



Irish Red Cross
Crois Dhearg na hÉireann



Cruz Roja
Hondureña

Community Based Health & First Aid (CBHFA) in Action



October 20th-25th 2014

Hotel Casa Grande Comayagua Honduras



FEDERACIÓN INTERNACIONAL DE CRUZ ROJA Y LA MEDE YUNA ROJA

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An Advisory Mission on Behalf of the Finnish Red Cross

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1 Introduction

1.1 The CBHFA in Action is the programme of the International Federation of the Red Cross and Red Crescent. It is recommended that where new community based health programmes are being started, the key management stakeholders involved should be given sensitization to the programme content and process. This is a key recommendation of the CBHFA Implementation Guide.

1.2 Following on from the success of this award winning programme in Irish Prisons, the Finnish Red Cross, through its DIPECHO project in Honduras (implementation 2014-15), invited the Irish CBHFA team to assist them with the establishment of the programme in Comayagua prison. This was the invitation that Irish Red Cross and Irish Prison Service accepted. The partnership decided that it would be more beneficial for one of the team to go to Honduras and work with Honduras Red Cross and Prison Services as part of Irish Red Cross's activities as a potential Reference Centre of the IFRC, to assist in the establishment of CBHFA in prisons in that country supported by the Honduras Red Cross. Additionally, Guatemalan Red Cross and Salvadorian Red Cross members would participate as to have greater information exchange with this mission to Central America level.

1.3 It was agreed that this approach would provide each stakeholder in the Honduras Partnership with a face to face account of best practise when establishing more formal way of their CBHFA programme in the prison system of Honduras. Honduras Red Cross have in past worked in prisons of Honduras but more programmatic approach could be done with overall CBHFA modules that would include also emergency plans etc. where inmates and staff working in prison level are involved in design of programme. It was also an opportunity for the neighbouring countries of Guatemala and El Salvador to attend the work shop to assist them in planning, for the implementation of the programme in their countries.



Figure 1.

Map of Honduras, Guatemala and El Salvador

1.4 The key management partners in the program DIPECHO Honduras involves working with prisons of Comayagua (with capacity building activities also for El Progreso prison). As to link directly to the level of National Institute of Penitentiaries of Honduras, the invitation was sent to Director who selected three prisons to participate with its directors: Comayagua and El Progreso (involved directly to DIPECHO project 2014-15) as well as Tamara prison as an additional one.

1.5 The workshop in overall included: Directors from Comayagua, Tamara and El Progreso Prison, Prison staff from Comayagua, Representative of the Ministry of Public, Honduras Red Cross staff that has worked in prisons past years, Departmental Branch Comayagua of Honduras Red Cross,, International Committee of Red Cross, Fire department of Comayagua, and a Doctor and nurse that are working in prison of Comayagua (staff from local Hospital Santa Teresa in Comayagua), Salvadorian Red Cross and Guatemala Red Cross.

1.5 The mission consisted of interviews with senior members of the Honduras Red Cross (President Jose Juan Castro of Honduras Red Cross), Prison management (Director of National Institute of Penitentiaries of Honduras Cor. Chavez and directors of three earlier mentioned prisons) and ICRC (Head of Mission Honduras Juan Carlos Carrera Narváez and his staff). Central to the mission was a sensitization course which was attended by all key stakeholders. The outputs of the sensitization workshop are shown in annexes.

1.6 Emmett Conroy presented the greetings of Donal Forde, Secretary General of the Irish Red Cross and Micheal Donnellan, Director General of the Irish Prison Service to the Secretary General Honduras Red Cross and the Director General of the Honduras Prison Service.

2.0 Executive Summary

2.1 The advisory mission was a success in that it managed to engage the major stakeholders that need to be involved in a CBHFA in Prisons approach to health and first aid.

2.2 There is strong commitment from the prison authorities and Honduras Red Cross to undertake a pilot more holistic CBHFA project in Comayagua prison commencing in January 2015 that involves from beginning all relevant stakeholders that work in Comayagua prison as well as its inmates.

