

# Cirque du Monde as a health intervention

## Perceptions of medical students and social circus experts

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### Abstract

**Objective** To present Cirque du Soleil's social circus program, Cirque du Monde, to explore its potential as a primary health care tool for family physicians.

**Data sources** A review of the literature in PubMed, the Cochrane Library, PsycINFO, LaPresse, Eureka, Google Scholar, and Érudit using the key words *circus*, *social circus*, *Cirque du Monde*, and *Cirque du Soleil*; a Montreal-based initiative, Espace Transition, modeled on Cirque du Monde; and personal communication with Cirque du Soleil's Social Circus Training Advisor.

**Study selection** The first 50 articles or websites identified for each key word in each of the databases were examined on the basis of their titles and abstracts in the case of articles, and on the basis of their titles and page content in the case of websites. Articles and websites that explored an aspect of social circuses or that described an intervention that involved circuses were then retained for analysis. Because all literature on social circuses was searched, no criterion for year of publication was used.

**Synthesis** No articles on the social circus as a health intervention were found. One study on the use of the circus as an intervention in schools was identified. It demonstrated an increase in self-esteem in the children who took part. One study on the use of the circus in a First Nations community was found; it contained nonspecific, qualitative findings. The other articles identified were merely descriptions of social circuses. One website was identified on the use of the social circus to help youth who had been treated in a hospital setting for major psychiatric disorders to re-enter the community. The team in the pediatric psychiatry department at Centre Hospitalier Universitaire Sainte-Justine, the children's hospital in Montreal, Que, was contacted; they were leading this project, called Espace Transition. The unpublished preliminary findings of its pilot project demonstrate substantial improvements in overall patient functioning. According to Cirque du Soleil, there are several projects under way around the world researching the therapeutic value of social circuses.

**Conclusion** Cirque du Monde is able to reach a marginalized population that is otherwise difficult for the health system to reach. This program has therapeutic potential because of its target population, its promotion of healthy habits, and the support that it offers through the group and its workers. Cirque du Soleil is investing heavily in this project. The lack of literature yielding robust data on the social circus is therefore an important issue.

### EDITOR'S KEY POINTS

- Interventions incorporating art forms such as theatre, dance, and drama have been shown to be effective in youth dealing with psychiatric illness or neurodevelopmental problems. These interventions can improve participants' socialization, social skills, self-esteem, self-expression, and self-confidence.
- The circus arts have the potential to support children and youth by focusing on 6 important aspects of their development: constructive risk-taking, aspiration, confidence, fun, individualization, and hard work.
- Cirque du Monde is able to reach a marginalized population that is otherwise difficult for the health system to reach.

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Cirque du Soleil was founded in Quebec in the early 1980s by Guy Laliberté.<sup>1</sup> Like other modern circuses, it features the arts of juggling, balancing, acrobatics, aerial acts, and play. Now, 30 years later, Cirque du Soleil employs close to 5000 individuals worldwide and devotes 1% of its revenue each year to social action and cultural programming.<sup>2</sup> Few people are aware that Cirque du Soleil's social circus program, Cirque du Monde, is one of its primary social missions.

Cirque du Monde came about through a partnership between Cirque du Soleil and Jeunesse du Monde, a non-governmental organization that blended its expertise in community work and international cooperation with Cirque du Soleil's circus expertise.<sup>3</sup> This initiative is in response to the Convention on the Rights of the Child, which states that parties to the convention "shall take all appropriate measures to promote [...] [the] social reintegration of a child victim of any form of neglect."<sup>4</sup>

The primary goal of Cirque du Monde is to foster the personal and social development of at-risk children and youth. By working to promote their self-esteem and social re-entry, Cirque du Monde gives them a step up to a new and healthier life. According to Bolton, the circus arts have the potential to support children and youth by focusing on 6 important aspects of their development: constructive risk-taking, aspiration, confidence, fun, individualization, and hard work.<sup>5</sup> Through circus workshops, participants become aware of their abilities; they develop a sense of belonging to a group.<sup>6</sup> Circus arts alternate between individual work and teamwork, helping participants to develop a better understanding of their abilities and better relationships both within the circus community and within the broader community. The circus arts involve a certain element of risk and the program helps participants to learn about risk management. For example, warming up beforehand is important for circus performers if they are to avoid injury. Participants learn that managing risk is not only important in circus work, but it is also important in their personal lives.

