (Fazel and Baillargeon, 2011; WHO, 2007; Dominguez and Arford, 2010). Further research identifying and outlining the role theatre may play in affecting the health and wellbeing of prisoners more widely is critical.

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Further reading

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