

**WORKSHOPPING THE AIDS PLAY WITH
MEN:**

An explorative study of four collaboratively created HIV/AIDS plays, with special focus on the problems of gender, masculinity and cultural memory in creating narrative with men in the workshop theatre process.

by

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A thesis submitted in partial fulfilment of the
requirements for the degree of

Master of Arts

**University of KwaZulu-Natal,
Pietermaritzburg**

2008

ACKNOWLEDGMENTS

This thesis would not have been possible without the love and support of a number of incredibly special people.

My mother and my father, my brothers James and Matthew. My friends - Tami, Justin, Angela, Dylan, Marilyn, Mike, Vuli, Ari, James, Morgs and, especially, Daniel. There are more, thank you all.

Mike Lambert's friendship and mentorship. Paul Datlen, Hazel Barnes, Diane Wilson and all in the Hexagon Theatre, thank you for your friendship and for sharing your vast knowledge and wisdom.

To all those who participated in the productions that are the case studies of this dissertation, thank you. This is your work.

My supervisor Veronica Baxter has been my mentor on a number of levels, and has guided me through more than just this dissertation. Her patience was remarkable, as was her ability to sharpen pencils.

Finally, I would like to thank the National Research Foundation for the funding that they provided that allowed me to function as a researcher and a theatre practitioner.

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ABSTRACT

This dissertation aims to explore problems of gender, masculinity and cultural memory shared by men in the theatre workshop process through looking at the workshop process of four HIV/AIDS plays. The narrative that evolved in the process of creating each play carries an important and current documentation of story and myth that illustrate a unique social understanding of varied but relevant HIV/AIDS issues. In this dissertation the scripts will act as primary text in an exploration of the importance of workshop theatre in documenting the creation of stories and myth in the HIV/AIDS context. The focus of the exploration is on the male participants, with the intention of gaining a greater understanding of contemporary masculine issues in the context of HIV/AIDS.

In comparing principles of workshop theatre with interactive models of educational theatre process, I will argue that the theatre workshop process (including the collaborative creation of narrative) is a highly effective method of educating or creating change for its participants, and that this change encourages a greater social change for the spectator.

This is a qualitative study of four participatory processes. The research objectives are not to measure the outcomes of the workshop processes; rather they serve to highlight the value of collaborative theatre making. However, the argument will be guided through a critical analysis of workshop theatre, models of educational theatre and drama, HIV/AIDS education and contemporary studies of masculinity to illustrate how workshop theatre in South Africa can continue to act as an effective method of recording current issues and creating social change.

INTRODUCTION

The three key topics explored in this dissertation are encapsulated within the title, *Workshopping the AIDS play with Men*. The term ‘workshopping’ refers to the process of devising a theatrical play, and is also known as workshop theatre or theatre workshop (Oddey 1994). The AIDS play simply refers to a piece of theatre whose main theme is provoked by the HIV/AIDS pandemic in South Africa. The focus on men is to explore the issues of gender and masculinity that evolve out of the workshop process of the AIDS plays studied in this dissertation.

The aim of this dissertation is to explore the workshop process of four plays all devised collaboratively through the different methods of theatre workshop. The process of each play can be reflected upon through the narratives that evolved from the different workshop processes. The key to understanding each narrative, in my opinion, lies within the knowledge each participant brings to the workshop process. In this dissertation I have chosen to focus exclusively on male participants and their contributions, including myself as a participant. As researcher and co-creator of each play, I am an important subject within this research.

HIV/AIDS has in some way affected each and every South African and as the pandemic is largely transmitted through sexual intercourse in South Africa, it has affected the way in which we have constructed our gender and sexualities. Because of the multi-cultural nature of South African society, the different understandings of gender, sexuality and culture are very complex and play an important role in constructing South African identities. In the workshop process, the participants’ expressions of these themes were problematised in the creation of their narratives.

In Chapter One the methodology employed in this dissertation will be discussed. The four workshop processes studied were created over a period of three years, involved a variety of people, used many different theatrical techniques and were all different from each other. This study aims to give an account of each process through focusing on specific qualities of each. It is thus a qualitative study of four specific theatre workshop processes with each process

being an independent case study. Each case study will be analysed and compared as an ethnographic description of how men create narrative within the workshop space.

The primary texts used are the scripts of the four plays, and other data that were collected in the creation of the scripts. The data used will include interviews, video recordings, journal material, evaluations, reports and questionnaires. The questionnaires have been independently processed and evaluated under quantitative methods, and will be interpreted as such (Tromp 2003, Maxwell 2004).

The productions were all externally evaluated. However, each evaluation had different objectives, some of which were not relevant to this dissertation. Because of this, the evaluations will be interpreted selectively.

In Chapter Two a literature survey relevant to workshop theatre will be conducted, with particular reference to the South African context, and the development the South African workshop theatre form as an oppositional and often political form of performance. The research illustrates the fluid and eclectic nature of the South African workshop theatre form, and argues that the form has become a known, and shared, South African cultural-aesthetic.

Chapter Three describes models of educational theatre and drama as examples of the workshop process. The models provide a catalyst to argue the significance of the workshop theatre creation process as a space of growth and development for the participants, whose ultimate change has a possible influence on their own, and the audiences, behaviour.

In Chapter Four the two educational plays, *It's Not What You Say...* (2003) and *Say What You Do* (2004) serve as primary texts as I argue for the significance of participants' knowledge of identity in the workshop process of educational theatre and drama. I discuss the scripts, describe the aims and outcomes of the two plays, offer a report of their processes and focus on the narratives that the male participants created.

Chapter Five introduces *The Sacred Cow* as a script devised around narrative structure as opposed to explicit didactic purposes. Through looking at the model of Aristotelian drama

and other structures of narrative creation, I will argue for the importance of mythology in creating narrative especially in the context of the HIV/AIDS play or drama with men.

Chapter Six discusses the play *Carpe Diem* and introduces the township form of workshop theatre. No concrete script was written in the process of creating this particular play and in this chapter I argue that the lack of written script affected negatively the integrity of the narrative structure as theatre.

Finally, in Chapter Seven I shall discuss my conclusions and focus on issues of gender, sexuality and identity construction, which emerged through reflecting on the four workshop processes.

CHAPTER ONE: METHODOLOGY

Research in the Human Sciences can involve both quantitative and qualitative methodologies. As indicated in my introduction, I have chosen to use a qualitative methodology, as this is best suited to an analysis of theatre workshop processes.

1.1 What is Qualitative Research?

Qualitative research refers to research that uses methods of data collection that do not, as in the case of quantitative research, aim to gather statistical scientific results that can be measured, but instead provides a means to gather data whose qualities can be examined. Qualitative research is underpinned by a particular view of reality: that is, that subjects construct their own realities and ‘truths’ rather than measure realities and ‘truths’ which exist objectively. Therefore the aim of qualitative research is not to expose statistical or factual ‘truths’, but rather to examine and interpret the characteristics of data.

Silverman (2000: 8) describes five main features of qualitative research listed below:

- A preference for qualitative data – understood simply as the **analysis of words and images** rather than numbers;
- A preference for **observation** rather than experiment, the **unstructured** rather than structured;
- A preference for **meaning** rather than behaviour – attempting ‘to document the world from the point of view of the people studied’;
- A **rejection of natural science** as a model;
- A preference for **inductive, hypothesis generated** research rather than hypothesis testing.

These five points are pertinent to this dissertation. There are few numbers to consider when one is researching theatre, few certainties and few opportunities to use statistical results to construct a hypothesis. In this dissertation I use the scripts and recorded details of the

productions to analyse the process through exploration of literature (see Chapter Two) and recorded text (the scripts, journals and evaluations). In the case studies used in this dissertation I have chosen to focus on each study independently, observed and recorded with different data capturing methods which were predominantly unstructured. The theatrical process of devising theatre occurs naturally, as each individual involved is an unpredictable source of creativity (Oddey 1994). Although there are some controls that a theatre director or educational facilitator often imposes, these controls are always in flux, and negotiable, changing to suit the needs of the creation process.

It can also be argued that the meaning derived from the texts outweighs the importance of behavioural observations, as what is created is not necessarily an accurate reflection of any person's behaviour and certainly does not predict or ensure how people will behave in the future. Although the aim of this dissertation is partly to show the importance of the workshop process on having a positive behavioural change on both the participants and the audience, I have no statistical or factual evidence to support this hypothesis. This form of "soft science" (Silverman 2000: 2) rejects the aims of natural science and quantitative methodology as a research model. The aims of this type of research are not to test a hypothesis or to deduce a positive result, but they are rather inductive in nature, working towards generating a hypothesis that may in fact be contestable.

1.2 Can Qualitative Research be 'true'?

What is the point of doing research that may not be 'true'? Silverman describes truth as "validity and reliability", (2000: 175) which in the context of quantitative research is in accordance with what is perceived as fact and reality. As outlined above, it is difficult to prove the validity and reliability of data through qualitative methods, as the facts are often in flux. In the case of this dissertation I cannot prove through statistics or through experimentation that my particular hypotheses are true. However, it is through the process of collecting the data that the researcher observes 'valid and reliable truths' as they occur (to the participants, to the researcher, to the audience). It is through reflection on these observations that 'truths' are documented and analysed; and through this analysis that the qualities of the research are interpreted; and through this interpretation that the 'truths' are shaped into

hypotheses. However, before I describe some of the different methods of qualitative research that I use, I shall give a brief description of quantitative research, illustrating clearly why it was an inappropriate method of research in this particular dissertation.

1.3 The problem with quantitative research

It is unfair to assume that quantitative research methodologies have no place in theatrical research. There are many reasons to use quantitative research in theatrical studies, such as the counting and recording of audience numbers, questionnaires and technical research. However, it is my view that quantitative research can be spurious or ‘soft science’ in the same way as qualitative research is described as a ‘soft science’. For example, political campaigns are instructive. Statistical quantitative results are often in the media, on posters or used in speeches and debates. They are used as political tools, and it is difficult to trust the way political campaigners use them. Quantitative research aims to prove hypotheses true, and through the use of such methods as controlled experimentation, social survey, statistics, controlled observation and content analysis, aims to record reliable facts (Silverman 1997: 3). However, in the context of a political campaign, it becomes very difficult to trust facts that seem reliable. In the Human Sciences, the problem with quantitative methods is that when people are the subject of the research, and as in this case, when the researcher is the subject of his research (and especially within a creative space such as theatre) very little is fixed and nothing is reliable. Humanity is unpredictable. It is through the process of collecting the data that we learn of people’s specific ‘truths’ and how they construct them.

1.4 Methods of Data Capture

There are a number of possible ways of collecting qualitative data. Acknowledging and examining the history of the data contextualizes it, although this form of data collection may rely on secondary sources. For primary sources sociological or ethnographic studies can aid in describing subjects if the subjects are people, by the collection of data in the field in the form of questionnaires, forms of media (e.g. forms of video, photographs or voice recording) or simply reflective field notes. This particular research project has incorporated three

methods: contextualization of the data, ethnographic reflection and participatory action research.

If we label each workshop process studied in this dissertation as a case study, it would be accurate to categorise this research as an examination of four case studies. According to Freebody (2003: 74), ethnography describes and analyses the practice and beliefs of cultures and communities. The four case studies used in this dissertation were all theatrical productions aimed at recording narratives which explored HIV/AIDS and sexuality, whilst incorporating social and cultural perception and practice. This dissertation is an ethnographic case study that uses theatre and drama as a tool for collecting data. As Silverman suggests,

Ethnography is characterized by two demands on researchers: one as observing a setting and gathering data, and the other as directly involved in the setting under study, including the researchers, as themselves objects of the inquiry. (1997: 10)

The setting in these case studies is the workshop space. The process of gathering the data was conducted by all those involved in the workshop process and in the creation of the theatrical productions. Therefore all involved in the workshop processes are researchers. In these case studies I play two roles, that of the recorder and analyser of the data, and that of the director and facilitator of the workshop processes. I am a researcher in both roles and so are the participants. The process of collecting data through this method is called participatory action research.

1.5 What is Participatory Action Research?

Freebody defines action research as a “planned and focused examination of changing practice” (2003: 86). As in the case of most qualitative research, participatory action research is inductive, aiming to discover problems and uncover ‘truths’. Although participatory action research can be personally owned, it is, in the case of this research project, owned and conducted by the group of participants involved. This is what is meant by participatory action research. The research takes the form of a series of iterations, or what Freebody describes as “spirals --- a cyclic development geared towards change” (2003: 86). Participatory action

research is then a process whereby ideas become experimental findings, with the aim of finding problems and possible solutions within the ideas. It is research in practice.

Participatory action research refers to a methodology that collects data in the field through the process of intervention. It is practical and situational, as it will take place within a specific context, a time and a place defined by the performance of the intervention.

The data is collected through many different means. Video recordings of events, reflective journals created by participants, interviews, questionnaires, notes written by the researcher all help in collecting data that is contained within the space of the intervention. Any method can be used to capture this data. It is then the researcher's role to choose whether to keep or discard the data collected. It is thus an inductive form of data collection that implies the researcher's choices influence the outcome of the research findings and thus include the researcher as a subject of research. Freebody (2003: 87) analyses the process of this type of research:

- Selecting the focus of the inquiry and studying the available literature;
- Collecting the data from a variety of sources, using forms of case study and ethnographic techniques;
- Analysing, documenting and reviewing the immediate, cumulative, and longer term effects of (participants') actions;
- Developing and implementing interpretive analytical categories;
- Organizing the data and the interpretations by grouping instances, events and artefacts into systematic, interconnected displays;
- Taking action, on the basis of short –and long-term plans;
- Repeating the cycle.

1.6 The problem with researching the theatre workshop space

Although the theatre workshop space serves as a controlled and valuable space for collecting data through action research, there is one inconsistency with the participatory action research methodology. The theatre workshop is not designed to capture data for research objectives.

Rather, it is designed to create a performance. Therefore the objectives of the theatre workshop are not to collect data to put through a research methodology, analyse and act on, but rather the theatre workshop collects data, incorporates the data in a script, and performs the data as an interpreted theatrical display.

However, this research does not aim to be purely academic. As O'Neill (et al 2002: 70), who also uses participatory action research to record narrative collected in the theatre workshop space, argues:

By representing ethnographic data (life story interviews) in artistic form we can access a richer understanding of the complexities of lived experience which can throw light on broader social structures and processes. Such work can also reach a wider population, beyond academic communities, facilitating understanding/interpretation and, maybe, action/praxis in relation to certain social issues.

1.7 Primary Sources

Although participatory action research was the most helpful form of data collection in this research dissertation, other forms of data collection were also used. The primary texts used were the scripts of the four plays, and other data that was collected in the creation of the scripts. The data used included interviews, journal material, evaluations, reports and questionnaires. The questionnaires were independently processed and evaluated under quantitative methods (Maxwell 2004), and although Maxwell's research was intended for a broader HIV/AIDS campaign on the campus, his data was useful in demonstrating a statistical approach of audience responses.

The productions were all externally evaluated. However, each evaluation had different objectives, and therefore will be interpreted selectively by the researcher.

CHAPTER TWO: FROM THEATRE WORKSHOP FOR POLITICAL CHANGE TO THEATRE WORKSHOP FOR HIV/AIDS AWARENESS

In the beginning theater was the dithyrambic song: free people singing in the open air. The carnival. The feast.

Later the ruling classes took possession of the theater and built their dividing walls. First, they divided the people, separating actors from spectators: people who act and people who watch – the party is over! Secondly, among the actors, they separated the protagonist from the mass. The coercive indoctrination began!

Now the oppressed people are liberated themselves and, once more, are making the theater their own. The walls must be torn down (Boal 1979: 119).

...all theater is necessarily political, because all the activities of man are political and theater is one of them (Boal 1979: ix)

2.1 Introduction

Should theatre be purely entertainment? Or should theatre serve as a tool to educate, create social awareness, provoke social action and wake the audience from ignorant slumber? Augusto Boal stands firm. Theatre is political. But then Boal admits that he is political and that his theatre is political; and that all theatre is different and constantly changing. I would agree that all theatre is to some extent political. If, to quote Boal again, politics is “the one whose laws rule over the relations of men in their totality” (1979: 11), then politics is simply the network of relationships that exist between humans and their environment.

It is my view that theatre is primarily about relationships. Theatre, in my opinion, should constantly strive to expose the relationship between the writer and the director, between the production itself and the social context at the time of the production, between the director and the actor, between the space and the text and between the actor and the audience. In fact there are many more relationships, the most obvious on performance night being the relationships of the characters portrayed on stage.

In South African workshop theatre, equality between all these relationships has been achieved through a style of theatre creation that is essentially collaborative, and democratic. This is an idealistic perception of South African workshop theatre; however the origins of workshop theatre in South Africa suggest that it has been successful in this country primarily because of its democratic nature and its ability to voice the true feelings of the popular class, or the political through a popular, informative and entertaining medium.

In this section I document the development of workshop theatre in South Africa focusing specifically on how it has been used as a tool for social change, from anti-apartheid protest theatre to HIV/AIDS awareness theatre. I discuss the development of a cultural understanding of theatre as an aesthetic that served a purpose greater than entertainment. Through this discussion I concentrate on certain relationships within the creation process of workshop theatre. Possibly the most significant relationship concerning this dissertation is between the male participants in the four case studies (see chapters 4-6) and the narrative that they created and performed; however, in order to discuss the outcome of the case studies in this dissertation, it is first necessary to show how workshop theatre developed in South Africa in relation to historical context, political environment and resources. Once the context of workshop theatre in South Africa is established, I show how certain educational theatre and drama techniques can be utilised in the workshop process, and offer examples of educational alternatives to the workshop form, especially in the creation of HIV/AIDS theatre.

Mark Fleishman (1990, 1991 and 1996), who conducted extensive work on South African Workshop Theatre in the 1980s, offers examples of an era of theatre workshop that had great bearing on South African understanding of theatre as a powerful political aesthetic that commented on and challenged the evolving social and political environment. In a sense the workshop theatre created in the 1980s encapsulated the success of the genre in South Africa. Plays such as *Woza Albert!*, possibly South Africa's most successful play on international as well as local stages, were able to make many people aware of the apartheid regime's activities in the country and the social and political views of the oppressed majority.

However after the 1980s and especially after the first democratic elections in 1994, workshop theatre became obsolete as a political tool, as the enemy had been defeated and the political

terrain redefined. The importance of workshop theatre in South Africa is unquestionable: its development has been well recorded, and its popularity as a method of creating theatre is still current. But the reasons for creating theatre have now shifted; there is possibly less risk involved in challenging government and thus less excitement and tension derived from oppositional theatre, making the workshop genre seem as obsolete as the apartheid regime. However, this is not the case, as there is nothing obsolete about workshop theatre in contemporary South Africa, as oppression in some form or other still exists and the stories, despite the Truth and Reconciliation Commission, still remain to be told.

Fleishman's research on workshop theatre in the 1980s offers more than a political commentary. He gives an excellent account of the form and structure that workshop theatre took in those times. Workshop theatre is by nature a changing form of theatre. The structure and form will always be dependant on the people who create the theatre and the political and social environment of the time in which they create it. Workshop theatre is an oral form, as opposed to a literary form, and as such will constantly develop just as oral traditions develop and change (Kavanagh 1985; Fleishman 1990, 1991; Fuchs 1990; Gunner 2001). Fleishman argues that workshop theatre is born from oral tradition, and as such opposes Aristotelian dramatic structure and western traditional theatre.

Athol Fugard (1993), a prominent South African writer and director, was one of South Africa's first established theatre practitioners to use methods of theatre workshop to create collaborative work. Fugard first documented using methods of theatre workshop in the early nineteen-fifties, while working on a collaborative project in Sophiatown (Vandenbroucke 1986: 28). The primary focus of his work was to provoke social change through creating social consciousness. But the influence on South African workshop theatre draws from both pre-European-influenced African indigenous performance and European medieval performance. This particular style of theatre making and performance evolved into a number of forms within South Africa, one notable form being a township hybrid known as 'township theatre', which has had significant influence on contemporary educational theatre making.

2.2 The arrival of European theatre

Before Fugard and the emergence of workshop theatre as a recognised theatrical genre, European literary theatre was prominent in South Africa. The first recorded European theatre that played in South Africa occurred on the ships of the early explorers. Fletcher (1994: 11) gives a good account of the early European theatre in the Cape colony. What is interesting about Fletcher's account is that she begins by describing indigenous South African theatrical performance as early as 1497, and although the focus of the theatre she describes is predominately literary European theatre, the short account of indigenous theatrical performance is an important part of Fletcher's description of the overall development of theatre in South Africa.

Fletcher (1994: 11) mentions the first Shakespeare production in South Africa, a performance of *Hamlet* on the Dutch East Indian vessel *The Dragon*, which was performed by the sailors for their officers in 1608, only six years after the first known British performance of the play. In Fletcher's account of South African theatre, she documents early Portuguese, English, Dutch, French and German influences, all of which were theatre whose structure was based on the conventional Aristotelian theatre. Although the documentation of the then existing indigenous oral traditions are somewhat neglected in her account of South African theatre, the influence of literary theatre is crucial to the understanding of workshop theatre in South Africa today, as it formed the foundation of understanding theatre as a cultural aesthetic in South Africa, of which workshop theatre is a part.

These early European sailors staging Shakespeare and performing farces for their officers made an impact on contemporary South African theatre, as they were to colonise the land and contribute possibly the only positive aspect of colonisation, that of new cultures. Perhaps more notable than the first Dutch theatre was the more sophisticated French theatre that began to make a huge impact on the ever-growing European community in the Cape colony in the late 1700s. When the English colonized the Cape there was already a sophisticated society of theatre that seemed to embody European culture and heritage. Theatre was an art form that was able to exist away from the strong cultural heritage of Europe, and unlike the art galleries, the architecture and the magnificent squares of Europe, theatre was able to travel. The Portuguese, the Dutch, the French, the English and the Germans all added considerably to the European influence on theatre in South Africa. It is fair to assume that all

theatre created in contemporary South Africa is highly influenced by our early European colonisers, if not directly, then purely because of the rich diversity in culture, language and heritage it introduced to the country.

European theatre was exclusive, not only in that it was never intended for the indigenous people of South Africa, but also because it was a literary theatre that excluded a large number of the Europeans who were colonising the Cape. A large majority of the Europeans in the Cape colony would have been uneducated and illiterate sailors and tradesmen who would have probably enjoyed the more carnivalesque and oral forms of theatre that would have existed in Europe before and during the 18th and 19th centuries. They would not have understood much of the sophisticated theatre that existed, and certainly would have found it more difficult, than the more educated military officers and wealthy merchants, to follow the different languages that were being spoken.

Although Shakespeare was popular among all class groups in Britain, theatre was generally a middle-class to a somewhat upper-class luxury. However, forms of *Commedia del' Arte*, religious theatre such as the miracle plays, and other improvisational oral forms of theatre may have been more accessible to working class Europeans (Fleishman 1991: 17-27).

Little is recorded of the types of entertainment that the working class Europeans in the Cape colony may have enjoyed, as it was largely unscripted and performed in spaces other than the theatre. It probably would have included elements such as music, dance improvisation and satirical mime, as this was popular in the forms of performance of the popular classes in Europe at the time. Fletcher (1994: 15) does imply that theatre in Cape Town may have emerged from the confined spaces of the barracks and slave quarters, where theatrical performances were evident in the early parts of the 1700s. According to Fletcher (*ibid*), the soldiers in the barracks were performing farces and skits “remembered from Holland,” and “Cape Town’s residents were apparently unaware of them, and in any event would have been socially barred from watching the antics of simple soldiers.” The social prejudices that existed within the European culture of the time were thus reflected in the theatre, and the fact that the performances were inspired by the ‘memories’ implies that they were ‘oral’ forms of theatre. Music Hall, another form of unscripted theatre that incorporated song, dance,

acrobatics, and improvisation, satirical skits and farces, and other forms of performance closely related to the European carnival, would have also become popular entertainment towards the end of the 19th century.

Fletcher describes a play written in Arabic by a Malayan slave that was about a slave girl resisting her master, and Fletcher continues by suggesting:

This was indigenous theatre, too inflammatory to be performed anywhere but behind lodge walls after nine o'clock curfew, and presumably lit by homemade candles in that crowded unventilated place; and if there was one play, there could have been others – unscripted, spontaneous outbursts, reflecting the day's cruel events... (Fletcher 1994: 15)

Although the Malayan slaves were not indigenous South Africans, their theatre had many similarities to the indigenous South African theatre described in section 2.3. Fletcher also implies that this 'indigenous theatre' was an oral form of theatre. Thus, another influence in the Cape would certainly have come from the Malayan slaves. Fletcher also mentions that the Malayan performance incorporated indigenous Malayan instruments, song, story telling and dance. The Malayan tradition has developed in the Cape and a major carnival is celebrated each year showing just how strong their particular influence was.

Fleishman (1991: 9) describes this form of theatre as the "carnival tradition." The "carnival tradition" was enjoyed by an oral society. The performances would not have been written in text, but passed on from one person to another through word of mouth. Improvisation would have been prominent. The performances would not have taken place in the conventional and more exclusive theatre, but would have been performed by and for the popular class in their own spaces such as barracks and slave quarters. It is essentially these qualities that helped define the emergence of workshop theatre, a theatre that was created by and for the popular class.

2.3 African indigenous performance and the introduction of European culture

By European standards, African performance seems eclectic and hybrid. It combines dramatic and narrative elements and fuses song, dance, and mimicry (Graver 1999: 3).

Graver describes the indigenous theatre of South Africa as having emerged from or been influenced by the indigenous forms of South African dramatic ritual and performance. Adding to Graver, Fletcher describes an account of ‘Khoisan’ performance documented by a French traveller in the early 1500s:

Their musical talent was highly developed, and they delighted in mimicry, song and dance, using instruments made from quills, gut and gourds. They depicted hunting scenes, the movement of game, tracking and the flight of wounded animals (Fletcher 1994: 11).

These qualities that both Graver and Fletcher describe are very similar to those described in Fleishman’s European “carnival tradition.” In truth, there are few fundamental differences between the two worlds of performance. Both shared the carnival spirit, the attitude that performance was a spontaneous, shared experience and that shared experience should be expressed by song, dance, mime or whatever tools people had to express. Unfortunately African indigenous performance was never recorded and researched in the period before Europeans had too much influence on its form, but from the information we have today we can assume that theatrical type performance existed in African culture for hundreds, if not thousands of years. South African indigenous forms of performance can be dated back to sociological studies conducted mostly by Westerners in the early parts of the last century; however Fleishman and Kavanagh (1985) provide the basis for my discussion.

Fleishman speaks of Zulu and Xhosa rituals that incorporated very specific performance styles, such as dance, drama and mime (1990: 93). Kavanagh (1985: 44) goes further to suggest that although dramatic forms existed centuries ago they were lost due to inadequate records, loss of cultural heritage and poor research on African theatre. Kavanagh (ibid) describes the problems associated with poor research due to the fact that the researchers were normally European and prejudiced or even racist in their viewpoint and that there was a lack of interest in theatre, or especially in Europeans describing what occurred in Africa as theatre. This lack of interest or misunderstanding of theatre when recording or ‘researching’ the

dramatic activities of traditional societies in South Africa, according to Kavanagh, tended to obscure rather than reveal the actual practice. However, theatre did exist possibly even before the arrival of the Bantu, as Kavanagh states:

Hottentot and Bushman communities possessed certain (dramatic) forms which included mime, music, dance, costume, props, make-up and ritual (1985: 44).

Before the Europeans arrived most people of South Africa were of a “primary oral culture” (Fleishman 1990: 91). Fleishman defines the “primary oral culture” as a society which has not yet been introduced to writing, and therefore reading, and is thus inclined to use strong oral forms of communication. This promoted a greater opportunity for dramatic type interventions, as dramatised ritual is orally based. The performance of a ritual is also communal, meaning that the experience is shared. Both Fleishman and Kavanagh mention specific forms of performed ritual, such as the Zulu *izinyanekwane* (folk-tales) and the Xhosa *intsomi* (praise singing). Folk-tales were performed in ritualised events. Characters were portrayed by the narrators and masks and other forms of costume were often used in the narration. The songs that were incorporated into the folk-tales would often be sung by all who were present. The event included everybody that was present, and often the ancestors too, and there was no division between stage and auditorium, actor and spectator, living and dead; it was a completely shared experience.

It was not until the Europeans arrived and started colonising South Africa that western theatre with its Aristotelian structures was introduced. Some of the earliest European colonisers in South Africa were missionaries. Apart from setting up foundations for the colony, the missionaries introduced a number of positive resources for the people of South Africa. Churches were built, as well as medical facilities and schools, and it was probably through school education that European culture was fully exposed and shared with the different communities. Of those educated in this system, Kavanagh notes that:

The educated wrote in the new forms made available to them by their European educators – verse, novel, play, etc. – and these were normally first practised in school (1985: 45).

Through introducing education and literacy to the people of South Africa, the missionaries also introduced forms of drama and dramatic learning. Kavanagh goes further to mention forms of dramatised fables that were being performed in mission schools in the 1800s.

The importance of the ‘performed ritual’, and the indigenous peoples’ understanding of performance as an art, would have encouraged the theatre that was introduced by the missionaries. Indigenous performance used many techniques that were not common in the European theatre of the time. For example, in European theatre, the audience would be distanced from the actors on the stage, watching as if an ‘invisible wall’ was keeping the performers in their space. In contrast, indigenous performance used the audience as part of the ritual. As Graver notes:

Indigenous African performance is communal, drawing performers and audience together and often obscuring the boundary between them (1999: 3).

Western dramatised theatre was greatly influenced by the Aristotelian structure of a drama. This, with the influence of a pre-conceived western perception of what theatre was and what a theatre should look like, meant that the missionaries probably did not relate the different rituals to theatre. However, as a performance style, indigenous forms of performance were very theatrical. They were also effective in connecting with the audience.

Due to lack of continued development of the quality of education and literacy in South Africa, especially during the apartheid era, the majority of South African blacks were restricted from becoming fully literate. Ironically, this meant that because of apartheid an oral tradition was maintained or even preserved, even after the cultural elements of many customs were lost or were in the process of being forgotten.

The loss of traditional customs began to occur rapidly after the European Government placed tax regulations on rural communities in the early 1900s (Kavanagh 1985: 45). This forced many men to look for work in the cities in order to pay the tax, and in so doing it pulled the men away from their different cultures. Therefore, they were no longer living in an ethnic or tribal environment, but rather introduced to a new hybridised culture.

Kavanagh (ibid) believes that by 1906, after the defeat of the Zulu chief Bhambatha, the last of the indigenous peoples of South Africa had been defeated. Not only was the armed rebellion of Bhambatha silenced, but it also showed the last act of the European colonisers in dismantling and dispersing an ethnic group. Bhambatha's rebellion had been sparked by the new taxation rules (including the infamous 'hut tax'¹), and so it was at this time that the majority of the urbanisation began to take place, in what has been called 'migrant labour' (Pampallis 1991: 64).

The urbanisation of rural Africans brought many different forms of traditional ritual and dramatic performance into the cities. This is where the real fusion of cultures began. Rituals, song, dance and story telling played an important role in the rural communities, so too did they play an important role in the hostels, compounds and townships of the cities. The difference was that this sharing was now multi-cultural.

2.4 The emergence of workshop theatre

The 1970s was an important era in South African workshop theatre, with many theatre practitioners of different race, culture and class forming collaborative groups and producing theatre that was to contribute to socio-political change in the country. The workshop method of creating theatre was identified as a successful tool in creating social consciousness. By contrasting the work of South African practitioners to European theorists Grotowski (1968), Barker (1977), Brook (1968, 1987, 1993) and Littlewood (1994), it is possible to establish the foundations of workshop theatre. However, features of the European workshop theatre had emerged in South Africa before these theorists had published their work.

Nevertheless, the European influence in South African cities was also very important in the development of indigenous theatre. Theatre was the popular form of entertainment in the

¹ "In 1905, a poll tax of £1 for every male was introduced" (Pampallis 1991: 64). Pampallis describes how first land was confiscated from Zulus in order to get the men to work on the mines, but as this was not effective enough the poll tax, or 'hut tax', was introduced. The tax was widely resisted, Bambatha being one chief who fought the new legislation, but the resistance was crushed.

early 1900s. South African theatre was also growing, not only in the English speaking theatre, but also in the Afrikaans and African.

Kavanagh (1985: 45) records an early example of indigenous performance emerging with western forms of theatre in the work of the **Lucky Stars**, a group of actors performing in 1929. The leader of the group was Esau Mthwethwa, and he, like the rest of the cast, was from Natal. They were all Zulu speakers, and so they performed in both Zulu and English. Most of their work used didactic forms of social satire, with well-known Zulu traditional narratives. They became quite popular, as they toured both Natal and the Witwatersrand, where they were “performing in Zulu to Whites and Blacks” (Kavanagh 1985: 45). Kavanagh notes that there was very little information on them, and is unsure whether or not there were many other groups performing at the same time, but he believes that there must have been. In his study, Kavanagh concludes that although “they greatly influenced Johannesburg Location productions ... it is not clear whether this refers to productions by the educated or by the urban proletariat” (Kavanagh 1985: 45).

There is no method of measuring the influence of a group like the **Lucky Stars** on the development of workshop theatre. However, the style of performance that Kavanagh describes has many similarities with the ‘carnival tradition’ to which Fleishman refers, while at the same time incorporating forms of indigenous performance. As Kavanagh notes, “their plays were improvised and extemporized on stage when the spirit moved or a crisis demanded it” (1985: 45). This improvised style of creating this form of theatre is very evident in workshop theatre, and perhaps lends itself to a non-literate culture. According to Kavanagh they “employed much music and dance” (ibid.). Dance and music seem to be two recurring techniques that are used in workshop theatre all through its development. It was with groups like the **Lucky Stars** that the workshop form began to emerge in South Africa.

2.5. Workshop theatre in South Africa

Fleishman (1990: 88-89) describes workshop theatre in South Africa as a theatre that is “made” by a group of people together, and not by individuals in isolation. It is made for performance and is thus difficult to write or record as text, as workshop theatre deals with

what Fleishman calls “life” (rather than literature) and, when this “life” becomes text, the performance is already over. Fleishman insists that “any published version is only a crystallization of a process at one particular stage of that process” (1990: 88), and that in itself defies the purpose of workshop theatre. South African workshop theatre has a unique structure that has been highly influenced by the indigenous performance culture and the traditional oral form. Fleishman describes this unique style as non-naturalistic, physical, musical and larger than life that draws on the performance of music, dance and narrative within the context of a single performance.

According to Fleishman, the productions would have more to do with the “collective subject,” rather than the individual subject of western theatre. South African workshop theatre was born in the cities and it is thus an urban form of cultural expression that is strongly related to traditional and rural performance forms, but it remains fundamentally urban. As theatre it is overtly political and, through the use of satire and grotesque parody, it enables audiences to laugh at tragedy. By so doing it can distance the oppressors’ methods, such as fear and propaganda, in such a way that what is feared and unknown becomes both known and thus more possible to resist and change.

In the wake of the work of Littlewood (1994) and her socialist **Theatre Workshop** which emerged during the Second World War in the United Kingdom, collaborative and unconventional theatre workshop became a recognised and respected form of theatre practice in Europe. In the early 1960s, workshop theatre became internationally recognised as an alternate method to the popular Western theatre of the time, thanks to the work of the Polish theatre practitioner Jerzy Grotowski. ‘Poor theatre’, as Grotowski called his form of theatre, offered a new way of creating theatre that used a more collaborative method in the creation process. ‘Poor theatre’ also removed the ‘invisible wall,’ drawing the spectators onto the stage and involving them in the ritual with the actors. It was called ‘poor theatre’ because Grotowski believed that the actor’s body was ‘holy’, and that the actors did not need the help of set, props or even lighting to aid in their performance. Thus the actors were trained to dance, sing and use their bodies to their fullest potential. As Vandenbroucke says:

Grotowski contends it is the actor-audience relationship of perceptual, direct, “live” communion that is the essence of theatre. Costumes, scenery, make-up, lighting, and sound effects can be eliminated; the actor cannot (1986: 145).

However, years before Grotowski had published his famous book *Towards a Poor Theatre* (1968) theatre practitioners in South Africa were already experimenting with styles of workshop theatre.

The culture of orality in South Africa meant that workshop techniques were being commonly used, because writing scripts meant that there had to be a writer available and that the performers would have to be able to read, which was often not the case in the semi-literate society. South African theatre practitioners found this form of collaborative work very effective, especially in the apartheid era, since this form of oral theatre meant that police censorship of written scripts was made more difficult.

However, there was still a need for a director and a script composer (Kavanagh 1997: 28). For the objective, in most cases, was still the same, and that was to make theatre in the traditional form that Western theatre tradition had prescribed. There were some exceptions to this, such as the **Lucky Stars**. Even though the exceptions differed from the traditional Western form of theatre, they were not absolutely unique in anyway. In other words, theatre was being made that opposed traditional Western forms of theatre, but it was being made by and for Westerners. Therefore South African workshop theatre is not completely unique because, as I have indicated above, it is a hybrid of Western theatre and indigenous oral traditions.

2.6. Athol Fugard and the role of the writer and director in workshop theatre

Vandenbroucke states that “nine years before reading Grotowski, Fugard had explained his own idea of a perfect theatre ... his vision eerily anticipates Grotowski’s” (1986: 145). This idea of a perfect theatre is defined by Athol Fugard, arguably the most successful South African theatre playwright to date, as follows:

The experience belongs to the audience. (The audience) is my major concern as a playwright. The ingredients of this experience are already partially revealed in what I have said and are very simple – their very simplicity being my justification for using the word “pure” in the context of a form as open to adulteration as theatre: they are the actor and the stage, the actor on the stage. Around (the actor) is space, to be filled and defined by movement; around (the actor) is also silence to be filled with meaning, using words and sounds, and at moments when all else fails (the actor), including my words, the silence itself. To repeat myself, but using different words: the cathartic possibility in theatre needs nothing more than the actor and the stage. For the miracle to happen it must come from within the actor... External will profit the play nothing, if the actors have no soul (Vandenbroucke 1986: 146).

This definition of theatre anticipates Grotowski’s view almost exactly and so situates Fugard within the tradition of European workshop theatre, even though his heritage was South African.

Athol Fugard moved to Johannesburg in the late 1950s to work as a professional writer. While working in Johannesburg, he was introduced to Sophiatown, an interesting suburb in the city that had become a haven for black artists, writers, intellectuals and gangsters. Although he was a writer, influenced greatly by a Western education, Fugard did a lot of work with workshop and township theatre. In fact it was through the success of his plays that a form of theatre, owned by the township, was created --- a variant on workshop theatre that South Africans have come to know as township theatre (Fugard 1993). Fugard is a writer, and although his early work has been published as literature, it was created in the workshop style. This certainly contradicts Fleishman’s description of workshop theatre as a form of theatre that lacks the “crystallisation of a process” (1990: 88). Scripting workshop theatre enabled a form of theatre that was often problematically unstructured in terms of European standards, to become structured enough to become more accessible for the European audience. The scripting of workshop theatre simply made the theatre internationally marketable, and offered an important source for remembering the work. Beginning his township work in 1958 with the creation of *No-Good Friday*, Fugard went on to create some of South Africa’s most

famous plays. Working with township performers meant that he captured the ‘soul’ of the actors through the reality of the contexts of the performances.

John Kani and Winston Ntshona were introduced to Fugard on his return to Port Elizabeth. They were two members of a small drama group from the local township who wanted to work with Fugard, after hearing about his work in Johannesburg. Together they formed a group called the **Serpent Players**, and began workshopping plays together. The style in which they worked was typical too of that which Grotowski had described through his ‘poor theatre.’ Here is an example from *The Island*, a play that the **Serpent Players** created in 1973:

Centre stage: a raised area representing a cell on Robben Island. Blankets and sleeping-mats ... the prisoners sleep on the floor ... are neatly folded. In one corner are a bucket of water and two mugs.

The long drawn-out wail of a siren. Stage-lights come up to reveal a harsh, white light around the cell. In it the two prisoners-John stage-right and Winston stage-left – mime the digging of sand ...

A whistle is blown. They stop digging and come together ...They are handcuffed together ...They start to run ...John mumbling a prayer, Winston muttering a rhythm for their three-legged run (Fugard 1993: 195).

The stage is bare, with only a few props. The actors have to mime all the information that is needed to aid the audience’s understanding of the context. The actor is alone, carrying the weight of the performance through his actions, rather than through the text of the play. His physicality is the tool that makes the play work as theatre. It is this physical ‘intelligence’ that helps define a performer of South African workshop theatre.

2.7. The township musical

The 1950s and 1960s marked a time of significant development in theatre being made by and for Africans, with the Sophiatown intellectuals and artists making their mark on South Africa’s cultural history. In 1959, the Union of South African Artists, a white run

organisation that worked multi-culturally, premiered the musical *King Kong* (Coplan 1985: 490).

King Kong was written and directed by African artists, and the performance was multi-lingual. This particular performance marked the starting point of South Africa's 'Father of Theatre', Gibson Kente, who made his mark with the popular 'township musical' genre.

Township musicals were an interesting development in South African theatre. According to Coplan (1985: 483), in the 1950s urban middle-class and working class black South Africans "developed different organisational patterns and outlooks on city life." Coplan (ibid) suggests that these new "patterns and outlooks" were reflected in the theatre and other performance of the time, as previously rural Africans began to link their heritage of "performance culture" with the developing African urban community. As a result of this emerging cultural autonomy of a new 'class' of black South Africans, new political problems began to occur. Coplan (ibid) names some of these resulting issues as; conflict between white commercial interests in the control of African culture and the black communities ownership of their own culture; disorder developing because the segregation laws of apartheid prevented the establishment of social accountability, institutions and settings for black communities; and performers had to redefine their roles, firstly in their position to the social conflict, and secondly their relationship with their audience. The establishment of these new problems influenced the workshop theatre style significantly.

The style was based on the classic jazzy Broadway musical, although it contained a number of major differences. Coplan (1985: 490) describes *King Kong* as incorporating American jazz, Sotho derived stick fights and Zulu traditional dances, as the genre represented and included all the culture that was in the cities of the time. The musicals were able to travel and utilise almost any venue. Importantly these musicals were created in much the same way as the workshop theatre, with the use of mime, song and dance, as well as non-realistic, sometimes grotesque, over-the-top performance styles.

Kente was especially well known for his use of a strong moral or political message forming the main theme of his plays. Other creators of township musicals imitated this didactic

tradition. Traditional forms of song and dance were also used to engage the audience's participation, and it was this technique that made Kente's work such a powerful and effective form of theatre.

2.8 Workshop theatre from political protest to HIV/AIDS

The development of workshop theatre during the 1970s was crucial. This period saw the rise of the Black Consciousness Movement. Workshop theatre was often termed 'Black Theatre,' (Hauptfleisch and Steadman 1984: 3, 140) which became the term given to theatre developed by and for the black majority. However, there were a number of white South Africans who participated in the creation of 'Black Theatre,' which included people from all racial and cultural heritages.

In 1971, Robert Kavanagh participated in the forming of **Workshop '71**, a company of mainly black participants who created plays such as *Survival*, a workshopped play that was highly challenging for white South Africans in true Black Consciousness style. Malcolm Purkey of **Junction Avenue Theatre Company** (1976), Athol Fugard and Barney Simon of the **Market Theatre** (1976) in Johannesburg were but a few of the white South Africans who were very strong influences on 'Black Theatre' (Fuchs 1990: 18). However, they were always equal stakeholders in each project, often working in areas of apartheid-segregated South Africa that placed them as privileged whites in positions of less power. Workshop theatre in the 1970s formed a platform for inter-racial political theatre that was to be known in the 1980s as 'Struggle Theatre,' 'Protest Theatre,' or 'Resistance Theatre.'

In the 1980s, two of Gibson Kente's actors, Ngema and Percy Mtwa, were involved in the creation of *Woza Albert!*. *Woza Albert!* showed very clearly the fusion that was taking place between indigenous forms of oral tradition and western theatre. It also had strong links with the Township Musical genre. The performance style of the piece could be compared to Grotowski's 'Poor Theatre', yet the performers, who were also the original creators, were able to give the play a unique South African flavour. Through their ability to improvise song, dance and situational narrative, the play was kept alive by including the audience as part of

the performance. As with Kente's work, the audience was not seen as a separate entity from the performance.

Other groups that found workshop theatre to be a good technique for expressing their problems, both political and work related, were the Workers' Unions (Fleishman 1990: 111). Worker Unions would use workshop theatre to voice grievances with their employees and to educate their fellow workers. However, as the apartheid regime began to crumble in the late 1980s the political motivations of workshop theatre became obsolete. Commenting on current forms of community theatre, a form of theatre that is synonymous with workshop theatre, Spitezok von Brisinski (2003: 115-116) suggests that the end of apartheid and the new democracy were not the only cause for the change of focus in creating theatre, but that "movements of urbanisation, globalisation and migration" also had an effect on the change of concept in the workshop theatre form.

After the days of the political struggle, workshoped forms of theatre became less popular because of the overt shift in focus. However, they were not forgotten. Groups such as Workers Unions were still using workshop theatre, and many people were still being exposed to the form (Gunner 2001: 179-183). It became popular for township youth to form theatre groups in the 1980s, as 'Protest Theatre' activists, especially after the success of *Woza Albert!*. One such group, **Woza Theatre Company**, is documented in a case study in this dissertation. Spitezok von Brisinski (2003: 118-121) names a number of community theatre groups that continued to create theatre after being founded in the 1980s. One such group, the **Sibikwa Community Theatre Project**, was created in 1988 in Benoni, Johannesburg, to address violence and the uncertainty that the youth were experiencing in what was a turbulent time. According to Spitezok von Brisinski (2003: 119), their recent productions have focused on "Khoisan history, water pollution, waste recycling, violence in the home and youth attitudes toward sexuality and HIV/AIDS." The group has also done outreach work with an aim to continue building and sharing theatre skills with underprivileged youth. Spitezok von Brisinski (2003: 120) also identifies 'township theatre' groups who used to work with 'Protest Theatre' and who now work in schools and community centres, producing plays and training young performers.

The aim of these theatre groups in the 1980s was to make theatre for their communities so that political messages could be communicated through community members who spoke the same language, knew the same colloquialisms and wanted the same objectives. Thus, after the political struggle, the same groups that were creating the 'Protest Theatre,' began to employ their skills for 'Theatre for Development,' 'Educational Theatre' and 'Corporate Theatre' for government and private industry. The township theatre groups were ideal tools for community developers, as they had the skills of communication that allowed the educators or developers access to the community (Davis and Fuchs 1996).

During the past fifteen years, most South African communities have been ravaged by the HIV/AIDS pandemic. The government and NGOs have worked extensively during the 1990s to find ways with which to communicate awareness and prevention of HIV/AIDS. Theatre and drama have proved to be a powerful and successful medium for this function, as companies such as **DramAide** (Dalrymple 1993, DramAide 1996 & 1997) and **Theatre for Life**² continue to create HIV/AIDS awareness countrywide. Theatres originally used for political theatre, such as **The Market Theatre** in Johannesburg, have been running HIV/AIDS programmes since the mid-nineties³ and former workshop theatre pioneers such as Ngema (*Woza Albert!*) have created plays using workshop and Township Theatre techniques, such as his controversial play *Sarafina 2*. Thus theatre groups continue to engage in workshop theatre, although it may have shifted in form and concept. However, considering the remarkable transformation that South Africa experienced it is understandable that a known 'cultural aesthetic' such as workshop theatre should undergo a change too, and as Spitezok von Brisinski (2003: 126) adds:

In the light of the transformations South Africa has undergone since democratisation, it seems relevant to conceptualise the conjunction of arts and community in new ways by looking at their symbolic function of creating meaning and developing identity, along with the interventionist functions of social and artistic engagement.

² <http://www.arepp.org.za>

³ See <http://www.markettheatre.co.za>, a Market Theatre AIDS project was initiated by Zakes Mda in 1996 and is still in practice according to their website.

In this dissertation I argue that the need to use theatre to create social change in the context of HIV/AIDS has seen the further development of the South African workshop theatre form, and that this new form continues to use contemporary symbols and meaning to engage with society through a known ‘cultural aesthetic.’

2.9 The workshop theatre form of the 1980s

Fleishman suggests:

... that the Greek Theatre and the tradition that derived from it in the West were systems of coercion and control (Fleishman 1990: 93).

Throughout this Chapter I have opposed the ‘carnival tradition’ and the ‘oral tradition’ to the Aristotelian form of theatre that has become standard in the West. However, I have not described the Aristotelian form and suggested why Fleishman considers it as a coercive and controlling form of theatre.

Greek theatre was constructed through basic rules that were recorded well by Aristotle in his *Poetics*, the most notable being the rule of the three unities. This rule determined the structure of a play, in which the time, place and action should be unified. In other words, the narrative within the play should take place within a day, the place in which the narrative is set should not change and the action in the play should develop through cause and effect.

Thus, the Aristotelian play would flow from beginning to end in chronological order, following the same pattern each time. A play would begin, the protagonist or chorus would be introduced in the exposition and the first action would take place. The protagonist would be given an incentive for leaving his/her normal life and would begin the adventure. Aristotle described the theory of causation, whereby each action played out by the protagonist would result in a consequence. During the plot of the play, the protagonist’s actions would result in many consequences, and towards the middle of the play, these would result in a climax at a moment of crisis. At the climax of the play the protagonist would undergo reversal of his/her fortunes (περιπέτεια or *peripeteia*) and his fate would begin to unravel after the

crucial moment of recognition (Ἀναγνώρισις or *anagnorisis*). The protagonist would then face a κῆρυξ or *catastrophe* of deep emotional and often physical consequence, at which point the audience would experience κάθαρσις or *catharsis*, or an emotional cleansing, because of the terror and pity aroused by the protagonist's reversal of fortune. Here, at what is called the dénouement, the narrative or plot would be unravelled and the play would end. The basic structure of the play was beginning, middle and end in chronological order. The formula for the plot and character development could be briefly described as: incentive/action/consequence (Fleishman 1990: 104).

This formula follows Aristotle's causation theory, which states that for every action there is a consequence. The incentive would be the protagonist being called into action, the action would be played out (normally this action was controlled by the gods, meaning that the protagonist did not always have freewill) and finally the protagonist would have to bear the consequence of his/her action. This formula, or the unity of action, would be played out over and over again through the plot of the play, as the unity of time would ensure that the play ran in chronological order in a specific time limit and the unity of place would ensure that the action all occurred in a constant place. This formulaic structure was encouraged by an audience who knew what they were going to see. It was much like watching sport in that there was a standardised set of rules that each play would abide by, and in ancient Greece there was even a winner selected at the end of the theatrical festivals.

Western theatre practitioners have persisted with this theatrical narrative structure because the Aristotelian formula is still popular for the same reasons as it was in ancient Greece, and for the very reason a sporting event is so popular, and that is because this form of theatre offers people a predictable form of entertainment. However, as with sport, popular entertainment that is controlled or enforced by rule is naturally coercive, and has a far higher possibility of being controlled by the state.

The structure of workshop theatre differs somewhat to this Aristotelian model. As I mentioned above, the structure of the workshop form can be compared to the European carnival tradition and that of indigenous African performance, both of which are oral traditions. The Aristotelian drama belongs to a literary tradition, and as such becomes

exclusive and structured in that literary theatre does not have the same liberties as oral theatre. Theatre of an oral tradition will remain in a constant state of change, using time and context to evolve its form rather than to predict it. The Aristotelian model can be seen in workshop theatre, but it is broken down in order to suit a far more flexible and fluid form of theatre. The structure of workshop theatre, according to Fleishman (1990: 104), is often described as episodic. However it is not episodic in the same way that Brechtian theatre might be episodic, as Brechtian theatre is also very much part of the literary tradition even though it has also broken away from the Aristotelian form.

In the *Poetics*, Aristotle makes reference to epic poetry as opposed to tragic poetry, or drama. Brecht utilised the 'epic' form to create what he called 'Epic Theatre.' The structure of Epic Theatre incorporated all that was in an epic poem. Brecht (1964: 37), describes the Epic Theatre as more involved in narrative than plot structure, episodic instead of linear, each scene for itself instead of chronological development etc. If the structure of Aristotelian plot development is described by Fleishman as incentive/action/consequence, then the Epic Theatre development could possibly be described as consequence/action/incentive/action/consequence/action and so on, as each episode would be developed to stimulate more action rather than consequence. Thus Brecht's theatre is in direct opposition to the Aristotelian dramatic form of the Three-Unities, as is workshop theatre, but Brecht's Epic Theatre is based on a literate European tradition and was developed for a 'modern' audience as opposed to workshop theatre which originates from an 'oral' society. However, there are many similarities that can be derived from Brecht's work that are relevant to this study of workshop theatre (see below).

The workshop theatre of the 1980s in South Africa followed a particular formula that Fleishman identifies in the following actions: infliction/defiance/consequence/action (1990: 104).

Infliction was the action that was normally carried out by the state, the apartheid government, usually represented by the police. In the next action, defiance, the oppressed people would normally take passive defiant action, such as the burning of passes, strike or protest. The police would again perpetrate the consequences of this action --- revealing the state as a

power that acts when threatened. The results of this consequence would often be catastrophic. The final action would be portrayed by the oppressed people acting out against the state, sometimes violently, sometimes helplessly, but always politically.

The workshopped plays would normally be devised through these actions. However, there was no school teaching this as a formula, for people were creating through observation and knowledge of oral tradition. The plays' actions would often take place in disorganized time periods. Huge time gaps could be skipped, or the action might return in flashbacks to the past. It was rare that the space, in which the narrative took place, remained constant. As such there was no beginning, middle and end, as in the Aristotelian drama, but rather the plays would unfold from a certain point, and end at another. The process would be circular and episodic, often with many small scenes creating the whole play. This structure is much like the structure of epic poetry, in that there is no beginning and no end and the flow of action is pieced together by formulas.

Workshop theatre is devised through group participation. To begin with there is no script, no written text. Fleishman describes the process in which participants go about devising workshop theatre as a three-step process (later, in Chapter Three, 3.3 and 3.4, it is described as a four and five-step process) observation, improvisation and then selection (1990: 100). Working together the group would share information, experience and together decide on what to perform. In the creation process no individual owns an idea, as all the information is shared knowledge.

As in Brechtian theatre (Brecht 1964: 26-28), observation is a key performance technique. The actors would then begin improvising the ideas of the group, impersonating scenes that they might have observed in reality. Many scenes would be created. The final step would be to select the scenes that could be used. This creation process influenced the structure of the plays, with the result that each scene could stand alone. Each scene was a narrative in itself. Therefore the whole play was a selection of various narratives, various improvised observations that together told a greater story. Within the play, the small scenes could and often were manipulated to suit different audiences, to accommodate changing situations and often simply to play for laughs. This meant that the theatre was alive; it was always able to

change, unlike the rigid structure of an Aristotelian drama. The actors who would have participated in the creation of the workshop theatre play would be skilled at improvisation and would use this skill through all the performances.