Cirque du Monde programs operate in 80 communities around the world. Since its founding in 1995, some 500 000 children and youth have taken part.<sup>3</sup> Cirque du Monde has a presence in Quebec, as do other social circus organizations (Figure 1). Despite the fact that the social circus movement has yet to make substantial inroads in other parts of Canada, Cirque du Soleil supports other organizations through training activities and by offering its expertise.

Cirque du Monde's many employees and volunteers make it possible to offer circus sessions to at-risk youth free of charge. Workers include practitioners from local community organizations and circus trainers who have received special training so that they can work with the program's specific participants. Social circus trainers

provide them with techniques that have been adapted for working with the program's target population. Cirque du Soleil's coordinators ensure that the activities in each Cirque du Monde community program run smoothly.

The patients differ depending on the community; each centre pursues a different mission. In southern Africa, for example, the participants are children with HIV.<sup>7</sup> The goal is to offer circus activities that coincide with medical treatment; this offers the children an incentive to travel the long distances they would not otherwise travel to receive care. In Quebec, Cirque du Monde is a tool for helping at-risk youth and youth living on the street to re-enter the community. While the patients might differ from location to location, all of the social circus programs are for children and youth between the ages of 8 and 25 years who are in difficult social and economic circumstances. These children and youth are at risk because of health problems and social problems,<sup>8</sup> including disease, intellectual deficits, substance abuse, malnutrition, violence, poverty, and social isolation.

Cirque du Soleil presented Cirque du Monde at the 2012 conference of the Canadian Rural Health Research Society.<sup>9</sup> Its presentation to some 200 researchers from the health field was followed by a performance by youth in the Quebec Cirque du Monde program. As members of the Research Chair in Emergency Medicine at Laval University in Quebec city, Que, this presentation piqued our curiosity.

The next year, as medical students performing a research rotation, several of the authors (C.F., M.A.D., and J.M.) were invited to study Cirque du Monde in cooperation with Cirque du Soleil. They were invited to explore the potential effect of this social circus program for an at-risk population. The primary objective of this article is to present Cirque du Soleil's social circus program, Cirque du Monde, and to explore its potential as a primary health care tool for family physicians.

## DATA SOURCES

The social circus is widely viewed as a social intervention; however, to our knowledge, there is very little scientific evidence of its efficacy as a health intervention. We conducted a review of the literature to find scientific data on the social circus. In July 2013, we searched PubMed, the Cochrane Library, PsycINFO, LaPresse, Eureka, Google Scholar, and Érudit using the key words *circus*, *social circus*, *Cirque du Monde*, and *Cirque du Soleil*. The first 50 articles and websites that we identified for each key word in each of the databases were reviewed on the basis of the title and abstract in the case of an article, and on the basis of the title and content in the case of a website. Articles and websites that explored an aspect of the social circus or that presented

Figure 1. Social circus sites in Canada



an intervention involving the circus were retained for further analysis. Because we were surveying general literature on the social circus, we did not apply a criterion for the year of publication.

### Study selection

Two relevant articles were identified. One described a medical intervention to restore mobility in the limbs of patients who presented with cerebral paralysis, persistent prehensile reflex pathology, or spasticity. The study was conducted under the theme of the circus; however, the intervention did not involve practising circus arts.<sup>10</sup> Another article described the use of the social circus as an intervention in a school.<sup>11</sup> This project involved occupational therapists hired to work in elementary and secondary schools and the use of the social circus to achieve the goals of the local education program. The

study findings were qualitative; they described the skills that the students needed to acquire in this school program. In spite of the fact that this article did not focus directly on medical benefits, it is interesting to note that the children's self-esteem and relationships with others improved. We also identified 2 master's theses and a doctoral dissertation. These contained qualitative descriptions of the social circus and dealt primarily with its social, cultural, and artistic aspects. None studied the social circus as a clinical therapeutic intervention.

Further studies are required in order to generate robust scientific evidence of the therapeutic effect of Cirque du Monde on a target group of participants.<sup>12</sup> A number of research projects are currently being conducted on the social circus. Wanting to understand the effect of its social circus on participants, Cirque du Soleil is following the research in this area with great interest.

Cirque du Soleil is in the process of charting the locations of the various research projects that are currently under way, but for which there are still no published reports. A map of these locations will be available in the near future. In spite of the lack of medical literature on social circuses, we believe that these programs have benefit as a primary care intervention.