2.3 The Honduras Red Cross have the capacities to support this project.

2.4 The Sensitization workshop allowed participants to engage with module 3 (assessment module) as a means to understanding how the content of CBHFA is developed.

2.5 Discussions with prison inmates (visit to Comayagua prison as well as Tamara prison) showed a clear motivation of inmates to engage with the CBHFA approach as a means of improving living conditions and avoiding diseases.

2.6 The CBHFA approach to prison community health and first aid is based upon a firm partnership between the Honduras Red Cross, National Institute of Penitentiaries of Honduras through its Director and staff at Comayagua prison, the Fire Department, health staff working at Comayagua prison level as well as Hospital of Santa Teresa, .

2.7 The ICRC have agreed to support the pilot project in Comayagua Prison as an observer and participant to processes at prison level plans and execution level..

2.8 There are adequate health staff capacities to support the medical component of the CBHFA course at Honduras Red Cross as well as at level of Hospital Santa Teresa and its staff (DIPECHO training of CBHFA organised in December 2014).

2.9 Honduras Red Cross and the Prison Service have agreed to a timeline for the implementation of CBHFA in Comayagua Prison with preparations and training for staff in the last quarter of 2014 with a view to starting in January 2015 at prison level.

2.10 The Director I of Comayagua prison is a man of vision who has shown a track record of successful prison reform and development of livelihoods skills of inmates within prison

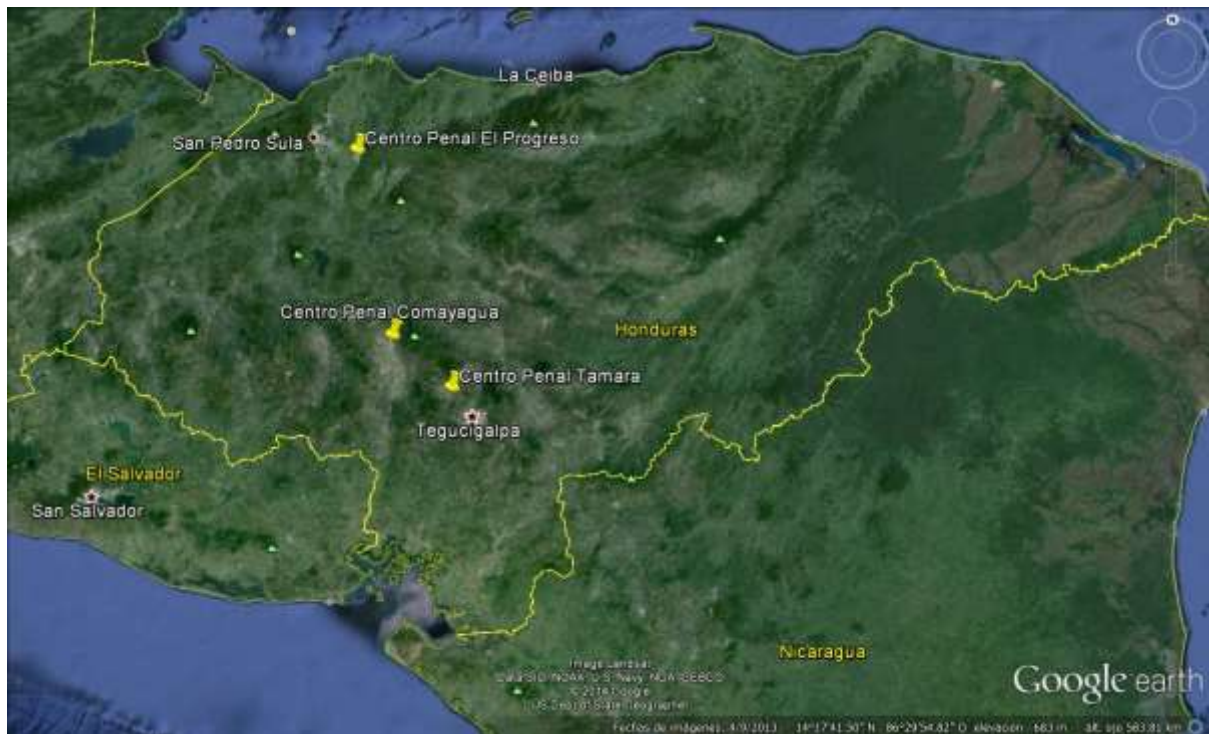


Figure 2.

