

STAGING EMPOWERMENT?

AN INVESTIGATION INTO PARTICIPATION AND DEVELOPMENT IN HIV AND AIDS THEATRE PROJECTS

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Abstract

This thesis is an exploration of contemporary practice in the field of theatre for development as HIV and AIDS communication. The thesis explores the theoretical fields of communication for development, entertainment education and empowerment, in an attempt to understand how different approaches to communicating about HIV and AIDS can influence personal and social change, and impact on both personal empowerment and community development.

An examination of the literature on using theatre as a means to bring about development leads to the identification of key areas for investigation, including how participation is envisioned and implemented in theatre projects that focus on HIV and AIDS, and how participants are empowered through these processes.

My study includes a broad survey of practitioners who use theatre in this way, the results of which inform an examination of three specific case studies. The research data reflects that participation is used as a strategy in different ways in theory-driven interventions that are consciously designed to meet specific goals. While many practitioners highlight participation, this is often in interventions that are guided by the modernisation approach to development, where external organisations attempt to bring about pre-determined change within a beneficiary community. The low levels of participation in essential decision-making processes in these projects mean that these projects preclude some of the elements essential to bringing about empowerment, such as the development of a greater critical consciousness and encouraging community-based problem solving.

Such practice cannot bring about substantial long-term changes and empowerment for the project beneficiaries or for society more broadly. My research identifies a need to reconsider HIV and AIDS communication within the context of development, if change is to be brought about. In my concluding chapter, I suggest a number of ways to bring practice closer to the paradigm of *meaningful* participation as informed by empowerment theory.

Preface and declaration

The research described in this thesis was carried out in the School of Literary Studies, Media and Creative Arts, University of KwaZulu-Natal, Howard College Campus, Durban, from February 2009 until November 2010, under the supervision of Professor Lynn Dalrymple.

I declare that this study represents original work by myself as the author and has not otherwise been submitted in any form for any degree or diploma to any tertiary institution. Where use has been made of the work of others it is duly acknowledged in the text.

Signature

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Abbreviations and acronyms

AAA-HA	Applied Arts for Awareness of HIV and AIDS
AIDS	Acquired immunodeficiency syndrome
CBO	Community based organisation
CFPD	Communication for participatory development
CFSC	Communication for social change
DSC	Development support communication
DUT	Durban University of Technology
EE	Entertainment education
FGD	Focus group discussion
HDI	Human development index
HEI	Higher education institution
HIV	Human immunodeficiency virus
JHHESA	Johns Hopkins Health and Education South Africa
NGO	Non-governmental organisation
SACTWU	South African Clothing and Textile Workers Union
SRC	Students Representative Council
TFA	Theatre for awareness of HIV and AIDS
TFD	Theatre for development
TIE	Theatre in education
UNAIDS	United Nations Joint Programme on HIV and AIDS
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNICEF	United Nations Children's Fund
UVHAA	Umdoni and Vulamehlo HIV and AIDS Association
VCT	Voluntary counselling and testing

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CHAPTER 1: INTRODUCTION

This introductory chapter provides a context for this thesis, which is an exploration of contemporary practice in the field of theatre for development used as a strategy in HIV and AIDS communication. The chapter outlines the research problem and questions, and provides an overview of the assumptions and hypothesis upon which the study is based. It goes on to outline the research approach and methods used for the study, providing an introduction to the work as a whole.

The context for this study

Globally, AIDS-related illnesses remain one of the leading causes of death and are projected to continue as a significant cause of premature mortality in the coming decades. Sub-Saharan Africa remains the region most heavily affected by HIV, with Southern Africa the area most heavily affected by the epidemic. In 2008, sub-Saharan Africa accounted for 67 per cent of HIV infections worldwide, 68 per cent of new HIV infections among adults and 91 per cent of new HIV infections among children. The region also accounted for 72 per cent of the world's AIDS-related deaths in 2008 (UNICEF, 2009).

While HIV was recognised relatively late in South Africa, the epidemic took hold comparatively quickly, and we are now recognised as being the country with the highest number of HIV infections in the world. The first two cases of HIV in South Africa were recorded in 1982. By 1990, HIV prevalence was estimated at 1.2% of the population, and it was recognised to be a problem that affected both heterosexuals and homosexuals of all races (Ntozi, 2009; Avert, 2010). By 2008 this prevalence had increased to almost 20% of the adult population, with an estimated six million people living with HIV. Less than 30% of HIV positive people have access to anti-retroviral drugs, and South Africa sees around 350 000 deaths from AIDS each year (UNAIDS, 2008).

There is no doubt that HIV and AIDS have escalated from being a health problem to multi-faceted issues that permeate all levels of South African society. The epidemic has already increased government spending, reduced efficiency and brought about changes

to the fabric of South African society (Barnett and Whiteside, 2003). It affects governance, stability and social cohesion. With young people and socially productive adults as the most affected age groups, HIV and AIDS have an effect on the economy, on society, on the way that families are structured, on the provision and uptake of education, and on the labour sector.

The most immediate impact of the epidemic is felt at a household level, with the loss of family members, often care-givers and breadwinners. The impact on this micro-level results in a loss of income, increased expenditure for the family on healthcare or funerals, reduced spending on other items, the spending of savings, the withdrawal of children from schools, emotional loss and stress, stigma and isolation. This in turn impacts on the local community, and escalates to the macro-level where population growth and dependency ratios change, economic growth is slowed, access to education changes, economic disparities become more glaring, and government capacity is reduced (Jackson, 2002).

The particular social conditions of South Africa, including the legacy of apartheid, migrant labour, gender inequality and the breakdown of traditional family structures are seen as having fueled the epidemic (Hargrove, 2007). Poor living conditions, social inequality, stigma, taboo and fear add to these problems, and AIDS in South Africa poses a complex problem that requires a complex and nuanced response (Petifor *et al*, 2008).

With this broad view of the impact that the epidemic has had and continues to have, it is clear that HIV and AIDS pose a major threat to development in South Africa. The Human Development Index (HDI), which measures standards of living, has steadily decreased as the HIV prevalence has increased (Ntozi, 2009). This reduction in standards can be seen as a failure for a supposedly developing nation, and provides a strong argument for the need to place HIV and AIDS issues high on the national agenda.

Given the context for the increasing infection rate in South Africa, simply addressing HIV and AIDS as a health issue may exacerbate rather than alleviate the crisis. The epidemic should rather be seen as a development issue. A conceptual shift has been made by international agencies such as UNAIDS and the World Health Organisation to

view HIV and AIDS as a development issue, but Kerkhoven *et al* (1996) notes that governments have been slow to follow suit. Helen Jackson (2002) suggests that this has resulted in a long-term development disaster in Africa that requires a review of policy and programmes around the continent.

Applying a development perspective necessitates a deeper understanding of the social, economic, and cultural processes that gave rise to the epidemic and are in turn impacted on by the epidemic. This means that communication about HIV and AIDS needs to be approached from a development perspective, and this thesis is informed by the conceptual framework of development communication.

Communicating health information and encouraging behaviour change are at the core of the current response to HIV and AIDS (Tomaselli, 2009). However, this may not be the appropriate approach. Given the continuing rise in HIV prevalence, there is debate about the efficacy of previous South African HIV and AIDS communication campaigns.

The recognised key to reducing HIV prevalence is to provide information about HIV and AIDS and to encourage people to adopt behaviours that put them at less risk from infection. According to Mitchell *et al* (2001) behaviour change interventions offer the best chance of preventing the further spread of HIV and AIDS in developing countries. The primary focus of these behaviour change interventions should be to ensure that the audience has the necessary information, motivation and access to resources to change their sexual behaviour and thus reduce the likelihood of HIV transmission.

While there is a high level of awareness about HIV and AIDS in South Africa (Gow and Desmond, 2002) the continuously high prevalence figures suggest that this awareness has not always translated into individual behaviour change and the adoption of safer sex behaviours. This may be a result of poorly conceived national communication campaigns that have had little effect on the population.

Broad awareness campaigns that provide information alone are not sufficient to reduce the risk of HIV infection, as access to information does not necessarily bring about a change in behaviour (Francis and Rimensberger, 2005). This may be because a range of social and cultural factors that feed the epidemic and give rise to behaviours and

practices that place people at risk of HIV infection are not directly addressed in these campaigns. More detailed and segmented campaigns that address these factors from a development perspective may be more effective in curbing the epidemic.

This thesis explores the use of theatre as a medium for communicating about HIV and AIDS, and how theatre has or has not made the shift from communicating about awareness to communicating beyond awareness and behaviour change. The work examines the potential of theatre as a form suitable for a more development-oriented approach to HIV and AIDS.

Thesis assumptions and hypotheses

The use of theatre in traditional contexts for instructional purposes has long been documented. Christopher Kamlongera (1989), Zakes Mda (1993), Lynn Dalrymple (1995, 1997), David Kerr (1995, 1997) and Ross Kidd (1983) have detailed numerous experiences of theatre that functions as education, to comment and reflect on the lived experience of their audiences. Mda (1993) recognises the lack of scholarship in the area of using theatre as a medium specifically for development communication, and calls for authors to place theatre practice in the context of existing theories, paradigms and perspectives.

Theatre as a strategy for education or empowerment has been theorised and delineated over the past 50 years to improve understanding of the practice. Message-driven theatre is different from what is known as *pure theatre* or *professional theatre* that is created for entertainment or aesthetic purposes. Since the 1990s, *applied theatre* has become a generally accepted umbrella term that is used to describe utilitarian theatre that is used for non-theatrical purposes in specific contexts.

This thesis argues that applied theatre is a useful and effective vehicle for communicating about HIV and AIDS, and that it is a popular and accessible medium. Helen Nicholson (2005) suggests that the aim of applied theatre is to break down the predominantly Western view of theatre as something that can only be appreciated by the educated elite, and to make it a more accessible medium, where theatre becomes

integrated with other parts of daily life. As such, it may be an ideal vehicle to encourage participation in development initiatives.

Using popular media to communicate about health issues is known as Entertainment Education (EE), and is based on the premise that health messages couched in familiar and entertaining forms are more likely to reach their target audience. EE projects have the potential to influence audiences and to draw participants into performances through music, story-telling, dance, theatre, and other popular folk media. This concept is explored in Chapter 3 of this thesis, with some examples of how this practice is utilised, and how it is informed by theory.

My research also falls within the field of development communication. Development communication is understood to be communication specifically planned for the purposes of development. The nature of development communication is explored by authors such as Servaes (1995, 1999, 2007) and Tomaselli (1992, 2001), who identify a range of different approaches to communication for development. They note distinct paradigms of development communication which include modernisation theory, dependency theory, development support communication, and 'another development' (participation). These theories are useful in understanding the political and philosophical approach to development and the subject community by the donors or those in power.

This understanding of development communication provides the theoretical framework for this thesis, which is presented in Chapters 5 and 6. These chapters examine previous examples of using theatre for development initiatives, and explore how theatre can be used to bring about social development and personal empowerment with regard to understanding HIV and AIDS.

Current thinking in EE recognises that including local voices in message creation makes for more effective messaging, and promotes ownership by a community of the messages that could bring about change (Tufte, 2005). It is argued by Airhihenbuwa and Obregon (2000), amongst others, that participation in HIV and AIDS communication in particular, is an important factor in ensuring that messages are locally appropriate and effective. Theatre as a live and immediate medium that is popular and encourages participation has a particular appeal and can provide a powerful vehicle for this participation.

However, there is much debate about how participation occurs, who participates, to what degree, and to what effect (Cleaver, 2001; Cadiz, 2005; Narayanasamy, 2008). Participation can be at a range of different levels and can be hindered by a number of factors. My research explores the role that participation plays in theatre for development projects that focus on HIV and AIDS. Chapter 7 of this thesis explores some of these issues and goes on to present a model for understanding how participation plays out in theatre projects.

The recurring question in this literature on theatre for development is the relationship between participation and intervention (Mda, 1993; Page and Czuba, 1999; Nederveen Pieterse, 2001). This has been a particular concern of those investigating the use of entertaining media to disseminate health information, where beliefs led by the target community may be contradictory to the dominant Western thinking (Airhihenbuwa and Obregon, 2000). Focusing on HIV and AIDS-related projects, the research for this thesis will explore this intervention-participation relationship.

To evaluate different levels of participation, I use Sherry Arnstein's' (1969) *Ladder of Participation*, and use this as the basis to create a model for measuring participation in theatre projects, which informs my study. As a theatre practitioner, I have taken a pragmatic approach to this study, and the research hypothesis, analysis and conclusion are all informed by a search for a way to re-imagine and improve practice, as well as to challenge and inform both theatre and development theory.

There are four key hypotheses for this research:

Hypothesis 1: Participation in theatre projects happens at different levels and in different ways.

Hypothesis 2: Practitioners who are aware of appropriate theory will create theory-driven interventions that are consciously designed to meet their goals.

Hypothesis 3: Practitioners who ensure that their work is participatory are likely to achieve greater success in bringing about development and social change in the communities in which they work.

Hypothesis 4: Participants in inclusive participatory theatre projects are likely to feel a sense of empowerment through their involvement in the projects.

Based on literature in the field of participation, empowerment and development, my thesis provides an argument for increased participation in communicating about HIV and AIDS, particularly in theatre-based interventions.

Key research questions

Based on a review of the literature in the field, and in order to fill in some of the gaps in this field of scholarship, I have devised four key questions to guide my research. These specific research questions include the following:

- 1: What is the current practice in participatory theatre projects in South Africa that deal with HIV and AIDS?
- 2: How is this practice influenced by theory about development and empowerment?
- 3: How is participation envisaged by those who create projects in the field of HIV and AIDS?
- 4: How are participation and empowerment experienced by those involved in the projects?

These questions guide my research in the field, and are answered in the later chapters analysing my research data.

Research procedures

This research makes use of multiple methods, including those from both the qualitative and quantitative research paradigms. The research is essentially descriptive, examining the practices of theatre for development in the field of HIV and AIDS in general, and examining in particular the recent theatre projects of three specific organisations as case studies. The descriptive research approach allows me as the researcher to describe, analyse, and interpret the phenomenon of participation in this work.

The research includes elements of both the quantitative and qualitative paradigms. For this study I developed three research tools. These included a survey questionnaire to interrogate what informs current practices in the field, an interview schedule for interviews with project managers, and a guide for focus group discussions with project participants, to allow for closer scrutiny of the three case-study project examples.

The research questions detailed above are answered through the collection of data through these three streams. A detailed description of the research approach and procedures is presented in Chapter 8. This is followed by presentation and discussion of the research data in Chapters 9 and 10, with further analysis in Chapter 11. Conclusions are drawn in Chapter 12, which also provides recommendations for practice and for further research.

A note on terminology: talking about theatre and performance

There are an abundance of terms that are used to describe theatre practice. In the interest of simplicity, and for the purposes of this thesis, I use the term *theatre* to refer to a play performance (a product), and *drama* to refer to the more process-based exploration of character, emotions, and issues. These terms derive from the Greek terms *dran* meaning 'to make' or 'to do', and *theatron* describing 'a viewing place'. I use the term *performance* as a noun, to mean a prepared and played action to an audience. I use the verb *to perform* as meaning to take on a role or roles in the performance action. The term *actor* is used to define a person who participates on stage in a performance, and *audience* for those who watch this.

In the referenced literature, and in my own study, *entertainment education (EE)* is the broad term used to describe the use of entertaining media for educational purposes. The more specific term *applied theatre* is used to describe theatre that is created specifically for a functional purpose. The term *theatre for development (TFD)* is widely used to talk about theatre practice that is created for development related projects. *AIDS theatre* is a term commonly used to describe a more didactic approach to presenting plays about HIV and AIDS. In my study, I look specifically at theatre that combines these two foci of TFD and AIDS, bringing AIDS to the fore as a development issue. In order to avoid the clumsy construction of "theatre for development with a focus on HIV and AIDS", I have coined the term *Theatre for AIDS (TFA)* to refer to this practice, and will use this term throughout this thesis.

CHAPTER 2: COMMUNICATING ABOUT HIV AND AIDS

This chapter explores some of the complexities around communicating about HIV and AIDS, and the need to find effective vehicles for this communication that result in the adoption of positive health behaviours for individuals, and positive social change for communities to support this individual change.

Communicating about HIV and AIDS

Communicating about HIV and AIDS raises a specific set of contradictions and challenges. As a health-related issue, it is one that needs to be dealt with by providing specific and potentially-life-saving bio-medical information. However, it also needs to address some of the complex social factors that exacerbate the HIV prevalence. If messages about HIV and AIDS are simply generated by 'experts' from outside of the target community they may not be seen as relevant and accessible by the audience.

The ABC (abstain, be faithful, use condoms) behaviour change model calls for individuals to make changes to their sexual behaviour in order to prevent HIV infection. However, the efficacy of this approach in South Africa as well in as other contexts has been questioned in the light of increasing HIV prevalence rates (Murphy *et al*, 2006; Ackermann and De Klerk, 2002). This approach is seen as a top-down solution to a complex problem. It has been criticised widely as being too simplistic, confusing, and not context specific and culturally appropriate (Mulwo *et al*, 2009; Murphy *et al*, 2006; Green, 2003; Klugman, 2000).

This simple instructional approach does not take into account issues such as poverty, social inequality, gender inequality, taboo and fear, which feed the epidemic. As such, it cannot hope to bring about lasting change for the audiences that it reaches.

Decisions about sexual behaviour are intensely personal and often not rational. Because HIV is predominantly spread through sexual contact, which is both intimate and emotional, the reasons for a person adopting or ignoring HIV prevention messages are going to be less rational than when considering other health threats. Decisions regarding sexual behaviour are driven by factors including gender relations, sexual identity, desire,

pleasure, preference and self-expression (Gumede and Durden, 2010). This means that campaigns dealing with HIV and AIDS should not centre solely on questions of health, but should take a more holistic approach and include issues of gender and sexuality.

Reasons for changing behaviour are also mediated by the society in which individuals find themselves. Health messages must therefore take into account how HIV and AIDS are framed and discussed in the local context and must engage with “the broader structures of social conduct within which meaning is articulated, circulated and appropriated” (Kunda, 2010:1).

While theory about behaviour change informs most HIV and AIDS communication campaigns, this theory is not always appropriate. Rather than addressing behaviour only, communication campaigns need to address the context in which people live and the social conditions and culture that governs this context. This provides a further motivation for approaching the problem from the broader perspective of development.

There is a range of studies which explore how and why HIV and AIDS communication campaigns fail to meet their mark (Airhihenbuwa and Obregon, 2000; Munthali, 2008; Muthuri and Mwangi, 2010). Many of these centre on the lack of cultural appropriateness of the campaign messages. Airhihenbuwa and Obregon (2000) recognise that different understandings of health in the western and African contexts prevent the adoption of messages that are created in a western-bio-medical framework. Alister Munthali (2008) finds that issues of culture and age appropriateness affect the uptake of HIV and AIDS messages in radio broadcasting in Malawi; and Muthuri and Mwangi (2010) find that a lack of recognition of the influence of village elders in HIV and AIDS programmes in Kenya hinders these programmes. All of these critiques suggest that if the local context and conditions are not adequately understood, and local input is not acknowledged in programme design, then these programmes are unlikely to succeed.

Further to this, the United Nations recognises that people have a human right to have their cultural knowledge and interests included in the development policies and programmes that concern them (UNFPA, 2004). Ignoring cultural beliefs and practices not only denies this right, but also means that the intervention is less likely to have the desired change effect.

A cultural approach to health “utilises culture as a lens through which one can gain a greater understanding of individual and collective health behaviours” and can provide insight to formulate more effective health programmes within specific cultural contexts (Somma and Bodiang, 2003). However, it is important to avoid generalisations about culture, and to recognise the heterogeneity within cultural and geographic communities. Not all people accept all the cultural values of their own societies, and people who share the same culture can and do disagree about values, customs, norms, objectives, and courses of action (UNFPA, 2004). Programmes that do not take this diversity into account may fail, as they are created on unrealistic notions of a homogenised community (Clever, 2001). This notion is explored in more depth in Chapter 7.

Cultural awareness recognises this broad diversity within geographic or other types of communities. An important notion of difference is that of gender, and the recognition that women and men, boys and girls are not homogenous groups. There are stratifications with respect to race, class, sex, age, language, ethnicity, and other variables which may affect the uptake of health messages. While many programmes have in mind a ‘target audience’ for their programmes, this audience should be imagined as being comprised of a range of different people with different needs.

A case in point is the study of the use of condoms by university students undertaken by Abraham Mulwo in 2008. Although students were cognisant of the need for and benefits of using condoms, they were reticent to use the free government condoms provided on campus. The study found that students perceived these condoms as ineffective, and even 'infectious'. These perceptions led them to believe that government-issued condoms were of lower status than the commercial brands, and some students preferred to engage in unprotected sex rather than use public-sector condoms (Mulwo, Tomaselli and Dalrymple, 2009).

In this example, students’ perceptions of these condoms meant that condom-use messages, although understood, were not adhered to. The provision of government-issued condoms on campus was an inappropriate solution in this context. This failure could be counteracted by more locally appropriate messages informed by students’ understandings, and the appropriate provision of resources. This example provides a

strong argument for the need for more focused and locally appropriate communication campaigns.

The 9th United Nations Communication for Development Roundtable Report (2005) finds that poor communication strategies have been responsible for the failure to prevent the spread of the HIV and AIDS epidemic. The report recognises a shift amongst many international organisations to a more human-rights based approach to communication for social change. This sees a renewed emphasis on developing more participatory communication strategies “that provide people with a voice as well as sending them a message” (2005:15).

Media for public health messages

Communication about HIV and AIDS should be designed to spread across multi-levels, of the individual, social networks and the community, to have maximum effect. It is clear that one single selected communication medium cannot reach across this vast range of levels, and this provides a motivation for adopting a multi-media approach to HIV and AIDS communication.

A national study of what messages South Africans listen to shows that the two major influences in people’s attitudes and knowledge about HIV and AIDS are interpersonal communication and the mass media (Shisana *et al*, 2005). Using different media channels reaches people at different levels with messages that are context-appropriate. A number of scholars argue that to bring about effective change, campaigns should ideally include both mass media and small-media strategies (Bertrand *et al*, 2006; Parker, Dalrymple and Durden, 2000). This strategic use of a variety of media can minimise the pitfalls of a singular approach.

Mass media interventions

Mass media is generally recognised as those channels of communication that reach large groups of people at one time, such as television, radio and the press or other print campaigns. A 2008/2009 study commissioned by Johns Hopkins Health and Education South Africa (JHESSA) showed that radio was the most highly accessed medium by

South Africans of both genders and all age groups, and was therefore an important channel for HIV and AIDS communication. Television emerged as the most widely accessed medium by youth, while men in their thirties preferred newspapers, and women of the same age preferred magazines (JHESSA, 2009).

Although mass media channels have the ability to reach large numbers, and exert influence over audiences, there are drawbacks to their usage. This type of media is generally expensive to produce and requires that the audience has access to technology or literacy. The tendency to rely on mass-media campaigns has been found to have fallen short of what is needed to bring about significant change (Myhre and Flora, 2000; Kiragu, 2001). This is because local conditions and needs vary amongst the audience, and cannot all be taken into account in the message creation phase.

A further criticism of the mass media is its tendency towards top-down messaging. HIV and AIDS communication is traditionally based on western bio-medical knowledge, that is created by 'experts' and disseminated to the general public. Tomaselli (1997) asserts that this practice of top-down message imposition has an alienating effect and results in audiences feeling that the message is not relevant to their own circumstances.

Campaigns should be based on an understanding of how meaning is *made*, rather than how messages are *understood* by their audiences (Parker, 1997). If audience reception and understanding are not taken into account in the message-creation phase, it is likely that these messages will be misinterpreted.

Mass media programmes are designed to appeal to a wide audience, with a resulting wide range of interpretation of the media messages by its audience. Given the heterogeneity of most societies, and South African society in particular, the intention of the message may be understood differently by different groups within this mass audience.

A further criticism of mass media messages is that they cannot always take into account the social consequences or constraints that influence action, and may therefore not be relevant to the audience. It is argued that persuasive campaigns need to be cognisant of the structural and environmental conditions in which the audience finds itself

(Airhihenbuwa and Obregon, 2000; Parker, 2004). If messages are not personalised and influenced by the context in which they appear, then messages will miss their mark.

The mass media should not however be discounted entirely. As an extensive study of interventions across Africa, Asia, Latin America and the Caribbean, Bertrand *et al* (2006) explores the impact of the mass media on the knowledge, attitudes and behaviour of their audiences. Their findings suggest that the mass media had a positive impact on audience's knowledge of HIV transmission, and their knowledge of the need to reduce high-risk sexual behaviour.

The study showed that the more nuanced outcomes of the perceived risk of contracting HIV, understanding self-efficacy, increasing interpersonal communication with a sexual partner, and the likelihood of using condoms or practising abstinence were, however, not conclusively met through the mass media interventions. These findings show that there is a need for other interventions to fill the gaps where more personalised information is necessary to bring about behaviour change.

A further exploration of mass media campaigns concludes that where resources permit, single medium campaigns have made way for "non-traditional communication modalities and multiple channels" (Myhre and Flora, 2000:41). The original defined lines between mass media and small media campaigns have become blurred, and combining different types of media channels is the currently preferred approach.

Combining channels is realistic for national large-scale campaigns, but not in all contexts. In communities with limited access to mass media channels and with low literacy levels, media such as television, radio, billboards, print media and pamphlets are not useful strategies. In these cases, it is more appropriate to use small-scale media that are more cost-effective, have minimal technical requirements, and can be tailored to specific audiences.

Small media interventions

Small media are recognised as channels of communication that are more personal and require minimal technology. These are often real-time, dialogue-based strategies that

include arts-based methodologies, posters, booklets, promotional items, participatory workshops, events, activities and other forms of face-to-face dialogue (Parker, Dalrymple and Durden, 2000).

Small media are often cheaper to produce than their mass counterparts, but have drawbacks in that they are labour intensive and can only reach smaller groups of people at one time. These strategies can also provide non-standard information if not carefully regulated. The benefit is that small face-to-face media have the potential to be more interactive and community-based, and to involve local stake-holders to a greater degree than the mass media is able to do (Bertrand *et al*, 2006).

Small media provide the opportunity for the creators of health campaigns to devise relevant and acceptable messages for sub-national audiences, sectors or groups, and to allow for more nuanced communication. Using these smaller media channels allows for variations in the audience composition. This gives an opportunity to create messages that are target and context-specific, which has an impact on how they are received.

Understandings and beliefs about HIV and AIDS are generated at a local or micro-level. As dialogues about HIV and AIDS are happening at the local level, solutions should also be generated at this level, involving community-generated media (Parker *et al*, 2007b). Communication campaigns that encourage participation and the creation of messages in partnership with the target community are likely to be more effective. This marks a shift from the emphasis on *messages* to an emphasis on *understandings*.

Locally created media may be more effective in capturing local perspectives, as well as meeting the imperatives of the communicators (Parker, 1994; 1997). While Parker argues that this methodology generates relevant and viable small media products, it has some of the drawbacks of mass media in that it is time-consuming and requires special skills and resources. This participatory approach also requires some outside 'expert' intervention to ensure that myths are dispelled and that message content is accurate as well as being locally acceptable.

Where locally generated media is not an option, it is important that at the very least an understanding of how the disease is discussed at this level is taken into account when

messages are designed. The move away from mass media to small media or from top-down to bottom-up 'subject-generated' media is expected to be more effective in influencing attitudes and changing behaviour (Parker, 1994). However, there are a number of constraints to implementing these participatory strategies, including political expedience and the need for quick-fix solutions (Tomaselli, 1997; Waisbord, 2003). Some of these constraints will be dealt with later in this thesis, in my discussion on participation.

Theatre as a strategy for communicating about HIV and AIDS

A revised approach to communicating about HIV and AIDS incorporates more participatory practices that are firmly rooted in the culture and community of the target audience (Myrhe and Flora, 2000; Tomaselli, 1997). Theatre, with its ability to engage people on a personal level, may be a suitable medium strategy for such communication.

Theatre is described as a *meso-level* medium, combining some of the elements of mass media with those of small media (Valente *et al*, 2003). Theatre has the mass media element of communication from a single source to a wide audience. The immediacy of theatre and the opportunity it provides for dialogue and feedback are reminiscent of small media approaches. Theatre has many of the benefits of small media in its ability to engage with the audience directly at a more personal level, and within a particular social context.

Sexuality is an intensely personal issue. Because cultural mores and taboo prevent many groups from discussing sex and sexuality, and by extension, HIV and AIDS issues, a vehicle such as theatre provides a removed space in which to explore this personal issue publicly, without directly flouting customs.

As a communal activity that brings people together, theatre provides a place for them to engage with complex issues in a ritualised and removed way. Richard Schechner (1988, 2002) provides evidence that ritual and arts both deal with issues that are problematic and need to be exaggerated to be understood. Rituals are based around key social interactions such as hierarchy, territory, and sexuality. The frame of the ritual, be it worship or theatre, allows people to understand the significance of the event without

having to engage directly with it. In this way, theatre can be seen as an opportunity for a community to engage non-directly with issues of importance that are otherwise seen as threatening or intimidating, such as HIV and AIDS.

Further to this, theatre can provide a space where the unspeakable is spoken. Fraser McNeill (2009) argues that cultural conventions in South Africa dictate that death and the causes of death cannot be spoken about. He suggests that complex social processes are employed to “create and maintain the avoidance of open conversation around HIV/AIDS” and that these are rooted in these conventions (2009:353). This consensus for silence means that innovative and non-threatening ways must be found to address HIV and AIDS issues.

The fact that many HIV and AIDS plays use humour as a way to address these complex and serious issues results in a high enjoyment level by audiences. Using humour as an approach to deal with difficult issues is a recognised approach in both cognitive and social psychology. The use of humour encourages the audience to process information on an intellectual level as well as on an emotional level, and can encourage a feeling of well-being (Martin, 2007). My own research into how audiences rated an HIV and AIDS play reveals that respondents found that theatre is enjoyed as a means of communication (Durden and Nduhura, 2007). This notion of enjoyment is at the heart of EE theory, which asserts that enjoyment enhances learning (Piotrow *et al*, 1997).

The Mitchell *et al* study (2001) finds that audiences preferred theatre to other media such as video, pamphlets and community educators. Because theatre has an impact on an emotional and a cognitive level, it presents situations that audiences can relate to and process, which assists in their remembering specific messages. Mitchell *et al* (2001) investigates the recall of messages from a theatre performance and found that surveyed respondents were able to recall specific messages from plays both immediately after the performance and months later. In this study, 63% of surveyed audience members recalled the specific messages immediately after the performance, and 50% recalled these specific messages three months after seeing the play. This finding shows that the theatre was both understood and remembered. However, recall dropped after a number of months.

While acknowledging theatre as an effective medium to transmit information and open up dialogue on HIV and AIDS issues, there has been some scepticism about the ability of theatre to have a significant impact on behaviour, particularly in the earlier stages of the AIDS epidemic. Claims that theatre can change behaviour are often anecdotal, and there have been few reported control studies that substantiate these claims.

When compared to other media, Elliot *et al* (1996) argue that the effects of theatre are not significantly greater than the effects of other media. Their study compares the effects of a theatre performance on a group with the effects of a seminar on a separate group (Elliot *et al*, 1996). This study found that although the theatre group reported changed behaviour with regard to buying and carrying condoms, this was the only significant difference between the two groups. This study suggests that the theatre performance did not otherwise have a significantly different impact on the knowledge, attitudes, and behaviour practices of the exposed group, when compared to the group that had attended the seminar.

Others, however, have found that theatre can effectively be used to engage audiences with regard to their attitudes about people with HIV, and their own beliefs with regard to their susceptibility to HIV (Treder-Wolff, 1993; Denman *et al*, 1995). Theatre can play an important role in highlighting people's susceptibility to the disease by showing characters on stage with whom the audience can identify. Many HIV and AIDS interventions are based on the *Health Belief Model* of behaviour change, which suggests that if people understand their susceptibility to HIV, the perceived severity of being infected, the perceived benefits of preventing infection, and the perceived barriers to doing so, then they are equipped and motivated to make the necessary behavioural change (Glanz *et al*, 1997).

For audiences to be engaged to the point where they will consider changing their behaviour, the quality of the presentation must be high so as to encourage personal identification and involvement with the performance (Tufte, 2002; Mavrocordatos, 2003). This notion will be discussed in more detail in later chapters.

Turning awareness of HIV and AIDS into action is a vital step in changing behaviour. The concept of *self-efficacy* accounts for the confidence that a person has in his or her

own ability to take such action. For an audience to heed the behaviour change messages, this element of confidence must be built among the audience (Bandura, 1995). Meyer-Weitz (2005) finds that over 30% of adult South Africans have a fatalist view about HIV and AIDS, and that they report a low level of self-efficacy to effect change. This sense of fatalism may discourage people from seeking help, or from changing their behaviour.

Criticisms of individual behaviour change theories assert that it is not enough to call for individuals to change their behaviour without providing the necessary motivation and support for this. Social support for change is an important factor in ensuring that behaviour change is sustained (Consolvo *et al*, 2009). The role that theatre can play in building social support is therefore significant.

Theatre is essentially a social event where the practice of constituting meaning becomes a communal act in the shared space of the theatre experience. In the context of HIV and AIDS communication, theatre can create a space for the interaction, dialogue, and the negotiation of meaning that Parker *et al* (2007) argues are important to increase a shared understanding of HIV and AIDS.

In addition to the potential for this more participatory horizontal communication about HIV and AIDS, theatre can provide a medium for communication that does not rely on literacy or access to technology, but makes use of interpersonal communication. It can be more inclusive, accessible, cost-effective and participatory than other modes of communicating and may therefore succeed where other communication has failed.

Since 1990, there has been a growth in the popularity of theatre and drama-based methodologies for HIV and AIDS awareness in schools, prisons, community groups, workplaces and a range of other settings (Marlin-Curiel, 2004 and Dalrymple, 2006). However, there are differences between the form and approach that can be applied to such theatre (Francis and Rimensberger, 2005). At one end of the continuum we see an interventionist didactic theatre that calls for specific behaviour change, and at the other we see theatre for development which aims to build consciousness and to bring about self-directed change within the community. The following chapter explores some of

these differences, exploring the literature of the field of Entertainment Education and discussing examples of South African HIV and AIDS theatre projects.

CHAPTER 3: THEATRE AS EDUCATION AND A CATALYST FOR CHANGE

The previous chapter argues that HIV and AIDS communication must take into account the complexity of human decision-making processes and social context. This chapter explores the impact that theatre can have on a range of different levels, including the emotional, cognitive, social and communal processes of an audience, in order to bring about both behaviour change and social change with regard to HIV and AIDS.

The chapter presents a history of using theatre to educate and to encourage behaviour change, based on the theatre poetics of Aristotle (1989), and a more revolutionary approach to using theatre as a means to bring about social change as proposed by Bertolt Brecht (1949, 2000) and Augusto Boal (1979, 1995, 2002).

The roots of combining entertainment and education

The practice of using theatre for educational means is built on a long history of understanding the impact of theatre, and has been harnessed into health education as part of what is now known as Entertainment Education (EE). EE is defined as “the process of purposely designing and implementing a media message both to entertain and to educate, in order to increase audience knowledge about an educational issue, create favourable attitudes and change overt behaviour” (Singhal and Rogers, 1999:9). Contemporary EE is based on a wide range of theories and has been widely adopted in Africa, Asia and other developing countries, as a result of innovative programmes and technical and financial support from the United States of America. However, the practice predates these theories, and using entertainment has been a recognised way to communicate social messages throughout many cultures.

In many cultures, the two facets of entertainment and education are not divorced, but are historically linked. The use of theatre for instructional purposes in traditional African societies, and its modern application, has been investigated by the likes of Christopher Kamlongera (1989), Zakes Mda (1993), Lynn Dalrymple (2006, 1997), David Coplan (1997), David Kerr (1995, 1997) and Ross Kidd (1983). These scholars reflect how

indigenous performances that combine spectacle with learning are well-integrated into communal life, with a strong functional element and dual role, to both entertain and to teach.

This tradition has similar practices in many cultures. In 300 BC, the philosopher Aristotle provided an analysis of the elements and effects of the performance of Greek tragedy which led to the development of his *Poetics* (1989); a guideline to how drama can and should be created and utilised in society. These original ideas have been expanded in a number of modern theories that explain the effects of theatre on an audience.

Aristotle (1989) suggests that the drive towards drama (in the sense of enactment) is innate in human beings. This view suggests that theatre has the power to draw us, both as spectators and as actors, towards it, making it a powerful medium for any message. Just as we desire to play or act, so we desire to watch the actions of others (and to act vicariously through their actions).

The processes of theatre and drama actively engage feelings and the imagination, which stimulate individuals on a cognitive level. Watching a theatre performance and being part of the experience can influence an audience's view of the world, and encourage them to give voice to their understanding of the world and their place in it. In this way, theatre encourages engagement and analysis, and may develop creativity and critical thinking skills.

Modern day *play theory* provides an argument for the use of EE, through its assertion that entertainment and pleasure are legitimate pastimes that allow for individual growth and learning through interaction with others (Coleman, 2000; Stephenson, 1988). Play theorist Janet Myles (1995) suggests that through the use of observation, imitation and imagination, play allows children and adults an opportunity to experiment through making choices and practising skills. This communicative social process allows them to gain confidence and to acquire new knowledge and skills.

Further to this, the psychoanalytic theory of 20th Century analysts such as Sigmund Freud and Karl Jung recognises that both play and art have therapeutic benefits in terms of relaxation, reflection and recreation (Courtney, 1974). In the context of a theatre

performance, these therapeutic benefits include the audience members relaxing and enjoying the entertaining medium, while learning is involved as they reflect on the play's content and recreate this in terms of their own circumstances.

For Aristotle, the observation of mimesis (the enactment of action) provides us with an opportunity to learn through the act of observation: "Men enjoy looking at images, because... as they contemplate them they apply their understanding and reasoning to each element" (1989, Chapter 4). This provides an argument for theatre to present images that can encourage an audience to observe others and through understanding and reason, to develop a self-awareness that can lead to change. These complex processes are at the core of how theatre can be a catalyst for change.

Theatre can present ideas and events in terms of characters which appear to be real people who are deeply and personally affected by the events of a play. Through watching theatre, an audience can recognise what they see on stage and see how their own lives could be similar or different. The Aristotelian notion of catharsis is that the audience develops empathy for the protagonist, and feels pity when a tragic fate befalls him or her (1989, Chapter 6). Having observed the mistakes that the protagonist makes, and seeing his or her *hamartia* or fatal flaw cause great suffering, the audience can decide to avoid similar behaviours or choices in order to avoid the same fate.

While theatre may spark this recognition and create awareness, this awareness is not always translated into the action that is necessary for change. The degree to which this change happens may be dependent on how theatre is used. It is important to differentiate between the participation of individuals in theatre as audiences, and the more process-oriented participation that involves people as part of the performance. Being involved in the creation of theatre can encourage self-expression, can build confidence and commitment, and empower people to adopt new behaviours (McLennan and Smith, 2007), and it is argued that greater participation can bring about greater change for those involved in the theatre processes (Dalrymple, 2006; Saye, 2004).

Theatre as an impetus for social change

A major shift in thinking about theatre as a tool for social change came about with the work of Bertholt Brecht in Germany during the first half of the twentieth century. Brecht was strongly influenced by Marxism and viewed theatre as a way to instruct people to think differently. While building on the roots of Aristotelian didactic theatre, Brecht called for a re-envisioning of theatre balancing the need for entertainment and education, arguing that “the contrast between learning and being entertained does not necessarily exist in nature; it has not always existed and need not always exist” (Brecht, 2000:26).

Brecht’s theatre aesthetics spoke strongly of the need to combine interesting and pleasant spectacle with the opportunity for the audience to *think* about what they saw, rather than merely reacting to it on an emotional level (Brecht, 1949; 2000). Brecht distinguished between traditional Aristotelian dramatic theatre and his own *Epic Theatre* by the ways in which they were presented, and the reactions that the theatre provokes in the audience.

On watching dramatic theatre, Brecht proposes that the audience responses include the following:

Yes, I have felt that too. That’s how I am. That is only natural. That will always be so. This person’s suffering shocks me because he has no way out. This is great art, everything in it is self-evident. I weep with the weeping. I laugh with the laughing.

Brecht, 2000: 25.

In contrast to this, Brecht anticipates that the audience for Epic Theatre will have the following responses:

I wouldn’t have thought that. People shouldn’t do things like that. That is extremely odd, almost unbelievable. This has to stop. This person’s suffering shocks me, because there might be a way out for him. This is great art, nothing in it is self-evident. I laugh over the weeping. I weep over the laughing.

Brecht, 2000: 26.

Where the drama and emotion presented in dramatic theatre is obvious, Epic Theatre aims to be more surprising. Brecht sees dramatic theatre as an interpretation of the world, but Epic Theatre as a way to change the world. The idea behind Epic Theatre is to present the audience with a challenge, where instead of accepting things as they are presented, they consider alternatives to the status quo, and look for “a way out”. Brecht deliberately sets out to develop this sense of questioning amongst the audience, so that they approach the world more critically. According to Brecht, this sense of critical engagement with reality would bring about necessary social change.