2.10 The function of workshop theatre for society and participant

Workshop theatre in South Africa has been used as a tool for creating social awareness, education and political propaganda by professional theatre practitioners, community practitioners, trade union groups and political organizations. Fleishman (1990: 110) describes three main functions that workshop theatre served in the 1980s in South Africa:

- *The popularization of the tradition on which the new structure of feeling is based;*
- *The use of workshop theatre to educate and mobilize the people;*
- *Workshop theatre as popular memory.*

The new ‘structure of feeling’ was the collective change of attitude that South Africans were experiencing during the 1980s. South Africans from all race groups began to realise that political change was inevitable and this new ‘structure of feeling’ was influenced by a number of factors, all of which workshop theatre plays were recording at the time. Workshop theatre was educating and mobilizing audiences, and is remembered for that reason today. In this dissertation I am interested in all of these functions. The struggle in South Africa is far from over. Many South Africans have benefited from the form of culture that workshop theatre has offered. It is a recognized tradition in South Africa; people generally respond to the workshop form with excitement and remember the past through the theatre that has survived.

However, now more than ever, workshop theatre can be used as a tool for education. Now more than ever the people of South Africa need to be mobilised into action. HIV/AIDS is killing people through ignorance, fear and oppression, which also affected the people of South Africa under the apartheid regime, but now there are far more casualties. Theatre needs to politicise the issue of HIV/AIDS. If the theatre created today only serves as a memory for our time, but does not contribute to creating change, then Fleishman’s third function has little

meaning. This personal change experienced by the participants and performers often means that there is a far greater chance of causing the audience to change. Fleishman goes on to describe the benefits to the participants of workshopped plays in the 1980s, using a hypothetical Workers' Union play as an example.

- *A sense of pride and dignity arising from the understanding that their story is important and that they are able to tell it in such a way that the other people respond positively to it;*
- *An increased self-confidence which helps in later worker management negotiations;*
- *A sense of solidarity and a new sense of identity. The unity of the players and their call for the unity of workers at the board level;*
- *A space where suppressed desires, like the desire to hit the foreman or manager, can be played out vicariously;*
- *An understanding of their history as an exploited class and a exploration of their resistance to that exploitation (Fleishman 1990: 111).*

Making these five points pertinent to any participant in the HIV/AIDS play is not difficult. There still exists an oppressed class in South Africa. If the above mentioned worker was suffering from HIV, then a different form of oppression would emerge. The oppressive politics that exist in South Africa at present are evident in the way in which the South African government has dealt with the HIV/AIDS pandemic. According to AVERT⁴ the South African government's history of denialism and misinformation about HIV/AIDS, and the inability of the South African government to produce antiretroviral drugs, has caused the people of South Africa much harm. UNAIDS⁵ statistics estimate that about five and a half million South Africans are infected with HIV and that approximately half a million people have already died from AIDS related illness. The number of people dying from AIDS related illness is rising rapidly; as UNAIDS estimate that only 21% of HIV infected South Africans are receiving the successful antiretroviral treatment. The South African government only

⁴ <http://www.avert.org/aids-south-africa.htm> (May 2007) Avert describes the biggest problem in South Africa as the South African Governments' failure to act on antiretroviral treatment for HIV/AIDS.

⁵ http://www.unaids.org/en.Regions_Countries/Countries/south_africa.asp (May 2007)

managed to create a treatment programme in 2003, and the Treatment Action Campaign (TAC),⁶ an NGO that has a critical stance against the government, has achieved much in changing government policy through exposing the South African situation to the international community. The government has now put in place better policies,⁷ and their attitude towards HIV/AIDS has improved considerably in the past few years, but it is still to be seen how effective their new policies are.

Used in the creation of HIV/AIDS theatre, workshop theatre has once again proved invaluable for creating social awareness and for attempting to create change. People who participate in creating stories through the workshop form are at the same time recording their stories, adding meaning and pride to their lives. This could build confidence and inspire the participants to make positive changes in their own lives. In the next chapter I show how the workshop theatre process enables the positive change of the participants and through the discussion of selected forms of educational drama and theatre, I argue that participants' involvement in the process of a workshopped play influences the audience's response to the play as a force for social change.

⁶ <http://www.tac.org.za/> (May 2007)

⁷ <http://www.doh.gov.za/docs/hivaids-progressrep.html> (May 2007)

CHAPTER THREE: THE PROCESS OF CREATING WORKSHOP THEATRE FOR THE HIV/AIDS PLAY

3.1 Introduction

Workshop theatre serves, as I have described in Chapter Two, as a highly successful collaborative method of devising theatre, recording history and providing a socio-political awareness, and hence a voice, for the oppressed. Workshop theatre also has a strong heritage in South Africa and is a widely known ‘cultural aesthetic.’ In this section I analyse the process of workshop theatre. Given my focus on HIV/AIDS, I demonstrate the process of creation through existing educational theatre models. If apartheid era workshop theatre was political in its motives, then HIV/AIDS theatre is educational. However, I am not separating education and politics. This dissertation aims in part to show the similarities of style and motive in anti-apartheid ‘Protest Theatre’ and HIV/AIDS theatre.

Foucault argues, in an essay on the eighteenth century French health systems, that the political importance of a healthy nation is second only to the power a government wields over its people through war and peace. He argues: “...the health and physical well-being of the population in general is one of the essential objectives of political power” (Foucault 1980: 170). In this section I will argue that the educational motivations for the creation of HIV/AIDS Theatre are political. I will argue that just as theatre is essentially political in nature, so is education; and that theatre and education together serve as a successful political tool.

Boal’s *Theatre of the Oppressed* serves as the most relevant account of how education and politics meet through theatre. Boal will thus serve as a primary theorist and practitioner in my argument; however, other educational theatre models will also be described in order to gain a fuller understanding of the choices made in the case-studies described in this dissertation. It is my belief that there can be no set models for creating theatre for the purposes proposed in this dissertation, as the nature of social and theatrical context are never constant. Thus what I describe is a collaboration of pedagogies and techniques that aim to show how the process of workshop theatre can create political change through making the participants of a workshop

play aware. If, as Foucault says above, that health is “...one of the essential objectives of political power,” then creating awareness of health should an essential political goal.

3.2 The pedagogy of HIV/AIDS and workshop theatre

On the topic of health and political power, Foucault states: “The imperative of health: at once the duty of each and the objective of all” (Foucault 1980: 170). This conclusion is relevant to the HIV/AIDS pandemic, especially here in South Africa. Although there are major governmental problems, (see section 2.10) it is the primary duty (and right) of every person to maintain his or her good health.

Unfortunately, due to political scars from the past and the size of the population, many South Africans live in poverty and do not have basic resources, and according to UNAIDS⁸ 31.1% of South Africans live below the \$2 per day breadline. As such, it is difficult to assume that this sector of the population is able to maintain good health without proper nutrition and basic resources. According to UNAIDS⁹ approximately 39.5 million people around the world are living with HIV/AIDS, with 24.7 million of those in Sub-Saharan Africa. From the UNAIDS statistics it is evident that HIV/AIDS is dominant in the Developing World and that HIV/AIDS is a pandemic that has struck most severely within the poverty stricken communities. HIV is a virus that attacks the immune system, and thus poor hygiene and poor diets are escalating the pandemic dramatically. HIV in South Africa has its highest infection rate through heterosexual sexual intercourse and general sexually transmitted infections (STI's).¹⁰ The fact that HIV is in itself a STI adds another issue to that basic health principle, and that is the moral dimension of sex and sexuality. In short, although the government needs to claim more responsibility for the pandemic in order to keep the population alive and well, it is up to each individual to ensure that they do not become dependant only on government or only their community and family. This is a political problem that needs to be resolved

⁸ http://www.unaids.org/en/Regions_Countries/Countries/south_africa.asp (May 2007)

⁹ http://data.unaids.org/pub/EpiReport/2006/02-Global_Summary_2006_EpiUpdate_eng.pdf (May 2007)

¹⁰ http://www.unaids.org/en/Regions_Countries/Countries/south_africa.asp (May 2007)

through the state. However, this problem also needs to be resolved through the awareness of each individual.

With reference to health systems, Foucault describes two fundamental aspects to maintaining a healthy population. The first being the power held by the family.

The family seen as a narrow, localised pedagogical apparatus, consolidates itself within the interior of the great traditional family as alliance (Foucault. 1980: 173).

The nuclear family Foucault describes as the traditional family has been through much change, especially here in South Africa, because of mass urban migration and the decimating affects of HIV/AIDS. For the sake of this discussion I will define the traditional family in South Africa as those who live in the same home and depend on each other for daily bread.

Foucault suggests that it is families that can provide the basic awareness and guidelines for good health. However, one should also consider all the factors that influence the traditional family, such as religion or cultural tradition, community moral values, such as *uBuntu* or the traditional importance of the community as a family, and social structures and resources available for the community.¹¹ In this latter sense government can determine the ability of the family to provide good guidelines for healthy living, as the government is responsible for providing communities with basic needs.

However, the government is not directly responsible for how the family structures its own pedagogy, morality and value system, although the influence of the government could ensure that families and communities were able to live healthier lives. For example, in the case of South Africa and HIV/AIDS (Nattrass 2004: 169-172) the dissolving of traditional family structures has caused moral decay, and although this change in the structure of the traditional family can be blamed partly on colonial rule, mass urbanisation and more recently HIV/AIDS, the government cannot control the way in which families structure themselves now. And yet because of the collapse of the traditional family, the new family structure (for

¹¹ Ubuntu is the traditional South African term given to a system of social living whereby the community looks after each other as an extended family, but it simply means 'humanity' (Lodge 2002: 10) or the 'consciousness of belonging together' (Lodge 2002: 231).

example, grandmother or child headed households) is less able to provide a consistent “localised pedagogical apparatus.” In other words South Africa faces a complicated problem in the most basic of human institutions, that of the family; and part of my aim in each of the plays studied in this dissertation is to challenge how people within the same family, institution and community construct their own pedagogy of HIV/AIDS.

The second route to maintaining a healthy population is completely state-controlled. That is what Foucault describes as “the privilege of hygiene and the function of medicine as an instance of social control” (Foucault 1980: 177). According to AVERT¹² and TAC¹³ this is the defining political argument of HIV/AIDS awareness in this country. Where is the consistent rollout of quality anti-Retrovirals (ARVs) that could be saving lives? Who has access to these drugs? Where are people going for testing, treatment and finally - death? How much control does the government have over the resources HIV/AIDS affected people need? These are some of the questions that are being asked of the South African government that remain unanswered. It is therefore necessary to continue to challenge the government on these issues, to politicise their failure to save lives. However, I do not believe that it is within the hospital that the HIV/AIDS pandemic will be resolved. I believe that it is within the individual. If the government is able to create a more successful health system, a system that all communities have access to, then communities will be one step closer to having the power to care for their own health properly. If the government uses the health system to create dependencies for the community, then the community’s own pedagogy of hygiene will be meaningless. For instance, the hospital of today is very similar to the hospital Foucault describes in eighteenth century France:

The point is that in relation to these new (sic) problems the hospital appears in many respects as an obsolete structure. A fragment of space closed in on itself, a place of internment of men and diseases, its ceremonious but inept architecture multiplying the ills in its interior without

¹² <http://www.avert.org/aidssouthafrica.htm> (May 2007)

¹³ <http://www.tac.org.za.html> (May 2007)

preventing their outward diffusion, the hospital is more the seat of death for the cities where it is sited than a therapeutic agent for the population as a whole (Foucault 1980: 177).

Hospitals and clinics may then symbolise an oppressive fear especially in this time of HIV/AIDS. I'm by no means targeting these resources as problems, but merely suggesting that although the state needs to be challenged that I believe the focus in theatre should be to mobilise the individual. So although theatre should look critically at the government, it is my belief that in the particular problem of HIV/AIDS, the individual carries a shared responsibility.

What I aim to show through theatre is that the home is the hospital, the family the pedagogy and the individual the only person capable of making choices for his/her own life. I illustrate this through the examination of the narrative that was created in the workshop process of the four plays that are the case study. I show that the participants of these particular theatre workshop processes have the opportunity to construct their own pedagogy and their own understanding of how good choices can prevent death through creating their own narrative. However, in order to understand the process of the participant, it is important to understand the pedagogy of the researcher.

Freire (1972, 1973, 1978, 1985, 1998) describes pedagogy and systems of learning that best define the intensions of this dissertation and the theatre that is documented within it. Freire (1972) revolutionised educational ideology, theory and practice through the *Pedagogy of the Oppressed*. A possible influence of the South African Black Consciousness movement that strove to create social consciousness around the oppressive nature of the white minority rule in the 1970s and the consequent black majority suppression, Freirian pedagogy defined a critical consciousness, or a need for society to challenge oppressive forces constantly. Critical consciousness, according to Freire (1973: 44), "is integrated with reality;" whereas "naïve consciousness superimposes itself on reality; and fanatical consciousness, whose pathological naïveté leads to the irrational, adapts to reality." Or rather, "critical consciousness represents things and facts as they exist empirically." Creating this form of consciousness is essentially what HIV/AIDS education strives for.

In the oppressive apartheid regime creating critical consciousness was largely conducted ‘underground’ by banned political movements because South Africa was not yet a democratic state. Since democracy, as discussed in Chapter Two in the context of workshop theatre, there has been little opposition to the new South African government. However, democracy in South Africa is still in its infantile stages, and the masses are still adjusting to our new way of life, and many forms of oppression still exist. Freire describes human development as a process, and in the same way suggests that societal development is a process that takes time and goes through many stages. In the context of democracy, Freire (1973: 41) goes on to suggest that there needs to exist a “democratisation of culture” to achieve a “democratic mentality” in order that the previously oppressed become true members of the democratic state. In South Africa it is currently possible to see how the new elite have grossly abused their new positions as they negotiate the benefits of the democracy. It is also possible to see how HIV/AIDS awareness has been strategically controlled by governmental organisations, possibly and most likely for financial gain. Freire (1973: 14) describes the elite and the way in which they utilise this new democracy:

The elite defend a ‘sui generis’ democracy, in which the people are ‘unwell’ and require ‘medicine’ --- whereas in fact their ‘ailment’ is the wish to speak up and participate. Each time the people try to express themselves freely and to act, it is a sign they continue to be ill and thus need more medicine. In this strange interpretation of democracy, health is synonymous with popular silence and inaction. The defenders of this ‘democracy’ speak often of the need to protect the people from what they call ‘foreign ideologies.’

The analogy of health that Freire uses to describe the way in which the ‘elite’ treat the ‘people’ is an ideal example for this dissertation in the context of HIV/AIDS and education. If South Africans had continued to be silent on the issues of HIV/AIDS treatment and government policy there is little doubt that the current changes would not be happening,¹⁴ and the constant denial of the pandemic by leading politicians¹⁵ would have continued. African

¹⁴ <http://www.tac.org.za/> (May 2007). See: TAC and new Government policy on treatment

¹⁵ Mbeki and HIV/AIDS denial political motivations as described by Lodge (2002: 255-265)

democracies have been responsible for generating a lot of misinformation around HIV/AIDS,¹⁶ and often the blame is placed on ‘foreign ideology.’

Therefore, the ‘democratisation of culture’ is created through the generation of ‘critical consciousness’ that needs to be adopted by the oppressed and used by them to transform their oppressive situation. However, this transformation can only be achieved by the oppressed through their own knowledge of their own situation. As an educationalist Freire was primarily interested in the process of learning as a process of generating ‘critical consciousness,’ and he believed that learning needed to be a democratic process in order to achieve the ‘democratic mentality.’ Freire (1978: 48) describes the democratic method of learning as being “not top down – but inside out;” in other words, that the ‘teacher’ was not the authority, but rather that the experience of learning was a shared experience between all involved, or:

If the dichotomy between teaching and learning results in the refusal of the one who teaches to learn from the one being taught, it grows out of an ideology of domination. Those who are called to teach must first learn how to continue learning when they begin to teach.” (Freire 1978: 9)

This dissertation is not concerned with the teacher as such, but rather with the process of sharing knowledge through the process of creating theatre. However, it is possible for the ‘teacher who refuses to learn’ to exist in theatre in many forms, such as the author, the director or the facilitator. The primary pedagogy in each of the workshopped plays described in this dissertation was essentially democratic, aimed to create ‘critical consciousness’ within their respective audiences and were created in processes of shared learning. It is perhaps the concept of shared learning and democratic process that is most critical to this dissertation. Freire (1978: 49) describes the shared experience as the ability “to identify learning content

¹⁶ <http://www.avert.org/aids-south-africa.htm> (May 2007)

with learning process,” and thus the content and process shared equal importance in the transformation of each participant.

It is my aim to show that through the participant’s process of creating their narrative and the acknowledgment of their choices in the workshop theatre process, that the participants are able to transform or develop their knowledge, and therefore there exists more chance of the people in the audience changing their knowledge and possibly even transforming their behaviour. It is this process of transformation, or what Rasmussen and Wright (2001) call “learning how to know,” that makes the workshop process analogous to educational theatre.

3.2 Educational theatre and the workshop theatre process

*... aesthetic practice is a possible way of knowing for all people in most societal contexts. In order to grasp this potential, we need to deconstruct both the concepts of "Aesthetic" and "Education" to find new ways to organize what we shall label a **cultural-aesthetic** and **playful education**.* (Rasmussen and Wright. 2001)

Rasmussen and Wright describe the terms “cultural-aesthetic” and “playful education” when discussing the value of the theatre workshop space as a place of learning. Theatre, they surmise, is widely seen as a source of entertainment rather than education. They describe the “cultural-aesthetic” as a culture’s general understanding of the arts. For example I have described workshop theatre in South Africa as being a culturally known aesthetic, a form of art that is widely known and appreciated by a large percentage of the South African population. Although workshop theatre is remembered as a socio-political genre that was used for creating anti-apartheid consciousness rather than as an educational form of theatre, the entertainment value of Protest Theatre or Struggle Theatre remains in the memory of those who experienced it. Therefore, by using forms of workshop theatre to create educational theatre, thus bridging the gap between a known “cultural-aesthetic” and “playful education,” as in the HIV/AIDS play, educational theatre meets workshop theatre.

Educational theatre is probably the broadest term that can be used to describe the many forms of theatre and drama whose primary function is that of education. In this dissertation, I have

named five forms of theatre and drama that have been used as educational tools, namely: Theatre of the Oppressed, Theatre for Development, Campaign Theatre, Theatre in Education and Drama in Education. Together these five forms of educational theatre will contribute to developing an understanding of the theatre workshop process.

The Theatre of the Oppressed (TO) was developed by Augusto Boal (1979, 1992, 1995 and 1998) and incorporates many methods, such as Forum Theatre, Image theatre, Cop in the Head and a number of others in the Rainbow of Desire techniques. The Forum Theatre creation process is a good example of the workshop theatre process with aims to 'change' or create 'critical consciousness' with its participants. Theatre for Development (TFD) incorporates a number of techniques, often including TO techniques, and is generally the term given to theatre used to educate, communicate, empower and develop semi-literate rural communities that are of oral tradition. In the section on TFD examples from Byam (1999), Kavanagh (1985, 1997) and Mda (1993, 1998) help to construct a model of communication and describe a creation process that can also be compared to workshop theatre. Frank (1995) defines Campaign Theatre (CT) as TFD that is determined by a particular campaign, and as Frank's case studies are based in Africa and are HIV/AIDS related, they serve as a good example for this dissertation.

Jackson (1993: 1-6) provides clear definitions for Theatre in Education (TIE), as theatre that is performed for children by actors using traditional theatrical techniques, but that incorporates audience interaction as a vital part of the learning process. O'Toole (1992) and Jackson both describe the process involved in creating TIE, and this process helps to construct the educational process that participants encounter in the workshop theatre creation process. Morgan and Saxton (1987: 1) define Drama in Education (DIE) as classroom based dramatic learning that uses theatrical techniques such as role playing to educate, and does not include any theatrical event from outside of the workshop space. DIE offers further insight into the relevance of game playing, character development, narrative development and role-playing in the workshop theatre creation process. Most importantly, TIE and DIE show the process of 'learning how to know' that the workshop theatre participant experiences in the creation of a play.

Theatre is a highly successful tool for communicating in oral societies. Zakes Mda (1993, 1998) provides excellent models to assert the effectiveness of theatre as means of communication in southern Africa. Using South Africa and its neighbouring countries as examples, Mda describes the qualities of an oral society (Mda 1993), and shows that although forms of media are now more accessible than ever, theatre remains as a highly effective tool for communication in South Africa. Educational theatre and drama have been used for communicating messages to people in South Africa since the arrival of missionaries (Kavanagh 1985, Fleishman 1990), and although there is no accurate documentation, the indigenous peoples of southern Africa certainly used forms of performance, before the arrival of Europeans, to communicate important information. In the section on workshop theatre I described how South African workshop theatre was heavily influenced by these indigenous forms of performance (see section 2.3), thus adding value to the use of workshop theatre as an effective method of communication in South Africa.

In this section I aim to show how models used for creating educational theatre can act as good examples for the process of creating workshop theatre. Thus my argument on whether theatre is supposed to entertain or inform or educate comes full circle, from the point of indigenous theatre that both entertained and informed, to the role that apartheid Protest Theatre played in creating critical social consciousness and finally to the workshopped HIV/AIDS play. To understand this connection it is important to study the form that educational theatre might take and compare the useful elements of process in the deconstruction of “*playful education*” and “*cultural-aesthetic*.” Beginning with a description of the workshop theatre process, the following sections illustrate the similarities between educational theatre process and workshop theatre process.

3.3 The workshop theatre creation process

According to Fleishman (1991: 70), one of the fundamental elements in initialising the workshop theatre process is the element of collectivity, or the group nature of the workshop process. In other words, unlike scripted theatre where an individual such as the director may choose the play, cast the actors and work to fulfil his own subjectively imagined theatrical concept, in workshop theatre the group would make these decisions collectively. In this section, the process of creating workshop theatre is defined in a four-step process, described by Fleishman (1991: 74) as:

- Group work and learning how to play;
- Observation;
- Presentation;
- Selection.

The group thus initialises the process of creating a workshopped play, and in a sense the group also defines the creation process. However, the nature of the workshop theatre group is not always a homogeneous entity. Its members determine the nature of each group, and if those members differ in ways such as age, gender, race, social status, political or religious affiliation, the nature of the group will be affected. Some of the problems that affect the homogeneity of the workshop group are named in this dissertation title and are discussed further in the case studies with examples. Every group will to some extent be affected by the members involved, and for this reason the process of creating the workshopped play begins with group work.

Barker (1977), Johnstone (1979) and Boal (1992) provide good examples of techniques to initialise the theatre workshop process. Most of these techniques are games. Barker (1977: 63) describes playing games as “the process of learning through experimentation.” He goes on to describe the physical process of development that a human child encounters when his/her body becomes physically independent. Through the process of crawling for example, a child is learning about the space that is the floor, and the child is learning how the floor limits his/her movements or what alternative possibilities the floor offers. This process of

learning through experimentation, according to Barker, ends during adolescence and is replaced with inhibitions of what is possible that limit the young adult. Barker (1977: 65-66) describes some of the objectives of games for the adult performer:

- To reveal something of the actor's movement problems and possibilities;
- To lead the actors to physical experience and sensations that they could not find directly;
- To initiate in the actor a process of self-awareness and discovery;
- To create a shared body of experience which one uses to build up relationships within the group and to develop the ensemble;
- To create a common vocabulary based upon shared experience with which to discuss the process of human action and interaction and the work of the actor.

Learning how to play games thus helps to solve a number of the problems that the group may initially experience. Games are effective for a number of other reasons. Firstly, the act of playing a game suggests childish behaviour and, unlike children, most adult actors are inhibited when introduced to a new group, not only because of the physical inhibitions as Barker describes, but because of differences such as age, gender, race, social status, political or religious affiliation (random examples named above). However, through learning how to play again, games can help the actor remember that child self both physically and cognitively and begin to break down any inhibitions. Secondly, games stimulate both the body and the imagination and help the actors focus both intellectually and physically, thus preparing them for the workshop creation process. Thirdly, games are a controlled form of expression, with boundaries and rules that help to construct the workshop process into a safe space of trust and sharing. In my opinion, games are most effective when they are well controlled and incorporate collaborative and democratic ideals so that performers are not only aware of themselves, but are able to acknowledge and show sensitivity towards the other performers in their space. Simply, the act of playing games, or learning how to play, prepares the group for the workshop process, and as Barker states, creates an ensemble.

Brecht describes a technique of actor training called the 'Alienation Effect' that depends on a form of observation that relied on a critically conscious actor.

This technique allows the theatre to make use in its representations of the new social scientific method known as dialectical materialism. In order to unearth society's laws of motion this method treats social situations as processes, and traces out all their inconsistencies. It regards nothing as existing in so far as it changes, in other words is in disharmony with itself. This also goes for those human feelings, opinions and attitudes through which at any time the form of men's life together finds its expression. (Brecht. 1964: 193)

In order to 'represent' or imitate society objectively, an actor needs to learn how to observe his/her environment as an ever-changing situation. This is not achieved through emotional, opinionated or attitudinal observation, but rather through objective and informed observation. Brecht (1964: 121-129) describes the importance and function of this form of observation as an acting technique most clearly in his analogical description of 'The Street Scene.' For the actor to properly imitate any given situation he/she needs to be able to consider the situation from an informed and objective perspective. 'The Street Scene' simply describes an accident that occurs on a street corner. Each witness is asked to retell the story, and each witness has a different objective. The victim will have one story, the driver another, and each witness will have their own versions described from their subjective perspective. The collection of difference of opinion is objectivity. If an actor re-enacts this scene he/she would need to consider such things as the social significance of his/her character in the context of the scene. Brecht also offers suggestions of exercises to stimulate the actor's ability to observe objectively (1964: 129).

However, in the context of the workshopped play, the process of observation needs to begin before rehearsals of any scene. This implies that the actor needs to be critically conscious. To initiate the workshop process the actor needs to conduct research, be able to share lived experiences and have the skill to perform remembered observations. This process often begins with the process of choosing what the focus of the play should be. For example, in the creation of *Carpe Diem*, a case study in this dissertation, the process of deciding what the central aim for creating a play and what the central theme of the play was to be took weeks.

In this stage of the creation process stories are shared, ideas are exchanged and societal observations are described.

When the central theme and fundamental concept for the play has been decided, the group participates in collaborative and individual research. This includes reading relevant literature (if the actors are literate), gathering information from whatever form of media are most relevant and interviewing, interacting and observing people and societal behaviour relevant to the topic. Observation is the most important part of the research, and in the same way research is the most important part of observation. Barker (1977: 55) describes observation “as the ability to see objectively,” and suggests that this is achieved through research and reflection. Barker states further that the actor should be aware of what must be done, rather than conscious of what he/she must do, and that this can be achieved through the process of ‘doing’ and watching other people ‘do.’ Observation, according to Barker, entails analysis and re-synthesis. It is difficult to argue that any such observation is ever really objective, especially when given the nature of the research¹⁷, so perhaps Barker’s observational idealism is not completely realistic. But as Brecht (1964: 121 - 129) correctly suggests, to gain knowledge the actor must observe, but without knowledge he/she cannot observe.

The presentation could take the form of a discussion or a description or a written narrative, but the most effective method of expressing understanding is through improvising the observations. The group improvise the material derived from the process of observation and perform them as a presentation for each other. Johnstone (1979: 109) suggests that before beginning improvisation it is important to make the performers conscious of the implications of the scene they choose to play. The group, having already gone through the process of playing and observation, are an ensemble ready for performance and to present their work to the group. At the point of the presentations the group become actors and need to incorporate both play and observation in their improvisations. Thus, by introducing consequence to the improvisation, tension is added to the process as an important element of theatre.

¹⁷ Take the research methodology of this dissertation for example; Chapter Two describes the subjective nature of researching people, behaviour and action.

The improvisations can take many forms and are a combination of playing and performance. Peter Brook (1968) describes performance as representation; therefore the improvisation could be seen as the initial presentation that is re-presented through performance. In the case studies described in this dissertation improvisation is used to create new songs, monologues, dialogues, physical theatre sequences, symbolic images etc., and each play was completely influenced by improvisations. According to Johnstone (1979) there are a number of important considerations that the performer needs to incorporate in order to give his/her improvisations depth. These include an ability to understand and manipulate status, an ability to act spontaneously and an ability to construct good narrative.

However, in my opinion it is best to divide the improvisation into two sections. Firstly, the actors take their observations and work alone, playing with ideas and experimenting with their content. Then secondly, a space in the rehearsal room is allocated as a sacred performance space. Brook (1987, 1993) defines this sacred space and describes the importance of having a ritualised space for the performers to respect. This is where the actors present their work to the group as a whole. This sacred space is not only for polished and complete work, but is also a space of improvising, playing and experimenting. It is sacred because the actors need to be aware that what they are presenting is not for themselves, but for the whole group.

Then in the final part of the workshop creation process, the group chooses what material they are going to use. This process of selection can be democratic and homogeneous, but is often decided by the director. In the four case studies in this dissertation the researcher and director was the primary selector of material, although each group were responsible for the material created and needed to agree with what was selected. In other words, the group owns the material and thus has say over what is selected. However, in my opinion, to have a single selector provides a more focused outcome for the finished product, and it is through this opinion that the subjective influence of the director, and in this case the researcher, is exposed.

Once the material is selected the script begins to take shape. The script that I refer to is not necessarily written, and in the examples discussed in the case studies, only two of the scripts

were completely written. The script I refer to is the collection of material put together to achieve a theatrical structure. It is at this stage where I believe it critical for a single director to assume control. From the point of selection the material needs to be focused and guided towards the initial aims of the group. A single person best achieves this.

3.4 The Theatre of the Oppressed and the process of creating Forum Theatre

Augusto Boal (1979, 1992, 1995, 1998) is a Brazilian politician and theatre practitioner, who in the 1950s and 1960s began developing a form of theatre that has become known as Theatre of the Oppressed. His aim in working with Theatre of the Oppressed was to deconstruct the traditional theatrical boundaries by bridging the gap between the audience and the actors. Working with similar pedagogical objectives as Paulo Freire (1972, 1985, 1998; cf. Jurmo 1985), Boal's Forum Theatre aimed to mobilise the oppressed majorities of Brazil into working towards changing their situation, by helping them to act out the problems around them and by getting spectators to become actors, acting out solutions to their oppression.

Boal's aim was for people to be able to name their own problems, as he believed that education is not only the act of informing people, but also that all people carry knowledge that needs to be shared and expressed democratically. Boal's models serve as important references for understanding the design of a particular educational play. He has developed many forms of theatre such as Image Theatre, Forum Theatre and also Legislative Theatre [that is a good example of his methods of provoking adults into action through using Agitative Propaganda (agitprop) methods], which have proved successful within the context of HIV/AIDS theatre (Frank 1995). However, I have chosen to use what Boal has named his 'anti-model' for Forum Theatre, and in this section I will describe and discuss the form and process of creating Forum Theatre.

In this dissertation, the focus on theatre is not aimed at the product (or theatrical production), but rather at the process. Theatre of the Oppressed in its many forms provides good platforms for understanding the process of creating theatre. Boal's political and pedagogical motivations are also very relevant to this dissertation. Essentially from a Marxist standpoint, Boal's intention with his theatre was to create an inclusive form of entertainment with strong

political and pedagogical motivations. Paulo Freire provided Boal with a solid pedagogical platform, and the work of the two can be closely related (Boal 1979). In order to empower the spectator Boal broke down the conventional theatre structure by allowing audience members to comment on and even recreate the action on stage. Boal referred to the spectators as *spectators*. In other words, there was to be no separation between actor and audience.

Another element that Boal played with was a role he called the *Joker* or *difficultator*. Much like a director in a rehearsal process, the *Joker* plays the devil's advocate and facilitator by manipulating the *spectators* into responsive and active roles. He thus plays a provocative role, guiding the audience past the boundaries created by their learnt understanding of Aristotelian drama (or their possible understanding of theatre as their “*cultural-aesthetic*”). However, before the *Joker* can provoke the *spectators* there needs to exist a ‘well-made’ play.

Boal (1992: 224-247) describes many positive and negative qualities that may occur in the process of both creating and performing Forum Theatre. Through this criticism we are able to derive a basic model for creating a ‘well-made’ Forum Theatre play. Baxter (2003¹⁸) illustrates this process through a graph and a list of Forum Theatre rehearsal techniques. This creation process follows a similar four-step structure to that described by Fleishman (see section 3.3) and included, as a fifth-step, is the creation of the play:

- Group work, games and exercises (Boal 1992);
- Theme, a story (individual, modified or a collective narrative);
- Embryo/core, or the ‘Chinese crisis’;
- First improvisation of story;
- Play’s creation, presentation and rehearsal techniques;
- The forum.

As in workshop theatre, the group defines the outcome for the reason of the Forum Theatre creation process. According to Baxter (2005: 130) “the model is defined by the groups context,” and so the Forum Theatre model adapts to the group and will be different for each

¹⁸ See appendix: Notes on Boal

Forum Theatre intervention. The group is gathered for a purpose that is either predetermined by a social or political problem, or the group identifies a problem. Once again, it is the group who are the primary decision makers, not an external individual. Or as Baxter (2005: 130) suggests, “the creation of the Forum Theatre model with spec-actors should be taken from subject matter that arises from the social reality of the group or community.” The games and exercises thus provide the same function as they do in the workshop theatre process. As a starting point, Boal’s (1992) numerous games and techniques help to build trust and establish working rules.

Determining a theme for the Forum Theatre play is similar to the process of ‘observation’ in the workshop theatre process. In this part of the process the group shares stories with each other and together they choose which one is most relevant to their situation. It could be the story of only one participant, or a story that the group has modified, or a story representing a shared problem made up from several different accounts within the group. It is important that the story revolves around a problem though, because the point of the forum will be to debate a problem so that the *spectators* can work towards trying to solve it.

The next section begins to develop the embryo or core of the story. Two main characters are needed, a protagonist who will face the problem, and an antagonist, who sets up conflict of wills with the protagonist. This conflict leads to a ‘Chinese crisis,’ or a moment of danger and opportunity. Finally, the core of the story reaches a catastrophe, at which point in the actual forum the *joker* or *difficultator* would end the action so that the *spectators* have the opportunity to attempt to solve the problem and hence avoid the catastrophe. Keeping in mind that the catastrophe needs to be a ‘solvable’ problem, the core cannot lead to what Boal terms ‘a gun to the head’ scenario, but it should rather be a realistic situation that is defined by the ‘Chinese crisis’ and incorporates both danger and opportunity.

The first improvisation of this story needs to be conducted soon after the story itself is established. Without too much discussion the group simply acts out the story. Following the first improvisation, the group performs the story silently or ‘plays to the deaf,’ which is a good method of simplifying the initial improvisation. After playing to the deaf the group ‘huddles’ and reflects on what they need to include for the story to be as clear, simple and

accurate as possible. In the next step the improvisations are performed again. The group then makes final suggestions and the creation of the play and rehearsal process begin.

After the core story is established, Boal's rehearsal techniques (Boal 1992: 211-223; Baxter 2003¹⁹) are used to begin shaping the improvisation into a piece of theatre. As the final part of the creation process, these techniques help to develop both the plot and the characters. Introspective techniques such as 'cop in the head' help the actors to establish where the problem lies, and whether it is a personal problem that can be solved or a social problem that needs to be solved. Techniques such as 'Image Theatre' help to create visual stills of simple problems that enable the actors to see the problems symbolically and physically.

The forum is the process of solving any problems in the play as the *difficultator* pushes the *spectators* to avoid magic endings. This process is also very relevant to the rehearsal process of the workshop play. Baxter (2003: appendix) names eight points to consider when facilitating a Forum Theatre play:

- Joker and Model;
- Maieutic (Socratic questioning);
- Ascese (from the particular to the general, dropping to the universal);
- Replacements;
- Loch Ness;
- Blocking out;
- Solidarity, Resonance, Analogy, Identification;
- No magic.

The relevance of the relationship between the *Joker and the Model* can be compared to the director and the workshopped script. The workshopped script is not ever a concretised entity, but rather needs to be constantly controlled by the director to ensure that it remains relevant and alive. This is achieved through the *Maieutic* or Socratic questioning, a process whereby the director pushes the participants of the workshopped play to question each action that they choose to make, and even each move that the director asks them to make. The process of

¹⁹ See appendix: Notes on Boal

questioning is essential to the democratic nature of the play. However, this process needs to be controlled by the director, and can often lead to chaotic and time consuming rehearsals that achieve little physical work if not directed firmly. Once again it is clear that the role of the director is never an objective or even democratic role, and will always be influenced by subjectivity.

3.5 Forum Theatre and the workshop theatre process

All the steps of the workshop theatre creation process are comparable to the creation of Forum Theatre. Games are played to build group trust and prepare the participants for the collaborative process. The process of ‘observation’ in the workshop theatre process could be compared to the process of choosing a theme and a story, and the process of establishing the embryo or core of that story. The first improvisation and the rehearsal techniques used in the plays creation are both forms of ‘presentation.’ The process of selection has the potential to exist throughout both the Forum Theatre and workshop creation process. The group are the primary selectors of material in both examples. In Forum Theatre the selection process begins during the sharing of stories and is most apparent in the first improvisation. In the workshop process the group is constantly selecting material, but selection is also most apparent after the presentation. For this reason it is important to have a director or facilitator, because ‘over-selection’ results in unfocused theatre.

As in with workshop theatre, the primary aim in Forum Theatre should be to produce good theatre, as Boal (1992: 227) explains:

The most important thing, over and above anything else, is that forum theatre should be good theatre; that the model in itself offers a source of aesthetic pleasure. Before the ‘forum’ part begins, the show must be watchable and well constructed.

In both workshop theatre and Forum Theatre, especially if the process of creation is compromised, the risk of creating bad theatre is high because in neither of the forms does the creation process begin with a well-written script. Not to say that a ‘well-written’ script determines good theatre, but rather that it is a better beginning for good theatre than no script

at all. In this dissertation each of the case studies as workshopped plays give examples of creation process, citing where each play could have been developed further aesthetically. The development of an aesthetic occurs in a number of ways during the creation process, such as character development, plot development, the performance skills of the actors (such as good singing and good dancing) and general aesthetic considerations such as lighting, set, costumes and props. The problem of aesthetics is an issue that can influence all educational theatre.

Theatre that is devised with clear educational intentions risks having an objective that is more important than its aesthetic form. Theatre of the Oppressed and Forum Theatre are not devised for educational purposes, but rather for political purposes, and if education is part of the political problem solving, then a tangible 'change' may occur more obviously and the result would be positive. But education is not always a necessary function of Boal's Theatre of the Oppressed. Another conflict that educational themes have with the workshop theatre and Forum Theatre creation process are that they are often pre-decided by an external authority. Kavanagh (1985), Fuchs (1990), Fleishman (1990, 1991) and Gunner (2001) define workshop theatre in South Africa as an oppositional form of theatre, in other words a form of theatre that opposes the status quo in order to influence social or political change. Educational theatre (such as Theatre for Development, Campaign Theatre, and Theatre in Education and Drama in Education) is not generally oppositional, as it is mostly created to help the government and the powers that be. For example, in two case studies in this dissertation, the authority is the University of KwaZulu-Natal, and the plays are created for the benefit of the institution.

The process of creating Theatre for Development, Campaign Theatre, and Theatre in Education and Drama in Education are relevant to this dissertation because the function of the HIV/AIDS play is essentially to educate and thus these forms of educational theatre cannot be ignored in this context. The case studies were not created as Forum Theatre, Theatre for Development, Campaign Theatre, and Theatre in Education and Drama in Education; however, all these forms offer important examples of how to structure the workshop theatre process.

3.6 Creating Theatre for Development and Campaign Theatre

Okagba (in Salhi 1998: 23) describes Theatre for Development (TFD) as being “primarily concerned with the audience and its transformation.” It is difficult to measure transformation, but the priority of audience transformation is a quality that is shared with both Forum Theatre and workshop theatre. As a form of theatre whose objective it is to ‘transform’ communities through creating new consciousness, TFD has often adopted Forum Theatre techniques. TFD can be initiated by the community or by external intervention such as government organisations or non-governmental organisations (NGOs). However, it is considered important that the community initiate TFD, or that the community decide the theme for the TFD intervention, as the nature of TFD implies that it essentially designed for the community and made by the community in a collaborative and democratic manner.

Frank (1995: 13) describes Campaign Theatre (CT) as “a form of TFD which is concerned with raising consciousness of people on topics such as child care, environmental issues, health care etc...” and these topics are often not decided by the community as in TFD, but by an external body. The nature of campaigning implies a forceful crusade with a preconceived agenda. Describing theatre that is devised to educate or create consciousness around issues of HIV/AIDS, as ‘Campaign Theatre’ is accurate, as HIV/AIDS is a health care priority with complex information that changes as knowledge and resources for the pandemic develop. HIV/AIDS campaigns are conducted through all forms of media, and using TFD techniques to achieve the outcomes has proven effective in developing countries such as Uganda (Frank 1995) and southern Africa (Mda 1993). However, whether CT is as democratically effective as TFD is debatable.

Through the following two examples of suggested TFD creation process, Byam (1999) and Kavanagh (1997) illustrate the democratic nature of the TFD creation process. The structure of the TFD process is not universal. In other words, practitioners can use any number of methods to achieve the outcome of a TFD play. These two examples are included in this dissertation as further comparisons to the workshop theatre process structure defined by Fleishman (1990), and offer further details of the creation process of a collaboratively devised play with aims to educate or ‘transform’ its audience.

Byam (1999: 28-30) describes the creation process of TFD as follows:

- Planning;
- Research;
- Select and analyse;
- Performance planning;
- Selecting actors and rehearsals.

Who is the group and what is the issue? The planning begins with the selection of the group, that could be a group within a community identified by an NGO as needing the TFD resource, or it could be that an already established community group approaches a known TFD project and requests assistance. Community groups with prior skills in creating TFD have also used the form without external assistance. The group identifies the issues or problems that might be the focus of the TFD intervention and names them. The naming of the issues or problems is the beginning of the selection process.

As in Workshop theatre, the researching of the issues or problems is vital. Reading relevant material that might be found in books, media or statistics, for example, is a privilege for the literate, but is always the best place to begin research. Brainstorming workshops that include the whole community provide inside information into the issues or problems faced by the community and provide insight into the customs and traditions of the community. Interviews and interaction with members of the community offers subjective opinions on the community's issues or problems. However, observation remains the most effective research method when theatre is the method of reflection (Byam 1999: 29). Observation in a community can take many forms. For example, if the group is encouraged to observe the customs and culture of the community a more empathetic depiction of that community might be presented in the TFD intervention; or if the group is encouraged to observe the daily life of community members they might gain some good ideas for a context for the TFD intervention.

After the process of research into what the community issues or problems are, and into the context of the community, the group needs to identify a single problem in order to give the

TFD intervention a focus. The problem is then analysed by the group, using their research as knowledge, so that it is a collective problem that can be explored with the whole community in mind. The community need to collectively identify the problem, as the principles of TFD imply democratic decision-making. Problems occur without community consultation or without full collaborative communication with either the whole community or an objective representative (such as a democratically elected representative group). The process of identifying the problem for the TFD intervention is another important step in the selection process. Once the problem has been named, the group can begin preparations for the performance.

Determining the focus of the TFD intervention stems from the problem that the community have named. What is the problem and how will it be communicated? The group chooses what style of performance is best suited for the community's context. The community might have a traditional performance style that would suit the TFD intervention best, or perhaps the problem would be best shown through external influences (the style of the television 'soapy' for example). Aesthetics such as costumes and masks reflect the community's customs and need to be taken into account. The space in which the performance will take place has a lot of meaning for the TFD intervention as a community inclusive event. The performers chosen to participate in the TFD intervention also reflect the customs and traditions of the community. The community might have bards or performers who are used for traditional performance that will best convey the problem in the TFD intervention. The performers are important representatives of the community. In the process of selecting the styles of performance, the techniques that will be used and taking into account the customs of the community, the group begin to develop a play around the problem. Often the FT structure is used for the process of script creation.

The performers in a TFD intervention are often selected by the community and from the community. After the group decide on the script (written or unwritten), the performers begin rehearsing the play in preparation for a community performance. The performance of a TFD play is often followed by a facilitated discussion or dramatic intervention (such as in Forum Theatre), and thus I refer to the whole process as an intervention.

In TFD the group is the primary focus, as they represent the actors, the audience and the purpose of the project, the problem. Kavanagh (1997: 4-24) offers a pragmatic approach on how to prepare the new group (possibly non-actors) for the process of creating a TFD play:

- The beginning: Considering the group;
- Preparing the actor: Relaxation and games;
- Making the play: Workshop techniques... observation, selection and presentation.

What is the motive of a community group who wants to create a play? When a group is established to create theatre it is helpful to draw up a simple constitution. Above, Byam gives examples of how and why a group may get together to create TFD, and the reason for the group's establishment is where the process of creation begins. When that group is established certain concepts need to be defined and drawn up so that they are remembered through the entire process of the TFD intervention, from creation to the last performance. The reason or motive for a group to get together to create theatre differs. It could be to educate, to politicise, to entertain, to be famous, or to earn money. The group should define this motive. The group need to consider its members, who they are in the context of the community and how each member fits into the group. The group need to establish an agreement for their purpose and their establishment. The group should be democratic, collective and in this sense each individual should be able to make suggestions freely. A code of order and discipline need to govern the democratic nature of the group to ensure that everyone is always protected by the democracy. Each group member needs to remain committed and to respect each other through the entire process.

Once the groups' motives are clear, the preparation of the actors can begin. Kavanagh suggests a number of techniques to prepare actors for creativity. The use of relaxation techniques aids performers in leaving the outside world and entering the world of theatre, it prepares the performers mentally for the process and it encourages creative thinking. Concentration techniques help the performers to engage with their bodies and minds. Exercises in sincerity push the performers to become actors who are not only concerned with entertaining, but also with being able to create genuine performances. Observation exercises help the actors to draw into their memories and to engage with the space around them, the

other performers and the outside world of reality. Playing imagination games stimulates the actor's ability to engage with his/her imagination and prepares the actor for improvisation exercises. The improvisation exercises encourage the actor to be relaxed, to concentrate and to be sincere, to use the observation and imagination. The number of games and techniques that can be used to achieve these objectives are many, and are well documented in Barker (1977), Johnstone (1979) and Boal (1992) as mentioned in section 3.3, and they all work towards developing an ensemble group.

Before the group can begin the creation of the play, a statement of intention should be clarified. For example, questions such as: What is the play for? Who is the audience? What are the resources available to produce the play? These questions help to make the intention clear. Choosing whether the play is to be workshopped or scripted also influences the outcome of the play, as scripted theatre often means that only a single author has produced the work and that it is perhaps not as democratic as a workshopped play. For the purpose of this dissertation we assume that the play is workshopped. The process of scenario selection then begins. Together the group decide the context of the story, where it takes place, who it involves, what it is about and what structure the story will take. This is all a process of selection, as many stories might become one. The scenes can then be roughly put together and the creation of each one can begin. The script-making process takes many steps. Again research should be the place to begin. Then the material is adapted to suit the scenario and scene breakdown through a process of selection. This information is recorded, either through writing or the memory. The group discusses each scene until the group decide it is ready for performance. An improvisation of each scene acts as the presentation and the first performance of the scene. After further group discussions and selection, the improvised scenes are ready for rehearsal.

3.7 Theatre in Education (TIE) and Drama in Education (DIE) and 'learning how to know' in the workshop process

Theatre in Education and Drama in Education serve a similar purpose, and that is to educate. The purpose of both, according to Bolton (in Jackson 1993: 40), is to create a "change of understanding" for the participants. In TIE the participants are audience members who,

normally after watching a play, are encouraged to participate in changing the action on stage through techniques such as ‘hot-seating’ (or taking the actors role to change the action in the play). Jackson refers to the actors involved in TIE as “actor-teachers” (1993: 3); and they are responsible for guiding their audience through a process of learning. The audience of learners can be compared to the *spect-actors* described in FT.

In DIE the teacher is a facilitator of a classroom drama. The teacher’s function as a facilitator is to guide the learners through an educational process using role-playing exercises and other theatrical devices. The teacher may join the classroom drama as a ‘teacher-in-role,’ but maintains the function of facilitating the drama. Both TIE and DIE are concerned entirely with education, with creating change, or with what Rasmussen and Wright (2001) have described as the process of “learning how to know.”

There are no models that define TIE. Vine (in Jackson 1993: 109) describes the similarities between TIE and FT through a description of TIE:

(In TIE the) prime motivation lies in its explicit educational purpose and that its distinctive formal feature is its use of active audience participation --- human behaviour and institutions are formed through social activity and can therefore be changed, and the audience, as potential agents for change, should be active in their own learning.

The similarities with these motivations and that of FT make TIE a good example of an educational workshop theatre process. The process of creating TIE is centred on selection. Unlike workshop theatre, FT and TFD, professional actor-teachers with specific educational objectives create TIE. For example, the objectives for a particular TIE intervention might need to be compliant with school curriculum. Pammenter (in Jackson 1993: 59) describes the process of creating TIE as a process of choice making, or selection. When the target group is known and the subject for the TIE intervention is requested, the actor-teachers begin the process of creation. The choice of content needs to be carefully considered, taking the target audience into consideration by avoiding bias and selecting material that is appropriate. The content of the play determines its form. Or, as Pammenter (in Jackson 1993: 69) expands, “theatre is a social art and therefore the practitioner has responsibility for the conception of

material.” The conception of material is represented by the selection of material. According to DIE teacher Heathcote (1984: 114), “effective teaching is about selection.” The similarities between TIE and DIE are clear.

If drama is about meaning, it is the art form of theatre which encompasses and contains that meaning. If theatre is about expression, then it is the dramatic exploration of the meaning which fuels that expression. (Morgan and Saxton (1987: 1)

Morgan and Saxton, in describing the relationship between theatre and drama, provide a good example of the learning process experienced in the DIE process. O’Toole (1992) adds to this in his definition of the process of drama. The purpose of these contributions is firstly to define process and secondly to show how transformation takes place with the process of creating workshop theatre.

In section 3.6 it was suggested that problems occur in constructing plays with goals to ‘transform’ the audience, problems that compromise the artistic outcomes of these plays, and that the objective should always be to achieve ‘good theatre.’ But what is ‘good theatre’? In section 3.6 aesthetics were described as being a telling sign of the artistic accomplishment in a play. This dissertation is more concerned with describing the structure and process of creating workshop theatre, and in discovering the process of ‘learning how to know’ however, creating ‘good theatre’ is often a reflection of this process. Morgan and Saxton (1987) use the elements of drama and the four stages of a ‘well-made’ play to define the DIE process of learning. This comparison is helpful for this dissertation in that a ‘well-made’ play that incorporates the elements of drama is essentially ‘good theatre,’ but described as a process it illustrates how change occurs in the workshop theatre creation process.

Morgan and Saxton (1987: 5-7) describe the four stages of a ‘well-made’ play, and they can be closely compared to the structure of the Aristotelian play described in section 2.9. These four steps help to understand the process of drama by comparing them to what is experienced in a DIE process.

- Exposition: Informs audience of previous action;

- Rising action/complication: The protagonist and the problem are introduced;
- Climax/crisis: The action increases tension to a crisis;
- D(e)nouement: The plot is resolved;

The exposition is the part of a play where the previous action, or information on what happened before what is about to happen, is explained. In a DIE context this would be where the teacher and learners share with each other what they already know. Rules for games are established and understandings of the purpose and context of the drama are clarified through dramatic play and exercises. It is also important that the teacher establishes consequence for actions that might be taken through the drama so that tension is introduced to the process.

The rising action or complication is the part when the protagonist is introduced and experiences *peripeteia* and the plot is established. In a DIE classroom the teacher would begin to build volume, taking the problem and instead of establishing a plot, the teacher would begin to establish her teaching objectives.

The climax in a play is reached through a *catastrophe* is experienced by the protagonist, and is when the plays action increases to a point of crisis. The DIE teacher cannot plan this climax, so instead he/she must look for a moment of collective significance that is full of feeling, real for the participants and appropriate for the context of the drama. After the *catastrophe* in an Aristotelian play the audience would encounter *catharsis*. If the teacher is able to select the right moment of collective feeling, this will be the point of *catharsis* or change for the learners.

The d(e)nouement is the part of the play where the plot is resolved. The resolution of the DIE process is reliant on the learners' ability to engage with the feeling experienced in the climax. The learners would need to experience their own *anagnorisis*. This moment of recognition would be when the learners' intelligence would be stimulated, hopefully through the aesthetic experience, and the moment of 'knowing' would be experienced.

Within the DIE context a number of theatrical elements are incorporated that help to guide the learner through the process of 'learning how to know.' Morgan and Saxton (1985: 2-5)

define these as the four elements of drama. The elements of drama are important qualities of a 'well-made' play.

- Focus: What is this play about? How will each scene be shaped to add to the whole?
- Tension: Challenge, the unknown, conflict;
- Contrast: Light, sound, movement, *peripeteia*;
- Symbolism: Meaning in character, plot, aesthetics - props, set, lights;

Focus, tension, contrast and symbolism are elements of theatre as drama [rework]. The focus of a play determines what the play is about. Each scene is focused to aid the play as a whole. Each character has a focus, the aesthetics have a focus, and everything on stage has a focus. Focus implies selection and implementation. Tension is achieved through theatre when there is conflict, a challenge, humour, love or mystery. Tension is the unknown. Contrast is what is achieved through variations of the focus and the tension. For example, character variation occurs in theatre through the *peripeteia* as the character experiences a reversal of fortune and as such contrasts his/her original state of being. Symbolism in theatre is meaning, and exists in all the aesthetics, the plot and the characters. It is when these four elements of drama are recognised in the process of creating theatre, through the process of drama, that the participants begin to experience transformation.

However, this is the external frame of drama. The learning in a classroom drama occurs in the internal frame. This is described by Morgan and Saxton (1987: 21-25) as:

- Interest: Attending, watching, listening and reacting;
- Engaging: Evidence of participation, willingness to engage, relating to other participants, identifying with material, evaluating;
- Committing: Personal engagement and responsibility to the group, accepting limits, accepting responsibility, empathizing;
- Internalising: Selection by refining values, thoughts, concerns, beliefs, attitudes and exceptions;
- Interpreting: Process of selection, ability to communicate, experiment, adapt, analyse and reflect;

- Evaluating: Selection of dramatic elements, symbolic expression, detached observation, Re-creating past action for reflection, communicating experience.