Identifying the three Prisons of Comayagua, El Progreso and Tamara

3. Capacities of the Honduras Red Cross to Undertake CBHFA in Prisons

3.1 Following a meeting with the President of the Honduras Red Cross, Jose Juan Castro, he gave a commitment to supporting CBHFA in Prisons as a new format of program with stakeholders for Comayagua pilot.

3.2 The President was grateful for the opportunity to collaborate with the Irish Red Cross and Irish Prison Service and will in due course make contact with the Secretary General of the Irish Red Cross, Mr Donal Forde.

3.3 HRC are developing criteria for facilitator selection to ensure the right people are selected for this unique project.

3.4 HRC will be developing criteria for prisoner selection.

3.5 Role definitions will be developed for every member of the partnerships to ensure clarity of roles.

3.6 HRC will conduct a sensitization programme for all selected facilitators and staff involved in the CBHFA approach.

3.7 The plan is to commence the pilot project in January 2015 in Comayagua Prison.

4. Prison Management Commitment to Implement CBHFA in Prisons

The Prison Service is going through a transitional period of change following the Inter-American Commission on Human Rights report 2013 that stated "Internal control of the prisons has been

ceded into the hands of the prisoners themselves," the report also claimed the situation had spread through all 24 of the nation's prisons and it was one of the most serious problems the country faces.

5. Comayagua Prison

5.1 There are currently 560 inmates in the prison whilst its capacity is only 400, and the numbers are growing. Since the arrival of the new Director, inmates have expressed gratitude with the improvement in education through a peer to peer model the Director has introduced. He established a certified metal work shop where a prisoner highly qualified in metal work teaches other prisoners the art of metal work. On completion of the programme each student receives a Diploma in this field. This empowers prisoners, by giving them skills to gain employment on their release.

5.2 Other workshops include, wood carving, basket making and a body shop for car repairs. The produce from these workshops are sold through local shops, family members and prison staff. The prisoners get most of the profits while the remaining profit is used for buying new raw materials to sustain productivity.

5.3 The Director of Comayagua prison has established a piggery, chicken coop and a mango orchard. This provides enough bacon, eggs and fruit for the prison inmates with some produce sold to the public. The profits of public sales is used to sustain this operation.

6. Prison Health Care Capacities

6.1 The health team consists of one physician, one psychiatrist, four nurses and one psychologist. The health clinic functions 24 hours per day. In case of emergency situation, inmate is transferred to Santa Teresa Hospital.

6.2 There are also currently 20 prisoner volunteers working in the clinics undertaking cleaning work and assisting in the day to day running of health clinic.

6.3 There were medical staff from the Santa Theresa Hospital in Comayagua as they are one main stakeholder involved in overall project implementation with HRC.

6.4 Medical equipment and medications exist but in poor quantities.

6.5 Isolation area exist for patients with infectious diseases, i.e. tuberculosis.



Figure 3.

Prison Multi-use room for capacity building activities.-

6.6 First Aid training is planned to be undertaken by the Comayagua Fire Department who as responsibility by law to do this. Capacity building of staff will take place by HRC.

6.7 They will also undertake emergency planning incl. plan in case of fire with volunteers as a topic in module 5 relating to major emergencies. This is important given the recent history of a major fire in 2012 which killed 361 inmates.