Following in the Brechtian tradition, the Brazilian dramaturge Augusto Boal gave rise to the concept of Theatre of the Oppressed. Augusto Boal created his own ‘Poetics of the Oppressed’ (1979), in critique of the Aristotelian *Poetics* as using theatre as a tool for control and repression. Boal’s poetics calls for theatre to be counter-hegemonic, to challenge the dominant ideology, and to be more participatory. Boal’s methodology is essentially political, and sets out explicitly to change society, rather than simply reflecting or interpreting it.

For Boal, the fact that drama is a natural activity necessitates that theatre should be the domain of the populace at large. Boal suggests that theatre did start as such, “free people singing in the open air” (1979:119) but changed as the ruling classes took possession of the theatre, and developed a separation between actor and audience. He was strongly influenced by the progressive pedagogy of Paulo Freire, with its emphasis on the full participation of learners in the education process, and brought this notion of participation into his theatre practice.

The Freireian notions of participation and critical consciousness, and an awareness of the forces of oppression, are the primary elements in Boal’s work, and these notions are explored in more depth in later chapters in this thesis. Boal suggests a new way of conceptualising theatre, its function and its forms, and created a series of theatre exercises and techniques whose goal is “to turn the practice of theatre into an effective tool for the comprehension of social and personal problems and the search for their solutions” (Boal, 1995:15). Recognising the ability of theatre to bring about change, Boal sees theatre as training for real action, and a “rehearsal for revolution” (Boal, 1979:122).

Beyond having an effect on the audience as individuals, it is recognised that theatre has a wider impact on the community. If an individual's peers, family or partners are also part of the theatre audience, theatre will have impact on local social networks. Watching a theatre performance can influence an audience's view of the world, and encourage them to give voice to their understanding of the world, and their place in it (Boon and Plastow, 2004). In this way, theatre can encourage discussion amongst a peer group, and people can share ideas, experiences, and new knowledge gleaned through the theatre within their own social networks.

Performance provides a way to “constitute meaning and to affirm individual and cultural values” (Stern and Henderson, 1993:3 in Schechner, 2002:16). This practice of constituting meaning becomes a communal act in the shared space of the theatre experience. As audiences identify with the actors and with each other, this may lead to feelings of charity and support (Chen and Li, 2006). Issues that are identified as important within the community become a shared community concern rather than an individual concern, and this sense of identity and communality could contribute to social and political change.

The work of both Brecht and Boal highlights the importance of the audience reflecting critically on what they see presented in performance. This concept of critical reflection has influenced the contemporary view of the function and potential of theatre to bring about social change. From this perspective, theatre is not only about entertainment, but also about enlightenment and development.

There is a marked difference between using theatre as an entertaining medium, and using theatre as a medium for development. These differences are noted in the three generations of entertainment education that are recognised by Thomas Tufte (2005) and discussed below.

The three generations of entertainment education

Entertainment Education strategies are generally informed by a theoretical approach towards behaviour change (Singhal and Rogers, 1999; Piotrow *et al*, 1997). Changing an audience's behaviour necessitates a call for audience members to take specific steps

to action. Theory informs how an EE intervention is both conceived and received. Thomas Tufte (2005) traces the development of EE through three generations, each based on different theories.

The first generation of EE, which gained popularity in the 1970s, is informed by social marketing theory, the second generation of the 1990s builds on theory such as the diffusion of innovations, and that the third generation, which is favoured in the new millennium, explores issues of power, social problems, and social and structural change (Tufte, 2005: 670). Similarly, Guy Bessette (2004) notes a shift from “informing or persuading people to change their behaviour” to “facilitating exchanges between different stakeholders to address a common problem” (2004: 9).

Both the content and the form of all EE interventions are influenced and informed by particular selected theories, and a specific approach to development communication.

Theatre and first generation entertainment education

First generation EE interventions are based on individual behaviour change theories. These theories have come in for criticism when applied in non-western contexts, where the demographics of the HIV epidemic are different because of social circumstances (Thompson, 2009; Ankomah *et al*, 2004). The social conditions in these contexts often determine that individuals do not have the personal power or efficacy to carry out decisions that they have made on an individual level.

A further criticism of the individual behaviour change theories is that they are not appropriate in a context that places greater emphasis on the concept of the community than on that of the individual. Notions of health in many African cultures are more closely tied to the health of the community than to individual health (Airhihenbuwa and Obregon, 2000). Communication campaigns that are created without reference to the culture of the target community may encourage individuals to adopt beliefs and behaviours that are in conflict with the dominant beliefs held by the rest of the community, and newly adopted behaviours are then difficult to sustain. It is therefore vital that the process of creating theatre to bring about behaviour change is informed by

local conditions, culture and constraints. Addressing these issues may also bring about social change that supports and affirms individual behaviour change.

This type of first generation EE draws strongly on the Aristotelian approach of *instruction*, where the theatre performance shows an audience what they should or should not be doing (Aristotle, 1989). Aristotle's theatre was essentially a tool for upholding the repressive apparatuses of Athenian society, teaching lessons and values to a passive audience. This controlling practice uses theatre to reinforce hegemonic norms, and is apparent in much of the theatre that we see on both the professional stage and in educational practice throughout history.

Theatre performances that fall within this first generation of EE are an example of *drama as didactic* (Francis, 2008). Here the emphasis is on giving information about HIV and AIDS, with an eye to persuading audiences to change their behaviour. This is the preferred mode in many educational settings and in the practice of industrial theatre and some community theatre, and is often the result of top-down message creation processes. Without consultation and the involvement of the target community, the communication may be irrelevant, insensitive to local custom, and may miss its intended mark. Audiences for this type of theatre usually come away with increased knowledge, but have not gone through the necessary processes to translate this into the kind of positive behaviour change that may result in lower HIV infection rates.

This approach is typical of didactic 'AIDS plays' which present information about HIV and a model of behaviour that the audience should abide by if they wish to remain uninfected. Modelling 'good' or positive behaviour in HIV and AIDS interventions is based on *social learning theory*, as outlined by the American psychologist Albert Bandura (1995, 1997). Bandura asserts that people learn through watching the actions of others. Audiences should be able to recognise and relate to role models through this process and emulate or model their behaviour (Bouman, 1998). This assertion is an echo of Aristotle's notion of audiences learning through observing others.

If the characters presented in the performance are recognisable and closely associated with the culture of the watching audience, they may have an influence over audience behaviour. An example of this comes from my own work, with *Sikhuluma Nawe*, an

industrial theatre play presented for factories and other workplaces. The performance shows a recognisable and appealing character, Joe, who goes from having sexual multiple partners to a more responsible approach to sexuality, where he decides to go for an HIV test.

The shift in the play is simplistic, and relies simply on a change of heart that Joe undergoes after watching an AIDS play at work. Feedback from factory managers after performances has reflected that a high percentage of their workforce report for voluntary counselling and testing for HIV (VCT) immediately after watching the play (personal communication, 2007, 2008)

This modelling of positive health behaviours has met with varying degrees of success in other initiatives. There is strong criticism, however, of first generation EE which tends to promote top-down messaging and may be manipulative. Research into the efficacy of theatre as a medium conducted by Mitchell *et al* (2001) finds that the messages 'taken home' after a performance were not always those intended by the plays. This is a danger inherent in health messages that are presented *to* an audience, rather than constructed *with* them.

However, this type of didactic work is popular and may have benefits. The well-known satirist Pieter Dirk Uys has been widely praised for having "done more to prevent AIDS than any other single person in South Africa" (The Saturday Star, 10 June 2007). His one-man play *For Facts Sake* has toured schools throughout the country since 2002, and is estimated to have reached more than 1.7 million children.

Uys's work is broadly accessible and acceptable to his audiences, who rate him highly. He is an outspoken critic of the government's failings, including their less than exemplary efforts to combat AIDS, and audiences love him. Presenting his opinions through straight-talking monologues, his work is received and understood by the audience in the way it was intended. While Uys's work is didactic, there are few who would criticise him for this, as his work is a good example of how didactic theatre can also be popular and entertaining.

A further example of a didactic theatre intervention that had positive results is that of the *Umhlaba Wethu* project (Durden, 2009). This play was performed in government health clinics and in rural communities around KwaZulu-Natal in 2008 and 2009, accompanied by a mobile HIV testing centre. The play explored issues of responsibility, infection and loss, and an overt call was made at the end of the play for audience members to make use of the voluntary counselling and testing (VCT) services provided.

A high percentage (91%) of audience members who were interviewed reported that the emotions that they had felt during the performance (particularly feelings of fear and guilt) had made them think about testing. Many of these people logically recognised the importance of testing; however, some of them said they still felt too afraid to take the test. The statistics gathered from the clinic reports showed that 15% of the total number of audience members made use of these services immediately after the performance. Others that were uncounted may have made use of local VCT services in days following the performance, as was reported by some of the interviewed audience members. While 15% is not a significantly high percentage of the target group, it provides evidence that some people in the audience were encouraged to adopt this immediate behaviour.

This project was created from outside the target community, as a joint production between two theatre companies, one Dutch and one South African. However, the play was informed by local culture and traditions, based around scenes familiar to the intended audience. While theorists may argue that a campaign that is centred on individual behaviour change will be inappropriate in an African context, the *Umhlaba Wethu* example provides evidence that theatre that takes the local context into account can overcome such problems.

The examples cited above are designed to instruct the audience and to encourage behaviour change, and as such are indicative of the first generation of EE. While there are many criticisms levelled against such interventions, the success of such projects in promoting positive behaviour change and influencing, for example, the immediate uptake of VCT services, means that the strategy must be recognised as a useful one in bringing about change, even if this is only at the individual level.

Theatre and second generation entertainment education

Examples of second generation EE programmes attempt to bridge the social marketing and health-promotion approach of the first generation, with more participatory strategies that involve the target community (Tufte, 2005). Typically, this participation involves recruiting gate-keepers or opinion leaders within a community to spread a health message. Second generation EE is based on the diffusion of innovations theory, explores how new ideas are introduced and adopted within a system (Rogers, 1969). This theory recognises the influence that individuals have within a community, and how the decisions made by one person with regards to the uptake of new ideas can affect and influence the decisions made by others. Behaviour change interventions based on this theory make use of local role models to influence and communicate messages to audiences, as it is recognised that communication from this source may be more readily recognised by and acceptable to others in the community.

Informed in this way by the social and cultural environment of the audience, second generation EE may be more effective in using local influential people to bring about behaviour change for individuals in the audience.

Theatre can provide a vehicle for promoting individual change and some community change, as it builds on feelings of social and group identity. Social identity theory justifies how we categorise ourselves and others into groups, how we make ourselves distinct, and how we compare ourselves with other groups and identify with a particular group (Tajfel and Turner, 1979). Stuart Hall (1997) suggests that cultural identity can be experienced as a place or time where individuals are familiar with the codes used, in a context of recognition where they feel at home. These contexts of recognition are constantly changing as individuals and the world around them change. Hall suggests that the moment of identity and identification is when an individual recognises something and takes up an identity position, asserting: "Yes, that is me" (1997:13).

Second generation EE is based on this premise, where audiences identify with the actors on stage, who are drawn from amongst their peers. A shared identity and similar life experiences may allow for a greater shared understanding of the HIV and AIDS messages that are presented in performance.

Theatre can be seen as an ideological transaction between performers and their audience (Kershaw, 1992). In this transaction, a shared ideology allows a connection between the aims of the theatre makers and the reception and responses of the audience. This builds on the concept of reader reception, where the audience is actively engaged in the decoding of meaning through performance. Where the performance creators, actors and the audience share frames of reference, decoding may be made easier, and the outcomes of applied theatre project more easily met.

As a space for the sharing of stories and of ideologies, theatre can also become a place for community building. Processes of identification with characters and messages can encourage feelings of well-being and pleasure, and promote a sense of membership and citizenship amongst a particular community (Tufte, 2003). Yan Chen and Xian Li's (2006) research suggests that identifying with a group leads to feelings of charity and support. This could contribute to social and political change, as issues identified as important within the community become a shared community concern rather than an individual concern.

However, apart from the targeted innovators who are identified as gatekeepers into the community, the remainder of the audience for second generation EE is expected to be passive recipients of information, and is persuaded to adopt new behaviours. The process is thus not entirely rooted in the community. Much of the early practice of HIV and AIDS theatre in South Africa falls within this category, where accepted groups are sent out to the people with the aim of involving them in HIV and AIDS plays and interventions. However, these projects have been criticized for not being truly participatory, and instead, for being paternalistic, and "a smokescreen for domestication" (Kerr, 1995).

The Tau-Tona Goldmine Industrial Theatre Project is one such example. This project recruits peer educators from amongst miners in the North-West Province of South Africa to participate in a play that explores HIV and AIDS. Provided with some training, these miners then perform a play for their fellow workers. In his account of this practice, Gerrit Maritz finds that "the actor-educators become role-models and quasi-celebrities in their working communities" (2004:14).

This type of peer-education project is typical of the diffusion approach, where a group of motivated people take the education of their peers into their own hands. While these workers are seen as role-models and celebrities, this still promotes an uneven balance of power with regard to communicating about HIV and AIDS. The initiative and the knowledge is held by these peer educators, and the audience are merely receivers of this information. However, Maritz reports that this project has opened up dialogue about HIV and AIDS within the mineworkers' community:

Peer educators at the Tau-Tona mine felt very comfortable and passionate. The respondents indicated that co-workers felt comfortable in approaching them after shows and discussing HIV and AIDS related issues.

Maritz, 2004:15.

The plays take into account the local culture of the mine and the concerns that the miners face with regards to HIV and AIDS. This localisation makes it easier for the audience to identify with the plays and to talk about them. While dialogue may be opened up through this process, it is only to a limited extent. It is only the targeted innovators who have input into the script-creation and performance processes, and the proposed solutions to problems are not generated within the audience community and cannot be seen to be inspired by a participatory development ethos.

However, second generation EE, with its focus on peer involvement, may be effective. The second generation approach to EE goes some way towards exploring the social barriers to adopting behaviour change, and to overcoming these. Without addressing these barriers, change cannot be brought about.

Instead of merely handing out information on safer sexual practices and 'reflecting' on condom use, the challenge for theatre-in-education lies in unpacking restrictive cultural and environmental practices that are preventing change.

Gerrit Maritz, 2004:9.

Theatre scholars such as Christopher Kamlongera (1989) and Zakes Mda (1993), among others, argue that for real conscientisation and change to occur, the target

community needs to be involved at all levels of decision-making in the project. As such, HIV and AIDS theatre interventions should rather be developed as a process with the people, where communities are encouraged to articulate their own needs in their own way. This calls for a greater degree of participation in TFA projects.

Theatre and third generation entertainment education

Third generation EE goes further than the transmission of health information to involve community members in problem-posing, social critique and social change (Tufte, 2005). As such, it is strongly influenced by the work of proponents of participation, such as Paulo Freire (1985, 2002). Tufte asserts that this generation of EE “seeks to articulate a dialectic process of debate and collective action” (2005:700). Theatre that falls into the more participatory third generation of EE includes practices that are based on notions of empowerment and popular participatory theatre.

Through participatory theatre practices, communities can enhance their understanding of their cultural heritage and who they are. Cultural performances can serve to articulate a community’s self-image and “thus represents and exhibits itself to its own members and to outsiders” (Sirayi, 2001:15). In the third generation EE approach, theatre can be a vehicle for community members to express themselves and to raise their voices about their concerns regarding the conditions that exacerbate HIV and AIDS, to bring about social change. Theatre informed by this approach should allow audiences to explore such issues as poverty, social inequality, gender inequality, and cultural beliefs and practices that feed the epidemic.

A number of contemporary scholars have found that the interactive theatre that is typical of third generation EE can be more effective in engaging audiences with regard to their attitudes about people with HIV, and their beliefs with regard to their susceptibility to HIV (Dalrymple, 2006; Treder-Wolff, 1993; Denman *et al*, 1995). Treder-Wolff proposes that interactive or participatory theatre “adds the personal and group learning dimension that has the potential to turn awareness into action” (1993:338). This concept of turning awareness into action is a vital step in changing behaviour. This is the missing link for many HIV and AIDS communication campaigns and poses a challenge for theatre practitioners.

When HIV and AIDS issues are addressed at this community level rather than at the level of messages targeted to the individual, then there is greater potential for social change to support the personal behaviour change decisions made by individuals. Through participation in third generation EE projects, it is anticipated that individual change will come about, and that the resultant personal empowerment will bring about political and structural change. The theoretical roots of this argument are explored in the following chapter.

Third generation EE provides an example of drama as process, where there is greater emphasis on participatory communication and the creation of meaning and shared understandings of HIV and AIDS. Theatre lends itself to an action-reflection praxis, where a picture of reality can be presented on stage, seen and analysed by the audience, who then recreate this reality. This recreation can be in the lives of the audience after they leave the theatre, or can be done literally on stage by re-staging the drama, as in the practice of simultaneous dramaturgy, made popular by Brazilian theatre practitioner August Boal (1979).

The Problem Solving Theatre (PST) Project provides an example of this approach, where factory workers were engaged in Boalian forum theatre (Durden and Nduhura, 2007). In this project, a single forum theatre performance generated a high level of discussion and increased consciousness amongst audience members about discussing HIV and AIDS. A number of respondents reported that participating in the theatre intervention had built their confidence in talking about the topic. Many had been encouraged by the play to talk to their colleagues, children, husbands or neighbours. The theatre performance therefore provided an opportunity for the group to share their ideas and concerns both within the audience group and within their own social networks.

In the PST Project example, where discussion is combined with a theatre performance, there is the potential for audiences to participate in discussion and negotiate the meanings of the performance. This dialogue allows audience and participants to talk about how they understood the theatre messages and the implications of these for their own lives. Participatory theatre practices in general, and forum theatre in particular, provide the space for audiences to engage more closely with the action presented on

stage and to negotiate a shared understanding of the messages encapsulated in a performance.

The PST Project experience shows how theatre has the potential to open up dialogue and debate on HIV and AIDS issues, and to engage the audience in problem-posing activities (Durden and Nduhura, 2007). However, the factory environment was found to be unsuitable for forum theatre, as participation was hindered due to the restrictive nature of the environment. Developing fertile ground for participation and the open discussion that may bring about development is a challenge for such projects. Participation may challenge customary beliefs and power structures, creating 'unrest' in a community. For this reason, genuine participation is often kept in check, as was the case in the PST Project experience.

There is a range of other factors which hinder participation. Research into the use of participatory theatre in Lesotho finds that gender inequality, distrust and the pervasive culture of silence amongst rural people hindered them from talking about HIV and AIDS (Malibo, 2008). However, participation in theatre and discussion processes allowed them to open up and share some of their own stories and experiences. This process of participation is vital to breaking the culture of silence around HIV and AIDS issues in Southern Africa.

DramAidE (Drama in AIDS Education) provides further examples of participatory theatre for HIV and AIDS education. DramAidE's Act Alive project in schools includes interactive workshops on HIV and AIDS, followed by the presentation of plays created by the school students themselves for their peers and other members of the community (DramAidE, 2010).

Through creating their own plays, learners have found appropriate ways to engage with HIV and AIDS issues. As co-producers of the message through a negotiated process of workshops and rehearsals, the audiences of their fellow learners understood the messages. Programme evaluations suggest that these messages were retained and that DramAidE has had a lasting impact on improving the social and physical conditions within the schools and the broader community (Frizelle, 2003).

However, these participatory practices alone may not necessarily bring about change and development. The content and messages of these locally generated plays are influenced by the objectives of the project, which are a top-down call to reduce HIV infection through encouraging behaviour change. Too often we see a reliance on the ABC approach, and the community-generated plays themselves use the same slogans and calls made through the mass media. This reflects a lack of genuine engagement with the issues and a poor understanding of local conditions that may make a call for ABC inappropriate.

Although the plays may be participatory, the process is instigated by an outside agency with a particular agenda, and the end product still tends to be didactic. These plays are seen as presenting 'correct' information to a selected audience, and those involved in the performance often see themselves as teaching or helping others through these performances.

It should be recognised that more participatory practices do have the potential to bring about change within the target community. This notion of a communal shift suggests that theatre has the ability to build a sense of collective efficacy within the community, where people feel more empowered to make changes because they are doing so together in a group (Bandura, 1997).

The challenge for meaningful and effective theatre in the context of HIV and AIDS communication is to bring about change both on an individual level and on a greater scale within the community and society at large. Strengthening the links between the individual and the communal experience can encourage interaction between the individual's 'micro-response' to theatre and the communal 'macro-response' (Kershaw, 1992). This interaction across the different social contexts can bridge the divide between individual behaviour change and social change, and is the challenge for current EE practice.

Providing solutions or exploring the problems: persuasion and development

While the first generation of EE focuses on the transmission of health messages from a central source, the second generation uses more culturally appropriate media for the dissemination of these messages. Practices within these categories tend to rely on a persuasive approach to bringing about behaviour change for individuals or a community.

The third generation of EE focuses on “problem identification, social critique and articulation of debate, challenging power relations and advocating social change” (Tufte, 2005: 694). Tufte argues that this shift has occurred with the realisation that it is not information that is lacking, but social and structural inequality that inhibits both individual and social change. This shift has given rise to the model of *communication for participatory development* (CFPD) which focuses on dialogue-based communication strategies, horizontal information sharing, social change, equal participation, local ownership and empowerment (Kincaid and Figueroa, 2009).

HIV and AIDS campaigns in general, and theatre in particular, have previously taken a didactic approach to behaviour change messaging, providing ‘solutions’ to the ‘problem’ of HIV without explicitly exploring behaviour change. Contemporary scholarship presents arguments for approaching HIV and AIDS as a development issue with its focus on people rather than issues (Jackson, 2002). This shift in focus necessitates providing more choices and greater freedom of choice to individuals about how to live their lives (see Boon and Plastow, 2004; Narayan, 2002; Sen, 1999).

This creates a dilemma for health communicators and theatre practitioners. On one hand campaigns are driven by medical imperatives and the desire for governments or other agencies to use persuasive communication to encourage life-saving change. On the other hand, a focus on development requires that practitioners open up the discussion around HIV and AIDS and facilitate participation to bring about personal empowerment and community development. A number of critics argue that without the groundwork of development and social change having been laid, the individual changes required for healthier behaviour cannot be made (Bartholomew *et al*, 2001, Parker *et al*, 2007).

This development approach to HIV and AIDS messaging then suggests that didactic top-down theatre will be less effective than participatory communication efforts. The ways in which HIV and AIDS messages are conceptualised, framed, and delivered are influenced by the approach to communicating about, and for, development.

There is therefore a tension between theatre for education and theatre for development. Because HIV and AIDS are seen as a bio-medical 'problem' and not an issue of human development; control of such projects and the messages incorporated into them rests in the hands of government, experts, and non-governmental organisations (NGOs). Because EE is a strategy that is purposely selected to pass on information and persuade an audience to make changes, it is difficult to see this as development. Such practices are generally not fully participatory or owned by the community. This argument is expanded on in the following chapter which explores the notion of development communication and explores some theatre for development experiences.

CHAPTER 4: DEVELOPMENT COMMUNICATION AND THEATRE

The previous chapter has outlined some of the criticisms of Entertainment Education initiatives, and provides some examples of practice. In this chapter I explore the notion of communication for development, and how communication is a key component of any development initiative. I then go on to delineate different paradigms of development and provide examples of how this influences theatre practice.

Development communication

Development communication is understood to be communication specifically planned for the purposes of development. Tufte and Mefalopulos suggest that it is “a strategic tool to persuade people to change and enhance development processes” (2009:1). Essentially this statement can be broken down into understanding development communication as three elements, that of a strategy, a process of persuasion, and a process of development.

Communication as strategy

Understanding communication as a strategy means viewing communication as a goal-oriented plan. In terms of the basic Shannon and Weaver (1949) mathematical model of communication that incorporates a sender, a message and a receiver, the sender has a goal: to get the receiver to hear the message and to take action accordingly.

In the context of development, questions arise regarding who plays these roles of sender and receiver, and who determines the message? Are the receivers involved in devising the strategy? Too often this is not the case, and the goals are set by outside developers. When communicating about HIV and AIDS, the strategy is usually thought up by medical experts and communication professionals, and does not include the target community. The drawbacks to this top-down message creation have been discussed in previous chapters.

Communication as persuasion

At a basic level, persuasion is the use of a message to influence an audience, although defining persuasion opens up a range of debates about its meaning and processes. A useful definition of persuasive communication is “any message that is intended to shape, reinforce or change the responses of another, or others” (Stiff and Mongeau, 2003:7)

This definition suggests that the primary goal of persuasive communication is coercion, making an audience voluntarily take a decision that they may not previously have taken. In this form of communication, a pre-determined message is delivered or ‘taught’ to an audience, and the audience is expected to respond as instructed. Persuasive communication theory suggests that for an audience to respond to an appeal, it must include elements of both the rational and the emotional (FAO, 2010; Piotrow *et al*, 1997). To be effective in engaging the attention of audience members, and persuading them to change their behaviour, the content of the entertainment should appeal to both the hearts and minds of the audience (Piotrow *et al*, 1997).

In the context of development, the concept of persuasion may be contradictory to the concept of freedom of choice. Persuasion can be seen as interference or manipulation, denying the right of a group to make their own choices. Communicating about HIV and AIDS generally involves discussion around behaviour change, and people are persuaded to change their behaviour and adopt certain specified practices.

Based on a persuasive communication approach, most communication about HIV and AIDS prevention in South Africa has been reliant on the ABC approach, with the additional call more recently that promotes testing for HIV, partner reduction, and the practice of circumcision (JHESSA, 2010)

This prescriptive approach limits an audience’s choices, and may be counter to the ethos of human development that maintains that development should offer individuals greater freedom of choice. The issue of persuasion and manipulation in theatre for development practice will be discussed later in this chapter and in the following chapter on participation.

Communication as development

If we understand community development as working together with a community “to build the kind of community that its members want” (Beunens, 2008) then it is imperative that development agencies find out what it is that the community wants. This can only be facilitated through dialogue between development agencies and the beneficiary community.

This process of dialogue is central to the Freireian approach to education and development (Freire, 1969). In this approach, dialogue is seen as an inherent human phenomenon and “the encounter in which the united reflection and action of the dialoguers are addressed to the world which is to be transformed and humanised” (Freire, 1983:61). Freire argues that it is only through this process of dialogue and building a collective understanding of the world that transformation can come about. To bring about development, processes of education, development, and communication must therefore be democratic and participatory.

Building on this, Arvind Singhal (2004) recognises that participatory communication for development involves re-envisioning communication, and defines it as “a dynamic, interactional, and transformative process of dialogue between people, groups, and institutions that enables people, both individually and collectively, to realize their full potential and be engaged in their own welfare” (2004:142). This approach acknowledges the centrality of participants in the communication process.

Communication for development or about development is influenced by the way that development is defined. The major shifts in thinking over the past fifty years are visible through four distinct paradigms of development (Tomaselli, 2001; Servaes, 1995; 1999; Manyozo, 2008). These can be categorised as modernisation theory, dependency theory, development support communication, and ‘another development’ (participation).

As a medium, theatre has been used as a tool for development aimed at “community renewal” (Kerr, 1995:149), and a means of communicating about development-related issues such as agriculture, governance, and health. Kerr recognises these roots as

twofold: in the use of theatre as a propaganda tool in colonial Africa, and in the more radical tradition of community generated theatre.

Building on these roots, many organisations make use of theatre to communicate about HIV and AIDS issues; and their chosen strategies are informed by a particular approach to development. As previously discussed, first generation EE practitioners use theatre as a medium for awareness, where a pre-determined health message is conveyed to influence behaviour change. This practice hinges on the use of persuasive messages to encourage the audience to adopt a particular behaviour. In more participatory third generation approaches to EE, theatre and drama processes are used to build community identity and agency, to identify and solve health-related problems, or to empower and develop individuals and communities.

I will now go on to discuss these paradigms of development, and to provide some examples of how they have influenced theatre for education and development, and HIV and AIDS communication campaigns. Informed by the previous discussion; the criteria for success of TFA with a focus on development should be whether or not an intervention opens up dialogue.

Development paradigms and examples of communication for development

Modernisation is characterised by a top-down approach to development, where it is assumed that through the input of information and technology, underdeveloped communities will advance to the level of the western world. The approach uses persuasive communication and social marketing strategies to sell a message to an audience, thus, hopefully, bringing about development.

Modernisation often involves high-profile campaigns, driven from the top down. Communication is typically based on the unidirectional communicator-message-receiver model. The profile and culture of audiences is not taken into account in message and campaign design, often resulting in the communication of inappropriate messages (Tomaselli, 1997). This top-down imposition means that there is seldom a sense of ownership of the intervention, and little subsequent personal investment on the part of the target community. The development intervention and its communication are seen as

a product and not as a process. The development outcomes are pre-determined at source, and individual community members have no say in their own development.

The way in which theatre has been used as a civilising mechanism in Africa is typical of this modernisation approach (Kamlongera, 1989). HIV and AIDS theatre in particular has been inappropriately staged by those in power, and certain voices are marginalised in the process (Blumberg, 1997). Without consultation and the involvement of the target community, the theatre product may be irrelevant, insensitive to local custom, and may miss its intended mark. Although theatre created within this paradigm might fulfil the necessary requirements of transmitting correct information and challenging attitudes, it is unlikely to engage the audience sufficiently to ensure lasting change or sustainable development.

Sarafina II provides a controversial example of a top-down theatre intervention for HIV and AIDS awareness. In 1995, the Department of Health awarded a contract worth R14.27 million to create a high-profile AIDS-based musical to travel throughout the country. This was the start of a debacle that rocked the local HIV and AIDS community, predominantly because of the enormous sum of money allocated to a single project and questions regarding the tender process and funding source (Tomaselli, 1996). There were also concerns raised about the content of the messages in the play, suggesting that there had been no consultation with AIDS organisations regarding appropriate messaging (Nattrass, 2004). Further reports suggested that the play was derogatory about women and did not have the capacity to change behaviour (Mutumi, 1996; Phila Legislative Update, 1996).

A musical such as the proposed *Sarafina II* could have the potential to combine the best of spectacle and didactic theatre; however, reports suggest that it fell short of this goal. While the initial proposal was for the production to be seen by eight million people, the reach of the project was reportedly limited, the show being seen by just 5000 audience members before closing down (Crewe, 2000).

The conceptualisation of a broad based audience is typical of a mass media approach, which simply cannot always appeal to everybody. However, in performance the content was directed predominantly at young township men, and so was not always appropriate

or acceptable to other audience members (Crewe, 2000). All of the investigations into the project were into financial misconduct, and therefore there are no impact evaluations that suggest how the message was received, understood, and remembered once the tour bus had left a particular community.

Sarafina II is a classic example of how a top-down, big-budget modernisation approach is applied to a small medium and how this kind of quick-fix solution can ensure the failure of an otherwise useful strategy. This failure was a landmark in the local AIDS landscape, with Mary Crewe suggesting that “South Africa has never recovered from the vengeance of the *Sarafina* response - it brought to the surface the simmering tensions between the government and AIDS NGOs and CBOs” (2000:28).

While this example generated heated national dialogue about how AIDS messages are presented, and how the government spends its health budget, there is no evidence that the production of *Sarafina II* opened up dialogue about HIV and behaviour change.

Further development interventions are influenced by the paradigm of *dependency theory*, which is an attempt to understand why poor countries, including those ‘assisted’ by wealthy countries, cannot escape the cycle of poverty. Dependency theory grew out of a Marxist critique of modernisation theory; suggesting that development interventions informed by modernisation in fact serve to disempower communities and to restrict development (Servaes, 1995).

As a means of self-empowerment, dependency theory communication typically involves radical sloganeering, resistance, and critique. This style of communication was apparent in plays of the South African Anti-Apartheid movement of the 1980s and the trade union based practice of workers’ theatre. Workers’ theatre has at its heart the aim of conscientising the masses and alerting them to urgent issues of the day, and is created as a means of resistance and mobilisation (Marlin-Curiel, 2004).

To a large extent, these performances are also product-orientated (Baxter, 1992). The theatre is a means to an end and persuasive communication is used. Contrary to the imposed messages of modernisation approach, these persuasive messages come from within the community itself. HIV and AIDS theatre created within this paradigm emanates

from the community and therefore may take into account local conditions and concerns. However, it does not always engage with the audience directly.

The dependency theory style of communication is apparent in the communication by HIV and AIDS activist groupings such as the Treatment Action Campaign (TAC). The TAC relies heavily on the inheritance of the South African Anti-Apartheid movement trade union based practices of marches, rallies, posters, and pamphleteering. These campaigns are well-supported and mobilise large numbers of people, and do serve a purpose of conscientising the masses, and challenging the status quo. However, the extent to which they bring about development may be questioned.

An example of community-generated dependency-style theatre is AIDS ACT, a theatre group established by student peer educators at the University of the Western Cape (UWC HIV and AIDS programme, 2010). This theatre group consists of untrained student volunteers who workshop short skits for performance to fellow university students. These skits are based on “observations, experiences and perceptions of campus life” (UWC, 2010).

As peer educators, the performers may have a greater knowledge of HIV and AIDS issues than their peers do; however, they are still a part of the community to which they perform. That this theatre is participatory and community generated does not, however, guarantee that it will meet development objectives. Zakes Mda (1993) suggests that practitioners of community generated theatre do not always have the advantage that outsiders have, of applying a critical consciousness to the problems faced by the community.

In the case of AIDS ACT, one may assume that the peer educators do have a heightened consciousness as a result of their training, and that this is what motivates them to create and perform their plays to other students. That the performance is peer-generated, and therefore likely to be recognisable to its audience, may encourage dialogue amongst students about the content. However, this dialogue may not lead to development unless it is accompanied by the critical consciousness recognised by Mda (1993).

Development support communication (DSC) and *another development* (participation) place greater emphasis on a two-way communication process and take into account cultural multiplicity (Servaes, 1995; 1999). These theories allow for “multidimensionality, horizontality, deprofessionalisation and diachronic communication exchange” (Servaes, 1999:84).

The paradigm of development support communication involves development planners and implementers creating partnerships with local communities in order to bring about development. While there is an emphasis on actively involving the beneficiary community in their own development; the donor partner aids this process through funding and expertise.

In addressing public health crises, such as HIV and AIDS, it is recognised that these outside experts have a role to play (Waisbord, 2003). These financial, technical, scientific or general development experts are referred to as the DSC professional, whose responsibility it is “to work with the individuals and communities at the grassroots so that they eventually may enter and participate meaningfully in the political and economic processes in their societies” (Melkote and Steeves, 2001: 356). The extent to which this participation is meaningful depends on who participates, how, and at what levels. This issue is the key to my own research into the practice of using theatre to address HIV and AIDS.

The diffusion of innovation theory put forward by Rogers (1969) makes use of local role models to influence and communicate messages to audiences, and is typical of this DSC paradigm. Apart from the targeted innovators who are identified as gatekeepers into the community, the remainder of the audience is expected to be passive recipients of information, and is persuaded to adopt new behaviours. The process is thus not entirely participatory. Although local culture and context is taken into account for development programmes, the messages still come from the outside development agency. The Tau-Tona mines project mentioned in the previous chapter is an example of this.

The Sinolwazi Drama Group of the South African Clothing and Textile Workers Union (SACTWU) AIDS Project is a further example of DSC (Durden, 2004). This project recruited retrenched factory workers to participate in a process which involved both

training and the performance of HIV and AIDS plays in clothing factories. While these 'actors' are representative of the proposed audience, the plays themselves are created by a professional script-writer, based on a brief from the SACTWU HIV and AIDS desk and specific messages.

The SACTWU plays specifically take into account the local culture of the factories and the concerns that the workers face with regard to HIV and AIDS. However, as the 'targeted innovators' (the retrenched workers) do not input into the script-creation processes, the solutions proposed to problems are not generated within the audience community, and therefore fall outside a truly participatory development ethos. This example is one of the case studies for my research, and is discussed in more depth later in this thesis.

This practice of harnessing local culture is criticised as a form of 'cultural engineering', where folk media and familiar cultural forms are used as a vehicle for development communication, and for 'selling' development strategies (Kerr, 1997). This practice is recognisable in HIV and AIDS interventions with the use of indigenous performance forms such as praise poetry, which instead of praising kings and leaders, is currently used to praise condoms. Somniso (2008) notes a growing trend for traditional praise poets to make use of intertextuality between different discourses in their poetry. These include cultural tradition, Christianity, health and social life, and are influenced by pervasive HIV and AIDS messages. There are times when this is organic, and driven by the poets themselves as social commentators. However, there is a danger in popular awareness campaigns of this content being imposed on the traditional form.

In South Africa, the practice is criticised, as government and commercial interests have exploited the use of traditional cultural forms "in the service of the dominant ideology" (Coplan, 1987:9). The use of traditional forms and themes has been criticised as tokenistic, and there has been little attempt to incorporate local knowledge and to learn from the contemporary experiences of the audiences themselves. In these instances, theatre is seen as a product made *for* the people, rather than *with* the people, a process involving the target community in their own empowerment.

The argument for empowerment suggests that for real conscientisation and development to occur, the target community needs to be involved at all levels of decision-making in the project. Theatre should rather be developed as a process where communities are encouraged to articulate their own needs in their own way (Kerr, 1995; Kamlongera, 1989). Theatre used in this way has participation and development as its primary goals. This participation is emphasised in the paradigm of *another development*.

The participatory paradigm is based on two dominant contributions in the field, namely the debates and conclusions of the UNESCO conference of 1977, and the work of the Brazilian educationalist Paulo Freire (1983, 1985, and 1987).

Debates around issues of access, participation and self-management arise from broad sociological change and the movement from representative democracy to participatory democracy (UNESCO, 1997). As these changes started to happen globally after the middle of the twentieth century, self-development and self-management came to be seen as important concepts. This was a response from developing countries that resisted imposed development and modernisation from western nations. This resulted in a call for a more human-rights based approach to development, greater access to choice about development and communications, and more dialogical communication processes to allow for feedback about development.

In contrast to other development communication paradigms that make use of unidirectional communication models, the communication model utilised in participation allows for dialogue and the negotiation of meaning. Participants can share ideas and come to a consensus as to what they understand by the concepts being explored. It is expected that where communication is democratised, and all participants are equal in the communication process, then clarity, understanding, and subsequent empowerment are likely to follow (Freire, 1983).

These processes are vital for greater understanding of complex social issues such as HIV and AIDS. Questions regarding what participants understand as development, where they see a need for it, and how they can implement changes that will bring about that development, can be addressed through participation.

Participation is the currently preferred paradigm for development projects (Stiglitz, 2002). This paradigm is based on the premise that individual communities know best where and how they need assistance, and how to implement development programmes. In the participatory paradigm, the community members themselves become the agents of change, rather than being led by outside agents (Servaes, 1995).

Members of the target community must be active in development programmes and processes and should contribute ideas, take initiative and articulate their own needs and problems, while asserting their autonomy. The success, efficacy, and sustainability of a project depend on the wholehearted participation of all of the development project's stakeholders, including the primary stakeholder which is the target community (Narayanasamy, 2008).

The DramAidE AAA-HA Project provides an example of rethinking HIV and AIDS communication as a participatory process, where students at a range of university campuses are encouraged to create their own performance interventions. This project created a space for students to express themselves about issues concerning them with regard to, for example, sex, trust and relationships.

The AAA-HA project at the University of KwaZulu-Natal (Pietermaritzburg) took the form of a slam poetry competition, a contemporary form popular with students. Evaluations of this project suggest that students had a strong sense of ownership of this as their own initiative, and that the project encouraged broad participation (Wilson and Suter, 2009). This participation led to great personal engagement with the issues, and the intervention was recognised as bringing about a "great depth of emotion and insight" expressed by the participating students when compared to other HIV and AIDS interventions (Wilson and Suter, 2009:7)

Communication for social change (CFSC) theory suggests that participatory communication can enhance both individual behaviour change as well as social change by influencing social norms, values and policies. This theory places emphasis on the dialogical process of communication, and posits that social change can only be sustained if the communities involved own the means, content, and method of communication (Gumucio Dagron and Tufte, 2006). The AAA-HA project, based on an

informative workshop on HIV and AIDS issues as the starting point, and then a process of participants creating their own messages about HIV and AIDS, provides a good example of this.

The communication for participatory development (CFPD) model is a direct extension of CFSC, promoting the notion that it is only through the process of ongoing dialogue that collective change and participatory development is possible (Kincaid and Figueroa, 2009). Community dialogue and community-driven development are concepts that encourage local communities to create opportunities for themselves and to control resources and be part of the decision-making processes around development.

There are marked differences in the communication strategies utilised in participatory and non-participatory development projects. Gumucio-Dagron (2001) proposes the following table to distinguish between these.

FIGURE 2: PARTICIPATORY VERSUS NON-PARTICIPATORY COMMUNICATION STRATEGIES

Participatory communication strategies	Non-participatory communication strategies
horizontal lateral communication between participants	vertical top-down communication from senders to receivers
process of dialogue and democratic participation	campaign to mobilize in a short-term without building capacity
long-term process of sustainable change	short-term planning and quick-fix solutions
collective empowerment and decision-making	individual behaviour change
with the community's involvement	for the community
specific in content, language, and culture	massive and broad-based
people's needs are the focus	donors' musts are the focus
owned by the community	access determined by social political and economic factors
consciousness-raising	persuasion for short-term

In communication for development, the end goal of the project determines the approach to the communication processes. In the context of using theatre as communication; if the goal is behaviour change, then theatre will be used in a particular way where the theatre product is seen as vehicle or tool for transmitting messages. This is indicative of the modernisation approach to development. If the end goal is empowerment, then theatre will be used in a more process-oriented way, using participatory strategies to bring about empowerment and change.