### Espace Transition

Espace Transition is a project based in Montreal, Que, that uses the arts and the circus as health intervention tools. This project involves Centre Hospitalier Universitaire Sainte-Justine, the University of Montreal, and the Department of Educational Psychology at the University of Montreal. Created in 2009 by child psychiatrist Patricia Garel, it is modeled on Cirque du Monde. Although there is no scientific literature on the project so far, several articles and a doctoral dissertation will be published. Right from the outset, project developers realized that an evaluation of the project's implementation and validation of its effects were critical to further development; as a result, evaluative research methods was incorporated into the design of the project. The project's proximity to the university made it easy to study close up. Given the lack of scientific literature mentioned above, this work is essential from the standpoint of evidence-based practices, and because the population in the project is vulnerable and at considerable risk of relapse.

Health professionals have observed that youth who undergo long-term treatment in a hospital for severe psychiatric disorders experience difficulty making the transition back to life in the community and at home.<sup>13,14</sup> This was the impetus for the Espace Transition project. It was designed to make it easier for patients to re-enter society and to help them to develop their talents and creativity. The intervention consisted of taking the patients out of the hospital so that they could participate in drama and circus activities as a group. Rather than re-creating a classic group therapy structure in which each participant was encouraged to talk about his or her problems, participants were supported to create a work of art together. The workshops took place in a YWCA facility in order to encourage the youth, who wanted to get away from their illnesses and the institutional care structure, to stay in the program.<sup>15,16</sup> The project was designed for patients who were medically stable and between the ages of 14 and 24. Non-patients who had no psychiatric pathology also took part in the project. Twardzicki has shown that when non-patients are included in an art project along with patients presenting with psychopathologies, they also derive some benefit, developing an increased understanding of and more positive attitudes toward psychiatric patients and their problems.<sup>17</sup> The artists who worked in the program were not aware of the status of the participants, allowing the

youth to be seen other than just as psychiatric patients.

The pilot project included participants in the 2010 to 2011 groups (Table 1). They met 2 evenings a week for 3 months. Semistructured interviews were conducted with the patients and the clinicians at 3 points in time: before participation in the workshops (time 1); immediately after the workshops (time 2); and 3 months after the end of the program (time 3). The results of the evaluation of the pilot project were presented to a symposium of psychiatry and mental health professionals in 2012.<sup>18</sup>

**Table 1. Description of participants in Espace Transition in 2010 to 2011: There were 15 patients, 9 non-patients, and 14 workers; the workers included 11 referring clinicians, 2 artist-instructors, and 1 educational psychologist.**

CONDITIONS	PARTICIPANTS, N (%)
Mood disorders	5 (33)
Anxiety disorders	4 (27)
Relational or behavioural problems	2 (13)
Attention deficit hyperactivity disorder	2 (13)
Psychotic disorders	1 (7)
Eating disorders	1 (7)

Thirteen patients completed questionnaires. In terms of their social skills, ease in relationships, and self-esteem, they reported no significant differences between time 1 and time 2 or 3. However, in interviews, their physicians reported substantial differences between time 1 and time 2 or 3; there were substantial decreases in the patients' dependency, inactivity, social isolation, and psychiatric symptoms. Although the patients did not report any meaningful changes, substantial improvements in the patients' overall functioning were reported by the attending physicians.<sup>18</sup>

Espace Transition has expanded its repertoire of workshops to include theatre and improvisation; this is because circus work requires physical skills that not all patients have. For example, this is true of patients with musculoskeletal or neurologic problems, as well as patients taking medications with side effects such as loss of balance, fatigue, dizziness, and unstable blood pressure. Thus, as an intervention, the circus is not appropriate for all patients. It should be noted that, in the near future, Espace Transition will be offered to children and youth with chronic conditions such as cystic fibrosis and diabetes as part of a comprehensive approach to their physical and mental health.

## DISCUSSION

Our area of interest is the potential therapeutic aspects of the social circus. Given the effect that Espace

Transition is having, we thought that it would be interesting to measure the effect of Cirque du Soleil's social circus program, as it was the inspiration for Espace Transition and was designed for clients presenting with physical, mental, emotional, and social risk factors.<sup>8</sup>

Cirque du Monde promotes physical health by promoting a healthy lifestyle. For example, physical activity, which is a key factor in health prevention, is not compatible with smoking, taking drugs, or drinking alcohol. Cirque du Monde participants may not consume tobacco, drugs, or alcohol before or during activities; this is a continuation of the preventive work that their family physicians began.