7.0 Prison Education

7.1 There is one school with 1 teacher . There are daily classes on all subjects with an emphasis on literacy skills.

7.2 Three master wood carvers who are certified to teach carpentry to inmates.

7.3 There is a car body shop to teach inmates the skills of auto-mechanics.

7.4 In the prison there is also a metal workshop teaching inmates metal working skills.

7.5 There is a pig farm and chicken farm run by inmates already skilled in managing these livestock. They are teaching other prisoners how to run such livestock farms whilst promoting self-sufficiency.

The products are sold as per order with no profits, only material costs covered. If small amount would be taken for sales, this could be used to improve i.e. clinic and its medicine quantities.



Figure 4.
Carpentry shops



Figure 5.
Carving shop



Figure 6.
Chicken farming for meat and eggs



Figure 7.
Livelihoods through pig farming



Figure 8.
Metal work shop

8.0 Building up livelihoods for the future

8.1 The aim of all these educational activities is focused on providing inmates with a future livelihood to prevent them from having to rely on crime to earn a living.

8.2 It is important to acknowledge the vision and creativeness of the Director of Comayagua prison. He has been in charge less then a year.



Figure 9.
Basket making

9.0 Prison Structure

9.1 Prior to the current administration, penitentiary police ran the prisons until the beginning of 2014. There were high levels of violence which increased in intensity, and inmates in general had very little trust for penitentiary police.

9.2 In 2014, a new President replaced the Directors of the prisons. He introduced a transitional system to regulate the prisons and take back control of them. The military took over responsibility and new laws were introduced for the National Penitentiary which provided clear Role definitions outlining that the newly appointed directors will be only be in charge for this transition period. The Period in charge for transitional period ends in December 2014, and no information yet is available what is the system after first week of December. This could cause changes in directors positions.

10.0 Meeting and Discussion with Inmates of Comayagua prison

10.1 Mr Conroy met with inmates in the recreation yards and workshops and explained the CBHFA approach to health and first aid. It was well received and the inmates were keen to know when the course would start. It was evident that they were well motivated to participate in the project.

11.0 Tamara Prison Visit

11.1 There are 4,160 prisoners in this establishment which was designed for only 2,000 inmates. Living conditions are much poorer than in Comayagua prison and i.e. only 20% of inmates have access to mattress/bed.

11.2 In the first instance Mr Conroy met with the leader of Maras 18 Gang. The leader was cool at the start of the discussion but when the CBHFA programme was explained he appeared interested and invited us into the community of 300 inmates.

11.3 Mr Conroy addressed the community through an English speaking gang member. It is important to note that this invitation is a rare opportunity which surprised even the Director of Tamara prison. The result was a very keen interest to participate in CBHFA in Prisons. Honduras RC also explained that currently work is at Comayagua prison and with this pilot, Honduras RC is trying to convince Prison Service to continue in other prisons. M18 leader mentioned that he believed it would provide the 'Homies' with a good education around health topics and health awareness. It would also provide them with a constructive activity in the prison where very little activities is offered to inmates in general.

12.0 ICRC Support for CBHFA in Prisons

12.1 The ICRC play an important role in water and sanitation programmes, consultations with inmates, and security.

12.2 There appears to be good support for the planned CBHFA pilot project in Comayagua Prison from the ICRC Head of Mission, Mr. Juan Carlos Carrera.

12.3 They have welcomed collaboration with the Honduras Red Cross and will support the programme as observers and would be available to discuss the security implications of Red Cross staff entering the prisons as well as to provide their advice on security matters as to have holistic approach from the Red Cross Movement in country.

12.4 In 2012, after the fire, the government and ICRC agreed to work together. They would take responsibility to improve water and sanitation in the prison. The reason for their involvement in the prison would be specifically humanitarian in nature. They also agreed to help improve hygiene and nutrition.

13.0 Sensitization Course Design

13.1 The course was designed to assist participants to understand both the content and process involved in delivering this type of programme through a process of action learning. To do this, the course was a simulation of the activities that volunteers will go through during much of the course and the thought processes needed. Whilst most of the participants have a management role in making such programmes work (rather than teaching it), understanding its philosophy helps them be able to better support the volunteers in action.