My study attempts to investigate how these different approaches are applied in local TFA practices, and whether it is possible to combine the didactic approach of the modernisation paradigm with more dialogue-based participatory strategies to bring about personal empowerment and social change in the context of HIV and AIDS.

CHAPTER 5: THEATRE FOR DEVELOPMENT EXPERIENCES

This chapter details some of the well-recognised theatre for development projects in Southern Africa, including Ross Kidd's project *Laedza Batanani* in the 1970s, Zakes Mda's work on the *Maratholi travelling players* in the 1980s, and Lynn Dalrymple's work on *DramAidE* that began in the 1990s. The chapter reflects on the questions that arise through a study of these examples.

Laedza Batanani

This project was conducted in the mid 1970s in Botswana by Ross Kidd with students and academics from the University of Lesotho, Swaziland and Botswana. Dissatisfied with unimaginative media campaigns, the group recognised that theatre based on the aesthetics of Botswanan performance tradition would be able to reach a wide group of illiterate people in an entertaining way. This new methodology was expected to offer “a galvanizing break in routine which could stimulate community co-operation” (Kerr, 1995).

Laedza Batanani was designed to allow rural people to understand the development challenges that faced them, and how to overcome these. Over the course of a number of years of refinement, the project emerged as a method that included a one-week campaign in a specific rural area that incorporated participatory research, drama workshops, theatre performances and community discussions on particular topics. The organisers tried to ensure that the topics were relevant and would lead to direct remedial action by the community.

The project aimed to increase participation in development initiatives; however, reflection on the project shows that participation was not equal amongst community participants. It was the already empowered individuals in the group that would voice their opinions during the campaigns. The most oppressed and voiceless members of the community were not empowered through the project. This finding points to some of the challenges inherent in participatory programmes regarding participation. Criticism of the project by its originators suggests that it tended more towards spreading the dominant class

ideology than raising critical class consciousness (Kerr, 1995). This was due to the dominance of the catalyst intervention team, and limited participation.

This criticism aside, the project attracted attention and a model for popular theatre grew out of this experience. This model includes the following steps:

- 1: An introduction to popular theatre for the community group (usually a play performed by outside agents);
- 2: Development of drama performance skills within the community group;
- 3: Gathering of information about issues facing the community;
- 4: Preparation of a performance;
- 5: Performance by the group to the rest of the community;
- 6: Evaluation and plans for follow-up programmes.

The final step of planning follow-up programmes is recognised as a vital one, as expecting a single theatre performance to have lasting impact on the community is unrealistic. This project raised questions of sustaining a community's interest and energy to tackle the problem after the performance group had left the village.

The Maratholi Travelling Players

The Maratholi project involved a team of students from the University of Lesotho under the guidance of Zakes Mda. The group travelled during the long university vacations to rural villages throughout Lesotho. The project included a two-week stay in a particular area where the group would work with plays on pre-determined issues. The method of the group was agit-prop theatre, where plays were created to elicit a reaction from the audience (Mda, 1993). The process included 5 steps:

- 1: Gathering information in the target communities;
- 2: Analysing this information;
- 3: Improvising stories around the information;
- 4: Rehearsing the plays;
- 5: Performing for the community.

The initial four steps were conducted by the Maratholi group, and the target community was only involved in watching performances and participating in post-performance discussion. After 1986 the programme shifted, with more emphasis on participation and the community generating their own improvised plays on specific topics, with input from the outside catalysts that assisted with skills development.

The group also used some of August Boal's participatory techniques, including forum theatre and simultaneous dramaturgy, both of which involve the community audience on stage engaging with the drama. Mda suggests that this involvement in the action encourages consciousness-raising in the group and that "when the spectators themselves become actors, the catalyst group is no longer necessary" (1993:67).

As with *Laedza Batanani*, the role of the catalyst was an ongoing issue within the Maratholi project. A key learning from this experience was that the project was not sustainable, and that the two-week stay of outside "experts" in a particular village was in reality a manipulative situation where the groups were testing out popular theatre techniques for their own research purposes rather than for the benefit of the community (Kerr, 1995).

The Maratholi project was found to be able to motivate and mobilise people in support of development, and to conscientise villagers to the point where they were able to question society's contradictions (Mda, 1993). Mda suggests that meaningful dialogue was opened up within the community, and between the community and outside agencies and opportunities were provided to discuss, solve and implement solutions to local problems.

However, the question arises as to what level these aims were achieved. While these are key goals, the extent to which conscientisation can be brought about in a short-term process is questionable. Mda (1993) asserts that the primary function of theatre for development is first to give the voiceless access to both the production and distribution of messages. He suggests that without this access, conscientisation and its resultant development cannot occur.

DramAidE

The DramAidE (Drama in AIDS Education) Project grew out of the University of Zululand's Department of Drama in the early 1990s, under the guidance of Lynn Dalrymple. DramAidE has been in existence now for almost twenty years, and continues to work with young people on HIV and AIDS issues and social change in education institutions and within communities in KwaZulu-Natal and around South Africa (Dalrymple, 2006).

DramAidE implements a number of different projects, but this discussion will centre on the first of its projects, Act Alive. The Act Alive project in schools was originally made up of the performance of an HIV and AIDS themed play by students or professionals, followed by workshops in the classrooms. These participatory drama-based workshops were aimed at transferring both knowledge about HIV and AIDS issues and performance skills. The workshops and further follow-up support in the school then culminated in the performance of plays by the learners themselves.

After an open-day event where parents, teachers, learners, and other community members watched these performances, the learners then created a club that continued to address HIV and AIDS and other health-related issues. In this way, the learners themselves became the catalysts within their schools and communities to create other awareness or support projects.

Although not explicitly stated, this is a model similar to the six-step Laedza Batanani project, and can be summarised as follows:

- 1: Performance of an AIDS-related play by outside professionals;
- 2: Workshops for smaller groups;
- 3: Small groups create their own plays;
- 4: Professionals support and assist groups to prepare their performances;
- 5: Groups' plays are performed for the school and community;
- 6: Establishment of clubs so that groups continue with other projects.

Evaluations of the project suggest that learners found the medium of drama an appropriate way to engage with HIV and AIDS issues, and were able to express themselves “in ways that they found authentic and culturally relevant” (Dalrymple, 2006:210).

One of the key problems with research into the project is that there has not been a full analysis of the plays and other cultural products created by the learners, and no investigation into the reception of these by community audiences. This might go some way to understanding how effectively these messages from outside agents are taken and adapted and made more appropriate for the target community. To some extent this would answer some of the critical questions raised regarding participation and who develops the messages and content of the project (Chinyowa, 2008).

These criticisms aside, the fact that DramAidE clubs in schools still exist shows that the DramAidE has had an impact on improving the social and physical conditions within the school and the community at large. This institutionalisation of the clubs ensured that young people who were inspired and motivated by the initial stages of the intervention had a structure and ongoing support for their self-driven initiatives. As such, this is an outstanding example of a sustained participatory theatre for development project.

Key research problems for investigation

An overview of the literature and experiences of these and other theatre for development projects points to five key areas for further investigation:

- 1: The question of participation and inside versus outside intervention;
- 2: The question of topic and content selection;
- 3: The question of aesthetics and professionalism;
- 4: The question of sustainability;
- 5: The question of efficacy.

The question of participation and inside versus outside intervention

Kamlongera (1989) notes that almost all theatre for development projects include an outside group of theatre experts working with development workers who are either government agents or autonomous groups. Crow and Etherton (1982) identify this as the role of *catalysts*: outside experts with specialised skills, who work within communities to raise the consciousness of community members through theatre. They define catalysts as people with a high level of critical awareness of social issues, who are able to facilitate processes that allow the community members to develop their own consciousness and critical skills. However, the role and position of these catalysts is not always easy to define.

While Freireian principles of participation have guided most theatre for development experiences in Africa, there remains the challenge of putting these principles into action and avoiding conforming to the dominant (usually government) ideology. Kerr (1995) suggests that theatre has often been used under the guise of development simply to justify existing power structures. This is a problem related to the catalyst groups that engage with a community.

Where the analysis of local problems is based on the catalysts' understanding of the issues rather than the target community's understanding, this problem will remain (Kerr, 1995). Where the outside catalyst is linked to an institution such as a university, government or foreign aid agency, this may mean that the catalysts inhabit an ambiguous position, coming from a place of power to conscientise the powerless.

Defining the relationship between conscientisation (the role of the catalyst) and participation (the role of the community) is an ongoing challenge for theatre for development scholars and practitioners. Mda (1993) suggests that understanding the concepts of *homophily* and *heterophily* are key issues in ensuring workable theatre for development.

The principle of homophily is that like-minded people from similar backgrounds will gravitate towards each other, and that this guarantees more effective communication. In the case of theatre for development projects, the catalysts are usually outside agents

from different class, social, or educational backgrounds, and are therefore likely to be heterophilous (different from) the proposed audience of the rural community. Communication between these two groups who share different world views and experiences may therefore be less effective than communication that occurs within a closed group.

This concept of homophily relates to theories of peer education. Peer education typically involves members of a particular group working to educate and develop other members of the same group in order to effect change. A UNAIDS global study of 30 peer education programmes found that peer educators are seen as “credible teachers and facilitators who possess critical and unique access to their intended audiences” (UNAIDS, 1999: 21). Each of the project examples mentioned above makes use of this principle, where the production is embedded in the community and the performers are insiders, facing the same daily challenges as the audience.

Peer education principles link to the theories of the diffusion of innovations (Rogers, 1983) and opinion leadership (Katz and Lazarsfeld, 1955). The diffusion of innovation theory explores how a message or innovation is communicated amongst the members of a particular social system, and suggests that if respected individuals within that system promote a message, then others within the system are more likely to adopt it more quickly.

The recognition of similarities between the audience and the actors can encourage a “me too” inclusionary response, or can exclude audiences who are markedly different from what is viewed on stage, and become the ‘other’ (Hall, 1997). Identifying who is inside and who is outside the group may have impact on the reception of EE and theatre for development performances.

Based on the homophily principle, it is likely that people will listen to messages that come from people who are most like themselves. Mavrocordatos (2003) suggests that individuals or communities with a strong sense of identity and which are bound by homogenous traditional beliefs are most ideally placed to be able to use theatre to analyse and change their situation.

On the other hand, Mda (1993) argues that a certain amount of difference between the two groups is necessary for there to be any desire to act as a catalyst and encourage change, and that outside intervention is always necessary.

He suggests that the key functions of intervention in theatre for development projects are threefold:

- To keep order and coherence in the play
- To facilitate a deeper analysis
- To contribute technical expertise on the medium itself, and on the content

Mda 1993 (165).

Following this assertion, intervention allows for a performance product that is well-constructed, encourages the audience or other participants to question the issues more deeply, and is based on a strong, particular aesthetic and known content. However, each of these points can be argued against.

There is a clear link between the aesthetics of a theatre performance and the impact that it has on an audience, as audiences are more likely to respond to what they find appealing. Aesthetic theories suggest that 'good' art can be measured by its ability to communicate emotion (Rader, 1980; Boje, 2006). The criteria for measuring art are the significance and expressiveness of the work. These are obviously subjective, as a work will have different significance for and will manifest different strengths of emotion in different audience members.

Suggesting, as Mda (1993) does, that the community participants in such projects do not have the capability to order their own coherent theatre performance is condescending and patronising. This approach may undermine the target community's abilities and result in resistance to the development efforts. Further to this, where outsiders contribute technical expertise on the medium may result in a product that matches a particular aesthetic from outside the community, whereas a performance that is based on the community's own aesthetics may be more engaging for that group.

Community generated theatre generally has its own aesthetic, based on the rituals and performance traditions of that community. Kennedy Chinyowa (2005) argues that theatre for development practice “could be made more effective by drawing its aesthetic paradigms from the people who are the subject and object of development” (2005:2).

The form of the theatre should therefore be dictated by the predominant local aesthetic. Similarly, the content of the play must be based on the lived realities of the local community if it is to have resonance and relevance to the audience. Mda’s assertion that the outside catalyst should provide content suggests that this outside ‘expert’ knowledge may be more important than the local knowledge of the community participants and the audience. The reliance on expert knowledge is contrary to the ethos of Paulo Freire’s problem-posing education.

At face value, Mda’s arguments for intervention read as counter to participatory development ideals. Mda however recognises that more intervention by the outside catalyst results in less community participation and less conscientisation (1993:170). He argues for a case of *optimal intervention*, described as “the best compromise between the opposing tendencies of participation and intervention” (1993:173). Mda suggests that this optimal intervention is attained when participants are able to go through the processes of naming problems, reflecting critically on these, and considering action (Freire’s points of problem-solving, critical consciousness, and praxis). He cautions that the catalyst should withdraw at this optimal point, before imposing its views and values.

This point of optimal intervention varies depending on the proficiency of the catalyst, and the level of critical awareness of both the catalyst and the community. Mda argues that only a catalyst with levels of social consciousness and critical awareness higher than that of the target community can function effectively to develop this in the target group. Mda concludes that the community should retain ownership of the project, and that genuine conscientisation can only occur when “the community itself assumes the function of catalysts” (1993:174).

The question of topic selection

The topics for theatre for development in the South African context are most often related to HIV, sexuality, gender issues and human rights, violence, and substance abuse (Dalrymple, 2006). While it is accepted that theatre for development should be concerned with issues of development and addressing the problems that underdeveloped communities face, there is debate as to who should decide on these topics.

Deciding on the topics for development or for social change messaging brings about an ethical dilemma. Singhal and Rogers (1999) note that the source of the message (usually funders and their agents) makes value-laden judgements regarding what is pro-social or anti-social content. The content of the theatre may not be appropriate for the community, and the priorities for the funders may not always match the priorities for the community.

This raises questions regarding the nature of theatre for development as a communication model. Projects that introduce a pre-planned message into a community are based on a monologue-like one-way communication model. Projects that encourage the target community to enter into debate about its content are an example of a more inclusionary dialogue-based approach to communication. Mavrocordatos suggests that while theatre for development practice tends to avoid the 'monologue', the practice of using didactic theatre is still widespread, "especially among development workers not familiar with the discourse of participatory theatre" (2003:4).

The drive to create issue-based theatre is a failing on the part of theatre for development, influenced by modernisation (Kerr, 1995). There has been a tendency to see the theatre as providing solutions rather than providing a space for analysis of where those problems have stemmed from, and how to address the root cause of the problem. Mda (1993) argues that true theatre for development is more concerned with giving a voice to the marginalised than in preparing them to adopt innovations and coming into the community with a prepared message.

These arguments point to the fact that without full participation by the community in the message-creation process, the theatre performance may be at best inappropriate and meaningless, and at worst domesticating and oppressive. Kerr (1995) suggests that where theatre projects encourage people to create their own plays, there is a conscious analysis of the issues that is an integral part of the play-making process. These acts of creation therefore result in conscientisation and empowerment.

The question of aesthetics and professionalisation

Debates around levels of skills development and professionalism in theatre for development are raised by a number of critics. Alex Mavrocordatos (2003) suggests that where there is emphasis on the product of theatre, there is often little focus on the process and participation of the community which is supposed to benefit from the intervention. Where the focus is on the process, development may be enhanced for those directly involved, but others who watch the resultant performance may not be moved, as the end product may be unappealing.

Further to this, Mavrocordatos (2003) suggests that theatre for development projects often work on the principle of 'home movies' within small communities. Here, family members enjoy the experience of watching performances by those they know, and are accepting of their flaws. However, outsiders may be more demanding of a level of quality from the performance and may be put off by unprofessional performances. This would suggest that for a broader audience to be reached there is a need for a standard of skill or professionalism within the performance project.

Many of the projects discussed earlier have only a short period in which the catalyst group, usually trained actors or drama students, work with the community in developing performance skills and creating a theatre performance. This may mean that the performances developed are amateurish and lack impact. This could suggest that participation limits the potential of the theatre performance to have an effect on an audience.

The skills development component of theatre for development projects has come in for criticism, with Mda (1993) suggesting that using theatre professionals to develop local

catalysts to use drama in the community is problematic. He argues that using theatre professionals from a predominantly academic (and colonial) background means they are likely to impart skills associated with the Western theatre tradition. Mda suggests that choosing an aesthetic based on the popular indigenous theatre tradition may be more effective in stimulating recognition and encouraging audience participation in the programme.

Taking the local aesthetic into account in theatre performances allows audiences and participants to identify their own identities in terms of worldviews and values, knowledge, traditions, customs, beliefs, and symbols. This understanding of reception theory has driven a number of African scholars such as Kennedy Chinyowa (2001) and Veronica Baxter (2008) to investigate the indigenous aesthetics inherent in local cultural rituals and to search for the familiar forms present in applied theatre and theatre for development that are drawn from these rituals.

It has been noted that where projects have been conducted in areas that have a strong indigenous performance tradition, it has been found that it is easier to build on this tradition rather than forcing theatre onto the community (Kerr, 1995). Kerr (1995) cites the experiences of The Nigerian Benue State Arts Council project where successfully created artistic performances drew huge audiences that were used to watching plays.

Evaluations of this project suggest that the audiences felt more confident to tackle problems after the plays, and that the performance groups continued with their activities after the intervention team had left (Kerr, 1995). This use of a relevant popular form could ensure a more ready acceptance of the project, and could ensure sustained community interest in the project after the withdrawal of the catalyst group from the area.

The South African Victory Songqabo Theatre Company (VSTC) group uses community-based actors who are paid for rehearsals and performances (Marlin-Curiel, 2004). This attempt to professionalise the performers may make the performances more effective and the project more sustainable. However, it also raises questions regarding dependency, commitment and community spirit. According to Marlin-Curiel (2004), many of the actors from the VSTC groups have gone on to star in local television series and have left the community theatre and development environment.

This assertion is backed up by the findings of Van Heerden (2008) as well as my own experience with developing theatre groups in KwaZulu Natal. A common theme is that young people who become involved in theatre through development projects want to go on to become stars of the stage and screen. Their initial involvement in the work is usually because they want to empower themselves to be actors, not because they want to be pivotal in empowering their communities.

The notion of volunteerism and professionalisation will be explored in more detail in my research into case studies later in this thesis.

The question of sustainability

In a study of three South African HIV and AIDS theatre projects, Katherine Low (2010) found that theatre provided a forum for individuals to share their thoughts and emotions regarding HIV and other sexual health issues. She finds that longer-term theatre projects which allow individuals to develop relationships are more conducive to their sharing their experiences. This suggests that theatre can have a greater impact on the social level if participants are given sufficient time and opportunities to discuss their experiences. This provides an argument for initiating theatre interventions that are sustained over time, and therefore more effective.

Sustainability is a term bandied about in many development projects. Essentially, a sustainable project is one that can be continued once the funding and donors have withdrawn from the work, and one that has long term viability and stability (Dholakia *et al*, 2006). In the case of theatre for development, the ideal sustainable project would be one that would continue under the guidance of the target community after the catalysts had left the area.

To be sustainable, a project needs to have value to the participants. Dholakia *et al* (2006) outline four components to this value as follows: there needs to be recognition of the product or project, the product needs to be of high quality, the user community needs to be engaged and involved with each other and to build links through the project, and the product or project must be useful and bring about some benefits for the community.

Sustaining the effects of a theatre for development project requires that the local audience is inspired to take up the methodology and continue the work once the catalysts have left the area. Mobilising the community to support the project and become involved in it is vital to ensuring this sustainability. Marlin-Curiel (2004) suggests that theatre for development in South Africa is based on the strong protest theatre movement that existed during the apartheid years, and is practised more widely by activists and artists than by educators and development workers.

The three projects mentioned earlier all mobilise and engage the community to a certain extent in that they watch or take part in performances and discussions. However, their long-term effects have been different. Although both *Laedza Batanani* and the Maratholi project trained villagers in theatre skills, there is no evidence to suggest that the practice of creating theatre continued after the project group had left the area. The DramAidE Act Alive project established clubs in schools to continue with the work started by the performance part of the project, and some of these clubs are still operating after ten years, with only minor assistance and intervention from DramAidE (interview with M. Gumede, 2009). This example points to the fact that if some kind of infrastructure is developed, these interventions can have a long-term effect and can become community-driven projects that are catalysts for sustainable social change.

Theatre is a popular and engaging form, and this may be a motivation for involvement in sustained projects for community members. However, ongoing support for these projects is often required to ensure sustainability, and this requires funding and resources which may be scarce in most underdeveloped communities.

An international survey of thirty theatre for development experiences found four key factors that can inhibit or improve a theatre for development project's success (Cravens, 2005). These include having a strong organisational infrastructure, having clear and focused objectives for the project based on extensive local research, cultivating close relationships with other organisations working in the area, and ensuring that the project has a long-term plan in place. These may contribute to both the project's sustainability and its efficacy.

The question of efficacy

Effective theatre for development initiatives are those that concentrate on both the artistic product of the theatre and the process of analysis and conscientisation generated within the community (Mda, 1993). To be meaningful then, these processes that involve community participants call for more than a simple introduction to theatre. Minke Valke (2009) suggests that theatre is best used as one part of a broader programme which can then provide other opportunities for conscientisation and action.

Different types of theatre project are likely to have a different impact on audience recall. Dalrymple (2006) finds that participatory theatre practices provide a forum for debate that extends beyond the event itself. This gives support for Tufte's call for greater emphasis on third generation EE projects. Ongoing discussion and participation could ensure that messages are discussed, reframed, and remembered for a longer time period.

Interactive and participatory theatre "adds the personal and group learning dimension that has the potential to turn awareness into action" (Treder-Wolff, 1993:338). Participation can build both personal confidence and self-efficacy and also builds the group as a communal unit.

Further to this, Sayye (2004) finds that participation in a community theatre project increases the analytical and risk-assessment ability of group members. It also builds participants' self esteem and gives them assertiveness skills to be better able to cope with peer pressure. This claim that participants in participatory theatre projects learn such essential life-skills is supported by a number of authors in the field (Bolton, 1985; Jackson, 1993; Dalrymple, 2006), and will be further explored in my research.

Measuring the efficacy of theatre projects poses a challenge to practitioners and researchers. Kerr (1995) suggests that theatre for development projects that are reliant on donor funding often present positive findings to elicit further funding, to the detriment of presenting a critical review of projects. Efficacy may be difficult to gauge accurately when this is the case. This measurement is also hampered by the fact that many practitioners in the field come from the humanities, and not from the sciences, and there

is not a strong tradition of rigorous investigation into the reception and impact of theatre for development.

As an art form, theatre is most commonly measured by an interpretative ethnographic approach. Within the field of qualitative research, methods of observation are often used, and are subject to interpretation and the authenticity and veracity of reports is often questioned (Somers, 1996).

However, as project donors are becoming more insistent on results-based work, there has been a marked increase in the generation of evaluative reports. Ailish Byrne (2007) argues that evaluation should be grounded in the lived practice of the project and be seen as an integral part of the process, not a hastily-added extension at the conclusion of the project.

There has been a move to use the medium of theatre itself as a research tool, and there has been a range of projects that use the creation of the theatre performances as a measure of how a community group has analysed development issues. Somers (1996) points out that this process of creating a performance and making meaning from the content can be a profound experience. He suggests that when codified, this is a legitimate form of research and can be used more effectively.

While recognising that theatre can have an impact on broader society, it is difficult to substantiate these claims, and there are few documented examples of actual structural societal change that have been brought about through theatre. One successful example is that of *The Action Theatre Group* from Bangladesh (Akand and Palasz, 2007). This group works closely with the target community and existing community structures on all aspects of their human rights-based theatre projects, and the strategy of embedding the project in the community has yielded noticeable results.

The *Action Theatre Group* plays are generated by the community and deal with issues of local concern particularly relating to marriage practices, rape, and other gender and sexual-health issues. Akand and Palasz (2007) note the results of the theatre interventions as a substantial decline in under-age marriages and the dowry system, and an end to village-mediated rape cases, and referral instead to criminal courts. These

successes represent real change at the societal level, ensuring an improvement in the circumstances under which the local people live. These changes have been brought about not through the theatre performances alone, but through continued action by individual audience members and broader communities who put pressure on their local governance structures to bring about change as a result of the issues raised in the theatre performances.

Through this kind of sustained awareness and call to action, theatre can bring about political and social change. In her South African research, Low (2010) proposes that theatre and performance-based projects are more effective if they are a part of a larger structure. This supports the institutionalised approach of *Action Theatre Group* experience, and such an approach is necessary for theatre to have a greater impact on the societal level.

Some contradictions and conclusions

A review of the literature shows that theatre has the potential to be a powerful medium for communicating about issues that are sensitive and complex (Mavrocordatos, 2003; Dalrymple, 2006; Valke, 2009). Theatre can have meaning for an audience on various levels and can impact on the individual, social networks, the community and broader society.

Studies in the field reflect that theatre has the potential to reach large numbers of people and is widely accessible (Mitchell *et al*, 2001). It is a popular and acceptable medium and is enjoyed and rated highly by audiences. Discussion after theatre performances allows audiences to explore how they feel about the messages encapsulated in the theatre, and how to incorporate these messages into their own lives.

Incorporating local voices and understandings of HIV and AIDS in theatre interventions allows for local solutions to specific problems. In addition, the story-telling nature of theatre allows audiences to identify and engage personally with what they see on stage, and this encourages message retention. These findings provide a strong argument for the effective use of theatre to encourage behaviour change. However, broader social change is difficult to measure.

Theatre is appealing as an entertainment form, and, as an emotionally engaging activity can encourage debate and participation amongst an audience. Theatre is a public activity and can therefore encourage community ownership and create opportunities for the voiceless to speak out in an unthreatening environment. It is a portable medium that does not require sophisticated infrastructure or technology, and can therefore be cost effective in reaching large numbers of people, including illiterate and uneducated audiences. Theatre can be created to be context and culture-appropriate and make use of local languages, idiom, and other familiar cultural forms.

However, theatre can also be time-consuming and therefore not sustainable. Its efficacy may be dependent on the abilities and talent of those involved, who are often untrained. The effects of short-term theatre projects or once-off performances are difficult to measure, and the excitement of using this entertaining medium may create unrealistic expectations regarding its efficacy.

To be effective in bringing about change, theatre should consist of more than simply providing information about the epidemic and a demonstration of how people feel about it. While these factors encourage individuals to make changes in their own lives, this change needs to be socially supported and sustained. This marks the difference between first and second generation entertainment education interventions, and third generation interventions which are more participatory and revolve around the concept of social change.

To be more effective in facilitating development, theatre should strive to create a forum for discussion and debate that leads to community action and social change. As such, theatre should be seen as a catalyst for change rather than an end-point to the process.

In this chapter I have outlined the rationale for using theatre in the development context in Southern Africa. I have discussed some of the seminal projects in the field of theatre for development, and the key conceptual questions that arise from these experiences.

CHAPTER 6: POWER AND EMPOWERMENT - A THEORETICAL FRAMEWORK

In the previous chapters I have discussed how theatre has been used as a medium for the mitigation of HIV and AIDS. The key justification for the use of theatre is that it has the potential to bring about some transformation in those who participate in it. Rather than encouraging the adoption of pre-planned health messages, the primary aim of this work is to empower people and develop agency so that they are able to transform their own lives.

This chapter explores development and empowerment theory and the concepts upon which these processes are built.

The roots of development theory

Development theory explores the dynamics of development projects and the relationship between the interventions that are created for the 'betterment' of a community in need, and the parties with power who determine what these interventions are, who the communities in need are, and what constitutes this so-called betterment (Nederveen Pieterse, 2001).

Development became a popular concept shortly after the Second World War and the formation of the United Nations, when developed countries began coordinated efforts to fund aid to 'third world' countries (Melkote & Steeves, 2001, Manyozo, 2008). These initial efforts at development were focused predominantly on agriculture and industrial production, and the emphasis in this period was on economic development. I would argue that this focus on economic development ignores the social context that gives rise to the needs for development, and is therefore not a sustainable approach.

In later decades, it was recognised that there was an essential social impact to development that resulted from economic growth. Everett Rogers (1969) was one of the first theorists to view development as a type of social change. His diffusion of innovations theory explains how new ideas are introduced into a social system in order

to produce higher standards of living through modern production methods and improved social organization (Rogers, 1969). Although it takes into account social contexts, this approach is still focused on solutions to local problems being imposed from the outside. Development in this form was seen as a way for the first world countries (the North) to bring about change and improvements in the way things were done in third-world countries (the South).

This approach to development is criticised as “bridging the gaps by means of imitation processes between traditional and modern, retarded and advanced, or barbarian and civilized sectors and groups to the advantage of the latter” (Servaes, 1999:19). This criticism is indicative of how over the past sixty years, development has become a highly contested and politicised field. Although there have been shifts in the approach to development (Manyozo, 2008), it is still too often thought of as “something which needs to be done (economically or ideologically) to the South, whereas the West has already achieved some higher level of enlightenment” (Boon and Plastow, 2004:1).

The concept of the outside country or agency acting to improve the lot of the uneducated and ‘backward’ barbarians of under-developed nations still prevails. Influenced by the modernisation approach to development, many development projects continue to be planned and executed in this way, without the participation of the local target community (Moemeka, 1997). Development of this sort can be seen as an extension of colonialism, with all of the patriarchy and power-play that this entails. Criticism of this approach forms the basis of dependency theory, which suggests that this type of development in fact serves to disempower communities rather than developing them (Servaes, 1995).

Development as a human issue

Current trends in thinking about development recognise that development is a human issue rather than an economic one. There is a renewed focus on people in the contemporary paradigm of *human development*, which focuses on “creating an environment in which people can develop their full potential and lead productive, creative lives in accordance with their needs and interests” (UNDP, 2009).

Within this paradigm, development is seen as a means to achieve “a more satisfactory intellectual, emotional, moral and spiritual existence” (UNESCO, 2009). Measuring this rather feel-good existence does however need to be empirical; and issues such as life expectancy, adult literacy, access to education, and average income are used as the benchmark. All of these issues can contribute towards this more satisfactory existence with increased well-being.

This view of development necessitates a focus on the individual, and the need for development to be people-centred. However, the individual is seen as part of a broader community and this is the environment that needs to be changed to support personal development. In this way, we can see individual and societal development as two parallel and inter-dependent tracks. In the context of HIV and AIDS, this means that individual behaviour change must be supported by community change, and this requires development beyond personal awareness and empowerment.

Freedom, choice, and development

Amartya Sen suggests that development should be seen as “a process of expanding the real freedoms that people enjoy” (1999:3). Sen argues that development is a process towards ensuring these freedoms, rather than an end in itself. When the traditional key determinants of development are met, people have greater freedom of choice (World Bank, 2004; Sen 1999).

Individual political and civil rights and the social and economic conditions under which people live influence the achievement of this freedom. Countries with better civil liberties such as citizen voice, participation and accountability are more likely to support this concept of freedom. This links with the empowerment concept of *liberating the mind* put forward by Boon and Plastow (2004) and by Freire (1983, 2002).

Linked with the concept of self-determination, freedom also implies that individuals have the right to choose how they wish to develop. As empowerment implies control over both resources and decisions (Narayan, 2002), individuals must have the choice to make the decisions that are most appropriate for their circumstances. It follows that

when people have more power, they are more able to make choices; and that because they make these choices they can further empower themselves.

As we see the relationships between these concepts of awareness, group process, and freedom of choice, we can better understand how human development can be facilitated. Communication for development should take these concepts into account and seek change at different levels, “including listening, building trust, sharing knowledge and skills, building policies, debating and learning for sustained and meaningful change” (UNESCO/UNDP, 2007:38). This shows a marked shift in development initiatives towards inclusion, human rights, and personal involvement that bring about empowerment.

Understanding empowerment

Contemporary debates about development focus on the notion of empowerment, which arguably improves the efficacy of development initiatives. There are a number of definitions of empowerment as an approach to development. Robert White (2004) suggests that this multiplicity of understandings is “incomplete and possibly dangerous” (2004:21) and that empowerment needs to be firmly situated within a framework of social equality and human rights. He argues that hierarchical power structures have previously restricted development and that empowerment should not be seen as achieved until universal human rights are guaranteed.

White’s argument for universality suggests that while individuals might be ‘empowered’ within a particular context, true empowerment can only occur if all individuals within that context are empowered. Maire Dugan (2003) also emphasises the communal nature of empowerment, defining empowerment as “processes through which disenfranchised social groups work to change their social surroundings, change detrimental policies and structures” (2003: 2).

There is general consensus that the issue of empowerment involves the transfer of power from institutions to previously powerless individuals.

Empowerment is the expansion of assets and capabilities of poor people to participate in, negotiate with, influence, control and hold accountable the institutions that affect their lives.

Narayan, 2002: xiix.

Beyond building capacity, Boon and Plastow (2004) argue that empowerment is not to do with alleviating poverty and oppression, but rather with liberating minds and transforming participants into conscious beings who make choices about how they want to see the world and be seen in it, and how they choose to live their lives. Further to this, Page and Czuba assert that empowerment “challenges our assumptions about the way things are and can be. It challenges our basic assumptions about power, helping, achieving, and succeeding” (1999:1). In the context of development work, and particularly in the area of public health and HIV and AIDS, these ideas need to be re-examined.

Defining empowerment

There are three primary components to empowerment, namely that it is multi-dimensional, social, and a process. Page and Czuba (1999) assert that empowerment can occur within sociological, psychological, economic, and other dimensions, and at a range of different levels, including the levels of the individual, the group, and the broader community. Empowerment is therefore a social process influenced by and in turn influencing the relationship between the individual and the community.

Empowerment should be viewed as a process, and not a finite end, since people continually change and develop and become more or less empowered as the context in which they live changes.

Empowerment is a process of transition from a state of powerlessness to a state of relative control over one’s life, destiny, and environment. This transition can manifest itself in an improvement in the perceived ability to control, as well as in an improvement in the actual ability to control.

Sadan, 1997:144.

Malhotra, Schuler, and Boender (2002) build on this, suggesting that empowerment can be distinguished by two key factors; that it is a *measurable process* over time, and that it includes *agency*, where community members become “significant actors in the process of change that is being described or measured” (2002:9).

The notion of agency and significant actors taking control is also explored by Sherry Arnstein (1969), who argues that unless the local community holds the power to make decisions about their own development, then development initiatives cannot claim to be empowering. Further to this, Melkote and Steeves argue that the locus of control in empowerment activities must rest with the community members (2001, 363).

However, it is important that the local community is involved in the taking of power, rather than being “given” power by the authorities. Marie Dugan (2003) argues that the term empowerment can become disempowering “when it is understood to mean the giving of power by the powerful to the powerless” (2003:4). How these individuals go about the process of acquiring this power, or a share in this power, is key to understanding empowerment.

Four key elements to empowerment are identified by Narayan (2002) as being: access to information, inclusion or participation, accountability, and local organisational capacity. Access to resources and information may ensure that the community under development develop the necessary skills to take control of their own development. Inclusion and participation in the project may give them access to the power to take this control. However, it is important that the concepts of empowerment and participation are not conflated. For the purposes of my study, participation is not seen as an end in itself, but as a means to facilitate empowerment.

Empowerment theory rests on the central concept of power, and bringing about the shift of power in social structures so that the previously powerless gain control of their own circumstances. Page and Czuba (1999) suggest that empowerment can only come about if firstly, power can change, and secondly, power can expand.

If power cannot change, if it is inherent in positions or people, then empowerment is not possible, nor is empowerment conceivable in any meaningful way.

Page and Czuba, 1999: 1.

This assertion necessitates an understanding of what power is.

Theories of power

One of the earliest power theorists is the German sociologist Max Weber (1862-1920), whose explorations of power focused on the ability of one individual (or a group) to control another. This control allowed one party to assert their own wishes regardless of the wishes of the other or any attempts to resist this control (Henry, 2010). In this understanding of power, one party dominates and the other submits. This leads to the notion of *relational power*, which suggests that power only exists in the context of relationships between people.

This is expanded on by Michel Foucault, with his assertion that power does not exist in and of itself, but exists in the relationship between entities, and there is an ongoing struggle for position and advantage between these entities (Foucault, 1982). Foucault is known for his criticism and analysis of the *apparatus* of power, those institutions and structures which enhance and maintain the exercise of power. However, he asserts that power is not restricted to these institutions, but operates at all levels of society, including the most micro levels of social relations (O'Farrell, 2005). For Foucault, power exists in all things and all relationships.

Examining power in terms of the macro social environment involves exploring the institutions of power such as government and capital. Marxist theory explores power from this perspective. However, such macro approaches do not examine the concept of power as held by individuals, which is more appropriate for discussions of empowerment in my study. Relational power must, however, be explored within the context of structural power. In terms of development, participation in existing or new structures can challenge the status quo and bring about shifts in both relational and structural power.

An analysis of relational power is proposed by Steven Lukes (1974, 2005), who suggests that the underlying concept of power is that one person (A) has the capacity to exert influence over another (B), and to affect that person in a significant manner. Luke's theory of power was developed to explore American politics, and rests on the issues of agenda-setting, interests, conflict and control, where one group has power over another. This is generally referred to as *power over*.

Both Weber and Foucault assert that power is not inherent, but is *created* through these relationships. Page and Czuba (1999) argue that as power is created, it can therefore be changed. Understanding the relationships between people and things can go some way to understanding why power is held by one party and not another, and to bringing about a change in this relationship. Foucault (1982) argues for the importance of examining power relations, including "their historical formation, the source of their strength or fragility, the conditions which are necessary to transform some or to abolish others" (1982: 208). He argues that an analysis of power relations and freedom is a "permanent political task inherent in all social existence" (1982:208).

For Foucault there is a political imperative, to examine and challenge the structures that hold power. A Foucaultian reading of power raises the notion of actors and actions:

Let us come back to the definition of the exercise of power as a way in which certain actions may structure the field of other possible actions. What, therefore, would be proper to a relationship of power is that it be a mode of action upon actions. That is to say, power relations are rooted deep in the social nexus, not reconstituted "above" society as a supplementary structure whose radical effacement one could perhaps dream of. In any case, to live in a society is to live in such a way that action upon other actions is possible - and in fact ongoing.

Foucault, 1982: 208.

The recognition that power is rooted within the social context is important. For individuals to bring about change in their own lives, a wider community or social change needs to be addressed simultaneously. For individuals to become empowered, power may need to be wrested from other institutions that have otherwise held this, preventing them from realising their agency.

If we see the exercise of power as the actions of one thing impacting on the actions of another, then by extension, empowerment can be seen as actors taking control over their own actions. The capacity that one person or an institution has to exert power over another has been explored in the development sphere by a number of scholars (Eyben, Harris and Pettit, 2006), who argue that the capacity to exert power may be used either to bring about social change or to sustain the status quo.

In development initiatives, empowerment should result in individuals or a group having their own power to control the development agenda and decisions, thus being the recipients of 'power to' and escaping the concept of 'power over'. In the context of HIV and AIDS, at the level of the individual, this power should be the power to make individual positive decisions with regards to health-behaviours. At a broader level, this should involve the power to challenge the social inequality, gender inequality and cultural practices that exacerbate the epidemic.

An individual can exercise power in three ways: through the dominant party using direct physical power over the submissive party, through rewards and punishments, and through influencing opinion (Weber in Henry, 2010). Unequal power relations have arguably resulted in the high incidence of HIV and AIDS in South Africa, with gender violence, and coerced or commercial sex resulting in women having less power than men. These are indicative of Weber's concepts of physical power, reward and punishment. This power imbalance and structural inequality are deeply entrenched in South African society, and may take decades to be shaken off.

Perhaps the easiest way for ordinary people to exercise their power is through Weber's third category, of influencing opinion. Starting at this basic level, individuals can hope to influence other community members and policy-makers to bring about a shift in power relations between the haves and the have-nots, and between men and women, which may reduce the incidence of HIV transmission in the long term.

The influencing of opinion is examined by Foucault in his examination of *discourse*. This includes understanding how discourses bring about power with regard to what issues are about, the way in which they are spoken of, the intellectual constructs needed to speak about them, and the ways in which these constructs are developed (Foucault 1980, Crewe, 2009).

Foucault argues that discourse brings together power and knowledge.

Power produces knowledge (and not simply by encouraging it because it serves power or by applying it because it is useful)... power and knowledge directly imply one another... there is no power relation without the correlative constitution of a field of knowledge, nor any knowledge that does not presuppose and constitute at the same time power relations.

Foucault, 1977:27. In McHoul and Grace , 2002.

The issues of knowledge and awareness are central to people reclaiming power in their own lives, and to bringing about development. With these tools, people can control the discourse around development and can determine their own development.

In Freire's analysis, knowledge that is deemed to be scientific, academic, or technical is seen as belonging to the dominant classes. To a certain degree, the sub classes may distrust this information, precisely because it emanates from such a source (Kane, 2001). For the sub classes to claim power, they therefore need to claim knowledge. Freire (1983) argues that knowledge is produced socially, and acquired through social interaction. The premise of participation is that through dialogue, the sharing of ideas and experience, knowledge will grow. Through this process, empowerment education aims to reduce dependence on outside knowledge and expert opinion.