These six points are all relevant to the group involved in creating a workshopped play. The case studies of this dissertation will be evaluated and compared to these six stages of experience in the drama process, and thus aim to show that a process of transformation occurs with the participants in the workshop theatre creation process.

3.8 A suggested workshop theatre structure for creating the AIDS play

The descriptions of the different creation processes, from the workshop theatre process to the DIE process, are all relevant in the context of this dissertation; and together they serve as examples that help to define the structure of the four case studies.

The aim of each case study is to describe the workshop process, discuss the narrative of the male participants and attempt to show that change occurred through the construction of these narratives. The workshop theatre structure described in section 3.3, the FT creation process described in section 3.4 and the TFD creation processes described in section 3.6 are combined to provide each process with a structure. The TIE and DIE process of learning through drama, described in section 3.7, serve as examples of how learning occurs within the workshop theatre creation process.

Each of the four case studies are analysed as follows:

Aims of the play

Each case study is introduced with a description of the aims set out by the researcher. In the case study of *Carpe Diem* the two performers were equally involved in defining the aims of the play, and these are discussed as such. In the '*Say Plays*' the aims were primarily defined by a campaign, and these are described as such.

Considering the group

The participants within the four groups (or four case studies) are described in terms of age, gender, sexuality, language and cultural background. The male participants are described in more detail than the female participants, as it is their narratives that are the focus of discussion. The age of each participant is a generalised figure that serves as a suggestion of the participants' life experience, maturity and sexual experience. The gender of each participant is relevant only in the '*Say Plays*', as they are the only two case studies with both male and female participants. Describing the sexuality of each participant is a means in which to compare their respective narratives with their sexual identity. As some of the participants were from different language and cultural backgrounds, the narratives were created from different worldviews, and it is thus necessary to describe the cultural heritage of each participant. Although the male participants are described in more detail than the female participants, none of the descriptions are explicitly detailed for two reasons. Firstly, the participants' identities need to be kept confidential as a sign of the confidentiality and trust built up in the workshop theatre process. Secondly, the researcher is not aiming to categorise the participants into any social category, but rather the researcher views each participant as a unique individual who brings new knowledge to each process. As the researcher is thus subjective in the way in which he views each participant, the researcher will be defined in the same way as each participant.

Preparing the group

This section of each case study aims to describe examples of the games and exercises that were used to prepare the group for the workshop process. Both the games and exercises normally had two functions. The first was to initiate the workshop process, and these reasons are discussed in section 3.3. The second function was to initiate each workshop and rehearsal session. As the process of each case study developed, so too did the games. Games were used in all the case studies as important techniques for building the ensemble group and for defining the workshop space as a safe and playful space. The games described in each case study also provide insight into the participants' identities, as the nature of the games played varied from group to group. The exercises used to prepare the actors for each workshop process were designed to create focus, to prepare the performers physically and vocally. These exercises included relaxation, stretching, vocal warm-ups and physical improvisations,

as well as other more complex actor training exercises. The group work in each process was an essential part of learning how to play and in the same sense it prepared the participants for the process of ‘learning how to know’.

Collaborative story making

The first step to creating stories as a group is deciding on a theme. In each case study this was a collaborative process. Even though external authorities predefined the ‘Say Plays’ objectives, the groups were still responsible for the outcomes of the narratives and even the structures of each play, and each group created a uniquely thematic play that both challenged and fulfilled these objectives.

The next step is the creation of material relevant to theme. In this part of the story making process the planning begins. The whole group conducts research and material is selected and analysed collaboratively. Then, through observation as described in section 3.3, the performers begin creating material. This material differed in each process but often included improvisational games, songs, dance fragments or physical theatre sketches, monologues, dialogues, written ideas and discussions.

As the material was being created in each process the story would begin to come together. This part of the workshop theatre creation process is significant for the aims of this dissertation, as it was in the process of creating these stories, or narratives, that defined each play. The narratives collected in this part are raw and subjective material and possibly the most accurate reflection of the participants’ identity.

Developing the script

In this section the play begins to take shape as all the material is put together. The process of structuring the narratives into a ‘well-made’ play begins with the presentations of the material. This section often overlaps with the previous section, as presentations can occur while creation of new material is still in progress. As the presentations occur they are selected, modified or rejected. This selection process can be collaborative, but it is often the facilitator or director who makes the final decisions. The description of the FT process in section 3.4 offers a good example of how to begin to put the narratives and other material

together. The presentation of the material can be compared to the first improvisation in the FT process. However, the ‘embryo’ or core of the story needs to be established at this stage. The inclusion of a ‘Chinese crisis’, or a moment of danger and opportunity in the core story enables the facilitator or director to proceed with the FT rehearsal techniques and the actual forum. The FT process is one example of how to create the core story, but it is relevant to all four case studies. In the section of ‘workshopping the play’ observation, selection and presentation are constantly occurring, as are games and improvisations. However, once the play is complete, the facilitator becomes the director and the rehearsals begin.

Discussing the narratives

After describing each workshop process the narratives of the male participants will be described and discussed. The aim in this section is to select a few examples of these narratives from each case study that illustrate the problem named in the title of this dissertation.

Conclusion and reflections on the productions

In conclusion, each case study will analyse the post-production reports and data in order to examine the effect of each play. The play *The Sacred Cow* did not have a report, and thus its narrative will be analysed in order to assess whether it can be compared to the process of ‘learning how to know’ that is experienced in educational drama. Each production will be analysed in terms of the DIE process, and in so doing the participants ‘transformation’ can be assessed in each case study.

CHAPTER FOUR: *It's Not What You Say... and Say What You Do!*

4.1 Introduction

The two plays, *It's Not What You Say...* (2003) and *Say What You Do!* (2004), are two educational HIV/AIDS plays devised collaboratively and directed by the researcher. They were developed with criteria set out by the University of Natal (2003) and the University of KwaZulu-Natal's (2004) HIV/AIDS Programme (UKZN AIDS Programme) to be used in a campaign designed to create awareness of campus HIV/AIDS resources for the incoming first year students, with the focus being on the free voluntary counselling and testing (VCT) offered on all campus clinics. The 'Say Plays' (as I will describe the collective of the two plays hence forth) serve as two examples of the workshop process of educational theatre for HIV/AIDS and are the first two case studies examined in this dissertation.

In this chapter a report of each production will serve as a catalyst to discuss the process of creating workshop theatre for HIV/AIDS educational purposes. The focus of the 'Say Plays' case studies will be on the narratives created by the male participants. Each play had both male and female participants, but as described in Chapter One, the focus of this dissertation is to compare the narrative created by the male participants of all four case studies. The narratives are recorded in the final scripts located in the Appendix. However, the primary purpose of this chapter is to record and compare the workshop theatre process of the 'Say Plays.'

The 'Say Plays' were both scripted workshop theatre plays, and as in workshop theatre, neither of the scripts is a completely accurate description of the actual performance. The actors created the narratives, and learnt the words through their own methods before the scripts were available. *It's Not What You Say...* was written shortly before the first performances as a record to remember the script, rather than as crystallised framework for the actors to learn. *Say What you Do!* was partly scripted before rehearsals began and the script served more as a crystallised framework for the actors, however there were many elements of the play that were fluid. That is not to say that the scripts offered in the Appendix are not valid, because they have recorded the actual narratives created by the participants.

4.2 *It's Not What You Say...*

Aims

It's Not What You Say... was developed for UKZN Orientation 2003. It was performed on a number of occasions throughout the year on three campuses in Durban, Pietermaritzburg and Pinetown. Tromp's (2003) report describes the educational outcomes and achievements of the play in terms of meeting the criteria described by the UKZN AIDS Programme and UKZN Orientation Committee.

The objectives for the inclusion of an HIV/AIDS awareness and prevention campaign during the UKZN Orientation 2003 are listed in the 2003 Orientation brief²⁰. The UKZN AIDS Programme facilitated the process of integrating an HIV/AIDS component within the Orientation programme. The UKZN AIDS Programme financed *It's Not What You Say...* as a drama production that would continue to be performed throughout the year as part of a larger campaign. The UKZN, Pietermaritzburg (PMB) campus, Drama and Performance Studies Department provided the use of postgraduate students who were the performers and collaborative co-creators of the play. Thus the research that emerged from the production (Tromp: 2003) is the shared property of the UKZN AIDS Programme, the UKZN (PMB) Drama and Performance Studies Department, Tromp and the researcher.

The instructions for the aims of the play were discussed in a workshop that included people from multiple disciplines including the nursing sisters from the campus clinics, HIV/AIDS campus administrators from HIVAN (the campus based HIV/AIDS support organisation) and the UKZN AIDS Programme, lecturers from Drama Studies and Unilevel ethics and the director/researcher. The outcomes of the meeting established that the focus of the play should concentrate on a number of points, namely:

1. Promoting HIV voluntary counselling and testing (VCT) for all students;
2. Promoting prevention before treatment (including the promotion of male and female condoms, the importance of individual choice making and abstinence);

²⁰ Orientation 2003: Integrating HIV/AIDS (Appendix)

3. Promoting student awareness of UKZN campus resources available for HIV/AIDS counselling, testing, treatment and prevention;
4. Promoting student awareness of UKZN's HIV/AIDS policy;
5. Ensuring that racial, religious and cultural diversity are represented in the theatrical production;
6. Ensuring that the play was factually sound, and that research into HIV/AIDS, and the testing and treatment of HIV/AIDS, was to be conducted by all involved in the process, from actors to director;
7. Finding new ways to engage with students through conversation around sexuality and sexual practice – with a “let's talk about it” attitude.

The aims of the play were not designed by theatre practitioners with a focus on the aesthetic and creative outcomes, but rather by a team of HIV/AIDS experts who were focused on creating a piece of theatre that added to a larger campaign that was being run on the university campus. For this reason I refer to *It's Not What You Say...* as ‘campaign theatre’ (Frank 1995). However, as the play incorporated democratic forms of educational theatre and drama process as well as workshop theatre techniques in its creation, it could be argued that although the play was created for a campaign, it was also created independently and democratically. The HIV/AIDS experts did not write the script. The director and the actors, with material gathered collaboratively during the workshop process, were the sole creators of the play, and the importance was not on the script, but rather on the play. Therefore this process can be considered as a good example of workshop theatre used in the HIV/AIDS educational context, however as the aims were predominantly educational, it could be argued that aesthetic and creative ideals were compromised.

The play was created in two parts that are represented in the script through two contrasting styles. The different theatrical styles also represent the workshop process. The play was introduced and later interrupted by stereotypical HIV/AIDS ‘edutainment’ theatre. This section of the play used satirical sketches that incorporated song, dance and over-the-top melodramatic acting to fulfil the educational messages that the play was designed to promote and to distance the audience from the narratives (as a Brechtian device) through humorous but educative entertainment. The second part included a number of monologues and

dialogues created by the actors based on their own life experiences, observation or researched true-life events. The material the actors chose to work with was harsh and provocative and was performed in a realistic style. Each performance was followed by a facilitation lead by an HIV/AIDS expert.

Considering the group

The group consisted of nine performers and the director. For the purpose of keeping the groups identities anonymous, I refer to each member by their character's name - John, Chris, Sarah, Tabs, Rachel, Thulani, Dudu, Sizwe and Lisa. The focus of this study will be on the male performers, John, Chris, Tabs, Thulani and Sizwe. The director, myself, is simply referred to as the researcher.

John

Twenty-one years old. He was involved in a long-term heterosexual relationship. He was English speaking, with no second language. His family were English and well educated, and tertiary education institutions employed both his parents. His father was an Anglican lay-minister as well as an academic, and both his parents were highly involved in the humanities. He was middle-class and lived with his family in a middle-class suburb. John was an accomplished and talented actor, and at the time was a registered post-graduate student at the university where he was furthering his studies of Drama and Performance. His theatre knowledge and acting experience was influenced largely by British theatre culture.

Chris

Twenty-one years old. He was not in a relationship, and had never been in a relationship for any length of time, but he was interested in women and he was a sexually experienced heterosexual. He was English speaking, but also spoke weak Afrikaans and Zulu as second languages. His father was an ex-soldier and now a tradesman, his mother was unemployed and his family were working-class. He lived with his family in a working-class suburb. Chris was an accomplished athlete and dancer, and at the time was a registered post-graduate student at the university where he was furthering his studies of Drama and Performance. His theatre knowledge was influenced by his experience and exposure at the university, although he also had experience as a stand-up comedian.

Sarah

Twenty years old. She was involved in a non-sexual heterosexual relationship. She spoke English and weak Afrikaans and Zulu. Her family lived on a farm and were Christian and upper-middle-class. Sarah was a teacher in training, and at the time was a registered post-graduate student at the university where she was furthering her studies of Drama and Performance. Her theatre experience was limited.

Tabo

Twenty years old. He was not in a relationship, but had experienced a number of homosexual relationships, and was openly gay. He was Zulu and English speaking, but came from a Zulu family. His father was a high-ranking diplomat, his mother was also highly qualified and the family were upper-middle-class. He lived in a multi-cultural student commune. Tabo was an accomplished dancer and performer, and at the time was a registered under-graduate student at the university where he was furthering his studies of Drama and Performance. Both a rich understanding of his Zulu cultural heritage and his experience and understanding of western performance influenced his understanding of theatre.

Rachel

Twenty-five years old. She was involved in a heterosexual sexual relationship with a married man she had met over the Internet. She had experienced both hetero and homosexual sexual encounters, but was more inclined to heterosexual sexual relationships. She was English speaking. Her parents were upper-middle-class and lived in a middle-class suburb. Rachel was an accomplished performer and writer, and at the time was a registered post-graduate student at the university where she was furthering her studies of Drama and Performance. Her theatre experience was largely influenced by British theatre culture.

Thulani

Twenty-six years old. He was involved in numerous heterosexual relationships, and was experienced sexually. He was Zulu, but he also spoke weak English and Afrikaans as second languages. His late father was a policeman and his mother was unemployed. At the time, there was no employment in his family. He lived with his family in a working-class suburb.

Thulani was a member of a township theatre company, and had been performing with them for eight years and was an accomplished performer. He did not have a matric certificate and his theatre experience was almost completely influenced by the township performance culture.

Dudu

Twenty years old. She was not involved in a relationship and had never been involved in a relationship, although she was more inclined to heterosexuality. She spoke Zulu and English, and weak Afrikaans. Her parents were divorced, middle-class and she lived with her mother in a middle-class suburb. Dudu was an accomplished performer, and her experience of theatre was centred on her university under-graduate studies, that she was registered for at the time.

Sizwe

Thirty years old. He was involved in numerous heterosexual relationships, and was experienced sexually. He was Zulu, but he also spoke weak English and Afrikaans as second languages. He did not know his father well, as his father had many wives and many children, and lived in rural Zululand. His mother was a member of the ibandla lamaNazaretha, a South African religion that incorporates both African spirituality and Judaeo-Christian religious practice. He was unemployed and lived in a township. He lived wherever he could find accommodation. Sizwe was a member of a township theatre company, and had been performing with them for eight years and was an accomplished performer. He did not have a matric certificate and his theatre experience was almost completely influenced by the township performance culture.

Lisa

Twenty-four years old. She was involved in a heterosexual relationship, but had had homosexual experiences. She spoke Bulgarian and English. She was originally from Bulgaria and had been raised with communist worldviews. Her father was an academic in the sciences and her mother was semi-employed. She lived with her family in a working-class suburb, although the family were middle-class. She was registered as an under-graduate, but had already achieved a degree in computer sciences. Her experience of theatre was limited.

The researcher

Twenty-three years old. He was not involved in a relationship at this point, but had just emerged from a long-term heterosexual sexual relationship. He was experimenting with his sexuality. He was English speaking, but he also spoke weak Afrikaans and Zulu. His father was a minister of religion, an Anglican priest, and a community worker. His mother was a pharmacist. They lived in an upper-middle class suburb. He lived alone in a rented flat in a middle-class suburb. He was registered for a Masters of Arts degree and was studying theatre directing. His experience of theatre was based in both African performance traditions and western theatre, and both had been part of his cultural heritage.

Preparing the group

Preparing the group for *It's Not What You Say...* was a short and intense process. There were four weeks in which to research, create and rehearse a piece of educational theatre. The play needed to run for about forty-minutes, with time for a twenty-minute facilitation. Very few of the group members had worked together prior to this production, and as such time needed to be spent on preparing the group.

The concept for the play was to use authentic student narratives in a theatrical presentation of the different student identities that existed on campus. As such the group needed to be able to define their own identities. The group needed to be able to tell their own stories, and each member would need to feel safe and comfortable enough in order to disclose the personal information needed to create the narratives. One of the first group exercises was for each member to describe a simple biography of their lives. This was done orally and was recorded with their permission by the researcher. This information is disclosed in part in the section

Considering the group.

Because of the group's diverse range of skill and experience in theatre and performance, the games served to bridge the differences and unite the group's skills as well as to build trust and create an ensemble. All the games were conducted as democratically as possible and each member of the group was able to choose whether to participate or not (although they were always encouraged to do everything). Keeping democratic principles is challenging but vital, as these democratic principles need to be incorporated in the story creation and the

production. The games prepared the performers for the workshop process through physicality, mental focus, trust and unity.

The games are divided into seven sections and, although the process would differ slightly for each workshop, they give a good example of a basic structure that was followed throughout the workshop process. In the beginning of the process exercises were simple but time consuming. However, as the group became familiar with the games they were able to make them more complex and intense over a shorter period of time. The games began as a method to unite the group into an ensemble and by the end of the workshop process they served as a basic warm-up for each rehearsal and performance.

Playground games

Given the number of the group we were able to play some fun group 'playground' games. These included tag, stuck-in-the-mud, kissing catches, snaky, follow-the-leader, Simon says and wolfy-wolfy. The purpose of these games was to warm-up the performers physically, create focus and to begin the process of breaking down any inhibition. Children's playground games are effective because they are high-energy games that require group focus and playful interaction, which is a highly effective way to begin any workshop process.

These games also grew as the workshop process progressed. For example, tag developed from one person being 'it' to at least three or four people being the chasers. This took incredible focus, as the group would need to be aware of each other member of the group at all times so as to know who 'it' was and who was not.

Stretches

The stretches began with a full body shakedown. This exercise stimulates each different part of the body and helps the performers to become consciously aware of their bodies. Yoga stretches, for example, are very effective for engaging with both the body and the mind. As a group we would do 'sun salutes' and yoga influenced balance exercises.

The individuals were always encouraged to do their own stretches, to teach the group new stretches and to only participate in what they felt comfortable with. The purpose of stretching is to prepare the body for movement, but it also creates mental focus.

Voice

Voice work was used from the beginning of the workshop process. Working with voice directly after the stretching exercises enables the performers to identify the important connection between body and voice. Preparing the voice is as important as preparing the body, and the voice work often overlapped with the stretching exercises. Breathing exercises, for example, would be included in the stretching --- especially the yoga based exercises --- and would flow directly into the voice exercises. The voice work was split into five main sections that were breath control, resonance, projection, articulation and volume and pitch variation.

Group games

Playing group games helped to build the ensemble and to create trust for each individual involved, and were a development from the playground games. These games normally began simply, with the whole group walking around the space, walking tall, walking short, walking towards points in the room, varying pace and direction and working towards impersonations and interaction.

One group game that was used frequently was the fish game. The group would gather together in a tight huddle and, as a school of fish stick together to avoid the big predators, the group would move around the room. The performer in the front of the huddle would begin to do an action that would be followed by the rest of the group. As this performer turned, another performer would end up in the front of the group and would begin a new movement. This exercise encourages the group to work together and to constantly aware of each other movements.

The group trust games included carrying and catching exercises, blindfold games and dialogue games. The carrying and catching exercises normally began with an individual falling backwards off a block into the waiting groups arms. This simple exercise is very

difficult for some people, and a great level of sensitivity is needed when encouraging group members to participate. As people become more comfortable with being caught or carried by the whole group, the exercise can then be done using fewer performers, until it becomes a paired game. The blindfold games are similar. One group member is blindfolded and led around the space by the whole group, with no talking. Again the progression of this exercise develops to a paired game. The dialogue games involve speaking openly about intimate thoughts with the knowledge that the whole group can hear. Beginning with simple daily habits, this game can develop into a paired dialogue whereby a performer feels comfortable enough to disclose his/her most personal information.

Paired games

The paired games were a natural progression from the group games. The purpose of two people working together instead of the whole group was to develop the performers' level of focus and concentration. The games were simple but challenging. The three examples below illustrate this.

The first exercise can be described as the mirror game. Standing about a meter apart and facing each other, the two performers make eye contact. They spend time relaxing their bodies as they focus on the movement of their partner. Then as one of the performers move, the other performer mirrors that movement exactly. The movement begins with small facial movements, and only once mirroring the face is mastered do the two performers begin to move first their whole heads, neck, shoulders, arms, spine and back, hips, legs and then the whole body. They play with levels, pace and balance. Eye contact cannot be lost for a moment.

The second exercise requires a wooden dowel, about two feet long and not too heavy. The performers, keeping eye contact at all times, reach down and lift the dowel using only their index fingers. The point of the game is then to move around the space, again playing with levels and pace. When the dowel falls, the performers begin again.

The third exercise also involves eye contact. Partner A has to avoid the eye contact of partner B as they chase each other around the space. At the instruction of the facilitator, partner A

turns and makes eye contact, and the chase is reversed so that partner A chases partner B. This game is able to develop into a complex dialogue between the two performers, introducing elements of tension, context and towards the end of the rehearsal process it can be used as a rehearsal technique with actual script.

Improvisation

Improvisation develops the performer's ability to react spontaneously to situations on stage and stimulates the performer's ability to merge imagination with physical action. Within a group, improvisation exercises develop the performers' sensitivity towards each other and their ability to respond off each other's actions. A number of different improvisation exercises were used.

Song

Creating song was an important part of *It's Not What You Say...*, and each warm-up session was concluded with singing. The songs that were created for the play emerged from the improvisation process. At the beginning of the process a different group member would have the opportunity to end off each group session by teaching the rest of the group a song. This process exposed the group to different cultures, it provided an opportunity to use their already warmed-up voices and an energetic and positive conclusion to the group work.

Collaborative story making

The theme for *It's Not What You Say...* was selected before the group's involvement (see **Aims**), and needed to meet the objectives of the campaign that it was commissioned to serve. For this reason the democratic principles were compromised before the creation of the play begun. However, the group made a number of choices that influenced the way in which the themes were approached.

In the first meeting, the group was asked by the director to share opinions on HIV/AIDS education. The group's general response was negative, suggesting that AIDS plays were over-done and boring, and that they were not enjoyable to create. The group suggested that the stereotypical AIDS play was not a realistic reflection of societal HIV/AIDS attitudes, and that it was not an effective method of engaging with fellow university students, as the attitude

towards HIV/AIDS education was universally negative. It was suggested that it would be more interesting and relevant for the target audience if they were able to experience authentic student stories. The group then decided to gather narratives together and to shape them into a script. In order to combat the negative attitude towards the AIDS play it was decided to include a farcical section to the play whereby the AIDS play was satirised.²¹

The process of making the play follows closely that described in the section on the workshop theatre process (section 3.3); and is divided into four steps:

- Research and observation: Research that was conducted by the director and the performers around HIV/AIDS, Voluntary Counselling and Testing (VCT), and UKZN HIV/AIDS policy, and observation;
- Games: Collaborative group games and trust exercises (see **Preparing the group**);
- Improvising observation: improvisation games and exercises centred around the themes and information gathered through the research and observation;
- Presenting: Songs, skits, monologues and dialogues.

Research and observation

The research was conducted through a number of methods, such as collecting data from literature, expert opinion and actor observation and experience. Although the director had participated in a meeting to decide the aims of the play, the actors had not yet been involved in any capacity. The initial view expressed by most of the performers at the prospect of workshopping an HIV/AIDS play was negative. However, this view was to change as the process developed.

The campus clinic's nursing sister introduced the first workshop with a lecture on the scientific nature of HIV/AIDS. Each participant received worksheets with general facts, figures and information about HIV/AIDS. Following the informative and factual lecture, the sister went through the process of Voluntary Counselling and Testing (VCT) step by step, as she would do in an actual test. The sister also answered questions about people on campus

²¹ I do not believe that the theatre making process can be completely collaborative. This is a good example of how the director guided group choice by making affirmative choices. The director's choices were influenced both by the group and by the director's own concept.

who were being tested and living positively with HIV (without disclosing identities, confidentiality was never compromised) and shared her own personal experience and opinions on the subject. The participants were then encouraged to receive VCT and discover their own HIV/AIDS status.

Outside of the workshop space the performers were encouraged to read-up on HIV/AIDS and to participate in VCT. They were asked to keep personal journals that would remain private and to document their experience if they chose to get tested. They were also encouraged to begin questioning people such as family, friends and even strangers around their perceptions of HIV/AIDS. The questions they would ask were to be created out of their own interests, but included subjects such as testing, perceptions of who was most at risk, prevention and protection. Many of the cast did get tested, and some did not, but all were exposed to new understandings of HIV/AIDS and the issues that surround it.

Improvising observation

The majority of the workshop time involved improvising new work. The improvisations were all influenced by the research and observation conducted by the group. The songs, farcical HIV/AIDS education skits, monologues and dialogues that emerged from the student narratives, were all improvised separately.

Improvising the songs

The process of improvisation began with creating songs. Creating song is a playful and intellectual method of engaging with material. These improvisations were a direct development from the Song section in **Preparing the group**. The facilitator asked the performers to place themselves in groups of three. They were asked to create small verses or choruses using pop music, their own tunes or any inspiration, but all were to include the HIV/AIDS information that was required for the production. Most of the songs promoted VCT, as the main theme for the play was to encourage voluntary counselling and HIV/AIDS testing. The time in which they had to create these songs was limited and the group was under constant pressure to create. The time pressure ensures that the work is improvised and not

over-considered. Time pressure also ensures that enough material is created, so that there is more material to select from when the script is being created.²²

Improvising farcical HIV/AIDS skits

Beginning the workshop process by improvising entertaining songs and skits helped to inspire the group. The skits were improvised at the same time as the songs. The initial workshops would normally involve group games, song improvisation and skit improvisation. During this time the performers were still conducting research and observation, and as such were more able to create frivolous skits than authentic narratives. However, some skits, such as the introduction to the play,²³ were created near the end of the workshop process.

The skits all differed and followed no particular style. One skit created in an improvisation included a white English-speaking performer instructing the audience on the method of condom use with a broomstick and a condom. The presentation was purposefully clumsy and nervous, and was translated incorrectly by a Zulu performer, with comments on the sexual incompetence of the demonstrator and other racial observations.²⁴

The songs were choreographed through improvisation, and this helped to create clumsy farcical movements as well as allowing the performers the freedom to keep improvising the songs through performance.

There was an improvisation on a television talk show that included the whole group. Using American reality television and talk show culture, the performers were able to create a flexible but structured improvisation that involved humour and HIV/AIDS fact through a medium that would have been known by the vast majority of the audience.

Monologues and dialogues

²² The songs that were selected can be seen in the script *It's Not What You Say...* Appendix.

²³ The skits were created to engage with the audience at the beginning of the performance through satire and comedy, for example the broomstick/condom cliché.

²⁴ The Zulu translator was able to belittle the speaker through comments on sexuality whilst at the same time offering other points of view on HIV and AIDS standpoints for a large portion of the audience.

The monologues were created over time, with a large emphasis being placed on the ownership of the material. The initial process of creating the monologues was personal and involved individual work by the members of the group in their private capacity. The performers were encouraged to write their research and observation findings into their journals, and from these findings to begin to piece together different narratives. However, not all the group members kept accurate journals, and some kept no journal at all, as the journal was merely a suggested resource. The members of the group also differed in levels of literacy. For example, the two township theatre performers who had largely experienced oral forms of theatre, whereby a script was seldom used, were more comfortable working orally.

Part of the research conducted by the group was to receive VCT, if the performers chose to, and to record the process for performance. Only four of the group did go for testing, and of those only three wrote about their experience, and only two chose to share that information in performance.

Some monologues were created from stories that had been discovered through the research. The clinic sister disclosed a number of stories, although kept the identities of the subjects strictly confidential. These stories, such as Sizwe's narrative about the man who was infected with HIV and had claimed that "I got it from a woman, not a dog, and I'll give it to a woman, not a dog," were included with the permission of the clinic sister and manipulated in order to maintain the confidentiality. However, the phrase was authentic, a student had used it to justify his actions, but his character was developed in the script and the female victim Dudu, was invented by the actress, and she responded to the characters' situation with her own attitudes and emotion.

The majority of the monologues were constructed from narratives that group members had observed in their own experience. For example, Tabs' monologue about the rape of the male student was not his own story, but an actual event that he had been exposed to when he lived in the university residence. Rachel described her own story, an authentic account of what was occurring in her life at the time of the play's creation. Sarah described a story that a close friend had experienced. Chris and Rachel both spoke of their own experiences of participating in VCT. Lisa, the friend and support of Tabs, played a fictional character,

although she expressed her own opinion and articulated her own attitude towards sex, sexuality, relationships and love. Thulani's story developed and changed the most through the workshop and performance process, as he had the most difficulty in articulating his own narratives. It was only during performance that it was decided that he only speak in Zulu, and through his own language he was able to narrate a far more emotionally authentic portrayal of his own life experience.

John presented an invented story, but used his own life experience to articulate his feelings and attitude towards the reality of his fictional situation. His partner Julia, who does not feature as a performer in the play, was linked to both Chris and John's sexual history, but was not inspired by a true person or event. A number of the narratives, although inspired by actual experience, were 'what if' scenarios.

These narratives were presented in the workshop space as monologues and dialogues. The presentations were improvised by the performers who had developed them, and in the case of dialogue, the performers would select the performer they needed for their presentation. For example, Sarah needed a male for her narrative, and so she asked Chris to play the role of the boyfriend. The whole group observed the presentations of all the narratives, and each member of the group was actively involved in shaping each narrative. However, the creator of each narrative was ultimately responsible for the content of their narratives, and acknowledged ownership for the material used in each narrative.

Developing the script

The development of the skits, songs and narratives was a collaborative process that depended on the creativity of the whole group and their ability to produce work. The director facilitated the process of creation by encouragement, criticism, time management and resource management. However, the director did not create or write any of the narratives, songs or skits. It was only through the process of creating the script that the director became actively involved in manipulating material. However, the next step of the workshop process involving the selecting, scripting and rehearsing of the play, required a more dictatorial director. Rehearsals could only begin once a set script was selected. Although no complete script was

formally written, the script in this case was the selected material, some of which was not written, but improvised.

The process of selecting the material that was to be used in the script occurred in two parts. Firstly, the performers were all actively involved in selecting their own material. Each individual performer, who had all participated in the creation of the material, made conscious choices when selecting their own material. There were some performers who were not comfortable performing some of the work that they had created. An example of this process of selection was in the VCT testimonies, whereby one performer created a narrative of his experience, but did not want to perform for personal reasons. Another example was a performer who had created a narrative and performed it for the group, but had then decided it was not appropriate for the play.²⁵

The director was the majority decision maker for the second part of the selection process. The director was presented with all the material gathered by the group, and after the group had selected the material that they were willing to perform, the director became the chief decision maker. Although the script that appears in the appendix is the best example of the narratives that were created, it only shows a portion of the material that the group had created. The director did not create a written script of this material until the performance date, as some of the performers were semi-literate and the nature of the play was fluid, and allowed for change and development that a scripted play would not have allowed.²⁶

Discussing the narratives

The narratives of each male participant are discussed through selected examples, and aim to illustrate the different variants of masculinity that became apparent in this particular workshop process.

²⁵ This particular narrative was not recorded. It involved a male student who discovered that he was infected with HIV through a wound he had received whilst helping a victim of a stabbing. The story was based on an actual event. However, the performer who had created the narrative did not feel that the story would be affective in the context of the play, as it did not involve the type of decision making that was thematic in the play. It was the performer's choice to omit the narrative.

²⁶ Written scripts had been presented to the cast members as the material was being created, however it soon became clear that the written script had a negative influence on the process. The semi-literate members of the group performed memorised lines with far more ease. The narratives also became organic, and were able to grow with each rehearsal, and later with each performance.

John

John, who was educated at an all-boys private school, described a scene of classroom based sex education that suggests the attitude of some of the young male students who might be emerging from similar backgrounds.

... Or like when our grade 10 teacher, Mrs. Van Rensberg, gave the 'sex' talk! Haggard – 60 odd - A mother of eight and a body to prove it - with that hairy mole on her chin...(makes disgusted noise) – she would try to tell us how beautiful and pure sex was!? What Mrs. Van Rensberg probably didn't realise was that we were all gagging for whatever we could get, from who ever would put out...

The story of Mrs. Van Rensberg emerged from a narrative shared by John about a similar experience of sexual education at school. His narrative reflected the attitude of the class as a whole, rather than just his own view, but it is a good example of how teenage boys from an all-boys school might view sex. The image of the teacher is described with sexual references, as she is ugly in a sexual way, rather than any other way. The fact that sex might be something that is respected within a relationship was also laughed at as something that was ridiculous. After all, all a teenage boy wants is sex...

I was brought up in an environment where irrationality and emotion came second to logic and reason.

And yet John continues by describing his heritage as having equipped him with logical and rational thought --- suggesting that illogical and irrational actions were not something that he was capable of. This perhaps contradicts his views that sex was something that he would have indulged in as a teenager at any given opportunity.

Then Julia told me that she was HIV positive. Oh, sorry, I should have said. Julia and me have been together for just under two years. She went for VCT a few months ago. Hey - at least we know... I wanted to... ask her how? How did she get infected? I know it must have been through sleeping with someone... But who with? And - how many? How could she have done something so stupid? I needed to understand. I needed to know. But I couldn't, I

couldn't do that to her when she needed me. I didn't ask her then and I never will. Sometimes it's better that way... sometimes it's better not to talk too much.

When John's exposes his girlfriend's HIV positive status, his paradox becomes clear, as all his prejudices about what sort of people contract the virus are actually referring to himself and his girlfriend. The story of his girlfriend being HIV positive was not created from a true story. The performer created a hypothetical reality to challenge his own unrealistic perceptions of his supposed immunity to the virus and by doing so introduced a number of other issues. The irony is that John has been at risk for as long as he has been sleeping with his girlfriend Julia, even though he has chosen to have a rational and well-negotiated long-term relationship. This suggests that the HIV pandemic is not always a rationally understood problem, and as everyone is hypothetically affected, the pandemic needs understanding as well as logical action. This section of John's narrative also exposes the inability of John to communicate emotionally with his girlfriend, and as he suggests, "sometimes it is better not to talk too much."

It was confusing – and I did not want to understand at first – because I didn't think I had the strength. I thought - sometimes it's better to try not to understand - to just accept and move on. I thought about that – about leaving her – about getting away from the problem – about hiding.

Although John decides to remain with Julia, he reflects on his vulnerability at the time of her disclosure. Admitting that he was confused, that he did not understand, that he did not have the strength and that he wanted to escape the problem and hide away, illustrates that John was capable of reflecting on his vulnerabilities.

Chris

Chris was also educated at an all-boys school; however Chris was from a very different background from that of John. There are a lot of similarities that exist in their attitudes towards people who become infected.

All these pictures on the wall of naked bodies with AIDS symptoms! Jus, at least I don't have any of those sores on my guy, hey! So I'm okay I recs. Yrrr! I feel sorry for all these guys. But at the end of the day it's their own fault!! Arseholes... (He chuckles and sits down.)

Chris was one of the cast members who went for VCT and he wrote down some of his thoughts while he was in the waiting room. There really is a picture of STI infected people on the UKZN Pietermaritzburg clinic wall. Chris believes that people have a responsibility to know their statuses, and he suggests that it is a weakness that allows other men to become infected with STIs. This suggests that Chris believes that he is in control of his sexuality and the outcomes of his sexual interactions.

Everyone should know if they've got it or not. It's just playing fair – you know? -To everyone else... I mean - I would be pissed off to find out that some slag had given me Sirus the Virus. I also wouldn't want some old duck of a nurse telling me I've got a slow puncture – gonna kick it one day...

Chris describes VCT as fair play. He also suggests that if he was infected by HIV or “Sirus the Virus” it would be because his female sexual partner was a “slag” or a prostitute. This prejudiced view of women is extended in his feeling that he would not want “some old duck of a nurse” diagnosing him with “a slow puncture” or HIV.

But I'm sure 'I' haven't got it – I've always been cautious hey. Like with Sarah – I used a 'dom' - was in and out - and didn't hang around for admin. She's a typical chick – thought I was in it for marriage or something – but not me, no, I'm still young – bullet proof – can't do this relationship thing - don't have the time.

In another narrative in the play, a dialogue created by Sarah, a female member of the group, Chris is the boyfriend who sleeps with her and then breaks-up with her. This was not based on a true story, but invented by Sarah to explain her views on sex and the need for abstinence. However, as John did in his narrative, Chris contradicts his views by his action. Chris believes that he is not vulnerable to HIV, he believes he has control over STIs through his way in which he manages women and through the fact that he uses a condom or “dom.”

You know, my mates play these games when we're pissed hey - we go cruising birds at one hell of a strike rate. After rugby - we have fine meetings and get fired up on cane and coke and stuff – and then we go out to town to get even more tanked up. Aim number one – to get laid. Do you know 'hunt the grunt'? Old Danny Rauch must have set a new campus record with about 20 grunts in just one semester - and he says he slept with most of them, but you can't always believe Danny hey. And he's still as strong as an ox. There's another game we play – “seal-clubbing” we call it... Do you know what that is? That's when us 'third and fourth years' go out to town and convince all you young first years to sleep with us. It's lank easy hey. I suppose because we know our way around, and because we're so confident. We use the old – “Oh, but you're so beautiful, so intelligent, so interesting – I think I love you” bit – and normally you new birds are so green hey - just gagging for it – hook, line and sinker...

And then Chris goes further to explain the games that he has played when he has been drunk with his friends. “Hunt the grunt” and “seal clubbing” actually exist as terms used by students on campus to describe sexual conquest. Chris would have experienced these games in reality. He was a member of a rugby team and the athletics team and was accustomed to the nights of heavy drinking. This narrative describes the in-group closed societies that some men prefer to belong to. Women are objectified and often become the targets of sexual conquest. As the young male students are normally drunk, the levels of control, such as the use of condoms, are not guaranteed.

You know - okes like me and Danny Rauch won't last for long hey. He should also get tested. He should be like me – biting the bullet to find out. It's worth it! He shouldn't just go around the way he does - getting girls into the sack without knowing whether he's got it or not... Like I've done, like I did to Sarah, like I've done to others. You know Julia hey? She's a foxy bird, bright as well. She goes out with this real nerd. I shagged her in fist year, you know, 'seal clubbing' and stuff. She met the nerd shortly afterwards. Now she's just told me that she's HIV positive. I can't remember that far back hey – I don't know if I even wore a condom. But it's not just that. Like what if other chicks were also infected – by me? What if I'm positive? How many people will have it because of me? Jus man – I don't know if I could deal with

that. That's why I'm getting tested hey – I have to know – I don't want to be a killer – I don't want to kill – jus, I don't want to die...

Julia, John's girlfriend, was connected to Chris' story as a fictional example of how small campus life can be. The degrees of separation are not many. Chris begins to take responsibility for his own actions. Throughout his narrative it is other people who are most at risk, like his friend Danny, but then he is forced to acknowledge why he is receiving VCT. It is not because of a moral high ground, it is not only because he is responsible, rather it is because he has been forced to by Julia's revelation. Chris admits that he may have slipped up with Julia, he may not have used a condom, and he may be infected too. He contemplates the fact that if he were infected there would be many others who would be at risk. He realises that he too is vulnerable, and that as much he doesn't want to kill, he doesn't want to die either. His bravado turns to fear, but perhaps his fear is his ownership of his past actions?

Tab

Tab, who was in fact at the same all-boys private-school as John, produces a very different aspect of masculinity in comparison to both Chris and John. Tab is gay, and he offers a more vulnerable account of what it is to be a man on campus. As a first year in a university residence, a young gay student who was a friend of Tab was raped. The story was never reported to any authority at the time because the young student did not want to disclose his homosexuality or his HIV status. Tab recreated the story by inventing the character of Lisa. In a narrative that he created from his own experience and understanding of love and sex, Tab places himself in the feet of his friend.

You know what the problem is? There is no real love for the world to give. We live in a world of dishonesty, free love, hate, misunderstanding, fear... and everyday victims are claimed.

Tab was concerned with love, what love meant to him and how love was often in conflict sex and with his own sexuality. He cites his father as being an important figure in his life, a man that he wants to prove wrong, perhaps in order to prove his own worth?

I wanted to prove my father wrong, show him that gay men could find love. He said gay men couldn't find love because it's unnatural, an abomination, a filthy sin. I was going to prove him wrong.

Tab creates an image of a typically conservative father figure who, possibly with a religious moral stand point, refuses to acknowledge that homosexuals can find love. Tab created this narrative through his own relationship with his real father. Tab had disclosed his sexual orientation with both his parents and was aware of their prejudices, but he was also aware that they loved him. Tab was aware of his own morality, and realised that it was in conflict with some of his actions, as he was sexually active.

But it's funny how you lose hope. It became, "I'm not ready for love," to "All I need is sex!" Free sex, anywhere, anytime – in a car, a friend's house, the cinema, a stranger's house... that's what love has been replaced with.

This narrative created by Tab does not necessarily reflect a true sexual history for Tab, but purposefully plays into the stereotypical prejudice that homosexuality and promiscuity are synonymous. This is juxtaposed by his desire to discover love. When he discovers his HIV status, he immediately considers his father.

When Steve told me he was HIV positive, I knew the chances were that I would be too, and so my father had won. "I'm going to die," not something you can easily accept. "I'm going to die young!" It's not as romantic as it sounds in the movies. I told myself, "You know, there's still a chance ..." but I knew before the nurse told me. I'm young; my life hasn't even begun, but death... I feel as if he's laughing up there, my father, laughing. What a joke: gay, black and HIV positive!

The image of his father laughing at him because he fits the profile of the most-at-risk individual to be infected with HIV/AIDS,²⁷ allows Tab to reflect on the irony of the

²⁷ Being black and gay also positions Tab in two groups of people who have received persecution through the recent past of the country, as well as the world.

situation. It angers him that he was not allowed the opportunity to love, to prove his father wrong.

I've never felt love. I'm not talking about love for family or friends, but that love you see in people's eyes, that consumes them – like when sex stops being just sex. When you can share all the pains and joys with each other, beaming all the darkness within you out, leaving you feeling safe and secure. I've never felt it, tasted it or smelt it. But I know hate, like I know the amount of fingers I have.

Because of the rape, Tabs' desire to love is replaced by hate. He defines the love he never experienced in a very sensitive way, suggesting that love is the ability to share the emotions of pain and joy, to lighten life and to create safety and security. When his character was raped, he was not protected and had no elements of safety or security. He was in a very vulnerable situation.

It was a while ago. I already knew I was HIV positive. These guys who hang out at the pub where we used to go in first year, I mean they'd hassle me a bit, rip me for being istabane. You know: "it's not in our culture to be gay, we'll show you coconut, if you want to be a woman we'll show you how." I mean, I don't even know how they found out I was gay...

The reason given by the men who raped his character were real opinions that had been observed and collected through the research process of the play. There was a community on campus who viewed homosexuals from their own communities as traitors to their culture. A "coconut" is a derogative term used to describe a person who is black on the outside, but white on the inside.

One night they cornered me alone – I was walking back from the library – and they started to call me names and then hit me and then... one of them said: "teach him to fuck like a man!... Teach him!" And they pinned me down and they...

The idea that a gay man chooses to be gay because he would rather be a woman is a common misconception, and has led to many examples of abuse in our society.²⁸ The idea that men have the right to teach other men how to be culturally or sexually compliant through the use of violence and sex is perhaps a barbaric notion, but it occurs in our society on a daily basis.

I even tried to tell them not to penetrate me because I'm HIV positive. They wouldn't listen, they just smacked me across the face and said: "AIDS is from dirty woman!"

Another common misconception in South Africa is that HIV is transmitted through sex with women only.²⁹ Men have developed a number of urban legends that uses sex as a therapy for HIV/AIDS, such as the myth that sleeping with a virgin cures HIV. The violence described in this narrative is an accurate depiction of the violence that occurs in South Africa on a daily basis.

While they laughed, I didn't cry, not one tear. I tasted the blood of hate on my lips. I felt it with every painful thrust, with every laugh. They say women sometimes feel guilty after being raped. I didn't feel guilty. I felt shame. And shame doesn't wash away. I took a bath and washed and washed, with a scrubbing brush, till my skin was raw. But I still didn't feel clean. I don't know if I ever will.

It is interesting how Tabs reverts back to stereotypical masculine behaviour. He does not want to show emotion, he does not want to let them see him cry. He juxtaposes himself to women, suggesting that women often describe feelings of guilt after being raped,³⁰ and he states that he feels shame. Tabs wanted to discover love, but instead he discovered shame.

Thulani

Thulani spoke most of his narrative in Zulu, and the examples that are recorded here are not the most accurate description of what he spoke in performance. As he was semi-literate, he

²⁸ This abuse does not only happen with gay men. There have been a number of cases whereby lesbians have been raped by men in order to 'cure' or 'punish' them.

²⁹ This is ironic in the global perception of HIV/AIDS, as the western world views the virus as a homosexual epidemic. However, the highest risk person in South Africa is a black female, and the vast amount of HIV/AIDS awareness has been targeted at heterosexual behaviour change.

³⁰ As Dudu does in the Sizwe narrative.

did not respond well to learning scripted lines and when he was creating narrative he did not write down everything he spoke. He decided to present a VCT account, however he was not tested prior to the play. Thulani wrote the narrative that is used here, but it is not as complex as his spoken word was.

Guys, as I sit here waiting to know about my blood status, I know the results might be negative or positive, but they will totally change my life... There is no wrong or right about being positive or negative with a VCT result - because the results will go straight to the heart.

Thulani was interested in the moral reasons for being tested. He wanted to know what the consequences were going to be if he was tested and was positive. But he also had his own perceptions of what put him at risk.

Lots of people know that you can get infected with the HIV virus when you have unprotected sex. But how about those who get infected through blood, you know, like in a fight, or a car smash. I mean – I sit here thinking that anything could have happened to me - because I don't know if I have it or not... I sit here, terrified, because the result will go straight to the heart!

He was sexually active, and admitted that he practiced safe sex. However he was also involved in a sub-culture marred by heavy drinking. He was often in drunken fights, was violently mugged on a number of occasions and had been involved in a number of accidents that had left him scarred. He did not come from a sheltered background. As in the case of Chris, it is difficult to believe that if he was drunk and was indulging in sexual behaviour, that he always used a condom.

I'm in this tavern, and suddenly I meet this lady – uZodwa bra wami! She had everything that a man desired! Ngikutshela ukuthi saswinger noyo – like BIG time! And we have this night, eh bru, like none other... But the problem? Eish bra, I did not even use a condom during our first (motion fingers to neck to symbolise sex).

The tavern once again introduces a male in-group closed society whereby women become objects of sexual conquest. This is demonstrated not only by his sexy description of uZodwa, but also by the secret sign he has for sex, the tapping of two fingers on the neck.

A week later I meet uTaiza. He told me something that I did not believe – uKuthi uyayazi leya nTombi (that she knows that girl)... Eh bru, some of the guys she has (motions his fingers to neck, again symbolising sex) are very sick and others are even dead.

A friend who claims that uZodwa is infected with HIV and has AIDS then confronts Thulani. Other people claim to have been infected by uZodwa. Thulani has become the victim of his own masculine behaviour.

Eh bra wami (my friend), sitting here waiting for my blood status, its just not easy. Look at me – I'm shivering like a reed in a river - because those results will change my life. If I'm negative bra - I'll be positive – live positive – because I don't want to be like uZodwa... I will make the right choice from now on – because there is no negative or positive now bra wami - there is only life or death – and bra, it's your choice.

He is frightened waiting for his result. He knows that the consequences are irreversible. He speaks the textbook clichés about living positively. Thulani's account may not be as complex as the others, but Thulani had experienced far more than the others. The story of uZodwa was not true. But there were many other stories that he could have told and that he chose not to tell. In Thulani's case it was clear that what he chose not to share was more significant than what he chose to share.

Sizwe

Sizwe and Thulani were both from the township theatre company. However, Sizwe was older and his English was slightly better than Thulani's. He was able to articulate his character with more complexity, even though the character was not his own story, but rather a story that was told by the nursing sister. Sizwe wrote this story and interpreted it himself. He worked with Dudu and included a lot of his own life experience.

I'm fine - I'm cool – I'm OK... I got it from a woman, not a dog!

Sizwe discovers that he is HIV positive, and in retaliation he decides to keep infecting women. A student on campus actually used this phrase. It illustrates a number of points. The fact that Sizwe can deal with his HIV status --- because it was a woman and not a dog that infected him --- possibly suggests that there is no shame in sleeping with a woman, and as such if a woman infects a man it is the woman who is to blame. Sizwe claims to be “okay,” and, just as John and Chris did, he claims to be in control of the situation.

I had this girlfriend, Dudu. We were so much in love, caring about each other – until it happened. This one silly damn day she came back from this meeting at a women's group – and we had supper together, we got into bed together, then we started holding, kissing... It was so special. We started feeling and wanting each other, we wanted to do it right then! Then she said, “let us use a condom?”

When Sizwe describes his relationship with his girlfriend Dudu, he describes love as something that is “caring.” However, the control he needs over his girlfriend, that is compromised by the “women's meeting,” is dismantled when she asks him to use a condom. Then, as happened in the narrative of Tabs, the woman is taught a lesson through sexual violence.

(Flashback)

Hey wena ikhondom yani? (What do you mean condom?) Condoms are for people who don't trust each other – number one! Condoms are for people who are not faithful – number two! And number three – condoms are for people who would like to do wrong things. Tell me something wrong, tell me something I don't know, is there anything you need to tell me? Futseck! Vula! Vula!

“Vula” means open. After accusing Dudu of cheating on him because she wants to use a condom, Sizwe takes physical action against her. The implications here are that condom use is for promiscuous behaviour and not for long-term relationships. It is clear that within this relationship Sizwe is the dominant power. Dudu's narrative deals with the consequences of

the rape. Sizwe's narrative deals with the consequences of his inability to except his vulnerability and his HIV status.

I recently found out that I'm HIV positive. I went to this clinic for treatment for this sore I had on my...you know? They said it was a STI, and then suggested that I go for VCT. I said "NO! Why me?" But these sores (he looks at his groin), they just didn't go away – but eish - it was burning when I went to the toilet! I went back to the clinic and they gave me more muti, but suggested that I go for VCT - and I did do it. The results came back... I am positive - but hey!

His view of the clinic and VCT is much the same as John and Chris, as he does not see himself as being at risk. However, he has an STI and needs treatment, and the possibilities of him being infected with HIV are high, so he is encouraged to receive VCT. He is always in control, even when he says he is HIV positive.

You! You are damn lucky! You will never escape! I will strike again and again! What? Sit there? Look at me accusingly and claim innocence? One thing for sure – I got it from a woman, not a dog. I am going to give it to a woman. And all you woman looking at me right now, know this, I am coming. I will strike like lightning and disappear into the darkness like a bullet...

He directs this section of the narrative at the audience. He has equated sex with violence, comparing himself to a bullet. He blames women for his plight and warns them of his intentions. His intentions are to rape.

You find out that there is nothing fine! You find out that you are HIV positive! You are next! I got it from a woman – Not a dog! Now where is Dudu? I said VULA! Vula amathanga! Vula!

Sizwe concludes by accepting his vulnerable state. "Nothing is fine," as he is HIV positive and angry. His anger reflects his emotional response to his situation. He exits the stage shouting for Dudu to open her legs...

Conclusion and reflections

The variants of masculinity that arise from these narratives are not an accurate description of what all men were like on campus in 2003 during the creation of the script, but rather provide an interesting example of five men who were involved in a workshop theatre process at the time. The authenticity of their narratives is best judged by the audience's responses and Tromp's (2003) evaluation of the play.

Tromp believes that the characters were recognisable and hence believable, and as such the play promoted a sense of ownership of the problems involved with VCT and HIV awareness on campus. In Tromp's opinion, because the play combined a number of current cultural forms that were familiar to the target audience, such as elements of reality TV, game shows, Big Brother, soap operas, music videos and docudramas,³¹ the characters and the narratives were given context and meaning. The majority of the cast members were students themselves, although two members of a local community theatre group were also part of the ensemble. Tromp sites the similarity of age between performer and target audience, as well as the fact that most of the cast had recently experienced life as first year students, to being important factors in creating recognisable characters. The wide variety of different character types, according to Tromp, spoke to the cultural backgrounds and personal experiences of the majority of the audience members.

Both Tromp and Baxter (2003) identify some of the audiences' reactions towards the different masculinities that were illustrated in the performance. Tromp points out:

The rugby jock who persuades his virgin girlfriend to have sex with him against her better judgement and then dumps her is judged with gasps and tongue clicks; the boyfriend struggling to come to terms with his love for his HIV positive girlfriend is greeted with nods and sighs of support.

One character, however, stands in contrast: the male who rapes his girlfriend when she requests they use condoms. His aggressive calls of 'Dudu Vula!' (literally 'Dudu Open your legs!') were greeted with laughter from each audience. It has been observed that

³¹ All cited by Tromp as culturally recognisable forms of entertainment (see Appendix: Tromp, 2003).

predominantly black audiences have a tendency to laugh at scenes of violence especially when the violence is directed at women.

These observations are furthered by Baxter, who questions the reasons for the laughter:

Is it through discomfort with the blatant sexual violence expressed in these words, or sympathy with the (black) man's dominant position in the sexual relationship? Is it that it turns people on to hear words of command associated with sex, or that these words resonate uncomfortably with people's own reality? (Baxter, 2003)

The ability for the audience to identify with the characters shows that the group created realistic, if not authentic, examples of students on campus. The masculinities portrayed were helpful indicators of the way in which men on campus could behave. Tromp recognises in her report that there was never a value judgment placed on any of the characters, not even on the rapist, and although Tromp was not completely satisfied with that choice, it was necessary for allowing the group members to articulate their narratives with as few prejudices as possible.

4.3 *Say What You Do!*

Aims

Say What You Do! was developed for UKZN Orientation 2004. It was performed on a number of occasions throughout the year on three campuses in Durban, Pietermaritzburg and Pinetown. Maxwell's (2004) report describes the educational outcomes and achievements of the play in terms of meeting the criteria described by the UKZN AIDS Programme and the UKZN Orientation committee.