Figures 10 and 11

Developing a seasonal calendar

13.2 In terms of change management learning, the methodology utilizes elements of the adaptive change theory applied to learning and the classroom environment. This change process is designed to assist participants develop *changed thinking* about finding new and different ways of working likely to maximise the possibilities of solutions to health and safety in the prison community. Adaptive change involves changing more than routine behaviours or preference; it involves changes

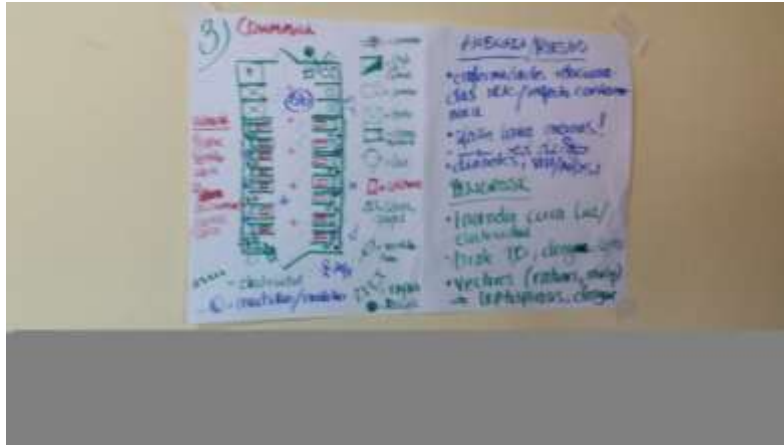


Figure 12 Mapping the Community



Figure 13

Groupwork in Sensitization Workshop

13.5 Participants of the sensitization workshop

The three Director Generals from Comayagua, Tamara and el progreso Prisons, 2 guards from Comayagua prison, one health staff from Comayagua prison, the President of the Departmental Branch of Comayagua, Lic. Castrillo, ICRC Staff, Honduras Red Cross, One Nurse and 2 Guards from Comayagua Prison, One Doctor from St Theresa Hospital, Fire Department staff, Two representative from Guatemala Red Cross, One representative from El Salvador Red Cross

in people's hearts and minds. Because the change is so profound, adaptive change can result in transformation of the system. (Heifetz and Linsky 2002).

13.3 Most of the activities of learning are based on some aspect of metaphor which are powerful tools for change since the human mind processes metaphor particularly effectively. The 'Living Through Time' (Betts-Symonds in IFRC 2006; 2007; 2009) model was used as a floor-based model around which the facilitator and the participants worked.

13.4 Participants went through the process of working with all modules with an emphasis on module 3 (community assessment). The outcomes of this assessment simulation can be seen in the annexes of this report.



Figure 14

The developing floor model reflecting the progress of the workshop at its end.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dic
Enfermedades R.	X	X								X	X	X
- Diarreas					X	X	X					
- Gastritis	X	X	X	X	X	X	X	X	X	X	X	X
- TB	X	X	X	X	X	X	X	X	X	X	X	X
- Dengue					X	X	X	X	X	X		
- VIH/ITS	X	X	X	X	X	X	X	X	X	X	X	X
- Trastornos Mentales	X	X	X	X	X	X	X	X	X	X	X	X
- Diabetes	X	X	X	X	X	X	X	X	X	X	X	X
- Epilepsia	X	X	X	X	X	X	X	X	X	X	X	X
- Alergias			X	X	X	X	X	X	X	X	X	X
- Dependencia a drogas	X	X	X	X	X	X				X	X	X
- Inf. Cardíacas	X	X	X	X	X	X	X	X	X	X	X	X
- Hongos	X	X	X	X	X	X	X	X	X	X	X	X
- Herpes	X	X	X	X	X	X	X	X	X	X	X	X
- HIPERTENSION	X	X	X	X	X	X	X	X	X	X	X	X

Figure 15

Using the seasonal calendar

14.0 Implementation Planning for CBHFA in Comayagua Prison

14.1 To prepare facilitators for giving the CBHFA in Prisons approach to Health and First Aid, a CBHFA facilitator's course will be undertaken in December 2014 for 10 volunteers from the local Honduras Red Cross, 3 people from the Department of Health, representation from the Fire Department and 5

members of the CODEM Committee which manages major emergency planning. In November, they have also participated to PHAST (Participatory Hygiene and Sanitation Training).