White (2004) suggests that empowerment comes about when people develop an awareness of their own identity and talents and have the confidence to participate in group processes. If people have knowledge about HIV and AIDS, combined with this awareness, then they may be able to make informed choices in relation to others, and reclaim their power over their own lives. This raises three key concepts for empowerment: awareness, group process, and freedom of choice. The theory that informs these three concepts provides a basis for my research into TFA practice, and I will elaborate on each of these below.

Awareness, consciousness, and development

The notion of awareness is linked to that of critical consciousness, made popular through the educational theory of Paulo Freire. John Dale (2003) asserts that Freire is

influenced by the ethics of Aristotle, who assumes that humans are set apart from animals by their ability to reason. This human capacity to reason is the basis of Freire's belief that all people are able to develop a critical consciousness of the world around them. The Freireian concept of critical consciousness is defined as "the awareness of knowing little... and knowing that they know little, people are prepared to know more" (Taylor, 1993:52).

Servaes and Malikhao (2005) assert that Paulo Freire's theories are also influenced by the existentialism of John-Paul Sartre, and the utopian views of Karl Marx. Sartre proposes that all humans are autonomous and have the potential to define themselves and the freedom to choose a state of being. Freire adopts this position and bases much of his approach on the assumption that people can choose to think at a 'higher' level, and to develop more beneficial social relations (Dale, 2003). A key component of Freire's work is based on the Marxist supposition that the psychological state of mind of individuals is dictated by the dominant ideology, and that as such, collective action can overcome oppression. The Freireian concept of conscientisation also mirrors the Marxist critique of false consciousness, where it is important that the masses reject mystery and belief and adopt a more rational and material view of the world.

Freire suggested that the 'banking' concept of learning, where learners are empty vessels to be filled with knowledge, was both inappropriate and ineffective, particularly with adult learners. Freire suggested re-viewing education as a participatory facilitated process. In this process, learners build on their own prior knowledge and experience to develop a conscious and critical view of the world based on a reflection of the lived experience (Freire, 1983). This dialectical theory of knowledge is based on the belief that knowledge is acquired through "interacting and reflecting on the material world in which we live" (Kane, 2001:13)

Freire's examination of knowledge is linked to Foucault's notion that different mechanisms of power produce different types of knowledge. Freire advocates for knowledge to be in the hands of the people, which requires that power must also shift into their hands.

The Freireian theory of knowledge rests on his presumption that knowledge is based on reality, it is practical, dynamic, and entails a dialectical and dialogical relationship between “knower and known” (Elias, 1994:63).

Knowledge is always a process, and results from the conscious action (practice) of human beings on the objective reality which, in its turn, conditions them. Thus a dynamic and contradictory unity is established between objective reality and the persons acting on it.

Freire, 1977: 49.

Freire’s conception of knowledge involves the “critical reconstruction of our ideas about the world through problem posing and problem solving” (Elias, 1994:64). The notions of equality in communication, problem-posing, critical consciousness or conscientisation, and praxis are the key tenets of this theory. I will explore each of these in detail below.

Equality

The structural relations between the dominator and the dominated in society condition the behaviour of the oppressed (Freire, 1985). This results in a “culture of silence” and a certain fatalism that have been brought about through “the objective conditions of an oppressive reality (Freire, 1985:31). This fatalism leads people to believe that they cannot effect change, and inhibits participation and presents a barrier to equal communication.

In the context of HIV and AIDS, fatalism is often related to religious or spiritual beliefs, where people believe that the disease is a punishment inflicted by an angry deity. It is also associated with ideas around a lack of positive future, related to poverty. Hess and Mbavu (2010) find that individuals who have had more years of formal education, and experience of HIV and AIDS education are less likely to have this fatalist attitude.

In order to counter fatalism, paternalism, and dependence, Freire (1985) argues that communication must include education, active participation and mobilisation to stimulate the decision-making powers of these oppressed groups.

Participation must however be as equals, and not promote the vertical and manipulative welfare syndrome which, Freire argues, incorporates the oppressed as objects rather than real subjects. Transformation can only come about if people are recognised as equals. In the transformation process Freire suggests that the oppressed should be recognised as “fellow subjects of the transformation” (Freire, 1985:30). This involves recognising the knowledge, creativity, and regenerative capacity that the group has. This recognition can only come about through dialogue.

The role of a catalyst in the change and development process is to develop opportunities for problem-posing and for transforming the world. Maintaining the status quo or blocking change is a quasi-transformation and the antithesis of problem-posing. Freire discusses the role of this catalyst as a social worker, who should strive to “unveil reality” to facilitate critical consciousness (1985:40).

Problem-posing

Freire posited that education could be an active and creative act that moved students “from naivety to a critical attitude” (2002:43). This shift could only occur if students were inquisitive and were encouraged to explore the way that their own reality intercepted with the way that the world functioned. He refers to this as authentic knowledge, making a distinction between the Platonic concepts of *doxa*, being opinion and awareness, and *logos*, being the knowledge of the reasons and causes of things (1970:35).

As they apprehend a phenomenon or problem, they also apprehend its causal links. The more accurately men grasp true causality, the more critical their understanding of reality will be.

Freire, 2002: 43-44.

Problem solving involves examining an objective reality through investigating the themes present in that reality and expanding the limits of their prior knowledge, therefore revising their views of the world based on this vision (Freire, 1985). Freire argues that this world vision should be seen as a problem to be solved.

It's essential that the naive view of reality give way to a view that is capable of perceiving itself, that fatalism be supplanted by a critical optimism that can move individuals toward an increasingly critical commitment for radical change in society.

Freire, 1985: 40.

Freire's concept of *critical consciousness* is defined as "the awareness of knowing little... and knowing that they know little, people are prepared to know more" (Taylor, 1993:52). This suggests that understanding one's own reality and what brings about that reality is at the root of critical consciousness, driving people to find solutions to the problems that they face. In the context of HIV and AIDS, communication and education processes should therefore encourage people to explore the material conditions that give rise to the epidemic.

Although this may appear simplistic, it is a fairly common-sense approach to problem-solving. Only once a problem has been named and understood, can it be tackled. Narayan's (2002) call for access to information can be seen as a precursor to developing this awareness. Only when people are in possession of all of the facts and information about a situation will they be able to understand it better. Freire argues that this problem-posing leads to conscientisation.

Conscientisation

Freire outlines three different levels of consciousness; *semi-intransitive consciousness*, *naive transitive consciousness*, and *critical consciousness*. All of these, he argues, are socially conditioned, and are related to how much people understand about the cultural-historical reality in which they live, and how they are prepared to challenge or transform this reality. Dialectically, the structural reality can create each level of consciousness, and each level of consciousness can impact on reality.

Freire describes semi-intransitive consciousness as "a kind of obliteration imposed by objective conditions" (1985:75). This involves an individuals' consciousness of his or her lived experience without the ability to objectify the reality and the problems that are faced. Living under paternalism, and without any structural perception, people attribute

their circumstances to myths and to either some supernatural power beyond themselves or to something within themselves. Freire argues that this belief system leads to a culture of silence, fatalism, and a presumed incapacity to act on the world. The imposed ideas and intuitionism of first generation EE initiatives are reminiscent of this semi-intransitive consciousness.

As people become more aware of the structures that determine their lives, Freire argues that a more transitive consciousness is developed, though this is naive, as myths still dominate. However, he argues that people are more ready to develop awareness as they perceive “the source of ambiguous existence in the objective conditions of society” (1985:77). This emergence of popular consciousness in the masses may result in some challenge to the structures of power. Through this transitional process, society becomes more dynamic, and people become more aware of the contradictions and emerging conflicts of their realities. The limited involvement of opinion leaders and selected community members in the more participatory peer-led second generation EE initiatives are indicative of this more transitive consciousness.

The next step in the progression of consciousness is to that of critical consciousness, which Freire recognises is the precursor to utopian revolution, where “the people assume the role of subject in the precarious adventure of transforming and recreating the world” (1985:82). This revolution, he argues, must be a critical process involving both science and reflection. This can only be brought about through dialogue and a codification of reality. Freire argues that conscientisation implies “the critical insertion of the conscientised person into a demythologised reality” (1985:85). He asserts that that awareness involves understanding the dialectical relationships between people and the world, how these relationships evolved, and how they condition people’s understanding of the world. This development of critical consciousness is the aim of third generation EE initiatives influenced by the participatory paradigm of development communication.

The emphasis on understanding one’s own place in the world relates to what Robert White (2004) posits is an important component of empowerment, in “the affirming of the dignity and value of one’s own identity” (2004:21). Freire argues that it is only as these “conscious beings” that people can be both *in* the world, and *with* the world, and able to transform reality (Freire, 1985:68). Freire determines that being *in* the world means

merely existing. Being *with* the world involves the ability to objectify the world and therefore to reflect on it, engage with it, and transform it.

Being *with* the world in terms of HIV and AIDS would therefore involve individuals objectively understanding the conditions that give rise to HIV and AIDS, and reflecting on these conditions, which have previously been noted as social inequality, gender inequality, and personal and cultural beliefs and practices. Communities would then need to engage with these issues, and to seek ways to transform these oppressive practices in order to be able to claim power to effect changes in their own lives, supported by society more broadly.

Critical conscientisation is only possible because people can recognise that their consciousness is conditioned. Freire argues that “conscientisation is first of all the effort to enlighten men about the obstacles preventing them from a clear perception of reality” (1985:89). Personal growth and transformation is only possible when people understand how they have been previously limited. For Freire, consciousness is constituted “in the dialectic of man’s objectification of and action upon the world” (1985:69). Where this relationship and the objective-subjective dialectic are maintained, then praxis is possible.

Praxis

Freire asserts that the understanding developed through conscientisation necessarily brings about action.

It so happens that to every understanding, sooner or later an action corresponds. Once man perceives a challenge, understands it, and recognizes the possibilities of response, he acts. The nature of that action corresponds to the nature of his understanding.

Freire, 2002: 43-44.

The process of empowerment education involves action-reflection praxis where participants are encouraged to take a step back from their circumstances and to examine them objectively in order to develop a critical consciousness of what they see. This reflection brings about a shift from *doxa* to *logos*, and offers the perspective and

strength to engage in action to change these circumstances. This is a continuous cycle. Freire argues that these elements of action and reflection are inseparable for consciousness to be changed. He recognises the unity between theory and practice, “in which both are constructed, shaped and reshaped in constant movement from practice to theory, then back to a new practice” (1985:124).

If we accept that the automatic response to understanding an issue is to act on that issue, then developing a critical awareness of what hinders development should lead to action that reduces these problems. However, the issue of agency must be addressed before action can happen. Similarly to other development theorists, Freire argues that “no one conscientises anyone else” (1985:125) and that this is a process that individuals go through collectively, as a group, with some input from an outside source.

While this conscientisation cannot be ‘done’ to anyone else, it is important to recognise that conscientisation, problem-solving, and praxis do not occur automatically or unprompted within a community, but require some kind of intervention from outside of the community, or from those living within the community who have different experiences and a different consciousness, to guide others through a process. Zakes Mda (1993) argues that the essential variable that brings about conscientisation within the process of participation in theatre projects is *intervention* (1993:165).

The concept of a group taking action may be stimulated to a greater extent by EE or theatre interventions that are more participatory, rather than interventions which present a play for reflection. Third generation EE can therefore be expected to have greater potential for this praxis, if the intervention organisation builds consciousness amongst the group towards inspiring them to take action.

Community and development

Foucault recognises that all power is relational. In light of this, White’s (2004) emphasis on the group is an important one, and human development recognises the importance of group and social processes. Development of the group may result in building a sense of *collective efficacy*. The idea of collective efficacy is that through a shared understanding of a problem, and a communal approach to its solution, a group can develop belief in

itself to achieve social and political outcomes (Bandura, 1995, 1997; Lee, 2006). The power of this belief can motivate the group to act collectively to bring about change, and to claim power to be able to bring about this change.

The empowerment pre-requisites of inclusion or participation and local organisational capacity are linked to this notion of community. If individuals from a target community are included in discussion about development, then they are more likely to participate in its processes. This participation may in turn build a sense of community among the group. Where the community drives development initiatives, their confidence and their capacity are further built, allowing them to claim power over their own development.

This provides a strong argument for participation in development initiatives, and the following chapter explores some of the literature regarding participation and its effects on a community. I will then go on to present the details of my field research, which examines the potential of theatre practice to bring about empowerment and change through exploring Freire's concepts of equality, problem-posing, critical consciousness, and praxis in three case studies.

CHAPTER 7: PARTICIPATION IN DEVELOPMENT

This chapter builds on the earlier exploration of development and development communication. In this chapter I explore some of the debates around participation and how it works in practice. The chapter also includes discussion on the different levels of participation, and the realities of putting participation into practice. This chapter provides models against which to measure participation, which informs my own study of participation in TFA initiatives.

Participatory methodologies have become popular because they are rooted in the interests and the struggle of the ordinary people, are overtly political and critical of the status quo, and are committed to progressive social and political change. Participation by community members in the development process promotes democracy and empowerment (Clever, 2001). However, there are a number of debates around the participatory paradigm and its processes, and these are explored in this chapter.

Defining participation

In terms of Freireian theory, the primary purpose of participatory processes is to develop a consciousness about the causes of poverty and oppression and to overcome those. Clever (2001) distinguishes between participation as the means to the end (of the goal of development), and participation as an end in itself. As a means, participation is primarily concerned with efficiency, and the most effective way to reach development. As an end in itself, participation is seen as a process that “enhances the capacity of individuals to improve or change their own lives” (Clever, 2001:786).

Maria Cadiz offers this comment on the motivation for a participatory approach:

Being participatory for the sake of being participatory is not the important issue – rather, the real issue is the reason behind why an initiative should involve the people in community - so that they feel ownership...; so that it truly addresses their needs from their own perspective; and as such, so that they will commit to see the initiative through until it is completed.

Cadiz, 2005: 146.

In participatory methodologies, dialogue is seen as an inherent human phenomenon and “the encounter in which the united reflection and action of the dialoguers are addressed to the world which is to be transformed and humanised” (Freire, 1983:61). The processes of education and communication are seen as democratic and participatory.

Participation demands dialogic communication which allows all participants an equal voice and calls for listening and trust between those involved. This practice essentially involves a change in the thinking of development communicators and requires that expert knowledge and local knowledge are recognised as equally valid.

As well as focusing on dialogue as a means to development, participation also emphasises local needs, local solutions and the locally lived experience (Servaes, 1999). Melkote and Steeves (2001) notes that local knowledge has often been undervalued by those in power. Where this has been the case, and sub classes have been rendered voiceless, participation allows individuals to voice and to meet their own needs (Servaes, 1999). Through involvement, participation can build the confidence of a community and increase its sense of collective efficacy.

Four key identifiers of participation are (1) voluntary involvement in the project (2) involving shared decision making (3) including participation at different levels and (4) ultimately aiming to improve the well-being of the participants (Narayanasamy, 2008). The notion of people-centeredness is at the core of most definitions about participation, and gives rise to a series of debates regarding ownership, appropriateness and commitment. As a people-centred approach, participation is limited by all of the problems and tensions that people bring with them.

The limitations of a participatory approach

While participation is the preferred paradigm for current development programmes, Servaes (2007) criticises it as being a poorly defined and idealistic notion that is often difficult to put into practice. Until scholars and practitioners are in agreement as to what the boundaries of participation are, and what does or does not constitute participation, this argument will remain. Ascroft and Masilela (2004) and Waisbord (2003) suggest

that the concept exists mainly in the literature of academia and not in applied development experiences.

Further to this, Cleaver (2001) criticises the heroic claims made for participation, and suggests that there is little evidence of the long-term benefits of such approaches. As a self-proclaimed egalitarian approach, participation tends to be discussed with a certain amount of moralising. Cleaver suggests that most of the arguments for participation are thus based on “assertions of rightness” and not on convincing evidence (2001:786).

Based on a range of humane philosophies it can be understood why participation is seen as the ‘right’ approach. However, Cleaver asserts that this involves the imposition of ideas of ‘rightness’ into communities. If this is the case with participation, then it can have no claim to be any ‘better’ than modernisation and other paradigms of development communication which impose a particular worldview onto less developed groups.

There are some genuine concerns regarding the ‘participation at any cost’ dogma from a number of scholars who caution that there are limits to the participatory approach (Chin, 2006; Waisbord, 2003; White, 1994). These scholars recognise that participation is not always the appropriate solution to a development issue. Furthermore, there are a number of challenges to the implementation of participation. These include the lack of a clear definition of what participation means, the conflict that it can cause in communities, the difficulty in replicating or up-scaling successful participatory projects, and the need for flexibility on the part of the catalyst organisation and a long-term commitment of both time and resources to the project.

As participatory approaches have become more popular and are used by governments and other agencies with vested interests in developing specific communities, Cleaver (2001) suggests that the radical transformational power of participation is lost. Participation does not always guarantee development and an improved quality of life.

Some of the debates that accompany discussion on the participatory paradigm are elaborated on below.

Participation, power and conflict

Participatory approaches call for equal access, dialogue and power-sharing, and as such may challenge customary beliefs and power structures, creating unrest in a community. This creates the potential for crises faced by the experts and those who are in power. Genuine participation means that everybody involved must be “open, flexible and continually willing to learn” (Boon and Plastow, 2004:3), and this can undermine the status of experts and authority figures.

Participatory practices are in essence subversive of institutions of power. Participatory practices are anti-dogma and encourage resistance to what Boon and Plastow (2004) term ‘doctrinate thinking’. While the more radical proponents of participation could argue that this is indeed the point of participation, participation may disrupt the status quo to the point that it hampers development. This disruption not only has an effect on the governing structures of a community, but may also have unintended negative consequences for the participating individuals in repressive environments, where those in power may view the project participants as trouble-makers and deal with them accordingly.

The playing out of local politics and religious opinions has the potential to “contradict and cancel out communication efforts toward people empowerment” (Cadiz, 2005:157). These local dynamics can cause factionalism and tensions within the participatory group itself and can derail the entire process.

Community, identity and participation

The question of the group versus the individual often arises in the literature about participation. Freire’s pedagogy evolved out of a context of group empowerment and mobilisation where the focus was on individuals negotiating a collective, shared understanding of oppression in order to overcome this. As such, any discussion on participation and development necessarily involves discussion about the people who make up the target group or community that it focuses on.

Myths about notions of 'community' dominate current practice (Cleaver, 2001). Practitioners and development scholars may assume that identifiable homogenous communities exist, despite recurring evidence of the shifting and subjective nature of groups.

It is important to remember that "community" may be used as a definition of exclusion as well as inclusion, that associating concepts of responsibility, ownership and social cohesion with local entities (which may draw on religious, ethnic and locational differences in definition) is not necessarily compatible with the universalising of equality or with the rights of particular individuals.

Cleaver, 2001:796

Identities and contexts of recognition are constantly changing as individuals and the world around them change (Hall, 1997). Individuals within any community may feel more or less similar or different to others in the community at any time. If these feelings of difference are not taken into account, the development agent may ignore pre-existing issues of conflict, negotiation and exclusion within the community.

Issues around culture and community play into dynamics around identity, inclusion and exclusion. Where the development agents do not take local dynamics around culture and community into account, they may assume that a project will promote equality and development, which might in fact be hampered by local conditions. Without a good understanding of the sense of community that is generated from within the group, participation may favour the dominant groups within a particular community while the previously marginalised remain on the outside of development.

How the group view themselves as a community, and how they attach value to this and to their cultural practices may also have an impact on development. Cultural identity may also be seen as the bonding agent that keeps a community together. This may help or hinder the development project, depending on whether the community groups together to support or to reject the project. Cultural practices can at times be a restraint or barrier to development, for example in patriarchal societies, where women may be discouraged from participating or taking leadership roles in certain projects or activities.

Building consensus within a community is vital for collective decision-making and resultant action (Narayanasamy, 2008). Where a group identifies itself as a community for the purposes of a development project, achieving consensus may be easier. However, where a community is divided by any number of factors, that could include race, gender, age-group, religion and so on, then consensus may be more difficult and time-consuming to achieve.

Participation, motivation and personal risk

To encourage participation, individuals need to feel that they have a stake in the process of the development programme, and that the outcomes will be of some benefit to them both individually and as members of the group.

Participation cannot be imposed: it should be a voluntary activity. It is generally assumed that if an issue is of relevance and significant concern to community members, then participation is likely. Many participatory projects are conceived on the premise that people are social beings who act in the interests of the community as a whole. However, this assumption does not take into account personal circumstances and psychological motivations.

Development is a psycho-social process that depends on the initiative coming from 'within'. Narayanasamy (2008) refers to this initiative as both from within the community as a whole, and from within each individual. There must therefore be a motivation for individuals to participate in a project, and for the group collectively to participate. Cleaver (2001) calls for an evaluation of the costs and benefits of participation for individuals for every project, and suggests that this should be measured against the concepts of choice and volunteerism.

There is a price for local community members to pay for becoming involved in participatory projects (Chin, 2006). There may be personal risk involved in terms of a repressive backlash, as mentioned above. A less sinister cost is that of the time invested in the project by individuals. There is often an assumption that people living in undeveloped communities have little else to do with their time, and welcome the opportunity to be involved in such projects. However, Chin asserts that participants "may

be foregoing more productive activity if the participatory process does not lead to benefits, either in the long or short term” (2004:4).

The time-consuming nature of participatory projects may therefore hinder participation and ultimately be counter to development. Following this, it should be recognised that time spent involved in the project does take the community members away from other chores and opportunities to get on with their own development.

Cultural norms, household divisions of labour, and other social structures may also determine who participates in projects. These factors raise critical questions regarding “personal agency and the power of structural constraint” (Cleaver, 2001: 795).

For participation to be encouraged, then, inhibiting factors, such as threats of punishment for participation, perceived time-wasting and other distractions must be acknowledged and preferably eliminated from the environment. Personal motivations for participation should be acknowledged and it should not be assumed that a sense of ‘communal good’ is enough to draw people into participating in development projects at any cost. Incentives for encouraging participation may need to be introduced, however, this could then be construed as manipulation and ‘buying off’ the community’s good will.

Ways of participating

There are a number of different processes in which a community can participate in a development project. These are generally identified as: participating in the decision-making processes of the project, participating in the implementation phase of a project, participating in the benefits of the project, and participating in the evaluation phase of the project (Uphoff, 1985; and Chin, 1996).

It is recognised that participation at all stages in a programme does not have similar relevance. Very few participatory development projects include full partnership with the target community and participation in all four phases. In cases where decisions are made outside of the community, but the community is actively involved in the programme implementation, participation is limited to instances that depend on the

imposed decisions. In such instances, the community can be seen to be beneficiaries of the project rather than partners in the project.

If community members are involved in the decision-making processes of a project from start to finish, then the project can be said to be truly participatory. Chin (2006) suggests that participation in implementation; benefits and evaluation of a project are in fact 'false participation'. Because of the many different layers and levels of participation, a number of projects that purport to be participatory may in fact simply be imposed interventions indicative of the modernisation paradigm. These imposed projects are simply whitewashed with participatory practices.

These criticisms come from a rather purist view of what constitutes participation, and do not allow that participating even to a small extent in such projects may have benefits for the participants. Peruzzo (2005) suggests that if the project is rooted in democratic practice then participation at any level can be desirable. My own research (presented in later chapters) supports this assertion, noting that even minimal participation can have worthwhile consequences for the participants. A more detailed exploration of different levels of participation follows.

Levels of participation

One of the key debates in the development field is around who participates, how, and to what extent. Sherry Arnstein (1969) introduced some of the early debates around genuine empowerment and dressed-up manipulation, and developed a 'ladder of participation' to illustrate different levels of what she terms "citizens' power in determining the end product" (1969:216). In devising this ladder, Arnstein equates the notion of participation with that of power.

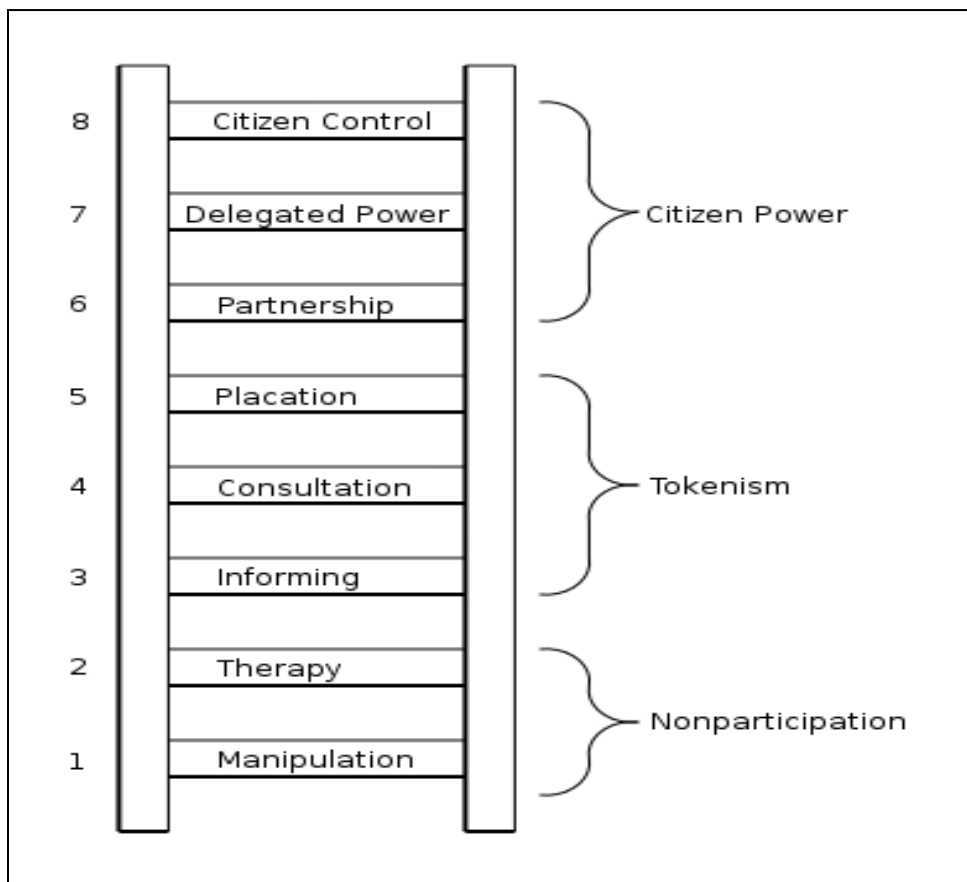
It is the redistribution of power that enables the have-not citizens, presently excluded from the political and economic processes, to be deliberately included in the future. It is the strategy by which the have-nots join in determining how information is shared, goals and policies are set, programs are operated, and benefits ... are parcelled out. In short, it is the means by which they can induce significant social reform which enables them to share in the benefits of the affluent society.

Arnstein, 1969:215.

The distinction between the haves and the have-nots is particularly relevant in the context of South Africa where there are marked class and race differences that have been accentuated through the apartheid era. As discussed in previous chapters, development efforts in South Africa are predominantly focused on those without power and wealth in an otherwise relatively healthy economy.

Arnstein's ladder has been revised by a number of scholars to suit their particular purposes. Perhaps the most widely known is Roger Hart's (1992) 'ladder of youth participation' that is widely promoted by UNICEF. A number of contemporary scholars in the field of communication for development studies also explore different levels of development (Cadiz, 2005; Chin, 1996; Uphoff, 1985). However, for the purposes of this exploration, it is useful to return to the original ladder devised by Arnstein, who devises eight discernible levels of participation.

FIGURE 1: LADDER OF PARTICIPATION (ARNSTEIN, 1969)



Non-participation

At the lowest rungs of the ladder and the least participatory levels sit what Arnstein terms *manipulation* and *therapy*. Arnstein suggests that there is no value in these for the project participants, and that their real objective is “not to enable people to participate in planning or conducting programs, but to enable power holders to ‘educate’ or ‘cure’ the participants” (1969:218). This is typical of the modernisation approach to communicating about development, and to health education. When participation is at this level, the fundamentals of participation are ignored, and this process is simply a “legitimisation of non-participatory approaches” (Bessette, 2004: 18).

At this level, participants do or say what the development agents suggest that they do, but do not have any understanding of the issue that affects them (Hart, 1997). As such, participation becomes a form of rubber-stamping by the local community, and may simply be used as good public relations for the development agent. It may also allow the catalyst organisation to gain access to an area, or to benefit from the project in other ways. Private companies may become involved in development work for kudos, tax relief or even financial gain, and unless this is fully disclosed to the target community, this is an example of manipulation. Chin (2006) recommends that for this manipulation to be avoided, all the information and facts regarding the project and its potential must be made available for the community so that they can take their own informed decisions regarding the project.

People may easily be manipulated or coerced into participating in development projects. This manipulation may be planned or unconscious. The extent to which any project can be truly participatory is questionable when donor funding determines specific outcomes, and ‘expert’ western knowledge and solutions are seen by both the donors and the community as more valuable and appropriate than traditional cultural beliefs and practices.

The intervention catalysts may approach a project community with a different world view and a particular view of oppression and may unconsciously impose this on the community (White, 1994). Even participatory catalysts are ‘experts’ and as such may be

treated with deference by the community who are influenced by the concepts of oppression and consciousness introduced by these outsiders.

At the second level of Arnstein's ladder, and also described as non-participation is the concept of *therapy*. NGOs and other catalyst organisations may use this approach because they feel that it is in the best interests of the community and that development initiatives are 'for their own good'. This approach is common in HIV and AIDS interventions, reminiscent of the modernisation paradigm of development where outside experts 'know better'. Arnstein is extremely critical of this approach, suggesting that it is arrogant and dishonest, and that development agents equate powerlessness with mental illness.

What makes this form of "participation" so invidious is that citizens are engaged in extensive activity, but the focus of it is on curing them of their "pathology" rather than changing the racism and victimization that create their "pathologies."

Arnstein, 1969: 210.

Tokenism

Tokenism generally involves a symbolic gesture of recognition and in this case power-sharing, but is essentially a substitute for the real thing, and is a false gesture. *Informing* is at level three of the ladder, and Arnstein suggests it is indicative of tokenism, where information is offered to the supposedly participating community. While it is recognised that information is a vital step of any development project, at this level, information most often takes the form of monological one-way communication from the development agent to the recipient. This is contrary to Freireian notions of dialogue and development.

Involving the community in a project that has been pre-determined (by the donors or other agents) can be seen as an example of this kind of tokenism. Guy Bessette (2004) argues that where the development agents have already decided on the issue of exploration, then community participation is not genuine. In these cases, participation is

used as a strategy to advance either research of the development project itself, rather than the target community.

At level four Arnstein cites *consultation* as another form of tokenism. Although she recognises the importance of consultation and dialogue in the participation process, she states that unless this is coupled with other forms of participation, there is no guarantee that the opinions of the participants will be taken into account. In these instances where decisions are taken by those outside the community, the project will not be empowering or sustainable.

At the fifth level of *placation*, Arnstein mentions the hand-picking of selected individuals to be involved in decision-making processes. At this level, the community have the power to advise the programme, but the outside agents still retain the right to make decisions on the process. Hart (1997) sees this rung as a level where community participants are informed about the project, and assigned particular roles which they themselves have not chosen.

At these three levels, there are parallels to the diffusion of innovations approach proposed by Everett Rogers in the 1960s and refined over a number of decades. Diffusion is concerned with the communication of ideas within a social system (Ascroft and Agunga, 1994). These ideas are generated from outside the community and then dialogue is encouraged within the community to spread these imported ideas.

These three tokenistic levels of informing, consulting, and placating potential participants from a community may encourage a certain amount of dialogue, but participatory decision-making is not part of these processes. The impulse for development still comes from outside the community, and control rests in the hands of the change agency.

Many strategic communication campaigns in the development field fall into this category of tokenistic participation. Terms such as 'potential partners', and 'gate-keepers' point to practices of persuasion and coercion where participation is pre-designed and planned by the outside agency. In these instances, the target community are simply expected to participate in the implemented project and perhaps benefit from it.

This creates a false type of dialogue, criticised by Kincaid and Figueroa (2009), who call for a new model of communication for participatory development that is based on genuine dialogue, information sharing, mutual understanding and agreement, and collective action. This calls for greater co-operation between groups, and takes us to a higher rung on the ladder, where *partnership* is more indicative of genuine participation.

Citizen power

At the sixth level, *partnership* on Arnstein's ladder, both the development agent and the target community share responsibilities for decision-making, planning, implementing and evaluating the participatory project. Arnstein suggests that "power is in fact redistributed through negotiation between citizens and powerholders" (1969: 212). This power can, however, only be handed over if there is an organised power-base in the community with access to resources. In extremely under-developed areas, these resources may not exist, and this is where we see the potential for the development of undemocratic structures that mimic the bureaucracy of the government and development agents.

This 'institutionalism' sees the creation of community structures that manage and channel the process of participation in a predictable way, and that become exclusionary and promote subordination and other essentially un-participatory practices (Cleaver, 2001). Participation driven in this way from only certain quarters within a community can result in development being for gain rather than for the good of the community as a whole (Kerr, 1995).

The notion of shared responsibility means a shift in the viewing of target communities as *beneficiaries* and rather a viewing of them as *partners* (Bessette, 2004). To encourage this sense of ownership, target communities should contribute something towards the project, and not rely solely on the resources of outside agencies.

Partnerships and power transfer may be seen to be the ideal in participatory projects, but they are not easy to implement and come with their own set of problems. Arnstein suggests that altruistic development is not common practice, as "those who have power normally want to hang onto it; historically it has had to be wrested by the powerless rather than proffered by the powerful" (1969:213). This then gives rise to some of the

debates mentioned earlier regarding the non-democratic and exclusionary nature of local structures.

At level seven, *delegated power* is less often witnessed than the power-sharing of partnership. At the eighth and highest rung of the ladder, and therefore the most desirable outcome of participation is *citizen control*. Arnstein recognises that total control by the community group is not possible, however, she suggests that the intent should be that:

The citizens can govern a program or an institution, be in full charge of policy and managerial aspects, and be able to negotiate the conditions under which "outsiders" may change them

Arnstein, 1969:214.

Arnstein suggests that the most important step to achieving this is removing any intermediaries between the community group and the source of funds. At this level, Hart (1997) suggests that the community then has the space and resources to generate their own ideas for project, to set these up and then to invite the catalyst agent, if necessary, to be part of the project.

Progressing up the ladder towards a perhaps idealised notion of citizen-power may be a difficult task. Hart's ladder of youth participation is slightly less radical than Arnstein's representation, and calls for more involvement of the catalyst (in his case, adults) in shared decision-making. This may be a more applicable solution in the development context, as it is unlikely that donors would happily hand over funding entirely to unproven communities without a track record of managing their own development projects.

For the purposes of this study, I explore participation in theatre projects and processes, which can take a number of different forms. Essentially, people can participate in the making of theatre, the performance of theatre, and the reception of theatre. As these processes are at different levels on Arnstein's ladder, they will have different effects and consequences for those participating.

Participation in TFA: just how participatory is theatre practice?

While participation is a much bandied-about concept, there is ongoing debate about what is participatory and what is not. Participatory theories are elaborated at a theoretical level and do not provide specific guidelines for interventions (Waisbord, 2003). This leaves the practitioner, along with the community, to decide how participation should be implemented. Participatory theatre projects for HIV and AIDS can be at a range of levels, and these are discussed below.

Participation in decision-making activities

Project participants can be involved in all aspects of decision-making about TFA projects, which includes decisions regarding the goals for the development project, the medium of the project (whether performance is the best vehicle for the project), determining the content and messages of the development project, and determining who participates in the project. This involvement is indicative of a genuine partnership between the implementing organisation and the community, and is not often realised in TFA projects.

Participation in decision-making about the use of the form of the theatre

Participation in participatory projects cannot be imposed, but is a voluntary activity. In schools, work-places, and prisons, theatre is often presented as a compulsory activity, and the element of choice is not available to the participants. Theatre is often introduced into a community by the outside intervention team, and the decision to use theatre has been made by the funders or project team, and the community audience itself is seldom included in this decision. This may be a result of the fact that theatre is seen as requiring 'expert' knowledge.

There has been criticism of this practice as 'cultural engineering', where the local cultural practices are harnessed by outside agencies. Instead of outsiders using the local culture, cultural mobilisation should be seen to be in the hands of the community itself, where local communities are encouraged to "revitalise their own cultural forms, in order to understand, negotiate, and promote social innovation and change" (Kerr, 1997:68).

Participation in the process of creating the script and the content of the theatre

Where theatre or development companies engage with a community and impose HIV and AIDS as the topic for the theatre intervention, then this removes another element of choice for the participants. Although HIV and AIDS are prevalent and an issue of concern for many South African communities, this may not always be the primary issue of concern. Malibo (2008) finds that community groups preferred to address cattle theft and other instances of crime and unsanctioned behaviour rather than the issue selected by project organisers during an HIV and AIDS project in Lesotho.

However, if an issue is of relevance and of significant concern to community members, and participants can clearly identify a problem, draw links between it and themselves, and see the possibility for solutions, then participation is more likely. Where the participants choose their own content for theatre interventions, it is likely that the end result will be more relevant to the audience and have a greater impact.

Because understandings and beliefs about HIV and AIDS are generated at a local or micro-level (Parker et al, 2007), solutions should also be generated at this level. Lynn Dalrymple (1997) argues that it is particularly useful in the case of the HIV and AIDS epidemic, to tap into locally produced knowledge and to allow people to speak for themselves about their experiences, problems and solutions through theatre.

Participation in the audience watching a performance

Participating in a project as an audience member only is the lowest level of participation in a theatre project. However, exposure to the theatre performance can have a profound effect on the audience. Thomas Tufte (2003) argues that television audiences can identify with plot and character and that the characters' stories validate the stories of those watching them. A similar process can happen for those watching theatre, where audiences identify with the behaviours and choices that they see, and can choose to emulate or reject these. The theatre performance can provide a way of modelling the behaviour change that is sought. However, where this change is proposed by the outside intervention team, this becomes a practice of modernisation and may not always be acceptable to the audience.

Participation in the performance as a performer

Many participatory theatre projects, such as the examples of DramAidE and SACTWU mentioned earlier, involve the target community in performance. This participation, often known as *process drama*, takes the performers through a transformational experience that may have a profound impact on both the performer and the audience (Schechner, 2002). While this process may result in behaviour change for these performers, the end result of the theatre may have a less profound impact on the audience. Alex Mavrocordatos (2003) argues that there are times where this kind of participatory performance has a 'home-movie' effect, where only those who are related to the performers are affected by the performance, and other audience members are left unmoved. To counter this, he argues that the performers must be polished and present believable characters and situations that engage and move the audience.

Participation in discussion following the performance

EE theory argues that some kind of prologue is an important part of any intervention, in that it summarises the learnings of the intervention and reiterates the call for action (Piotrow *et al*, 1997). This prologue could provide clarification for the call for behaviour change. Discussion following a performance can allow audiences (or performers) to discuss the problems and solutions that they have seen on stage and explore how these are applicable in their own contexts. This kind of participation could be the link that has been missing in many theatre interventions.

Post-performance discussion can allow for a more detailed exploration of the need for behaviour change and the challenges that may be faced in bringing about this change. It can provide an opportunity for community members to negotiate what they mean by change, and how they can access the resources necessary to make change happen. I would argue that a well-facilitated discussion can be a powerful way to encourage participation and ensure that all audience members are engaged in actively thinking about behaviour change.

Participation in action and activities following the performance project

Follow-up activities can also engage the theatre audience and other community members directly in the process of thinking about change. When used as a means to bring about awareness of HIV and AIDS, TFA interventions are often once-off performances. Where the performance happens in isolation, the audience is often not empowered to make the desired behaviour changes.

Involving the target group in post-performance activities surrounding the theatre project may build participants' self esteem and give them assertiveness skills to be able to cope with peer pressure and bring about change in their own behaviours. The claim that participants in participatory theatre projects learn such essential life-skills is supported by a number of authors (Bolton, 1985; Jackson, 1993; Dalrymple, 2006).

Theatre that is combined with ongoing training and information, increased access to services that support behaviour change, and a concerted effort to keep these issues top-of-mind in the community is more likely to succeed in promoting long-term change. The theatre itself serves to inspire individuals, and to be a public showcase of the possibilities of change, whilst other activities support this initial intervention. This idea of integrating theatre into other long-term programmes should become a best-practice model adopted in the field.

Participation in evaluating the project and its impact

The participatory paradigm calls for the inclusion of those who are traditionally voiceless. As primary stake-holders in the project, the target community should be included in monitoring activities and in evaluating the theatre project. Ailish Byrne (2007) argues that evaluation must be seen as part of the project process, where participants are encouraged to "ask their own questions, share experience and learn from each other on a more equitable basis" (2007: Section 2).

This involvement in the evaluation process can further build commitment and investment in the project by the community. Encouraging this participation in evaluation allows a bigger picture of the project by drawing on different ideas and also in deepening the

understanding of the local community about the project and the process of change. This can build a sense of ownership and ensure that projects are sustainable for a greater period. Keeping records and documentary evidence of these projects within the community can further enhance this.

A scale of participation for theatre

Informed by Arnstein's (1969) ladder of participation, and Gumucio-Dagron's (2001) table of participatory versus non-participatory communication, I have developed a scale of theatre participation for use in this study, and hopefully as a useful guide for other practitioners.

At the first and least participatory level, participants are merely spectators of a performance that is created and performed by catalysts from outside the community. This is an example of top-down vertical communication from outside the community designed as a persuasive tool to change behaviour within the community, and could be seen as manipulative.