The objectives for the inclusion of an HIV/AIDS awareness and prevention campaign during the UKZN Orientation 2004 are listed in the proposal for the plays' creation.³² In a similar method to the 2003 production of *It's Not What You Say...*, the UKZN AIDS Programme facilitated the process of integrating an HIV/AIDS component within the orientation.

³² Proposal for funding for creation and performance of HIV/AIDS play for Orientation 2004 (Appendix).

However, as the 2003 production proved to be a success with all stakeholders of the UKZN AIDS Programme, the 2004 production was planned with more knowledge of the value that theatre served in the struggle for HIV/AIDS awareness. The relationship between the stakeholders was more mature, and as such the messages for campaign were articulated with more precision. The performers were selected from the UKZN (PMB) Drama and Performance Studies Department, and were all registered for postgraduate studies in Drama and Performance. The research was conducted by a team of researchers from the UKZN AIDS Programme, and was compiled by Maxwell, an independent researcher. Thus the research that emerged from the production (Maxwell: 2004) is the shared property of the UKZN AIDS Programme, the UKZN (PMB) Drama and Performance Studies Department, Maxwell and the researcher.

The instructions for the aims of the play were discussed in a series of meetings held by the Media and Marketing Campaign, which included members from the UKZN AIDS Programme, Student Counselling Centre, Drama Department and Performance Studies Department, HIVAN, Campus Health Clinic and the Fine Art Department. The research conducted by Tromp (2003) on *It's Not What You Say...* was also a significant influence on creating the aims for the production. The outcomes of the meeting established that the play should concentrate on a number of points, namely:

- Engage the student population in critical and creative thought around HIV prevention, treatment and care;
- Reinforce messages around the importance of VCT
- Introduce the first years to issues around antiretroviral treatment (ARV) available on campus;
- Creatively convey messages around healthy living for both HIV positive and HIV negative students.
- Being audience centred, contextually relevant and experimental;
- Exploring behaviour, values and attitudes around HIV/AIDS, without imposing them;
- Disseminating information and attempting to bring about changes and growth in the life of a community.

The aims for the 2004 production were significantly different to the aims for the 2003 production. The development of the play reflected the development in HIV/AIDS policy on a national level. As HIV/AIDS treatment (anti-retroviral or ARV's, immune boosting pharmaceutical products and vitamins) became more available to the general public, the national consciousness of HIV/AIDS needed to change from a fatalistic attitude and concentrate more on treatment and care. The ARV treatment was more advanced than the previous year's programme. Thus, instead of making VCT the priority focus for the 2004 production, promoting healthy living for both HIV positive and HIV negative students became the play's major aim. The report by Tromp encouraged the director of the play to work towards a more audience centred production, and established that working with contextually relevant and experimental theatre was useful. Tromp's research also encouraged the director to maintain his aims of exploring behaviour, values and attitudes around HIV/AIDS, that he had established in the 2003 production.

Say What You Do! was created for a campaign. The educational aims that were prescribed by the designers of the campaign meant that the group did not create the play completely democratically. However, the group devised all the material that was used in the play, and in that respect the cast and director created the play collaboratively. The play was divided into two main sections, in the same way that *It's Not What You Say...* was, with the beginning half being satirical HIV/AIDS skits and songs, and the second half being scripted monologues and dialogues depicting realistic student life (in a docu-drama style). The director scripted the docu-drama section from material gathered in workshops. Each performance was followed by a facilitation lead by an HIV/AIDS expert.

Considering the group

The group consisted of four performers and the director. For the purpose of keeping the groups identities anonymous, I refer to each member by their character's name --- Tabisu, Moya, Andrew and Melanie. The focus of the study will be on the male performers, Tabisu and Andrew. The director, myself, is simply referred to as the researcher.

Tabisu

Twenty-eight years old. He was involved in a long-term heterosexual relationship. He was Zulu speaking, but also spoke English as a first language, and French and Afrikaans as second languages. His mother and father lived in rural KwaZulu-Natal and were unemployed. His education was initially sponsored by the French embassy, and both European and his own African culture thus influenced his educational background. He lived with extended family in a township in a small house. His theatre experience was extensive; it included training in the United States of America, community theatre in South Africa and knowledge of traditional performance from his own cultural heritage. He was registered for an Honours degree in Drama and Performance Studies.

Moya

Twenty-one years old. She was involved in a long-term heterosexual relationship. She was English speaking, but spoke weak Afrikaans. Her father was an upper-middle class farmer, and her mother was a housewife. She was educated at an all-girls private school. She was an accomplished ballet dancer. She lived in a student commune with other English-speaking middle-class students. Her theatre experience was influenced by her dance background and by other genres of western theatre. She was registered for an Honours degree in Drama and Performance Studies.

Andrew

Twenty-two years old. He was involved in a long-term heterosexual relationship. He was English speaking, with no second language. His family were English and well educated, and tertiary education institutions employed both his parents. His father was an Anglican lay-minister as well as an academic, and both his parents were involved in the humanities. He was middle-class and lived with his family in a middle-class suburb. Andrew was an accomplished and talented actor, and at the time was a registered post-graduate student at the university where he was furthering his studies with a Masters of Arts degree in Drama and Performance. His theatre knowledge and acting experience was influenced largely by British theatre culture. However, he had performed as John in the 2003 production of *It's Not What You Say...* and brought valued experience and knowledge into the 2004 production.

Melanie

Twenty-one years old. She was involved in a long-term heterosexual relationship. She was English speaking and Hindi speaking. Her father worked for the South African postal services and was murdered while at work in a robbery that may have been politically motivated. Her mother had a managerial post at a local super-market. She lived with her mother in a housing estate in a middle-class suburb. She had attended a school in an Indian community. Her theatre experience was limited to her school and university experience, with both Hindu and western influences. She was registered for an Honours degree in Drama and Performance studies.

The researcher

Twenty-four years old. Was single at the time of the production, but was infrequently involved in short-term relationships. He was English speaking, but he also spoke weak Afrikaans and Zulu. His father was a minister of religion, an Anglican priest, and a community worker. His mother was a pharmacist. They lived in an upper-middle class suburb. He lived alone in a rented flat in a middle-class suburb. He was registered for a Masters of Arts degree and was studying theatre directing. His experience of theatre was based in both African performance traditions and western theatre, and both had been part of his cultural heritage.

Preparing the group

The four performers and the director involved in the production of *Say What You Do!* were all post-graduate colleagues. They were all mature and accomplished performers who had previously worked together, and as such the process of preparing the group was enriched by their previously shared theatrical experience and their already established trust for each other (although trust exercises were still an important part of the process). The play that was to be created needed to run for thirty minutes, with time for a thirty-minute facilitation that the performers would be involved in, and the group had five weeks in which to create the play. The time restrictions for the creation of the production were not as challenging as they had been for the production of *It's Not What You Say...* because of the smaller size of the group and the knowledge gathered from the experience of the previous years production.

The concept for the play was established through the aims of the production (see **Aims** above), and involved expressing student narratives and identities through the exploration of student behaviour, values and attitudes towards HIV/AIDS and sex. Although the group was not involved in making the decisions for the play's concept, their participation influenced the outcomes of the play, as the student narratives and identities were influenced by each group member's own life experience. The preparation of the group aimed to create an environment in which the members of the group were able to share honest and vulnerable reflections of their own life experience. As in the 2003 production, the workshop process began with each group member sharing a short oral biography of his or her lives, that is disclosed in part in the section **Considering the group**.

Although time was spent preparing the group, the games that were used were more emotionally complex than the games used in the 2003 production. The four performers in the 2004 production all shared a similar level of performance skill. However, the group games were still essential for building the ensemble, for developing the level of trust that was needed to share the personal stories, opinions and attitudes that were needed for the creation of the play. The democratic nature of the games and exercises was a vital element in creating group awareness for each other, and later for the audience. The exercises that the group developed through the process of workshopping the play were also used for developing collective sensitivities on an emotional level towards each group member, the group as a whole and the audience in production. The exercises also served as preparation for rehearsals and performance in the latter stages of the process.

The games and exercises are described in five sections; warm-up and trust games, stretches and voice, paired games, improvisation, and song. Because of the group's experience the games evolved quickly and were easy to initiate and adapt. Each workshop session differed, as the games and exercises were adapted and the process of creating developed into a process of rehearsing.

Warm-up and trust games

The initial trust games were developed to experiment with growing sensitivities towards the body. A ritual beginning for most of the workshops was for each member of the group to hug each other member, pick them up, shake them and greet them. Some of the more physical playground games, such as tag, stuck-in-the-mud, kissing catches and snaky, the games aimed to develop the physical awareness of the performers. For example, the game follow-the-leader was adapted to a physical exercise, whereby the performers had to remain connected to each as they followed each other through the space. These games initiated the warm-up process.

The trust games involved of variety of exercises. As described in the process of *It's Not What You Say...*, games involving catching and carrying were often used. The performers were also encouraged to participate in exercises that were physically challenging, such as performing handstands, headstands and cartwheels, especially if they believed that they could not. This exercise is playful and begins to demonstrate the possibilities of the body. The performers were never forced to participate in any exercise.

An exercise that was used to build trust between members of the group, but was not physical, involved the group members lying in a circle on the floor with their heads all touching each other's heads in the centre of the circle. Each performer was then asked to describe their body, firstly as ugly, then as beautiful and then biologically. They would all speak together. Following the description of their own bodies, they would choose another member of the group, and without naming who, they would describe the others body through the same process. This would continue until each member of the group had described all the bodies in the space. The exercise would end with the group affirming each other positively. This was a difficult exercise, as it exposed insecurities within individuals and demanded a high level of trust between the group members, and as such it took a number of workshops to develop.

Stretches and voice

The stretches were a development from the trust games, and used as many interactive physical exercises as possible. For example, the stretches would often begin with group shakedowns, with the whole group participating in patting each other down and physically shaking each other's bodies. The performers would then continue with their own stretches, which included yoga and dance warm-up routines. Voice work was used from the beginning of the workshop process and was incorporated into the stretches.

Paired games

The paired games included the mirror game, the game with the wooden dowel and the eye contact game (all described in section 3.2). However the group was able to begin at a more complex level, meaning that these games could be adapted on a number of levels. For example, the eye contact game would become a situational improvisation, with partner A being a son trying to tell his mother, partner B, that he was HIV positive. The mother, partner B, would avoid the conversation by avoiding eye contact until she decided to confront her son, partner A, and then he would turn and avoid her probing questions.

Another paired game that was played was a narrative development game. The performers would face each other and tell their partner a real story from their lives, about their family and life experience. The exercise aimed to develop the performers' ability to both tell linear stories that could be followed and understood, as well their ability to listen to their partners story. The performers would keep changing partners as they developed specific elements of their stories. The final pair would conclude the exercise by constructing statues of their stories. Boal's image theatre techniques were used to create and interrogate the statues. Some of the information that evolved through the process of creating these images was used in the script.

Improvisation

Improvisation was used throughout the creation process. A variety of exercises were used, and included a physical improvisation, dialogue improvisation (as recorded in the 'Paired games' section) and song improvisation (described below). The physical improvisation included a number of games; one example being the shoe improvisation (as described by Brook: 1993). A shoe was placed in a designated performance space and the performers, one at a time, would enter the performance space and use the shoe as a prop (imagined as anything but a shoe) to create a short scene. The shoe was replaced with other props, such as a helmet, a wine bottle, a broom and a coat hanger. This exercise improved the performers' ability to improvise with more ease when creating work and in performance. It was extended in the performance itself by an HIV/AIDS skit promoting positive living. A basket of fruit and vegetables was brought onto stage and the performers used the groceries as different props, such as sex toys and handguns.

Song

Song was once again used to end each workshop session. At the beginning of the workshop process, before the theme song for the play was created, the workshop sessions would end with a jazz break followed by a session of improvising song for the script. The jazz break involved the whole group, including the director, standing in a circle and improvising sounds using voice and body to create vocal sounds and rhythm. The exercise would begin with a simple rhythm; normally a foot stomp, and progress to clapping, and then to vocal sounds. The aim was to create a jazz sound-scape that was concluded in a climax.

After work on the jazz break the group would work on creating and rehearsing songs. The songs created for the play were inspired by pop music. Each day the group would divide into pairs and work on a section of the song. They would then meet, teach the entire group the song, and learn the others. The workshop session would then end with singing. This process developed the creative ability of the group, and also ensured that each workshop session ended on a positive note.

Collaborative story making

The planning for *Say What You Do!* was conducted prior to the establishing of the group. For this reason decisions were made without the consensus of the whole group, meaning that the process was not entirely collaborative. The decisions that were made (see **Aims**), were made in a series of democratic workshops that involved the campus HIV/AIDS Media and Marketing Campaign. Thus, although the group were not involved in the initial decision making, the process was essentially democratic and can be used as a good example of workshop theatre in HIV/AIDS education. It is also another good example of Campaign Theatre (Frank 1995).

In the first meeting with the group the aims of the play were explained and discussed. The group was asked to describe their opinions of HIV/AIDS theatre, and were asked what they thought would be the best way of engaging with the target audience, the first year university students. A number of ideas were considered, including similar conclusions to those that were offered by the 2003 group, such as the need to avoid the stereotypical HIV/AIDS educational play. It was decided to create a structured script that portrayed real student lives, but that depicted fictional characters that were all linked in a linear plot. The style that they suggested was similar to that of a television soap opera. The group thought that it was necessary to engage in the television culture that would be prevalent amongst the first year university students, a number of whom would never have viewed a theatrical production before the play that we were planning.

The group also decided to include a satirical theatrical section to the play. This decision was influenced by the 2003 production, but differed slightly. The 2004 group consciously decided to expose the audience to entertaining theatre as well as dramatic theatre. The group wanted to keep true to the HIV/AIDS aims of the production, and expose the target audience to theatre. The satirical section to the play was almost a 'play within a play', and although it is not illustrated clearly in the script (as it was largely improvised and changed throughout the performance process) it was an important part of the production.

The process is described in the same structure that the 2003 production was described, focusing on the four steps that emerged from the chapter on process (section 2.9), although the improvisations were presented as they were created:

- Research and observation: Research that was conducted by the director and the performers around HIV/AIDS, VCT, and UKZN HIV/AIDS policy, and observation;
- Games: Collaborative group games and trust exercises (see **Preparing the group**);
- Improvising observation: improvisation games and exercises centred around the themes and information gathered through the research and observation;
- Presenting: Songs, skits, monologues and dialogues.

Research and observation

The research for *Say What You Do!* began before the group meeting. Tromp's (2003) research from the previous year's production influenced the decisions made prior to the workshop process. The UKZN AIDS Programme had also conducted extensive research during 2003, and this research had influenced the aims for the play (see **Aims**). However, the important group research began in the first meeting.

The nursing sister from the campus clinic³³ presented statistical information on the clinic's HIV/AIDS testing and treatment. The nurse also informed the group about the scientific nature of HIV/AIDS, describing the virus and the syndrome extensively. The group members were encouraged to receive VCT, and although only three of the five group members, including the director, participated in VCT, all were made aware of the procedure. The performers all recorded their experiences in journals; however, these were private journals that will not be reflected on.

The workshop with the nursing sister influenced an important focus of the workshop process, which was to concentrate on the body. It was established in the first workshop that as HIV was something that could only exist inside of the human body, that to focus our improvisations on the body would be a helpful place to begin. Some of the exercises concerning the performers and body can be seen in the section **Preparing the group**.

³³ An interview with the nursing sister can be viewed in the Appendix.

The group was also encouraged to visit the campus clinic, the campus Student Counselling and Careers Centre and the campus Risk Management, all of which were important campus HIV/AIDS resources. The group also investigated other campus resources, such as the location of condom dispensing machines, and they documented their feelings towards the different resources. They presented their findings in the workshops and some of the group also reflected on their experience in their personal journals.

The performers also conducted independent research. The group was asked to engage fellow students in conversation around attitudes towards HIV. Some of the group interviewed fellow students with the intention of discovering which students, if any, thought that they were at risk. Other members of the group interviewed their parents and tried to establish how their parents might respond if they were to inform them that they were HIV positive. All the performers were encouraged to observe student behaviour, especially with regard to sexual habits and conversation around sex, sexuality and HIV/AIDS. The interviews were conducted orally and the results, as well as any interesting information discovered through observation, were shared in the workshop space.

Before the creation of the play was initiated, the group had established a good understanding of HIV/AIDS as both a scientific medical pandemic and a social phenomenon.

Improvising observation and presenting

Although there was a script written for the drama section of *Say What You Do!*, the process of creating the script relied on the improvisations that occurred in the workshop process. These workshops were separated into two sections. The first was the development of the satirical HIV/AIDS play. This section involved playful improvisations with props, song and caricatures. The second section was the development of the docu-drama. It involved intense improvisational exercises that led to the creation of monologues and dialogues. Both sections were developed at the same time in the workshop process.

The improvisation of the satirical HIV/AIDS play was an enjoyable process. The first exercise was to gather all the factual HIV/AIDS research findings together, the information

on contraceptives, healthy living, counselling, treatment and other scientific information, so that the group could use them accurately in the skits.

The group decided to create four characters that would be the core of the satire. The four characters evolved out of improvisations on different stereotypical personas that might have existed on campus.

For example, DJ Re-Dick-You-Loose (ridiculous), who was devised as the caricature of a white middle-class student who smoked cannabis, was completely nonsensical and liked to rap. He was caught masturbating over pornography in a campus computer LAN, and as part of his punishment, Risk Management had requested that he present a talk on HIV/AIDS awareness to the incoming first year students. Although students have been discovered in similar situations as the invented DJ Re-Dick-You-Loose, the character was not based on any fact.

A profile was also created of a young Indian female psychology student. Her caricature was over efficient and took control of the proceedings. She was developed to promote the Student Counselling and Career Centre, but she was portrayed as a farcical young psychologist who tried too hard to be the 'psychologist'.

The other female performer was a white student representing a fictitious university Christian society called 'AIDS for Jesus'. She was strongly opposed to any talk about sex or condoms and she declared that abstinence was the only solution. Her caricature was created as a farcical representation of a moralistic approach towards HIV/AIDS education. Although her messages were moralistic, she also presented facts about healthy living. She entered carrying a basket full of vegetables and fruit that were used for a number of improvisations. For example, she was asked to demonstrate condom use by inserting a condom over a butternut, while DJ Re-Dick-You-Loose antagonised her with sexual jokes that made her give-up the demonstration.

The fourth caricature created was a black male student who was playing a farcical medical student. He represented a stereotypical male professional, and demonstrated a prejudice

towards women. However, he spoke with words that were unnecessarily long, and was over articulate, speaking for lengthy periods of time without ever saying anything of meaning. Although his caricature was designed to enlighten the audience on the scientific facts about HIV/AIDS, he also served as a comical representation of a chauvinistic male.

The example of these four caricatures illustrates how the performers created characters and a basic plot through observing other students on campus and through using their research.

The songs were created separately to the caricatures. To conclude each workshop, the performers were put into pairs and asked to create songs promoting HIV/AIDS awareness. What evolved from this process was a dynamic song that incorporated a number of different pop songs.³⁴

The farcical section was created by the performers and facilitated by the director. The performers collected all the information used for the improvisations. The information emerged from their research and observations. However, as the section relied on improvisation in the performance, a script would not have offered an accurate documentation, as it was constantly changing. The docu-drama section of the play was different, as it was a scripted drama that the group created together, but that was eventually scripted by the director and remained unchanged for each performance.

The docu-drama section was workshopped through a series of improvisations that challenged the performers to share personal narratives. For example, the group would improvise scenes whereby a son would return home to tell his mother that he was HIV positive. Other relationships were explored in the context of HIV and living positively, such as mother and son relationships, mother and daughter relationships, and relationships between friends.

The group improvised many scenes dealing with gender roles within relationships. For example, a male performer would act all caring to a sick female performer, his girlfriend in the improvisation, and then at some point he would be asked to change his care into an

³⁴ See *Say What You Do!* script (Appendix).

emotion like anger or lust, and he would need to use this emotion to control her. The roles would then be reversed and the exercise would be reflected on.

This section was facilitated by the director and was more controlled and planned than the farcical section. The information from the improvisations was gathered by the director and used to script the play.

Constructing the script

The cast created the script collaboratively, however, the director was responsible for writing and selecting the majority of the material for the final script. The script was constructed in the two sections described above.

Although the farcical section was not scripted in writing, it did follow a simple plot. The performers created the plot through their improvisations, and the material used was democratically selected. Work would be improvised, and the performers would select the skits that they thought worked best. The improvisations did not only include the caricatures (as described above) and the song, but also included the props that were added at a later stage. For example, props such as the vegetable basket and condoms, which were only introduced in the final week of rehearsal, evolved through each improvisation, and added to the development of the plot in each performance. The nature of the farcical section of the script allowed the performers to improvise each performance. They were equipped with characters and props that were standard for each performance and they also had a certain amount of information that they needed to share with the audience. The director devised a basic plot, and the rest was left to the performers' improvisational skills.

The director scripted the second section, the docu-drama, and the performers had less input into the material that was selected. However, the performers inspired the work through their improvisations and although the narratives that evolved from the script were not completely theirs, the performers did contribute to most of the important choices. The performers had a certain amount of time to manipulate the script after it had been scripted. The director re-

scripted the play a number of times before selecting one final version. Once the director and the cast had agreed on a final script, the director became the majority decision maker.

Discussing the narratives

The two male performers, Tabisu and Andrew, are good examples of two possible students on a South African university campus. In the narratives the racial and cultural stereotypes of each character illustrate the prejudices that exist on campus, however their constructs of their own masculinities often contradict these stereotypes. Both Tabisu and Andrew are forced to deal with the possibilities of their HIV statuses, and their narratives are analysed by the way in which they deal with their respective situations.

Tabisu

Tabisu is introduced first. He is a Zulu student who is describing how he met his ex-girlfriend, Moya. Moya was a white student, and the inter-racial relationship was fraught with complications and did not last. A similar relationship had been devised in the workshop process, and through the observation of friends who have experienced inter-cultural relationships; Tabisu and Moya's relationship was based on actual experience. The play begins with the development of cultural and racial stereotypes. Tabisu is aware of the insults from both his own cultural and racial group, and of Moya's:

I never thought that I would end up with a white girl as my girlfriend. It just happened. As you can imagine, it didn't last long. My friends called me "coconut." Her friends would whisper, "He's nice, for a black guy."

Once again the term 'coconut'³⁵ is used as a derogatory definition for a black man by other black men. The performers chose to label each other 'black man' and 'white girl', as these terms were important in constructing the racial stereotypes. Tabisu had to deal with being called derogatory names by his own group of friends, and he had to deal with the patronising prejudices constructed by Moya's group of friends. The image of the 'black man' in South Africa, as seen from the eyes of the white woman, is not very positive. Moya's character was developed to challenge this prejudice.

³⁵ "Coconut" is also used in *It's Not What You Say...* to define a person who is black on the outside but white on the inside. Other recent terms include 'Oreo' and 'black diamond'. These terms are racial prejudices often used by a particular race group (in this case the black South Africans) to describe members of their own racial group. The coconut, Oreo and black diamond terms are normally used to describe the economically superior middle class black South Africans, and as such the terms are not only racial prejudices, but also class prejudices.

Moya was looking for a black man, to prove that she wasn't typically white, typically racist.

Moya, as a white woman and a liberal thinking student, was interested in breaking down the prejudices constructed by her racial group. Her choice to date a black man was consciously made by her, and Tabisu was perhaps a 'guinea pig' in the 'white girls' social experiment. Tabisu is the 'black man', who in the eyes of some white South Africans is seen as a violent sexual predator.³⁶ However, Tabisu does not play into these social stereotypes, as his introduction to Moya begins to illustrate:

I met Moya at this party. I'm not sure why I was there, I knew no one. Anyway, she was the only white face, I felt sorry for her. I remember thinking, "Wow, what a petite, beautiful girl," then she started puking.

At the party, Tabisu feels compassion for Moya, even though he is also out of place. His observations of her at the party seem sensitive, and even his comment of how she looked does not seem sexual, but rather a genuine remark on her beauty. Tabisu's reflections on Moya's beauty are shattered when her drunkenness causes her to vomit, and Tabisu demonstrates his compassion by helping her.

I helped Moya's friend Melanie carry her to a bedroom. She lay on the side of the bed and puked onto the wooden floorboards. The problem was that she kept falling off the bed into the puke, and because Melanie couldn't lift her by herself, I had to help. The next thing I knew, Wham! I got one in the eye!

For his trouble, Moya punches Tabisu. Moya realises her vulnerable situation, and when she sees Tabisu trying to help her she thinks that he is trying to take advantage of her. Even though Moya is trying to be liberally minded, she still holds prejudices against Tabisu because of what he represents to her as a black man. Although he is angry, Tabisu does not react violently or aggressively, but instead he walks out and takes the peaceful option, and

³⁶ The prejudices of the white South Africans views of the black South African man were constructed in the workshop process and evolved from the research and observation of the group. Other racial, cultural and gender based workshops helped to establish other prejudices that existed on campus at the time.

demonstrates that his intentions were not to seduce Moya. The introduction of Tabisu and Moya establishes Tabisu as a gentle and caring man. It is thus surprising to discover that he is HIV positive.

The sister at the clinic asked me whether or not I wanted to get tested. She advised me to because of my persistent sickness. I had flu, constant coughing and tonsillitis, and it had been troubling me for weeks. Apparently when treated, it only lasts days. I was scared. I didn't want to know my status. Looking back, I knew. Something told me.

When Tabisu discovers that he is HIV positive, he is already suffering from AIDS. His reflection on the meeting with the clinic sister is vulnerable. Although he admits that he suspected that he might have been HIV positive, he also admitted to being scared and apprehensive about taking the test. The actor who played Tabisu did not get tested. He was also scared. In the script, Tabisu attempts to understand why he was infected, and in so doing he gives an account of his sexual history.

I'm not a promiscuous guy. I've slept with seven girls in my life. I'm 28, that's not bad. I respect women - I respect myself.

Tabisu does not think that his sexual history was a promiscuous one.³⁷ He states that he respects women, and that he respects himself. This suggests that through his respect of women, and through living as he has; that he has been able to respect himself. However, his respect does not prevent him from being infected with HIV. When Tabisu offers a more detailed description of his sexual history it becomes possible to make judgments on his sexual behaviour and to decide at what level he respected himself and his partners.

The seven girlfriends have all been at different times. Number one was when I was sixteen. I had been going out with her since I was fifteen; I broke up with her when I was twenty.

³⁷ During the workshop process the group defined what they thought promiscuous behaviour involved. All the members of the group were involved in long-term sexual relationships, and they all thought that it was acceptable to have sexual relationships before marriage. Promiscuity, according to the group, involved numerous short-term sexual relationships, whereas numerous long-term sexual relationships (monogamous) were not considered to be promiscuous behaviour. Tabisu's views reflected that of the performer who helped create his character.

Twenty was a good year, I had five girlfriends, I slept with three. It was not out of choice though; there was only one that I was really interested in. It's different in the township you know. Girls want to sleep with the guys, they put pressure on you, and it's expected. I suppose that's because the guys have beaten into the women their role. It makes me angry now, being a man. Moya was number five. Then after Moya I slept with two others, Thandi and Mercy. Mercy was from Zambia, she spoke English better than Moya.

Tabisu's first sexual relationship was long-term, possibly meaning that he equated relationships with sex, or that he valued long-term sexual relationships more than short. When he declares that "twenty was a good year," because of his five girlfriends and three sexual partners, his behaviour seems to have evolved. He begins by stating that all of his sexual relationships occurred at different times, implying that he was faithful. He also accuses township women for expecting sex, implying that if they were not so expectant, men might behave differently. However, he blames men for their behaviour, stating that men 'beat' the women into their behaviour patterns. He says, "It makes me angry now, being a man." This implies that Tabisu views himself as different to other township men, and different to the stereotype.

Tabisu continues with his narrative by asserting his identity, as a man and as a person who is living with AIDS. In the script Moya calls him Tabs, which is a common anglicised abbreviation of his Zulu name. Tabisu feels that it is important to establish his new identity through his real name and through the truth.

My name is Tabisu Solomon Ngubane, not Tabs. I have AIDS. HIV, or the Human Immunodeficiency Virus, is a virus that attacks the body's capability to regenerate CD4 cells that help to sustain the body's immune system. AIDS, or Acquired Immunodeficiency Syndrome is not a disease; it is a syndrome, a collection of information that, as a whole, tells a story. I believe that it is my duty to discover all that I can about this virus that is slowly killing me. Knowledge is power. Don't tell me that HIV doesn't cause AIDS, I have AIDS, I am HIV Positive, it is all in the wording. I don't care how many of our politicians deny the fact that HIV is a sexually transmitted disease, because it is.

Tabisu states his real name, the full name of HIV/AIDS, and he describes what the virus does to the human body and how the syndrome comes to be. In the same way that he has named the different information about his sexual past in order to deal with his current situation, he describes HIV/AIDS as a collection of information that together makes a story. His story is his identity, as much as his name is his identity. He condemns government and other opinions of the time that were sharing distorted information about HIV/AIDS with the public, because the whole story needed to be the truth for his story to be the truth. The idea of AIDS being a myth made the reality of his situation a myth.

The myth is a waste of time. AIDS as a myth is a waste of time. The myth is what kills.

Tabisu establishes that there is a difference between myth and the fact of his story. He decides to take action and to tell his story to all the women of his sexual past.

I needed to begin by telling all my sexual partners my status. I needed to talk, to tell my story. I chose to sleep with each woman that I did. I am responsible for each moment. I could have spread the virus at any time. I now need to say what I've done.

By telling his story, especially to the women of his past relationships, Tabisu illustrates that he can accept responsibility for his actions and that he is willing to face the consequences. The action of telling people places Tabisu in a vulnerable situation and it demonstrates his ability to make himself vulnerable. However, it is possible that his ability to be vulnerable is in his service, as he explains:

I told Moya first. She reacted badly, but I felt better. I felt braver. The truth can set you free. I tried to find Mercy and Thandi, I wanted to tell them too. I then told my parents. They also reacted quite badly, but were not as bad as I thought. The sisters at the clinic were the best though. They offered me incredible support. I've made friends with this guy at the counselling department too.

The process of telling his story to both his parents and Moya required Tabisu to face up to real consequences. However, the more he told his story, the more empowered he felt to keep

telling his story. His ability to maintain a relationship with the clinic-nursing sisters and to begin counselling, are also positive actions that demonstrate his ability to accept the consequences of his past and to deal with them. Tabisu illustrates that he does respect himself, the women in his life and his parents. However, he also acknowledges that AIDS has left him in a lonely predicament...

But it's still lonely. I'm dying alone. I know my fate.

Andrew

As the other student, Andrew is presented as the liberal English speaking 'white male' stereotype. He introduces himself by delivering a fictitious version of an academic course he claims to be coordinating.

Seduction 101: Here's my course overview. Like most courses in the Arts, seduction 101 is broken into two equal halves, 50% practical and 50% theory. The theory consists of one major research project. The practical requires more persistence than anything. Miss one prac and you've probably failed. Concessions can be made. For the research I would suggest you begin as soon as possible. Know your topic. Begin by finding out if she is a student on campus - that makes things easier. You don't want to have a target off campus, too much work. Next, find out her year. First years are easiest. They used to call it "seal clubbing," but that's un- P.C. now. I like to call it "Sexual Orientation". Most first years are inexperienced, even though they would like to think they know a lot. One thing I know, they give a lot. Get to know what degree she's doing. Get the course guide, challenge her subject choices, they like a good challenge. Be funny, but smart, playful, yet careful; remember, it's a learning experience, so if you fail, it doesn't mean the rest of your life.

It is difficult to tell from Andrew's first monologue whether he is being serious or not. He uses language that is known by the students, mixing the language of an academic course and the language of his peers. He describes women as a topic for a research subject. The aim of the course is to have 'one-night-stands', to sleep with the young female students on campus. The term "seal clubbing"³⁸ is a known activity at UKZN whereby senior students attempt to

³⁸ Also mentioned in *It's Not What You Say...*, see section 4.2.

sleep with as many first year students as possible. As Andrew continues with his course overview he tries to establish a level of sophistication that accompanies his ability to seduce women...

Seducing a woman is not as easy as some guys think. It takes a lot of work. Learn how to cook... When I first slept with Moya, it was thanks to my Gran's Mediterranean Fish Dish, with some fresh herbs, and my secret, a few fresh chillies. This followed by a delicious pudding made from baked aubergines and honey. But always be patient and never rush into things. The longer you wait, the more you pretend that you have no interest in sex, the better your chances will be. At least wait long enough for the dishes to be washed. Although, I must confess, sometimes that is my downfall.

Cooking is generally not viewed as a skill that men need to know. Thus, when Andrew describes his method of seducing a woman through cooking as successful, a different variant to his masculinity is portrayed. His intentions are clear though, he is not cooking to feed or care for his female partner, but rather he is cooking to seduce her. The only fault he names, not getting her to wash the dishes, reinforces the chauvinistic characteristics he had developed through his introduction. He proceeds by explaining how to achieve sex and avoid love:

Always be polite the first time. Sometimes it's easier to relax, let the typical male rudeness ease itself in. This is an early warning! Focus on making her feel special, and what does it matter, it's just one night. Never let her spend that first night with you. If she wakes up in that bed with you, you've failed, it means breakfast, commitment, love. Moya spent the night, and then the next, and the next. It went on for a month. That's not what you want! It's sex - not a life sentence!

If the first section of Andrew's course overview was not serious, this section is. He introduces his relationship with Moya. He first advises his listeners not to relax and let the "typical male rudeness ease itself in." Andrew constructs the image of a man who is able to be in complete control of his emotions and of his behaviour. He makes it seem that being kind to a woman is only an act, a performance that can be mastered by following his advice.

If the mission is successful, he sleeps with the woman and she leaves without falling in-love, then there will be no consequences. However, when Moya comes into his life, Andrew lets her fall in love with him. He views love as a weakness, and everything that accompanies love.

Sure, we all have flaws. Mine are many. After Moya and I broke up she got together with that Black guy, what was his name? Tabs I think. Anyway, she was always a bit of an arty-fart. That is her flaw I think. She's too liberal. Mine is that I begin to trust people far sooner than I should. I don't know why? I wouldn't trust myself if I was another person. After Moya had broken up with Tabs I slept with her again, only once. Now I sit here betrayed for the first time in my life. She told me that Tabs had Aids, that the chances were quite high that she too was HIV positive. Well, let them worry about their problem...

Andrew blames Moya for his actions. The reason for his apparent disrespect for women is revealed. He feels betrayed by Moya. However, he assumes the same attitude he has towards sleeping with women, and that is to avoid consequence. He does not want to take responsibilities for his own actions, and being tested would result in consequence, so he tries to avoid testing for as long as he can.

Seduction 101 doesn't deal with ethics. We've already got an established Ethics course. I'm not going to get tested. I don't want to be like one of them. I don't want to be polluted with that virus. If I have it, I'll deal with it when it becomes a problem. I'm not one of them.

He says that he doesn't want to be one of them, and he is referring to people who live with AIDS. Andrew also views sickness, like love, as a weakness. After stating that he was not going to get tested, he reveals that he has in fact been tested, and that he is positive, and that he has been keeping it secret...

You think because I don't get tested that I'm a bad guy? How many of you have been tested. How many of you are registered for Seduction 101? You fucking bigots! Look at you! You all hate me. Throw the first stone. I tell you this story because I'm positive now. I got tested. It wasn't Moya... she's negative. It was one of you, a first year, easy, but dangerous. I got

tested because I fell in love with this girl, Charlotte, and she took me to get tested. I had forgotten this story. But now I have to tell it. I don't tell my new girlfriends, I can't. I just use a condom and keep quiet.

For Andrew the telling of the story does not establish his identity in the same positive way that it did for Tabisu, but instead it illustrates his vulnerability in a negative light. The telling of the story is compulsory because he is HIV positive, because he fell in love with a girl and in his weakness he was forced to receive VCT. He concludes that his way forward has been silence. His silence is a dangerous decision.

Conclusion and reflection

Both Tabisu and Andrew demonstrate the fluid nature of identity and masculinity. The issues that arise out of their narratives are good examples of how stereotypes constructed around men, their culture and race and their sexuality, are not only unjustified, but that these stereotypical perspectives of understanding masculinity can be dangerous.

According to Maxwell (2004), *Say What You Do!* achieved the objectives created by the UKZN AIDS Programme. Maxwell (ibid) names a number of reasons for the play's educational success, such as its ability to stimulate the target audience and thus allow them to engage with the play and the different issues that it dealt with.

I found it remarkable that the Play identified and engaged with the depth and breadth of issues that it did. Amongst those that I consider to be of import are sexuality and gender (specifically masculinity). The data revealed that myth and misconception are rife and need to be identified and dealt with. The data holds examples of these. (Maxwell: 2004)

Maxwell's reference to the data³⁹ that was collected after the play illustrates the level of research that was conducted around the play's effectiveness. Although, Maxwell's report

³⁹ The UKZN AIDS Program conducted three hundred questionnaires with first year students. The results showed that the students who viewed the play *Say What You Do!* were more aware of campus HIV/AIDS resources than students who had not. The comments of the students who had seen the play also illustrated that

mentions the importance of engaging with issues of sexuality and gender, and specifically masculinity, he does not expand on this statement, but rather relies on the data findings to illustrate his point.

CHAPTER FIVE: *The Sacred Cow*

Aims of the play

The primary aim for the creation of *The Sacred Cow* was to workshop a narrative with a group of men that explored their masculinity and identity through the history of land and culture. The director chose to use an exhibition at the Natal Museum displaying a timeline of weapons discovered and used in the Pietermaritzburg area of KwaZulu-Natal, as an inspiration for the play's development. The weapons were all relics of the Zulu nation, dating from iron-age spears and ranging to homemade guns collected from recent political conflict. The director aimed to create a play that examined Zulu identity, and particularly Zulu male identity, in a time of HIV/AIDS. The reason for selecting the exhibition was to explore the similarity between male violence and male sexuality in Zulu culture. The connection between violence and sexuality and the high HIV prevalence in Zulu men and women at the time was what motivated the director to concentrate on these themes.

The director's choices regarding the inspiration for the play, the number of performers that would be involved in the play's creation, and the style in which the play would be created, were his own. The majority of choices for the aims of the play were decided in the workshop space by the group in a process of collaborative decision making.

Considering the group

Unlike the *Say Plays*, individual narratives were not used to construct the script. Therefore less information was gathered regarding each group member. There is an exclusion from the definitions of each member of the group regarding their sexualities and sexual orientation. Although understanding masculinity was a major theme of the play, and all involved in the creation of the play needed to consider issues around masculinity and their own sexuality, they were not requested to share information about their sexual habits. For this reason the section defining each member's sexuality is excluded when considering this group. Including the director, there were eight members of the group, and all were men. Initially there were six performers, however one did not finish the process but his participation was considered vital

for the script's creation. The eighth member of the group, Petros, designed the set that became an integral part of the process. All of the group were registered drama students at UKZN, except for Petros, who was a registered fine art student. Other than the director, each group member is described by his first name:

Arifani

Twenty-one years old. He was English and Shona speaking, and was originally from Zimbabwe. He was educated at a Christian private all-boys school in Zimbabwe. His previous experience of theatre was influenced by western theatre, mostly British, and Zimbabwean forms of traditional performance, and he was a talented actor.

Brian

Twenty years old. He was English and Zulu speaking, and was originally from Zambia. He was educated at a co-ed government school in Pietermaritzburg. Western theatre and American forms of performance culture influenced his previous experience of theatre.

Lindani

Twenty-four years old. He was Zulu speaking and spoke English as a second language. He was educated at a township school near Pietermaritzburg. Traditional Zulu performance and township forms of performance influenced his previous experience of theatre.

Mfanafuthi

Nineteen years old. Zulu. He was Zulu speaking and spoke English as a second language. He was educated at a rural school near Pietermaritzburg. Traditional Zulu performance and township forms of performance influenced his previous experience of theatre. He had experience of singing in the UKZN choir.

Petros

Thirty years old. He spoke an Eritrean dialect and English, and he was originally from Eritrea. He was educated in Eritrea. His interest in theatre was aesthetic, and his understanding of space and the aesthetic were influenced by his Eritrean heritage.

Sandile

Nineteen years old. He was Zulu and English speaking. He was educated at a township school near Pietermaritzburg. Traditional Zulu performance and township forms of performance influenced his previous experience of theatre.

Sizwe

Twenty years old. He was Zulu and English speaking. He was educated at a private, Christian all-boys school. Dance, western theatre and traditional Zulu performance influenced his knowledge of theatre.

The director

Twenty-one years old. He was English speaking, and spoke weak Afrikaans and Zulu as second languages. He was educated at a Christian all-boys private school. Western theatre and forms of traditional South African performance influenced his knowledge of theatre.

Preparing the group

The auditions for *The Sacred Cow* were the beginning of the group preparations. The auditions were only open to Zulu men. Arifani and Brian were not Zulu, but they were invited to participate in the initial workshops and they remained in the production. Four others were selected for the play.

The first audition was aimed at finding the performers with the desired skills. The director was looking for performers who could create work quickly, who could dance and take physical risks, who could sing and who could speak English in a clear and articulate manner. After a few high energy games, which included tag and stuck-in-the-mud, the performers were asked to perform songs, improvised movement pieces and to read from the script of *Woza Albert!* Four other performers were selected.

A second audition was held to consider if all six performers were needed for the production. The improvisations in the second audition were planned more carefully and included three main sections. Cartoons on the arrival of Europeans in South Africa were shown to the

performers. The cartoons told two stories, one of the colonisers and one of the indigenous people. The performers were asked to perform each scenario. The director would then freeze the action at certain moments and ask the performers to share their feelings, their perspectives, what they might have done if they had been the indigenous witness? After these improvisations the group was split into pairs and asked to recite a San/Bushman poem about man, violence and death. The final exercise was to perform a scene from *Woza Albert!*

This audition was the first workshop of the play, as all the performers remained, and some of the action ended up being used in the production. The games that were played became the foundation for games that were played throughout the workshop process and were reflective of the masculine nature of the group.

These games included the normal tag and stuck-in-the-mud, however football, piggy in the middle and touch rugby were inspired by a jersey that had been shaped into a ball. As the rehearsal process developed, authentic sport balls were brought to rehearsals by performers for the warm-ups.

The stretching was also more sport like. It was taken very seriously and the performers helped each other stretch as one might imagine footballers do while they're in the change room before a game. The stretching was normally followed by relaxation and focus exercises, which included guided meditation and breathing exercises.

Exercises such as lifting, jumping, carrying each other and exploring ways of moving together were used to unify the group.

Most of the games and exercises were very physical. The performers were comfortable with each others' bodies and were not afraid to take physical risks. There was a feeling of "sportsmen" like comradeship from the beginning of the process to the end. This definitely affected the outcome of the script.

Collaborative story making

The director was the chief collaborator and brought a number of themes to the workshop process of *The Sacred Cow* before the actors were involved. The director aimed to create a play that examined Zulu male identity and HIV/AIDS. The subject matter that inspired the director was a weapon display at a museum, and this was selected with the objects of exploring masculinity through violence, land and cultural heritage. The performers were not involved in choosing these themes.

The material that the director collected before the workshop process began helped to initiate the theatre making process. Other than the museum weapon display, the director researched the local geography, the local history of political violence, the Bushman and San heritage of area and the local church history. Including research on the Church and the San were inspired by a need to explore the spiritual heritage of the area. Religion became an important theme, as many of the performers were religiously involved with both Christian and African forms of spirituality. This connection with the old and the new, or with ancestor worship and Christianity, was identified by the director before the workshop process began as a relevant and important theme that would bring not only explore a common practice, but also inevitably introduce conflict into the story.

When introducing these themes to the performers the director used creative performative examples and exercises. For example, to introduce the themes of political history, scenes from the play *Woza Albert!* were performed by the participants. These scenes, as well as the cartoon improvisations that were discussed above, acted as an interesting method of remembering the past. All of the cast members were young teenagers during South Africa's violent transition out of apartheid and into democracy, except for Lindani, who was slightly older and had been directly involved in the violence of the time. The director had also lived in a township outside Pietermaritzburg during that time, and I had witnessed the violence almost daily. The army camped on the border of the township with big loaded guns. Vandalised cars, burnt homes and police around covered corpses were often the most noticeable sights when moving through the township. Gunshots rang out every night, often accompanied by screams and shouts. I witnessed an assassination when I was ten years old, I will never forget. I knew

that the participants in the process had witnessed their own horrors, and I knew that although we were young during this time, the freshness of the memories were still vivid.

The next exercise was then to workshop the memories of the past. Through Boal's image theatre, statues were created depicting memories of political violence. The director then acted as a facilitator and a *Joker* as he manipulated the images to extract the emotional memory from the participants. The constant shift of the director from workshop participant, to facilitator and then as the actual director, perhaps illustrated a shift in roles that allowed the director to be both masculine and feminine, directing with linear clear directions, and facilitating sensitively with no aims of any outcomes. The director adopted these roles frequently throughout the process.

The group were tasked to conduct their own research regarding the political violence that occurred near their homes. They were also asked to collect songs that their family would have sung during the protest era, as well as traditional songs for funerals and children. They were also asked to collect stories that they were told when they were children. This research proved incredibly valuable for the creation of the play. Many songs were created and used, such as the 'ant song',⁴⁰ derived from a traditional Zulu belief that when ants appear death is near. However, the most important narrative that was introduced was by Mfanafuthi who introduced the story about Bom-wel, the magic cow that only moved when the young herd boy who looked after it sang. The director used this traditional Zulu story as a comparison to the story of Christ, as the sacred cow symbolised the sacred flesh of man, and the tragedy that we create for ourselves. The sacred cow, Bom-wel, is captured by cannibals and devoured, much like Christ was crucified and is now devoured in communion, and like Christ, the cow is reborn. The rebirth of the cow offers salvation to the boy and to the boy's family.

The story of the cow was introduced by a cast member. The director asked the cast to translate the story. Then a process of performing the English version of the story was workshopped with a sung version in Zulu. By this stage in the workshop process the cast had been divided into character performers and chorus performers, and it was the task of the three chorus members to create the Bom-wel story.

⁴⁰ As described in the script. Appendix.

All the scenes in the play were improvised before they were scripted by the director. The improvisations included all the group members, including the director. The image theatre created around Township violence was a good example of images that were used in the play directly influenced from the participant's memory and observation. The characters of the Anglican Bishop, the taxi driver, the witch doctor and the Afrikaans policeman, were all improvised by the performers from observation. Observation and memory of cultural stereotypes provided the foundation for many of the smaller characters development. Arifani's role was to impersonate a range of characters depicting the colourful characters that emerged from the workshop space.

The exercises used to capture the observations involved the improvisations and images described above, as well as personal story telling about life experience. The stories on life experience were used to create the two protagonists, Sizwe or *Thuthuko*, the dying AIDS patient, and Brian or *Mzwakhe*, his loving friend. Their relationship was very sensitive and compassionate. The nature of their relationship was directly influenced by the actor's life stories. The ability for some of the young men involved in the workshop to show compassion, love and physical affirmation towards each other illustrated a different aspect of masculinity. This compassionate side of masculinity was most apparent in the relationship shared between Arifani, Brian and Sizwe.

Developing the script

The script was then developed by the director with the images and material that evolved from the workshop process. The director deliberately chose to use a very masculine, linear, narrative structure. The hero's journey, as described by Campbell (1956), is a mythological narrative structure derived from Ancient Greek mythology and apparent in the structure of classical Greek tragedy. Below I describe the structure of the play placed in Campbell's hero's narrative.

Structure:

(Time: First era of the Zulu; ends at Bhambatha revolt!)

1. The beginning of the ritual (The Lords Prayer).
2. The introduction of the myth (Hamba Bom-wel).
3. The introduction of the shaman figure and the theme of the play.
4. The introduction of the ordinary world and the heroes (*Thuthuko* and *Mzwakhe* in hospital).
5. The invitation to the dream world and the adventure.
6. The rejection of the hero.
7. The question of the adventure.
8. The rejection of the adventure.
9. The mentor interaction.
10. The acceptance of the adventure.
11. The first threshold (meeting the Zulu's).
12. The making of allies.

(Time: The era of Apartheid; ends 1990.)

13. The journey to the inner-cave (following the river).
14. The inner-cave (jail and the cathedral).
15. The ordeal (stealing the cross of Jesus and trying to kill it).
16. The prize (rebirth and healing).
17. The journey home.

(Time: Now! 1990 to 2002. AIDS and violence.)

18. The chase (the taxi scene).
19. The hero recognizes his change, his predicament and his failure.
20. The hero returns to the inner-cave and dies.
21. The hero's body is returned to the ordinary world (*Thuthuko* dies in hospital).

Any narrative can be placed into this structure, and through looking at the script (appendix), the structure becomes clearer. It follows closely the structure of Greek tragedy and involves a cathartic process. The performers themselves worked through the structure of the hero's

journey when creating the play. It is my belief that the structure of the play influenced the performers by placing their personal narratives into a structure that shaped them and moved them through healing and understanding.

The second part of the process involved less facilitating and more directing. Once the structure was in place and the script had been written, the director moved from a participatory role to a more commanding role. The nature of the process, as discussed above, allowed the director to assume different roles. As a facilitator I was compassionate and sensitive, as a *difficultator* I was sensitive but hard, pushing the participants to question everything that they created, and as a director I was linear and distanced, unemotionally involved in the performers' narratives, and only concerned with creating a piece of sound theatre. These roles in themselves describe the multiple masculine traits that can be recorded in the theatre workshop space.

Discussing the narratives

The play begins with the Lords Prayer sung.

The Lord's Prayer, Our Father, is the patriarchal prayer of the Christian Faith, declaring God as a man, and asking for his forgiveness. This ritualistic prayer frames the rest of the narratives with its patriarchal Christian bias.

Bom-wel Chorus: The father had many sons, he had many fields and he was very rich with cattle. His family was large and successful.

The Lord's Prayer is followed by the Bom-wel narrative. The measure of wealth and success is indicated through cattle, land and sons. This frames the narratives with a traditional Zulu patriarchal bias.

Mzwakhe and Thuthuko

Mzwakhe: No, you're not alone, I'm still here. I love you Thuthuko, don't leave us yet.

Mzwakhe shows compassion and love towards Thuthuko, illustrating his ability to express emotion and vulnerability. These scenes were improvised with the two performers and they shared life experience of dealing with death in their family and of friends, mostly due to HIV/AIDS. Their choice to show these emotions was their own choice, once described by Sizwe as something that he was unable to do with his own brother.

*Thuthuko: (Begins to cough violently again.) I'm the last Zulu man! How can I die like this? (Coughs) Give me time Lord, I pray. (Has a small coughing fit.) God! Help me now, and I will live with you forever ... (Has a violent coughing fit and freezes!)
The son of god!*

Thuthuko begins to believe that he is the last Zulu man left on earth. Sizwe, the actor, came from the Zulu royal family and he was a proud Zulu. Although he had many problems with Zulu culture and that of his own, he expressed great pride and knowledge for his Zulu heritage.

Thuthuko: Are you all right?

Mzwakhe: Yes, I'm fine ... coughs ... I hurt, I think I bleed ...

Mzwakhe: Why did you drop me? Hold me.

Thuthuko also showed constant care and compassion towards Mzwakhe. The theme of male compassion was as important as that of male violence.

Thuthuko: I was not offered the same culture, tradition and morals as you. Culture changes, traditions die, morals, well, I know right and wrong, but that doesn't make me right. Silence, then crying. I was wrong.

Thuthuko: I never knew a god. I was never able to understand. I searched for my god through women, through sex.

Thuthuko expressed a lack of faith in tradition and culture. This was motivated by Sizwe's own doubt in his moral upbringing, which was essentially traditionally Zulu and Christian. Concepts of right and wrong were debated through out the workshop process.

The Shaman character

I am your father's father, I am your ancestor.

The Shaman sets himself up as the patriarch. He plays multiple roles of the father figure. As the Bishop he is found urinating behind a tree, praying to God at the same time. All his characters were very masculine and unemotional.

Sangoma: You must find this God and kill, kill, kill.

Bambata: I'm Bhambata, and I go to War.

Nthabahloko: I'm the soldier without a face. I've been sitting and waiting for freedom. My crime? I killed.

These three characters played by Arifani illustrate the violent aspect of masculinity, and they chronologically describe the constant presence of war and violence of the Zulu people.

The Shaman and Thuthuko

Shaman: You have lived as your culture demanded. That is not wrong. You have also looked at your traditional culture, your ancestors culture, and you have challenged it. You are not wrong. But you must plant that branch, you must give life to your people.

The Shaman also tries to convince Thuthuko to return to his cultural heritage. The cultural heritage described by the cast was interwoven with new culture, such as the Christian faith and urban living. Giving life to this culture was a process of the cast taking ownership of their

individual cultural beliefs. It was recognised by the cast that each of them had different concepts of cultural and moral beliefs.

Shaman: You will not die, you will join your ancestors, you will live. But you will leave your body. The sickness that has taken away your strength has taken many bodies, and will take many more, so save your people, plant the branch.

The selfless task given to Thuthuko by the Shaman is to die for his people. The inclusion of ancestors was heavily influenced by the cast members who all had strong ancestral belief, and although this often compromised their particular life styles, it was a vital part of their identities.

Thuthuko: Coughs and talks. No, call my family, give them my spirit. Coughs continuously. Give me our ritual, our tradition, our culture. It is mine too.

Thuthuko calls for his family and his culture. Family was recognised by all the performers as a vital aspect of their identities and moral behaviour.

Conclusion and reflections on the productions

Unlike the 'Say plays', *The Sacred Cow* was not evaluated by an external researcher. The production itself was not aimed to produce change or to educate, but rather it was created to entertain. However, the participants undoubtedly went through change through their involvement in the production.

The comments on masculinity and culture are relevant to this dissertation. Culture was often named as the cause of sexual behaviour and violence by the men involved in the workshop process. Although many of the participants were proud Zulus for example, they expressed negativity towards their violent history and life experience. However, this was not a Zulu phenomenon. The Zambian, the Zimbabwean and myself, the English speaking South African, described problems with our fathers and the history we shared of patriarchal dominance. This dominance was often associated with sexual acts or violence.

The structure of the play added to the masculine themes of violence and sexuality. The narrative was structured chronologically; the plot followed a literal line, a river and time, and objective of the hero was violent, a mission to kill god. However, this structure suited the all male cast, and it allowed us to explore our identities in a structured model that, through the catharsis of acceptance, allowed us to share and perform feelings, memories and stories that were otherwise difficult to communicate.