14.3 Action Plans were developed during workshop in Comayagua and are shown in the annexes.



Figure 16

Multi-disciplinary group work with participating partners

15.0 Volunteer Selection Criteria

15.1 The Honduras Red Cross with ICRC, Prison staff of Comayagua, psychologist and other members of emergency committee of Comayagua prison (to be established in December) will establish the volunteer criteria (volunteers of Honduras RC as well as volunteers of Prison Comayagua for CBHFA programme) together, considering the time-table, length of the course, length of the sentence of the prisoners, whilst being mindful to Include prisoners who other prisoners respect and listen to.

15.2 Together the partnership will decide, for the purpose of this initial pilot proposed for Comayagua Prison, if the best approach of selection will be through an interview process or to hand pick the volunteers. Currently in Comayagua prison there are twenty prisoners working in the Medical centre in the prison. Their role involves support and education with TB and HIV patients. It was agreed by all to consider these prisoners in the selection process.

15.3 In Comayagua prison there is a prisoner assigned as a wing leader. As a leader they have control of the landing. They are in charge of the landing and the prisoners who live on this landing. They are respected by all prisoners on the landing. It was also acknowledged that it would be important to consider these leaders as part of the selection process.

16.0 Main Health Problems Identified

Within the three prisons of Tamara, El Progreso and Comayagua key health problems include Flu, TB, HIV, Dengue, Gastritis, insects, poor quality water, drug addiction, mental health, violence and poor personal security, diabetes, asthma, overcrowding, poor sanitation, lack of medicines



Figure 17

Identifying the main health hazards and risks



Figure 18

Making sense of the data through triangulating the information from different sources

17.0 Recommendations

17.1 Ensure the adaptive change approach is used with all partners recognizing how they need to change in order to create real sustainable change through CBHFA in Prisons.

17.2 A thorough sensitization of chosen facilitators.

17.3 Create a sense of ownership of CBHFA by the prisoner community and inmate volunteers.

17.4 Support win-win projects that have a significant impact to demonstrate real action quickly.

17.5 Ensure that project has a baseline and endline assessment is undertaken as to demonstrate impact.

17.6 Inmate volunteers must begin their work in spreading information to the prisoner community from the first week of CBHFA training. This ensures that there is learning in the classroom and action in the community concurrently.

17.7 Ensure that unrealistic expectations are not created in the community of inmates.

17.8 Place the emphasis on what the inmate volunteers can do to change the situations rather than expect hardware to be bought in.

17.9 Utilize the expertise of Irish Red Cross CBHFA in Prisons team during the process of the programme through email and Skype where this is helpful.

Annexe 1 Action Plan for Comayagua Prison Project Fire Plan

Task	Resources	Time Frame	Responsibility
Prison Assessment	Camera, Paper flip chart, Makers	Two Weeks	Prison Volunteers, RC Team, Medics, Electrician
Material Preparation	Construction Materials, extinguishers, Alarm System, Evacuation route boards/Posters	One Month	Technical Team RC
Capacity Building with Volunteers	Manuals, Risk reduction	One Month	Technical team RC, Fire Department
Design and elaboration, Materials for distribution, Brochures, cards	Computer, Printer, Paper	15 days	Prison Volunteers, Technical Team RC
Distribution Campaign	Materials, Nutritional food	One Month	Prison Volunteers, Authorities
Reorganisational Plan	Paper, Computer	15 Days	Authorities, Technical Team RC, Medics
Bed Construction	People, Construction Materials	3 months	Technical team RC, Prison volunteers
Re-wiring of electrical system	Electrical Materials	1 Month	Prison Volunteers, Volunteer electrician.
Evaluation	Camera, Personal	One week	Prison volunteers, Technical RC team
Socialising results of evaluation	Paper, Food	One Day	Authorities, Prison Volunteers