At the second level, participants from the target community are selected to appear in performances based on scripts that are written by the intervention team. While this involves some participation, it may be seen as being tokenistic, as there is no apparent dialogue or negotiation of the performances that are presented.

At the third level, participants are selected to appear in performances in which they have some input. While this does involve some dialogue and participation, it is suggestive of mere consultation and does not appear to encourage genuine dialogue.

The fourth level sees participants selected and trained in issues about which they then create performances. While raising questions regarding who selects the participants, and who determines what issues are covered in the training, this participation does involve the community at a greater level of decision-making.

At the fifth level, participants make recommendations about the content of performances which are then written by the intervention organisation. While this involves outside

experts with technical knowledge of theatre creation, it relies on the local community for content, and therefore involves them in developing their consciousness and voicing their own needs.

A more democratic version of this participation can be found at the sixth level, where performances are created together, by the local participants sharing decision-making with the intervention organisation. The project at this level is still, however, driven by the catalyst organisation.

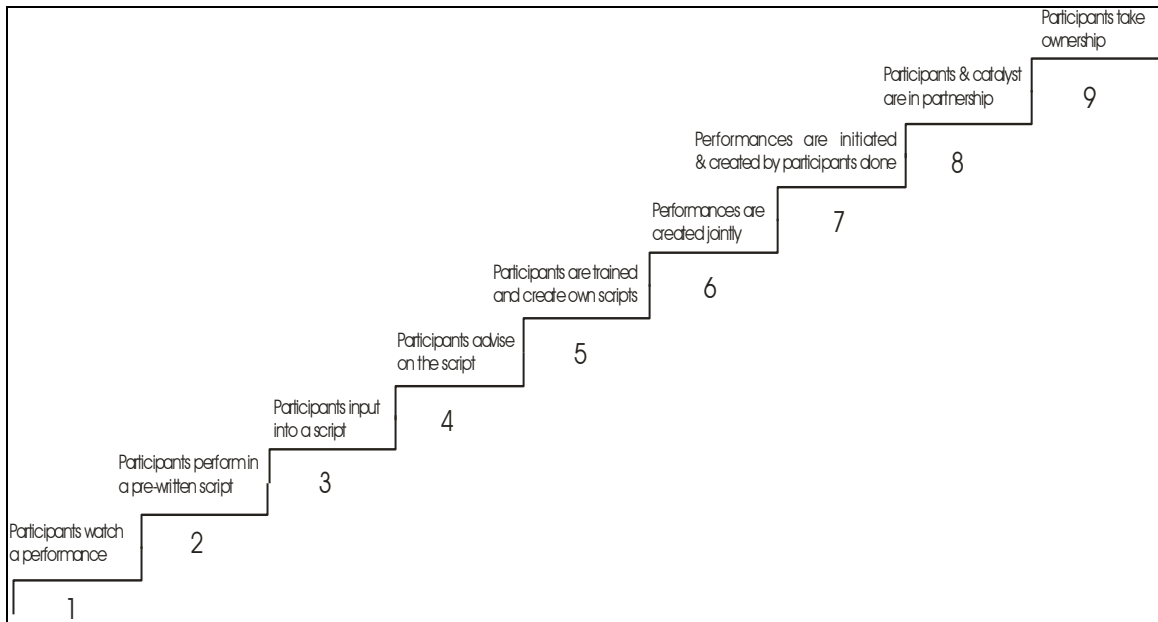
At the seventh level, we find performances that are initiated and created by the community participants and all decisions made by the group on their own. However, Mda (1993) cautions that this type of community generated theatre does not include the optimal level of intervention required for the development of critical consciousness, and may not necessarily result in empowerment.

Participation at the eighth level sees the target community group and the catalyst organisation are in full partnership regarding all aspects of the project. While Arnstein (1969) describes this participation as power-sharing, and an optimum achievement, partnership is not always a viable option where outside catalyst organisations may have other funding priorities or move to work in other areas.

This situation calls for a ninth level of participation, where the target community group initiates performances and creates scripts in consultation with the intervention organisation. This would be the goal of long-term sustainable theatre projects, where the community takes ownership of the project, but retains links with the catalyst organisation for advice and support. This may result in greater empowerment for the community group.

Working at this level, and creating genuine partnerships with community groups may facilitate greater change for participants, and provide some solutions to the problems encountered in theatre for development initiatives, particularly with relation to HIV and AIDS issues.

FIGURE 3: LEVELS OF THEATRE PARTICIPATION



While there may be those who caution against the simplification of participatory processes into a coded model, I like the structure that Arnstein’s ladder proposes, even if this is just as something to measure so-called participatory practices against. Arnstein herself cautions that this ladder is a simplified typology that does not cover all of the nuances of participation, and that “in the real world of people and programs, there might be 150 rungs with less sharp and ‘pure’ distinctions among them” (1969: 216).

In my own study, I present three case studies and examine each intervention to investigate levels of participation in the potential that the projects have for bringing about empowerment for the participants.

CHAPTER 8: RESEARCH DESIGN AND PROCESS

In this chapter I will describe the research approach that informed my study and a justification for using both quantitative and qualitative research methods for data collection. The chapter includes some discussion on the drawing up of the questionnaires for the practitioner survey and for the interviews with the respondents in the selected examples, as well as the limitations of the research design and challenges encountered during the field-research phase.

A note on research in the post-modern era and self-reflexivity

Research in the field of theatre and drama is conducted to better understand current practice (Somers, 1996). My research is a reflection of a survey of 34 TFA practitioners and three case studies in an attempt to better understand the practice of participatory theatre for development in the field of HIV and AIDS communication in South Africa in 2010. My investigations cannot hope to find significant answers to all of the questions raised in the previous chapters, but can provide a subjective view of the phenomena under study in an attempt to provide some insight into current TFA practice and to inform future practice.

A post-modern approach to research involves questioning concepts of truth and reality, which are constructed on the basis of our cultural background, and as such can be subjectively interpreted (Gribich, 2004). Gribich suggests that claims to valid knowledge are subject to negotiation by those with differing perspectives. As the sole researcher for this study, I am in a position of power where I assert my own interpretation of the data that is gathered, and propose that my findings are valid and 'real'.

Besides recognising the subjective nature of my interpretation of the data gathered, it is important to note that the data itself comes from a subjective source, where each respondent may have a different perspective on the topic and may have reflected their own individual realities according to differing perspectives of what is 'true'. Collecting a variety of different perspectives, as I have done through my research, does not guarantee that as a researcher I come any closer to a common 'truth', but it does

provide a diversity of views from which I can search for similarities and patterns, and draw my own conclusions.

What I present in my findings is a subjective reflection of my own interpretation of the collected subjective data. These findings are open to interpretation by others, and I have provided a detailed description of my research approach, so that the source of my data collection and the processes of analysis and interpretation are transparent and open to criticism.

While outlining the research process as accurately as possible in an attempt to prove the validity of the research, questions remain about the veracity of the conclusions that are reached. Susan Booyesen notes that “survey findings do not present either eternal or universal truths” (2003: 127). Further to this, Gribich (2004) points out that the notion of truth as bound by both time and context is a factor in the post-modern research era that is limited by how the researcher and the respondent construct and interpret reality. Although I have attempted to ensure the validity and reliability of this survey, the results are only valid at this point in time in the context of TFA practice in South Africa, as interpreted by myself.

It is common practice in social research that the researcher is conscious of his or her role and impact on the research (Gribich, 2004). It is therefore fitting that I acknowledge my own background. I am a consultant and published author in the field of TFA. I am also a partner in the PST Project, a theatre company that creates and implements theatre-based interventions for a wide range of companies and organisations. In my capacity as a partner in the PST Project, and in my capacity as a consultant to other organisations, I have worked on all three of the case studies that are investigated in this research. A more detailed account of my role in each of these three projects is described in the chapters that follow.

Proving that these projects have been successful in meeting their outcomes is important to me as a practitioner. However, this is not the motivation for conducting this research. Rather, I hope to find ways to improve the work that I do by exploring some of the questions that commonly dog practice. The research allows me to be critical of the three

case-study projects that I have focused on, and to measure them fairly against the criteria defined by the parameters of the enquiry.

As well as being involved in each of the case study projects, I also have a professional collegial relationship with some of the survey respondents. However, as this survey was anonymously completed, I do not anticipate that this connection will have influenced the results. Where I think that there may have been issues of bias and influence that have impacted on the data collected or coloured the outcome of the research findings, I have noted these at the end of this chapter.

Description of the research approach

This research is essentially descriptive, allowing me as the researcher to describe, analyse and interpret the phenomenon of participation in this work. The research includes elements of both the quantitative and qualitative paradigms.

The quantitative element of my research involves a field survey which uses standardised measures to understand the broad field of TFA practice. Generally speaking, quantitative studies are part of an *objectivist* tradition where data is collected as a way of proving the hypothesis of the researcher. The quantitative research paradigm emerges from the pure sciences and is based on the notion of scientific objectivity, which proposes that the researcher can derive knowledge through empirical study from a distance (Myers, 2000).

The qualitative paradigm allows for closer study of a particular reality through three case studies, with more detailed interpretation and divergent readings of the outcomes of the research, and is more commonly associated with social science research. Qualitative studies arise from a post-modern *constructivist* approach, where knowledge is “not discovered, but invented” and is context specific (Rudestam and Newton, 2001:47).

Combining qualitative and quantitative approaches to research can be beneficial, as it combines the precision of quantitative data with the depth of qualitative data (Rudestam and Newton, 2001). These two processes can complement each other and provide richer data. Although I have not set out deliberately to triangulate the data collected through these different methods, the multi-method approach does increase the reliability

and the validity of the collected data by allowing in-depth examination of the issues emerging in the quantitative study through phases of the qualitative study.

While this approach is not often utilised, there are a number of benefits to integrating data collected through different methods. Claire Wooley suggests that this integration comes about when “components are explicitly related to each other within a single study and in such a way as to be mutually illuminating, thereby producing findings that are greater than the sum of parts” (2009:7.)

I hope that the qualitative methods that I have selected will shed light on the data collected in the quantitative survey, and that the quantitative data collected will similarly allow a greater understanding of how the case studies of the qualitative study compare to general practice.

The decision to take a mixed-method approach to the stages of data collection and analysis in any research is driven by the need to answer the research questions in the best possible way. I have chosen to integrate both quantitative and qualitative methods by making use of a survey, personal interviews and focus group discussions.

In this thesis, a quantitative approach is taken to explore the current state of participatory TFA practices in South Africa, where as the researcher I am distant from the researched subjects. Myers (2000) suggests that measuring and quantifying phenomena allows the researcher to draw inferences about a larger system from analysing its smaller parts. Based on this empirical study of the practices of other TFA practitioners, I hope to be able to generalise and to draw inferences about current practice in the field at this particular time.

More in-depth qualitative research methods are used to investigate the examples of three participatory theatre projects as case studies, where as both a researcher and practitioner (having worked on all three projects) I am closer to the respondents and have greater opportunities to question and examine their experiences. Case studies provide an opportunity to examine participation in these projects in more depth. The data gathered through this approach will be compared with the general observations deduced from the quantitative study.

Combining methods from both approaches allows insight into “the what, and the how or why” providing a way to consider the structures and processes of things, “establishing relationships between variables and exploring the reasons behind those relationships” (Wooley, 2009:8). The qualitative data generated by my own research will be more detailed than that which is gathered through the survey, allowing an insight into ‘the how’ and ‘the why’, rather than simply what is being done in the field.

The collection of both sets of data and integration of the analysis should provide a substantial view of the current state of participatory theatre practice, its justifications and the challenges faced in implementing such projects. Through my analysis of this, I hope to expand on current theory as to why organisations working in the field make choices about participation, how they implement these choices, and how this impacts on the empowerment of those participating in their projects; ultimately creating a model for understanding participation in theatre for development in the field of HIV and AIDS.

Research goals

The previous literature review provides an overview of the field of theatre for development and experiences of practitioners in the field. The particular gaps noted in this body of work are the lack of information on how theory informs practice (Mda 2003), questions regarding what constitute empowerment and development, and how to encourage these through genuine participation in theatre projects.

Based on this background of prior study, the overall goal of my research is to examine the role that participation can play in theatre for development projects that focus on HIV and AIDS and how theories are implemented in practice.

Conceptual framework

The conceptual framework within which I am working is that of empowerment and development theory, as discussed in previous chapters. To ensure the validity of the research, it is important to work from the basis of a sound theoretical definition, and the previous chapters dealing with development and with participation attempt to provide this.

Research questions

The specific research questions that I explore include the following:

- 1: What is the current practice in participatory theatre?
- 2: How is this practice influenced by theory about development and empowerment?
- 3: How is participation envisaged by those who create theatre projects in the field of HIV and AIDS?
- 4: How are participation and empowerment experienced by those involved in the projects?

Research methods

This research makes use of multiple methods, including those from both the qualitative and quantitative research paradigms.

The first research question regarding current practice is explored using a survey of TFA practitioners. The influence of theory on practice is addressed through the practitioner survey and through interviews with programme managers of three specific TFA projects, which are selected as case studies for this research. The question regarding the envisioning of participation is also addressed through interviews with these project managers. The final question regarding the experience of participation and possible empowerment is explored through focus group discussions.

Ways of measuring

The analysis provided in earlier chapters has given rise to an understanding of measurements of participation and empowerment on which this research is based.

Participation

Both Arnstein's (1969) and Hart's (1992) ladders of participation are recognised as appropriate measures of participation in intervention projects (see Chapter 7). I have used these measures as a basis for a purposely-created questionnaire designed to

survey the practice of practitioners in the field of TFA. The definitions that both theorists propose have been translated into a series of questions that investigate the level of participation encouraged in the projects of a wide range of practitioners. These questions were designed around theatre practice, informed by the understanding of theatre as involving the essential elements of concept, script and performance, and participation in these processes.

The link between theory and practice

To measure whether or not TFA practitioners consciously apply theory to their work, the questionnaire includes questions regarding this.

Empowerment

The achievement of empowerment is measured in my research amongst the case study participants through matching their reported experiences against an analysis of the concept of empowerment as defined by White (2004). The research explores aspects of awareness, group process, and freedom of choice, as well as looking for key elements of empowerment, as defined by Naryan (2002), including access to information, inclusion, accountability and local organisational capacity.

Data collection and analysis

For this study I developed three research tools. These tools included a survey questionnaire to be used to interrogate what informs current practices in the field, an interview schedule for interviews with programme managers, and a guide for focus group discussions with programme participants, to allow for closer scrutiny of three case-study project examples. These two distinct processes of the quantitative and qualitative methods used are discussed separately below.

The quantitative study

The aim of quantitative research is to determine the relationship between things in a particular population (Hopkins, 2000). In this case, I explored the relationship between

theory and practice in the reported activities and employed strategies of contemporary TFA practitioners. My research is indicative of a descriptive research design, where subjects are measured only once in an attempt to describe the patterns and associations between variables.

The questionnaire

Surveys are useful to collect data from a targeted group of people about their opinions, behaviour, or knowledge (Tague, 2004). As an example of a survey, a questionnaire provides the opportunity for systematic observation of the selected sample of a population. Questionnaires are widely used in social research and are an appropriate method of research “if the individual is the unit of analysis” (Booyesen, 2003:129). In this research, a questionnaire is used as part of a quantitative analytical survey of the sample, designed to collect information directly from selected practitioners about their practice, in order to be able to make inferences about the field of TFA. I anticipated that the respondents would be experienced in their field and competent to answer questions about it, and thus selected a self-administered questionnaire as my research tool.

Developing the questionnaire

Content:

The questionnaire focused on the use of theory in creating TFA projects, and the relative *participatory-ness* of these practices. The analysis of participation provided in earlier chapters has given rise to an understanding of the measurement of participation, on which the questionnaire is based. Both Arnstein’s (1969) and Hart’s (1992) ladders of participation were used as a basis for the questionnaire. The definitions that both theorists propose were turned into a series of questions that investigate levels of participation encouraged in the theatre projects of a wide range of practitioners.

Some demographic information was required in order to understand the subject characteristics of each respondent. The elicited information questioned the status of the respondent, asking whether they were an organisation, a researcher, academic or a consultant practitioner. The questionnaire required them to state whether their practice

was in South Africa, in other African countries, or overseas, to provide an idea of the context for their work. A further question asked respondents to classify themselves as a theatre practitioner, a development practitioner or both.

Two further questions were included to provide a clearer context of the respondent's work. These included a question on the type of work most often engaged in (giving the options of scripted plays, 'work-shopped' plays, role play and improvisation, or drama games and activities). This question was designed to provide a pointer towards *participatory-ness*, because it is generally accepted that particular methodologies are either more or less conducive to participation.

A further background question interrogated the average duration of individual projects within one community or group, in an attempt to understand the potential for sustained TFA projects. Respondents were given the options of "one month or less", "two to six months", or "ongoing long-term projects".

This collected information provides some of the variables that may impact on the strategies that respondents use in their projects, and these are the relationships that I explore in my analysis of the collected data.

Style and format:

Questionnaires should be kept short and be easy to fill in with unambiguous questions (Burton and Steane, 2004). Tick boxes are preferred to open-ended questions, and if open-ended questions are used, this should be at the end of the questionnaire. The formatting should be checked to ensure that the questionnaire looks professional and is easy to read. This is particularly important for self-administered questionnaires.

My questionnaire was a five-page document laid out simply, with tick-boxes providing different options in a multiple-choice format below each question. The questionnaire deliberately used white space on the page so that it would be easy to read and not appear dense and intimidating.

Testing the questionnaire

Survey questionnaires should be pre-tested (Booyesen, 2003). The original questionnaire was tested on three TFA practitioners who are known to me as the researcher. All of these three people have some experience with academia and research, and were selected because of their understanding of both the practical and theoretical nature of TFA practice.

The questionnaire was emailed to these three practitioners who were asked to fill it in as any other respondent would, to allow me to check whether the type and quality of data that I was looking for in my research would be elicited. As a separate exercise, the three test respondents were asked to comment on whether the instructions were easy to follow, on the simplicity of the questions, and on the clarity of the questionnaire format.

The feedback from these respondents included three key areas for attention. One comment received was that the questions were not contextualised, and as such the flow of the questionnaire was difficult to follow. The second area raised was that the questionnaire was repetitive, and the third was regarding the use of the term 'target group', which the respondent felt was sometimes inappropriate and confusing, as it was a broad term which did not reflect the organic and ongoing relationships developed through such projects.

Improvements and alterations

In answer to the first issue highlighted about the questionnaire, that of contextualising the questions, I added to the introduction of the questionnaire to explain specifically that I was interrogating the link between theory and practice. I also changed the titles of different sections of the questionnaire, to make it more obvious as to what information was being sought.

Regarding the repetitive questions, I investigated the possibility of removing the second set of questions that were based on Arnstein's (1969) ladder of participation. Doing so would have lost data regarding some of the nuances of the nature of participation, and so I felt justified in retaining these questions. I did, however remove some of the

individual questions which did not reveal particularly useful data, and which were similar in content to earlier questions.

Regarding the terminology of the questionnaire, I changed the term 'target group' to read 'target community' as a more inclusive and broad term. In some questions I further simplified this to read 'participants'. I also added a question regarding the length of the projects, as this would make the nature of the project and the relationship between target community members and the project organisation more explicit. In one section of the questionnaire, I changed 'target audience' to read 'community participants' as the term 'audience' may have been misread to mean the *theatre audience*, rather than the community itself, which was what I was seeking information about.

In addition to this, a re-reading of the questionnaire showed that there was not sufficient data collected regarding the theatricality of the projects. An additional section was inserted, regarding the standard of theatricality and performance that was expected from the projects, and interrogating the balance between performance as a process and as a product.

The final questions were divided into two sections and given subtitles to make the line of questioning more obvious and to break up the questionnaire in an attempt to make it easier to read and fill in. The demarcation of different sections in the questionnaire signified to respondents that there was a change in theme for the questions. Grammar changes made to the questions and instructions to simplify the document further, and some formatting adjustments were made to make the pages neater.

The final content of the questionnaire was as follows:

SECTION A: About you

This section asked questions regarding the respondent's definition as a practitioner, researcher or organisation, their geographical place of work, the length of their projects, and the specific type of theatre activity that they made use of.

SECTION B: Applying theory in your projects

This section asked questions regarding the respondent's conscious or unconscious application of theory in their projects.

SECTION C: The specific use of theory

Based on the literature review, this section listed five key categories of theory that inform TFA practice, and asked respondents whether they applied these theories.

SECTION D: About the theatre

This section questioned respondents about the priority of the theatre product or the human process in their work.

SECTION E: About participation

This section asked respondents to select from a range of options including funders, their own organisations, gate-keepers in the community and community participants in a wide range of decision-making activities relating to their TFA projects.

SECTION F: Rationale behind the project and the selection of participants

This section asked respondents to explain the rationale behind their programme, which I hypothesise informs the level of participation in the project.

SECTION G: Involvement in the project by the participants

This section asked respondents to choose from a range of options describing how participants were practically involved in their projects.

See Appendix 1 for a copy of the questionnaire.

Sampling

Sampling involves the selection of members of a community as representatives of the broader community. Drawing a sample from that population is a way of saving time, money and optimising resources (Uys and Puttergill, 2003). It is generally accepted that the sample for investigation should be a cross-section of a community that reflects the general characteristics of the group, so that the research may be said to be valid. All of the possible variations of the group should be included in the sample to be truly representative.

The target population for this survey is practitioners and researchers in the field of TFA. Hopkins (2000) argues that the affect of the subject characteristics of a population can be limited by using a less heterogeneous sample of subjects, or by measuring these characteristics and including them in the analysis. To find a relatively homogenous population amongst which to conduct this study I identified practitioners of HIV and AIDS theatre (TFA) as the target group. The questionnaire was designed to note the particular characteristics of each subject.

In order to gain access to a wide number of TFA practitioners, I chose to conduct this research in person at the *Africa Research Conference in Applied Drama and Theatre* held at the University of the Witwatersrand in November, 2009. This annual conference has a particular focus on HIV and AIDS-related theatre.

The population or sampling frame from which respondents were drawn is therefore identified as the participants attending the conference. Approximately 100 participants attended the conference as regular registered attendees (there were others who were day visitors, but were not counted for this study). The conference attendees were a self-selecting sample of this population, invited to complete the questionnaire if they were interested in participating in the research.

For the survey, I identified one of the independent variables to be whether practitioners and researchers were theory-driven in their approach or not. As this information is not known without the respondents filling in the survey, I was working from the primary assumption that any large group of practitioners would include both academics and field

workers, who might vary according to their application of theory. My second assumption is that in a large enough sample, there would be representatives of many varying levels of participation-based projects.

Sample size

For a small homogenous population of less than 1000, a sample ratio of 30% is sufficient to provide an accurate account (Roussouw, 2003). As the target population for this study includes approximately 100 practitioners, the proposed survey size was set at 30 respondents.

Administering the questionnaire

I requested permission from the conference organisers in advance of the conference to be able to conduct the research. This was granted and I was given time on the first day of the conference to introduce the study to the group. I briefly discussed the purpose of the research, and asked people to collect the questionnaire from a box by the registration table if they were interested in participating (thus the self-selecting sample).

The conference was held over three days, and I asked people to collect the questionnaire at their leisure, and to return this to the registration desk when they had completed it. I followed up this instruction over the next two days, approaching random individuals at tea and lunch breaks and asking them to complete a questionnaire if they had time. I made myself available during break times to answer questions. This personal approach allows for a higher response rate and ensures that respondents can ask for assistance or advice when completing the survey (Booyesen, 2003). The questionnaire was not completed under the same conditions by all respondents, and respondents took varying lengths of time to fill in the questionnaire. This may mean that some respondents gave it more considered thought and time than others, affecting the quality of their responses, however, there is no way to measure this.

I found that there were no requests for clarification or assistance by those who filled in the questionnaire, although respondents were keen to discuss the issues that the questions brought up. Some respondents gave their comments on the questionnaire in

the open-ended section provided, with regards to how it related to their own practice, and these are reflected in the discussion on the results presented in the following chapter.

Value of completing the questionnaire

An introduction to the questionnaire explained that the purpose of the research was for the completion of a PHD thesis on participation in theatre for development projects, and that respondents who completed the questionnaire would be contributing to a better understanding of the practice. Respondents were also informed that the data would be available as a resource to all interested parties on the conference website. (This data has yet to be made available, pending the examination of this thesis).

Addressing subjects concerns

Respondents were assured that the questionnaire was anonymous and there was no cause for concern regarding privacy or protection.

Response rate

I had printed 50 questionnaires, and all 50 of these were taken from the box at the conference registration desk. Only 34 completed questionnaires were however returned, after continuous prompting in the plenary sessions of the conference. This shortfall may be because I left the conference shortly before the official closing, and respondents might have thought they could hand in their completed questionnaires at the end of the day. The conference organisers were asked to follow-up with any outstanding questionnaires. However, none were forthcoming. The end result was 34 completed questionnaires, which is higher than the original sample that I had hoped for.

Data analysis for the questionnaire

Collecting the data from the questionnaire involved two processes, firstly, manually collating the information and reading it for myself, and secondly, using the computer programme SPSS (Statistical Package for the Social Sciences), which is recognised as

being a useful tool for gathering and analysing data (Pallant, 2005). Using the programme involves some level of computer confidence as well as a basic understanding of statistics. As I do not have this background, I employed a research assistant conversant with SPSS to assist in this process.

Entering the data

The quantitative data collected from the field was captured in an SPSS database. This entailed designing the database after having coded the questions in such a way that they could easily be captured in the SPSS format. The database was designed by a research assistant with whom I spent time explaining the research, and what I was looking for.

The data base design involved defining variables for the research. These variables are the potential different responses that are elicited through the questionnaire, and are useful for understanding relationships and causality (Carling, 2001). The variables were identified to be whether theory is applied in interventions, and what theory this is, how participation occurs in these interventions, and who makes decisions regarding the interventions. It was anticipated that this information would allow me to find patterns and commonalities in the way that participation in TFA projects is conceived and implemented.

Some of the questions were designed for respondents to give a single response, while others allowed for a variety of options, in a multiple-choice framework. We assigned numerical values for each answer from each question completed. Positive responses were given the value (1) and missing responses were allocated a value (-2) which was not included in the analysis. Entering the data into the data-base involved typing in the correct figures for each case and variable.

Cleaning the data

The captured data was verified in order to ensure accuracy. As the primary researcher (and a second party), I checked the data for errors by reviewing the data from the set of

questionnaires against the SPSS spreadsheets. Data was also checked to ensure that all entries were within the correct range of columns and rows of the spreadsheet.

Understanding the data

The SPSS programme allows the researcher to choose a procedure for analysing the data. This involves deciding what kind of analysis you want to perform, and whether you want to produce a table or a graph. It also involves choosing variables to include in the analysis and distinguishing between dependent and independent variables. The variables for analysis are detailed in the following chapter.

Understanding these results then involves examining the graphs and tables generated through the SPSS programme, and exploring the relationships between the variables in an attempt to understand common practice better. This data is presented and discussed in the following chapter

The qualitative study

Using the qualitative research paradigm allows me as the researcher to actively and personally engage with the context of selected TFA projects, and to gather data from the participants and programme managers involved in the projects. This qualitative research was designed to allow insight into how the projects under study are envisaged, and how participation is experienced in these projects.

The qualitative element of the study involves a more in-depth analysis of the three purposely selected examples of participatory HIV and AIDS theatre projects, the SACTWU AIDS Projects' Sinolwazi Drama Club, the DRAMAIDE/DUT AAA-HA project, and the UVHAA Man-to-Man project. The selection is based on a purposive sample, where the sample is selected on the grounds of existing knowledge about the projects. This kind of sample is appropriate when a researcher wants to select unique cases that allow for deep analysis and are likely to offer specific information (Rossouw, 2003).

I have worked on each of these three projects, and enjoy an ongoing relationship with the three organisations, making each of them accessible for my research. I also knew

that the history and structure of each project would provide varied data appropriate for this study, and anticipated that the differences and similarities thrown up by this data would make for interesting analysis. Selecting three projects provides a broader view of different types of projects and how concepts of participation and development are played out in practice. Each project included two steps of data collection, one with the programme managers, and one with the programme participants.

Interviews with programme managers

I chose to interview programme managers of the three case study groups, as these are the people who traditionally make decisions about the projects, the selection of participants, and the use of theatre in these projects. These interviews were two-fold, making use of the questionnaire from the broader TFA practitioner survey, followed by semi-structured interviews.

In each of the interviews with the project managers, I asked the questions from the questionnaire and filled their responses in on the questionnaire. This was done to take up less time than the more time-consuming exercise of self-completing the questionnaires, allowing more time for other questions and discussion.

I selected semi-structured interviews with individuals for this component of the research, to elicit more detailed information about the key concepts of participation and empowerment. Less structured, conversational interviews allow the researcher to uncover data on beliefs and conceptualisations (Harding, *et al*, 1996). As programme managers and practitioners conceive of their work in different ways, it was important for me to be able to talk informally with individual respondents to understand their comprehension of the concepts of development and participation, and how they apply theory in their own projects.

Non-standardised interviews allow the researcher to be flexible, responsive and probing (Harding *et al*, 1996). This design allowed me to explain and clarify my own questions to ensure that the respondents understood what I was asking, and to ask additional questions to clarify the information given by respondents. The original interview questions centred on the selected goals of the project and whether these were achieved,

as well as the experience of participation in the project, and the potential for more or less participation from the local community.

See Appendix 2 for the interview schedule which was used as a guide for these interviews. Additional questions (not noted) were asked for purposes of clarification and elucidation, and are reflected in the data presentation where relevant.

I planned to conduct one face-to-face interview with each of the programme managers of the three selected case studies, between June and August 2010. For two of the studies, this was a single-person interview, but for the third study the interview involved four members of the management team of the project. This provided more depth and detail than would have been otherwise gathered, as each of the four individuals had been involved in the project in different ways, and had a varying perspective on the project.

The survey questionnaire was used as a starting point for each interview, and the responses were noted on the questionnaire. I then moved on to the broader interview questions and used a voice recorder for these interviews. The data was captured on tape, as well as summarised in my own notes taken during the interviews. Transcription of this data involved listening to the audio tapes and writing verbatim accounts of what was discussed.

Focus group discussions with programme participants

A focus group discussion was conducted with a handful of participants from each of the three case study projects. Focus groups provide an opportunity to collect data that provides “a collective viewpoint” or story of those present for the discussion (Clough and Nutbrown, 2007: 91). While there has been some criticism about the accuracy or representative nature of the information gathered through focus-groups, they are a useful tool for organising discussion around particular themes.

The questions for the discussions were designed around the participants’ own experience of the projects, and their input and participation in the projects. The central theme for the focus group discussions was that of personal development and growth.

The discussion also focussed on the concept of empowerment as defined by White (2004) and Naryan (2002).

See Appendix 3 for the interview schedule. Additional questions (not noted) were asked where necessary and are reflected in the data presentation where relevant.

In total, nine people were involved in the three focus group discussions held between June and August 2010. All of the respondents were (or still are) involved in the participatory theatre projects as actors in the performances and were drawn from the target community in which the performances are presented. Four people were part of the focus group discussion for the SACTWU project, three people for the AAA-HA project, and two for the UVHAA project. Although each of these groups is smaller than traditional focus groups, the discussions were in-depth and each of the participants had an opportunity to talk about their own personal experiences, which provided sufficiently rich data for the study.

The data from these focus group discussions was captured on audio tape, as well as summarised in my own notes. Transcription of this data involved listening to the audio tapes and writing verbatim accounts of what was discussed.

Analysing the case study data

The qualitative data from the case studies was arranged according to themes, based on the interview schedule and guide for the focus group discussions. The transcriptions of interviews from each case study were examined and explored individually. This was followed by a broad thematic analysis of the responses gathered through all three of the focus group discussions. This process of analysis was conducted through a manual reading of the interview transcripts.

Because the research approach is deductive, testing and expanding on existing theories, these theories informed the code developed to represent the concepts and themes that I wished to explore within the data. These themes were identified as: the goals of the project, the level of participation in the projects, the standard of performance and its reception, the potential for empowerment for the participants, and the potential for

empowerment within the greater community. The criteria used to assess the potential for empowerment is based on the key steps identified by Narayan (2002) as being: access to information, inclusion or participation, accountability, and local organisational capacity.

Each case study is discussed with a view to exploring four key identifiers of participation, namely: voluntary involvement in the project, shared decision making, participation at different levels, and aiming to improve the well-being of the participants. This data was analysed in order to understand how these projects work and have meaning for the participants.

Limitations of the research

Bias

As an applied theatre practitioner with a particular interest in development and empowerment, this is likely to colour both the data collection process in this research process, and my interpretation of the research results. In an attempt to find a way to make practice more effective, I may skew and present my findings in a way that argues that workable solutions to development communication must be participatory and empowering. This bias has also coloured my research design, the hypotheses that I am working from, and the choice of questions for the data collection.

The questionnaire in particular may be biased, in that the multiple-choice format of the questions restricted the respondents to answering according to pre-determined categories based on my own hypotheses. Open-ended questions might have been less biased and might have provided a different set of issues for consideration in the analysis of the data.

There may also be a level of bias from the respondents themselves. As practitioners, programme managers, and participants in projects, each individual has a particular way of understanding participation and empowerment, and may have responded to questions based on this understanding. However, as their responses are unpacked in the analysis of the data gathered, this bias is explored and made evident.

Influence

With regard to the questionnaire, the setting of the Drama for Life conference may have had some impact on respondents' responses. I have some standing in the community of theatre for development and TFA practitioners, due to the fact that I have published in the field and appeared as a speaker at the previous applied theatre conference in 2008. To some extent, this allows me access to the rest of the community, but it may also influence the respondents' answers as I am a vocal supporter of participatory projects. However, as the respondent's views were anonymous, this influence, if any, would have been minimal.

With reference to the case studies, I have worked closely on all three projects. However, instead of this influencing the respondents to exaggerate the success of these projects, I believe that my questioning prompted them to be more 'truthful' in their responses, and to be more critical of the success or otherwise of their work. Had an outsider conducted these interviews, the data gathered might have been more positive in an attempt to promote the organisation, and would have been less realistic about the limitations of the projects. It is only through my close association with each of the projects and personal experience of their challenges and limitations that I was able to ask questions that went beyond the surface of apparent success, and to investigate them more critically.

Participation

Participation in the survey was greater than expected, and I received positive feedback from the respondents. Some barriers to participation were, however, noted in the qualitative research processes. While the focus group discussions were designed and facilitated to allow for maximum participation, some individuals in the groups were less vocal than others. As there was no obvious impediment to their contributing to the discussion, and their anonymity had been guaranteed, I assumed that they were naturally less vocal and less confident to talk than others when in a group. It was clear that the groups had individuals who were more ready to talk and to lead the discussion. Where possible I balanced this by directing questions to the quieter respondents, so as

to gather their opinions and perspectives along with the responses from those respondents who were more vocal and empowered.

As a practitioner, I have had more time and experience working with two of the groups (the SACTWU project and the AAA-HA project) than with the third (the UVHAA Man-to-Man project). I anticipated that this prior relationship between myself and the participants would ensure that they were comfortable speaking to me. I was less confident of this with regard to the UVHAA project, which involved young people from a rural area. I anticipated some language barriers between myself as an English-speaking researcher and these Zulu-speaking young people. I employed an interpreter for this focus-group discussion to clarify issues, and to work on translating the transcription from Zulu to English for my analysis. As it transpired, the interpreter was only necessary for the exploration of one key concept raised by the respondents in the focus-group discussion, and the rest of the interview was conducted in English at the request of the participants.

When the transcriptions from the different interviews are compared with each other, it is clear that the more empowered project participants were the students from DUT, and they were more open and able to talk at length about their perceptions and experiences of the project. The other two groups were noticeably more reticent to talk, with the group of boys from the UVHAA project being the least confident. Their answers to questions were short and difficult to extract. This could be attributed to the fact that there were just two participants in this focus group discussion, and that the boys did not feel the confidence and support of a group, as envisaged in focus group discussions. They boys also preferred to speak in English, even though an interpreter was available, and their lack of fluency in this second language may further have impeded their ability to give detailed answers to the research questions.

The unexpectedly short responses from the SACTWU group might have been a result of my prior relationship with the group, which involves them seeing me as a director and mentor, rather than a researcher. They might have been more comfortable with their roles as learners or listeners than as talkers with valuable input to offer. Although I tried to counter this and to prompt further discussion, an unfamiliar researcher might have been able to extract more from this group.

Problem-solving

As somebody who has spent time working with the projects, I did find myself stepping from the role of researcher into that of problem-solver, particularly with the SACTWU group. Where they had problems raised by the research questions, they automatically looked to me to help them find ways to solve these, and I had to distance myself from this role and focus on the research. With both the SACTWU group and the UVHAA group, I have made appointments to return to work with the groups once my research is over. As the DUT AAA-HA group is no longer working on the project, this problem did not present with that group.

Parameters of evaluation and lack of clarity regarding definitions

The case studies under investigation are not measured against specific objective criteria, but rather on the perceptions of success as judged by the programme participants and project managers. To some extent, this lack of formal criteria may be seen as compromising the validity of the research; however, I would argue that the success or otherwise of the projects can only be judged subjectively by those closest to the projects. As far as possible, I have interrogated the notion of success or efficacy for each project, and this is reflected in the discussion on the collected data.

Without clarifying definitions of concepts up-front with research participants, discussing abstract notions of empowerment and development with different groups may lead to some confusion, as individuals may have differing perceptions of these concepts. I was conscious of this in the research design, and instead of using terms such as 'empowerment' and 'development' I used the phrase "to feel stronger and more able to take control over their own lives" as a way of exploring these notions. Based on the data collected around this idea, and the definition of empowerment that I offer in the previous chapter, I have drawn conclusions regarding empowerment in the projects.

Validity and reliability of the research

I have mentioned that using different research approaches and tools provides an opportunity to validate the research conducted. Essentially, the collected data in the form of completed questionnaires and the interview and focus group discussion transcripts provide a measure of validity, proving that what I have reported has indeed been collected.

Within the limits of the post-modern approach to everything having inherent validity, it is still useful to consider the specific validity of the selected methods and tools to capture appropriate data. Harding *et al* (1996) differentiate between *internal* and *external* validity, where internal validity is concerned with whether or not the instrument measures what it purports to measure, and external validity concerned with whether the results can be generalised to the broader population.

On the question of internal validity, the questionnaire was specifically created to collect demographic information and to collect data on the relative *participatory-ness* of TFA projects. It was pre-tested to check its face validity, relevance, and the relative ease of completion; and adjusted accordingly before being used with the sample in November 2009 (see earlier comments on pre-testing).

The questions designed for the interviews and for the focus group discussions were crafted to elicit responses that related to the issues of participation and empowerment, as envisioned in the research design. The open nature of these meetings allowed for clarification and expansion, guaranteeing greater internal validity.

Regarding the external validity of the questionnaire, the sampling process and the strategy of choosing the conference attendees as the sample population for the study meant that a wide variety of both practitioners and academics completed the survey. The sample size of 35% of the total conference population suggests that there is ample evidence to generalise about the conference attendees. While these conference attendees may be representative of the broader population of academics and practitioners in the field of TFA, I am conscious of the fact that not all of the results may

stand for all those working in the field, and have kept this in mind in my discussion and conclusions .

In the qualitative study, the use of three case studies provides a sufficient amount of data to explore the potential consequences of these types of interventions. While shedding light on these specific projects, these results cannot be generalised to the field more broadly, as the context and content of each individual project will determine its impact and the consequences for the local community. This is part of my argument, and will be discussed later in this thesis.

Reliability concerns the extent to which the same questions asked under the same conditions would end in the same results. While the survey was a self-administered questionnaire, I was on hand at the conference to address any issues of ambiguity or uncertainty. To some extent, this suggests that the range of perspectives and differing realities of the respondents might have been reduced, as I was able to encourage a shared understanding of the questionnaire. The fact that the questionnaire was simple to follow would ensure that a study under the same circumstances would indeed generate the same data. There was nothing unusual about the collection process that would suggest otherwise.

The different responses to the questions asked in the interviews and focus group discussions reflects that the qualitative probing questions were able to elicit a wide range of responses and that administered in different circumstances, they would continue to do so.

Ethical considerations

Ethical clearance for this study was applied for and granted by the Humanities and Social Sciences Research Ethics Committee of the University of KwaZulu-Natal in 2009. As the research was planned to be conducted with adults, to be voluntary, and for reporting to be anonymous, there were no anticipated ethical problems during the planning phase.

All of the surveyed or interviewed respondents were alerted to the nature and purpose of this research, and my identity as a researcher working towards the degree of PHD through the University of KwaZulu Natal. In the case of the survey, this information was printed at the beginning of the questionnaire, and in the case of interviews and focus group discussions, I provided this information verbally.

I explained to respondents that participation in the research was voluntary, and that they could withdraw from participation at any time without suffering any negative consequences. I also assured respondents that they would remain anonymous and that their responses would be treated in a confidential manner. Although the research data would be shared, names would not be used in this thesis or in further published reports, therefore protecting the privacy of individuals. The organisations selected for the case study have all given permission for the research to be conducted and for the names of their organisations to be reflected in the study.