CHAPTER SIX: *Carpe Diem*

Aims of the play

Woza Theatre Company contacted the director in 2002 and requested help in the creation of an original piece of professional theatre. The initial aim for the creation of the play, as suggested by **Woza Theatre Company**, was to create a non-educational HIV/AIDS play, and to create a professional play that would create employment and financial benefits for the performers involved. In order for **Woza Theatre Company** to make any real capital, it was important that they add an AIDS play to their already established portfolio. Thus, the primary aim of the play was to ensure that **Woza Theatre Company** earned some money. On this level the play was only partially successful.

Although creating an educational play was not the primary aim of the process, using educational models in the creation process was an important decision of the director. The director's aim was to create a piece of theatre that was entertaining, that engaged with a variety of possible audience members and that strove to create social change through creating consciousness on issues around HIV/AIDS.

The themes that were developed in the workshop space were all relevant to current events of the time. Although AIDS was the inspiration for the play, it was not the major theme. The group aimed to explore the reasons for why HIV/AIDS had become such a devastating pandemic in KwaZulu-Natal, especially amongst township youths. Through looking at Township life at the time, and in the past, the group aimed to explore the repercussions that the severe violence has had on the majority of South Africans. The group was also influenced by the events of 9/11, and the construction of the "War against Terror" concept.

The aims for the style of the play were to work with the skills that the two actors of **Woza Theatre Company** brought to the workshop process. Their style was inherently of the township theatre style, as documented in Chapter Two.

Considering the group

The two performers involved in the creation of *Carpe Diem* were members of **Woza Theatre Company**. Through understanding the history of **Woza Theatre Company**, it will be easier to understand the context of the performers.

Xolani Mdluli

Twenty-nine years old. Speaks Zulu and weak English.

Sibusiso Dlamini

Twenty-four years old. Speaks Zulu and weak English.

Woza Theatre Company⁴¹ has existed in different forms for about ten years, however, due to the unfortunate death of their director and writer, Lucky Mavundla, the company split up as the different members went on their separate ways. The original name for the company was in fact **Walakahle Drama Project**⁴². It was founded in 1993 when a group of sixteen students who were from different areas of Pietermaritzburg and were interested in creating drama, collaborated to create a play. The company went through much change over the years, and was only renamed **Woza Theatre Company** in 2001, with a mind to rebuild what was left of the old company. According to the two actors, (namely Xolani And S’bu, who have both been with the company since it was founded as **Walakahle Drama Project** in 1993), the first work that they created was very amateurish and rough. This production was called *Security*, and dealt with themes of unemployment and methods of self-employment. All sixteen members participated, and it was directed by one of the group, a certain Mothe Mhlokwe. It was not scripted; and relied heavily on humour and improvised sketches. Township songs that were being sung at political rallies, funerals and elsewhere at the time were used as methods of piecing the improvised sketches together. They were untrained, unskilled and uninfluenced by any teacher of performance.

⁴¹ Appendix: **Woza Theatre Company**

⁴² All the extra information on **Woza Theatre Company** was collected during the rehearsals and company meetings that I have had with Xolani and S’bu. It is recorded in my personal journal of the process.

Later in the year of 1993, four members of the group began work on a new play. The play, *Psychopath*, became quite well known in the local community centres, where it was performed. It also travelled to the Playhouse in Durban and to the Market Theatre in Johannesburg, for different Township Theatre festivals. *Psychopath* looked at a group of escaped inmates from a mental institution, and how well they fitted into normal society. The play was originally a concept workshopped by the four members of the group. However, it was during the work on *Psychopath* that saw the introduction of a new member, Lucky Mavundla. He took over as director and writer.

Lucky Mavundla was a teacher by profession who had fled to Tanzania as an exile in 1990. He had been creating theatre and writing poetry before his exile, yet had not had any formal training as a theatre practitioner. There is little recorded history on Lucky Mavundla, so what knowledge of his skills that I have are from his actors mouths. He worked with Ngema (before Ngema's rise to fame), and the group kept up contact with Ngema, who was an obvious source of inspiration and a big influence on Mavundla's style. This is clearly seen in the performance styles that the actors of **Woza Theatre Company** have, and are incredibly similar to those that Ngema and Mtwala had in *Woza Albert*. There is no doubt that their styles are linked, whether it be through Mavundla-Ngema connection or through the influence that the widely toured *Woza Albert!* had on many township youths.

Lucky Mavundla was seen as the new 'father' of the company. He brought with him leadership and focus. After taking over the role of writer and director for the play *Psychopath*, he began to coach the actors in disciplined athletic improvisational skills. He had a clear idea of what he wanted from the actors, and as performers everything was expected of them. The theatre that they created needed to be able to perform at many different types of venue. For this the actors needed to emphasize the use of their bodies, faces and voices. Mavundla explored the actor's potential to cross comfort boundaries with their bodies. This style of performance was typical of Grotowski's Poor Theatre, where the actor was seen as 'holy', and would need to be capable of using his/her body for everything. Mavundla even trained them to sing, often using songs that he had written himself. Thus the actors were encouraged to be as versatile as possible. Xolani and S'bu were aware of a number of the warm-up exercises that I conducted with them, even though I had researched and borrowed

them from practitioners that they were not aware of. Mavundla would not have known of these exercises either, however, through the work that he was doing with them he created his own exercises that focused on training the body and the voice to work as one, with thinking, moving actors. He pushed them physically, and made sure they kept fit. He used exercises that encouraged his performers to merge the body and voice. His theatre was very physical. He also pushed them in character development, and drilled them with physical exercises. The relationship between Mavundla's theatrical style and traditional styles of performance were inseparable. As described in Chapter Two, the link between workshop theatre and indigenous performance culture share many similarities. Mavundla's style of theatre making was a good example of how the two cultures met.

In the performance of the play he looked at using a number of Boal's methods of interactive theatre, or forum theatre. According to the actors, Lucky saw theatre as an important form of communication that worked best when the audience was confronted as part of the action. In performance they would use the audience as characters. They would not pull them onto stage, but perform around them as if they were part of the action. This is very closely linked to oral traditions, such as story telling, where the audience are not separated from the story, but rather included as live characters. There was no boundary between stage and auditorium. Unfortunately, as I did not see any of the performances of Mavundla's plays, I cannot say what aspects of Boal's Forum Theatre he used. However, after participating in a youth theatre festival that Xolani and S'bu had helped organise, I became aware of what they meant by Forum Theatre. Strictly speaking, the interactive style in which they worked was not following any of Boal's models, but what they did was include the audience in decision-making. Whether this was an influence of Boal or not is unimportant, as it also resonates with Brechtian theatre, and in terms of Zulu culture, it possibly even relates to the traditional decision making process. Even when on stage the actors were able to communicate with the audience in a direct manner. The audience felt confident to respond. The feeling I got was that the audience were not watching a piece of theatre, but rather participating in a shared celebration of performance.

Their next work of note was *The Parables*, in which the method of audience interaction became even stronger. It was also a four-hander, and it took the story of the prodigal son and

put it in modern context. Mavundla also wrote this piece, although it was workshopped and the actors did participate in the script development. *The Parables* also travelled it to the Market Theatre in Johannesburg, where it played at the annual Township Theatre festival of 2001; and where the **Woza Theatre Company** played together for the last time.

Preparing the group

After running a few workshops with Xolani and S'bu I became aware of how well they worked together. They had a language that was spoken through their bodies, and they knew exactly how to interpret each other's movements. The style they worked with was very physical, and was rough and improvised. It was physical because they spoke with their bodies. When they focused into performance mode their bodies would take on a new shape. Physical contact with each other would result in over played movements and high tension.

Some of the memorable games that we created together were all based around 'boy sports'. Touch rugby, introduced by the director, became a favourite. It evolved into a character exercise whereby we could express fear, excitement, worry, unhappiness and general emotions through stock male characters running with a ball in hand. These sorts of games also provided boundaries that made the acting space into an important ritual performance space. The understanding of pace, levels and flow was incredible. However, it was rough because they did not work with strict blocking in their previous work. They were not aware of the shape and size of their performance space. I believe that this could have been because there was no audience, and that they are accustomed to performing to live audience. However, these games helped to construct more rigid performance spaces.

I could see that they had a clear awareness of their own bodies as tools of performance. They told me that they saw themselves, their bodies, as instruments in performance. They have worked with creating theatrical belief through voice and body, with minimal support of props or set. They were very athletic and were also able to use their voices creatively. They were also good at improvisations and creating archetypal characters. The theatre that they worked with was able to change from community to community, so often they would have to change between English and Zulu, in order to communicate in the language of the particular

community. This makes them very versatile as performers in South Africa, and especially in Kwa-Zulu Natal.

I was able to identify the style they were using through my experience in other Community Theatre projects, but I wanted to expand on it. After running a number of workshops with them in 2002, I became interested in their physicality. Even the most serious topic for an improvisation could become humorous, because of the way in which they used their bodies to show it. This I realised was also a problem, because it illustrated clearly the superficial nature that characters often took. They worked a lot with stereotypical characters or caricatures, and overacted the physical elements of their movements. That was interesting, but there was a certain focus that was placed on facial movements that got my attention. By placing too much tension in the face, a lot of the physicality of their movements was being lost. Both actors used the same method. This small detail showed how performers, especially performers who work closely together, share performance skills.

In our initial workshops we used many techniques that had been introduced to me in workshops hosted by Malcolm Purkey and Sarah Roberts. Their work was useful because they predominately work with workshop theatre. Purkey's workshop looked at creating improvisations from stories and characters, but it focused on creating issue based theatre. The characters were also quite realistic. Roberts' workshop looked at the actor in space, and at the power of the body in filling and commenting on space. Both these workshops were very helpful in giving me techniques to work on, but they did not give me enough structure to base a model on. During some workshops conducted earlier this year with the U.S. based "Walk and Squawk" team, I was introduced to the idea of workshopping through character development. It was then that I remembered Commedia del Arte and the stock characters that they used to create their skits. I was able to interpret exercises from Commedia del Arte books to create my own techniques for character development. The actors related very well to all these techniques, and I presume it is because of the physicality they involved. There are also close similarities to made between Commedia del Arte and Township performance, as the traditional Zulu stock characters and the short well known sketches demonstrate as described in Chapter Two (Fleishman 1990 and Kavanagh 1985).

Collaborative story making

We began to research into themes of violence, war, HIV/AIDS and masculinity. We spoke about how South African masculine stereotypes played a role in the amount of violence that we experience in our country on a day-to-day basis. We looked at war and masculinity, the “War on Terror” and we remembered apartheid South Africa. We shared experiences of encounters with gangs, vigilantes and other violent male in-groups. It was through this that we began to notice how “sexual” male violence is. It interested us in the possible relevance that male violence might have to sex and rape. So we went back to apartheid South Africa and read up on the army, the township violence and the South African Defence Force. We came to the conclusion that it was through the violent memory of the past, that so many South Africans have not forgotten, that has created a violent ethos in present day South Africa.

The content of the play has been workshopped fully, so the scripting is a completely collaborative effort. However, I have introduced styles of workshopping that they have not worked with before, just as they have introduced styles of improvising that I have not encountered before.

This workshop process began in October 2002. I had only just met Xolani and S’bu, so we were not only workshopping ideas and themes for a possible play, but we were also learning much about each other. I structured the initial workshops very carefully, paying special attention to warm-ups and icebreakers, as I felt that it was important to warm-up physically before the “spoken” work began. During October of 2002, Malcolm Purkey had delivered a lecture to the English Department on his experiences with Junction Avenue Theatre Company, which I had attended. In a section about workshopping, he spoke on how the group participating in the workshop would always begin with yoga, and then sit down round the table and begin the talking. However, with Woza Theatre Company, I was not only interested in creating an environment that encouraged clear thought, I was also interested in how Xolani and S’bu responded to my direction and each others bodies.

I would begin by doing stretching exercises, working the whole body from the head down to the toes. For the stretches we would stand in a circle, face each other, and I would talk

through what we were doing and why. I would then get them to work together, using each other's bodies to stretch and pull, and in so doing become comfortable with the contact and physicality. For me, what became apparent straight away was the ease at which they moved with each other. Their bodies seemed to be as comfortable moving together as they did individually. This was encouraging for me. After the stretching exercises, I would take them through a number of games that involved paired playing. One such game that proved to be quite entertaining was a game that was introduced to me by Malcolm Purkey in a workshop he gave during his October visit to the University. Two people would play together, one being **A** and the other **B**. **A** would begin by trying to make eye contact with **B**, while **B** would have to avoid **A**. The Facilitator would then keep changing who is chasing who. Then, to add complication, words would be given to either of the players. For example, the chaser would be told to apologise while the one avoiding the eye contact would refuse the apology. This particular game was an excellent method of sourcing tension. By adding particular scenarios to each player the game could evolve into an effective improvisation. In those first workshops, this particular game gave me a greater understanding of the skills that Xolani and S'bu had, and what was going to be possible physically.

What was shared through the initial process was used to build trust and understanding between each other. When we returned to the workshop process after a lengthy break, Xolani and S'bu had begun writing a rough script of a plan for the play. However, I told them to leave it, and continue with the workshop rather than distance ourselves from the physical. We needed to keep playing. For the four months of 2003, we met weekly to play. The objective was to learn *new* skills through play. My role was to find exercises and facilitate the workshops. My skills are based in my academic background. In the process of *Carpe Diem* we were able to merge the academic principles with the practical knowledge of two very experienced actors.

Discussing the narratives

As there is no script for *Carpe Diem*, the plot will be described in this section and the narratives will be discussed with reference to the plot.

Carpe Diem tells the story of two young township men, Mamba and Sandile who after a drunken night in a tavern, end up joining the South African Defence Force.

They are old friends, and have shared many experiences together. The story begins in Mamba's foster home, where his foster father is talking with a friend about how expensive it is to have the extra child in his house. Mamba was an abandoned child during the early Apartheid Township violence. He has never known his true parents, and has been brought up by a family who found him at Edendale hospital and adopted him as their own. Mamba is introduced in the first scene as a soft, submissive young man. He is independent and very capable of looking after himself, but his foster family constantly put him down, and knocks all the confidence out of him.

Sandile is older than Mamba, and is the more street-wise of the two. He has been brought up by his family in the township, but has spent a lot of time on the streets. His father is a re-trenched worker who is a severe alcoholic. He beats Sandile's mother and is incredibly patriarchal. Sandile has a younger sister who he is constantly protecting from his father. He also feels responsible for his mother, but as he fears his father's violence, there is often little he can do for her but comfort and talk to her.

The adventure begins one night at a local tavern where Sandile and Mamba have met to have a few drinks. After a heavy discussion about how fragile their lives are becoming in a community that is torn apart by crime, violence and AIDS, the two young men decide to live for the moment. They use the last of their money to purchase a bottle of brandy, and after a slight encounter with some other rowdy youth, they run away into the night. The next afternoon they wake up on a truck, filled with men who are mostly the same age as them. Sitting next to them are two soldiers, in uniform and carrying weapons. As the journey continues they slowly unravel the events of the day. In their drunken state they had

accidentally joined the army. The truck they are travelling on takes them to a training base somewhere far from home.

They are introduced to the rigid structure of the army through some interesting high-ranking officers. Everyone is given nicknames, and the two become known as Mama (Mamba) and Sandaf⁴³ (Sandile). Mama and Sandaf are now members of a new community, which they soon begin to realize is not so different from their old life. The motto of their regiment is “Carpe Diem”, and as the basic training begins they get fed more and more propaganda about the army, their regiment and their relevance to the international community. Their particular regiment has most of its force in Rwanda, where soldiers from the SANDF are sent to keep the peace. But as America’s “War against Terror” grows, so to does the demand for foreign troops. The Drill Sergeant informs the recruits that part of their training will include preparation for war in “Terrorist” countries. Mama soon realizes the contradictions of fighting an unknown enemy, an enemy who has no direct relevance to him or his people, and he begins to challenge his ranking officer, Slow Poison. He decides to be a pacifist and refuses to carry his weapon or to participate in war games.

This brings him to clash with Sandaf who has managed to make himself fit into the army very well. He has adopted his streetwise habits to get his way in the cutthroat environment of the army, as he has an excuse to bully and show off his masculine dominance. He also begins to realize how powerful he is with a pay check and a uniform, and he becomes more and more corrupt. His womanising becomes regular and, like his father, his aggression and violence become second nature.

Meanwhile, Mamba’s real mother, who had been working as a domestic servant in Johannesburg, has begun a search for her son whom she had left at the Hospital so many years ago. She finds the family who adopted him and they tell her that he went missing some months before, but that they have reason to believe that he joined the army. After spending time checking the Armies records, she discovers her son’s whereabouts. She contacts the SADF and Mamba receives a letter that is to change his life. He leaves the army to be with

⁴³ South African National Defense Force

his mother. Sandaf, who was thriving in the army, gets sick and has to leave the army too, but never to return. *Sandile* dies of HIV/AIDS and Mamba reunites with him at his funeral.

Conclusion and reflections on the productions

Carpe Diem was created with no specific themes in mind. All the themes emerged from the workshop process. The overall objective was to enter the theatre workshop space to share skills and cultural knowledge. The story that emerged, and the contents that emerged from the workshop process were however incredibly relevant to this dissertation. The masculine archetypes that evolved out of the story affirmed the connection between culture, sexuality and HIV/AIDS. As in the play *The Sacred Cow*, violence and sex were explored as a means of understanding HIV/AIDS in KwaZulu Natal.

Mark Fleishman (1990: 100) describes the process of Workshop Theatre in three easy steps. Firstly there is Observation. Observation is the research phase of the workshop process. In *Carpe Diem* it was the stage in which we discussed the themes, and shared narratives. Secondly there is Improvisation, and it was in this stage of the collaboration with **Woza Theatre Company** where we were able to share the most. We used the improvisations for a time to play, and through the playing we were able to observe each others skills and developed scenes. Fleishman's third and final stage of the workshop process is the production. We were able to use the production of *Carpe Diem* as a reflection on our research, as we created a production period where the audience was able to give their own opinions of the play. Our objectives were simply to learn from each other, and in so doing share skills. We cannot measure what we have learnt, but through the action of having been through the process, there can be no doubt that we gained from the experience.

CONCLUSION:

In the introduction I named interrelated concepts that act as the primary focus of this dissertation: namely, Workshop Theatre, HIV/AIDS education, masculinities and cultural memory. I argued that it was through the process of learning “how to know” that the participants of workshop theatre change; and that this process would then encourage a greater social change for the spectator during production.

The focus on masculinity and cultural memory helped to define the identity of each participant so that a measure of change could be understood in each workshop process. However, it was also important to include myself as a subject of the research, as I was both involved in the direction of each case study and as the researcher. My identity as a white male South African is explored as a peripheral theme through the way in which I described each participant and each production.

The research aimed to explore problems of gender, masculinity and cultural memory shared by men in the theatre workshop process through looking at the workshop process of four HIV/AIDS plays. The research was successful in drawing information out of each case study, and these discoveries will be discussed in this chapter.

The question of the Methodology

In the chapter on methodologies used in this dissertation I argued that the method used for capturing and using data was essentially participative action research. However, as I stumbled through the large amounts of data that I had collected over the years and began to reflect on it through the case studies, I realised that I was using more of an experiential form of research. In other words, there was no one way of gathering, recording or reflecting on the data that I could use. For each piece of information my approach would have to change. The approach I used was very similar to what I described as participative action research, but was possibly less controlled, and relied more upon my own personal experiences and subjective analysis.

Experiential research places the researcher as a subject of the research. The director of a workshopped play is placed in a similar position. The choices that were made when using the data were therefore influenced by a biased subject. However, the research holds more information through the added subject, as in the case of this dissertation, his experience is documented in a discourse that allows others to use as practical and theoretical knowledge to advance work in similar fields.

Chapter Two: Workshop Theatre in South Africa

Chapter Two deconstructs the workshop genre in South Africa, and documents the role that workshop theatre played as a stimulus for social change. I looked at the process of workshopping or devising theatre as a dynamic space that had allowed important historical narratives to be recorded in a political environment that controlled and often prohibited inter-cultural collaborations. In Apartheid South Africa, Workshop Theatre became an important tool for challenging and pushing for the change of the *status quo*.

In this section of the study, apartheid era theatre forms the base for an argument that workshop theatre did not die when the struggle for democracy was won, but rather it continues being used as a method for creating theatre in South Africa and is often politicised through themes such as HIV/AIDS. Fleishman's work deals largely with defining oral traditions, and in so doing he emphasises the value of the workshopped narrative in South Africa, a country where oral traditions are still common practice due to lack of education and poor resources. By looking at other influential South African theatre practitioners that worked primarily with workshop theatre, and some of their influential plays, I was able to show how narrative was used not only as an important influence on social change, but also as a method of recording history and defining identities.

In post-Apartheid South Africa the political emphasis of workshop theatre began to dissolve, as the country moved into a democratic state, and the need to create theatre for social change seemed to be lost. I then argue for the importance of workshop theatre in the current social and economic crisis that has been brought about by the HIV/AIDS pandemic. I describe the importance of the theatre workshop process as a space for re-constructing identity and

creating a greater understanding of race, culture, gender and more specifically sexuality. I argue that it is through understanding concepts such as these that the participants in a theatre workshop space dealing with issues of HIV/AIDS are able to learn “how to know”, and therefore undergo some level of change.

Chapter Three: The process of creating workshop theatre

In Chapter Three a number of educational workshop processes are described and analysed with the purpose of creating a model to describe the four case studies. Foucault and Freire form the foundations of an argument that politicises HIV/AIDS, education and theatre. Through arguing that health is the duty of each individual, and that the family is the place where the language for health is learnt, I conclude that although the state is responsible for the health of the nation, it is ultimately individuals who construct their own pedagogy of HIV/AIDS. The aim of this argument is to describe the workshop process as a space that challenges the individual participants to construct their own pedagogy of HIV/AIDS, and as such encourage development and possible change.

The process of change is referred to by Rasmussen and Wright (2001) as ‘learning how to know’. It is through the ‘playful education’ that occurs naturally in the workshop theatre process, that helps to define the value of the theatre workshop space as a place of learning.

The workshop theatre process is described through the work of a number of theatre practitioners from many different backgrounds. Fleishman describes the importance of the group, and I argue that learning about the group of participants, or rather learning with the group, is an essential aspect to the workshop theatre process, as it is first and foremost a collaborative process. Barker and Boal offer games that can contribute to forming the collaborative nature of the group, and I affirm the principles of game playing, although I argue that objectivity is rarely discovered in the theatre making process.

However it is selected Theatre of the Oppressed and other educational theatre models that form the foundation for the model that is used to describe each case study. Through describing a selection of educational theatre models, I illustrate that any process of

workshopping theatre is essentially educational, or rather that individuals involved in the workshop theatre process are motivated to change.

Findings in the case studies

In Chapter Four, the ‘Say Plays’ provide examples of two educational HIV/AIDS plays created for specific campaigns. The narrative that evolved out of these plays illustrated the diversity of the male participants’ ability to express their sexuality and demonstrated many different forms of masculinity.

The ‘Say Plays’ were both scripted workshop theatre plays, and as in workshop theatre, neither of the scripts is a completely accurate description of the actual performance. The actors created the narratives, and learnt the words through their own methods before the scripts were available. *Its Not What You Say...* was written shortly before the first performances as a record to remember the script, rather than as crystallised framework for the actors to learn. *Say What you Do!* was partly scripted before rehearsals began and the script served more as a crystallised framework for the actors, however there were many elements of the play that were fluid. That is not to say that the scripts offered in the Appendix are not valid, because they have recorded the actual narratives created by the participants.

Chapter Five explores the narrative structure of *The Sacred Cow*. The narrative structure of the ‘heroes journey’ acts as a catalyst to explore a different approach to creating a workshopped play. The director chose to use narrative structure to initiate the scripting process. The director aimed to create a play that examined Zulu identity, and particularly Zulu male identity in a time of HIV/AIDS. The reason for selecting the exhibition was to explore the similarity between male violence and male sexuality in Zulu culture.

Although this particular process was more influenced by the role of the director, the participants inspired the actual narrative content. The narrative content documented a time of confusion and rapid change in the identity of the male cast involved. Sexuality, culture and religion were all major themes that were challenged through the performance of the play.

Chapter Six describes a township theatre company and a workshopped play, *Carpe Diem*. The two characters escape a traumatic township life through joining the army. The army exposes certain masculine traits of the two men. One of the characters is a pacifist, whereas the other is not. The character who finds the army life more compatible is also promiscuous, and the play makes comparisons with army, violence, township life and sex.

Reflections

The multiple issues of masculinity that arise through the plays *demonstrate* the complexity of identity that exist in South Africa at present. Men are constantly changing to adapt to the constant changes of the country, and of the various problems that exist. HIV/AIDS has undoubtedly affected the way in which men view themselves, and the way in which men behave. Some of these changes are documented through the scripts recorded in this dissertation.

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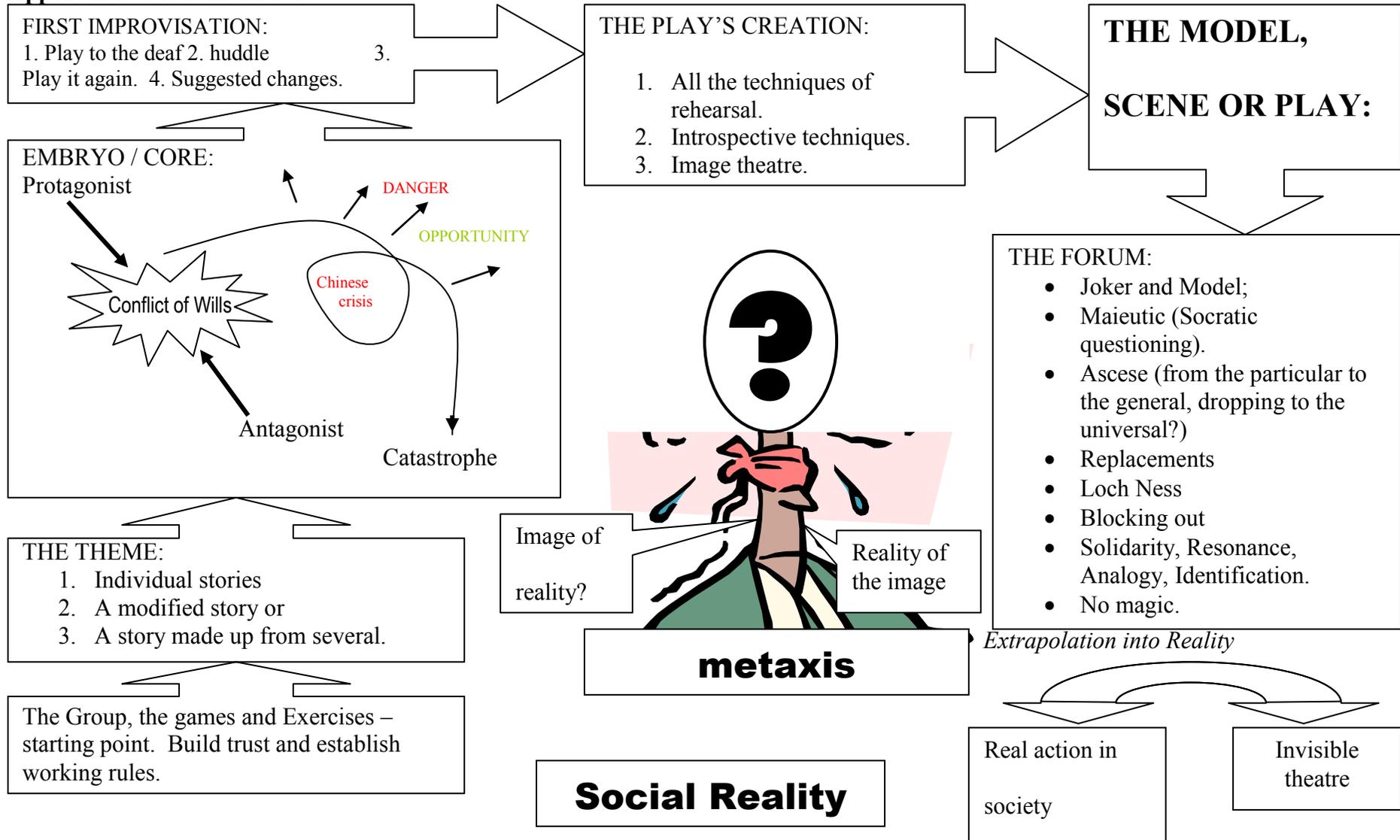
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Appendix 1a: Forum Theatre



Appendix 1b:**⁴⁴REHEARSAL TECHNIQUES:**

Boal, derived from many other sources.

1. Play to the deaf - enact the scene with no words. Do not allow actors to mouth the words. They should try to express the essence of the scene through non-verbal expression.
2. Stop and Think - facilitator calls >stop and think= at any given point in the scene, requiring the actors to do what is the internal monologue of the character at that point
3. Hanover Variation - spectactors raise their hands, and ask questions of the characters. Actors must answer the questions in character.
4. Analytical Rehearsal of Motivation - Play only one core emotion of the character, eg anger, fear.
5. Analytical Rehearsal of Style - play the scene in a selected style, eg kabuki, opera, melodrama, Martha Graham.
6. Same characters, other circumstances - choose other circumstances where the characters are found, and improvise action.
7. Rashomon - each of the actors as characters sculpt their interpretation of the scene, or they tell the story of the scene from their point of view.
8. Silence Action! - Spectactors suggest ways in which the scene could be played, eg. Like a newscast, soap opera, saloon in a cowboy movie. Actors in scene shift accordingly.
9. Somatization - the actors emphasise the body, and expression through the body.
10. Animals - the actor choose an animal that is most like their character, and act the scene as that animal, or director decides the animal, or spectactors decide that animal.
11. Reconstruction of the Crime - as if reporting in an affidavit or in court, reconstruct your version of what happened.
12. Magnifying - do everything huge, as if in a vast stadium in a grand ceremony.
13. I don't believe you - other actors in the scene can say this to each other, and the line, phrase, moment must be repeated in different ways, until it can be felt to be true.
14. Blindfold - do the scene blindfold.
15. Why? - interruption by actor, justify actions of character without revealing the plot line.
16. Botwinik Concentration - create worst circumstances for the scene to be played and do it - eg all scenes overlap, play in a tiny space, dialogue of 2 scenes/sections played at the same time.
17. If it were a fable - do scene as if it were a fable or moral tale of some sort.

THE EMPHASIS IN THESE EXERCISES IS THE CREATION OF REALIST CHARACTERS, EVEN THOUGH THE EXERCISES MAY BE SURREAL AT TIMES. THE ACTORS WILL NEED TO STRETCH THEIR UNDERSTANDING OF THEIR CHARACTERS. ALSO, AFTER EACH TECHNIQUE, THE ACTORS SHOULD BE ASKED WHAT THEY CAN KEEP OF HOW THEY DID THE EXERCISE, TO STRENGTHEN THE CHARACTERISATION.

⁴⁴ This worksheet was devised by Veronica Baxter, University of Natal.

Appendix 2a(i):**Participant observer report: It's not what you say – 11 February 2003****Veronica Baxter**

The cheesy beginning of the play elicited some good belly laughs, although I would question whether all the audience knew that it was self-consciously cheesy. I think that people's aesthetic expectations are so limited they do not really distinguish between styles, but look only for content. This is an area of contention for me. So too with the choreography for the VCT song – it was dreadful, and whether that could be appreciated as satire or not, is debatable.

I think the use of Zulu translation in the condom scene, as a funny dig at whites 'teaching' people about HIV/AIDS worked beautifully and was self-reflexive. Overall the intro of the topic with worn-out messages and styles worked well to raise the issue of why is AIDS education not having any effect.

Once the play moved into the vignettes on different campus experiences, I thought that they audience members were really listening, there was a silence and appreciation that seemed to me to be about seeing something through new eyes.

I noticed though that the 'fag-hag' scene seemed least effective, in that I think the obscenity alienated some of the audiences. A couple left at this point – older and white, possibly religious, who knows. Pity I couldn't ask them why they were leaving. The fag-hag scene didn't really advance the character's sympathy for each other, or our understanding of the issues at hand, I thought. Their individual monologues were better, and the fag-hag thing needs to be revisited.

The worst laughter came from the words of 'Dudu vula' (literally, 'Dudu, open your legs'). It is always appalling to hear people laughing at a scene of violence and misery of a woman, but I suppose I have become used to it, so that I expect it now. Is it through discomfort with the blatant sexual violence expressed in those words, or sympathy with the (black) man's

dominant position in the sexual relationship? Is it that it turns people on to hear words of command associated with sex, or that these words resonate uncomfortably with people's own reality. I don't know, but I'm tired of excusing this response to sexual violence against women.

I think this had the effect of making the 'gay' black character control the audience with his anger. He was clearly psyching himself up for the scene where he describes his gang rape, and issuing a challenge in his performance (of anger) to any audience member who dared to laugh!!!! There was a silence that chilled the theatre, I thought, and I was glad that he had done it, even if it meant that his character became about anger rather than being loved. I think it was a reasonably respectful silence, though, and perhaps with homophobia still prevalent, that is the best we can hope for.

I found the questions and statements fascinating in this audience, and the facilitation by Heidi van Rooyen pitched beautifully for ease and learning.

The first comment was that the play had suggested that we should 'support HIV+ people'. Thereafter more factual, in sequence that they arose:

- ❑ Where do you get VCT on campus
- ❑ Abstinence is an option for everyone
- ❑ AIDS or HIV+ doesn't have a look!
- ❑ What services are available for students who are HIV+
- ❑ If raped what do you do, where do you go on campus.
- ❑ Can you still get the HIVirus through a condom
- ❑ How safe are condoms?
- ❑ Having sex does not prove your love.
- ❑ What is the rate of infection on campus?
- ❑ Where do you get condoms?
- ❑ We all need to work on our own spiritual and emotional defences, not just the physical,
- ❑ Why is infection still happening?

- What chances do you have of contracting HIV if you are celibate?

These comments and questions were dealt with fairly and with some humour from Heidi and 2 of the sisters from the campus clinic, as well as some mentors, I think.

I walked away from the performance/workshop feeling as if there had been some success in dealing with the issue of VCT and HIV/AIDS; and that the play had been a successful catalyst in this discussion.

Observing the Observers.

It's Not What You Say, Thursday 13 Feb 2003

- by Petro Janse van Vuuren

With this play I have come to use the word “homosexual,” called out among many words describing the student population very near the beginning of the play, as the first indication of what the audience is like. For instance, some members of Tuesday’s audience giggled, but at least it was suppressed with a certain feeling of guilt at laughing, or perhaps, as one may hope, because many simply didn’t find it any different from the other adjectives that are mentioned. However, when today’s audience practically fell out of their seats at the mention of the word, I realised that many in this audience was precisely the kind of student the play was designed for. Tuesday’s audience responded with many wise remarks and almost textbook answers during the discussion, as if they were still seeing the problem from the outside. Those in the audience who may have had pressing questions or opinions that differed from what was propagated, may simply have felt inhibited by the ruling feeling that VCT is good, condomising is the way to go and being responsible probably is second nature to most people. Today’s audience had little such illusions and it became clear from their questions and opinions that here was an audience honest enough to admit that they did not agree. This audience identified with the situations portrayed, as will become clear in my report on their reactions during the play, but they were not yet ready to accept responsibility as became evident during the discussion after the play, which I will also review.

Audience reactions during the play

Before embarking on a report of the audience's reactions I find it necessary to note that there is, in my opinion, a very sensitive relationship between the performance of the actor and the reaction of the audience. The actor's timing can determine whether or not her point was heard, digested and laughed at, or whether it flew by unnoticed causing no reaction. Similarly the actor's focus may be riveting, grabbing the audience's attention, holding it, while a lack of focus, or simply inexperience may cause the audience to relax and only take in some of the emotion and information. That said, while particular moments may be lost, or others well communicated, it is still possible to make some general comments about how the audience reacted and which sections elicited more reaction than others.

This particular audience responded well to the 'corn', enjoying the silly songs and the broom demonstration. In a similar way they responded to the first scene between the Christian girl and her boyfriend, enjoying the familiarity with the characters. This familiarity ensured great reaction when the boy left her after sex because she was not a good lay. The shock and disbelief was genuine. There was also a certain amount of familiarity with the rugaboy in the clinic. Many of his terms 'seal clubbing', 'hunt the grunt' and 'the dome' to mention a few, were understood and responded to. Again the climax of his story: the gang rape of the 'rotter', was received with some degree of shock. Admittedly, I was very close to a bunch of white boys, whose responses were vocal and whom I could hear more clearly than other groups.

Other characters had to work harder for the identification of the audience. Few identified with Super Slag although they seemed to be fascinated by her, giving her their attention and responding with a giggle here and there. Her left hand neighbour seemed to do well. His story was less emotional or forceful than some of the others, but he got a few laughs. Much the same can be said about Tabs' friend the 'fag hag'. Although I do feel identification with her was probably the least of all. She elicited few laughs, if any, and did not command silence as some others did.

Then there was Dudu and her angry X. Both worked hard around their Zulu accents, both emoted with force, both had the audience laughing where they should have been shocked or stunned, in my Western opinion. Yet, while this expresses my personal view, I have become accustomed to the way black audience members laugh when they are faced with uncomfortable themes like rape. I therefore derive from this response discomfort, and appropriately so. I do not know, however, if this discomfort can also be read as identification.

Finally there are the two angry lovers from different stories. The one who is dealing with his girlfriend's positive HIV status, the other who, having accepted both his HIV status and his status as black and homosexual, is now dealing with the emotions of having been raped. His hate for the rapists that culminate in his being glad that they may now carry the disease is the central emotion. Both of them are faced with the reality of love in the midst of their troubles. The first's love for his girlfriend, the second who is loved still by his partner in spite of hearing about the rape and the hate. Both characters commanded complete silence and attention, both had moments of magic where the audience was so quiet and the atmosphere so loaded, time stood still. While neither character commanded immediate identification, both managed to draw the audience into their stories getting them to react with silence and, I hope, thought. For the first, I think this is due to his talent and experience as an actor, for the second, to the honesty of his work. It seems therefore, that, having made my general remarks about the audience's responses, I have come full circle. While the audience seemed generally well engaged and responsive, the skill and focus of the actors still played a predominant role.

Discussion after the play

The first question asked i.e. do these things really happen on campus? drew a unanimous 'yes' from the audience, once again showing their identification with the play and their engagement with it. However, many questions and remarks during the discussion communicated a lack of willingness to accept responsibility by the audience, in spite of this engagement. I wish to focus on these remarks. Generally the other questions were mostly concerned with fears like, what happens if you get raped? Is your HIV status confidential once the results are out? Many remarks by sisters and counsellors were aimed at answering

these fears: what to do when raped, the anti retro viral drugs that are available, the type of support offered by clinic and counselling centre. The questions that interest me are of three types, all to do with people evading the issue.

The first type were of the kind that tries to catch out the promoters of the play by showing a logical disparity, or an obvious important omission. There were two of these, both were asked at the very beginning. The first remark was that the play was very interesting, but very confined and showed only one way to contract HIV. The question was answered using statistics: 82% transmissions of HIV happens through sex. Yet, I am concerned that the emotional impetus behind the question was not addressed. I read between the lines that the student was looking for a way to shift his own responsibility: if there were many other ways of contracting HIV, then restricting sexual activity may not even help, so why do it. It would have been more affective if the student was lead to understand that this particular audience was more susceptible to the sexual transmission of the virus than any of the other ways. Although noises was made in this direction, I don't think the message was clear enough. The other question was also trying to show illogical arguing by the promoters of VCT: You say HIV is transmitted through body fluids, what about tears? This question was taken seriously and answered seriously by the sister who explained that tears do not carry the virus, neither does saliva, but watch out for open sores in the mouth when kissing. I did not read it as a serious question at all. To me it was a feeble attempt to catch the play promoters out on their logic. In my opinion this student was also trying to shift the focus and place responsibility elsewhere: If they are logically wrong about body fluids, they may be wrong about many other things and I don't have to listen to them. Again this emotional impetus was left unchallenged.

The second type of question searched for a loop hole, or an exception to the 'rule' that they thought was being communicated. The rule being that all sexual intercourse puts one at risk no matter who you are. There were quite a few of these questions, and they were not asked so maliciously as the two mentioned above. I got the feeling these students were looking to understand the issue fully and get their boundaries set in the right places. The first of these was the question about if it is true that some people are immune to the virus because of their particular blood code. The doctor answered that this was unlikely, eliminating that exception.

The second question asked about the safety of oral sex. The sister answered that it is a lower risk activity, but again watch out for open sores in the mouth. It is, therefore an 'exception'. The following range of these questions communicated to me a student feeling trapped looking for a way out of practising safe sex: If the male is negative and the female positive, what are the male's chances of getting it? My interpretation: If I am negative and have unprotected sex, will I be safe? The sister answered that it is true women are more vulnerable than men because of their anatomy. Again the student's motives were unchallenged. First, he would have to know his own status as being negative, especially if he was sexually active already, before he could start making calculations about staying that way. Secondly, he needed to understand that the risk of the male being infected is still great enough to be worried, even though the risk is lower. Then they tried another exception: what if both were HIV positive? This time the answer was quite clear and satisfactory: then you increase your viral load and speed up the process of reaching full blown AIDS. Lastly one student related a story of an exception from his own experience: he knows a guy who is HIV positive, but neither his girlfriend nor their baby has the virus. Those who had to account for this exception struggled with not having enough info. Did the man have AIDS or just HIV? How did they know? Were the whole family tested? I wondered if the student understood the relationship between HIV and AIDS clearly. I also wondered why he asked the question. I am not sure he was trying to prove that the exception exempted him of his own responsibility: since he was male and if men can have a happy relationship without your girl or your baby being infected, why protect? I think he was truly unsure and maybe misinformed about the relationship between HIV and AIDS. I fear that this was not cleared up for him either.

The third type of question dealt with the kinds of people who thought they did not need VCT, who did not think they needed to know their status. There were three of these. The first was about people who argue, that they are going to die anyway, why should they worry about AIDS and HIV? In a nutshell the answer was that such people should get counselling. I found this a very unsatisfactory answer, since these are precisely the type of people that would not seek counselling. They are the bullet proof sort that can not be argued with. The answer should have been directed at the student asking the question. What are his own motives? Does he feel bullet proof after seeing the play? How many of the characters

thought they were bullet proof and it turned out they were not? There was also a question about the visible signs of having HIV after a sexual encounter. Was there a way to be warned so that you can know you should go to VCT? This question proved that one very important misconception still reigned: VCT is only for people who think they might have HIV. The answer was that there are none such signs. The second part of the answer, while inferred, was not stated clearly: if you are having sex you are at risk and should have it protectedly. If you have had unprotected sex you are already at risk and should go for testing. I did enjoy the sister explaining that one can only be tested for HIV once a year for free and not every time after intercourse. I say ‘enjoyed’ because it seemed as though she was getting fed up with these evasive questions, as was I, although I was getting more fed up with the evasive answers. I also thought it was appropriate to reiterate the issue of a three month window period. This info was, however given later on and not in direct response to this question.

The last question, not only of this type, but of the session, I thought was probably the most important one and I was frustrated that it could not enjoy the attention and time it needed. The point was made that the play did not illuminate the disadvantages of VCT, especially for people as young as the speaker herself. She also mentioned that she had no symptoms, why should she go. Again the misconception that VCT is only for people with symptoms came up, and again I felt that the relationship between HIV and AIDS was unclear in her mind. None of these were addressed. I appreciated, however, a remark from one of the audience members that it is about putting other people in danger and being considerate to them, a point that was not made forcefully enough anywhere during the discussion, in my opinion. I was also satisfied that the last remark was, if you are having sex, you are already at risk. VCT is for yourself to know for sure.

Feedback for campus-clinic and SCC.

By: Condom Man

To begin with, I was kind of getting bored to just sit at home and doing nothing. Therefore, I was so excited to hear that I was going to contribute to our first year students during their orientation. Also, I was motivated that my role was going to be of constantly essential for their well being in the challenging university life. Above all, I personally like to educationally socialise people since I respect every person, regard less of his/her age, gender,

race, religion etc, and therefore care for life (Continued-Living) and this is one of the reasons why I am intentionally majoring in Human Resource Mgt.

So, for the above reasons, I was not feeling nervous to do my job:-wearing a condom-suit, handing out, especially male condoms, and demonstrating how to properly use the female condoms as well as the male condom, handing out some HIV/AIDS related pamphlets and so on.

The following are the reactions of students to what I was doing (Condom man's duty):

For the first day (Tuesday)

It was on Wednesday right after the play at the Hexagon Theatre, I put the condom costume on and I stood up as I was being introduced. And most of the students who were there their reaction was to laugh at what I was wearing since it was so fascinating.

Again, on their way out, as the play was over, most of the students, especially guys were not shy to accept condoms as I was handing them out. However, some girls were reluctant to accept condoms but I think one of the reasons why they were reluctant was the fact that it was only male-condoms. In addition, I think another reason why some girls were reluctant to accept condoms was that if they did it would have seen as if there are already in a sexual relationship.

- ❖ On the **guys' side**, almost from all racial groups (Africans, Asians, Coloureds & Whites), they were willing and therefore not afraid to accept condoms. I remember one Indian guy I approach took approximately half of the box and he was a "mentor."
- ❖ However, on the **girls' side**, I noticed that most of them who accepted condoms were white girls and were feeling free to take some.

Moreover, most of the students, both males and females, were curious to get to see my face and then know I was. For this curiosity that they had, my duty was made easier since as

approached both the individuals as well as groups they would accept me with a wondering smile due to the funny “Condom Costume” that I was wearing.

Also, in cases where certain students refused to accept condoms, I was kind of lightly persuading them not to be afraid to take some by saying: “I want to protect their lives because the varsity life can be challenging”. However, I strongly encouraged those who declined to take condoms the reason being that there are **abstaining**.

Finally, on the first day (Tuesday), I even got help from five different guys (two Africans and other three Indians) who voluntary offered to help me give condoms to students.

On the second day (Wednesday)

I began working from 11:30am up to 14:20pm, in fact I was really enjoying doing that job. Basically on this day there were different tables representing various services that are available here at the university including Financial Aid, Student Counselling, Campus Clinic, RMS, Finance and so on.

Mainly on this day I had to make a demonstration of a female condom and also to hand out HIV / AIDS & STD related pamphlets to students. Amazingly, the curiosity as well as amusement was still high as a result of that fascinating condom costume that I was wearing.

For approximately three hours I chatting, demonstrating and handing out pamphlets to students. This time around, almost every was willing to accept mainly pamphlets.

Most of students were seeing female condoms for the first time and I noticed that guys more interested to see female condoms and to get to know to use it, than girls did.

However, most of girls were uncomfortable and therefore tried to avoid me to demonstrate to them how to use female and most of them were Indian girls and one girl even asked if I wasn't nervous to do what I was doing. Some said they already know it and also to use it.

On the other hand, some girls were interested, especially white girls, and some even asked if they could have some. And they were happy to hear that they are available in the campus clinic and that they were free of charge.

In summing up, the way I saw it, it seemed as if most of the **mentees** are more than willing take good care of their lives and therefore behave accordingly in the varsity as most of girls I approached were insisting on abstinence. And for guys, I would say it was promising that they would use facilities available to them as most of them were not afraid take condoms and therefore stop the spread of HIV / AIDS and other STDs.

Appendix 2a(ii):



STUDENT LEADERSHIP PROGRAMME

HIV Component

Student Leadership Development Office
 Centre for HIV/AIDS Networking (HIVAN)
 Centre for Visual Arts

1. INTRODUCTION

South Africa continues to have one of the fastest growing HIV epidemics in the world, with an estimated 4,7 million people currently living with HIV. KwaZulu-Natal (KZN) has the highest infection rate in South Africa: John Wright, Chief of Training and Development in the KZN Department of Health is quoted as citing that an HIV prevalence of 36 - 38% exists in KZN alone, with approximately 600 people dying of AIDS daily. Research has shown that young people are particularly affected by the virus: firstly by being especially vulnerable to infection and secondly burdened by the reality of coping with the grief and shock of losing a family member or close friend to an Aids-related illness.

Although no clear data are available on HIV-prevalence at the University of KwaZulu-Natal, projections allude to a possible 16% of students being HIV-positive. In informal conversations held with doctors and nurses from hospitals and clinics in the vicinity of the University that treat our students, they often challenge this projection and express the belief that the prevalence levels are a lot higher - closer to 30 - 35%. Although a concerted effort is dedicated to a comprehensive prevention, care and support programme on campuses, there are still many myths and misconceptions that abound - both in the minds of students and staff. Some examples include:

- Certain White and Indian students believe that HIV is not their problem and that only poor rural black people get HIV/AIDS
- Students that occupy leadership positions believing that they are immune to HIV-infection
- Fear of disclosure among students to academic staff due to a belief that they will be academically excluded because of their HIV-positive status
- High levels of fear among HIV-positive students that peers will reject and ostracize them

Students are at a development stage of their lives where they do not think long-term and do not necessarily think of their actions having long-term consequences. High levels of denial exist within our student body as to their own vulnerability to HIV infection. For many students - especially those that live in residence - university presents a time where for the first time they are independent from their families and can explore a new exciting way of life. Inherent in this new way of life are many high-risk factors that expose them to HIV-infection. Peer pressure dictates that having

multiple partners is desirable. Wearing expensive clothing and having an expensive cell phone means acceptance and often students - especially women - are exposed to exploitative sexual relationships to fund this lifestyle. Bashes can involve excessive alcohol and/or drug consumption that compromise choices around safe behaviour.

Student leadership structures have an important role to play in fighting HIV/AIDS at the University. In most instances, students have been elected into their positions and enjoy the support and admiration of their peers. They have an important role to play in role-modelling safer behaviour. For them to be able to role-model this behaviour, they need to have internalized their own risk to HIV-infection and be well-informed about HIV/AIDS. It is envisaged that the HIV component of the Leadership Course provide students with these necessary experiences and skills.

Appendix 2a(iii): Review by Nicholas Munro

Review: HIV/AIDS play for orientation week

From: Nicholas Munro
 Senior Psychologist
 Student Counselling & Careers Centre
 University of Natal, Pietermaritzburg

The play on HIV/AIDS for the orientation programme on a whole proved to be successful in heightening personal and social awareness around Voluntary Counselling and Testing (VCT) and HIV/AIDS for first year students.

Two specific issues, however, stand out for comment. These include :

1) Benefits of knowing one's HIV status

Comment:

The HIV/AIDS play emphasizing Voluntary Counselling & Testing (VCT) was effective to a certain degree in revealing to students the benefits of knowing their HIV status. Specifically, facilitated discussions around the play indicated that most students were far more able to echo and feedback the benefits of being tested in the instance of a test result being negative, than they were able to appreciate the benefits of knowing that one is HIV positive.

The benefits of knowing that one is HIV positive is a far more difficult benefit to communicate to anyone and is not reflective of any shortfalls of the play.

Recommendations:

Assisting students in taking the step to seeing the benefits of knowing you are HIV positive is an extremely difficult task. Efforts at doing this, however, could be initiated through the play by emphasizing more positive experiences of characters portrayed with the HIV virus. Many of the characters with HIV in the play were portrayed in intense (often negative) psycho-social contexts. Instinctively, students may resist identifying with these characters as a means

of psychologically separating themselves from these characters. Not identifying with HIV positive characters may prevent the audience from appreciating the benefits of knowing that one is HIV positive.

For example : Although Thabo did have functional and healthy relationships despite his HIV status, his sexuality and rape experience (although realistic phenomena of our society) may have made it difficult for students to connect and identify with him as an “positive” HIV positive individual. Can students (or do they want to) see a part of themselves in an individual experiencing these kinds of issues?

Conversely, many of Thabo’s experiences (and other characters with HIV in the play) did function to enhance dramatic effect of the performance. It is these characters and their experiences that may have added to the richness and intensity of the play. I imagine this is a difficult performance/audience identification issue to integrate in educative productions.

2) Coverage of psychological dimensions of sexuality and HIV/AIDS

Comment:

In summary, the play accomplished great strides in communicating to students the complex interaction of psychological and social dimensions of HIV/AIDS. It expressed very clearly some of the more abstract (emotional and interpersonal) factors that may explain why individuals still contract the HIV virus, despite the numerous HIV/AIDS related messages students and young people are exposed to.

Specifically, the play touched on issues and feelings of love, hate, lust, power, shame and guilt that are often devoid in educative processes where HIV/AIDS and sexuality are the focus. Students are frequently encouraged not to engage in risky behaviour, but other hidden issues such as those mentioned above are not emphasized enough and communicated as part of the infection route. Preventing infection with HIV/AIDS is more than just the simple knowledge of refraining from risky behaviour, but is also about acquiring the knowledge and understanding of the issues and feelings that accompany risky behaviour. As indicated, this is well catered for in the play.

Recommendations:

The play needs to ensure that it continues to present and make explicit to its audience that going for VCT, getting infected with HIV/AIDS, and not getting infected with HIV/AIDS also requires an understanding of one's own emotional and behavioural processes.

Appendix 2a(iv):**'It's not what you say'**

Produced for the UN AIDS Programme and performed as part of orientation

Evaluated by Debi Tromp

March 2003

In this section the elements necessary for an audience-centred production to be successful as an HIV/AIDS intervention are presented as questions directed at the play, 'It's not what you say'.

Brief synopsis of the play:

The play was created through a workshopped process. Cast members and the director conducted basic research through informal discussions with friends, observations, personal experiences of Voluntary Counselling and Testing (VCT) and HIV/AIDS counselling and interviews with campus health staff and members of the AIDS Committee and then used these to workshop and develop the play: 'It's not what you say'.

The key aim of the play is to promote VCT as a viable and preferred option. The play uses this theme to explore HIV transmission and prevention both for those who test positive and negative, and to explore positive caring attitudes towards those infected and affected.

The stage is bare. The play begins with the actors walking randomly about the stage and eventually forming a walking circle calling out different categories, stereotypes, labels and names for the various students that make up the student population. These are directed at fellow actors and at audience members.

This moves into a self-mocking and satirical address to the audience about AIDS education. The idea of creating 'another' AIDS play is mocked with great enthusiasm, indirectly addressing the resistance to AIDS education that seems common among young people at present. This includes the introduction of the VCT theme with a 'cheesy' song and dance routine that recurs as a leitmotif throughout the play. A condom demonstration using a broomstick is enthusiastically presented by a white cast member and mockingly translated into Zulu with asides about whites teaching blacks.

This comedy routine then breaks into a series of short monologues, scenes and presentations to the audience by a variety of recognisable university student types. These short vignettes include:

- The young Christian girl who is persuaded by her jock boyfriend into sexual intercourse and then dumped by him.
- The rugga-buggar jock boyfriend from above with a history of highly sexist and misogynist sexual exploits.
- The young male student who's much loved girlfriend has tested HIV positive.
- The black gay man who has tested positive and who has experienced gang rape at the hands of a group of homophobes on campus.
- The 'fag-hag', a sexually active young women who has begun to use condoms as a result of her friendship with the gay man above.
- The sexually adventurous young woman who was aiming to be as sexually free and experimental as a man before she recognised her own vulnerability to HIV infection.
- The black woman who was raped by her boyfriend when she tried to insist on condom use.
- The black man from above who raped his girlfriend and who is now becoming ill but still sleeping with many women.