Annexe 2 Action Plan for Tamara Prison Gastrointestinal Disease Awareness

Task	Resources	Time Frame	Responsibilities
Sensitisation of Volunteers about Gastrointestinal Disease	Room, Flip Chart, Markers, Red Cross, Doctor, Nurses	Two Days	Prison Staff, Doctor, Red Cross Team, Prison Volunteers
Education/Capacitation of Hand washing Techniques	Room, Flip Chart, Doctors, Nurses, Red Cross,	One Day	Medical staff, Prison Volunteers.
Plan for information sharing, Talks on landings	Banners, Posters, Pamphlets, Finance for all materials, Health Ministry/Department	One Week	Medical team, Red Cross, Co-ordinator of each landing. Encourage volunteers to assist with plan
Pre- Survey	Paper, Flip Chat, Markers	Four Days	Medical staff, Prison staff to open doors, Co-ordinator of each landing.
Implementation	Prison Volunteers, Prison staff, Red Cross	One week	Volunteers, Landing co-ordinator, Red Cross, Doctor
Post-Survey to evaluate success	Paper, Flip Chart, Markers	Four days	Medical staff, Prison staff to open doors, Co-ordinator of each landing.

Annexe 3

Action Plan for EL Progreso Prison Project Non Communicable Diseases (NCDs) Awareness

Task	Resources	Time Frame	Responsibilities
Pre-survey to gain knowledge of NCDs in El Progreso Prison.	Flip chart, markers, NCD information, Red Cross, Doctor, Ministry of health, Paper, Printer	One week	Prison Volunteers, Doctor, Red Cross, Prison staff
Sensitisation of Prison Volunteers about NCDs.	Pamphlets, NCDs manual, Red Cross, Doctor, Flip chart	One week	Medical staff, Prison Volunteers, Red Cross.
Sensitisation about hand washing technique and personal hygiene	Red Cross, Volunteers, Ministry of health, posters, pamphlets, Prison staff	One Day	Red Cross, Volunteers, Prison staff
Sensitisation about the importance of exercise. Keep active	Red Cross, Volunteers, Ministry of health, posters, pamphlets,	One Day	Red Cross, Volunteers, Prison staff, Ministry Of health.
Smoking and alcohol education	Red Cross, Volunteers, Ministry of health, posters, pamphlets,	One day	Red Cross, Volunteers, Prison staff.
Health promotion week	Red Cross, Volunteers, Ministry of health, posters, pamphlets, Prison staff Pamphlets, Posters, Water Food	Seven Days	Red Cross, Volunteers, Prison staff.
Post-survey to gauge success of campaign	Flip chart, markers, , Red Cross, Doctor, Paper, Printer	One Week	Volunteers, Prison staff, Red Cross

Annexe 4

Learning by Doing Assessment Module 3

SEASONAL CALENDARS

El Progreso Prison Seasonal Calendar

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Diarrhoea					X	X	X					
Gastritis	x	x	x	x	x	x	x	x	x	x	x	x
TB	X	X	X	X	X	X	X	X	X	X	X	X
Dengue					X	X	X	X	X	X		
HIV/Aids	X	X	X	X	X	X	X	X	X	X	X	X
Mental Health	X	X	X	X	X	X	X	X	X	X	X	X
Diabetes	X	X	X	X	X	X	X	X	X	X	X	X
Epilepsy	X	X	X	X	X	X	X	X	X	X	X	X
Allergies			X	X	X					X	X	X
Drug Addiction	X	X	X	X	X	X	X	X	X	X	X	X
Heart Disease	X	X	X	X	X	X	X	X	X	X	X	X