Despite phrasing questions to avoid confidential personal information regarding programme participants, some unsolicited information was provided by programme managers through the interviews. Where this is not directly relevant to the research questions, it has been left out of the research, and not written into the interview transcripts. In one case-study the information was pertinent to illustrating the success of the project in an unexpected manner, and I have included this information in the research findings, while concealing the identity of the participant.

Unknown to me before embarking on the research, one of the participants involved in one of the case-study projects was a minor (aged 16). When I arrived for the focus group discussion, I asked all participants for their ages. A local nurse associated with the project, and who regularly acts as guardian for this group of young people when their parents are absent during the organisation's activities, was on site. I requested that the nurse, as *de facto* guardian, remain with us for the duration of the focus-group discussion. All parties agreed to this suggestion. The respondent in question expressed a strong desire to participate in the interview, and given this wish and the presence of the guardian, I felt that this provided sufficient motivation to allow him to participate.

I feel that an important part of ethical research practice is to feed back the research findings to the respondents. I have agreed to make public the findings from the questionnaire on the internet, and to make these available through the organising committee of the conference at which the survey was conducted. Follow-up meetings are planned with the three case-study groups for me to present relevant findings to them, and for them to disseminate this to programme participants and other partners.

Benefits of the research

The process of participating in the research may have had some benefits for the participants. A number of the survey respondents commented that the process of filling in the questionnaire had made them reflect carefully on their work. A comment written on one of the completed questionnaires was: "This questionnaire has prompted me to analyse my own practice and evaluate it. It makes one look at your strengths and weakness". The process of participating in the research may have been beneficial to the respondents in this way.

The focus group discussions may also have had some benefits for the participants, in that the discussion about empowerment and affirmation of their own skills and achievements may have served to boost their confidence in this regard.

The variety of methods used in this study has generated rich data for analysis and discussion. I will present the data from each of these two different strands of the study in the two separate chapters that follow, and then go on to integrate the data sets and discuss their significance in the final chapter.

CHAPTER 9: RESULTS OF THE SURVEY

This chapter presents and discusses the results of the survey conducted in 2009 amongst TFA practitioners. The purpose of my research was to explore current trends in the field of practice. The specific research areas that I hoped to explore through the survey included the use of participatory strategies in TFA projects, and exploring the use of theory-driven interventions. In particular, I was hoping to find evidence to support the following two hypotheses:

Hypothesis 1: Practitioners who are aware of appropriate theory will create theory-driven interventions that are consciously designed to meet their goals.

Hypothesis 2: Participation in theatre projects happens at different levels and in different ways.

The questionnaire included questions regarding the respondent's definition of themselves as TFA practitioners, their geographical place of work, the length of their projects, and the specific type of theatre activities that they make use of. It then went on to ask questions related to the application of theory in their projects. Further questions were focused around their priorities with regard to product or process in their work. The remainder of the questionnaire centred on questions regarding participation, the selection of participants, participatory strategies employed in their projects, and decision-making with regards to the projects. This chapter is arranged according to sub-headings based on each set of questions included in the questionnaire.

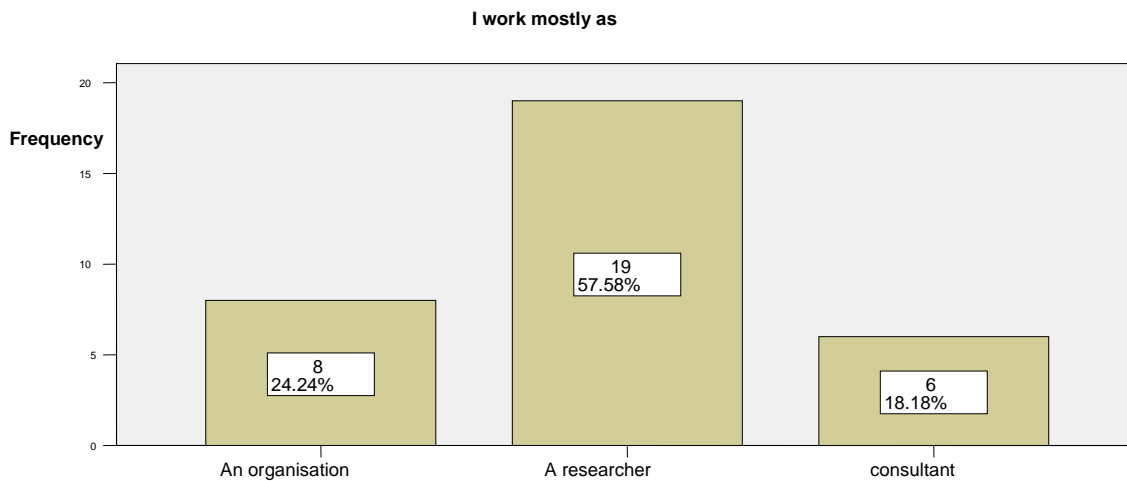
Respondent information

The sample population was attendees at the *Africa Research Conference in Applied Drama and Theatre*, held at the University of Witwatersrand in November, 2009. The conference attracted delegates from South Africa, other African countries, and overseas. As an international conference, I thought it important to establish where the survey respondents came from and practised their work.

The overwhelming majority of respondents (60.61%) practised in South Africa and other African countries (36.36%), and only one respondent was from outside Africa. Although I originally sought to collect data from only Southern African countries, the literature reflects that the practice and the challenges of theatre for development and TFA are similar around the globe. For this reason, I have chosen to include all of the collected responses in my analysis of the data, including those from other African countries and overseas.

In an attempt to achieve a better understanding of who is involved in the practice of TFA, the questionnaire sought to classify how those working in the field saw themselves, whether this was as a representative from an organisation, a researcher, or a consultant. Figure 4 reflects the composition of the population of respondents.

FIGURE 4: RESPONDENT IDENTIFICATION

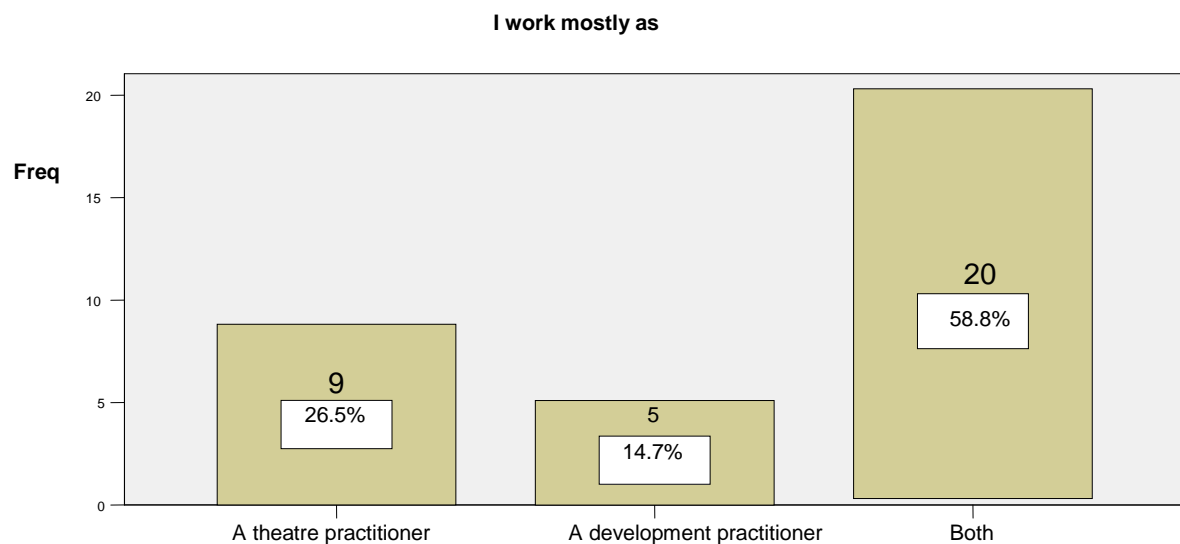


More than half of the respondents (57.6%) who answered this question stated that they were researchers, while less than a quarter of the sample (24.2%) were representatives of organisations, and fewer still (18.2%) were consultants working in the field. It is not surprising that respondents who were attending a University-based conference predominantly describe themselves as researchers. However, this definition should be qualified in that most of these researchers are also active practitioners of TFA, as is

evidenced in the responses to the rest of the questionnaire. A definition of *researcher-practitioner* may be more useful to understand how these respondents work.

In an attempt to understand the predominant practice of the respondents, I asked them to identify themselves as either a theatre or a development practitioner, or as both. Figure 5 reflects how the respondents identify themselves.

FIGURE 5: RESPONDENT IDENTIFICATION (2)



58.5% of the respondents stated that they considered themselves to be both theatre practitioners and development practitioners. 26.5% identified themselves as theatre practitioners, and just 14.7% as development practitioners. The most common practice identified combined theatre and development, placing the majority of practitioners firmly in the realm of theatre for development.

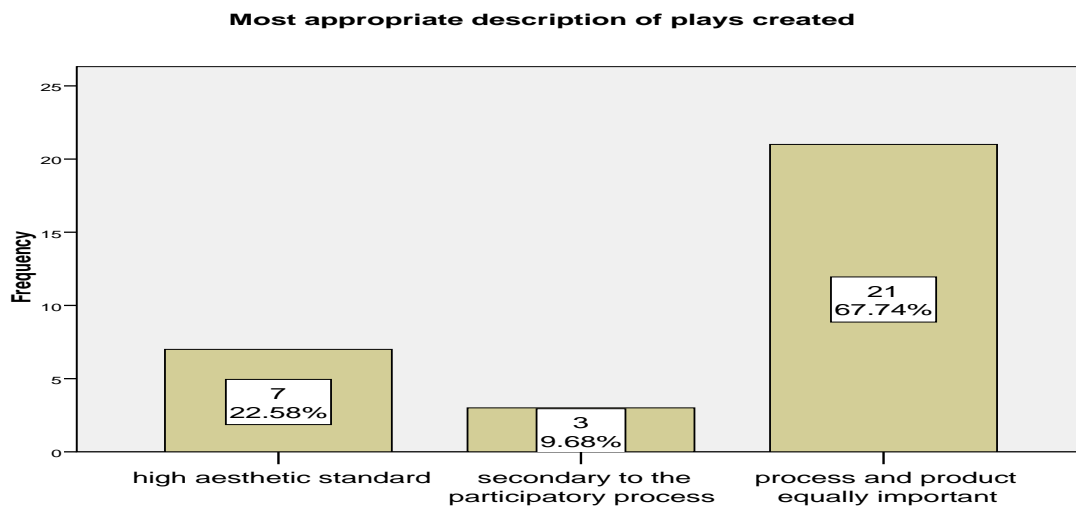
This, however, may not always be ideal. One respondent added a comment on the questionnaire that their work lacks focus because it is too diverse and involved “wearing too many hats, for example academic, researcher, director, facilitator, animator, writer and trainer” (Questionnaire, 2009).

This overlapping of functions could be detrimental to the work. However, having a consciousness of both development and theatre practice may be useful for practice. Theatre practitioners may be more inclined to focus on theatre as a product rather than theatre as a process, while development practitioners are generally more focussed on the developmental process of the work and the growth of the participants. The fact that the respondents considered themselves to be both, suggests that there may be equal emphasis on both the product and the process in their work.

Performance or process

To test whether practitioners focused on either the product or the process of their work, the questionnaire specifically asked respondents to note whether the standard of the performance or the participatory process was more important to them; or whether both were equally important. Figure 6 reflects where the respondents place emphasis in their work.

FIGURE 6: EMPHASIS OF THE PROJECTS



While 26.5% of respondents defined themselves as theatre practitioners in an earlier question; only 22.58% stated that the quality and the aesthetics of theatre product were more important in their work than the process of involvement and development. Although I would anticipate that these numbers would be equal, this difference is slight

enough to support the assumption that theatre practitioners do indeed focus more on the aesthetics of the performance product.

Only 9.68% of respondents ranked the process of the work above the final product of the performance. This provides evidence contrary to the assumption that if the focus of an intervention is on the process of development then theatre aesthetics and the quality of the performance will be secondary. A large majority of 67.74% of the respondents responded that they viewed the theatre product and the process of involvement in the theatre process as being equally important. Three respondents did not answer this question, and there is no indication as to why this was the case.

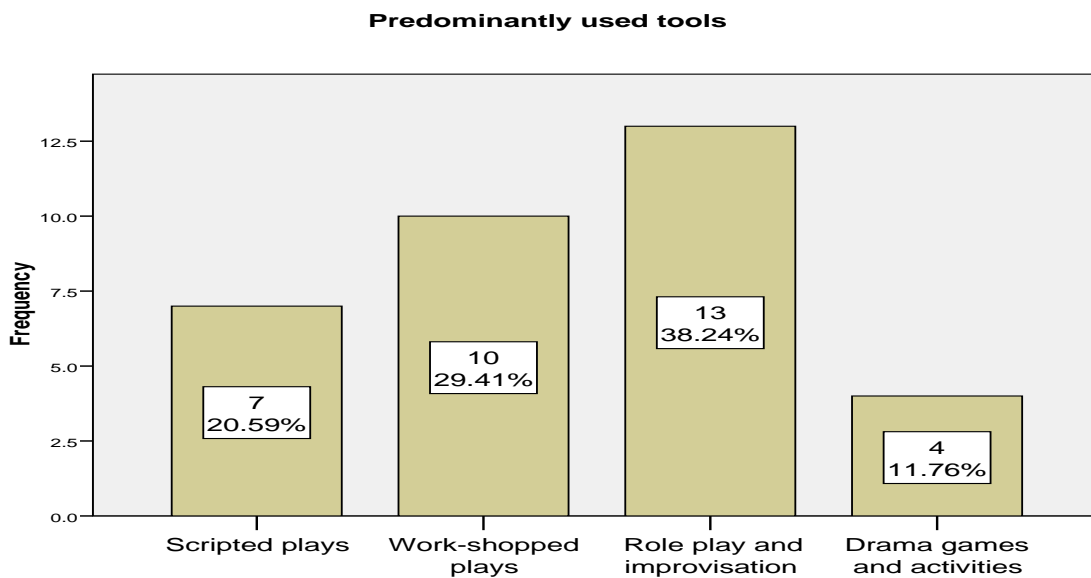
The data provides evidence that there is not a great deal of separation between process and product, and this reflects that the majority of the practitioners see themselves as practitioners of both development and theatre. To explore this further, the questionnaire asked respondents to note how they used theatre in their projects; whether this was as scripted plays, workshopped plays, role-play and improvisation and drama games and activities.

Interventions that make use of scripted plays are more likely to focus on the product of the final performance of these plays. These plays are also often written by experts from outside the participating group. The literature review explores how when participants are involved in the process of rehearsing these plays, this process may build performance skills, confidence and communication skills, as well as knowledge about the topic. However, this may not be empowering in the same way as are other more reflective processes. I will explore this assumption in more depth in my analysis of the findings from the case studies presented in the following chapter.

Workshopped plays are created by the group and are therefore, at face value, a more participatory strategy than working with a scripted play. This process may be more empowering and encourage the development of critical consciousness among the participants, as they are actively engaging in thinking about a problem while they are constructing the play.

Role-play, improvisation and other drama games and activities are all participatory methodologies that are used by many development practitioners to explore and address local problems in a creative and non-threatening manner. These processes are used in rehearsals, and in many drama-based interventions, alongside other participatory learning methodologies. The questionnaire was specifically worded to extract information regarding what methodology is predominant amongst the respondents, to further compare the focus on product (scripted performances) and process. Figure 7 reflects the predominant strategies used by the participants.

FIGURE 7: DRAMA AND THEATRE METHODOLOGIES EMPLOYED



20.59% of the surveyed practitioners responded that they predominantly used scripted plays. This percentage corresponds with those who rank aesthetic quality of performance above process in their interventions. Practitioners may assume that working from a pre-written script will result in a better theatre product than working on a workshopped play with the community group. 29.41% use workshopped plays, suggesting that marginally more TFA practitioners involve their audiences in creating the work. A greater percentage of 38.7% use improvisation and role-play, suggesting that these are the most popular strategies employed to examine HIV and AIDS issues in

such interventions; and 11.8% of the surveyed practitioners use drama games and activities.

The cumulative total of practitioners who make use of these more participatory and exploratory methods is 50.5%. Just over half of the surveyed practitioners use these tools of the theatre as process, as a way to explore HIV and AIDS issues, as opposed to theatre as product, with the creation of plays, either by the target group or an outside agency, that present the issues for the consideration of an audience.

Three respondents noted in the open-ended space on the questionnaire that they used other facilitated participatory methods for their work. One wrote that “there are a lot of Applied Theatre practitioners whose working methods don’t fall into many of the categories that you use” (Questionnaire, 2009). In particular, this respondent mentioned workshops with impromptu performances. I see the category of ‘role play and improvisation’ as inclusive of these strategies, but perhaps the selected terminology for this question was not specific enough. No other respondents noted a problem with this question.

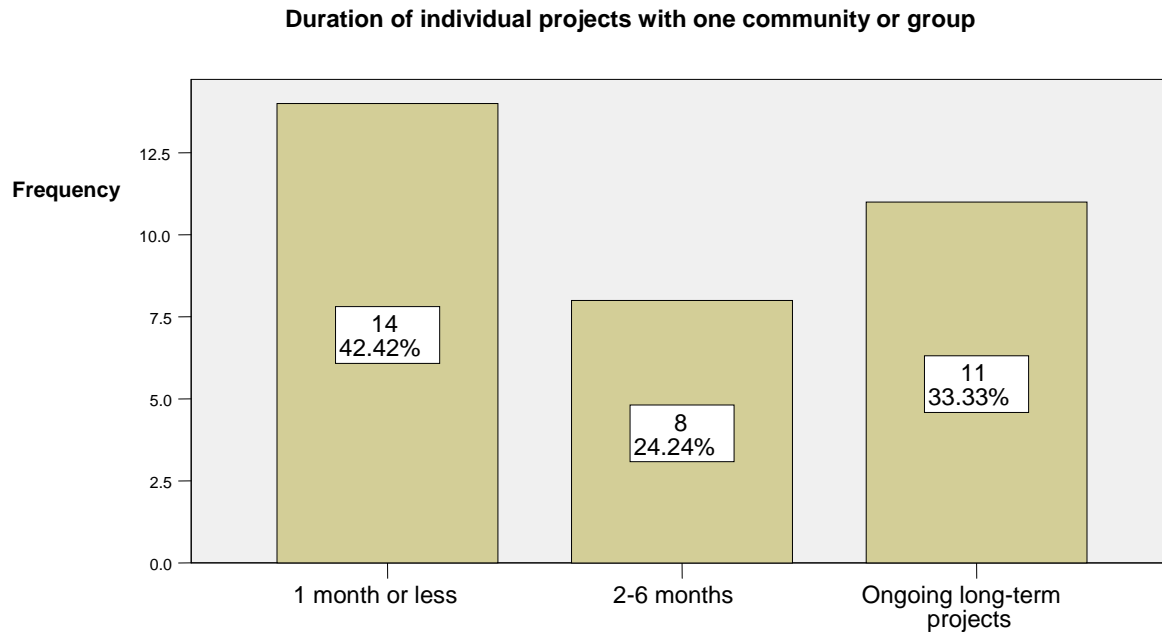
Sustainability and time spent on projects

To provide an overview of the respondents’ practices, the questionnaire was designed to elicit responses regarding the amount of time that the intervention team spent with the target groups or communities with whom they work. One of the key problems raised in the literature review was the sustainability of theatre for development projects, where outside catalysts leave a community without support once a project is over. There has been much criticism of short-term interventions as being propagandist, presenting pre-packaged solutions to problems, and therefore less able to encourage genuine development (Tomaselli, 1992, 1997).

The amount of time that is spent on a theatre project determines how much participation can take place. It is less time-consuming to provide a group with a pre-written script than to work together with the group on developing a script. However, the process of working together and creating dialogue about the issue is essentially more participatory and can develop a greater consciousness of the issue, allowing for greater

empowerment potential. This provides a convincing argument for longer-term projects. Figure 8 reflects the average duration of the respondents' projects.

FIGURE 8: DURATION OF PROJECTS



At 42.4%, most of the surveyed practitioners responded that their projects ran for one month or less in a community. 24.2% work on longer-term projects that see them working with a community over a sustained period of two to six months. One third of all respondents replied that they work on ongoing long-term projects, which is the preferred approach for sustainable development work.

This evidence shows that the most common practice is of interventions as short-term projects that last for less than one month. While the questionnaire did not specifically ask for time-frames, my own experience is that many of these last for less than one day, with a performance from the outside organisation that may be followed by discussion with the audience. This strategy is expanded on in later discussion.

Two respondents commented in the open-ended section at the end of the questionnaire on the issue of time spent with the target community. One reported that although they

only work with the community for a period of between two to six months, the project focussed on passing skills to the community, and that the trained participants then continued with their projects on their own within the community. This may be an ideal model for more sustainable interventions that do not require ongoing input from the catalyst organisation.

The bearing of theory on practice

Zakes Mda (1993) calls for investigation into how theory affects the practice of theatre for development. I am working on the assumption that practitioners make choices as to how they use drama and theatre based on the theory that informs their work. To test this hypothesis, I asked respondents to identify whether their work was theory-driven, and if so, which theories they applied to their practice.

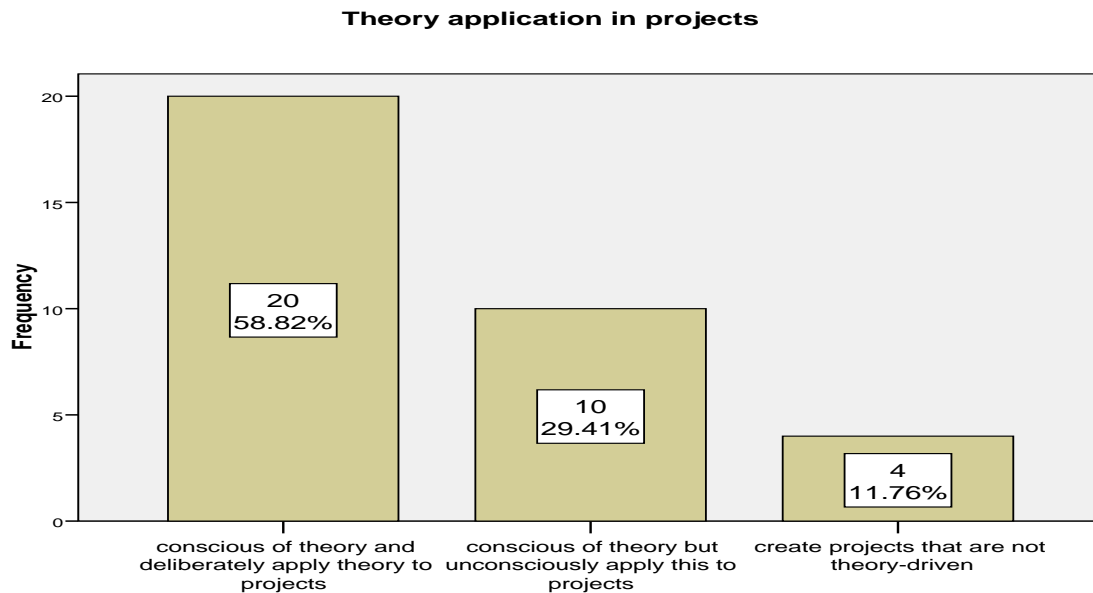
I have identified the use of theory as an independent variable for this study, and developed cross tabulations to show the relationships between these various theories (as independent variables) and different dependent variables. These are presented at different points throughout this chapter.

The questionnaire asked respondents to note whether they used theory consciously in the projects, unconsciously, or not at all. Figure 9 reflects the application of theory in the respondents' projects.

The majority of 58.82% of respondents noted that they deliberately and consciously applied theory in their practice. 29.41% were conscious of theory but did not apply it in their projects, and 11.76% worked in projects that they considered not to be driven by theory at all.

Even though it is a small percentage, the evidence of a lack of conscious application of theory to projects is surprising. Singhal and Rogers (1999) assert that interventions which make use of entertaining media are more likely to succeed in meeting their objectives if they are based on theory. The evidence from the survey data suggests that some projects base their work on previous experiences and an intuitive understanding of what works, rather than on recognised theory.

FIGURE 9: APPLICATION OF THEORY IN PROJECTS



This question was followed by a multiple-response question designed to elicit further information regarding the type of theory that practitioners used. Respondents were asked to select from a list of six options, including communication for development theories, Paulo Freire and participation theories, behaviour change theories, theatre aesthetics and performance theories, audience reception theory, and no theory. They were advised that they could select more than one option to reflect multiple influences. The value 1 or the 'yes' response, was used to measure these responses, and used to construct the tables that are presented below.

Table 1 reflects the specific application of theories in the respondents' projects. Of the 34 respondents, 17.7% of respondents noted that they make use of communication for development theory. 15.2% make use of behaviour change theory. The highest response of 31.6% reported that they base their work on Paulo Freire's pedagogy and participation theories. Another high percentage of 22.8% relate the work performance theory and theatre aesthetics, while 8.9% are informed by audience reception theory. Just 3.8% of respondents assert that no theory informs their projects. There is a slight discrepancy between this result of 3 respondents noting that they use no theory and the

earlier response of 4 respondents not using theory. I surmise that the reason for this is that once respondents had seen a list of theories in front of them there might have been something that one respondent recognised as familiar which they did indeed use in their work.

TABLE 1: FREQUENCY OF THEORIES APPLIED TO PROJECTS

Theories and Frequencies

	Responses		Percent of Cases
Communication for development theories inform my projects	14	17.7%	43.8%
Behaviour change theories inform my projects	12	15.2%	37.5%
Paulo Freire and participation theories inform my projects	25	31.6%	78.1%
Theatre aesthetics and performance theories inform my projects	18	22.8%	56.3%
Audience reception theory informs my projects	7	8.9%	21.9%
No theory informs projects	3	3.8%	9.4%
Total	79	100.0%	246.9%

^aDichotomy group tabulated at value 1.

The influence of theory on product and process

One of the key dependent variables that I identified was the emphasis on product or process (as reflected earlier) and how this was influenced by theory. For each respondent that identified their work as being informed by a particular field of theory, I have noted whether the respondent applied greater emphasis to the aesthetics of the performance, or the process of participation, or both. The following tables reflect this relationship.

Percentages and totals in these tables are based on the respondents' answers. These tables are an output of a multiple response analysis of the 'yes' response, whose value is 1. Value 2 reflects the 'no' responses.

Practitioners who base their work on communication for development theory

Communication for development theories explain how different communication processes, channels and messages can bring about development for a particular group. The data reflects that of the 14 respondents who use communication for development theories, a high percentage of 83.3% consider process and product as equally important, while 16.7% consider their plays to be of high aesthetic standard. None of these 12 respondents considered the quality of the theatre as secondary to the participatory process. Table 2 reflects the specific application of communication for development theory in relation to the emphasis on product and process.

TABLE 2: APPLYING COMMUNICATION FOR DEVELOPMENT THEORY

Most appropriate description of plays created * Communication for development theories inform my projects
Crosstabulation

			Communication for development theories inform my projects		Total
			yes	no	
Most appropriate description of plays created	high aesthetic standard	Count % within Communication for development theories inform my projects	2 16.7%	4 23.5%	6 20.7%
	secondary to the participatory process	Count % within Communication for development theories inform my projects	0 .0%	2 11.8%	2 6.9%
	process and product equally important	Count % within Communication for development theories inform my projects	10 83.3%	11 64.7%	21 72.4%
Total	Count % within Communication for development theories inform my projects	12 100.0%	17 100.0%	29 100.0%	

This provides evidence that is counter to the assertions of Mda (1993) and Prentki (1998) that those interventions created by development practitioners will result in theatre

that is of less artistic value, and is therefore less engaging than the work created by theatre practitioners. This emphasis on work of a high aesthetic standard, or at least of equal importance to the processes involved in the project, is self-reported and cannot be validated by viewing and judging the performances. However, if there is a consciousness amongst TFA practitioners that these two areas are worthy of equal attention then it is likely that these projects will have greater efficacy.

Practitioners who base their work on behaviour change theory

Behaviour change theories present arguments as to how people make decisions to adopt or to change their behaviour, according to input from different sources. The literature review presents some of the debates regarding the application of these theories in the context of HIV and AIDS education. Table 3 reflects the specific application of behaviour change theory in relation to the emphasis on product and process.

TABLE 3: APPLYING BEHAVIOUR CHANGE THEORY

**Most appropriate description of plays created * Behaviour change theories inform my projects
Crosstabulation**

			Behaviour change theories inform my projects		Total
			yes	no	
Most appropriate description of plays created	high aesthetic standard	Count % within Behaviour change theories inform my projects	2 18.2%	4 22.2%	6 20.7%
	secondary to the participatory process	Count % within Behaviour change theories inform my projects	1 9.1%	1 5.6%	2 6.9%
	process and product equally important	Count % within Behaviour change theories inform my projects	8 72.7%	13 72.2%	21 72.4%
Total		Count % within Behaviour change theories inform my projects	11 100.0%	18 100.0%	29 100.0%

Of the 11 respondents who base their interventions on behaviour change theories, a significantly high percentage of 72.7% consider process and product as equally important, while 18.2% consider their plays to be of high aesthetic standard and 9.1% considered the standard of the theatre as secondary to the participatory process.

Behaviour change is recognised as a complex process that takes time and cannot be brought about through short interventions. It is not surprising therefore that most of these TFA practitioners place their emphasis on both the product and the process. The questionnaire did not allow for respondents to note which specific behaviour change theories they made use of. However, the fact that 18.2% of respondents focus on the aesthetics of a performance, suggests that they may apply Bandura's social learning theory proposing that learning and thus behaviour change will occur through watching the actions of others. However, this cannot be confirmed without further detailed investigation.

Practitioners who base their work on Paulo Freire and participation theories

Based on the liberation education practices of Paulo Freire (1973, 1977, 2002), participatory theories emphasise the importance of full participation in all aspects of a project, in order to bring about empowerment for a group. Table 4 (overleaf) reflects the specific application of Freireian theory in relation to the emphasis on product and process.

Of the 25 respondents who base their interventions on the pedagogy of Paulo Freire and theories of participation, a high percentage of 72.7% consider process and product as equally important, while a smaller percentage of 22.7% consider their plays to be of high aesthetic standard, and an even lower figure of 4.5% considered the standard of the theatre as secondary to the participatory process.

Even though the emphasis is on participation, there is still a consciousness on the need to create aesthetically appealing theatre, and very few practitioners rate the performance as secondary to the participatory processes. This is surprising, given the importance of process in Freire's theory.

TABLE 4: APPLYING PARTICIPATION AND FREIREIAN THEORY

**Most appropriate description of plays created * Paulo Freire and participation theories inform my projects
Crosstabulation**

			Paulo Freire and participation theories inform my projects		Total
			yes	no	
Most appropriate description of plays created	high aesthetic standard	Count % within Paulo Freire and participation theories inform my projects	5 22.7%	1 14.3%	6 20.7%
	secondary to the participatory process	Count % within Paulo Freire and participation theories inform my projects	1 4.5%	1 14.3%	2 6.9%
	process and product equally important	Count % within Paulo Freire and participation theories inform my projects	16 72.7%	5 71.4%	21 72.4%
Total		Count % within Paulo Freire and participation theories inform my projects	22 100.0%	7 100.0%	29 100.0%

Practitioners who base their work on theatre aesthetics and performance theories

Aesthetics and performance theories explore how audiences respond to theatre, based on what is presented in performance. Table 5 (overleaf) reflects the specific application of theatre and aesthetic theory in relation to the emphasis on product and process.

Of the 18 respondents who base their intervention on theatre aesthetics and performance theories, a high percentage of 70.6% consider process and product as equally important, while a significantly lower percentage of 29.4 % consider high aesthetic standards to be paramount, and none considered the standard of the theatre as secondary to the participatory process.

The literature suggests that practitioners who are led by theatre and performance theory may place emphasis on the aesthetics of the theatre to the detriment of development (Prentki, 1998; Mavrocordatos, 2003). However, this assumption is not supported by the findings of this research. Although practitioners may base their work on performance

theories, they do not place greater importance on the theatre performance to the detriment of the processes that may bring about development for the participating group.

When compared with the respondents who selected communication for development theories as their influence, a significantly higher percentage of practitioners informed by behaviour change theory place greater emphasis on participation over the theatre product. Surprisingly, a lower percentage of the respondents who base their interventions on participatory theory and Paulo Freire have the same emphasis on process over product.

One of the survey respondents commented on their questionnaire that “sometimes theory clashes with practice and participants then come up with what works for them” (Questionnaire, 2009). This suggests that theory should not be rigidly applied, but should be adapted to suit the local context and the needs of the project.

TABLE 5: APPLYING THEATRE AND PERFORMANCE THEORY

Most appropriate description of plays created * Theatre aesthetics and performance theories inform my projects Crosstabulation

			Theatre aesthetics and performance theories inform my projects		Total
			yes	no	
Most appropriate description of plays created	high aesthetic standard	Count % within Theatre aesthetics and performance theories inform my projects	5 29.4%	1 8.3%	6 20.7%
	secondary to the participatory process	Count % within Theatre aesthetics and performance theories inform my projects	0 .0%	2 16.7%	2 6.9%
	process and product equally important	Count % within Theatre aesthetics and performance theories inform my projects	12 70.6%	9 75.0%	21 72.4%
Total	Count % within Theatre aesthetics and performance theories inform my projects	17 100.0%	12 100.0%	29 100.0%	

An overview of intervention strategies

To provide a broad overview of the projects in which the respondents are involved, and to begin to understand the rationale behind the interventions and the selection of participants, respondents were asked to describe their work according to eight categories.

These categories were specifically drawn from an analysis of Arnstein's (1969) ladder of participation, which suggests that the strategies employed in the intervention and the level of participation by members of the target community will determine how empowering the project can hope to be.

Respondents were asked to select one or more from the following options that described their work:

- Working with specific in-groups to pass pre-determined information to the community;
- Encouraging behaviour change with a target group;
- Spreading awareness about an issue;
- Consulting the target group about their issues of concern;
- Hand-selecting individuals from the target community to work on the project;
- Working with individuals selected by the target community themselves;
- Including individuals from the target community in management of the project;
- Creating partnerships with the target community, where they are included at all levels, including decision-making on policy and management issues.

These strategies are generally indicative of different approaches to development. Understanding what strategies are employed in interventions can provide insight into how development is viewed and whether or not interventions may be said to be empowering.

Most of the respondents selected more than one option, suggesting that they do not employ a single strategy related to participation, but make use of multiple methods of

involving community members in their projects. The responses are captured below, in Table 6.

TABLE 6: INTERVENTION STRATEGIES

Strategy Frequencies				
Strategy	a	Responses		Percent of Cases
		N	Percent	
	I work with specific in-groups to pass pre-determined info to cmty	4	3.9%	12.9%
	I encourage behaviour change with a target group	19	18.6%	61.3%
	My practice involves spreading awareness about an issue	22	21.6%	71.0%
	I consult groups about their issues of concern	18	17.6%	58.1%
	I hand-select individuals from target grp to work on project	8	7.8%	25.8%
	I work with individuals selected by target grp	10	9.8%	32.3%
	I include individuals from target grp/cmty to manage project	12	11.8%	38.7%
	I create partnerships with target grp/cmty	9	8.8%	29.0%
Total		102	100.0%	329.0%

a. Dichotomy group tabulated at value 1.

Working with pre-determined information and specific groups is reminiscent of the diffusion of innovations approach to development, where new ideas are introduced from the outside into the target community via selected opinion leaders. This practice is recognised as manipulative and counter to development. The collected data suggests that this strategy is not commonly used, and just four respondents (12.9% of cases) marked that they work with specific in-groups to pass pre-determined information to the community.

In earlier chapters, I have discussed how the focus on behaviour change is driven from outside the community, is 'interventionist', and cannot be seen to be fully participatory. However, behaviour change interventions can incorporate participatory practices, and the strategies employed within the particular project determine whether it is more or less empowering for the participants. 19 of the survey group (61.3% of cases) note that their work is designed to encourage behaviour change with a target group.

22 practitioners (71% of cases) note that their work involves spreading awareness about an issue. This suggests that the issue is selected by the intervention organisation. This high percentage reflects that many organisations focus on a need to educate, and this function may be reminiscent of 'banking education' where information is prioritised over building local capacity. This practice of bringing pre-determined messages based on outside 'expert' knowledge is contrary to Freireian principles and may prevent genuine empowerment from taking place. The evidence suggests that this practice is common in contemporary TFA projects, which therefore fit into the first generation of EE.

A lower number of 18 practitioners (58.1% of cases) note that they consult groups about their issues of concern. This is a more participatory practice, involving members of the community in dialogue about the issues that affect and concern them, rather than imposing ideas from outside. This number of cases is significantly lower than that of those practitioners who report that they spread awareness. This provides evidence that the third generation of EE, with genuine dialogue-based strategies that allow target communities a voice in their own development, is less common than working with communities on issues that are pre-determined by outside groups.

8 respondents (25.8% of cases) note that they hand-select individuals from the target community group to work on their projects. A greater number of 10 respondents (32.3% of cases) reported that they work with individuals selected by the community or group themselves. This latter practice is more participatory, and is expected to have greater impact if the participants are seen as representatives of the community, and are mandated to be part of the project.

12 respondents (38.7% of cases) include individuals from the community in managing the project. An even smaller number of 9 respondents (29% of cases) report that they

create partnerships with the community where the participating group decide on policy and management issues. This is evidence of minimal participation in the important processes of management and decision-making in projects.

This small percentage suggests that the projects are mostly managed by the outside intervention group. Projects that work in this way are indicative of a top-down approach to communicating about HIV and AIDS, typical to the modernisation approach to development. As such they are less likely to be sustainable and to result in empowerment for the community.

The issue of how and where community members participate in projects determines how these projects function and whether or not they meet the criteria of genuine participation outlined by Gumucio-Dagron and Tufte, (2006), Narayanasamy (2008) and others.

Participation in TFA projects

A series of questions in the survey were designed to explore how participants from the target community are involved in the respondents' theatre projects.

Based on the literature about participation and my own experience in the field, I identified ten key areas in which participation is likely in theatre for development projects. These ten areas include the following:

- Determining the goals for the projects;
- Determining who participates in the projects;
- Determining the content and message of projects;
- Determining the medium for the projects;
- Training the community participants;
- Conducting the research for projects;
- Writing the plays for projects;
- Performing in the plays for the projects;
- Participating in monitoring and evaluation activities of the projects;
- Receiving copies of the documentary evidence (videos, photos, reports) of projects.

Respondents were asked to note the stakeholders who participated in each of these aspects of their projects. Five options were provided for them to select one or more options that most accurately applied to their work. These options included: project funders, other experts, their own organisation, gate-keepers in the community, or the community participants themselves.

Participation in determining the goals for the projects

Where the modernisation paradigm to development prevails, the goals for development are set by donors and outside experts. Responses to the question regarding the determination of project goals are reflected in Table 7 below.

The data shows that 13 respondents (39.4% of cases) note that their funders determine the goals for their projects. I have previously noted that where projects rely on donor funding for their existence, these donors often have a voice that may drown out that of community members in their own development. Seven respondents (21.2% of cases) reflect that outside experts influence their projects' goals. This reliance on outside experts is contrary to the notion of empowerment education and participatory communication.

The development-support paradigm draws in local in-groups to promote development. A relatively small number of four respondents (12.1%) note this practice, where gate-keepers within the community made decisions regarding the projects goals. This use of gate-keepers supports existing power relations within a community, and may be counter to empowerment for other community members. The low percentage of respondents who work with such gate-keepers suggests that more projects work directly with ordinary community members rather than those who hold power in the community.

A high number of 20 respondents (60.6% of cases) noted that their own organisation determines the projects' goals. However, this is most often in conjunction with community participants. A substantial number of 23 respondents (69.7% of cases) report that the goals for their projects are determined by community participants. This is a positive indicator of the participatory nature of their projects. The similar results suggest that goal setting by organisations is in conjunction with community participants. This

suggests a greater level of partnerships than was previously recorded when respondents made note of their chosen strategies towards working with communities. This discrepancy may be as a result of the broad manner in which the initial questions were phrased. The more detailed questioning regarding the specifics of participation in different aspects of the programmes may provide a more accurate reflection of the respondents' projects.

Table 7 below reflects the responses to the question regarding who determines the goals for their projects:

TABLE 7: DETERMINING GOALS

Goals Frequencies

	Responses		Percent of Cases
	N	Percent	
\$goals ^a Goals of projects determined by funders	13	19.4%	39.4%
Goals of projects determined by other experts	7	10.4%	21.2%
Goals determined by my organisation	20	29.9%	60.6%
Goals determined by gate-keepers	4	6.0%	12.1%
Goals determined by cmtly participants	23	34.3%	69.7%
Total	67	100.0%	203.0%

a. Dichotomy group tabulated at value 1.

Determining who participates in the projects

The selection of participants in development projects can reflect whether or not such projects are truly participatory and empowering, or whether they simply uphold the status quo of power relations within a community. Responses to the question regarding the determination of project participants are reflected in Table 8 (overleaf).

TABLE 8: DETERMINING WHO PARTICIPATES

Participation Frequencies

	Responses		Percent of Cases
	N	Percent	
\$partcptn ^a Participants in projects determined by funders	9	15.8%	26.5%
Participants in projects determined by other experts	4	7.0%	11.8%
Participants determined by my organisation	23	40.4%	67.6%
Participants determined by gate-keepers in cmtly	5	8.8%	14.7%
Participants determined by cmtly participants	16	28.1%	47.1%
Total	57	100.0%	167.6%

a. Dichotomy group tabulated at value 1.