These characters speak directly with the audience telling their tales of sexual exploit, exploitation, happiness, sorrow and their encounters with HIV/AIDS. This is broken by a revisitation of the VCT theme song, almost as a commercial break.

Is this play a successful piece of AIDS Educational Theatre?

1. Does the play promote ownership of the problems and solutions?

Through presenting recognisable character types to which the audience can relate or in which the audience members may identify themselves, the play does create a sense of ownership of the problems and possible solutions. Audience members are able to observe and vicariously experience the consequences of various problems and solutions. The lack of active participation, however, of the audience during the play does raise questions as to the depth of ownership facilitated. This is somewhat mediated by the question and answer session that follows the play. These sessions, however, were uneven from audience to audience, with some of the facilitators unable to relate to the world of the students adequately and thus not addressing the true concerns and issues hidden in some of the questions.

2. Does it use recognisable cultural forms to communicate?

The play combines a number of current cultural forms that are familiar to the target audience. Elements of reality TV, game shows, Big Brother, soap operas, music videos and docudramas are all presented with energy and vigour. One of the key issues the cast were confronted with was the apathy of a target audience who believed that they had reached saturation point regarding HIV/AIDS information. The initial scenes of the play are presented in a self-mocking and 'cheesy' game show style with cast members being over-enthusiastic about the AIDS theme. This stylistic choice is extremely effective in that it directly confronts, recognises and plays with the resistance of the audience to another AIDS play. The audiences responded with laughter and what appeared to be a dose of self-mockery to these scenes and seemed to visibly relax, providing fertile soil for the more intense, realistic and emotionally honest scenes and monologues that followed.

3. Does it present the audience with a vision of their own world?

The majority of the cast members are students themselves, with two members of a local community theatre group joining the ensemble. They are close enough in age to the target audience and close enough in time to the experience of entering campus for the first time to be able to create characters and scenarios that ring true for the majority of the audience members. In addition, the wide variety of different character types spoke to the cultural backgrounds and personal experiences of the majority of the audience members. It was a pity, however, that the cast did not include at least one Indian member as this cultural group often finds the transition to campus quite dramatic.

4. Does the play explore crucial issues without imposing values?

Although the individual scenes and characters present the audience with specific values and judgements in operation, the collective effect is of the presentation of a heterogeneous campus community representing a wide variety of lifestyle choices and options. The only value judgements made were regarding the relative safety of certain behaviours. The play is careful in avoiding judging the people indulging in the more risky behaviours. These characters are presented to the audience for judgement. And in many cases the audience did make value judgements: the rugby jock who persuades his virgin girlfriend to have sex with him against her better judgement and then dumps her is judged with gasps and tongue clicks; the boyfriend struggling to come to terms with his love for his HIV positive girlfriend is greeted with nods and sighs of support.

One character, however, stands in contrast: the male who rapes his girlfriend when she requests they use condoms. His aggressive calls of ‘Dudu Vula!’ (literally ‘Dudu Open your legs!’) were greeted with laughter from each audience. It has been observed that predominantly black audiences have a tendency to laugh at scenes of violence especially when the violence is directed at women. Why this is has not been adequately investigated. ‘Is it through discomfort with the blatant sexual violence expressed in these words, or sympathy with the (black) man’s dominant position in the sexual relationship? Is it that it turns people on to hear words of command associated with sex, or that these words resonate uncomfortably with people’s won reality?’ (Baxter, 2003) In such instances one must question whether a less open ended and slightly more incisive attitude to making value judgements may not be necessary. Violence and oppressive sexual behaviour towards women is, after all, one of the key factors facilitating transmission in Africa.

5. Does the play facilitate two-way communication thus transforming the audience into active beings?

‘It’s not what you say’ is a piece of Educational Theatre. Educational Theatre is one of the least participatory forms of audience-centred theatre and drama. The choice of this more presentational and didactic form of theatre was made predominantly because of time constraints and audience size: the play, including the discussion session afterwards, had to fit into a slot of under one hour and had to be presented to large groups of 50 students and above. The more participatory forms of Theatre in Education, Drama in Education and Forum Theatre are often very time consuming and are difficult to facilitate successfully with larger groups. Thus, ‘It’s not what you say’ does not initially encourage direct two-way interactive communication between the actors and the audience. The interaction happens during the question and answer discussion session after the play. This session could, however, be better managed. These sessions did not involve the cast, either in- or out-of-character. Rather they

were conducted by nurses from the local Campus Health Clinic, by psychologists from the Student Counselling Centre or by lecturers from the Drama Studies Department. This effectively separated the discussion from the play where an integrated approach would have served better. The play should have been viewed as a 'code' or catalyst in the Freirian sense, and the interactive session afterward could have been used to 'unpack' and personalise the issues raised in the play. Characters could have been present so that the audience could 'hot seat' them with questions and comments and an actor or the play director could have acted as the 'joker'/facilitator in the Boal Forum Theatre mode to guide the discussion. In this way far more detailed, focussed and meaningful discussions may have been facilitated creating two-way communication with the audience and thus encouraging personalisation and action.

6. Does the play encourage debate about various perceptions of the world?

The play presents the audience with a wide variety of character types, a view into their lifestyle choices and the consequences thereof. It does not make value judgements directly, but rather raises issues for debate through contrast and comparison. It does, however, not really take these issues into active debate. The hope is that this debate will happen post-production. Small pockets of debate did erupt during some of the question and answer sessions, but these were not adequately encouraged and facilitated. Unfortunately, it was not within the brief of this evaluation to follow-up on audience members in detail and thus the efficacy of the play in generating post-production debate has not been established. It can, however, be speculated that audience members did in fact discuss and debate the issues post-production as this has been identified as one of the strengths of theatre as an educational approach. As a social activity it is not confined to the classroom and often bleeds into the social context of peer discussion and debate. However, the recommendation given above regarding a more integrated question and answer session stands for this issue as well. A more carefully facilitated discussion session could be used to engage the audience in active debate of the various perceptions of the world presented in the play.

7. Is the play holistic in that it targets the mental, emotional, physical and spiritual elements of the audience?

The play explores information and the understanding and interpretations of various characters of this information. It presents emotions, and attitudes and values in action. It shows the behaviour and physical action that can result from this information and these attitudes, and the consequences that may result. It also explores the existential and spiritual elements of young people faced with a life threatening illness. It does, however, present these explorations to the audience who experience them vicariously rather than first hand as would happen with a more participatory mode of theatre.

8. Is the play audience-centred?

The play is audience-centred in that it successfully captures recognisable student character types and situations, evidenced by the audience responses, and that it offers realistic and feasible suggestions and options that are within the capabilities and resources of the students to implement. It falls short of being truly audience-centred, however, in that it is not participatory. The audience does not have decision making power over how the topic is addressed, presented or explored, or which problems are prioritised and what solutions are tested out. The audience members do not get to step through the fourth wall and become the protagonists using the medium of theatre to explore the reality of HIV/AIDS in their own lives.

9. Is the play experiential?

The most basic experiential learning cycle takes the learner through an interactive process of action or experience, reflection, theorising, and planning for further action. 'It's not what you say' presents the audience with a series of vicarious experiences presented by the characters. These characters reflect on their experiences and in some cases come up with theories regarding their behaviour and actions. Some of the characters make and carry out plans and report the success of these back to the audience. Thus, the entire experiential learning cycle is modelled for the audience. But one again, the audience does not go through this cycle but rather observes the actors do so.

10. Does the play bank information or does it facilitate the growth of understanding?

The play combines banking and facilitation of understanding. The theatre piece itself presents the audience with information about VCT, HIV/AIDS infection and transmission, prevention and positive attitudes towards people with HIV and AIDS. But it presents the majority of this information in practice through the stories of the characters, thus facilitating a richer understanding of the information and the way in which it plays itself out in real life contexts. A more participatory and drama orientated discussion and interactive session at the end of the play would, however, facilitate a deeper understanding for the audience in that audience members would be able to act upon the information through role-play and interact with the information by questioning the characters.

11. Is the play constructionist and goal orientated?

The play does not contain this element. The audience does not construct anything or move towards any tangible goals other than the goal of gaining more information and a deeper understanding of HIV/AIDS and the services and options available on campus.

12. Does the play identify and help the audience personalise the need to change risky behaviour?

The play presents the audience with recognisable characters and situations they can relate to. The vicarious experience of watching familiar character types indulge in risky behaviour and suffer the consequences will go a certain distance towards helping audience members to personalise the need to change their own risky sexual behaviour. One of the major obstacles to overcome, however, in HIV/AIDS educational interventions is denial. Many people believe that HIV infection cannot happen to them. Such denial unfortunately cannot be easily broken and active engagement and participation in the process of change is usually needed. The presentation of a play such as this can begin or form part of a process of personalisation and behaviour change. In order for it to be truly effective, it should be embedded in a broader and more far reaching campaign.

13. Does it reinforce positive and healthy behaviour?

'It's not what you say' focuses more on presenting the audience with images of risky behaviour and the consequences of such behaviour than it does on exploring, reinforcing and supporting positive and healthy behaviour. It could be argued that this play is the first step in a process. It is the first real HIV/AIDS educational intervention the first year students will encounter and it will be backed up by other elements of the UN AIDS programme. It is thus appropriate that it should raise critical awareness of the various problems and risky behaviour choices facing the new students. The play also promotes VCT. One of the key aims of the

counselling component of the VCT process is to help the client explore his or her own adoption of positive and healthy behaviour. Possibly, later campaigns on campus could focus on this more positive aspect and less on the problems and behaviours that increase risk.

14. Does the play encourage personal responsibility in audience members for their own health and the health of their community?

The play presents a strong case for personal responsibility. It creates a healthy balance between the rights students enjoy on campus, such as access to health care, and the responsibilities they should carry. The focus is on individual responsibility for making wise sexual choices. This is presented within the social forum of the theatre and thus within a context that reinforces the community and peer motivational support for responsible and positive personal behaviour.

15. Does it encourage community involvement and peer support of positive and healthy behaviour?

The choice of the social medium of theatre with its roots in community ritual and oral culture brings with it an underlying theme of community involvement and peer support of positive and healthy behaviour. This is especially important within the African context where for many the locus of control is external and social normative support of new behaviour is required before individuals can embark upon change.

16. Does the play facilitate the provision of the knowledge, skills, attitudes and motivational supports needed by the audience to change and maintain changed behaviour?

This question has been addressed in various forms above. In summary: the play presents knowledge, skills, attitudes and motivational supports in a vicarious form. As such it forms a valuable introduction to or part of a broader HIV/AIDS programme the aim of which is to facilitate, support and maintain behaviour change. The direct impact of the play itself could be improved with a more carefully designed and integrated post-production interactive discussion session.

17. Did the play entertain and capture the interest of the audience?

The play is entertaining, amusing, energetic, and serious and sad in turns. The audience laughed, commented, clicked, gasped, sighed, nudged each other and, on the whole, were captivated.

18. Finally, does the play raise critical awareness and empower the audience to act? 'It's not what you say' is an apt title. The play focuses on presenting the audience with real characters struggling with real problems and the consequences of these problems. These characters learn through their own experiences that action is required to prevent HIV infection and to address the stigma associated with being HIV positive. The audience is taken on a vicarious journey through the knowledge, skills, attitudes and motivational supports required to identify and personalise risky behaviour, identify viable safer options, and find the peer and campus based support and resources needed to make the needed changes. Although the play in itself may not go all the way to empowering the audience to act upon what they have learned, it is a powerful step in the right direction.

RECOMMENDATIONS

Three key recommendations can be made on the back of this evaluation.

1. Integrate the discussion session at the end of the play

This has been discussed in some detail above. A play of this nature will have a greater impact upon the knowledge, skill and attitude development of the audience, a greater impact on audience empowerment for action and a greater impact on providing communal motivational support if the audience members actively participate in at least a part of the process. A carefully designed and well facilitated interactive discussion session after the play can achieve this. Such a process will necessitate the training of cast members as HIV/AIDS educators and the use of Forum Theatre techniques such as hot seating and facilitation by a joker.

2. Embed the play in a broader HIV/AIDS programme

This play is one of the first stages in a broader HIV/AIDS programme for 2003 on the four campuses of the University of Natal. It is essential, however, that this campaign is not presented as a series of disparate and unrelated activities. The foundations laid during this play should be built upon and all future activities should be able to refer both to the play and to each other. In this way, an integrated and consistent series of messages and supports will be offered to students.

3. Follow-up with a focus on reinforcing positive behaviours

The focus of this play is of necessity on the problems that the new students may encounter. The solutions offered, such as VCT and condom use, are not explored in any great detail. Follow-up activities in the broader HIV/AIDS programme should explore the positive options for learners in greater detail. These follow-ups should include skills development processes as well as the creation of an environment of social and peer support for positive and safer behaviour.

CONCLUSION

The production 'It's not what you say' is a good example of the successful use of audience-centred theatre for HIV/AIDS education. It captured the interest of the audience; it broke through the current resistance and apathy regarding HIV/AIDS information; it presented recognisable and real characters to whom the audience could relate; it allowed the audience to vicariously experience the risky sexual behaviours and consequences suffered by these characters; and it presented the audience with information regarding safer options available to them on campus. It did this within a social context thus reinforcing the peer and motivational supports needed for individuals to embark upon behaviour change. The play achieved a great deal given the limitations placed on it: limited time, the need to be easily transportable, and limited rehearsal time.

In addition, the University of Natal now sports ten new committed HIV/AIDS peer educators in the form of the cast and director of this play for whom the process and experience of researching, creating and performing the play has been a life changing experience.

Appendix 2b(i): Commentary**Say what you do**
Commentary

The play displayed the student culture and life in an engaging yet informative way. It was particularly impressive how factual information about services on campus and the level of risk of transmission of HIV/AIDS was merged without being boring.

While one can think of a lot more practical information relevant particularly for first year student, such as not being 'easy' and how to cope with freedom to express one's sexuality without being at risk, the play communicated relevant information and can be relevant to a greater audience including returning students.

The discussion forum that followed the play not only assisted in drawing out more information, but served as an indicator of interest which I interpret as success of the play.

I however recommend that in future the time spent in larger discussion forum be limited and Mentors further facilitate discussions in smaller groups, obviously with support from staff or Senior Peer educators.

I further suggest that the play be staged again to the larger university community at different stages in the year.

Emily Mabusela
CASU Co-ordinator PMB

Appendix 2b(ii): Methodology J1**Problem Statement**

The AIDS play component of the University Aids Programme started in 2003 has been evaluated according to the theoretical aspects of the play as a form of educational drama (Edutainment). An assessment of the impact of the play on the University community has, however, not been researched. This would require research of an experimental design, while the feasibility of doing an experiment is low. However, the process of the play, and the experiences of those involved in its production have also not been explored. This is particularly important in ensuring the sustainability and growth of the Aids Play. The following research questions will be addressed in this research.

- How does the Aids Play contribute to the UAP?
- What was the main message of the play, as heard by the different student groups?
- Were students receptive to the main messages around which the play was developed?
- How did the AIDS Play, and the process of producing the play, contribute to the different stakeholders?

- What is the 1st year students' knowledge of student support services existing on campus?
- Where did they learn about these services?

- Were the first year students equipped with the knowledge on how to avail themselves of the resources that would assist them in remaining HIV negative?

RESEARCH PURPOSE

Aims and Objectives

William Le Cordeur, the author and director of “Say What You Do” AIDS play, motivated this research, and the primary aim of this research is to offer insight into the reported impact of the play. Feedback on whether the play contributed and therefore fits into the aims of the University Programme is important for the development and sustainability of the Play. Whether the play did encourage students to use support services existing on campus contributes to these aims. Finally, to know how each of the stakeholders responded to the play and their involvement in its production also contributes to these aims. Does the response to the Aids play justify the ongoing use of ‘edutainment’ as a component of UAP?

RESEARCH DESIGN

An exploratory qualitative design will be employed for this study. The study will make use of numerous sources of data with the aim of identifying responses, themes and ideas that will be reported back to the Drama Department and the UAP for their use in further developing their respective programmes.

METHODOLOGY

Stakeholders

The following are identified as stakeholders in the process, production and discussion of the Aids Play 2004 from whom data will be gathered:

- University of KwaZulu Natal
- University Aids Programme
- Drama department
- Director/Producer of the Aids Play
- Facilitator of the Aids Play discussion
- Educational observer
- Student Counselling Centre
- Campus Health Clinic
- Actors
- Mentors
- 1st year students

Sampling

A convenience sampling will be used to obtain participants from the 1st year student body, while each of the stakeholder groups involved in observing or producing the Play will be approached for their involvement in the study.

Methods of data collection

Written self-reports from, or short interviews with, each of the other stakeholders will contribute to the knowledge of important issues faced by campus services. The short narratives elicited from these people will offer an in-depth understanding of themes and issues relevant to HIV/AIDS and the relevant services offered on campus. These narratives will be offered some impetus and structure by questions developed for this purpose.

Reports from the director and from the facilitator of the post-production discussions, held with those who watched the play, will contribute to the data to be used.

A survey questionnaire specifically designed for this project has been developed. This questionnaire consists of both open and closed questions. A survey is favoured for data collection from 1st year students over interviews due to the large number of first year students on campus, and for obtaining a 'snap-shot' view of a reported impact of the Play.

The Campus Health Clinic staff were asked to keep records of the number of students visiting the Campus Health Clinic to participate in VCT and test for their HIV status. This data will be used as secondary data to check if there is an increase in the number of students attending VCT after they were exposed to the AIDS play. Importantly, there will be no record of which students visited the Clinic for VCT so that there is no threat to the confidentiality of the Clinic's intervention, nor any threat to the students' anonymity.

Procedure

Regarding the survey, the researcher will ask for permission from different staff members to leave the questionnaires at their premises. The questionnaires and boxes for participants to put in the completed questionnaires in will be left in various places around the campus. Also the researcher will ask different 1st year lecturers to advertise the research during lectures. The other alternative will be to advertise the research on first year students GroupWise e-mails.

The Actors and Mentors have been requested to submit some writing regarding their involvement in the Play and Discussion by their respective departments/structures. This research will use this opportunity and will submit a question guide to structure their responses. It will be up to the respective department/structure to use the guide for a focus group discussion or individual answers. The themes and issues raised in discussions will be recorded either electronically or through note taking.

Methods of data analysis

The data collected from the stakeholders will be analysed qualitatively. A grounded theory approach to analysis will be used on the reports and interviews. Staying close to the data in an iterative method of immersion in the data and exploring emergent themes contributes to the richness and trustworthiness of the interpretation.

The analysis of the survey questionnaires distributed to the 1st years will use a thematic analysis and descriptive statistical analysis.

The data will be analysed for the following:

- A comparison of the UAP policy and the content of the AIDS play;
- Opinion and reported impact of the use of ‘edutainment’ i.e. the Aids Play;
- Opinion and reported contribution of the process of the Aids Play to the different stakeholders;
- The process of discussion and the themes that arose;
- Themes relating to knowledge of HIV/AIDS related issues and services on campus;
- Attitude towards these services and testing for HIV status.

Data from the Campus Health Clinic records will be analysed quantitatively. Statistical Package for Social Sciences (SPSS) software package will be used to facilitate coding and run descriptive statistics. However, descriptive statistics will not be used to claim causality since the 1st year students were not tested before the intervention.

Appendix 2b(iii): Methodology J2

Problem Statement

The AIDS play component of the University Aids Programme started in 2003 has been evaluated according to the theoretical aspects of the play as a form of educational drama (Edutainment). An assessment of the impact of the play on the University community has, however, not been researched. This would require research of an experimental design, while the feasibility of doing an experiment is low. However, the process of the play, and the experiences of those involved in its production have also not been explored. This is particularly important in ensuring the sustainability and growth of the Aids Play. The following research questions will be addressed in this research.

- How does the Aids Play contribute to the UAP?
- What was the main message of the play, as heard by the different student groups?
- Were students receptive to the main messages around which the play was developed?
- How did the AIDS Play, and the process of producing the play, contribute to the different stakeholders?
- What is the 1st year students’ knowledge of student support services existing on campus?
- Where did they learn about these services?
- Were the first year students equipped with the knowledge on how to avail themselves of the resources that would assist them in remaining HIV negative?

RESEARCH PURPOSE

Aims and Objectives

William Le Cordeur, the author and director of “Say What You Do” AIDS play, motivated this research, and the primary aim of this research is to offer insight into the reported impact

of the play. Feedback on whether the play contributed and therefore fits into the aims of the University Programme is important for the development and sustainability of the Play. Whether the play did encourage students to use support services existing on campus contributes to these aims. Finally, to know how each of the stakeholders responded to the play and their involvement in its production also contributes to these aims. Does the response to the Aids play justify the ongoing use of 'edutainment' as a component of UAP?

RESEARCH DESIGN

An exploratory qualitative design will be employed for this study. The study will make use of numerous sources of data with the aim of identifying responses, themes and ideas that will be reported back to the Drama Department and the UAP for their use in further developing their respective programmes.

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Methods of data collection

Written self-reports from, or short interviews with, each of the other stakeholders will contribute to the knowledge of important issues faced by campus services. The short narratives elicited from these people will offer an in-depth understanding of themes and issues relevant to HIV/AIDS and the relevant services offered on campus. These narratives will be offered some impetus and structure by questions developed for this purpose.

Reports from the director and from the facilitator of the post-production discussions, held with those who watched the play, will contribute to the data to be used.

A survey questionnaire specifically designed for this project has been developed. This questionnaire consists of both open and closed questions. A survey is favoured for data collection from 1st year students over interviews due to the large number of first year students on campus, and for obtaining a ‘snap-shot’ view of a reported impact of the Play.

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Methods of data analysis

The data collected from the stakeholders will be analysed qualitatively. A grounded theory approach to analysis will be used on the reports and interviews. Staying close to the data in an iterative method of immersion in the data and exploring emergent themes contributes to the richness and trustworthiness of the interpretation.

The analysis of the survey questionnaires distributed to the 1st years will use a thematic analysis and descriptive statistical analysis.

The data will be analysed for the following:

- A comparison of the UAP policy and the content of the AIDS play;
- Opinion and reported impact of the use of ‘edutainment’ i.e. the Aids Play;
- Opinion and reported contribution of the process of the Aids Play to the different stakeholders;
- The process of discussion and the themes that arose;
- Themes relating to knowledge of HIV/AIDS related issues and services on campus;
- Attitude towards these services and testing for HIV status.

Data from the Campus Health Clinic records will be analysed quantitatively. Statistical Package for Social Sciences (SPSS) software package will be used to facilitate coding and run descriptive statistics. However, descriptive statistics will not be used to claim causality since the 1st year students were not tested before the intervention.

Appendix 2b(iv):

An exploratory study of stakeholder response to the use of Edutainment as a component of the University of KwaZulu-Natal HIV/Aids Programme.

Introduction

The issue of HIV/AIDS is understood, by the University of KwaZulu-Natal to be dire and having great affect on the province in which it is situated and, more immediate, on its student and staff population and hence the structures it has developed. In this vein the University is “committed to utilizing its core competencies of scholarship, teaching, learning, research and development to ameliorate the impact of HIV/AIDS within the university and the broader community” (University of KwaZulu-Natal HIV/AIDS Policy).

The University of KwaZulu-Natal (“the University”) has a policy⁴⁵ regarding HIV/AIDS, developed by an AIDS committee, which attempts to guide a strategic response to the HIV/AIDS pandemic in a contextual and responsible manner. The University is thus committed to ensuring that educational interventions, preventative interventions, treatment and research actively address the ravages of the epidemic within the bounds of its responsibility.

This policy is developed to include both staff and students and focuses on implementing and maintaining attitudes of anti-discrimination, confidentiality, education, counselling, care, prevention, universal precaution and research. An important time for informing students about the University policy, and for raising awareness of issues relating to HIV/AIDS, is during the Orientation Programme (OP) offered to new students at the beginning of each year. Much effort is put into ensuring the policy and the services that are offered on the Pietermaritzburg campus relating to HIV/AIDS and sexual conduct (and misconduct) are made known to all the students. One method of contributing to this aim of the University HIV/AIDS Programme is through theatre.

The University Drama department (Pmb) has, since 2003, contributed to the University Orientation Programme and the University AIDS Programme through the presentation of an AIDS Play during the orientation week for new students. The AIDS Play (“the Play”) is aimed, primarily, at informing students of the campus facilities that are specifically related to offering support with regards health and wellbeing associated with sexual conduct and misconduct on campus. The play also promotes Voluntary Counselling and Testing (VCT), which is consistent with the University’s policy.

⁴⁵ See The University of KwaZulu-Natal HIV/AIDS Policy

The Play

This AIDS Play, produced and directed by W. LeCordeur, takes the approach of audience-centred and educational theatre. The predominant purpose of audience-centred theatre is to raise the critical awareness of the audience in order to empower them with the ability to act. One of the aims of such theatre is to explore behaviour, values and attitudes, and the consequences thereof, without imposing them (Tromp, 2003, pg.3). Moving away from a traditional linear communication towards a medium that integrates a dialogical interaction with the life issues of the audience, thus allowing them to engage in and critically evaluate their world, and the express intention of transmitting information and bringing about change in the community forms the basis of educational drama (Kidd, 1981, in Tromp, 2003).

Of particular relevance to the educational theatre approach (used for the 2003 play *It's not what you say* and the 2004 play *Say what you do*) “audience-centred theatre provides opportunities for modelling and vicarious experience. One of the key modes of education in rituals is the opportunity they provide the audience to observe the behaviour of positive role models and to observe the consequences of various choices of poor role models” (Tromp, 2003).

The behavioural nature of HIV transmission requires a response that meets this need to influence and change behaviour. Theatre for Health Education is one response to this need and has been used successfully in different contexts. It is the behaviours that predispose people to risk of infection (risky sexual behaviour, intravenous drug use, etc.) that must be identified and changed. Further, since gender and gender roles are socially constructed, and therefore contextual, the beliefs, values and attitudes that underlie local behaviours need also to be made conscious and available to engaging with. It is the ritual and communal nature of audience-centred theatre and drama that provides such an environment (Tromp, 2003).

The social and behavioural nature of the HIV/AIDS pandemic, and the various levels of any intervention needed to promote sustainable change makes this environment suitable for the use of Edudrama (Boal, 1985). By using an interactive workshop style development of the play, an interactive presentation of the drama, and a facilitated discussion after each performance LeCordeur set this drama in the context of the student lives. This methodology of Edudrama includes informing the audience of current behaviours, the consequences of such behaviour and possible alternative behaviours thereby providing opportunities for modelling and vicarious experience – an important factor in community learning and development.

Theoretically, the methods of scripting, producing and directing the AIDS plays are consistent with other relevant and effective interventions. The question now becomes whether the plays were effective as an HIV/AIDS intervention on campus. To answer whether the play was causal is behaviour change by the students would require an experiment and is therefore beyond the scope of the University AIDS Program and this study. By requesting people from different disciplines to participate in observing the play, and the facilitated discussions, offers us the opportunity to consider various perspectives of the possible contributions of the play, and the impact of the play as reported by these persons. Opting for the use of a survey to access a limited response from the 1st years and their reported experience of the play we are not able to determine much, however certain descriptions of the response group can be informative.

The Play *Say what you do* is one part of several interventions regarding HIV/AIDS on campus. They are:

- 1) HIV/AIDS play “Say What You Do”
- 2) Student Service Department Stands
- 3) Student Services Play – “You @ PMB”
- 4) Mentors

Aim

The aim of this research is to offer the author and director of the AIDS Play (2004) insight into the reported impact of the Play, recommendations from peers, and feedback on whether the Play contributed, and therefore fits into, the aims of the University AIDS Programme. The evaluation of the Play, and the monitoring of certain campus services will contribute to the UAP coordinators broader design of intervention in the University, and more specifically to the direction of next year’s drama production.

Ethics

The sensitive ethical issues around HIV/AIDS research were considered, however the nature of the questions asked, the voluntary nature of participation, and the anonymity of the respondents suggested that there were no threats to anyone’s privacy or any privilege gained from either participating or not. Permission to conduct the research was obtained from the University authorities nonetheless.

Research Questions

1. How does the AIDS Play contribute to the University AIDS Programme (UAP)?
2. What is the stakeholder response to the AIDS Play?
3. How does this response contribute to the further development of the Play and the UAP?
4. Does this response justify the ongoing use of Edutainment as a component of the UAP?

Stakeholders

While it was William LeCordeur’s (producer/director) desire for the interactive process of producing this play to continue after the 1st showing and calling for research to be done in this regard, the University AIDS Program coordinator became involved in this process of considering the contribution of the AIDS Play to the UAP, and through obtaining funding for the project. In order to understand better the response of different people to the play different stakeholders were asked to observe and report on their experience of the play. These people included: the actors, the students, the Drama Department, the Student Counselling Centre (SCC), the Student Health Clinic (SHC), and an observer from an Education background.

Methodology

The data used for this report included responses from each of the stakeholders. Distributing questionnaires and collection boxes around the campus accessed a sample of the student population. There were about 300 responses from which some of their understandings, feelings, and perceptions were lifted.

Reports were received from the Education and Drama observers, and for the other observers and participants questions were suggested in order to guide their responses. These were completed in writing or through short interview with the producer/director.

The content of the play (the script) is considered in the reports received for its coverage and portrayal of the issues and information necessary in HIV/AIDS interventions.

As a drama

The feedback on the play was consistent and praiseworthy. The ability of the play to impart the variety of information that it did, to make the emotional elements of HIV/AIDS accessible, and to engage with the moral issues involved in making such choices was considered valuable and well done.

The ability of the Play to engage the interest of the audience through the use of different drama styles (a balance of humour with serious dialogue) and offering important information was considered by several observers to be a mark of success. The script was not didactic, “it didn’t tell us what to do and it did not give too much information... Importantly it engaged with the moral issues of honesty and responsibility within relationships – highlighting the consequential nature of relationships, making us think about our attitudes towards these values. The play was moving and involving... effectively motivating the audience, seen in type of questions they asked. This is important since choices are often a conflict between feelings and knowledge” (Hazel).

In this, the play met its aims and as an Edudrama covering important information in a way that engaged its audience and motivated them to grapple with issues of value underlying choices related to sexuality and identity. The use of accessible language was an important factor showing that the producer had been reflexive regarding the target audience and the aims of the production. The use of intelligent scripting over ‘shock tactics’ was noted by Verbeek and admonished as being more effective.

The thoughtful scripting was accurate in that, as Petro Janse van Vuuren identified “many in this audience were precisely the kind of student the play was designed for. Audience responded well to many different aspects of the play, indicative of a good play that is engaging, keeping the attention of the audience throughout.” Petro goes on to raise an important point that while the audience showed “their identification with the play and their engagement with it... many questions and remarks during the discussion

communicated a lack of willingness by the audience to accept responsibility in spite of this engagement.”

Engaging new students in critical and creative thought around HIV prevention, treatment and care, reinforcing messages around the importance of VCT, introducing students to issues around antiretroviral treatment (ARV) available on campus, and creatively conveying messages around healthy living for both HIV positive and HIV negative students. The play covers the necessary content of an HIV/AIDS intervention thereby assisting the implementation of the University’s AIDS policy. In fact, this production goes beyond this and offers important understanding of the psychological depth required for the implementation of any such policy. As Nick Munro (SCC) explains:

“...the play accomplished great strides in communicating to students the complex interaction of psychological and social dimensions of HIV/AIDS. It expressed very clearly some of the more abstract (emotional and interpersonal) factors that may explain why individuals still contract the HIV virus, despite the numerous HIV/AIDS related messages students and young people are exposed to. Specifically, the play touched on issues and feelings of love, hate, lust, power, shame and guilt that are often devoid in educative processes where HIV/AIDS and sexuality are the focus. Students are frequently encouraged not to engage in risky behaviour, but other hidden issues such as those mentioned above are not emphasized enough and communicated as part of the infection route. Preventing infection with HIV/AIDS is more than just the simple knowledge of refraining from risky behaviour, but is also about acquiring the knowledge and understanding of the issues and feelings that accompany risky behaviour. As indicated, this is well catered for in the play.

The necessary process of allowing the target audience to make this material personal – a key factor in personal development and change – is identified and facilitated through the inclusion of a discussion after the performance. However, the facilitation, and impact, of such a discussion is impeded by the size of the participating group. For reinforcing important information and issues and for learning about the issues relevant to the audience this discussion was well done. Unfortunately, the proposed small group discussions that are invaluable to the individual and his/her needs were fraught with difficulties, primarily to do with the coordination of the Orientation Programme timetable, but also ranging from lack of turnout, poor participation and less than adequate facilitation by the mentors.

As a process

The impact of producing a play, or an intervention, is often greatest on those who took part in this process. In this instance the valuable experience of being included in the development of the play was felt by the actors. The impact on the actors themselves is captured by a quote from one of their responses.

I thought I knew about HIV/AIDS before I did this play ... I though wrong. I now actually know what HIV/AIDS is, how the virus works, what it does to our immune systems and bodies, why a cure can’t be found ... I now not only understand the

physical effects of HIV/AIDS, but also the emotional and mental effects it has on the individual infected and those around them. I think I am now much better able to empathise with those living with the virus, and possibly to begin to grasp just how vast and permanent the repercussions of being HIV positive or living with AIDS are. Before doing this play I had never seriously considered going for a test to discover my status. I was living in the fantasy that 'it'll never happen to me', as so many people do. I knew about AIDS but I hadn't made the connection between AIDS and me, it had always been AIDS and them – those people out there who exist but who don't exist in my reality. Oh the ignorance and arrogance! I didn't even go and get tested during the rehearsal period. Perhaps I was too busy, perhaps I just couldn't find the time ... perhaps I just wouldn't find the time. Making the decision to go for a test is a very frightening thing to do. It means that you have to accept that there is a possibility that you are at risk, and it means that you have to admit this to yourself. It was only after we had finished performing (when I couldn't live with the guilt of being a blatant hypocrite anymore) that I actually went. Knowing your status is a HUGE thing.

The Sisters at the SHC were involved from the beginning of the rehearsal process, explaining what they did regarding VCT and offering important information about HIV/AIDS. They continued in their participation by being on hand at the first performance offering facts and knowledge to the student audience. Participating in this manner contributed to the sisters feeling that their position and contribution to the University was publicly acknowledged, that their participation in this production made them feel that they were part of a bigger team dealing with the AIDS crisis, and that this feeling of being part of a team encouraged them in the light of this often depressing situation of fighting a pandemic.

In a similar vein the experience of the mentors in the preparation for the Orientation Program and their involvement in facilitating discussions after the Play might be considered the same. There are unfortunately no formal responses from any of the mentors, or their organising body. The use, and integration, of a mentor program fits with the educational and psychological knowledge of effective interventions and through the Orientation Program committee (and other organising bodies e.g. UAP) buying in to the importance of mentors and considering how to include to mentor program to greatest effect needs more consideration.

The ongoing impact that participation in such a production facilitates is continuous through the development of the people involved, and by the ongoing interactions that they are part of during their daily lives. Importantly, the dialogical interactive process of developing this play, and the integrated facilitation of discussion after each performance enables the authenticity and appropriateness of this HIV/AIDS intervention on campus. Sustained change can be identified in these responses indicating a level of 'success' in this process knowing that several individuals are more likely to respond responsibly in behaviours related to these issues, and that there are 'ambassadors' that will continue to influence others in this direction.

The Survey

The questionnaires that were distributed across campus for 1st years to respond were useful to gain some insight to their knowledge and understanding of certain support services offered by the University. Since the Orientation Programme is voluntary, and an extra expense for the

students it was noted that some students would not have attended this opening week when most of the marketing of Student Services and University policy takes place. Also some student attending the OP would have missed the production of the Play for any number of reasons. This premise was confirmed by the survey.

When asked what the play was about the students (as a whole) were able to cover the content of the play comprehensively. They reported that it included the topics relating to AIDS awareness, advise about campus services and life as a student on campus, and encouragement to be responsible and take responsibility for one's life. Some of the contents on these categories reported here show the thoroughness of the Play's script.

AIDS awareness/info:

- The importance of knowing your HIV status,
- HIV/AIDS as a reality and a killer disease,
- The importance of using preventative measures, e.g. abstinence from sex and using condoms when ever having sex,
- Knowledge about how HIV/AIDS is spread,
- Stigma and discrimination faced by HIV infected people,
- Effects of HIV/AIDS,
- Vulnerability of everyone to HIV/AIDS, and
- Encouraging students to teach one another about HIV/AIDS.

Campus life:

- information about student support services existing on campus,
- people willing to help students,
- university as a place where students should be happy and have fun,
- knowledge of different cultural activities,
- vulnerability of first year students to senior students at varsity, and
- education about university experiences

Responsibility:

- making good choices for themselves,
- thinking of other students they may affect,
- being aware of who they make relationships with,
- being careful of whatever they do

There was evidence in some of the responses that misconceptions and lack of knowledge exists. This may be due to several factors including:

Language and concepts

Some of the language used in the play was spoken quickly and on occasion not very clearly. This is related directly to the actors presentation and interpretation of their parts and is a practical measure that can be considered in the production.

Certain concepts that the majority of English speaking (1st language) people understand may not translate to other languages or experience of some of the new students. These concept could be presented diagrammatically in booklet form for distribution to all student. This suggestion links to the following point.

Issues and topics

30 minutes is not enough time to engage and satisfactorily deal with the vast and varied aspects of HIV/AIDS. It is, as indicated above, enough to successfully raise these issues to consciousness and to stimulate discussion. While many of the important issues and fact around HIV/AIDS were raised in the production it may be worthwhile producing a booklet (diagrammatic learning) of the broader issues and topics.

Own world – selective hearing

It is evident that different members of this audience heard, and identified, with different aspects of the play. It is to be expected, and the fact that there was a facilitated discussion is to be commended. As mentioned above the process of personalising and internalising these issues and information is promoted by smaller group discussion and exercises. The mentor program is ideal to contribute to this aspect and would greatly enhance the effectiveness of this intervention.

Avoidance and personalising of responsibility

This important observation would also be attended to through the development of the mentor program, training and implementation.

Discussion

It is not hard to see that the AIDS Play (2003 and 2004) contributes significantly to the University AIDS Programme in content and process. Indeed it has been shown to contribute to the development of this programme and to the policy itself.

The impact on each of the stakeholders is consistently positive, albeit different. The process of producing the play has been developmental and of great effect for those involved. And has certainly raise a number of issues and dimensions regarding HIV/AIDS within the student body – consistent with the aims of any university.

Each observers report contributes to the ongoing development of both the play and the UAP and can be used to great effect.

Reflection

Firstly, I think it important that the AIDS Play is understood as an intervention. Further, that this Play is seen as a component of the greater HIV/AIDS intervention by the University, and designed and planned as such.

Secondly, It is essential that the intention behind the play become an intervention where the play is used as a stimulus (as it was) and the process be facilitated as a whole i.e. the play be contextualised and coordinated with other university programs and projects.

With regard to the facilitated discussions that are included in this intervention there are

various possible ways of ensuring a process whereby the students are able to personalise the issues and begin to take responsibility of internalising some of these messages.

- **The mentors that are used for these discussions be adequately trained, or**
- **Trained counsellors are used e.g. SCC trainees, honours/masters psych students, VCT trainees, Life Line trainees**

I found it remarkable that the Play identified and engaged with the depth and breadth of issues that it did. Amongst those that I consider to be of import are sexuality and gender (specifically masculinity). The data revealed that myth and misconception are rife and need to be identified and dealt with. The data holds examples of these.

Other issues related to gender and sexuality might also be considered. This might involve the inclusion of other professionals on campus that could contribute to understanding the deeper issues of HIV/AIDS.

On the whole this is an exiting and well-produced play that has certainly met its aims of contributing to the University AIDS Programme and as an effective Edudrama.

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Appendix 1

Evaluation of the HIV/AIDS play**'It's not what you say'****Produced for the UN AIDS Programme and performed as part of orientation**

Evaluated by Debi Tromp

March 2003

In this section the elements necessary for an audience-centred production to be successful as an HIV/AIDS intervention are presented as questions directed at the play, 'It's not what you say'.

Brief synopsis of the play:

The play was created through a workshopped process. Cast members and the director conducted basic research through informal discussions with friends, observations, personal experiences of Voluntary Counselling and Testing (VCT) and HIV/AIDS counselling and interviews with campus health staff and members of the AIDS Committee and then used these to workshop and develop the play: 'It's not what you say'.

The key aim of the play is to promote VCT as a viable and preferred option. The play uses this theme to explore HIV transmission and prevention both for those who test positive and negative, and to explore positive caring attitudes towards those infected and affected.

The stage is bare. The play begins with the actors walking randomly about the stage and eventually forming a walking circle calling out different categories, stereotypes, labels and names for the various students that make up the student population. These are directed at fellow actors and at audience members.

This moves into a self-mocking and satirical address to the audience about AIDS education. The idea of creating 'another' AIDS play is mocked with great enthusiasm, indirectly addressing the resistance to AIDS education that seems common among young people at present. This includes the introduction of the VCT theme with a 'cheesy' song and dance routine that recurs as a leitmotif throughout the play. A condom demonstration using a broomstick is enthusiastically presented by a white cast member and mockingly translated into Zulu with asides about whites teaching blacks.

This comedy routine then breaks into a series of short monologues, scenes and presentations to the audience by a variety of recognisable university student types. These short vignettes include:

- The young Christian girl who is persuaded by her jock boyfriend into sexual intercourse and then dumped by him.
- The rugga-buggar jock boyfriend from above with a history of highly sexist and misogynist sexual exploits.

- The young male student who's much loved girlfriend has tested HIV positive.
- The black gay man who has tested positive and who has experienced gang rape at the hands of a group of homophobes on campus.
- The 'fag-hag', a sexually active young women who has begun to use condoms as a result of her friendship with the gay man above.
- The sexually adventurous young woman who was aiming to be as sexually free and experimental as a man before she recognised her own vulnerability to HIV infection.
- The black woman who was raped by her boyfriend when she tried to insist on condom use.
- The black man from above who raped his girlfriend and who is now becoming ill but still sleeping with many women.

These characters speak directly with the audience telling their tales of sexual exploit, exploitation, happiness, sorrow and their encounters with HIV/AIDS. This is broken by a revisitiation of the VCT theme song, almost as a commercial break.

Is this play a successful piece of AIDS Educational Theatre?

19. Does the play promote ownership of the problems and solutions?

Through presenting recognisable character types to which the audience can relate or in which the audience members may identify themselves, the play does create a sense of ownership of the problems and possible solutions. Audience members are able to observe and vicariously experience the consequences of various problems and solutions. The lack of active participation, however, of the audience during the play does raise questions as to the depth of ownership facilitated. This is somewhat mediated by the question and answer session that follows the play. These sessions, however, were uneven from audience to audience, with some of the facilitators unable to relate to the world of the students adequately and thus not addressing the true concerns and issues hidden in some of the questions.

20. Does it use recognisable cultural forms to communicate?

The play combines a number of current cultural forms that are familiar to the target audience. Elements of reality TV, game shows, Big Brother, soap operas, music videos and docudramas are all presented with energy and vigour. One of the key issues the cast were confronted with was the apathy of a target audience who believed that they had reached saturation point regarding HIV/AIDS information. The initial scenes of the play are presented in a self-mocking and 'cheesy' game show style with cast members being over-enthusiastic about the AIDS theme. This stylistic choice is extremely effective in that it directly confronts, recognises and plays with the resistance of the audience to another AIDS play. The audiences responded with laughter and what appeared to be a dose of self-mockery to these scenes and seemed to visibly relax, providing fertile soil for the more intense, realistic and emotionally honest scenes and monologues that followed.

21. Does it present the audience with a vision of their own world?

The majority of the cast members are students themselves, with two members of a local community theatre group joining the ensemble. They are close enough in age to the target audience and close enough in time to the experience of entering campus for the first time to be able to create characters and scenarios that ring true for the majority of the audience

members. In addition, the wide variety of different character types spoke to the cultural backgrounds and personal experiences of the majority of the audience members. It was a pity, however, that the cast did not include at least one Indian member as this cultural group often finds the transition to campus quite dramatic.

22. Does the play explore crucial issues without imposing values?

Although the individual scenes and characters present the audience with specific values and judgements in operation, the collective effect is of the presentation of a heterogeneous campus community representing a wide variety of lifestyle choices and options. The only value judgements made were regarding the relative safety of certain behaviours. The play is careful in avoiding judging the people indulging in the more risky behaviours. These characters are presented to the audience for judgement. And in many cases the audience did make value judgements: the rugby jock who persuades his virgin girlfriend to have sex with him against her better judgement and then dumps her is judged with gasps and tongue clicks; the boyfriend struggling to come to terms with his love for his HIV positive girlfriend is greeted with nods and sighs of support.

One character, however, stands in contrast: the male who rapes his girlfriend when she requests they use condoms. His aggressive calls of ‘Dudu Vula!’ (literally ‘Dudu Open your legs!’) were greeted with laughter from each audience. It has been observed that predominantly black audiences have a tendency to laugh at scenes of violence especially when the violence is directed at women. Why this is has not been adequately investigated. ‘Is it through discomfort with the blatant sexual violence expressed in these words, or sympathy with the (black) man’s dominant position in the sexual relationship? Is it that it turns people on to hear words of command associated with sex, or that these words resonate uncomfortably with people’s won reality?’ (Baxter, 2003) In such instances one must question whether a less open ended and slightly more incisive attitude to making value judgements may not be necessary. Violence and oppressive sexual behaviour towards women is, after all, one of the key factors facilitating transmission in Africa.

23. Does the play facilitate two-way communication thus transforming the audience into active beings?

‘It’s not what you say’ is a piece of Educational Theatre. Educational Theatre is one of the least participatory forms of audience-centred theatre and drama. The choice of this more presentational and didactic form of theatre was made predominantly because of time constraints and audience size: the play, including the discussion session afterwards, had to fit into a slot of under one hour and had to be presented to large groups of 50 students and above. The more participatory forms of Theatre in Education, Drama in Education and Forum Theatre are often very time consuming and are difficult to facilitate successfully with larger groups. Thus, ‘It’s not what you say’ does not initially encourage direct two-way interactive communication between the actors and the audience. The interaction happens during the question and answer discussion session after the play. This session could, however, be better managed. These sessions did not involve the cast, either in- or out-of-character. Rather they were conducted by nurses from the local Campus Health Clinic, by psychologists from the Student Counselling Centre or by lecturers from the Drama Studies Department. This effectively separated the discussion from the play where an integrated approach would have served better. The play should have been viewed as a ‘code’ or catalyst in the Freirian sense, and the interactive session afterward could have been used to ‘unpack’ and personalise the

issues raised in the play. Characters could have been present so that the audience could ‘hot seat’ them with questions and comments and an actor or the play director could have acted as the ‘joker’/facilitator in the Boal Forum Theatre mode to guide the discussion. In this way far more detailed, focussed and meaningful discussions may have been facilitated creating two-way communication with the audience and thus encouraging personalisation and action.

24. Does the play encourage debate about various perceptions of the world?

The play presents the audience with a wide variety of character types, a view into their lifestyle choices and the consequences thereof. It does not make value judgements directly, but rather raises issues for debate through contrast and comparison. It does, however, not really take these issues into active debate. The hope is that this debate will happen post-production. Small pockets of debate did erupt during some of the question and answer sessions, but these were not adequately encouraged and facilitated. Unfortunately, it was not within the brief of this evaluation to follow-up on audience members in detail and thus the efficacy of the play in generating post-production debate has not been established. It can, however, be speculated that audience members did in fact discuss and debate the issues post-production as this has been identified as one of the strengths of theatre as an educational approach. As a social activity it is not confined to the classroom and often bleeds into the social context of peer discussion and debate. However, the recommendation given above regarding a more integrated question and answer session stands for this issue as well. A more carefully facilitated discussion session could be used to engage the audience in active debate of the various perceptions of the world presented in the play.

25. Is the play holistic in that it targets the mental, emotional, physical and spiritual elements of the audience?

The play explores information and the understanding and interpretations of various characters of this information. It presents emotions, and attitudes and values in action. It shows the behaviour and physical action that can result from this information and these attitudes, and the consequences that may result. It also explores the existential and spiritual elements of young people faced with a life threatening illness. It does, however, present these explorations to the audience who experience them vicariously rather than first hand as would happen with a more participatory mode of theatre.

26. Is the play audience-centred?

The play is audience-centred in that it successfully captures recognisable student character types and situations, evidenced by the audience responses, and that it offers realistic and feasible suggestions and options that are within the capabilities and resources of the students to implement. It falls short of being truly audience-centred, however, in that it is not participatory. The audience does not have decision making power over how the topic is addressed, presented or explored, or which problems are prioritised and what solutions are tested out. The audience members do not get to step through the fourth wall and become the protagonists using the medium of theatre to explore the reality of HIV/AIDS in their own lives.

27. Is the play experiential?

The most basic experiential learning cycle takes the learner through an interactive process of action or experience, reflection, theorising, and planning for further action. ‘It’s not what you

say' presents the audience with a series of vicarious experiences presented by the characters. These characters reflect on their experiences and in some cases come up with theories regarding their behaviour and actions. Some of the characters make and carry out plans and report the success of these back to the audience. Thus, the entire experiential learning cycle is modelled for the audience. But one again, the audience does not go through this cycle but rather observes the actors do so.

28. Does the play bank information or does it facilitate the growth of understanding? The play combines banking and facilitation of understanding. The theatre piece itself presents the audience with information about VCT, HIV/AIDS infection and transmission, prevention and positive attitudes towards people with HIV and AIDS. But it presents the majority of this information in practice through the stories of the characters, thus facilitating a richer understanding of the information and the way in which it plays itself out in real life contexts. A more participatory and drama orientated discussion and interactive session at the end of the play would, however, facilitate a deeper understanding for the audience in that audience members would be able to act upon the information through role-play and interact with the information by questioning the characters.

29. Is the play constructionist and goal orientated? The play does not contain this element. The audience does not construct anything or move towards any tangible goals other than the goal of gaining more information and a deeper understanding of HIV/AIDS and the services and options available on campus.

30. Does the play identify and help the audience personalise the need to change risky behaviour? The play presents the audience with recognisable characters and situations they can relate to. The vicarious experience of watching familiar character types indulge in risky behaviour and suffer the consequences will go a certain distance towards helping audience members to personalise the need to change their own risky sexual behaviour. One of the major obstacles to overcome, however, in HIV/AIDS educational interventions is denial. Many people believe that HIV infection cannot happen to them. Such denial unfortunately cannot be easily broken and active engagement and participation in the process of change is usually needed. The presentation of a play such as this can begin or form part of a process of personalisation and behaviour change. In order for it to be truly effective, it should be embedded in a broader and more far reaching campaign.

31. Does it reinforce positive and healthy behaviour? 'It's not what you say' focuses more on presenting the audience with images of risky behaviour and the consequences of such behaviour than it does on exploring, reinforcing and supporting positive and healthy behaviour. It could be argued that this play is the first step in a process. It is the first real HIV/AIDS educational intervention the first year students will encounter and it will be backed up by other elements of the UN AIDS programme. It is thus appropriate that it should raise critical awareness of the various problems and risky behaviour choices facing the new students. The play also promotes VCT. One of the key aims of the counselling component of the VCT process is to help the client explore his or her own adoption of positive and healthy behaviour. Possibly, later campaigns on campus could focus on this more positive aspect and less on the problems and behaviours that increase risk.

32. Does the play encourage personal responsibility in audience members for their own health and the health of their community?

The play presents a strong case for personal responsibility. It creates a healthy balance between the rights students enjoy on campus, such as access to health care, and the responsibilities they should carry. The focus is on individual responsibility for making wise sexual choices. This is presented within the social forum of the theatre and thus within a context that reinforces the community and peer motivational support for responsible and positive personal behaviour.

33. Does it encourage community involvement and peer support of positive and healthy behaviour?

The choice of the social medium of theatre with its roots in community ritual and oral culture brings with it an underlying theme of community involvement and peer support of positive and healthy behaviour. This is especially important within the African context where for many the locus of control is external and social normative support of new behaviour is required before individuals can embark upon change.

34. Does the play facilitate the provision of the knowledge, skills, attitudes and motivational supports needed by the audience to change and maintain changed behaviour?

This question has been addressed in various forms above. In summary: the play presents knowledge, skills, attitudes and motivational supports in a vicarious form. As such it forms a valuable introduction to or part of a broader HIV/AIDS programme the aim of which is to facilitate, support and maintain behaviour change. The direct impact of the play itself could be improved with a more carefully designed and integrated post-production interactive discussion session.

35. Did the play entertain and capture the interest of the audience?

The play is entertaining, amusing, energetic, and serious and sad in turns. The audience laughed, commented, clicked, gasped, sighed, nudged each other and, on the whole, were captivated.

36. Finally, does the play raise critical awareness and empower the audience to act? 'It's not what you say' is an apt title. The play focuses on presenting the audience with real characters struggling with real problems and the consequences of these problems. These characters learn through their own experiences that action is required to prevent HIV infection and to address the stigma associated with being HIV positive. The audience is taken on a vicarious journey through the knowledge, skills, attitudes and motivational supports required to identify and personalise risky behaviour, identify viable safer options, and find the peer and campus based support and resources needed to make the needed changes. Although the play in itself may not go all the way to empowering the audience to act upon what they have learned, it is a powerful step in the right direction.

RECOMMENDATIONS

Three key recommendations can be made on the back of this evaluation.

4. *Integrate the discussion session at the end of the play*

This has been discussed in some detail above. A play of this nature will have a greater impact upon the knowledge, skill and attitude development of the audience, a greater impact on audience empowerment for action and a greater impact on providing communal motivational support if the audience members actively participate in at least a part of the process. A carefully designed and well facilitated interactive discussion session after the play can achieve this. Such a process will necessitate the training of cast members as HIV/AIDS educators and the use of Forum Theatre techniques such as hot seating and facilitation by a joker.

5. *Embed the play in a broader HIV/AIDS programme*

This play is one of the first stages in a broader HIV/AIDS programme for 2003 on the four campuses of the University of Natal. It is essential, however, that this campaign is not presented as a series of disparate and unrelated activities. The foundations laid during this play should be built upon and all future activities should be able to refer both to the play and to each other. In this way, an integrated and consistent series of messages and supports will be offered to students.

