A Match Made in Prison:
A Patient Education Love Story

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I have a confession to make: I’ve been locked up.

Travel back in time with me to the early 90s. I was full of myself. At twenty-something, I wore suits and heels for the first time in my life and wasted no less than half a bottle of hairspray daily freezing my bangs into orbit around my forehead. I was the consummate young professional woman of that era. I knew it all and was going to save the world. Looking back, it’s hard to believe that all the trappings of a glamorous, post-college, just-above-minimum-wage lifestyle could lead me down the road to prison. But that’s exactly where, and how, it all started. I was four months into my role as a community health educator in a public health department when my manager called me into her office. “How are you liking your job so far?” she asked.

“Oh, I really like it!” I said, with wide-eyed, deer-in-the-headlights enthusiasm. “In college, I wrote papers about helping teens avoid pregnancy and helping new moms learn how to care for their babies. Now I get to do it for real! Being a health educator is great!”

“That’s… that’s nice,” she said. Sweat broke out on her forehead. She clenched her teeth to lock her permagrin in place. “So you know, your official title is community health educator, right? Well, now it’s time to get you out in the rest of the… community.”

I have to say that I had a very understanding boss. She excused me for a break and told me to take as long as I needed to get my heart palpitations under control after she hit me with the news that I would be visiting the local men’s prison for a day to teach sexually transmitted disease education to the inmates. Once I regained my composure, I listened as she described the reason for the training. The prison would schedule it each year for inmates paroling from long-term sentences. As their exposure to media from the “outside world” had been limited during their incarceration, so had their education about the frightening new disease that everyone was abuzz about in the early 90s: HIV/AIDS. Upcoming release meant that inmates were looking forward to resuming or beginning new relationships with significant others. With those new beginnings or reconnections came panic about the spread of HIV/AIDS and other STDs. The plea for trustworthy information went out to us at the local health department.

I reported for duty at prison on the day of the class, a bundle of nerves. With a guard on either side of me, I was escorted to the classroom where thirty men in matching white tees and khaki pants waited for me. Their program coordinator introduced me as the guest instructor. After discussing objectives, I slid a video into the VCR and pressed play. Then I watched my audience as they turned their attention to the TV screen. No one looked away with disinterest. No one dozed off to sleep. When the video was over, I asked for questions. I paused, expecting the usual response from a group of adult learners – deadpan looks from a silent room. Not this time. The questions flowed freely. One of the learners even asked me to please make notes on a flip chart so they could keep the information; so they could remember and refer back to it after I was gone. It was that valuable!
Then something happened that I will remember forever. One of the inmates voiced his anxiety about reuniting with his wife. The couple was fearful of the rumors they’d heard about HIV/AIDS running rampant in prisons. Both of them feared he’d be bringing it home. “Let me get this straight,” he said, “if anyone else in here had it, I couldn’t get it from breathing the same air as that person. Or the shower. Or bed linens.” He nodded, eyes fixed on me. “Like you said, people just can’t get it from casual contact.”

“That’s exactly right.” I told him.

Tears spilled from his eyes. He nodded his head vigorously. “Thank you,” was all he could say. “Thank you.”

I was surprised when the program coordinator cut me off. Our time was up. For six straight hours, I had been teaching. The inmates had been learning. An entire day had passed, and none of us in the room seemed to have noticed how much time had gone by. My audience thanked me with a round of applause before leaving the room. The program coordinator glanced through their evaluation forms, nodding thoughtfully. “This was very well received,” he said. Together, we read the feedback, which included:

- You get all kinds of “education” in here and it is hard to know what to trust. It’s good to learn the facts for a change.
- Thank you for making it easy to talk about a difficult topic without judgment. She made this a safe place for us to learn.
- You answered questions and put to rest fears and doubts that I have carried for years.

“This is impressive,” said the program coordinator. “You know that something powerful has happened when people who have been incarcerated for a decade or more can articulate such feelings of freedom.” With those words, I felt tears gathering in my own eyes. The start of my day had found me well outside of my comfort zone; the close of it left me deeply changed. The most rewarding, humbling, and joyful experience of my career to date had happened in the very last place that I ever would have expected. I fell in love with education that day.

In my current role, I talk with nurses and other clinicians who tell me that they don’t have time for education, or they don’t see the value of it. Some describe it as one more item on yet another checklist of added responsibilities that never ends. For those of you in patient care roles, I understand how tough it is. To all of you I say: Please don’t give up. Give the handout. Start the video. Then add the critical piece that no handout or video can deliver; start the conversation. Answer the questions. Be the resource, the cause for hope, the source of truth and facts, and the reason why the patient will rest easy at night from now on. Who knows? You might just change someone’s entire life as a result. My hope for you is that you will come to see patient education not as just one more thing that’s been added to your job, but the most important part of your job. I hope you can fall in love with education the same way that I did.

Because love is a crazy little thing. It can find you when and where you least expect it, whether it’s in a medium security prison, or at the bedside in a hospital room. It can fill your heart back up when you’re stressed and spent and you feel like you have nothing left to give. It can help you find new meaning in the same old daily grind. Most importantly, it can remind you in a very powerful way that who you are and what you do makes a difference. Patient education expert Fran London says that the most important service that nurses and other healthcare professionals provide, after saving lives, is patient and family education. Thus, it logically follows that since most health care is self-care, good outcomes are fueled first and foremost by – you guessed it – education.

So I could never think of a worthier cause to invest my time, energy – and love in at work – than that one.