Nine respondents (26.5% of cases) note that it is their funders who determine who participates in their projects. This suggests a high level of influence by funders. Unless the funders have a detailed knowledge of the dynamics of the local community, this may be a practice that is detrimental to development. A lower figure of four respondents (11.8% of cases) notes that other outside experts make decisions regarding who participates. Again, this is an example of interference from the outside that may not allow the projects to reach their full empowering potential.

The majority of 23 respondents in this survey (67.6% of cases) stated that their own organisation selected participants. If these organisations are based within a community for a sustained period of time, they may have insight into the dynamics of that community and be able to select participants who would benefit most from involvement in the project, to bring about the most benefit for the community. However, as most respondents reported that they spend a relatively short period with members of the community, it can be surmised that this selection process is not based on a detailed understanding of the community.

The second highest incidence of selection, at 16 respondents (47.1% of cases) is where community participants themselves select the project participants. This is recognised as a more democratic method for selecting project participants, as the community may know who will be most suited for participation. Just five respondents (14.7% of cases) note that gate-keepers within the community make this selection. This significantly lower number suggests that this practice, which supports existing and usually unequal power relations in communities, is rare amongst TFA practitioners.

Participation in determining the content and message for projects

Who determines the content of the projects reflects how open the communication is and whether vertical communication can occur. Where the content and messages are determined from outside the community, this is evidence of the modernisation approach to development, and can be manipulative. A more participatory approach sees these messages generated from within the community itself. Responses to the question regarding the determination of project content and messages are reflected in Table 9 below.

TABLE 9: DETERMINING CONTENT AND MESSAGES

Content Frequencies

	Responses		Percent of Cases
	N	Percent	
\$content ^a Content determined by funders	13	20.0%	39.4%
Content determined by other experts	4	6.2%	12.1%
Content determined by my organisation	23	35.4%	69.7%
Content determined by gate-keepers in cmtly	5	7.7%	15.2%
Content determined by cmtly participants	20	30.8%	60.6%
Total	65	100.0%	197.0%

a. Dichotomy group tabulated at value 1.

Four respondents (12.1% of cases) state that other outside experts determine the messages and content of their interventions. 13 respondents (39.4% of cases) note that the project funders determine these. This provides evidence of significant interference by funders in determining the messages and content of TFA projects. Given the nature of the work, as addressing a public health crisis, and the fact that HIV and AIDS are a massive priority for many global funders, this result is not surprising.

23 of the survey respondents (69.7% of cases) state that their own organisations determine messages and content for their projects. This is further evidence of top-down communication in TFA practice. However, further data reflects that organisations do make decisions regarding content and messaging in consultation with local communities. A significant number of 20 respondents (60.6% of cases) state that the community participants determine the content of the projects. This provides evidence of the more democratic communication favoured in participatory development. Just five respondents (15.2% of cases) note that content and messages are determined by local gate-keepers, which is indicative of the development-support approach.

Organisations may feel that this outside expertise is necessary to provide technical information regarding HIV and AIDS. Projects based on locally appropriate messages, particularly with relation to contested issues such as HIV and AIDS, are more likely to have resonance within the local community. There is some evidence that local knowledge is more widely used in TFA practice, where community participants input into the message-making processes. This is indicative of the action-media model advocated by Parker (1997).

Participation in determining the medium for the projects

Determining the medium for development projects is another area where community members can be involved in the participatory approach. Although there are strong arguments supporting the benefits of using theatre to address HIV and AIDS issues, there may be times when a theatre performance is not the most appropriate medium. Responses to the question regarding the selection of the project medium are reflected in Table 10 (overleaf).

TABLE 10: DETERMINING THE MEDIUM

Medium Frequencies

	Responses		Percent of Cases
	N	Percent	
\$medium ^a Medium for projects determined by funders	5	9.8%	15.2%
Medium for projects determined by other experts	5	9.8%	15.2%
Medium determined by my organisation	26	51.0%	78.8%
Medium determined by gate-keepers in cmt	1	2.0%	3.0%
Medium determined by cmt participants	14	27.5%	42.4%
Total	51	100.0%	154.5%

a. Dichotomy group tabulated at value 1.

Equal numbers of five respondents (15.2% of cases) each note that the medium for their projects is determined either by their funders or other outside experts. This suggests a low level of outside input into the medium selection. Only one respondent reported that local community gate-keepers have a say in determining which medium is used in their projects.

A significant number of 26 respondents (78.8% of cases) note that it is their own organisations which decide that theatre should be the medium used for their projects. As these are predominantly theatre organisations, this result is to be expected. However, the local community is not always consulted on this use of the medium, and therefore may feel that this is forced on them in a form of manipulative cultural engineering.

Only 14 respondents (42.4% of cases) report that the medium of theatre is chosen by local community participants. Although less than half of the surveyed practitioners include members of the community in this decision, this figure does suggest that there is a consciousness regarding the inclusion of project beneficiaries in selecting the most appropriate medium for communicating about HIV and AIDS.

Participation in training the community participants

Long-term sustainable projects are more likely to ensure that capacity is built in the local community so that the project can continue once the implementing organisation has left the area. To investigate how this local capacity is built, the questionnaire asked respondents to note who trained the participating community members. Responses to the question regarding the training of participants are reflected in Table 11 below.

TABLE 11: PARTICIPATING IN TRAINING

Training Frequencies

		Responses		Percent of Cases
		N	Percent	
\$training ^a	Participants in projects trained by funders	1	2.4%	3.1%
	Participants in projects trained by other experts	5	12.2%	15.6%
	Participants trained by my organisation	29	70.7%	90.6%
	Participants trained by gate-keepers in cmt	4	9.8%	12.5%
	Participants trained by cmt participants	2	4.9%	6.3%
Total		41	100.0%	128.1%

a. Dichotomy group tabulated at value 1.

Five respondents (15.6% of cases) use outside experts to build this capacity. While a reliance on outside expert knowledge is criticised by Freire (1983), there are cases, particularly in health-related matters, where outside experts may have particular knowledge that is useful for the local community. Only one respondent (3.1% of cases) noted the use of funders to train local participants.

A high number of 29 respondents (90.6% of cases) noted that project participants were trained by their own organisations. This suggests that many of these organisations play a training and capacity building role in the communities in which they work, which may promote greater development than a project co-ordination or awareness-promotion role.

Four respondents (12.5% of cases) reflect that they make use of local gate-keepers within the community to train other participants, indicative of the development-support approach. This may be a useful strategy as the knowledge passed on is locally generated. However, the gatekeepers may be people with positions of power within the community, and this could hinder the development of others. Just two respondents (6.3% of cases) reflect that local community members train other participants in the manner of peer education. While peer education may be reminiscent of development-support, it also has the potential to be more participatory than other training processes, in that it encourages participants to negotiate and communicate amongst themselves.

The relatively low incidence of this reflected in practice may be indicative of the lack of capacity and relevant skills amongst the community in which the projects are based, and may point to a need to address this to ensure that projects can be more locally based and empowering.

Participation in conducting the research for projects

Prior research into the audience and the topic under discussion may make for more effective theatre. Where participants are drawn into researching the topics that inform the theatre projects, they may gain greater knowledge and skills. In the true sense of developing critical consciousness, this research phase should involve problem-posing, so that participants come to an understanding of the roots of the problems faced.

As well as understanding the problem better, being involved in research into the audience may give the participants insight into how the problem is conceived in their own community, and they can become aware of the barriers to change and development. Participation at this level of research may be the most significant factor leading to the development of this critical consciousness and the resultant empowerment for participants. Responses to the question regarding the participation in research are reflected in Table 12 (overleaf).

TABLE 12: PARTICIPATING IN RESEARCH

Research Frequencies

	Responses		Percent of Cases
	N	Percent	
\$resech ^a Research for projects done by funders	1	2.1%	3.0%
Research for projects done by other experts	7	14.6%	21.2%
Research for projects done by my organisation	31	64.6%	93.9%
Research done by gate-keepers in cmty	2	4.2%	6.1%
Research done by cmty participants	7	14.6%	21.2%
Total	48	100.0%	145.5%

a. Dichotomy group tabulated at value 1.

The data shows a high number of 31 of the 34 surveyed respondents (93.9% of cases) stating that research for their projects is done by their own organisations. This shows a high level of capacity and involvement by these organisations when compared with the relatively low number of seven respondents (21.2% of cases) who rely on outside experts for this research, and just one respondent who relies on the expertise of funders for this.

A small number of seven respondents (21.2% of cases) note that the community participants are part of researching the subjects for the TFA projects. This appears to be a wasted opportunity for involving participants in a meaningful way to understanding HIV and AIDS issues and to researching the conditions in their community that give rise to the epidemic. Greater involvement in these processes could encourage these participants to work out their own solutions to these problems.

Participation in writing the plays for projects

Drawing community participants into the writing of the plays for performance can ensure that the meanings generated through the theatre are locally appropriate, can generate recognition, and can build a sense of identity for the audience. These feelings can

develop a sense of community and collective efficacy that helps a community to bring about change and development for itself. Responses to the question regarding participation in script writing processes are reflected in Table 13 below.

Where community members are involved in the creation of the plays in TFA projects, there may be a greater reliance on appropriate local knowledge and culture in addressing the issues at hand. However, just 17 respondents (58.6% of cases) make use of this strategy. The more common scenario is that the intervention organisation writes the plays for the community participants. 22 respondents (75.9% of cases) state that this is their preferred strategy.

In only one instance was the phenomenon of gate-keepers writing the plays for the community reported. Just two respondents (6.9% of cases) noted that this script-writing process was handled by outside experts. The lack of reliance on outside experts points to capacity within the surveyed organisations to play this role. Previous data gathered showed that most of the surveyed practitioners see themselves as both theatre and development practitioners, so this is not surprising.

TABLE 13: WRITING THE PLAYS

Writers Frequencies

	Responses		Percent of Cases
	N	Percent	
\$writers ^a Plays for projects written by other experts	2	4.8%	6.9%
Plays for projects written by my organisation	22	52.4%	75.9%
Plays written by gate-keepers in cmt	1	2.4%	3.4%
Plays written by cmt participants	17	40.5%	58.6%
Total	42	100.0%	144.8%

a. Dichotomy group tabulated at value 1.

Participation in performing in the plays for the projects

Where local community members participate in theatre, the watching audience recognises these people and may associate themselves more readily with the messages encapsulated in the performance (Mavrocordatos, 2003). While this is a participatory practice, it can be manipulated to be indicative of the modernisation approach, where the community actors simply perform in a pre-written play based on messages from outside the community. It is also a strategy commonly used in development-support communication, where local people are selected to pass on messages that will be more palatable because they appear to come from the performers as representatives of the community. This practice is only truly indicative of the participatory approach to development when participation in the performance is combined with participation in the creation of the performance. Responses to the question regarding participation in performances are reflected in Table 14 below.

TABLE 14: PERFORMING IN PLAYS

Performance Frequencies				
		Responses		Percent of Cases
		N	Percent	
\$perfm ^a	Plays for projects performed by other experts	2	4.5%	6.3%
	Plays performed by my organisation	18	40.9%	56.3%
	Plays performed by cmtly participants	24	54.5%	75.0%
Total		44	100.0%	137.5%

a. Dichotomy group tabulated at value 1.

The primary strategy for many TFA projects is to involve local community members in performance. The survey revealed this to be the case, with 24 respondents (75% of cases) noting that community members performed in the plays that made up their projects. 18 respondents (56.5% of cases) noted that the plays that they use in their projects are performed by members of their own organisations. While this again points

to capacity within these organisations, this practice is reflective of TIE practice, where an educational message (usually pre-determined) is presented to an audience of the community members. If this is a common practice amongst TFA practitioners, then many community participants are only participating as audience members, or perhaps as 'spect-actors', but may not be exposed to the other benefits of participation.

Just 2 respondents (6.3% of cases) note that they use professional actors in their projects, which may result in a more professional end-product that has impact on the watching audience, but is not participatory in any other way.

Participation in monitoring and evaluation for the projects

Programme monitoring involves the examination of a programme's implementation activities and administration. Programme evaluations measure if the goals and outcomes set for a project were achieved and how well, and if it has had the desired impact on the target group. These monitoring and evaluation processes tend to be seen as a management function, with the aim of providing programme managers and key stakeholders with feedback and ways to improve their projects.

Involvement of members of the target community in monitoring and evaluation activities can build a sense of ownership and accountability for a project. It also builds practical and analytical skills amongst the group that can contribute to both personal and community development. If community participants are involved particularly in the evaluation processes, they may gain a greater understanding of change and development and how it works in their own context, as well as developing a consciousness of what problems hinder the project and their own development. Responses to the question regarding participation in monitoring and evaluation are reflected in Table 15 (overleaf).

TABLE 15: MONITORING AND EVALUATION

Evaluation Frequencies

	Responses		Percent of Cases
	N	Percent	
\$evluatn ^a M+E for projects done by funders M+E for projects done by other experts M+E for projects done by my organisation M+E done by gate-keepers in cmtly M+E for projects done by cmtly participants Total	8 11 29 8 13 69	11.6% 15.9% 42.0% 11.6% 18.8% 100.0%	24.2% 33.3% 87.9% 24.2% 39.4% 209.1%

a. Dichotomy group tabulated at value 1.

Most of the monitoring and evaluation reported by the surveyed TFA practitioners is conducted by the intervention organisation itself, with 87.9% of the respondents noting that this is the case. A third of the respondents (33.3%) use outside experts to conduct monitoring and evaluation, and 24.2% report that this is done by their funders. While this ‘expert’ opinion on monitoring may help to improve programmes, the involvement of these parties does not encourage development within the target group.

Just under a quarter (24.2%) of the respondents note that gatekeepers within the community conduct monitoring and evaluation activities. This suggests that the community has some stake in the projects and that the experiences and lessons learned from evaluating projects may remain with that community. 39.4% of the respondents note that monitoring and evaluation activities are conducted by the community participants themselves.

The low percentage of respondents that involve community participants in this aspect of their projects is indicative of a lack of full involvement in the organisational processes of their projects. This may suggest a paternalistic approach to development, where community participants are not seen as equal partners in the process of the projects.

Receiving copies of the documentary evidence of projects

Keeping documentary evidence of the projects, including video footage, photographs and reports is part of the monitoring process of many TFA organisations. This is often a requirement of funders, and must be provided as proof of work done. Organisations also use these documents for publicity and to access future funding. Having access to documentary evidence of their involvement in projects may be a source of pride for project participants, as well as allowing them to understand the process that they have been through. This insight can increase the potential for this process to impact on their lives and those of others, thus enhancing development. Responses to the question regarding the retention of documentary evidence are reflected in Table 16 below.

TABLE 16: KEEPING THE EVIDENCE

Evidence Frequencies				
		Responses		Percent of Cases
		N	Percent	
\$report ^a	Project reports/evidence received by funders	26	29.2%	78.8%
	Project reports received by other experts	10	11.2%	30.3%
	Project reports received by my organisation	26	29.2%	78.8%
	Reports received by gate-keepers in cmtly	10	11.2%	30.3%
	Project reports received by cmtly participants	17	19.1%	51.5%
Total		89	100.0%	269.7%

a. Dichotomy group tabulated at value 1.

An equal percentage of cases (78.8%) of the surveyed practitioners reports that documentary evidence is presented to funders or retained by their own organisations. 30.3% of cases present this evidence to other outside experts. In a similar sample of 30.3% of cases, reports and other evidence are given to community gate-keepers who are recognised as key stake-holders in the project. This is a small percentage, but suggests that some organisations do in fact ensure that this memory of projects is retained by the community.

Just over half of the cases (51.5%) note that the community participants themselves have access to these archives. This notes a greater acknowledgement of the community as partners in the project, and is a recognised ethical practice. However, as only just over half of the projects report that this is common practice; we can surmise that the other projects leave a community *without* leaving this evidence, which may reduce the long-term impact of the project.

Involvement in the project by community participants

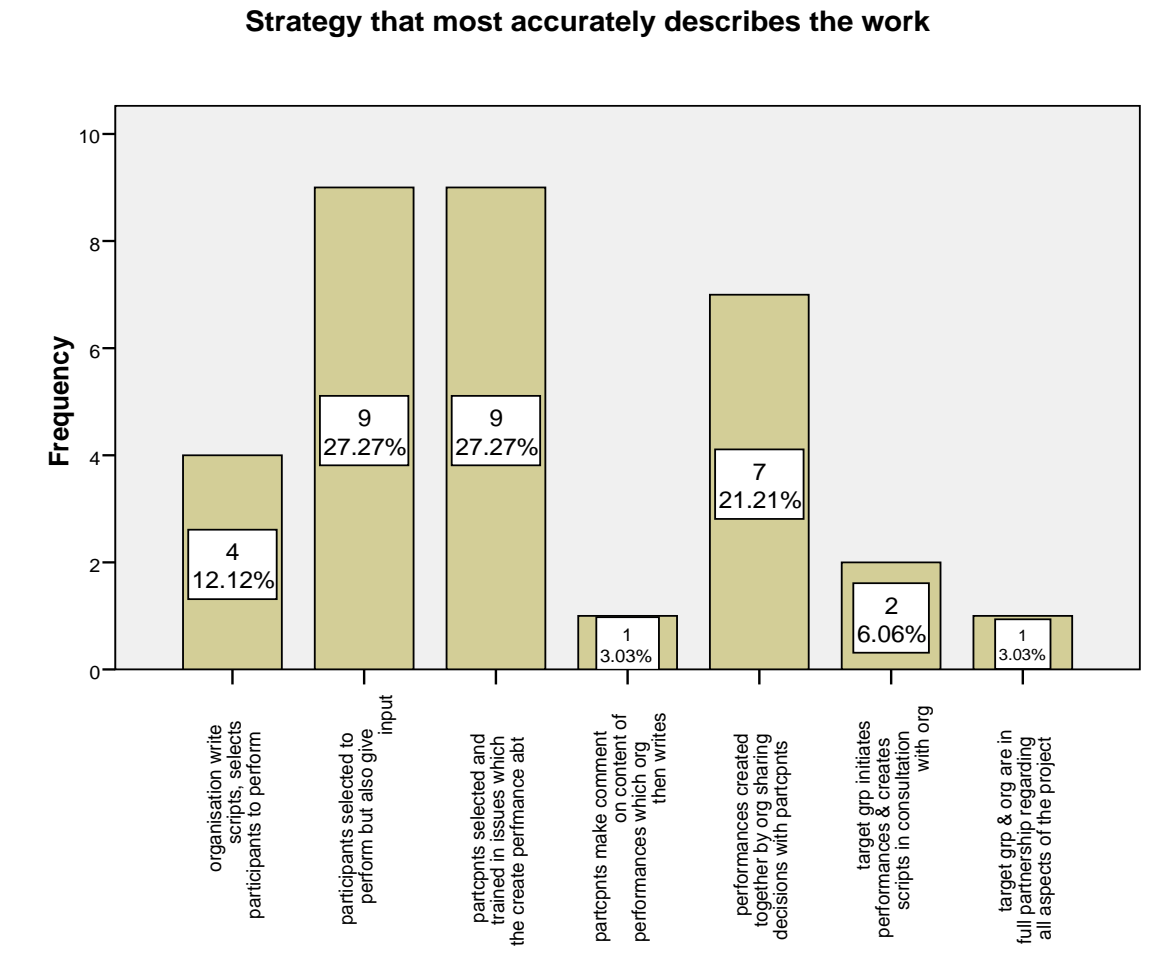
Respondents were asked to define how community participants were involved in their projects, according to eight categories. These categories were designed based on an analysis of Arnstein's (1969) ladder of participation which led me to develop a scale of participation particularly related to theatre for development projects (see Chapter 4).

Respondents were asked to choose one or more options from the following strategies that reflected how participants were involved in their projects:

- Participants are selected to appear in performances based on scripts that are written by my organisation;
- Participants are selected to appear in performances in which they have some input;
- Participants are selected and trained in issues about which they create performances;
- Participants make recommendations about the content of performances which are then written by my organisation;
- The performances are created together by my organisation sharing decisions with the participants;
- The performances are initiated and created by the participants and all decisions are made by the group on their own;
- The target community initiates performances and creates scripts in consultation with my organisation;
- The target community and my organisation are in full partnership regarding all aspects of the project.

The responses regarding the participatory strategies employed by participants are reflected in Table 17 below.

FIGURE 17: PARTICIPATORY STRATEGIES IN TFA PRACTICE



While a previous question reflected that 60.6% of the respondents' projects involved community participants in determining the content of their plays, this part of the questionnaire provides various options for respondents to note more specifically how participants are involved.

Four respondents (12% of cases) noted that participants were selected to appear in performances based on play-scripts that were written by their own organisation. This suggests that participation happens only in the process of performing the theatre; and dialogue may be limited to discussion about the play and to a smaller extent the issues that make up content of the play. Participation at this level alone may build knowledge and skills but cannot be expected to be empowering.

Nine respondents (27% of cases) noted that participants were selected to appear in performances in which they have some input. This process suggests a greater level of dialogue which can result in greater personal involvement and empowerment. Involvement at this level is more than double the number of cases of involvement purely at the level of performance among these respondents, and is a positive sign that TFA practice does allow for dialogue.

A similarly sized group of nine respondents (27% of cases) note that community participants are selected and trained in issues about which they create performances. This process focuses more on building skills and knowledge amongst the group of participants. It may also ensure that projects are more sustainable, as local people are left with capacity both regarding the content of the theatre and the skills to create their own plays in the future.

Participants make recommendations about the content of performances which are then written by their own organisation. This strategy allows for input by members of the target community, which is indicative of the opening up of dialogue, but this may be tokenistic and does not necessarily build skills and bring about development.

Seven respondents (20% of cases) noted that their predominant strategy was to create performances together, with the community participants sharing decisions with their organisation. This phenomenon of power-sharing places greater responsibility in the hands of the community participants, and may involve them to a greater degree in determining the outcomes of the intervention and ensuring its efficacy.

None of the respondents noted that the projects worked on involved performances that were initiated and created by the participants where all decisions are made by the group

on their own. This strategy is typical of community generated theatre, and we can surmise then that the respondents do not work in this way, but concentrate on working on interventions in which they have greater input into the work that they do with the target community.

Only two respondents (just 6% of the sample) noted that the target community initiates performances and creates scripts in consultation with their organisation. This suggests that the relationship between the outside organisation and the community regarding TFA may be dominated by the catalyst organisation driving the theatre. There may be a number of reasons for this, including issues around funding and access.

Just one respondent (3% of the sample) noted that the target community and their organisation were in full partnership regarding all aspects of the project. If we recognise that this is the highest level of participation and power-sharing, which Arnstein (1969) argues should be aspired to, then the data reflects that this ideal is rare in contemporary practice.

There may be a number of reasons for this that cannot be surmised from the data collected in the questionnaire. Further qualitative research with this group of respondents may have been useful to shed more light on the challenges and obstacles to encouraging maximum participation in TFA projects.

A summary of the survey findings

In summary, the collected data from this survey provides evidence that supports the following findings:

- Most TFA practitioners (58.8% of the surveyed sample) see themselves as both theatre and development practitioners.
- Most TFA practitioners (67.74% of the surveyed sample) note that the process of participation and the end product of the performance are equally important in their interventions.
- The largest percentage of surveyed TFA practitioners (38.24% of the sample) makes use of theatre through using role play and other improvisation techniques in their projects. Fewer (29.41% of the surveyed sample) use workshopped plays, and fewer still (20.59% of the surveyed sample) use previously scripted plays. A small minority (11.76% of the surveyed sample) use other drama games and activities.
- The majority of TFA projects (42.42% of the surveyed sample) are short-term interventions, lasting just one month or less. Less than one quarter of the projects run between two and six months (24.24% of the surveyed sample), and one third (33.33% of the surveyed sample) are more long-term ongoing projects.
- Most TFA practitioners (58.82% of the surveyed sample) deliberately apply theory to their projects. Some apply this unconsciously (29.41% of the surveyed sample), and a small percentage (11.76% of the surveyed sample) apply no theory at all.
- The most commonly applied theory in TFA projects is participatory theory, based on the works of Paulo Freire (78.1% of cases). More than half of the respondents base their work on theatre and performance theories (56.3% of cases). Communication for development theory and behaviour change theory inform projects in less than half of the cases (43.8% and 37.5% respectively). Audience reception theory is the least common theory amongst those listed (21.9% of cases).
- Most practice in TFA involves spreading awareness about an issue (71%). In 61% of cases, TFA is designed to bring about behaviour change with a target

- group, indicative of the modernisation paradigm to development. Just over half of TFA practitioners (58.1%) consult the group about the issues at hand.
- In 12.9% of cases the development messages are predetermined and local in-groups are used to pass these along, in the style of development support communication, based on the diffusion of innovations theory.
 - Only 29% of the respondents state that their work involves partnering with the target community. In 38.7%, participants are involved in decision-making and management decisions with regard to the project.
 - Community participants are involved in most of the project in a range of different ways. In only 47.1% of cases are participants in the projects selected by the target community. In 69.7% of cases, the goals for the project are determined by the community participants. In 60.6% of cases, the content for the plays is determined by these participants, but the medium of theatre is only selected in 42.4% of cases by the participants themselves. In all other areas, the implementing organisation is the primary decision-maker for the projects.

The responses to these questions on participation at different levels reflect that the TFA implementing organisations play a major role in projects in local communities, and that the power, skills and expertise required for these projects are centralised in these outside catalyst organisations. While it is clear that efforts are being made to draw in community participants at different levels of the projects, the data reflects that participants are involved to a lesser degree than the catalyst organisation at all levels of the interventions except to some extent in the creation of performances, and to a greater extent in the performances themselves.

Most TFA projects involve community participants who are drawn in to perform in a medium predominantly determined by the outside organisation and with messages on a subject that is determined most often by the outside organisation and by funders. This is indicative of the modernisation paradigm to development communication. Although the majority of the surveyed TFA practitioners report that their work is informed by the participatory theories of Paulo Freire, when measured against Arnstein's model of participation, the data shows that these interventions remain in the realm of first generation entertainment education, passing pre-determined messages about HIV and AIDS to a target group. Where the TFA practitioners make use of local gate-keepers

and hand-selected individuals from the target community to participate in their projects, this is indicative of the second-generation of EE practice.

However, the data contradicts expectations regarding how modernisation and development-support communication practices are applied, as a high percentage of the surveyed organisations say that the goals for their projects are determined by the community participants in conjunction with the catalyst organisation. This is indicative of a more participatory approach to development, where it is understood that the community knows best what they need in order to address the problems that they face.

While third generation EE relies on participatory strategies, these strategies can be applied in ways that are not always empowering. Participatory EE projects may encourage participation that is viewed by Arnstein (1969) as manipulative, as participants are drawn into projects where they do not have full control of all decision-making processes. The extent to which this kind of limited participation can bring about empowerment is explored in more detail in the following chapter, with the investigation of three case studies.

CHAPTER 10: RESEARCH RESULTS – THE CASE STUDIES

This chapter looks at three specific case studies of TFA practice, with which I have worked over a period of time. Data was collected for the qualitative component of this study through three different methods. The project manager of each of three selected TFA projects was asked to fill in a questionnaire, so that the results of this could be compared with the norm established in the broader practitioner survey. Semi-structured interviews were then held with each project manager, and a separate focus group discussion was facilitated with project participants from each of the projects.

Each case study is presented individually below, and then conclusions are drawn, based on the overall trends observed in the three projects. I start by explaining the origin and purpose of each project, based on my own reports and notes from working with them, and from reports generated by the organisations that manage the three projects. I then go on to present the data collected from the project managers and the participants, which is arranged according to five areas based on two hypotheses from my own thesis, as follows:

Hypothesis 3: Practitioners who ensure that their work is participatory are likely to achieve greater success in bringing about development and social change in the communities in which they work.

Hypothesis 4: Participants in inclusive participatory theatre projects are likely to feel a sense of empowerment through their involvement in the projects.

The areas presented for discussion include: the project rationale, goals and strategies; the standard of the performances; the reception of performances; the level of participation and related potential for empowerment amongst participants; and the potential for project to bring about development and social change for the broader community. The responses to the questionnaires and the project manager interviews are integrated with the results from the focus group discussions within these five key areas. The collected data is presented and discussed in this chapter and further analysis and conclusions are presented in the following two chapters.

Case Study 1: The Sinolwazi Drama Club

Project background

The Sinolwazi Drama Club is a project that was initiated by the South African Clothing and Textile Workers Union (SACTWU) AIDS project in KwaZulu-Natal in 2004.

SACTWU is South Africa's largest trade union, and organizes textile and clothing workers as well as footwear, leather and retail workers. SACTWU members form part of the economically active population of South Africa that has been identified as being the hardest hit by the HIV and AIDS epidemic. Many of SACTWU's members are weekly paid or blue collar workers, and this sector is considered to be one of the lowest paying industries in South Africa (SACTWU, 2009). This places SACTWU members at the lower levels of the socio-economic ladder, and as such they are particularly at risk of HIV infection.

To this end, the trade union initiated the SACTWU AIDS Project in 1998 to assist its members. The project has a comprehensive training programme, provides in-house voluntary counselling and testing services (VCT) and in many areas provides access to a social worker, provides clinical services and home based care.

SACTWU has a strong tradition of cultural activity, especially during the apartheid era, where drama, poetry and song were used as a form of protest, and the union was recognised for its powerful worker theatre (SACTWU, 2009). Building on this tradition, the decision was taken within the union to initiate the Sinolwazi Drama Club in 2004. The initial development of the drama club was funded through the German development organisation, InWent.

As a TFA practitioner and consultant, I was contracted by InWent to audition and train five individuals in theatre and performance skills. I was also commissioned to write a series of five original play scripts (the series has now expanded to seven scripts), which sees the same group of characters dealing with a range of aspects related to HIV and AIDS, and to direct the group of workers in these plays. These plays would then be performed in factories within the clothing and textiles sector.

The Sinolwazi Drama Club participants were recruited through advertising posters which were placed around the SACTWU building in Durban, and sent to factories within the industry, calling for recently retrenched workers. The advertisement also appeared in the union's *Isolezwe* newspaper. Requirements were that applicants should be retrenched SACTWU members, fluent in both English and *IsiZulu*, and have a desire to perform AIDS plays. All of those who had attended the auditions had some interest in drama, although none had any experience other than appearing in school plays as children, or singing in their local church choir. From more than 80 applicants, five were selected to participate in the project.

The audition process reportedly gave the successful applicants a great deal of confidence, and they referred to it throughout the rest of the project, re-assuring themselves that they must be talented as they had been chosen over so many other hopefuls. In this experience, the selection of individuals for involvement in a project, although perhaps contrary to the ethos of participatory development, is an individually empowering process for the selected individuals.

The performance training of the Sinolwazi Drama Club participants was sustained over a relatively long period of time. An initial training period of two weeks of daily workshops was followed by one-week workshops and rehearsals for each of the different plays. Other training for the participants was conducted in-house at SACTWU, and included a broad range of topics related to HIV and AIDS, with the aim of enabling the participants to act as peer educators. Skills development included project management, critical thought, self-driven learning and (for some) driving. This training was provided by professional nurses, counsellors and educators. This transfer of skills took place over a period of more than six months, making it time-consuming and costly. Costs notwithstanding, this investment in capacity building arguably results in the development of a team that is more empowered, and better able to sustain itself into the future.

After an intensive rehearsal period in 2004, the drama group went on to perform in more than 100 factories and to more than 15 000 workers around KwaZulu-Natal (SACTWU, 2009). Over the six years since the project's inception, there have been changes to the original grouping of performers, and as to how the project is structured. Some of these changes have been forced by budget cuts to the project, and have resulted in two

members leaving to find more secure employment. One of the most promising of the original members of the group sadly passed away in 2006. The group is now made up of four members, only two of whom were part of the original group.

The group is based in Durban, and works throughout the Ethekewini region, as well as in other areas in KwaZulu-Natal when invited to do so. Their work has now expanded from clothing and textile factories to include other workplaces, communities and schools.

The seven plays that the Sinolwazi Drama Club performs are each based around one particular issue related to HIV and AIDS. These seven issues were decided on by the SACTWU AIDS Project, and include: HIV transmission and protection, including the use of condoms; voluntary counselling and testing for HIV (VCT); HIV in the workplace; mother-to-child transmission; anti-retroviral treatment; tuberculosis and HIV; and youth issues related to HIV.

The plays revolve around six core characters: two women who work in a garment factory, their two daughters, the boyfriend of one of these girls, and the factory manager. These characters were created to be instantly recognisable to the audience, and are placed in situations that the audience will be able to relate to. The plays rely strongly on humour to carry serious messages around HIV and AIDS.

The project rationale, goals and strategies

The manager of the SACTWU AIDS project reports that the motivation behind making the project participatory was to draw workers in to performances that the rest of the factory-worker audience could relate to.

They actually understand the community so much better and they get to a workplace ... they can relate to what is happening at the workplace, they can identify ... as to what they are doing and why.

Interview 1, 2010.

The rationale behind the project is related to the concept that those based in the community are best-placed to address the problems faced by that community. This is

one of the key tenets of participation. However, in the case of the Sinolwazi project, participants are involved only in the performance of plays, and not in the creation of the performances, and this local knowledge is therefore not being utilised to its full capacity.

Although used to a lesser extent in the drama project, the project manager notes that the ideal of participation is reached through their other programmes, such as using home-based carers and lay counsellors who are ex-factory workers.

The project makes use of participatory strategies. The project manager mentioned that theory is unconsciously applied to their projects, but could not pinpoint this theory. As the consultant script-writer on this project, I can confirm that audience reception theory and theatre theory informed my own work on the creation of the scripts for the project. The strategy to draw workers into performances is further related to social learning theory, suggesting that those watching the performances can identify with those on stage, and may be able to see a reflection of their own lives and problems in the performances.

Although this was key to the envisioning and creation of the project, the project manager responded that it was unlikely that the performance participants themselves had more or less influence on the audience, and that she felt that the content of the message they took with them was more important than who carried that message. She commented that not all audience members were aware that the performers were SACTWU members, drawn from their own worker community. The project is therefore indicative of first generation EE, and modernisation, with an emphasis on spreading a message from a central source to bring about behaviour change, rather than engaging the community in dialogue.

Participation in the project

With regard to the level of participation in the projects, the organisation itself (SACTWU AIDS Project) determines the goals for the projects, determines who participates, the content and message, and the medium for the projects. For most TFA projects the implementing organisation is an outside group, and is seen as a catalyst for bringing about change within a community of 'others'. The fact that SACTWU is a trade union

based in the target community and that projects are created through democratic processes, suggests that the fact that the co-ordinating organisation makes these decisions is more participatory than if the decisions come from an outside organisation.

The Sinolwazi project only makes use of outside experts (in this case, myself) for training project participants and for the scripting of plays for performance. Only 6.9% of cases of the other surveyed TFA projects reported this use of experts, and so this project can be seen as an unusual example.

The Sinolwazi project reflects that it works with specific in-groups (the selected workers) to pass pre-determined information to the community. Only 12.9% of cases of the other surveyed TFA projects report that they use this strategy. The project also notes that it focuses on encouraging behaviour change and spreading awareness within the target group of factory workers, and as such is aligned with the majority of 61.3% and 71% respectively of the other surveyed TFA projects.

Where a small percentage of 25.8% of the surveyed TFA projects reported that they hand-select individuals for participation in their projects, this is the strategy employed by SACTWU. This suggests that the Sinolwazi project is less participatory than other projects in which the participants are selected by the target group themselves. While 58.1% of other TFA projects consult the target group about issues of their concern, the Sinolwazi project does not, reflecting a more top-down approach to communicating about HIV and AIDS issues.

This top-down approach is not applied to the management of the project. Participants in the project are drawn into managing the project, in an attempt to develop the relationship between SACTWU and the Sinolwazi Drama Club as a partnership. However, the project manager reports that this has not been entirely successful, due to the individual personalities within the group.

The project participants reflect this slightly differently, suggesting that they manage the day to day decisions regarding where to perform and when, but that other decisions for the project are made by the SACTWU AIDS Project without them.

The project participants report that:

They make those decisions at the top, and we just have to follow

Respondent 2, FGD 1, 2010.

However, the group reported that they did feel that they themselves were ultimately responsible for the success of the project, and for its sustainability, and felt that they were the people best placed to do this work:

You see, the people in the office they stay in the office, and we go out educating the people and reaching out to the people who need our help. We pass on what we know.

Respondent 2, FGD 1, 2010.

The participants feel that this ability to reach other people is because of a combination of their particular learned skills, and the fact that they are drawn from the target community itself. Further responses noted that “we know what they need” (Respondent 3, FGD 1, 2010), and “we are closer to the people than what they are, so we know them” (Respondent 2, FGD 1, 2010); suggesting that because the participants are drawn from the target group that they can be more effective.

What became apparent through the research process is the existence of tensions between the group of participants and the project manager and other management within the organisation. This seems to hinder a productive partnership that may make for a more effective and empowering project.

In an attempt to understand why people were motivated to join the project, the focus group participants were asked about their reasons for participating. Three of the four respondents replied that it was out of curiosity and a desire to find out more about HIV and AIDS for themselves.

People were just getting sick we didn't know why. But by the end of the day they died. And then this project helped. Before when friends and family passed away we didn't know why. And when I was called to come to a workshop on HIV and AIDS awareness that was the time I woke up and said "oh what is this" and I was so happy to go. Then I came here. Then I became so keen to help people. And I continued in a way to educate others a lot ... and I carried on, and at the end of the day I was serving the community, our SACTWU people.

Respondent 3, FGD 1, 2010.

This individual response reflects the overwhelming feeling expressed by all the participants that they became involved to educate both themselves and others about HIV and AIDS. Only one respondent said he was drawn to participate because of the element of drama, and that it allowed him to fulfil his dream of being an actor; however, he later mentioned that this motivation was secondary to that of educating others.

The standard of the performances

While most of the surveyed TFA projects report that project participants have some input into the content of the performances (27.27%), are trained to create their own performances (27.27%), or share decision-making regarding performances (21.2%), these participatory practices are not employed in the Sinolwazi project, where participants are drawn in to perform plays written and directed by outside experts. This use of outside experts should mean that the plays have the potential to be more effective, as they are specifically created with the dramatic elements that will have maximum impact on an audience. A well-crafted play might be of a high artistic standard and therefore more engaging for the audiences, depending on the skill of the performers.

The project manager felt that the project aimed to create theatre of a high aesthetic standard, within the constraints of using amateur actors drawn from the target community of clothing workers. However, she reports that the strategy of using local people as participants is not successful in this case. She believes that this is a reflection on the team who is working on the project, suggesting that there is a lack of passion for the project amongst some members of the group. When questioned about the possible reason for this, the project manager suggests that it is the individuals involved, rather

than a flaw in the design of the project, and that the problem was with the attitude of some of the participants, rather than their skills.

The project manager reports that the group's performances are lacking in passion, and that over the course of the project this has become obvious, suggesting that "they are looking worse and worse" (Interview 1, 2010). She suggests that using different people from within SACTWU would "make a huge difference". She compares performances of the Durban-based project to a group in Cape Town, where factory workers have volunteered to create their own AIDS plays:

They have their in-house drama team, they do stuff at the factory, and they did stuff for World AIDS Day. They got the audience singing and clapping their hands. I mean the acting was appalling, but they were so passionate about what they were doing and I think that's what I find is missing.

Interview 1, 2010.

In contrast to this, the participants themselves report that they *are* passionate about their work, and are dedicated to the issues of HIV and AIDS and to passing information along and to "helping people". They report that they have the necessary skills to make an impact with their performances, and that they have developed a good reputation for their performances, commenting:

People say: "Oh we hear about you" and the institutions, they phone us and request us to come for special occasions – so they know we can reach them and it is a success.

Respondent 1, FGD 1, 2010.

The reception of performances

The project manager reports that she has had no feedback on the audience reception of the group's performances. The participants themselves had more to offer on the reception of their performances.

The response from the people it makes you feel that you really have an input, that you are contributing in the society. And judging from the response that you get from the people, it's very encouraging for us to go further.

Respondent 4, FGD 1, 2010.

The participants' enthusiasm for their work, and their acknowledgement that people are seeking their services suggest that the performances have been well-received by their audience. Although a formal reception study has not been conducted into the reception of the plays, I did conduct audience interviews early on in the project. These interviews suggested that the audience found the plays highly entertaining, as well as informative, and that they opened up space for the audience to ask questions and further discuss the issues raised in the plays (Durdan, 2005).

The level of participation and the potential for empowerment amongst participants

The project manager reports that she has not seen evidence that the group has been empowered through the project, and that they do not have the drive to do more than the bare minimum required of them to earn their salaries through the project.

I think it's just a job, for getting food on the table... we set targets and then they reach their targets and that's that. There is no idea to go to Durban and do more.

Interview 1, 2010.

The feeling from the respondents is that they cannot do more because of the bureaucracy of the organisation:

We just have to get authorisation. They are very strict with that ... (it) is quite a process to wait for their response and everything.

Respondent 4, FGD 1, 2010.