6. *Follow-up with a focus on reinforcing positive behaviours*

The focus of this play is of necessity on the problems that the new students may encounter. The solutions offered, such as VCT and condom use, are not explored in any great detail. Follow-up activities in the broader HIV/AIDS programme should explore the positive options for learners in greater detail. These follow-ups should include skills development processes as well as the creation of an environment of social and peer support for positive and safer behaviour.

CONCLUSION

The production 'It's not what you say' is a good example of the successful use of audience-centred theatre for HIV/AIDS education. It captured the interest of the audience; it broke through the current resistance and apathy regarding HIV/AIDS information; it presented recognisable and real characters to whom the audience could relate; it allowed the audience to vicariously experience the risky sexual behaviours and consequences suffered by these characters; and it presented the audience with information regarding safer options available to them on campus. It did this within a social context thus reinforcing the peer and motivational supports needed for individuals to embark upon behaviour change. The play achieved a great deal given the limitations placed on it: limited time, the need to be easily transportable, and limited rehearsal time.

In addition, the University of Natal now sports ten new committed HIV/AIDS peer educators in the form of the cast and director of this play for whom the process and experience of researching, creating and performing the play has been a life changing experience.

Appendix 2b(v): *Say What You Do!* Interviews: February 2004

Actors

1. Please explain your involvement in the development and/or production of the Aids Play.
2. What was the main message of the play?
3. What do you think the 1st years heard as the main message of the play?
4. Do you think this production contributes to the 1st year students' knowledge, attitude and beliefs about HIV/Aids and VCT? If so, how?
5. How did your involvement contribute to your knowledge of HIV/Aids? VCT?
6. Did your involvement change your attitude/understanding towards knowing your HIV status? (And living positively with the knowledge of your status?)
7. Have you participated in VCT?
8. Please comment on the strengths and weaknesses of the Aids Play.

Moya:

1. We work shopped the first part of the piece with Will, and played out scripted in the second part of the play. The rehearsal process was intensive. The five of us shared some very personal stories and experiences with one another which not only created a bond of trust and understanding between us as a group of players, but also provided us with a base from which we could move in the process of creating and understanding our characters and in understanding just how deeply HIV/AIDS affects each and every one of us, not just those who are living with the virus. Will was the primary creator of the script that we used in the second half of the play, but we were allowed to be actively involved in the 'fine tuning' of the final product, especially with regards to the relationships, which developed between our characters and how our characters reacted to one another and under certain situations. The characters we played were fictional, but the play told real stories and dealt with real issues and real situations that students face and have to come to terms with and make decisions about every day. We worked as a group (lead by captain Will!)

2. The central aims of our piece were to promote voluntary counselling and testing (VCT), as well as to ‘say what you do’, to talk openly and honestly about HIV/AIDS, sex, our fears, our hopes, because it is only through honest, open discussion that we can banish the dangerous, unhealthy and untrue myths that surround the virus (and there are many). It is only in this way that we can discover and spread the truths about HIV/AIDS. Many people fear discovering their status because they ‘don’t want to be like *them* (HIV positive people)’ such as the character of Andi. This fear arises as a result of the myriad of myths and stigmas attached to the disease, and which form as a result of silence. We also aimed to promote the practice of safe sex (this is after all an AIDS play ... be wise, condomise!) and the choice of abstinence.
3. It seemed to be that abstinence was the strongest message to reach the audience, which I think took us by surprise. The option of choosing to abstain is an important one. There is only one way to guarantee that you don’t contract the virus sexually, and that is to abstain from sex. But abstinence is not (as far as I am concerned) the most realistic objective to attempt to promote and maintain. The majority of varsity students are young, and abstinence is by no means an easy choice to make. And what of those who are already in sexual relationships? What happens when one gets into a sexual relationship? What does one do, how can one protect oneself and ones partner? And so on and so forth. We needed to communicate information about what your options are when you are in a sexual relationship so that you can protect yourself and those you love. Thus the central two aims of our piece were the promotion of VCT and stimulating discussion and thought around the issues pertaining to HIV/AIDS. I think that the message to go for VCT was largely received (if the testing figures are anything to go by), and debate around HIV/AIDS and issues pertaining to it was quite strong during the facilitations after both performances, so I think we may have started that ball slowly rolling.
4. I hope so! I like to believe it has. This play deals with very real, very immediate and relevant issues with regards to varsity students and the decisions they make – which

often turn out to be life decisions, during their student years. Even if the issues we dealt with don't apply directly to them right *now*, the play could possibly serve as a future reference point to which they could return. During the play we dealt with the issue of VCT, it's importance and the possible repercussions of going or not going – of knowing or not knowing your status and the possible options you have, the life decisions and life style choices one can make. The facilitation after the play not only began to dispel certain myths surrounding HIV/AIDS and VCT, but also allowed VCT to be clearly discussed and explained ... what it is, how it works, what happens before, during and after the procedure and other such information.

5. I thought I knew about HIV/AIDS before I did this play ... I though wrong. I now actually *know* what HIV/AIDS is, how the virus works, what it does to our immune systems and bodies, why a cure can't be found ... I now not only understand the physical effects of HIV/AIDS, but also the emotional and mental effects it has on the individual infected and those around them. I think I am now much better able to empathise with those living with the virus, and possibly to begin to grasp just how vast and permanent the repercussions of being HIV positive or living with AIDS are. Before doing this play I had never seriously considered going for a test to discover my status. I was living in the fantasy that 'it'll never happen to me', as so many people do. I knew about AIDS but I hadn't made the connection between AIDS and *me*, it had always been AIDS and them – those people out there who exist but who don't exist in my reality. Oh the ignorance and arrogance! I didn't even go and get tested during the rehearsal period. Perhaps I was too busy, perhaps I just couldn't find the time ... perhaps I just wouldn't find the time. Making the decision to go for a test is a very frightening thing to do. It means that you have to accept that there is a possibility that you are at risk, and it means that you have to admit this to yourself. It was only after we had finished performing (when I couldn't live with the guilt of being a blatant hypocrite anymore) that I actually went. Knowing your status is a HUGE thing.

6. Yes! (See above).

7. Yes. It was terrifying at the time, but now I know.

8. Strengths: We had a very honest cast who had enough courage to be very honest on stage, and we dealt with very real issues. I think the audience could feel the honesty and responded to it. The audience knew that we weren't playing around, and they knew that we weren't treating them as fools. We dealt realistically with very relevant issues, and I think that made them sit up and listen.
Weaknesses: "...Say What You Do" is an AIDS play, and no one wants to see *another* AIDS play. They're boring, they're over-done, 'we all know all of this already 'cause we've seen and heard it a thousand times before' (the problem is that we don't seem to be able to apply it to ourselves!) I don't really know what we could do about that. We tried to avoid it, but our play is a play about AIDS and so it carries a certain stigma.

Tabisu:

1. My involvement in the production of the Aids play was concerned with coming up and researching ideas, misconceptions, misinformation and myths surrounding the pandemic. Also included was the workshopping and performing the reality about the disease.
2. The main message of the play was to encourage the students to participate in voluntary counseling and testing which is available at the university for free.
3. I think, because the play made specific effort to communicate the message clearly, most of the first year students got the message. If there were any that missed it the facilitation process after the show was most useful to those especially who had questions and needed some clarification.
4. I think the production contributed a lot as a reminder and as a wake up call for those that didn't have the information previously. Although the majority of varsity students do not visit theatre frequently, I believe that those that do recognizes the power it has as a tool to pass on an important message. Afterwards, I believe it's up to the individual what they do about the information they have.
5. The involvement of the clinic sisters in the process got me informed about specific information during the actual infection of an individual. It also made me aware of the facilities that the university provides for students on campus. I also learned about different types of testing; which means that people have a choice as to which they find most comfortable with.
6. My involvement did change my attitude towards knowing my HIV status in that, I was not aware that by not participating in the VCT I could be emotionally and physically endangering the people I most care about.
7. I have not yet participated in the VCT.

8. The strengths of the play I believe are: The fact that the play is performed by youth. Young viewers could identify easily with our age and life style. The fact that it had both seriousness and comedy. The style of the play allows the audience to laugh and reflect in a serious way about the issues surrounding the HIV/AIDS pandemic. The facilitation after the show allows audience to participate in reflection and information sharing about the play and the disease. The only weakness I can think of is that nobody can force anyone to do anything about the information they got from the play.

Melanie:

1. I was an actor and helped in devising the action and words of the play.
2. I think it was a case of “better safe than sorry”. We played out moments in a timeline showing varying perspectives about the HIV/AIDS pandemic. These perspectives were significant as they came from characters that were recognisable and thus easily identified with. We deliberately kept the character experiences as close to our audiences as possible for the above-mentioned reason. Our theme /idea wasn't to preach what everyone already knows but rather make them acknowledge what they have been told/ taught and how to use said knowledge. We were promoting the reality of people who live with HIV/AIDS as part of their lives, whether they be infected or affected.
3. Abstinence is the best form of protection and prevention of HIV/AIDS. Not a very practical message and not the one we necessarily set out to give, but the theme that came out strongest.
4. Yes. They already knew most of what to do when confronted by HIV/AIDS. The play aimed at taking the information out of the textbook and bringing it into reality. Judging from the audience's questions and comments they identified with the characters and were questioning their own attitudes. With regard to VCT and the easy availability of help on campus, all of which came through in the play, those people who were ignorant of the facilities are now aware of them. I'm not sure how much *we*

effected a change to their beliefs but their peers challenged their thinking and there was a response. Hopefully a good shift in paradigm occurred.

5. Yes. I understand what HIV/AIDS means, not just what each letter of the acronym stands for. I have a better understanding of the process in which HIV destroys the immune system and that AIDS is a syndrome: a collection of diseases that may cause eventual death. No one has AIDS but those who are HIV+ are at risk for contracting one of the opportunistic virus's that can kill. I have more knowledge about the process of VCT.
6. Yes. It has made me question my own past regardless of how bland it has been. I understand the paranoia behind people not wanting to be tested. The stupidest incidents like a tonsillectomy make one wonder if one could be HIV+. I do intend on finding out my status.
7. Not yet.
8. I think we need to re-address exactly what it is we want to say. Abstinence as a main message is a brilliant if rather prosaic idea. Unfortunately despite a resolve not to, people will have sex. We need to clarify and help people understand that knowing their status is of benefit to themselves as well as those they care for. We definitely need to re-emphasize that HIV/AIDS is everyone's responsibility.

On the positive side I thought that having two characters (Andy and Melanie) as extremists works nicely to point out the fallibility of both sides. However we need to be careful in how strongly we use their perspectives, especially since one or the other tends to overpower the third and most practical approach to living with or dealing with HIV/AIDS. Separating the play into serious and playful sections works very well, it lightens the mood but sets up a focus for the more serious counterpart, it makes the sad stuff that much more poignant. But again we need to work on polishing the funny part. I think that the facilitation at the end is the best part of the show. Having the characters at hand to answer questions engages the audience more. All the identification or anger at what has been seen can be given an outlet. The audience has a chance to question our/ our character's choices and in doing so question their own. I would have felt like we were just doing "another AIDS play" if we didn't allow the audience to have their say at the end.

At the end of the play we need to make clear that the actors are not their characters.

The story is *a* story but not *our* story.

Summery Interview with Sister Rose Meyer:

(Nursing Sister at the Clinic of the Unversity of Kwa-Zulu Natal, Pietermaritzburg.)

Interview conducted by William le Cordeur, on the 19th April, 2004.

Involvement:

- Involved from the beginning of rehearsal process. Participated in first discussion with actors and director.
- Shared knowledge of clinic procedure and on HIV/AIDS fact.
- Also participated in the facilitation of the first performance, offering fact and knowledge to the student audience.

Views on Play:

- All (audience) heard it (AIDS facts) before! But the play used this to there advantage.
- They showed a real situation.
- Put in perspective the real world.
- Promoted University facilities in a positive and accessable manner.
- Promoted the need to “know your status!”
- Offered more confidence to those students needing to get tested, as they were able to see the play as a reality for themselves.
- The frankness of play helped reach students (perhaps in their language).
- Promoted discussions in groups of friends (witnessed in the facilitation and observed in the clinic).
- Promoted student Counselling Centre, as they are closely linked to the clinic.
- ARV’s not as cure, not as reason to sleep around, but rather as a way of life to face the worst-case scenario.

Problems with Play:

- Times are changing too quickly, and as time change so too do University resources, facilities and procedures. Since the play a lot has changed.
- There is now an HIV counsellor, the support is better and they are always available.
- Student Counselling Centre is working as a partner of the clinic with the HIV counselling.
- I am now the full time HIV/AIDS Nursing Sister and counsellor.
- How does the play keep up with the change?

Appendix 2b(vi): Research Proposal

RESEARCH TITLE

The exploration of the use of ‘edutainment’ as a component of an institutional HIV/AIDS response: its effectiveness to impart factual information and policy regarding the University of KwaZulu-Natal’s services and position related to HIV/AIDS.

BACKGROUND

Aids in sub-Saharan Africa

In 2003 the World health Organisation declared a global health emergency based on the findings that “only 5 % of those in developing world who require antiretrovirals (ARVs) are getting them. In sub-Saharan Africa, only 50 000 of the 4 million people in need have access to ARVs” (The World Health Report, 2003,p.3).

Aids in KwaZulu-Natal

KwaZulu-Natal is the province that has the unfortunate distinction of being considered the epicentre of the HIV/AIDS epidemic in Southern Africa. It is also the South African province with the highest sero-prevalence and infection rates that are increasing more rapidly than anywhere else in the country. In 2002, the prevalence of HIV in KwaZulu-Natal was estimated to be 36.5% (Health Systems Trust). The epidemic is set to change the face of the entire fabric of social and community life in KwaZulu-Natal and is already being felt severely in virtually all sectors, with serious ripple effects throughout service delivery and economic development (cf. www.nu.ac.za/aids_programme/).

University of KwaZulu-Natal and its response to HIV/AIDS

The University of Natal and the University of Durban-Westville formally merged on the 1st January 2004. The new institution, known as the University of KwaZulu-Natal, aims to be premier African academic institution committed to academic excellence, innovation in research and critical engagement with society. As a major institution of higher learning in KwaZulu-Natal, the University of KwaZulu-Natal recognizes that it has a moral and ethical responsibility to provide HIV/AIDS prevention, care and support programmes for its staff and students. And to ensure the delivery of its mandate to society by mitigating the impact of HIV/AIDS on the University's core functions. Further, as a pre-eminent academic institution situated in KwaZulu-Natal, it has the additional responsibility of providing leadership in response to HIV/AIDS and of undertaking research to enhance and strengthen the broader societal response to HIV/AIDS (ibid.)

“But the idea of an HIV/AIDS response being institutionalised in Universities is a new one ... Institutionalising HIV and AIDS as a university response is far more complex than offering counselling services or establishing research programmes. It involves turning the whole university around to recognise the threat of HIV and Aids both to the University and society in which it is located, and to respond to it in a holistic and complete way. It involves addressing the essence, culture and power of the institution and it challenges the relationship between the institution and society” (Gramsci, 1999).

It is widely acknowledged that HIV/AIDS has a negative impact on the University in terms of increasing morbidity and mortality. In 2000, The University of Natal commissioned Abt Associates to undertake a situation analysis of HIV/AIDS on its campuses in order to guide the development of a strategic approach to dealing with HIV/AIDS at the University. Based on a set of assumptions, mathematical models were developed to project likely scenarios of the impact of HIV/AIDS on staff and students at the University. These projections indicated that HIV/AIDS is likely to have a major negative impact on staff and student numbers, illness amongst staff and students, increasing death rates, more time consumed in attending funerals, a negative influence on student loan funds as a consequence of non-repayment, as well as a negative impact on the staff medical aid and pension due to increasing illness and death.

As one of the University's initiatives in response to HIV/AIDS, the additional and critical Student Services Orientation Programme Day was incorporated in the Orientation Programme (2004). The aim of incorporating this day was to equip first year students with “survival” skills that will ensure that students leave the University as healthy graduates who are able to function, both individually and professionally, in an AIDS affected world.

In providing first year students with these skills, it was considered that the majority of first year students are aged between 18 and 20 years. They have been referred to as “Generation Y”, a generation that exists in a world of convenience and immediacy, and one that entertains themselves through marketing and media strategies. Importantly, it is a world within which they learn through interaction. Research suggests that this generation place enormous importance on relationships. Our first year students are active rather than passive learners, and they relate enthusiastically to multi-media interactive events.

Based on the above considerations, Aids Programme consulted a student from Drama Studies Department (PMB campus) to write a stage play that will be used as a tool in equipping first year students with “survival” skills. As a result, in 2003 “It’s not what you say” stage play was developed and performed to first year students on Pietermaritzburg campus. After its evaluation, it was concluded, “the play was a good example of a successful audience-centred theatre for HIV/AIDS education” (Tromp, 2003, p.13). In 2004, a new drama production “Say what you do” was developed for similar purposes as above.

This study therefore, aims at exploring the reported experiences about “Say what you do” stage play. It will also consider the recommendations, given by the participants, for future improvements to this play and similar initiatives using educational theatre.

Problem Statement

Since the inception of the project of 2003, the evaluation has centred on the theoretical aspects of the play as a form of education/ drama. The actual impact evaluation of the play on the University community has not been researched. In addition, the underlying process and the impact of it on the University community has not been formally assessed. The latter is particularly important in ensuring the sustainability and growth of the project. The following research questions will be addressed in this research.

- ◆ Did the play help advertise the student support services existing on campus?
- ◆ Did “say what you do” play encouraged first-year students to get tested and know their HIV status?
- ◆ Were the first year students equipped with the knowledge on how to avail themselves of the resources that would assist them in remaining HIV- negative and living healthy lives, regardless of their sero-status?
- ◆ Were students receptive to the main messages around which the play was developed?

RESEARCH PURPOSE

Aims and Objectives

One of the aims for this research is to offer the author and director of “Say what you do” play insight into the reported impact of the play, and feedback on whether the play contributed, and therefore fits into, the aims of the University Programme. The second aim is to find out whether the play did encourage students to use support services existing on campus. The third aim is to get recommendations from the people who were exposed to “Say what you do” play to give direction of next year’s drama production. This research also intends to set up some base data for use in the future research.

RESEARCH DESIGN

Part 1- Quantitative

Quantitative design will employ multiple between-groups Quasi-Experimental design. This design has predetermined groups of:

- 1) 1st year students who attended the Orientation Programme (OP) and the Play and discussion.
- 2) 1st year students who attended the OP but did not attend the Play and discussion.
- 3) 1st year students who did not attend the OP and the Play.

Group	Intervention	Measure 1 (Usage of VCT/SCC)	Measure 2 (Questionnaire)
1) OP	Play	#’s VCT/ SCC	Questions
2) OP	No Play	#’s VCT/ SCC	Questions
3) No OP	No Play	#’s VCT/ SCC	Questions

Distinguishing between these groups allows some comparisons as to the *impact* of the Play within the OP and the impact of the OP as a whole.

Part 2 – Qualitative

Interviews, and report writing from the participant observers will be used. This will help in obtaining short narratives of those in the smaller stakeholder groups relating to their experiences of, and relating to, the Play. This gives an in-depth insight into subjective experiences and reported effect; also the aims and policy of the University AIDS Programme and Drama Department.

METHODOLOGY

(a) Sampling

For the study of this nature, convenience sampling will be used to get participants for the study. Convenience sampling will be employed because of the expected very low response rate when using random sampling. Since the sample will consist of three predetermined groups, (i.e. 1st years who attended the OP and watched the stage play, 1st year students who did not attend the OP and the stage play, and 1st years who attended the OP but not the stage play), finding a sampling frames for these groups is impossible. The sample will also consist of other small stakeholders who watched the stage play.

(b) Procedure

The researcher will ask for permission from different staff members to leave the questionnaires at their premises. The questionnaires and the boxes, for participants to put in the filled questionnaires will be left in the Coffee shops, Bars, Risk Management Services, Student Counselling Centre, Campus Health Clinic, HIVAN, Student Representative Council and in student residences). Also the researcher will ask different 1st year lecturers to advertise the research during lectures. The other alternative will be to advertise the research on first year students GroupWise e-mails.

(c) Methods of data collection

A survey questionnaire specifically for this project has been developed. This questionnaire consists of both open and closed questions. Questionnaire is favoured over the interviews because of the large number of first year students on campus, who cannot be interviewed considering the time the researcher has to finish the project. Also written self-reports from the small stakeholders will contribute to the knowledge of important issues faced by campus services. And how the Play is able to collude in improving their roles to the students. The short narratives elicited from these people will offer an in-depth understanding of themes and issues relevant to HIV/AIDS and the relevant services offered on campus. This qualitative component of the research contributes to the design of future plays, and by highlighting areas of the HIV/AIDS issue and response at the University to explore further.

As it was organised with the Campus Health Clinic to keep records for students who visit the Campus Health Clinic to test for HIV and the hearabouts of the VCT service. This data will be used as secondary data to check if there is an increase in the number of students attending VCT after they had been informed through the stage play.

(d) Methods of data analysis

The focus group and individual interviews will be analysed qualitatively. Thematic approach will be employed with an intention of picking up themes that come up frequently from the data set. The themes will be matched with the main themes that the scriptwriter was intending to give to the students. This will be done with the purpose of evaluating whether the stage play did achieve its intended outcomes. If new themes develop, that will be used for further improvements of the AIDS\ play in the future.

ETHICAL CONSIDERATIONS

HIV/AIDS is a sensitive, personal issue often characterised by fear of stigmatisation and discrimination. As a result, the following ethical issues will ensured to the participants:

(i) Voluntary informed consent:

All the participants will be asked to sign the informed consent forms that will be attached on the questionnaires. This form will consist of the research title and the aims of the study. The prospective participants will also be informed that they are free not to participate if they do not feel comfortable to do so. Students under the age of twenty-one, permission from their parents/guardians should be obtained before they consent to participate. For participants that will be interviewed, they will be informed before hand that their responses will be recorded.

(ii) Confidentiality:

Participants will be informed that the information they provide will be kept confidential and the information will be used for analysis purposes only. The respondents will be informed that only the research team will have access to the information provided. Secondary data from the Campus Health Clinic will be just a number of students tested not their personal identifications.

(iii) Anonymity:

The participants' personal identifications will not be put on the transcript. If the researcher happens to ask names, that will be for the purpose of creating rapport with the participants.

(iv) Freedom to drop out:

The participants will also be informed that they are free to dropout at any stage of the research if they feel uncomfortable.

(v) Benefits:

Although the respondents will not be paid for their participation in the study, their involvement will be acknowledged, as 2004 first year students, in the final report. For those participants who will be taking part during the focus group interviews, they will be served with refreshments to keep them active.

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Appendix 2c(i): It's Not What You Say...

Movement:

The play opens with the actors walking onstage from the wings one at a time. Once onstage they walk about randomly, calling out different labels, categories, stereotypes and names that the actors have chosen to represent university students identities – such as: “jock, nerd, Muslim, female, player, slut, black, homosexual, Christian, hippie, male, white...” The actors walk their way into a circle and work the name calling into a climatic chant aimed at the audience.

Movement:

The moment that the chant reaches its climax, the actors break away from the circle and begin a series of satirical improvisations around HIV/AIDS education.

Improvisation:

The improvisations begin with an over enthusiastic introduction, as the actors try to convince the audience that the “AIDS play” they are about to perform will be worth watching (although the actors struggle to convince each other that it actually will be worth watching). The actors inform the audience that the play will be about voluntary counselling and testing or VCT, and that they should all “try it out.” Each actor gets a turn to present quick facts and statistics about HIV and AIDS and VCT in different skits, they are all true facts, but the actors present them quickly and satirically. They then each take turns to sing a series of short songs as the mimic stereotypical HIV/AIDS theatre...

Song:

(Two female actors as cheerleaders)

V. C. T.

V. C. T.

Let's get together and be happy!

With a condom on

We become one

VCT before you CUM!

(Two male actors as cool rappers – they draw the line out as much as they can and repeat it twice)

Con – fee – den – she – a – lit - tee
iszz Veee – Ceee - Teee

(Two female actors to the tune of “I wanna be loved by you...” in slow, sexy voices)

I wanna be loved by you,
Just you – nobody else but you.
If you wanna be loved by me
Then babe, you gotta drive safely,
And VCT

(Three male actors as really bad rappers who can’t find rhyme)

VCT is the way to go
VCT for you and me
VCT is the way to life

(Two females sing)

*If you wanna get down and dirty with me
Make sure you got VCT
'Coz I aint sticking one of those here in me
Unless you are free of HIV*

Improvisation:

A white actor is handed a condom and a broomstick and told by the cast to do a presentation. He requests a Zulu translator, a role that one of the male members of the cast readily agrees to perform, and the presentation begins. As the English speaking white actor describes the process of putting a condom onto a penis, the Zulu performer translates incorrectly, as he mocks the white actors skills with the condom, his sexual ability and comments on the fact that it is always whites teaching blacks. Then the whole cast breaks out into song and badly choreographed dance of the “theme” VCT song.

Song: Theme song**Chorus: (sung)**

VCT, I'll choose to know if I'm HIV
 It's my responsibility!
 The power in me, to set us free,
 Voluntary Counselling and Testing.

(Rap)

If you wanna get down and dirty with me,
 Make sure you got VCT!
 'Cause I ain't stick'n one of those in me,
 Unless you're free of HIV!

Love is a game and we're in it together,
 And it probably won't last forever and ever.
 My status is minus - let's keep it that way!
 So I'll condomise and then we can play.

Chorus: (sung)

Improvisation:

One actor breaks the action and addresses the audience. He asks "Is this what you want to see?" and looks at the cast. The actors all relax and take time to look at each other and the audience before shrugging their shoulders (as if to say "well, we tried") and they act as if they are silently embarrassed by their production. Then the same actor addresses the audience with a quick and improvised quiz on how the play is going. He ends off by suggesting that, as both the actors on stage and the audience are students, that they share similar stories, and because of that the cast would change the performance to show real campus stories – and instead of talking about HIV/AIDS, that they would talk about sex, love and life. He then goes to his position; leaving the couple Chris and Sarah as the central focal point.

Movement

The actors all move away discretely to set up their set and props for the following scenes. The stage is divided into five sections, with the centre left as empty space. Each scenario has an allocated space.

Monologue: This is boring...

(Directed at audience – the actor is the character of John)

John:

This is boring. I'm assuming that this is what the majority of you are thinking by this point. And I don't blame you. In fact, I'm not in the least bit surprised. I mean we all know the facts. We've all been told this crap for most of our lives. I've lost count of the number of times at school that we would be rounded up and shown how to put a condom on a broom-handle. Or like when our grade 10 teacher, Mrs. Van Rensberg, gave the 'sex' talk! Haggard – 60 odd - A mother of eight and a body to prove it - with that hairy mole on her chin...*(makes disgusted noise)* – she would try to tell us how beautiful and pure sex was!? What Mrs. Van Rensberg probably didn't realise was that we were all gagging for whatever we could get, from who ever would put out... Or like when our grade 10 teacher, Mrs. Van Rensberg, gave the 'sex' talk! Haggard – 60 odd - A mother of eight and a body to prove it - with that hairy mole on her chin...*(makes disgusted noise)* – she would try to tell us how beautiful and pure sex was!? What Mrs. Van Rensberg probably didn't realise was that we were all gagging for whatever we could get, from who ever would put out...

Scene: Seduction 101

Opens with Sarah and Chris sitting together on a couch. There is a very awkward, uneasy moment of silence.

Chris:

So...what did you do today?

Sarah:

I went to church this morning and then I just had to baby-sit my brother for the rest of the day.

Chris:

Cool! (*Yawns and places his arm on her shoulder*)

Sarah:

I wish you would come with me just once. The service was so interesting today...we discussed relationships and love...

Chris:

Is your brother asleep!

Sarah:

Yes. (*Chris looks up behind her and says thank you God silently!*) And on love they brought up my favourite scripture. Corinthians 1 chapter 13 'Love is patient, love is kind. It does not envy, it does not boast, it is not proud. It is not rude, it is not self seeking....'

Chris slowly moves his hand towards Sarah's breast, she moves it away...

Sarah:

Please..don't....

Chris:

Oh, come on man Sarah. We have been going out for a month now...trust me...

Tries to touch her breast again.

Sarah:

No!

Chris:

Dammit! What the FUCK is wrong with you?

Sarah:

Nothing. It's just that I want to wait.

Chris:

Wait? Wait till when!

Sarah:

Chris, you know my moral standing

Chris:

Oh ja... (*sarcastic*) you and your precious book! So what do you want me to do, should I marry you now!

Sarah:

No! It's just that I want to wait for my husband one day, so its special... despite the fact that I am keeping myself safe from pregnancy and STD's. It says in Genessis 2:24 '...a man will leave his father and mother to be united to his wife, and the two will become one flesh...'

Chris:

Actually - just Shut Up! I'm sick of hearing your petty excuses. Just tell me you don't love me. (*turns his back on her*)

Sarah:

(*desperate*) I do love you Chris!

Chris:

No, you don't! Since there is no trust in this relationship, there is no relationship!

Sarah:

Don't say that!

Chris:

You have absolutely no clue about a relationship. It is supposed to be filled with love, intimacy, passion.... and you give me none of those!

Sarah:

I'm sorry...I just...

Chris:

You just what...think you are too good for me! I'm giving you a choice - you either choose me or keep on hiding behind your faith!

(becomes gentle and begins holding Sarah)

You know in your heart that you want to be with me, just like I want to be with you too.

Sarah:

I love you Chris...and I trust you....

Chris:

I love you too babes.

Chris pushes her down onto the couch.

Monologue: Sex/Love.

Tab:

(Singing ...) What the world needs now, is love sweet love ...

You know what the problem is? There is no real love for the world to give. We live in a world of dishonesty, free love, hate, misunderstanding, fear... and everyday victims are claimed. But the victims can't blame anyone else but themselves. I was one of them. I used to feel it all over, this passion in my heart, something more, like a feeling of deeper love. I wanted to prove my father wrong, show him that gay men could find love. He said gay men couldn't find love because it's unnatural, an abomination, a filthy sin. I was going to prove him wrong. But its funny how you loose hope. It became, "I'm not ready for love," to "All I need is sex!" Free sex, anywhere, anytime – in a car, a friend's house, the cinema, a

stranger's house... that's what love has been replaced with. When Steve told me he was HIV positive, I knew I the chances were that I would be too, and so my father had won. "I'm going to die," not something you can easily accept. "I'm going to die young!" It's not as romantic as it sounds in the movies. I told myself, "You know, there's still a chance ..." but I knew before the nurse told me. I'm young; my life hasn't even begun, but death... I feel as if he's laughing up there, my father, laughing. What a joke: gay, black and HIV positive!

Scene: First VCT Account (Waiting Room)

*Three actors bring chairs centre stage. One is Chris from the **First Scene**, the other is a woman, Rachel and a man, Thulani.*

Rachel:

Here I am, about to have my first HIV/AIDS test - and don't get me wrong – I'm scared. But its kind of empowering you know, because it's my choice...

Chris:

Jeez, sitting here is like waiting at the gallows: either the guillotine is going to come down on me - or the hangman's going to laugh me off. But I've always been kind of cautious, so I guess I'm okay, hey? (*walk's to a wall and looks at a poster.*)

Thulani:

Guys, as I sit here waiting to know about my blood status, I know the results might be negative or positive, but they will totally change my life.

Chris:

All these pictures on the wall of naked bodies with AIDS symptoms! Jus, at least I don't have any of those sores on my guy, hey! So I'm okay I recs. Yrrr! I feel sorry for all these guys. But at the end of the day it's their own fault!! Arseholes... (*He chuckles and sits down.*)

Rachel:

So first year I decided to take Gender Studies, decided the whole 'empowered woman' thing was for me. A group of us decided we were going to get rid of that whole double-standard thing – that a guy can shag whomever he pleases and get labelled a stud, while if a woman does it she's a slag – I mean, whatever...

Thulani:

There is no wrong or right about being positive or negative with a VCT result - because the results will go straight to the heart.

Chris:

Everyone should know if they've got it or not. It's just playing fair – you know? -To everyone else... I mean - I would be pissed off to find out that some slag had given me Sirus the Virus. I also wouldn't want some old duck of a nurse telling me I've got a slow puncture – gonna kick it one day – “THE HAMMERS COMING DOWN ON YOU BOY!” But it's a bonus round that the test is for free. Old Julia tells me they're good here at the clinic - kind. She said they're very enthusiastic about life.

Thulani:

Lots of people know that you can get infected with the HIV virus when you have unprotected sex. But how about those who get infected through blood, you know, like in a fight, or a car smash. I mean – I sit here thinking that anything could have happened to me - because I don't know if I have it or not... I sit here, terrified, because the result will go straight to the heart!

Rachel:

We were on a mission meeting guys, taking them home – you know the rest. Then my friend Vicky calls me. She was screwing this guy and the condom broke – and it seems he has a bigger reputation for sleeping around than she does. Now she's worried – what if she has it?! You always hear these stories but you never think it can happen to me, and suddenly I'm thinking – yes it could!

Monologue:

John:

We know all of this stuff! I mean every one of you here has been to school. You've all been taught about HIV and AIDS at least once in your life. There's no possible way that you have avoided being exposed to the effects of HIV, or AIDS for that matter. You know what it can do - you've seen what it can do. You don't need to see this. You don't need to hear this...and yet, the number of people with HIV is on the increase. I just don't understand.

Scene: Dudu Rape Account One

Dudu:

(Dudu sings to herself as she looks into a mirror) Dudu - look at you - you look disgusting!

(pause) He made me disgusting! He made me feel like a dog ... worse than a dog!

Sizwe:

I'm fine - I'm cool – I'm OK... I got it from a woman, not a dog!

Dudu:

Ok, let me try this: "Hi. I need help. I've been raped by my boyfriend." Dudu, how could you be so stupid?! You shouldn't have let him do it without a condom!

Monologue: Men are Sharks

Lisa:

In a world full of men who are like sharks ready to tear you to pieces, when you do finally meet someone who is really wonderful - it seems like falling in love is the easiest thing to do. And yet in the world as it stands today you can't let your guard down even to fall in love with someone who deserves it. I have to be so sure of certain things before I allow my self to fall in love. That is why in the past I did not let myself fall in love. I just had fun!

Monologue: Sheltered Life

Sarah:

My name is Sarah Brookes and I am 19 years old. I have basically lived my whole life in the confines of my family, school and faith - protected from the outside world. I always thought that I was part of the few that are lucky enough never to ever feel threatened to undergo an HIV test.

Monologue:

John:

I guess my upbringing has something to do with my attitude. As the son of two academics, I was brought up in an environment where irrationality and emotion came second to logic and reason. I could never understand why people could be careless, so fucking stupid as to sleep around.

Monologue:

Sarah:

People think I am weird because I don't want to have sex... But I choose to abstain for my own reasons. My faith is one reason, but mainly I am trying to protect myself - not only physically but mentally as well. I am an emotional person, when I give my heart to someone - I give my whole heart.

Scene: Vula, Dudu

Sizwe:

I had this girlfriend, Dudu. We were so much in love, caring about each other – until it happened. This one silly damn day she came back from this meeting at a women's group – and we had supper together, we got into bed together, then we started holding, kissing... It

was so special. We started feeling and wanting each other, we wanted to do it right then!

Then she said, “let us use a condom?”

(Flashback)

Hey wena ikhondom yani? (What do you mean condom?) Condoms are for people who don't trust each other – number one! Condoms are for people who are not faithful – number two!

And number three – condoms are for people who would like to do wrong things. Tell me something wrong, tell me something I don't know, is there anything you need to tell me?

Futseck! Vula! Vula!

Dudu: When Sizwe pushed me down and said “Vula, lhayibo ngithi vula amathanga wena!” and then thrust his penis into my vagina, I wanted so much to fight him. But I didn't have the power.

Sizwe: And after that you find accusations of rape? You find out that there is nothing fine.

You find out that you are HIV positive.

Monologue:

Lisa:

I have a friend, Tabs, and he is HIV positive. He's gay - and so unavailable - so I'm not in love with him or anything. But we used to go out together and find 'do-able' guys – you know, like guys who we would want to 'do'. I would say that we were both quite successful – not that I would follow through like Tabs. I was always scared of men. I had a bad experience with a relationship – this shark of a guy broke my heart – I don't think that he was even in a relationship with me – I just thought he was – then I find out he's sleeping with another girl – and I was just like this fling on the side. I was a virgin before I met him. I wouldn't exactly call myself a virgin now – but I still don't trust men. I trust tabs though – maybe because he's gay – maybe because he's just a nice guy – but I trust him because I feel safe around. Tabs went through this really bad patch though, when he was fucking every 'do-able' gay guy he met. But then he found out that he was HIV positive. My little world was picked up and turned upside down...

Scene: Betrayal

Sarah is lying on the couch under a duvet. She slowly wakes up and sees Chris zipping up his pants.

Sarah:

What are you doing?

Chris:

(Irritation in his voice) What does it look like I am doing...?

Sarah:

I thought you were going to stay for the day. I was going to make you some breakfast.

Chris:

I'm not hungry. Anyway, I have to get back to the flat to do my assignment.

Sarah:

But that's only due two weeks from now. Last night I thought you told me you were looking forward to spending the whole weekend with me.

Chris:

Yeah well, you thought wrong.

Sarah:

Chris what's wrong?

Chris:

Sarah... I don't think we're right for each other. We're just not the perfect fit.

Sarah:

What? Not the perfect fit?

Chris:

You know what I'm getting at. You are just not a good lay...you're frigid. I've had worse - so don't get too choked up about it.

Sarah:

What!

Chris:

What?

Sarah:

You used me! You made me give you a part of myself all for fun - not for love... Get out!

Chris:

(Smiles) Thanks. And don't worry too much... there are a lot of guys who settle for second best.

Sarah:

OUT! (Breaks down and cries)

Monologue:

John:

Then Julia told me that she was HIV positive. Oh, sorry, I should have said. Julia and me have been together for just under two years. She went for VCT a few months ago. Hey - at least we know... I wanted to... ask her how? How did she get infected? I know it must have been through sleeping with someone... But who with? And - how many? How could she have done something so stupid? I needed to understand. I needed to know. But I couldn't, I couldn't do that to her when she needed me. I didn't ask her then and I never will. Sometimes it's better that way... sometimes it's better not to talk too much.

(John keeps character, but addresses the audience as he did when he introduced the monologues...)

Is this boring? Are our stories boring you? Do you know this stuff? Because we can give you song and dance if you like...

Movement:

He turns to the rest of the cast and motions for them to join him – and then as quickly as they had become serious before they assumed their student characters, they resume back to the over enthusiastic HIV/AIDS educators and form really bad hip hop pose...

Improvisations

As the song is sung the actors interact with the audience and improvise dance and rap movements...

Song

VCT Song/Rap (hip-hop):

Chorus: (sung)

VCT, I'll choose to know if I'm HIV

It's my responsibility!

The power in me, to set us free,

Voluntary Counselling and Testing.

(Rap)

The bitches are back,

Aint gonna take no slack!

If you wanna get rocking,

Then put on a stocking.

I'll show you my paper,

If you show me yours.

Though I love you baby,

Life's still our cause.

(Chorus)

This is a thing that affects both you and me,
Like it or not it spreads through STD's!
So keep it safe,
And keep yourself free!

When I make my choices
I need to be informed.
All this stuff is voluntary,
Part of personal law.

(Chorus)

**VCT, I'll choose to know if I'm HIV;
Its my responsibility!
The power in me, to set us free,
Voluntary Counseling and Testing.**

Monologue:

John:

We can keep singing – or we can tell you more. (He waits for an audience response of some kind, and then continues).

These are not easy stories to tell – because these are true stories – these are stories about real students.

(Now continues John's story)

It was not easy for me with Julia. It was confusing – and I did not want to understand at first – because I didn't think I had the strength. I thought -sometimes it's better to try not

to understand - to just accept and move on. I thought about that – about leaving her – about getting away from the problem – about hiding. But now I have come to accept a lot. One day Julia will die, and I accept that - and so does she. I accept that our lives are now different.

Monologue: Be careful, don't rape me

Tab:

I've never felt love. I'm not talking about love for family or friends, but that love you see in people's eyes, that consumes them – like when sex stops being just sex. When you can share all the pains and joys with each other, beaming all the darkness within you out, leaving you feeling safe and secure. I've never felt it, tasted it or smelt it. But I know hate, like I know the amount of fingers I have.

Monologue:

Sarah:

I can never quite understand how people can continuously flit from one sexual relationship to the other without feeling terribly guilty and disgusted with themselves. I have given myself to one man - and I feel so ashamed. I feel worthless, alone and so angry with myself. I never knew that what I had built up of my life - over the nineteen years - could collapse in just one mistake.

Scene:

(Tab and Lisa are sitting on the floor of a dig getting drunk on a bottle of wine. They are rolling around with laughter, joking about men and penis sizes etc...)

Tab:

I swear, this guy was weighing like 120kgs – all muscle, and I was like, “man that beefcake must be packing some!” And then when we got around to it and I was about to go down on

him, I had a really good look and I was like, “Man, what am I looking?” I’m telling you Lees, it was TINY!

Lisa:

Don’t worry man... I was with this guy and he was like, “let’s do it” – I mean, how lame can you get – he was so obviously a novice! So I thought, what the hell, a mercy fuck, and then, just as we were about to, he went all soft... He made up some bullshit about the condom stopping the blood flow, it was too tight for his huge throbbing member, bla-bla-bla – and I was like, “Honey, you just shitting bricks because you never seen no pussy before!”

(Fall over each other laughing)

Tabs:

Man, if I had to look at one of those things every time, I think I’d be put off too! I mean, what do you have down there, teeth or something?

Lisa:

Tabs, you prick! Go munch your pillow boy, fag ass!

Tabs:

Dyke!

Lisa:

Yeah right, you’re more of a dyke than I’ll ever be – Mama’s little girl!

(Change of mood, more serious...)

Tabs: You ever been with a woman?

Lisa:

Kind of...

Tabs:

I wish guys could be more like women sometimes - I mean to each other.

Lisa:

Oh please man - women are bitches! You should hear the things we say about each other – she’s too fat, too thin, ugly, more beautiful, huge tits, no tits, wide ass...

Tabs:

No, I mean like... just the way women are with each other, like... Well, I mean its not as if there are too many women rapists out there.

Lisa:

Well, I could tell you a few things...

Tabs:

Come on Lisa, its not that easy for a woman to pin a guy down and jump his bones...

Lisa:

Who would want to? You men are practically begging for it!

Tabs:

That’s not always true Lees – I like to make my choices carefully.

Lisa:

Its not like you can go around fucking every little cute queer boy who looks your way – I mean, you wouldn’t have dealt with your status if you did.

Tabs:

Sometimes I feel like a murderer or something... I’m the one who is going to die and I’m the one who feels guilty and stuff.

Lisa:

But Tabs, you’re careful, you’re not a dickhead?

Tabs:

I know, I am...

Lisa:

What's getting you man? Come on, no secrets remember?

Tab:

Lees, do you think a guy can get raped?

Lisa:

By another guy?

Tab:

Yes...

Lisa:

Yes.

Tab:

I never told you...

Lisa:

What?

Tab:

I got raped.

Lisa:

What? By who? When, how – what the fuck Tab?

Tab:

It was a while ago. I already knew I was HIV positive. These guys who hang out at the pub where we used to go in first year, I mean they'd hassle me a bit, rip me for being istabane.

You know: “its not in our culture to be gay, we’ll show you coconut, if you want to be a woman we’ll show you how.” I mean, I don’t even know how they found out I was gay...

Lisa:

Assholes! Fuck, that is so backwards.

Tabs:

One night they cornered me alone – I was walking back from the library – and they started to call me names and then hit me and then... one of them said: “teach him to fuck like a man!... Teach him!” And they pinned me down and they...

Lisa:

Why didn’t you tell anyone?

Tabs:

I don’t know. I thought that if I tried hard enough I’d forget the whole thing. I even tried to tell them not to penetrate me because I’m HIV positive. They wouldn’t listen, they just smacked me across the face and said: “AIDS is from dirty woman!” You know, I can’t help feeling that they deserve it if they’re infected now.

Lisa:

Well, I suppose there is some poetic justice in the whole situation if they are... But I know you Tabs, you wouldn’t wish that on anyone?

Tabs:

I don’t know, and I don’t wish it on them... but they hurt me! They hurt me so that I can’t get rid of all those sick memories. Fuck poetic justice. Fuck it all...

Scene: Waiting Room 2

Thulani:

I'm in this tavern, and suddenly I meet this lady – uZodwa bra wami! She had everything that a man desired! Ngikutshela ukuthi saswinger noyo – like BIG time! And we have this night, eh bru, like none other... But the problem? Eish bra, I did not even use a condom during our first (*motion fingure to neck to symbolise sex*).

Chris:

But I'm sure 'I' haven't got it – I've always been cautious hey. Like with Sarah – I used a 'dom' - was in and out - and didn't hang around for admin. She's a typical chick – thought I was in it for marriage or something – but not me, no, I'm still young – bullet proof – can't do this relationship thing - don't have the time. You know, my mates play these games when we're pissed hey - we go cruising birds at one hell of a strike rate. After rugby - we have fine meetings and get fired up on cane and coke and stuff – and then we go out to town to get even more tanked up. Aim number one – to get laid. Do you know 'hunt the grunt'? Old Danny Rauch must have set a new campus record with about 20 grunts in just one semester - and he says he slept with most of them, but you can't always believe Danny hey. And he's still as strong as an ox. There's another game we play – “seal-clubbing” we call it... Do you know what that is? That's when us 'third and fourth years' go out to town and convince all you young first years to sleep with us. It's lank easy hey. I suppose because we know our way around, and because we're so confident. We use the old – “Oh, but you're so beautiful, so intelligent, so interesting – I think I love you” bit – and normally you new birds are so green hey - just gagging for it – hook, line and sinker...

Rachel:

My friend Richard doesn't get it – he said one should only go if one has been promiscuous – in other words the test is for whores. But that's wrong – he's wrong. A few years back maybe I would have agreed with him, maybe I would only have come IF I was promiscuous or IF I'd been having unprotected sex, but times have changed – you only have to watch the news to see that.

Thulani:

A week later I meet uTaiza. He told me something that I did not believe – uKuthi uyayazi leya nTombi (that she knows that girl)... Eh bru, some of the guys she has (*motions his fingure to neck, again symbolising sex*) are very sick and others are even dead.

Monologue:

Sarah:

I went for my HIV test yesterday... I was so petrified... so alone. My test came out negative - but it did not quench my anguish. It will take time for me to build up my confidence again. The only solution to my problem is not to find God's forgiveness - but to find my own.

Monologue:

Lisa:

I went with Tabs when he was tested - and I also did the VCT. I was fine. But I made a vow to myself that day. I vowed that I would be safe - if I made the choice to sleep with guys - I would be safe – I would make sure that there were condoms – I would use a female condom – I would take care of myself. I also vowed to myself that I would try a relationship - rather than one night flings. Relationships are safer - even if men are sharks – I think that relationships are worth the risk. But I think that the real difference comes from yourself. It is a personal commitment that needs to be made. Having to deal with Tabs – first the HIV – then the rape – brought AIDS into my life.

Monologue:

Sizwe:

I recently found out that I'm HIV positive. I went to this clinic for treatment for this sore I had on my...you know? They said it was a STI, and then suggested that I go for VCT. I said "NO! Why me?" But these sores (*he looks at his groin*), they just didn't go away – but eish - it was burning when I went to the toilet! I went back to the clinic and they gave me more muti, but suggested that I go for VCT - and I did do it. The results came back... I am positive - but hey!

Monologue:

Tab:

I wasn't going to harm someone else with the virus I carried. I was going to be careful. I mean, I am totally careful now. But when they shoved my face into the dirt and I felt them pounding in me, stripping my dignity, my pride, my essence – with every fucking thrust – I knew hate! I became hate, and I wished them death. That hate kept me sane while they fucked me. While they laughed, I didn't cry, not one tear. I tasted the blood of hate on my lips. I felt it with every painful thrust, with every laugh. They say women sometimes feel guilty after being raped. I didn't feel guilty. I felt shame. And shame doesn't wash away. I took a bath and washed and washed, with a scrubbing brush, till my skin was raw. But I still didn't feel clean. I don't know if I ever will.

Monologue:

Dudu:

Or how about – “ Hi, I need help. I think I'm HIV positive because I hear my ex has got it.” You see: I was talking to my friend Thabiso the other day. He says Sizwe's got AIDS and everyone knows about it. The worst part of it is he is sleeping around with women. And me? What if I'm also ... No! I can't be. Please not me? The stigma - the shame - no, I can't be! My heart can't bare any more pain...

Monologue:

Lisa:

So when I finally did meet this really nice guy - this guy who has made falling in love far too easy – I tried to live up to my new personal commitments. The first thing that I did when we decided to sleep with each other was to begin the relationship with honesty. I made him make a choice. I said: “boy, prove that you are not a shark, let's go for VCT together, let's talk about the past, let's talk about the others, let's be real!” And to my surprise he lapped it up.

We went for testing together. It was less scary for me because I already knew my status. But we sat together and spoke to the sister about HIV and AIDS on campus and we learnt a lot. To begin a relationship with honesty at that level is amazing. He is not a shark. And we know our status – with each other – and with the world.

Monologue:

Sizwe:

You! You are damn lucky! You will never escape! I will strike again and again! What? Sit there? Look at me accusingly and claim innocence? One thing for sure – I got it from a woman, not a dog. I am going to give it to a woman. And all you woman looking at me right now, know this, I am coming. I will strike like lightning and disappear into the darkness like a bullet...

Scene: Waiting Room 3

Rachel:

HIV is a pandemic. Soon, if not already, we all will know someone who is infected, Maybe it's the guy who picks his nose at the back of the lecture hall or the girl who sits opposite you in your English tut group or maybe, just maybe, it's a friend – a good friend. I didn't want to get all preachy with Richard but I do feel justified.

We have to accept that this disease is part and parcel of our generation and we have to accept our responsibility – because knowledge is power, I really believe that. And yes, I'm ok –the test was negative - but what if?

Thulani:

Eh bra wami (my friend), sitting here waiting for my blood status, its just not easy. Look at me – I'm shivering like a reed in a river - because those results will change my life. If I'm negative bra - I'll be positive – live positive – because I don't want to be like uZodwa... I will make the right choice from now on – because there is no negative or positive now bra wami - there is only life or death – and bra, it's your choice.

Chris:

You know - okes like me and Danny Rauch won't last for long hey. He should also get tested. He should be like me – biting the bullet to find out. It's worth it! He shouldn't just go around the way he does - getting girls into the sack without knowing whether he's got it or not... Like I've done, like I did to Sarah, like I've done to others. You know Julia hey? She's a foxy bird, bright as well. She goes out with this real nerd. I shagged her in fist year, you know, 'seal clubbing' and stuff. She met the nerd shortly afterwards. Now she's just told me that she's HIV positive. I can't remember that far back hey – I don't know if I even wore a condom. But it's not just that. Like what if other chicks were also infected – by me? What if I'm positive? How many people will have it because of me? Jus man – I don't know if I could deal with that. That's why I'm getting tested hey – I have to know – I don't want to be a killer – I don't want to kill – jus, I don't want to die...

Rachel:

So I've found a solution. Its sexy, its virtual and its safe. All you need is a PC and with the click of a mouse I'm in with 'Hotboy 69' having a fabulous time! And I can do it whenever and with whomever I choose. Last week I cybered with thirty guys! And my cyber-name? SUPER SLAG!!

Monologue:

Sizwe:

You find out that there is nothing fine! You find out that you are HIV positive! You are next! I got it from a woman – Not a dog! Now where is Dudu? I said VULA! Vula amathanga!
Vula!

Monologue:

John:

So yes, this may be boring, and you may be clever and informed, but HIV does not discriminate. It does not tell any of us apart. If you are sexually active, you are at risk. And if

you are sexually active, speak about your experiences. Go for testing, know your status, and keep getting tested.

And remember...

(All speak together...)

It's not what you say... it's what you do!

Appendix 2(ii): Say What You Do!

Improvisations/HIV/AIDS skits:

Four characters entertain the audiences with HIV/AIDS educational theatre skits that end with the song...

Song:

Get the party started on a Thursday Night, everybody's waiting for me to arrive...

Now I'm drunker than yesterday, sobriety's nothing but memory;

My liver is not loving me no more;

I, I'm drunker than, I ever thought that I could be...

There she was just walkin' through the club

Singing, do what daddy did to mommy to make me

So I did – and she sung...

A kiss on the hand may be quite continental

But condoms are a girls' best friend

Shit!

*Mama mia, forgot the 'bag' again
 My my, how could you forgive me?
 Mama mia, there she goes again
 Me my, I cannot resist him!*

*I had it coming, I had it coming
 I only had myself to blame
 If you'd have been there, if you'd have seen him
 I bet you, you would have done the same!*

*At first I was afraid, I was petrified,
 Kept wondering whether you were living on the inside,
 And then I spent so many nights wondering what could go wrong?
 But I grew strong, coz VCT came along
 Now I'm back, from that place,
 Just a prick on my finger, knew what I had to face...*

*Well you can tell by the way I use my walk, I'm a condom man, no time to talk.
 Music's high, I'm alive, I'm gonna party all night!
 No, don't turn around, you can stay, you can't look the other way...
 If we can try, we'll stay alive, keep HIV on the outside,
 Whether you're a lover or whether you're a mother you're
 Stayin' alive, stayin' alive...
 Every single player, catch on sooner than later and,
 Condomise, stayin' alive...
 Ah, ah, ah, ah, condomise, condomise...
 Ah, ah, ah, ah, stayin' alive, stayin' alive...*

DJ Re-dic-u-loose rap:

I don't know what you've been told

HIV is getting old

Get VCT before you shag

Or you'll be in a body bag...

Ending in a big rap pose!

The performers begin to take-off their costumes. They become neutral characters, and then one initiates a discussion with the audience. They all engage, with questions such as, “do you want to learn more about HIV/AIDS?”, “do you like AIDS theatre?” etc... Then they begin to explain what they are about to present. They all take turns to give a brief outline of their process, the process of creating real student stories, from real situations. The auditorium is now quiet, the audience are listening, and the drama begins...

Tabisu and Moya stand next to each other. Andrew is sitting down. Melanie is lying on the floor.

Tabisu and Moya. 1:

Tabisu: I never thought that I would end up with a white girl as my girlfriend. It just happened. As you can imagine, it didn't last long. My friends called me “coconut.” Her friends would whisper, “He's nice, for a black guy.”

Moya: My mom always said I would end up with a black man. I don't care much for race, I never did. The problem here is that you always have to prove that you're not typically white, typically prejudiced.

Tabis: Moya was looking for a black man, to prove that she wasn't typically white, typically racist.