Cirque du Monde provides peer support. Some of the participants of this social circus program are isolated. There are weekly meetings, with roughly the same participants each week; for some participants, this is the only time they interact with others. Because participants perform in public and interact with others, the program helps them to reduce their social anxiety.

### Identifying hard-to-reach patients

Generally speaking, youth are more likely to engage in risky behaviour that can have deleterious consequences. This behaviour includes impaired driving, alcohol and drug abuse, unprotected sex, and delinquency. Participants in Cirque du Monde are also at greater risk of disease and injury because of their lifestyles. As health professionals, sometimes we have to go to our patients; youth who live on the street often do not have the money, the means, or the information required to access medical services.<sup>8</sup> Some are resistant to asking for help. The social circus is an effective way to help these hard-to-reach patients; health professionals could consider joining circus sessions as a way to make contact with this population. A study by Maglio and McKinstry has demonstrated that partnerships between occupational therapists and circus trainers can be beneficial for the health of participants in a social circus.<sup>11</sup> It is often difficult for physicians and other health professionals to fully understand this type of patient in a health care setting. Youth who are struggling and at risk often do not share that they have nowhere to live or are in crisis when they enter a health institution. This can make it difficult to adequately assess their risk factors.<sup>8</sup> Thus, Cirque du Monde could be an effective way to identify these patients directly.

Interventions incorporating art forms such as theatre, dance, and drama have been shown to be effective in youth dealing with psychiatric illness or neurodevelopmental problems. These interventions can improve participants' socialization,<sup>17,19,20</sup> social skills,<sup>20-23</sup> self-esteem,<sup>19,23-28</sup> self-expression, and self-confidence.<sup>23,28,29</sup> Although these results cannot be used to conclude that Cirque du Monde is an effective intervention, the circus

is an art form and its participants include at-risk youth who present with myriad mental health problems (such as addictions, mood disorders, bipolar disorder, behavioural disorders, posttraumatic stress disorder, and suicide attempts) and related physical health problems.<sup>8</sup> The need and relevance of studying the effects of this intervention must be reiterated.

Nevertheless, integrating medical resources into Cirque du Monde is not without risks, one of which is that Cirque du Monde's deinstitutionalized environment would be lost. Any study must consider how participants would react to the inclusion of medical professionals in social circus activities. An alternative would be to create a system for referrals to care structures through the social circus activity supervisors. This approach was adopted for Espace Transition. The educational psychologist on site during each session was the link between the patient and the attending physician. In this way, the space remained a circus space.

The integration of medical resources into the social circus could start with medical students participating in circus workshops. This would be particularly useful for pre-clerkship students because they do not necessarily learn to work with patients living in difficult social and economic circumstances. The University of Montreal has become aware of the benefit of this type of exposure for its medical students. A rotation with the Espace Transition project is now offered as a credited elective course. The health component could also be integrated into Cirque du Monde through collaboration between the program and a community medicine clinic. The disciplines of medicine and health research are often presented in the form of protocols and guidelines, with little room for imagination or creativity. And yet, research and advances in knowledge are propelled by creativity. Scientists would benefit from exposure to the creative universe of Cirque du Monde and would find that it inspires their own creativity and research.

### Conclusion

To our knowledge, there has never been a study of the efficacy of Cirque du Monde from the standpoint of community health and primary care. It is time for such a study. Scientific evidence supporting the efficacy of the program could make it possible to set up social circus sites in other parts of Canada. It appears to have a very small presence outside of Quebec (**Figure 1**). Primary care professionals might want to explore the social circus as a means of reaching a marginalized population that has difficulty integrating into the health care system. Family physicians need to know about Cirque du Monde. It is an initiative whose therapeutic and social potential could complement conventional medicine.

The 2014 Family Medicine Forum of the College of Family Physicians of Canada will take place in Quebec

city, which has its own Cirque du Monde program. When Cirque du Soleil presents the program to Family Medicine Forum's 3000 participants, it will be an opportunity for Canada's family physicians to learn about Cirque du Monde and to judge for themselves its relevance as a primary care intervention with the potential to reach a vulnerable population. 

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#### Contributors

In the context of their respective areas of expertise, all authors contributed to the literature review and interpretation, and to preparing the manuscript for submission.

#### Competing interests

None declared

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