Tamara Prison Seasonal Calendar

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Respiratory					X	X	X					
Gastritis								X	X	X		
TB	X	X	X	X	X	X	X	X	X	X	X	X
Dengue					X	X	X	X	X	X		
HIV/Aids	X	X	X	X	X	X	X	X	X	X	X	X
National Prisoner week									X			
Metal Health	X	X	X	X	X	X	X	X	X	X	X	X
Malaria			X	X	X							
Allergies			X	X	X					X	X	X
NCD's	X	X	X	X	X	X	X	X	X	X	X	X

Annexe 5

Comayagua Seasonal Calendar

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Gastrointestinal Disorders					X	X	X	X	X			
Respiratory Diseases	X	X								X	X	X
TB	X	X	X	X	X	X	X	X	X	X	X	X
HIV	X	X	X	X	X	X	X	X	X	X	X	X
Dengue	X	X	X	X	X	X	X	X	X	X	X	X
Malaria	X	X	X	X	X	X	X	X	X	X	X	X
Drug Addiction	X	X	X	X	X	X	X	X	X	X	X	X
Depression			X	X								

Annexe 6

Focus Groups Tamara Prison

Prisoner Interviews	Medical Interviews
Flu	Flu
TB	TB
HIV	HIV
Dengue	Dengue
Gastritis	Gastritis
Fleas-insects	Fleas-insects
Poor Water Quality	Poor Water Quality
	Drug Addiction
	Mental Health
	Violence

Annexe 7

El Progreso

Prisoner Interview	Medical Interviews
TB Gastritis Diabetes HIV Flu Fever Headache Dermatology Allergy Asthma Epilepsy Mental Health	TB HIV Diabetes Asthma Epilepsy Mental Health

Annexe 8

Comayagua Focus Groups

Prisoner Interviews	Health Care Interviews
Over Crowding	Lack of infrastructure
Poor Food Quality	No Clinical room
Lack of medicine and Health care	No Medicines
Poor Water Quality	Poor water quality/No water
Lack of Sanitation facilities	No equipment
Poor personal Security	No Hospital access
	No transport to Hospital for sick
	No laboratories

Annexe 9

Mapping Tamara Prison

Risks/Hazards No Fire plan Only one entry and exit point. No Staff Poor electricity supply Poor sanitation Over Crowding	Resources Staff Doctor 10 Nurses 10
--	--

Annexe 10

Comayagua Prison Map

Risks/Hazards No fire plan No fire extinguishers Beds in close proximity Poor ventilation Electricity wires used to hang clothes from. Over crowding Poor water quality Poor sanitation facilities	Resources Staff 1/56 prisoners Doctor 1 Psychologist 1 Nurses
--	---

Annexe 11

El Progreso Map

Risks/Hazards	Resources
Severe over crowding	1 Nurse
No emergency Exits	Staff
Inadequate electricity cables	
Fire risk	
No Doctors	
1 Nurse Mon-Fri 8-4pm	
No medical cover at night	
Poor living conditions	
No security Cameras	
32 prisoners to 1 staff	
Poor water supply	
Poor sanitation facilities	

Annex 10

Creating action learning

Tamara Prison

What do the Volunteers need to learn?	Relevant Projects
Sensitization to topics.	Dengue
Information	TB
Health Promotion	HIV
Hygiene	Gastritis

El Progreso Prison

What do the Volunteers need to learn?	Relevant Projects
Sensitization to education, sigma awareness around TB and HIV.	TB
Promote healthy Living	HIV
Mental Health awareness	NCD
	Metal

Comayagua Prison

What do the Volunteers need to learn?	Relevant Projects
Hand washing technique.	Diarrhoea
Compost management	Dengue
Improve water hygiene	TB
Importance of space management and ventilation.	Fire Ventilation, Fire Plan
	Electricity Awareness