Moya: When I met Tabs, I knew what I had found; I knew he was a gem. He was not your average Zulu guy, no, not Tabs. He didn't hit on me, but he noticed me. He didn't talk to me

with the arrogance that so many men on campus have. The first time I saw him we were at this party, I had been drinking.

Tabs: I met Moya at this party. I'm not sure why I was there, I knew no one. Anyway, she was the only white face, I felt sorry for her. I remember thinking, "Wow, what a petite, beautiful girl," then she started puking.

Moya: I passed out. When I woke I was in this room. My stomach suddenly turned. How stupid could I be? I could only remember going to this party, with my friend, Melanie, and this party was at a digs, and I was the only white person, and I am a girl, a white girl, at a black party, HOW STUPID! I looked to see if there was anyone else in the room, then this black guy puts his hand on my breast!

Tabs: I helped Moya's friend Melanie carry her to a bedroom. She lay on the side of the bed and puked onto the wooden floorboards. The problem was that she kept falling off the bed into the puke, and because Melanie couldn't lift her by herself, I had to help. The next thing I knew, Wham! I got one in the eye!

Moya: I punched him in the eye! I thought he was trying to take advantage of me, you know, in my delicate state.

Tabs: I landed on my ass.

Moya: I was feeling sick, the world was spinning, but I was ready for a battle. Then Melanie shows her face, and I realise what they are doing. I was so embarrassed.

Tabs: I was so angry. I stood up and walked out.

Andrew. 1:

Andrew: Seduction 101: Here's my course overview. Like most courses in the Arts, seduction 101 is broken into two equal halves, 50% practical and 50% theory. The theory

consists of one major research project. The practical requires more persistence than anything. Miss one prac and you've probably failed. Concessions can be made. For the research I would suggest you begin as soon as possible. Know your topic. Begin by finding out if she is a student on campus - that makes things easier. You don't want to have a target off campus, too much work. Next, find out her year. First years are easiest. They used to call it "seal clubbing", but that's un- P.C. now. I like to call it "Sexual Orientation". Most first years are in-experienced, even though they would like to think they know a lot. One thing I know, they give a lot. Get to know what degree she's doing. Get the course guide, challenge her subject choices, they like a good challenge. Be funny, but smart, playful, yet careful; remember, it's a learning experience, so if you fail, it doesn't mean the rest of year life.

Melanie. 1:

Melanie: I am a virgin. That means that I have not had sex before. I'm sure you're aware of that, but it's just nice to say. I'm virgin. I've made a vow with myself that I will abstain from sex. I signed no contract; I don't know how long the vow will last. Look at me, I am a woman, and like you, I have needs. I am not committed to any particular faith. My decision is not because any person or group has pressured me into living by this simple rule, but it's rather of my own accord. I value my life.

Andrew. 2:

Andrew: Seducing a woman is not as easy as some guys think. It takes a lot of work. Learn how to cook.. When I first slept with Moya, it was thanks to my Gran's Mediterranean Fish Dish, with some fresh herbs, and my secret, a few fresh chillies. This followed by a delicious pudding made from baked aubergines and honey. But always be patient and never rush into things. The longer you wait, the more you pretend that you have no interest in sex, the better your chances will be. At least wait long enough for the dishes to be washed. Although, I must confess, sometimes that is my downfall.

Tabisu. 1:

Tab: The sister at the clinic asked me whether or not I wanted to get tested. She advised me to, because of my persistent sickness. I had flu, constant coughing and tonsillitis, and it had been troubling me for weeks. Apparently when treated, it only lasts days. I was scared. I didn't want to know my status. Looking back, I knew. Something told me. I'm not a promiscuous guy. I've slept with seven girls in my life. I'm 28, that's not bad. I respect women, I respect myself. The seven girlfriends have all been at different times. Number one was when I was sixteen. I had been going out with her since I was fifteen; I broke up with her when I was twenty. Twenty was a good year, I had five girlfriends, I slept with three. It was not out of choice though; there was only one that I was really interested in. It's different in the township you know. Girls want to sleep with the guys, they put pressure on you, it's expected. I suppose that's because the guys have beaten into the women their role. It makes me angry now, being a man. Moya was number five. Then after Moya I slept with two others, Thandi and Mercy. Mercy was from Zambia, she spoke English better than Moya.

The test was positive.

Andrew. 3:

Andrew: Always be polite the first time. Sometimes it's easier to relax, let the typical male rudeness ease itself in. This is an early warning! Focus on making her feel special, and what does it matter, its just one night. Never let her spend that first night with you. If she wakes up in that bed with you, you've failed, it means breakfast, commitment, love. Moya spent the night, and then the next, and the next. It went on for a month. That's not what you want! Its sex - not a life sentence!

Melanie and Moya. 1:

Melanie: Tell me why Moya, WHY?

Moya: Do you want to hear the truth, or your self-righteous crap?

Melanie: Do you really think it matters at this stage? Do you really think I care about what you think about my choices? You're not a child Moya. You're a second year Varsity student, an independent woman who is capable of making her own choices.

Moya: I didn't invite this crisis into my life.

Melanie: Yes you did. When you had sex for the first time, that's exactly what you did. You invited the possibility of this particular crisis, and others, into YOUR life, not mine or anyone else's, Moya, but your own. Now you have to deal with it.

Moya: Thanks Melanie, that's what friends are for. That's exactly why I came here, for this kind of counsel, thank you; I think I'll leave now. I've got a problem concerning my life to deal with.

Melanie: Stop Moya. You're being melodramatic. I'm not chasing you away.

Moya: You're judging me.

Melanie: I don't want it to be you.

Moya: Do you think I do? Do you think that I wanted any of this? Tabs is a good guy Melanie. He's not your typical promiscuous varsity student. I didn't ask who he'd slept with before me. He told me. I told him about the guys I had slept with. We were equal. We are equally to blame. We stopped using a condom because he couldn't get it up after he had put it on. I don't blame him Melanie; I blame myself, just as you blame me.

Melanie: I don't blame you, Moya. Have you been tested?

Moya: Not yet.

Melanie: When?

Moya: The earliest I could get was Monday morning. They don't test on Fridays because there are no counselling facilities on Saturdays. Apparently the next day is the hardest.

Melanie: What time on Monday morning?

Moya: Early, eight.

Melanie: I'll pick you up.

Tabisu. 2:

Tab: My name is Tabisu Solomon Ngubane, not Tabs. I have AIDS. HIV, or the Human Immunodeficiency Virus, is a virus that attacks the body's capability to regenerate CD4 cells that help to sustain the body's immune system. AIDS, or Acquired Immunodeficiency Syndrome is not a disease; it is a syndrome, a collection of information that, as a whole, tells a story. I believe that it is my duty to discover all that I can about this virus that is slowly killing me. Knowledge is power. Don't tell me that HIV doesn't cause AIDS, I have AIDS, I am HIV Positive, it is all in the wording. I don't care how many of our politicians deny the fact that HIV is a sexually transmitted disease, because it is. It is dangerous to believe that it isn't. I suppose it's a bit like God. If God exists and I have faith, I will be rewarded. If God is dead, or has never existed, then I have nothing to loose. AIDS is directly related to HIV. HIV is a STD. The myth is a waste of time. AIDS as a myth is a waste of time. The myth is what kills. I had to tell Moya, I had to tell her first. I don't know why, but I had to.

Moya. 1:

Moya: It was a Saturday morning. I was in the kitchen of the digs grilling some pumpkin seeds; they were part of a special diet. A Black man was at the gate, just standing, staring. I could see him through the kitchen curtains. I shouted for Andy, my ex-boyfriend, twice lover and current digs mate. He was not in. I put my head out the kitchen door so that the

Black man could see me, know that I was aware, for whatever reason. It was then that I recognised Tabs.

Moya and Tabisu. 2:

Moya: Why didn't you call?

Tabs: I wasn't sure you were in.

Moya: That's the point. Are you ok Tabs?

Tabs: Not really.

Moya: What's wrong? Sorry, I'm being rude, can I get you something to drink? I have some Pumpkin seeds if you're hungry. Have you tried them before?

Tabs: Pumpkin seeds? At home we normally plant the seeds and eat the pumpkin. We also eat the leaves. But I don't think I've eaten the seeds, not on purpose.

Moya: Try some, they're good, they're like healthy peanuts, not as much oil.

Tabs: Thanks Moya, but maybe another time.

Moya: What?

Tabs: I'm sick.

Moya: Sick? God Tabs, what's wrong?

Tabs: Everything Moya, everything.

Moya: Tell me Tabs; tell me what's wrong.

Tab: *If I tell you, you'll be the first. This is not easy.*

Moya. 2:

Moya: *He told me that he was HIV Positive, that he was in a bad way, he had full blown AIDS. He told me how good the Clinic had been to him, how the sisters had made him feel like it was not the end of his world, that there was hope. He told me he was on the Antiretroviral that the University has made available to its students and staff. He told me that he doesn't know how long he has been HIV Positive for. He was never tested. I was never tested. I flipped my lid. I kicked him out. I cried, and I hated myself.*

Melanie. 2:

Melanie: AIDS is not my problem. My choice to abstain from sex was not entirely influenced by our current AIDS pandemic. To be honest, I was never that aware of how severe the problem was, or should I say, is. I value my life more than anything. My life. I fear sex. I fear sex because I fear making myself vulnerable to a man. Men have it easy. They don't get emotionally attached. They're assholes. They're never honest about their intentions. I fear men. I fear sex. My body is my temple. I will give it to no one. Be your own woman. Show men the power that you have. Hold something as sacred. Abstain.

Tab: I left Moya's place carrying the weight of the world on my shoulders. I decided then and there what I had to do. I decided to dedicate my life to helping other people realise the realisms of the HIV/AIDS pandemic. I needed to begin by telling all my sexual partners my status. I needed to talk, to tell my story. I chose to sleep with each woman that I did. I am responsible for each moment. I could have spread the virus at any time. I now need to say what I've done.

Andrew: Sure, we all have flaws. Mine are many. After Moya and I broke up she got together with that Black guy, what was his name? Tab I think. Anyway, she was always a bit of an arty-fart. That is her flaw I think. She's too liberal. Mine is that I begin to trust

people far sooner than I should. I don't know why? I wouldn't trust myself if I was another person. After Moya had broken up with Tabs I slept with her again, only once. Now I sit here betrayed for the first time in my life. She told me that Tabs had Aids, that the chances were quite high that she too was HIV positive. Well, let them worry about their problem...

Moya: After Tabs left I curled up into a little ball and cried. I had been taken out of my comfortable little bubble and thrown into the world of reality. I was not ready for it.

Melanie: I'm not saying that because I don't have sex I'm not affected by HIV. Everyone in our country is affected. We all have to deal with it sometime. We're all at risk of contracting HIV. We have one of the highest recorded rape incidents in the world. I'm a woman, I'm South African - and I'm not safe. If you're raped at Varsity you go straight to Risk management and file a case. They will put you straight onto a course of prophylaxis that prevents the Virus from surviving. But sex isn't the only way in which one can get infected. We all know that. When Moya came to me that day I was suddenly forced to think of anyway in which I could have contracted the virus from her. She is my friend, but I started suspecting her, quietly. I've been brought into the world of HIV, and I'm a virgin. You can't escape it. Everyone is affected.

Moya and Andy Scene:

Andy: My God Moya, what are you doing?

Moya: *Crying*. Leave me alone Andy.

Andy: *Holds her*. Come here. Ssh, tell me what's wrong?

Moya: Not now Andy.

Andy: Come on Moya.

Moya: Andy, just leave me, okay. I want to be alone.

Andy: You know I won't leave you... Come on. Tell me what's wrong?

Moya: Andy piss-off!

Andy: Have you been smoking Ganga again? What's wrong Moya?

Moya: Andy, please ... why do you always have to be so fucking snoopy?

Andy: Jeess, don't get so upset, I'm just trying to help!

Moya: Do you want to help? I'll tell you what's wrong then, Andy, I'll tell why I'm crying. Tabs came over just now. He's got AIDS, Andy, he's dying. Do you know what that means?

Andy: ... That you might also be infected ...

Moya: Yes Andy, and you too. And any other easy girl you've had recently, hey anyone of those girls you've enrolled in your "Seduction 101!"

Andy: Why did you have to sleep with him Moya? Why did you have to ...

Moya: What are you going to say Andy? Are you going to try push the blame? Are you innocent? Andy, if I was worried about sleeping with anyone, it was you. Have you been tested Andy?

Andy: Don't be stupid. It's not my problem.

Moya: Where you going? Aren't you going to deal ...

Tabs: I told Moya first. She reacted badly, but I felt better. I felt braver. The truth can set you free. I tried to find Mercy and Thandi, I wanted to tell them too. I then told my parents. They also reacted quite badly, but were not as bad as I thought. The sisters at the clinic were

the best though. They offered me incredible support. I've made friends with this guy at the counselling department too. I speak with him once a week, or whenever I feel like it. They're some really good people out there. To me it seems that most people want to help, want to understand. But it's still lonely. I'm dying alone. I know my fate.

Andy: Seduction 101 doesn't deal with ethics. We've already got an established Ethics course. I'm not going to get tested. I don't want to be like one of them. I don't want to be polluted with that virus. If I have it, I'll deal with it when it becomes a problem. I'm not one of them.

Melanie: I went for a test too. I wanted to make sure. The pre-test counselling was incredible. I never knew how well equipped the Varsity was for treating its AIDS patients. I say patients, but I didn't really feel that when I was getting tested. I was suddenly one of them. I was an AIDS patient, but I didn't feel like a patient, I felt like me, a woman, a brave and free South African woman. I was getting tested because it was my right. I realised how small the chances were of me being infected. There was this one time when Moya kicked her toe, she was drunk, and so was I. I helped her, thinking it was a big joke. But the chances were still really small. I'll be more careful next time I help some one whose bleeding, if I'm going to abstain, I might as well protect myself from HIV too.

Moya: I've never been so scared in my life. I was fine until the result came, then I broke down and cried. Sitting and listening to the sister talk about the possibilities of living positively, how to look after oneself, who to tell, was just too insightful for me. In that twenty minutes I lived a life, a new life. And then I realised that's exactly what it was. A new life. I had been given the chance to relive my life. To take responsibility for my life and live it. I felt quite powerful. I had convinced myself that I was HIV positive. I was sure. The result was negative.

Melanie: I would like to help in the new struggle. I would like to help battle HIV and AIDS. I would like to help in educating all those people who know everything about AIDS, but don't know anyone who is infected, or push the problem elsewhere. I would like to help.

But people forget. I forget how I felt then. I don't have the energy to fight for a losing cause. I don't need to.

Andy: You think because I don't get tested that I'm a bad guy? How many of you have been tested. How many of you are registered for Seduction 101? You fucking bigots! Look at you! You all hate me. Throw the first stone. I tell you this story because I'm positive now. I got tested. It wasn't Moya... she's negative. It was one of you, a first year, easy, but dangerous. I got tested because I fell in love with this girl, Charlotte, and she took me to get tested. I had forgotten this story. But now I have to tell it. I don't tell my new girlfriends, I can't. I just use a condom and keep quiet.

Tab: I speak to you now. I tell you everything now. I say what I do. I am alive. I am positive.

Moya: I stand with Thabiso. I say what I do!

Appendix 3: “The Sacred Cow”

Scene 1:

The play begins with the "Lords Prayer" sung.

The first verse of the Sacred Cow is sung and translated.

Zulu 1. There was a cow called the Sacred Cow.

Zulu 2. It was the only one in the family.

Zulu 3. The father of the family couldn't do anything without it.

Zulu 1. For him the Sacred Cow was everything, and it was. It was the glue that held the family together, the security that helped the family live a good life in difficult times.

Zulu 2. The cow had the power to keep the family fed so that they never went hungry. The Sacred Cow protected the family from evil spirits and from bad luck.

Zulu 3. The father had many sons, he had many fields and he was very rich with cattle. His family was large and successful.

Zulu 1. However there was one son who he loved more than the others. This boy was blessed with a beautiful voice, and that is why his father loved him so. He would herd the cattle and sing all day long.

Zulu 2. He was blessed with the duty of looking after the Sacred Cow. The Sacred Cow loved him and would always wait for the boy to sing to it before it moved, and the boy would sing.

(Chorus) Hamba Bom-wel

Chorus: “A Litany of Death”

When a Bushman dies,
 He goes to this place.
 If a man shoots another with an arrow and the other dies,
 He goes to this place.
 If a man cuts another man with a knife and the other man dies,
 He goes to this place.
 When a man shoots another with poison,
 The man dies from the poison
 He goes to this place.
 If a man shoots a woman with an arrow
 And the woman dies,
 She goes to this place.
 The man who dies because of anger,
 The man who shoots his own people,
 A man who dies from fighting,
 He goes to this place.
 If a woman dies,
 She goes.
 If a child dies,
 It goes.
 A man dies,
 He goes.
 (Pause)
 This place.
 They leave their own people

Scene 2:

(Edendale Hospital: Lights up on the whole of stage right. Hospital bed placed with drips and full medical set up on upper center of stage right. Thuthuko is in the bed. The doctor

is standing next to him and Mzwakhe is kneeling by his right side. As the lights starts coming up Thuthuko begins to cough violently.)

(The Doctor makes a gesture to Mzwakhe and begins)

Doctor: Give him some water. (To Thuthuko). You're going to be fine.

Mzwakhe: When will you know what is wrong?

Doctor: I suspect ... I will tell you when we are positive.

(The Doctor begins to walk out, upper stage left. Mzwakhe catches up and stops him.)

Mzwakhe: Doctor, can I have a word? *(The Doctor responds)* He is very sick, isn't he?

Doctor: Yes, I believe he is.

Mzwakhe: He will die?

Doctor: I don't know that, but ...

Mzwakhe: You're a doctor, you should know his fate!

Doctor: I try to preserve life; I don't predict death!

Mzwakhe: This man is promiscuous! He's had a lot of women. There's nothing to predict. He hasn't been a good man. He's a Zulu! The Zulu's are killing themselves with love. But I want to help. Tell me how I can help.

Doctor: Let him know you are here.

Thuthuko: *(Wakes up; and cries ...)* I'm dying! Don't leave me! Stay with me.

Mzwakhe: Shh, I'm here.

Thuthuko: My eyes are misty, I see ants.

Chorus: (Begin to sing Ant song softly)

Thuthuko: I'm all alone, I'm a lost Zulu. *(Sobbing)*

Mzwakhe: No, you're not alone, I'm still here. I love you Thuthuko, don't leave us yet.

Thuthuko: *(Begins to cough violently again.)* I'm the last Zulu man! How can I die like this? *(Coughs)* Give me time Lord, I pray. *(Has a small coughing fit.)* God! Help me now, and I will live with you forever ... *(Has a violent coughing fit and freezes!)*

Scene Three:

"The Ants Are Coming", sung by the chorus and translated through gestures.

The San ritual takes place.

The hero gets carried out of his bed and placed on lower stage right.

The liquid is poured into the hero's mouth and the hero wakes up. All the other actors are now off stage, except for the Mzwakhe and Thuthuko.

Thuthuko: Where have you taken me?

Mzwakhe: Shh, don't speak, you're tired.

Thuthuko: I'm not tired, I'm lost.

Mzwakhe: You listen to me now! Don't speak.

Thuthuko: I'm dead, I knew it, is this Hell?

Mzwakhe: Hell, no. Shh! Don't speak! *Pause*. What is Hell?

Thuthuko: Hell is where the evil people go to when they die.

Mzwakhe: This is not Hell ... why do you think this is Hell?

Thuthuko: I don't think I lived a good life.

Mzwakhe: You can't make a noise now. Live a good life now, you can still make peace.

Thuthuko: Am I dead?

Mzwakhe: No, I'm here.

Thuthuko: Where's the hospital? Where's my bed? Doctor!

Mzwakhe: Shh! What's a hospital?

Thuthuko: It's the place you go when you're dying.

Mzwakhe: What's a doctor?

Thuthuko: He's the ferryman who takes you to the land of the dead.

Mzwakhe: Ah. Maybe you are dying then.

Thuthuko: Why?

Mzwakhe: This is the river, the river that leads to the gods.

Thuthuko: What gods?

Mzwakhe: Shh. Listen to me. I will tell you a story. This is the story of the river, the mighty Umgeni River. It flows through the home of the Zulu, it is mighty. The river begins up in the mountains, far away. It starts in the place of the Eland, a place the white man named Elandskop. That is where the Bushmen live. They are a peaceful people. They are spirits. But they live. The river has many names, but as these names flow together into uMgungunglovo, the Place of the Elephant, the river becomes the Umsundusi. The water here is full of Bushman prays and it is clean. It is an ancient river and it has served the gods well over the years, so the gods have given it lots of water and lots of land to flow through. The river is fast and youthful as it runs out through the mountain valleys and approach's the ocean. There is a place where the Umsundusi meets another river in a powerful collision. Here the river is called the Umgeni. It is as powerful as one hundred of Shaka's Impi's! The river cuts its way through one thousand hills with the rage of Shaka, to get to the ocean. But when it gets here it is tired and slow. The cattle in the hills have dirtied it with mud and urine. The Zulu people have dirtied it with their cattle and their own urine. So it flows into the sea, taking to the gods the Bushman's prays and the Zulu's urine. That is why the gods don't love us, the Zulu. That is why we must fight forever. Shaka, our King, will kill more than the victims of his rage. His soul of violence will live on until the Zulu has killed himself out.

Thuthuko: I know that river, it flows past the hospital. We call it the Duzi. It flows right through Pietermaritzburg. I know that river, but it is clean no-where. It is stained with blood from the mountains, sewage from the townships and infected needles from the hospital. There are no bushman prays. There is plenty Zulu urine.

Mzwakhe: So you know this place. Then why are you frightened?

Thuthuko: I want to go back to my home, back to my life, back to my friend.

Mzwakhe: You are here now, sleep. He will be coming soon.

Thuthuko: Who?

Mzwakhe: Shh, sleep now.

Thuthuko: I want to go home.

Scene four: *(link sung by chorus - "We are strong, We are Men!")*

Zulu Sangoma:

Shaman: We are in trouble!

Chorus: Trouble?

Shaman: Shaka is dead!

Chorus: Hibo!

Shaman: He is not a god!

Mzwakhe: Not a god?

Shaman: He was a king!

Chorus: A great king!

Shaman: He was a Zulu

Thuthuko: I am a Zulu.

Shaman: He killed many.

Chorus: NKosi!

Mzwakhe: A great king!

Shaman: He was a man!

Chorus: NKosi!

Mzwakhe: A great man

Shaman: The creator is angry!

(response from chorus)

Shaman: We have a new enemy!

Chorus: Who?

Shaman: A white wave is washing up on our shores. It carries a cross on its crest. On this cross there is a dead man with nails through his hands and feet. Out of the wave comes the umlungu – they are wizards! They tell us that the dead man is god!

Chorus: The son of god!

Mzwakhe: Only one god

Chorus: The son of god

Shaman: He is dead on the cross!

Chorus: He will rise again!

Shaman: Yes, he will rise again. He has risen. He walks in the form of a white warrior. This god is magic.

Chorus: This god is great.

Shaman: This god is not our god

Chorus: This god is great.

Shaman: We must kill this god so that he will rise again out of African mud.

Chorus: Hibou! Kill god?

Shaman: We will sing so that he will rise again.

Chorus: How will we kill god?

Shaman: *(To Thuthuko)* He will kill god!

Thuthuko: Me?

The second verse of the cow song is sung, then translated.)

Zulu 2. The boy soon discovered that the Sacred Cow would only move if he sang to it.

Zulu 3. One day some cannibals came down from the mountains. The cannibals had lived in the mountains for a long time. They were mostly bad people who had been thrown out of their villages for committing crimes.

Zulu 1. Because they did not act like men, they were becoming more and more like animals. They would eat other men if they found them straying in the mountains. Sometimes when they got really hungry they would sneak silently out of the mountains and come to the peaceful villages to steal away with people.

Zulu 2. However, the people were aware of them and often caught them and killed them. That is why they became so good at sneaking around. On this day some cannibals found the boy all alone singing to the Sacred Cow. When the cannibals saw that the Sacred Cow was magical, they wanted it for their own.

Zulu 3. So they told the boy to give it to them.

Zulu 1. The boy knew that his father would kill him if he returned without the cow, because although the father loved him more than his other brothers, his father loved the Sacred Cow a lot more.

Zulu 2. The boy also knew that he would be eaten if the cannibals were not able to take the Sacred Cow.

Zulu 3. When the cannibals tried to move the Sacred Cow they discovered that it wouldn't move. They asked the boy to tell them how it moved. So after they had bullied the boy, he told them that it only moved if he sung to it. So the cannibals made the boy sing to the cow.

Zulu 1. The boy sang, and the cow moved. (*chorus*)

Scene 5:

The sangoma speaks alone with Thuthuko.

Sangoma: Come in boy.

Thuthuko: How are you Father?

Sangoma: I am well. Why have you come?

Thuthuko: I wanted to know what you wanted with me, why I have been brought to this land?

Sangoma: You have been brought here by the gods.

Thuthuko: What gods?

Sangoma: Our gods, Zulu, our gods.

Throws bones and gets excited

Thuthuko: Who are you?

Sangoma: I am your father's father, I am your ancestor.

Thuthuko: So, am I dead?

Sangoma: No, you are alive. You are very much alive. Although, in your world you may call this a dream.

Thuthuko: So I am dreaming? If I were dreaming, then I could wake myself when I wanted. I want to wake ... but I am still here!

Sangoma: You've come here to ask me about your quest, not to have idle talk on existence.

Thuthuko: How do you know what I've come here for?

Sangoma: I know a lot about you, you're one of us.

Thuthuko: One of who?

Sangoma: You're a Zulu, and your fathers before you were Zulu's.

Thuthuko: Yes, that is so, but anyone could guess that. After all, I speak Zulu and look Zulu. But that does not mean I believe in your quest. Why would I want to kill God? I don't even believe in ...

Sangoma: Silence! Beware of what you say, the spirits are listening. Don't be a fool, son, you have much work to do and it would be good to have the spirits on your side.

Thuthuko: I have no work to do, I'm going on no quest, as I do not understand the reason for it!

Sangoma: Listen to me. Shaka is dead. The Boers are attacking us and stealing our Cattle. They are clever, those Boers. They want our land, and so do the British. The White Man are very dangerous, but we are still more powerful than they. It is not the power of spears and the iKlwa that will win us the war we now face, it is the cunning and traitorous minds of the White Man. It was not long ago that Dingaan betrayed Piet Ritief. The Boer will never forget that. We have won many battles against the Boer, but we will soon loose. You need to take the spirit of the White Man. Without his spirit the White Man will be as empty as a cow without milk. What use is a cow that has no milk? The White Man will then turn and leave for their own country, and bother us no more.

Thuthuko: What's wrong with the White Man?

Sangoma: The White Man is full of ideals. Ideals have created his god. They believe in peace, yet they fight us. They are not bad, they are only confused. They are not ready to live with us.

Crowd makes noise off stage and then dances in chanting.

Zulu 1: They have given us an ultimatum!

Zulu's All: Because the Boers steal our cows!

Zulu 2: They have given us an ultimatum!

Zulu's All: We will never obey!

Zulu 3: They want our land, they want our cattle!

Zulu's All: We will give them nothing!

Zulu 1: The British have invaded Zulu land, our land!

Zulu's All: But we will beat them!

Zulu 1: Isandlawana!

Zulu 2: Isandlawana!

Zulu 3: Isandlawana!

Zulu 2: Chelmsford will never succeed!

Zulu 3: Rorkes Drift!

Zulu's All: We loose!

Zulu's All: Their god is great!

Zulu 1: But we are strong, we chase them away!

Zulu's All: We are strong! We are Zulu!

Thuthuko: What has happened?

Zulu 1: The British have invaded!

Zulu 2: We've been fighting!

Zulu 3: We go to Ulundi!

Zulu' All: To loose!

Mzwakhe: Come, let us run! You will not be safe here, the British will soon discover this place and kill us all.

Thuthuko: What about them?

Mzwakhe: They must go to Ulundi to loose. We can't go with you friends, we must flee! Go well!

Zulu's All: We shall go, we shall loose.

Sangoma: You must find this God and kill, kill, kill. We are at War. Save us, find god. Look for the Bushman, he will tell you what to do with the dead God. Go. Flee!

The crowd leaves and the stage is cleared of people. The Zulu's begin singing a repeat verse of "Hamba Bom-wel".

Zulu 2. The boy sang to the Sacred Cow and the Cow moved.

Zulu 3. The journey was long through all the hills and up into the mountains. Sometimes the Sacred Cow would stop and the boy would have to keep singing for it to move. They came to a large river that the Sacred Cow did not want to cross, but when the boy sung to the Cow it crossed the river.

Scene 6:

Thuthuko and Mzwakhe walk on stage to find Bishop Colenso in prayer.

Thuthuko: We have been walking long.

Mzwakhe: Yes, we follow the river.

Thuthuko: Look, there's a white man, do you think he is a soldier?

Mzwakhe: Shh, hide.

There is a man dressed as a Bishop, and he is praying out loud.

Colenso: God, our Heavenly Father, forgive our people for what they do. They do not understand your will. My country is angry with me for siding with the Zulu, but I have sided with no one. Death should never be an option. No one has ever earned the right to kill another, and war gives killing no more justice than murder. We are all of you, God our Father, so when we kill, we kill our own people. We do not go to your place when we die; we do not go to Heaven, we linger here in the land of the Zulu. God, save us! God, can you hear me? Save us please? We have wronged your people. *(Hears a voice)* What? *(Hears again and reacts)* We must convert them all. How can we do that if they will not accept your Word? *(Again he reacts to the silent voice)* Yes, yes, I hear you. You will be angry if we do not try. But that is why we are here God, we are here to save the lives of the Zulu, to save them a place in heaven. *(Reacts again to the voice)* Yes, I was told they were savages, but they're not! We are all of you God! We are all ...

Mzwakhe gets up and walks over to the Bishop as if to kill him.

Mzwakhe: Tell me, White Man, what god do you pray to? Because you will be seeing him soon!

Thuthuko: Stop!

Colenso: I am Bishop Colenso, a friend of the Zulu, and a pawn of the British. Kill me now and I will be happy, bad days are ahead.

Mzwakhe: You are a friend to the Zulu?

Colenso: Yes, I know your King.

Thuthuko: We are running away from British soldiers, can you help us?

Colenso: Yes, do not run.

Thuthuko: Then how will you help?

Colenso: Do not run and you will not be caught.

Mzwakhe: We are looking for the god of the White Man.

Thuthuko: No, we're not!

Mzwakhe: Can you help us find your god?

Colenso: I am still looking for him. I have been looking my whole life.

Mzwakhe: Then you are no help to us.

Colenso: I can help you to start looking for him. But I cannot promise you will find him there.

Mzwakhe: Then tell us?

Colenso: Why do you wish to find him?

Mzwakhe: We wish to kill him.

Colenso: I'm afraid that he is already dead.

Thuthuko: Good, then my quest is complete.

Colenso: Your quest?

Thuthuko: Yes, I am to kill the White Man's god. To save the Zulu.

Colenso: I have said that my god is dead, he was killed on a cross. But our God still lives, the real God, the one God!

Thuthuko: Ok, so my quest has only begun! Will you tell me where to find this god?

Mzwakhe: Yes, where must we look?

Colenso: You will find god through prayer, through reading the Great book, The Holy Bible, through going to Church and through Jesus.

Mzwakhe: Where will we find this place, church, is it near?

Colenso: It is in Pietermaritzburg, the place you call Umgungundlovo. There is a great cathedral there. You must go on Sundays only. I must leave you now, as god is angry with me. Farewell, and good luck.

The Bishop walks off stage following the river.

Mzwakhe: The spirits are on our side, he gave us good help. We must read this book, find this cathedral and capture this Jesus.

Thuthuko: The spirits gave us nothing! We spoke well to him, that's why he helped. I can't believe we have to go all the way to Maritzburg. Don't you understand yet? We can't kill god! There is no such thing as god, and even if there was, we wouldn't be able to kill Him!

Mzwakhe: No friend, it is you who doesn't understand. We will not kill this god, we will only give it life. We are the ones chosen, by the ancestors, to give the Zulu's the White Man's god. He will become one with our universe, one with us.

Thuthuko: Right, whatever... Come let's go.

Enter group of Zulu warriors.

Mzwakhe: How go you friends?

Zulu 2: We bring news.

Bambata: I'm Bhambata, and I go to War. The English have placed a tax on each hut we own. We do not have the money to pay them. And why should we have to pay them, after all this is our land. They should be paying us.

Thuthuko: Your army is small ...

Bambata: Small, but we are Zulu! We have pride and that is still owned by us. You two are no army, where are you going?

Mzwakhe: We are trying to get to Umgungundlovo. Can you help us?

Bambata: Yes, follow us friends.

Bambata leads Thuthuko and Mzwakhe up the river (up stage). They loop around the stage and enter from lower stage left. They stop.

Bambata: There the place is, in that valley. You are brave men to be going to that city. There are many British and Boers there. There are rules that you have to follow, as black men, in order to stay out of danger. These rules are written by the white man to keep the black man from taking back what is theirs. Their Government has passed an Act that allows the White Man to take our land, and push us further away from the good farm lands. Yet they demand that we pay them our tax in their money. So we have to leave our families to go and work under the ground in far away cities. While this is happening all the people are sleeping. But I shall sleep no more.

Zulu 1 and 2: We shall fight for our freedom!

Mzwakhe: Thank you for your help. Go well, friends.

Thuthuko: Good luck!

The chorus sing, "We are strong, we are men".

Scene 7:

Thuthuko and Mzwakhe enter from up stage, following the river. They walk along the river which has miniature cardboard buildings next to it.

Thuthuko: This is more like it, metropolitan life. So this is what Pietermaritzburg looked like back in the days. *He stops and looks.* This is not too far off the Maritzburg I lived in. Except the houses seem to be a lot smaller. And there don't seem to be any people about. That's weird. This place is normally so busy, and yet the streets seem empty.

Mzwakhe: We were warned to be careful. Let's find this Cathedral and get out of here.

Thuthuko: You make it sound like we're just going to walk into ...

Policeman 1: Hey you two!

Mzwakhe: Ah, a White Man! We should run ... come!

Thuthuko: Wait, stop, they're policemen, maybe they can help us ...

Policeman 2: What are you doing in town at this hour?

Thuthuko: We're looking for the Cathedral, can you help us please?

Police chief: What is going on here?

Policeman 1: We've just found them!

Mzwakhe: Were you looking for us?

Police chief: Were you looking for us?

Mzwakhe: No, we're looking for Jesus.

Policeman 1: Check the Cathedral!

Policeman 2 runs off.

Thuthuko: Yes, that is what we're looking for.

Police chief: So you haven't planted it yet!

Mzwakhe: We're not supposed to plant it, we must kill Him.

Police chief: I take that as a confession. Arrest these animals!

Policeman 1 arrests the two heroes.

Thuthuko: On what charges? I'll call my lawyer!

Police chief: You are two MK gorillas! I can smell a terrorist a mile away. We got the tip off that you two were in town tonight, on a mission to destroy public security. We had no idea you were going to hit the Cathedral though. Do you have no conscience?

Mzwakhe: Who told you? That Bishop?

Police chief: Check for passes. *Police man checks, finds none.* We'll get them on that too. You two must smell the air now! It's the last time that you'll be smelling free air. Life imprisonment! Suspicion of Communism Act. No passes! Breaking curfew! You two are in big trouble! Take them away.

The policemen lead the two hero's to the chorus pit and put them behind bars.

Police chief: Now we'll see whose looking for Jesus.

The Police chief hits Mzwakhe in the ribs and pushes him into the jail. The Police chief exits, followed by the other policeman.

Thuthuko helps Mzwakhe up and begins to comfort him.

Thuthuko: Are you all right?

Mzwakhe: Yes, I'm fine ... *coughs* ... I hurt, I think I bleed ...

Thuthuko: There is no blood. *Pause.* You'll be fine. I still don't know why we're here, I mean in jail. I wonder if it was that Bishop Colenso who set us up for this trap? Friend of the Zulu, he probably believes it. *Lets Mzwakhe fall down.* What kind of a dream is this if I can't even wake up when I'm in jail? *Starts hitting himself.* Wake up you idiot! Wake up! Wake up!

Mzwakhe: Don't do that. You'll hurt yourself.

Thuthuko: So what? This is a dream, my dream, it doesn't matter.

Mzwakhe: Did life matter, when you lived.

Thuthuko: Of course life mattered!

Mzwakhe: So why did you live it as if it didn't?

Thuthuko: I lived it to the full ...

Mzwakhe: But now you're dying. You're only a young man, Thuthuko. Why did you leave your culture, your tradition, your morals?

Thuthuko: I was not offered the same culture, tradition and morals as you. Culture changes, traditions die, morals, well, I know right and wrong, but that doesn't make me right. *Silence, then crying.* I was wrong.

Mzwakhe: I'm here, I'm here. Don't cry.

Thuthuko: So what if you're here? I'm dying, I know it. I might already be dead. I don't want to spend my last time here, in a stupid dream. Wake up! Wake up so that I can know if I live ...

Mzwakhe: I'm here, and I've always been here. Why won't you look at me?

Thuthuko: What do you mean? I look at you, I look at you all the time.

Mzwakhe: Why did you drop me? Hold me.

Thuthuko holds Mzwakhe and comforts him.

Thuthuko: Do you really love me? Only me?

Mzwakhe: There are lots of names for God, but there is only one God.

Thuthuko: Do you believe that?

Mzwakhe: No, not really. I believe that God is lots of gods.

Thuthuko: I never knew a god. I was never able to understand. I searched for my god through women, through sex.

Mzwakhe: And I was always there.

Thuthuko: Yes, I'm sorry, I never looked.

Nthabahloko: You never looked.

Thuthuko: Where did you come from?

Nthabahloko: I've been here the whole time, but you never looked.

Thuthuko: You scared me. What's your name?

Nthabahloko: Nthabahloko. I live here.

Thuthuko: Nthabahloko, what was your crime?

Nthabahloko: I'm the soldier without a face. I've been sitting and waiting for freedom. My crime? I killed.

Mzwakhe: You're a villain?

Nthabahloko: I was a freedom fighter, but I can fight no more. And I am glad. Many have died and many will die. The struggle continues while I wait it out in prison.

Thuthuko: What struggle?

Nthabahloko: Apartheid. I was only a young Man when Chief Bambata revolted against the British. Soon after that the British law got worse and worse. Zulu families were destroyed because of migrant labour. Laws were passed making life very difficult for all Black men. This is when the Zulu began to lose his morality. It was when he was ripped away from his culture, his family and his home. In the cities there is not even space for cows. The Black Man was treated like an animal. The White Man did not know the horror, and the Black Man did not know either. Because when the Boer Government took over, he ruled by cunning intelligence. The Boer keeps this country blind through Propaganda.

Mzwakhe: What is this propaganda?

Nthabahloko: Why were you arrested?

Mzwakhe: I don't know. Something about a pass and a curfew. And they called us MK gorillas. What is that?

Thuthuko: Stupid.

Nthabahloko: That is propaganda. You see, every Black Man who is seen in town at night is a villain.

Thuthuko: So they probably thought that we were going to blow up the church or something. They didn't know anything about our quest.

Nthabahloko: Ah, your quest. So, have you found this god you look for?

Mzwakhe: How does everyone know what we are doing?

Nthabahloko: I know because I have seen. They call me the "Lightning Man". And I will help you. Firstly, don't look to kill this God, look to give Him life.

Mzwakhe: That I have already said.

Nthabahloko: Yes, you have seen what the Zulu knows. *Pause.* Now, you will find the cathedral outside these doors. But when you do, be cautious. Be cunning. Be quick. And run as fast as your legs can carry you, until you find transport. But your transport will not last long, so be prepared to run. Follow the road, follow the river. It twists through Edendale, and goes up, up and up towards Henly Dam and there it lies still in the dam. What you will see along the way will be terrible, but look and remember. They were your people. Remember.

Mzwakhe: Where will we find the bushman? We were told to look for the bushman.

Nthabahloko: The bushman will find you.

Thuthuko: How will we escape from here?

Nthabahloko: You must not worry, you will find peace. But first you must save the Zulu. Dream son. I will help you. *The lights flash and there is a sound.* Now run!

Thuthuko: Magic!

Mzwakhe: Faith!

Nthabahloko: Freedom!

Police Chief: Escape!

The Zulu's sing the next verse of "Hamba Bom-wel".

Zulu 1. And still the boy sung to the Sacred Cow until they came to the place where the cannibals lived. This place was far from where the boy lived at his father's house.

Zulu 2. At this place where the cannibals lived they stopped. The cannibals were hungry and wanted to eat the cow, so they tried to kill it. But they could not kill it. The boy had to sing for the Cow so that it would die.

Zulu 3. So the boy sang.

Scene 8:

There is a black out, and when the lights come back on the chorus are back in their choir outfits. The tree is now a cross. Mzwakhe and Thuthuko walk towards it. The choir are singing a Hymn, and take no notice of the two. They run up to the cross and steal it and disappear out of upper stage left. They then reenter at lower stage left, still carrying the cross. Here they see the bed, in the form of a taxi and jump in. Two of the chorus are pushing it and the shaman is driving. All the rest of the cast are now on the bed. They begin making a beat to the tune of a pop song. They make all the movements of the moving taxi. Then something goes wrong and the taxi brakes down.

Thuthuko: What now?!

Taxi Driver: Its broken ...

Thuthuko: We're probably being chased, do something!

Mzwakhe: We were told this would happen, come, let's run!

Taxi Driver: I'm sorry ...

Mzwakhe: Quick!

Scene 9:

They run out of upper stage right followed by the taxi driver and reenter at lower stage right. Here they run out in slow motion. There is a freeze of an army (by the chorus). They freeze in fear. Then the army changes to aggressive stance. They turn to run and freeze. Then in slow motion they move into their next move, which is an aggressive freeze. The army moves into a quick and loud "toi-toi". Then they freeze. Both groups change freeze twice. Then they all clash, and there is a freeze of battle. In a quick movement they run off stage. Black out.

The Zulu's sing a repeat of the last verse of "Hamba Bom-wel".

Zulu 1. Then the cannibals tried to cook the Cow, but the Sacred Cow would not cook. So the boy had to sing for the Cow so that it would cook.

Zulu 2. Then the cannibals ate the Sacred Cow. The boy wept.

Scene 10:

Thuthuko and Mzwakhe are walking up from lower stage, carrying the cross. From upper stage enter the chorus carrying a wounded man.

Thuthuko: Who are you?

Zulu's All: We are friends.

Thuthuko: What violence there is. Why?

Mzwakhe: It was our fate Thuthuko!

Zulu 1: Violence?

Zulu 2: Where?

Zulu 3: Everywhere!

Thuthuko: There are no gods, no God! We must destroy this cross, it brings false hope!

Mzwakhe: We must not!

Zulu 1: God?

Zulu 2: What God?

Zulu 3: God is already dead.

Thuthuko: Give me a weapon, show me the bushman.

Mzwakhe: The bushman will show you how to kill god. Beware the bushman.

Zulu 1: Bushman?

Zulu 2: The bushman are all dead ...

Zulu 3: Killed, killed, dead!

Mzwakhe: This is Hell, everyone is dead.

Thuthuko: Now you know hell.

Mzwakhe: Bushman, hear us! Spirits, hear us! Ancestors, hear us! Fathers, hear us!

Thuthuko: There are no spirits! No Ancestors! No God!

Move into "Religion Freezes". Move freeze into continuos fragments. Lights fade. Blackout.

The Zulu's sing the next verse of "Hamba Bom-wel".

Zulu 3. Then the boy began to sing. He sung softly, then he sung loudly, and he became brave.

Zulu 2. He gathered the bones of the Sacred Cow from where the cannibals had left them. He placed the bones together. He then fetched the skin of the Sacred Cow and put the bones on top of it. He sung to the Sacred Cow.

Zulu 3. He remembered his father and his home and his brothers. He thought of how bad the cannibals were for killing the Sacred Cow. Then he sang with all his heart for the Sacred Cow to come back to life.

Lights come back up and the Zulu's are holding the Man while Thuthuko and Mzwakhe hold hands and cry. The Man who is being held stands up. He speaks.

Shaman: You are looking for the bushman?

Thuthuko: The bushmen are all dead.

Shaman: I am not dead, I am here.

Mzwakhe: Are you ...

Shaman: No, but I'm a descendant of the bushmen.

Mzwakhe: Can you help us?

Thuthuko: We wish to kill God.

Shaman: You Cannot kill God. But I can help you.

Mzwakhe: We must not kill god.

Thuthuko: Help us, help me?

Shaman: Plant that cross, let it grow.

Thuthuko: How will that help us?

Shaman: That tree will give you life. That life will come from Zululand. You will be free Zulu, to die.

Thuthuko: I am not dead yet?

Shaman: No, you still live. But you will die, soon. We all die.

Thuthuko: Have I done wrong?

Shaman: You have lived as your culture demanded. That is not wrong. You have also looked at your traditional culture, your ancestors culture, and you have challenged it. You are not wrong. But you must plant that branch, you must give life to your people.

Thuthuko: I will die, but my people will live?

Shaman: You will not die, you will join your ancestors, you will live. But you will leave your body. The sickness that has taken away your strength has taken many bodies, and will take many more, so save your people, plant the branch.

The Zulu's begin sing the next verse of "Hamba Bom-wel".

Zulu 1. The Sacred Cow awoke.

Zulu 2. The boy was happy and sang for the Sacred Cow.

Zulu 3. The boy sang for the Cow to run away with him.

Zulu 1. The Sacred Cow carried the boy from the cannibals who chased them. When they came to the river the Cow did not want to cross it. But the boy sang for the Sacred Cow and the Cow crossed the river.

Zulu 2. When the cannibals came the boy asked the Sacred Cow if It would make magic by making a whirlpool in the river as the cannibals crossed it. The boy sang to the Cow and the Sacred Cow made magic. The magic whirlpool killed the cannibals.

The cross is planted by Thuthuko. It is placed where the tree was and begins to take the shape of the tree as the actors decorate it. A red cloth is then pulled from it to symbolize blood. Then the chorus and the shaman get into the black river snake, and flow it off through the audience. Thuthuko gets back onto the bed and takes up the freeze he was in before he was carried off.

The Zulu's sing Hamba Bom-wel.

Scene 11:

Mzwakhe and Thuthuko are alone in the hospital room. The bed is pulled closer and the mid-curtains are drawn.

Mzwakhe: Thuthuko, wake up!

Thuthuko keeps coughing as Mzwakhe tries to shake him awake. Then Thuthuko awakes.

Thuthuko: I'm dying!

Mzwakhe: No, you're not. You're alive, you are talking, I'm here ...

Thuthuko: Yes, I hear you. But I am happy, I must go.

He begins coughing again.

Mzwakhe: Doctor! Doctor!

Doctor comes in.

Mzwakhe: Doctor, help him, keep him alive.

Doctor tries to help patient. Thuthuko is still coughing.

Doctor: I'm afraid there is little we can do now. His test was positive, but that is of no help. Regrettably, it is too late.

Mzwakhe: Should we call a priest?

Thuthuko: *Coughs and talks.* No, call my family, give them my spirit. *Coughs continuously.* Give me our ritual, our tradition, our culture. It is mine too.

Thuthuko dies. Mzwakhe cries. The doctor exits. Then the chorus and the doctor enter carrying the branch. They perform a ritual around the dead man. Then they exit. The chorus re-enter, and sing the final verse of "Hamba Bom-wel".

Zulu 3. The boy was happy.

Zulu 1. He sang to the Sacred Cow.

Zulu 2. The boy sang for the Sacred Cow to come home with him.

Zulu 3. So they went together.

W O Z A 295
T H E A T R E
C O M P A N Y
Z



A Pietermaritzburg township street theatre company that has won national recognition for its work in bringing the stage to the people.

The Company



Thabo Ngobese (left)

Thabo is an aspiring actor, motivator and creative writer, who has been involved in both church youth and school productions. "*The Parables*" is his first professional stage appearance.

Phumlani Mwelase (right)

Phumlani's initial theatrical involvement was in school and community productions. He first appeared professionally in "*Psychopath*", a production he helped create, which won him the KZN ACC Best Actor award in 1997. In addition to acting, Phumlani also doubles as the company's Transport Manager.



Xolani Mdluli (left)

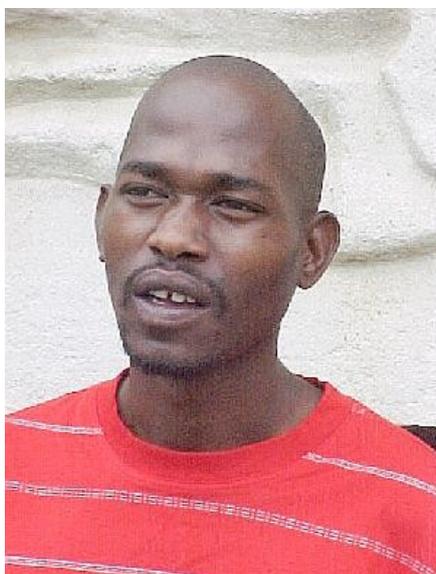
Xolani started out studying engineering but switched to drama when he was invited to work with Phumlani on "*Psychopath*". He toured with the production until its final performance at the Market Theatre Laboratory Studio in 1997.

Sibusiso Dlamini (right)

Sibusiso began his acting career as a schoolboy at KwaPata Secondary School in Edendale. He founded Walakahla Community Theatre Project with Phumlani Mwelase when they were both in Grade 9. In 1996 he won "Best Artist Award" for his role in "*Psychopath*", In 2000 he co-produced (with Parks Magwaza) and stage managed "*Parables*", written and directed by Lucky Mavundla.



Community Theatre Project with Phumlani Mwelase when they were both in Grade 9. In 1996 he won "Best Artist Award" for his role in "*Psychopath*", In 2000 he co-produced (with Parks Magwaza) and stage managed "*Parables*", written and directed by Lucky Mavundla.



Sibongiseni Mthlane (left)

Although the latest addition to the Woza acting line-up, Sibongiseni has been involved with the theatre group since its early days as stage manager, props manager, lighting hand, prompter and general back-up man.

THE PLAYS

"The Parables"

Written and directed by the late Lucky Mavundla, "*The Parables*" had its premiere in 1999 has been on tour in KwaZulu-Natal and Gauteng. It has been staged at Durban's Playhouse

and Loft theatres, the Hexagon Theatre in Pietermaritzburg and the Market Theatre in Johannesburg. It has also been performed before school, institutional and church audiences. The play is a 55-minute three-hander featuring Xolani Mdluli (25), Phumlani Mwelase, (24), Sibongiseni (24).

The drama revolves around three victims of circumstance and unemployment who are surviving as car-washers. Through their stories we explore different stereotypes, myths and political realities which make up life in “Democratic South Africa”. Despite hardship and disillusionment they come to realise that hope is not a political gift, but comes through spiritual enlightenment.

"Psychopath"

Written and directed by the late Lucky Mavundla, *"Psychopath"* premiered in June 1996 during the KZN Arts & Culture Council SADC Theatre Festival at the Durban Playhouse Theatre. It won the trophy for Best Play during the Festival and the two lead actors, won Best Performance awards. The 45-minute four-hander features the original cast of Xolani Mdluli (25), Phumlani Mwelase (24) and Sibusiso Dlamini (23), and newcomer Sibongiseni Mthalane (24).

It is a psychological drama that plays off in a mental hospital ward somewhere in the KwaZulu-Natal Midlands. As two patients talk to each other, one discovers that he was responsible for the other being there. During the political unrest and violence that marked the late '80s and early '90s one of the patients, Nyoniyandiza, was responsible for killing the family of the other patient, Hambahamba.

The loss of his family caused Hambahamba to have a nervous breakdown. Nyoniyandiza, stricken by guilt over the killing, takes to drink and drugs and a series of short-lasting relationships until he finally contracts HIV-AIDS. Psychologically unable to deal with being HIV positive, he lands up in the mental hospital. Now he has to face up to his guilt. It is an emotionally-charged drama that reflects the consequences of a community torn apart by political change. The other actors play the roles of Psychologist and Security Guard respectively.

THE STYLE

The author of the two plays, the late Lucky Mavundla, fled South Africa as a political exile during the Freedom Struggle years to work for the ANC in Angola and Tanzania. He wrote more than 20 plays, using drama to address contemporary political and social issues. He focussed on the lives of ordinary people, showing that under the surface there often lay surprisingly extra-ordinary revelations. He often made use of South American dramatist Augusto Boal's forum theatre technique. Boal, famous for his “theatre of the oppressed” school, helped audiences interact with actors to achieve a sense of fellow-feeling on socially-important issues.

About Woza Theatre Company

The **Woza Theatre Company** has its origins in several Pietermaritzburg and district theatre groups. **Walakahla Drama Project** was a local drama initiative involving the youth of

Greater Pietermaritzburg which was founded by Phumlani Mwelase and Sibusiso Buthelezi in 1994.

Walakahla's first professional production was "*Psychopath*". The four-hander play written and directed in 1996 by Lucky Mavundla for the KZN Arts & Culture Council SADEC Theatre Festival at the Durban Playhouse Theatre also won the "Best Play" award and trophy. The play went on to tour South Africa. In 1999 Walakahla Drama Project merged with Lucky Mavundla's **Lalela Theatre Works** to form the **Walate Work Company**.

Walate's first production was "*The Parables*" written and directed by Lucky Mavundla. The three-hander was staged at the Hexagon Theatre in Pietermaritzburg, the Durban Playhouse and at the Market Theatre in Johannesburg (during the Southern African Developing Countries (SADEC) Theatrical Festival in 1999). The company was also invited to perform during the Pietermaritzburg Economic Forum conference in March 2000. Lucky Mavundla's untimely death in April 2001 led eventually to Walate disbanding as its members sought contract stage work elsewhere. In April 2002 the actors joined forces again to form the present production company, **Woza Theatre Company**.



Lucky Mavundla (writer / director)

Lucky Mavundla, who died at the age of 37 in 2001, was a gifted playwright and director. "*The Parables*" was his 24th and last production. Born in Nqutu, he completed his school education in Pietermaritzburg. A teacher by profession and a humanist by conviction, he went into exile in 1990, first to Angola and then to Tanzania where he was the ANC's Deputy Head of Arts and Culture. On his return he joined the staff of Pretoria Technikon before returning to Pietermaritzburg to develop community outreach programmes for the city's Philharmonic Society. He specialised in edu-awareness productions, which used drama to stimulate thought and debate on contemporary issues. A typical example was his controversial production "*Breaking the Silence*" staged for the 13th International AIDS Conference in Durban during 2000.

HOW TO CONTACT THE WOZA THEATRE COMPANY

If you are interested in having a performance at your school or organisation you can contact us through:

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