While the participants struggle with the process of the organisation, the overwhelming feeling from the project manager is that of despondency with a project that has not met expectations, and which she feels cannot be revitalised with the current participants. This is perhaps a problem exacerbated through the employment of individuals.

The four performers who participate in the Sinolwazi Drama Club are employed and receive a monthly payment for reaching targets, set in conjunction with the project manager, based on a certain number of people to be reached through their plays over the course of a month. This status of participation as employment means that the participants may lose interest in the project but do not leave it, as it is an income-generating opportunity for them. Remaining within the structures of the project, however flawed, may be preferable to the alternative of unemployment.

The alternative to this might be to use volunteers in the project, but the project manager feels that this too has its drawbacks.

Sometime it works and sometime it doesn't. One person doesn't pitch because they are a volunteer and they have had too much to drink the night before and then none of them can get it off the ground. So you know, sometimes and sometimes not...

Interview 1, 2010.

In my own observations from working on this project since 2004, the project initially generated a great deal of interest amongst the participants. Because of the internal changes in the composition of the group, and the self-appointment of one inappropriate

individual as the group leader, the group is now characterised by dissatisfaction with their work and with the structure of the project.

When questioned about what might improve the project for the participants, one responded that a solution might be:

If the SACTWU workers health programme would be like a team to us. But now they treat us like outsiders, like we don't belong to them, which makes us feel hurt because we know we are servicing their companies too. So I think more communication ... and acceptance.

Respondent 2, FGD 1, 2010.

The participants expressed a desire to be seen as more equal partners in the project, while the project manager felt that at least one of these particular individuals is not right for the project. While the project manager doubts their skills and their growth through the project, the group of participants is very clear about how they have been empowered through it.

Without exception, the focus group participants felt that the project had increased their knowledge, and make them think differently about HIV and AIDS. When asked how they felt they had grown, most of the respondents replied that this was through their own knowledge, and their ability to talk about HIV and AIDS.

Like for instance like to know your status is very important, to be tested and be aware and then you are fully empowered to say – now if ever you are affected by the situation you are able to survive according to the information that we believe. So it has educated me very much.

Respondent 4, FGD 1, 2010.

Beyond educating themselves, the respondents felt that being part of the project had empowered them to find answers to other related questions. The group specifically referred to finding out new information regarding recent research on spermicidal gels, vaccinations for HIV and on parent-to-child transmission and infant mortality. They

commented that they gather this information from other people and other sources such as newspapers and the internet. Two of the participants reported that they did not do this before being involved in the project.

To some extent, this reported information seeking provides evidence of self-driven problem-solving, and can be seen as a success for the project in building critical consciousness amongst the participants, although this was not specifically measured.

The participants also noted increased skills in communication, with regard to communicating “with different organisations, and amongst ourselves here, our colleagues, and with different institutions” (Respondent 4, FGD 1, 2010). Another respondent suggested that this made them feel more independent and professional:

So we are aware now when speaking to different organisations this is the language that you need to use, to be professional as possible and precise.

Respondent 2, FGD 1, 2010.

A further skill that all of the respondents reported they had learnt was that of listening:

Listening skills are required. Because in most cases we ask questions from our neighbours or people from the companies and you need to be attentive so that you can understand what they say.

Respondent 4, FGD 1, 2010.

Respondents also acknowledged a growth in their own confidence, strength and personal power, particularly when addressing large groups of people, and they report that they “know how to handle situations.” The group attribute their increase in knowledge and the ability to communicate with large groups directly to their involvement in the theatre.

One respondent noted that involvement in the project had made him more responsible in his own life:

I would say that it has created a sense of responsibility within my life. Now I'm aware that most of my time I have to spend my time participating in this project. So there is a way I need to handle myself personally and also to be disciplined and to understand other people's situation. A sense of caring for other people ...

Respondent 4, FGD 1, 2010.

The respondents all agreed that participation in the project had made them care for others, and had made them stronger and more able to take control over their own lives. This suggests that agency amongst these participants has increased. This agency may assist them to make decisions in their own lives that mitigate against HIV and AIDS. The notion of caring for others may also build a sense of social responsibility within the community.

Throughout the focus group discussion, the participants reiterated that they had the necessary skills and knowledge to make a success of this TFA project, and that they could increase their output and reach a greater number of people "where we can help and talk to people" (Respondent 2, FGD 1, 2010). However, they felt that the structure and management of the project as it stood prevented this. One respondent noted "at the end of the day this demoralises us, even though we have got such an education" (Respondents 3, FGD 1, 2010). This demoralisation was felt equally by the participants and the project manager, and suggests that a major re-organisation of the project is necessary, if it hopes to be more empowering for the participants, and more beneficial for the rest of the SACTWU community.

Potential for development and empowerment for the broader community

The participants have begun to see themselves as catalysts for change in the communities in which they work. This is an ideal for participatory projects, where those that have participated and been trained in the project are able to pass on their knowledge and skills to others. However, the Sinolwazi Drama Club participants feel

hindered by organisational red tape and a lack of access to necessary resources. They feel that they need more assistance from the SACTWU AIDS Project as the organising body, to be able to travel to other areas with their performances, and to work for the greater education and development of others.

This issue points to one of the challenges to sustaining TFA projects, that of sustainability, which is often curtailed by the lack of funding and access to resources. Although they reported that they had the skills to do this alone, the participants did not feel empowered to sustain the project without the resources of the SACTWU AIDS Project.

The experiences of the Sinolwazi Drama club point clearly to a level of growth and development for the participants. The potential for building awareness and increasing knowledge amongst others in their community through their performances is apparent. However, without a formal component of building skills and agency amongst other members of their community of factory workers, I would argue that the potential for broader empowerment and development is limited.

The potential for this project to bring about greater development is discussed in more detail in the following chapter.

Case Study 2: The UVHAA Man-To-Man Project

Project background

The Man-to-Man Project is a project of the Umdoni and Vulamehlo HIV and AIDS Association (UVHAA) that is based in the rural area of Amandawe on the Kwa-Zulu Natal South Coast. The organisation exists to support people living in the region who are infected or affected by HIV and AIDS, to raise awareness, and to encourage and support behaviour change (UVHAA, 2008). The organisation has a range of different projects dealing with orphans and vulnerable children, with home-based care, and working specifically with men and boys.

Working in a rural area with high levels of unemployment and poverty, UVHAA is based in a community with a high rate of HIV infection, AIDS deaths that have a resounding impact on the local community, and a number of child-headed households.

The Man-to-Man Project encourages men to explore their cultural practices and the behaviours that may put themselves and others at risk of contracting HIV. The project predominantly involves men in lectures and workshops that are facilitated by other men from the same community, who have been trained by UVHAA. As such, this is an example of a peer education project. The particular areas that this project addresses are the role of men in the community, patriarchy, gender issues, relationships, HIV and AIDS, and the role of men in prevention, care and support (UVHAA, 2008).

An award for innovation gave a financial grant that allowed UVHAA to expand the project and to introduce the element of theatre into the programme. This involved bringing together a group of adult men and a group of younger males to work in a performance project. These distinct groups are referred to as 'the men' and 'the boys' by the project managers and in the following discussion.

As a member of the Problem-Solving Theatre (PST) Project partnership, I was invited together with three of my Zulu-speaking male colleagues to work with UVHAA to develop this project. This involved me writing a script for a play that was based on the content and issues contained in the Man-to-Man workshop programme. My male colleagues

then took this script and translated it into Zulu, and worked with the two separate groups of the men and the boys, to adapt and perform this script for their own community and in surrounding areas.

The script for this project was written around the interactions of five male characters: A traditional, older man who refuses to change with the times; the local induna (chief) who knows that change is needed and that people are counting on him for leadership; a promiscuous taxi driver; a bright and ambitious young school-boy; and his best friend, who had lost both of his parents to AIDS.

Through these five characters, the play is able to explore a number of issues around gender stereotypes, leadership, relationships and support, in the context of HIV and AIDS. The play has been performed six times to other men in the community, as well as to mixed groups of men and women at health days and other events in the group's local community and in surrounding areas. Although the men's group no longer exists, the programme managers hope that the boys' group will continue to perform at appropriate events during weekends and school holidays.

The project rationale, goals and strategies

The Man-to-Man drama project was the first time that UVHAA had used theatre in an intervention. The primary rationale to make use of drama was to harness a different and potentially exciting new methodology, and specifically to draw men and boys into the performances.

I think it is both about the play and the fact that the boys were involved, in most of the drama and HIV – the boys will not show up, but the girls will be involved, so it was nice to have boys involved and willing to do something for the community because at times they don't come out and say things, but if they are community people saying things, then their peers will listen much more.

Project Manager 2, Interview 2, 2010.

The project managers also commented that they found drama an excellent vehicle for raising issues of HIV and AIDS, where many members of their target community were not functionally literate. In addition to this, they felt that theatre might bring about a more immediate response on the part of the audience:

It is good to see things you know, and to act on them, rather than to use paper, because things concerning HIV and AIDS you only read but you don't get action on it.

Project Manager 3, Interview 2, 2010.

The project can therefore be seen to be based primarily on theatre and performance theories, as well as participatory theory as envisaged by DSC.

Participation in the project

The organisation itself (UVHAA) determines the goals for the projects as well as the content and message, the prior research, and the medium for the projects. As UVHAA is a community-based organisation, these processes are more participatory than in cases where the organisation is an outside catalyst for change.

The project reflects that it works with specific in-groups (the selected men and boys) to pass predetermined information to the community. Only 12.9% of cases of the other surveyed TFA projects report that they use this strategy.

The participants are selected by UVHAA in conjunction with local gate-keepers, making this project more participatory at the level of selection than the SACTWU project, and a range of other projects that responded to the survey. The gatekeepers in question are local nurses who work closely with UVHAA, and who are familiar with all the participants from their attendance at the local clinic and other community events. Being a small rural community, the participants were also known to most of the rest of the community.

When the participants themselves were asked why they had got involved in the project, they responded:

It was to tell other people to know about HIV and AIDS.

We were trying to teach them right and wrong.

Respondents 1 and 2, FGD 2, 2010.

These responses suggest that they chose to participate because of altruistic educational motives. However, when questioned further, both boys agreed that the only reason that they joined the project was “because it was a play” (Respondent 2, FGD 2, 2010).

The project makes use of outside experts (in this case, myself and colleagues from the PST Project) for training project participants and for the scripting of the play for performance. Only 6.9% of cases of the other surveyed TFA projects reported this use of experts, and together with the SACTWU project, this is an unusual example of practice.

The reason for this difference may be that the other TFA practitioners surveyed specialise in HIV and AIDS interventions with an emphasis on using drama, while UVHAA and SACTWU are both organisations grounded in the local community and working on a range of other issues. They might therefore feel that they require expert advice on using theatre as an unfamiliar medium for communicating about issues that they are otherwise conversant with. The content for the play and the broad issues covered were decided on by UVHAA, based on their Man-to-Man workshop programme and other work in the community.

The project focuses on encouraging behaviour change and spreading awareness within the local community, and as such shares goals with the SACTWU project and the majority of the other surveyed TFA projects.

The participants in the Man-to-Man project are not seen as partners in the project, but are merely performers for a particular period of time. Some of the boys who were

involved in the theatre project now participate in another project under the auspices of UVHAA.

Similarly to the SACTWU project, the Man-to-Man project employed a group to perform in the scripted play. The older men were paid a stipend for their work, but the school-going boys were not. Interestingly, the group of older men fell apart, but the boy's group continued until the end of the project.

One project manager suggests that the reason for this failure to retain the men in the project was financial.

They were under the impression unfortunately that we were going to pay a lot more than we did actually pay them. So it was a finance thing, and being older guys they needed to earn more money.

Project Manager 2, Interview 2, 2010.

As in the SACTWU project, this provides an example where participation is not entirely voluntary. The expectations these participants have of the project colour the way in which they participate. This may be a common problem that has arisen through expectations generated by a history of donor-funded projects, rather than projects initiated from within the target community.

The standard of the performances

While most of the surveyed TFA projects report that project participants have some input into the content of the performances (27.27%), are trained to create their own performances (27.27%), or share decision-making regarding performances (21.2%); these participatory practices are not used in the Man-to-Man project, where participants were drawn in to perform plays written and directed by outside experts. This use of outside experts should mean that the plays have the potential to be of a high artistic standard and therefore more engaging for the audiences, depending on the performers.

The interviewed project managers reported that for them “a good play” was more important than who participated in the project (Interview 2, 2010). However, later comments during the interview contradict this, and they explained that it was important for them to draw men and boys into the project. However, they expressed delight at the standard of the play.

They felt that the different groups of the men and the boys had interpreted the script differently, and both had done a good job with their performance. However, most of the project managers felt that the boys’ performance was better:

I think the boys did a better job to be honest, because they were ... they were less polished, things didn’t always go quite right, which the audience could appreciate.

Project Manager 1, Interview 2, 2010.

Although the boys had been trained and the script was written by an ‘expert’, the performance itself was appreciated more because it was flawed and not professional. This may be particularly because the boys were recognised as living within the community from which the audience came.

The boys themselves thought they had done a good job, and that they were successful. They felt responsible for this success, and typical of young boys who have been recognised for any achievement, they were extremely confident that they had delivered a good performance.

Because of the style, the moving, they understood it. We made it work.

Respondent 1, FGD 2, 2010.

The reception of performances

The project managers felt that the audiences received the plays very well, reporting that:

The audience just applauded and applauded, it was great.

Project Manager 1, Interview 2, 2010.

Video footage of one of the performances at a local community health day shows the audience very vocal, applauding, shouting and laughing both during and at the end of the performance. When asked if they had received any later feedback from the community, one project manager responded:

They used to say 'oh this was good,' in passing.

Project Manager 2, Interview 2, 2010.

Although there was no formal feedback from audiences, the UVHAA project managers live in the community and reported that this kind of casual positive feedback was regularly received. The reasons given by the project managers for this positive feedback are twofold. One reason is that the medium was novel and exciting for an audience that may be bored by the conventional approach to HIV and AIDS awareness programmes.

Any sort of drama is a really marvellous way to give over a message, and much more interesting than just having someone standing... If you've been to our awareness days, they can be awfully boring ... so you know having drama lightens the whole awareness.

Project Manager 1, Interview 2, 2010.

A further reason for this positive acceptance is the fact that the performers were recognisable to the audience. One project manager commented:

I just think there was a better relationship because the boys were from around here.

Project Manager 4, Interview 2, 2010.

However, the group of boys also performed in more distant communities, where they have no links with the local people, and the project managers reported that these performances were also well-received by those audiences.

One of the project managers felt that the information contained in the play had a greater impact because it had not been heard by certain audiences before:

Some of the awareness campaigns that we've been to, people never heard things that the boys were saying. And some of the things the boys were saying ... some of the parents were having difficulty talking to their children about those.

Project Manager 2, Interview 2, 2010.

While the information contained in the play may have been new to the audiences, the fact that it was presented by people from their own community, and that these were boys was significant. The use of young people speaking out on a topic that is often seen as an adult issue was unusual, and had a particular impact on the audience.

There were some things that the boys were saying on the topic, and the play on its own was in categories, so that as a child you would understand and as an adult you would also understand what all of these people go through in life.

Project Manager 2, Interview 2, 2010.

This suggests that the use of boys as performers gave the theatre performance an added dimension, providing a point of view accessible to both adults and children.

I think it was also because of the information that they were giving out. There was something that parents don't think, so it was easier for parents to talk to their children after seeing the play.

Project Manager 4, Interview 2, 2010.

In a culture where sex and sexuality are taboo subjects, and not often discussed between parents and children, this is a significant result of this project. This unexpected result of the Man-to-Man Project points to the importance of selection of participants for any TFA project. A performance of the same script by the older men's group would not have had the same impact. Choosing participants who might have been marginalised or were otherwise less vocal within the community can have an enormous impact on the participants and on the community itself, allowing audience members to hear another point of view.

The boys who were part of the focus group discussion said that the positive response that they received from the audiences made them feel good:

It was exciting; they would say "Do it again, do it again".

Respondent 2, FGD 2, 2010.

They had received no negative feedback from their involvement, and although their guardian commented that she had heard talk in the community that "sometimes these boys are too young" (Guardian, FGD2, 2010). One boy commented that his parents were "proud" (Respondent 1, FGD 2, 2010).

However, the boys reported that they were nervous about the audience reception at the start of the project; one participant voicing that "I was scared that they would laugh at me" (Respondent 2, FGD 2, 2010). Another participant voiced that he had been afraid that there would be some stigma attached to performing in a play about HIV and AIDS.

We were scared for other people. Other things about what we were saying that we are not supposed to talk about HIV and AIDS.

Respondent 1, FGD 2, 2010.

The boys recognised that there were some people in the community who said "it's not for us, not right" but that there were others who "said it was a good thing" (Respondent 2,

FGD 2, 2010). They reported that the negative comments were passed on before people had seen the play, and that after the performances, they did not receive any negative reaction from their audiences. Both respondents reported that they were often approached and called by people from their community who asked them how they knew that information and who had taught them. It seemed that there was a genuine interest from the community in the process of participation and how these boys had come to have the information that they had about HIV and AIDS.

The level of participation and the potential for empowerment amongst participants

The boys were questioned about what they felt they had learnt through participating in the project, and the project managers were also asked whether they had perceived any change in the participants. While the project managers felt that the plays had allowed adults insight into the views of children on HIV and AIDS, the children who participated felt that they had learnt about the views of adults.

The boys felt that they had learnt a lot about “the older generation” (Respondent 1, FGD 2, 2010). This was perhaps because the play included two adult male characters, and allowed them insight into their way of thinking. This is a unique aspect of theatre and drama techniques that allows participants in such projects to develop empathy with the characters that they portray. When asked what in particular they had learnt about this generation, their responses included the following:

- R1: They don't talk about it,
- R2: I learnt how life was before for old people
- R1: Old people are afraid to get tested.

Respondents 1 and 2, FGD 2, 2010.

These responses suggest that the play allowed the participants to understand some of the complexities and challenges that adults face with regard to communicating about HIV and AIDS. This may make them more confident to open up dialogue on this issue with adults.

The boys also reported that they had learnt “about testing and condoms and saying no” (Respondent 1, FGD 2, 2010), as well as “about living and ARVs” (Respondent 2, FGD

2, 2010). This suggests that they have taken away useful factual information from their involvement in the project.

I tried to take this question deeper, asking if the boys had learnt anything personal about themselves or if the project had impacted on them in other ways. One of the boys responded that participation in the play had taught him *wahlomeka*, which the interpreter and the boys together translated as “not to be involved in the wrong things” (Respondent 2, FGD 2, 2010).

This shows that the participant felt that being a part of the project had taught him a greater respect for himself and others. He had learnt “not to get into the wrong things when other people tell you to do it” (Interpreter, FGD 2, 2010). It would appear that participation in the play allowed him to develop a stronger sense of self, which made him more resilient to peer pressure. This is a remarkable result, and evidence of significant personal empowerment for this individual.

Both of the respondents commented that they thought that being in the play had made them stronger. They also reported a sense of camaraderie amongst their fellow participants, saying that they regularly talk about “remember this, remember when this happened” (Respondent 2, FGD 2, 2010), and that they laugh together at the reminiscences of their performances. This is evidence that participation can build a sense of group and community amongst the participants.

When asked whether they thought the boys could create their own plays and therefore continue with this project without expert help, the project managers were doubtful of this, reported that “they might give off the wrong information” and that “there were things in the script the boys could never have dreamt of ... we would never have achieved that” (Project Manager 2, Interview 2, 2010). This suggests that there is still a reliance on outside experts for both the content and the form of the performance. While the content for a new play, including accurate medical information, could come from UVHAA itself, the project managers felt that the performance techniques that the boys learnt during the training and rehearsal phase of this project might not be able to be replicated if they worked alone.

The project managers commented on the growth of confidence amongst the boys, particularly in their ability to talk about HIV and AIDS. They have subsequently made use of some of the boys in a project known as the *Talking Book*, where the boys make house visits in the local community to talk with others about HIV prevention. The project managers report that it was because of their involvement in the play that they realised that these boys were capable of talking confidently about HIV and AIDS.

Well, it gave us the confidence to use them otherwise we wouldn't have used them, to be honest. So it did give them skills in speaking in public. It's actually a very difficult thing to talk about HIV. To knock on somebody's door and say – and this is a school-boy – to say “Can I come in and talk about HIV?” I mean you can imagine the grannies saying “what do you know”?

Project Manager 1, Interview 2, 2010.

The project managers also talked about the impact that participating in the project had had on the men and boys personally, particularly with reference to one participant:

One of the boys I used to communicate mostly with, I was just asking him as to how he felt when he was doing the plays. There was this particular speech that he does at the end of the play, and it was very touching because I knew his life, and sometimes you talk about your status. It's never easy in public and if you haven't disclosed it, and he said it was one of the best things that he did because he never used to talk about it in public, but now he can see that by what he was saying made him able to understand that he was really affected. He used to just say “I am sick” but being in the drama made him understand that “I need to accept that I'm not well”.

Project Manager 2, Interview 2, 2010.

Further expansion on this comment revealed that the boy in question had accepted his HIV positive status, and disclosed that he was HIV positive subsequent to performing in the play. The strength to do this was a direct result of performing in the play, as this was “because the play made him know” (Project Manager 2, Interview 2, 2010).

Rather than being exposed to information in any other format, being intimately connected with this information and learning lines for a performance allowed this participant to take this new information and apply it to his own life. In the focus group discussion with participants, it became apparent that the same boy had gone from previously being very shy in the community to being very confident on stage. He had played the character of the *induna*, a local chief, in the play.

This enactment of a person in a position of power, and the energy that this boy had brought to the performance, was remarked on by the community health nurse who was part of the discussion:

It was a surprise for them (the audience) and even today in the community they call him Induna.

Guardian, FGD 2, 2010.

Further discussion with the nurses from UVHAA revealed that this child was orphaned, having lost both of his parents to AIDS. This transformation from the stigmatised orphan to the popular child referred to as *Induna* may have enormous effects both on his self-esteem and the status that he enjoys in the community. While this is a remarkable case, it does point to the potential for participation to raise the status of participants, so that they are able to enjoy more power in their own communities.

Potential for development and empowerment for the broader community

One of the factors that affect the impact of TFA projects is that of sustainability. If the group is able to sustain their own participation in a project and to continue to open up channels from dialogue about HIV and AIDS issues, this may result in further empowerment for themselves and for others in the community.

While the boys from the focus group discussion reported that they would definitely participate in other plays again if they were given the opportunity, they said that they might not initiate this on their own, but would wait from the nurses from UVHAA to give them direction.

The project managers discussed the possibility of the local nurses themselves doing the performances, but concluded that it would be less effective because:

They (the nurses) are used to telling them (community members) what they should do and shouldn't do.

Project Manager, 1, Interview 2, 2010.

The project managers felt that the didactic approach from the nurses would be taken too seriously, while the boys were able to make the audience laugh. This suggests that in this case, people with less power within the community had a greater role to play than those identified within the community as 'experts' on HIV and AIDS. It also points to the fact that using theatre allowed unusual sources and those previously less visible to have a more powerful voice.

The UVHAA project managers felt that the balance that had been developed for this project, with the technical information coming from them as nurses, the script and performance direction coming from the PST Project, and the performers coming from the community was "a very good balance" (Project Manager, 1, Interview 2, 2010).

In contrast to the SACTU project which is tainted with dissatisfaction on the parts of both the participants and the project manager, the Man-To-Man Project provides a positive experience of a participatory project with benefits for the catalyst organisation, the participants, and for the rest of the community.

Case Study 3: The DUT AAA-HA Project

Project background

The Applied Arts for Awareness of HIV and AIDS (AAA-HA) project falls under the auspices of the organisation DramAidE, based in KwaZulu-Natal. DramAidE works with a range of different communities on projects ranging from HIV and AIDS prevention in schools and communities to the training of the carers of orphans in psychosocial support. DramAidE projects are rooted in the concepts of communication for development and social change, and apply theories of behaviour change and interactive participatory learning to their health communication campaigns (DramAidE, 2010).

The AAA-HA project, initiated in 2008, works with arts faculties and departments at Higher Education Institutions (HEIs) to develop and stage creative events that address HIV and AIDS. These events are designed to create a space for the audience to explore issues that affect them directly as students with regard to HIV and AIDS, to ask questions, and to interact with DramAidE health promoters who are young HIV positive people working at these institutions.

HEIs are where many young people first explore serious relationships, and may form opinions and develop behaviour patterns in relation to sexual behaviour. The AAA-HA project had the specific objective of addressing issues of faithfulness and relationships amongst students. The project was implemented in association with drama and art departments at three campuses in 2008, and at five campuses in 2009. The project that I focus on for this research was conducted at the Durban University of Technology (DUT) in 2009.

As a consultant to DramAidE, I was contracted to develop the parameters for this project, and to work with different HEIs to assist in implementing the project. Essentially, DramAidE played the role of funder for this project, and the implementing organisation was seen as the HEIs themselves. So for the purposes of this discussion, the Department of Drama Studies at DUT is seen as the implementing organisation.

The Department of Drama Studies chose to use their class of third-year students specialising in Theatre in Education to work on the project, as part of their class requirements. I gave a brief to the students to create an intervention that explored issues of relationships and faithfulness, and requested that there be some kind of meaningful involvement of the audience other than simply watching the play. The two groups of students interpreted this brief in different ways. The local DUT health promoter then facilitated a workshop with the students, and discussed some of the issues around HIV and AIDS. He personalised this general discussion by disclosing that he himself was HIV positive. This had a remarkable impact on the group, and is discussed later in this chapter.

The two groups created their plays over a course of six weeks, and then performed each play three times on the different DUT campuses in Durban. Their plays were performed in the open-air at different central points on two of the campuses, and staged at lunchtime to attract a large crowd of fellow students during their lunch-breaks.

One of the plays was created in the format of a reality-television game show, exploring the feelings of a bride and groom on the eve of their wedding. The show unravelled how they felt about each other, and questioned how well they really knew each other. It transpired that neither knew about their partners' sexual history and HIV status, and when they discovered this through the game-show, it made them reconsider their relationship.

The other play was a far more stylised version of the issue of HIV prevention, and depicted a war between the HIV virus and condoms, with an emphasis on testing for HIV.

Both productions ended with an appeal to audience members to sign a pledge stating that they would consider the consequences of unprotected sex, and that they would make use of campus VCT facilities. An evaluation of this project recognised that audience members found both performances highly entertaining, received the intended messages, and felt that watching the performances had made them consider their own sexual relationships (Durden, 2008).

The project rationale, goals and strategies

The goals for this project were set by the project funders, DramAidE. The stated goal was to encourage the use of theatre created by students to create an awareness of issues of trust and relationships amongst other students, and for these student audiences to be actively engaged in thinking about their own relationships (DramAidE, 2009).

In addition to this broad goal, the project manager reported that the project was an opportunity for students to create a real task for their students to complete as part of their drama course:

I was very excited when this opportunity came up, because it is just much more beneficial, and it works better, and you get a much higher degree of commitment if you are going to do something for a real audience, as opposed to saying “pretend that your classmates are the audience”.

Interview 3, 2010.

While this may not be associated with traditional development goals of self-empowerment, it was seen as a way for the students to learn and to develop skills both related to their studies, and in their personal lives. For the project manager, these two processes were linked through this project:

It is about the process of learning and how that forces them to confront their own ideas, their own stereotypes, their own behaviour, in different ways.

Interview 3, 2010.

Participation in the project

While the funders determined the goals of the project, the implementing organisation (the Department of Drama at DUT) also had specific goals which it wished to achieve. The students themselves did not have any input into the goals for the project. While the

overall message of examining relationships was determined by the funder, this was open for interpretation by the student participants, and they determined the content for their plays, and conducted their own research to inform this.

The medium was not pre-determined for the project by either the funders or the implementing organisation, but due to the nature of the organisation through which the project was initiated, the Department of Drama, it was anticipated that the medium would be theatre. Both groups of participants chose very different styles for their performances. The participants in this project participated to a higher degree, and at more levels, than those in the other case studies presented, as they researched and created their own performances.

The project reflects that it works with specific in-groups (the third year students) to pass pre-determined information to the community. This is an unusual example, as only 12.9% of cases of the other surveyed TFA projects report that they use this strategy. The class of participants was selected by the project manager, as this class specialised in theatre in education.

Participation in this project was therefore compulsory for the group, and while this may seem contradictory to the ethos of participation and freedom of choice, data collected from the group reflects that this was not a problem. Within the context of the University structure, students are expected to complete tasks as assigned to them and they accept that this is the case. One of the participants from the focus group discussion expressed that they were given a greater amount of freedom than anticipated through this project:

I expected to be dictated to as to how to go about the project because we see people coming in, speaking to us. And I was thinking “Oh, ok they are going to want to have an influence in our pieces and therefore they will try and shift our ideas”. I didn’t expect it would be a group thing alone, I expected it to be like a work-shopping process between, like, you guys and us, but it didn’t come up that way, which I appreciated actually.

Respondent 2, FGD 3, 2010.

The students were trained by the implementing organisation, and did receive some input from outside experts to assist them in their project. The campus health promoter spoke to the group about HIV and AIDS issues, and this interaction had a significant impact on the students. The respondents in the focus group discussion talked at length about how meeting this expert had affected their ideas for the project, and their concept of HIV and how it affects people.

I think what also inspired me a lot and I don't know if you felt it also, was having Peter come and talk to us and then afterwards knowing that he is living with HIV and AIDS and knowing he has got such a successful life ahead.

Respondent 1, FGD 3, 2010.

Personally I've always felt like – people who have HIV and AIDS, you always feel like “Ah, ok, it's time for us to feel sorry for them.” And the fact that Peter came, he spoke to us, and then only later on he told us – he revealed – it was like “Wow! He is still a human being, doing what he has to do, making money, whatever”, so that actually kind of inspired us. And it actually helped us focus more on the project instead of, you know, “Oh – we have to do HIV and AIDS”.

Respondent 2, FGD 3, 2010.

This provides evidence of positive and useful input from outside experts which does not hinder the group, but rather assists the participants to reach greater levels of awareness and understanding about an issue. This may develop a sense of critical consciousness and therefore provide the group with greater empowerment opportunities.

Further input from outside experts was in the form of advice from me, as a representative of the funding organisation. I visited the group on two occasions to see how their plays were taking shape and to offer some comments regarding their structure and performability, given the limitations of the street theatre genre that the groups had decided to use. As previously reported, this use of outside experts is not common, with only 6.9% of other surveyed TFA projects making use of this strategy.

The students in this project also participated at the level of monitoring and evaluation, collecting responses from other students after their performances, and writing reflection papers on their involvement in the project.

The project manager reported that the students were involved in all aspects of managing the project and organising themselves and the performances. She felt that participating at this level was of great benefit to the students:

As part of life-long learning. The fact that they needed to drive it forced them to get on with it.

Interview 3, 2010.

Although this project was initiated from outside the group, the project manager remarked that the group would have continued with the project and further performances, if they had had the time and resources.

The project manager did not feel that this was an example of a partnership between the funders, implementing organisation, and the participants, but more like a 'client relationship', where the funders were seen as a client and the students were delivering on a brief. While this may not have been intentional, the fact that the funders provided a proposed structure and then funding for the project may have made it seem this way. However, the fact that the participants were involved at many levels of research, creation, and performance in this project is suggestive of a more equal relationship than a traditional service-provider and client relationship.

The standard of the performances

The project manager reports that the groups were consciously striving to create theatre of a high aesthetic standard, and that this was as a result of the three years of their drama studies. She suggests that as they had no applied theatre background, they were not conscious of the process of creating the work, and the possibilities that this had for empowering participants. However, the focus group discussion shows that the process

did have a significant impact on the students involved and this is discussed in more detail below.

When questioned regarding the standard of the final performances, the project manager felt that these were of a high quality:

I actually think they were quite good, in that I think they engaged quite a sophisticated performance mode... It was clear that they had kind of thought about it and they had thought about participation, and I think the audience enjoyed it. They did actually perform it in quite a sophisticated way and they were engaging a whole range of skills.

Interview 3, 2010.

The participants who took part in the focus group discussion felt that they were successful in delivering a good quality performance, particularly because of their drama training.

I feel like, not to be all cocky because I'm a drama student, but I feel that the success of the project is also because we are drama students. I think other people would have dealt with the subject more clichéd.

Respondent 2, FGD 3, 2010.

Representatives from both the two performance groups reported that they thought their performances were of a high standard, although the process of creating something both interesting and meaningful had been challenging for them.

The first thing that clicked in my head was that we must try whatever happens we must try and make it different and not stereo-typical. So expectations were basically, like, how are we going to portray HIV and AIDS in a different light?

Respondent 3, FGD 3, 2010.

The students were very conscious of creating plays that were not stereotypical AIDS plays, and reported that they wanted to create something different. For one group, this became the sticking point in the creation process:

We were changing, changing and changing, we were confused, we did not know what was going on. We were thinking too much out of the box – because we were trying so hard not to be clichéd.

Respondent 2, FGD 3, 2010.

Respondents from both performance groups reported that they were assisted in making the final product successful by the input from the project manager, a lecturer in the Department of Drama. They reported that her assistance with characterisation, advice on the setting for the plays, and on staging and costuming helped them to create better performances. Having seen some of their work in progress, I think that left to their own devices their work would have been too confusing to have a real impact on the student audience. One of the respondent's comments supports this:

Our first end result of the whole piece was kind of like everywhere, scattered, not exactly gelling.

Respondent 1, FGD 3, 2010.

Another respondent commented that:

If she wasn't there, I think we would have lost the whole concept.

Respondent 2, FGD 3, 2010.

The students recognised that this input from the Project Manager was necessary for their performances to be effective, and that this was predominantly because as a group of peers, none of them were prepared to sacrifice their ideas for the good of the play.

The participants recognised that the workshop process, where they were all equal contributors, was difficult for them to manage on their own:

The workshop process is like too many ideas at once, rather than when you have a structured script and, you know, you follow.

Respondent 1, FGD 3, 2010.

The strong ideas generated by individuals within the groups meant that they all wanted their ideas to be included, and this was detrimental to the process of creating an effective piece of theatre. This phenomenon points to the need to recognise group dynamics within participatory projects, and to realise that the existing power-structures and power-struggles within that group may affect both the process of working together and the end product of the performance.

While they recognised the need for this outside input, the participants said that they felt the content of the plays was still their own, and reflective of what they wanted to say; “because the ideas and stuff was totally ours” (Respondent 1, FGD 3, 2010).

The group reported that they felt in control of the process and of the end product and that they were making decisions and were responsible for the success or otherwise of the project.

The reception of performances

While a separate audience reception study was conducted as a part of this project on the DUT campuses, this component does not form part of my study, which focuses on how the project manager and the participants perceived the audience reception of the plays.

The project manager felt that the plays were well received, and that this was because it was students performing to fellow students, rather than what she recognises as a performance of high aesthetic quality.

I think that many of the students who saw it engaged with it primarily because it was other students who were doing it, and there was a level of equality in it. Certainly there were a lot of students who came up and spoke to the HIV centre staff who were around, a lot of them signed the pledge boards and the pledge banner, and they seemed genuinely interested ... it is very difficult to quantify, but I think that they did enjoy it and I think that there was value in having fellow students doing it as opposed to somebody else who coming in preaching.

Interview 3, 2010.

The project manager raises the concept of equality as a factor in determining how audiences receive a participatory theatre performance. While a good quality performance may have a great impact on audiences, the notion that the speakers are at the same level as the receivers of the message is indicative of horizontal communication that is favoured in the participatory approach to development.

Theatre that is created with this level of equality in mind between the actors and the audience may be received differently from theatre that is conceived as passing a message from 'those who know', the outside experts, to an audience with less knowledge. This principle of equality is central to the Freireian concept of empowering education (Freire, 1983).

The project manager suggests that this principle was consciously applied throughout the creation of the theatre pieces:

For me that was quite important to stress the idea that you are part of the target group, you are students. You are the same as the people that you are going to perform for.

Interview 3, 2010.

This consciousness led to the students creating work specifically for an audience that they were also a part of, and that they knew other students would relate to.

They made pieces that were about their reference points, they used stories and modes of performance that were about the things that people understand, the things that students are interested in.

Interview 3, 2010.

The students themselves felt that this aspect of recognition was important to the successful reception of their performances:

Some people when we started the play they would like stand there and make comments, like funny little things like “Oh its him, we know him”, you know. “He’s our res mate” or something.

Respondent 3, FGD 3, 2010.

The students refer to one of the plays, which used a scene based around a strike-action, where virus-like characters are toyi-toying around a condom character, and suggest that this scene of the toyi-toyi (a war-like dance accompanied by political slogans and songs) was a particularly familiar sight at DUT, as the plays were performed just a week after local protest action on the campus.

R1: And also the strike thing – because the strike was going on, it was a point.

R2: And one of our group members was part of the SRC and was like striking, so the impact of that. Like are we really striking?

Respondents 1 and 2, FGD 3, 2010.

Because one of the performers was a member of the Students Representative Council (SRC), he would have been recognised by other students in the audience. Because the SRC are associated with protest action on the campus, the participants felt that the watching students would be drawn to the action, wondering if it was real or simply a performance.

The nature of this street-theatre style of performance does sometimes blur the boundaries between performance and reality, and the participants felt that they had managed to capture the imagination of the audience through this. They also felt that because they had created the performances themselves, based on their experiences and their understanding of other students, it was a success.

I also think that if we were to take the exact same script and take it anywhere else it would not have worked. Because I think we wrote that for tech students.

Respondent 3, FGD 3, 2010

The fact that the work was created for this audience of DUT students by other students made the references very specific, and may have allowed the audience to connect with the aesthetics of the performance. This shared aesthetic is an important aspect of participatory theatre generated from within a community, and may serve to build bonds within that group. However, it may also reinforce stereotypes and myths within the group.

The focus group respondents noted that they would have taken a very different approach to the creation of their plays without the intervention of the health promoter who encouraged them to examine their own ideas around HIV and AIDS.

R3: Because I think we would have took the approach of “Ah shame, HIV, shame.”

R1: Yes.

R3: And then Peter just kicked that right out.

R1: He really is someone to be admired.

Respondents 1 and 3, FGD 3, 2010.

Peter, the health promoter [not his real name], was able to challenge the stereotypes that the group held about people who were HIV positive, and this forced them to take a different approach when creating their performances. While the health promoter was in the role of the ‘outside expert’ in this intervention, the fact that he was HIV positive and spoke openly about this had a significant impact on the participants.

This may point to a need to re-examine the outside experts that are used in such participatory theatre projects. Where the expert does not bring outside 'knowledge' to the group in an imposing manner, but is merely sharing a personal experience, this may be more meaningful for the participants.

While the group of respondents were confident in reporting their success, they did admit that they were surprised by the positive audience response, particularly in the interaction between the actors and the audience after the performance, where audience members were asked to sign a pledge that they would examine their own relationships and get tested for HIV.

R1: I actually, I had doubts about that pledge. I thought people would ...

R2: Walk away.

R1: Ya, be too shy to approach, to admit that you know, "I'm somebody who would want to deal with AIDS," or whatever.

R3: Especially when the males came as well.

R2: Ya.

R1: Because a lot of the times they are also like ... "Ah, I don't ..."

R2: Ya, and at first I thought maybe people were just coming maybe because we gave individuals bracelets, but other people came literally and said they didn't want the bracelets, they just wanted to sign their name and which was like, wow.

R3: And even if you asked them questions, like in our play we asked them: "What shall we do, what shall we do, tell us!" And they were involved, you know. Because most of tertiary students don't want to involve themselves too much you know.

FGD 3, 2010.

These comments refer to the perception that students in general are too 'cool' to get involved in HIV and AIDS campaigns, and that male students in particular do not publicly acknowledge and discuss these issues. However, the play managed to challenge these boundaries and encourage people to come forward and to get involved. Even if the students who signed the pledge do not go on to get tested or take any further action, this public declaration of commitment is an important part of building a social movement and bringing about change.

One of the participants noted that she felt that the success of the project was not simply in the positive reception of their work, but in the transformation in their own lives:

The success came when we came out of the shoes of the actor and were individuals living in the reality of HIV and AIDS.

Respondent 2, FGD 3, 2010.

This notion of personal transformation is a key component of growth and development, and is discussed further below.

The level of participation and the potential for empowerment amongst participants

The students who made up the focus group discussion were unanimous in the notion that participating in the project had changed them. They all reported that they had learnt more about HIV and AIDS, and commented on how they had previously heard about HIV and AIDS, but that this project made the issue more real and personal for them:

I think it also brought things more to a personal level, with the show and with us and with the whole concept of dealing with HIV and AIDS, and the pledge.

Respondent 1, FGD 3, 2010.

The project manager felt that the process of involvement in the project was of great benefit to the students:

It is about the process of learning and how that forces them to confront their own ideas, their own stereotypes, and their own behaviour, in different ways. They really had to think.

Interview 3, 2010.

She felt that the goals of the project had been achieved in that the participating students had shown an increase in awareness in HIV and AIDS, and importantly in: “An

awareness that they don't know everything" (Interview 3, 2010). This awareness of a lack of knowledge is central to the Freireian concept of empowerment education.

She also felt that the project had had a noticeable impact on their perceptions, stereotypes, and their own feelings and thoughts about HIV and AIDS. This is attributed to the process of participation, and not just the exposure to new information.

They said to me that it was one of the most important things they had done when they were here. And for some of them it had a profound effect on them. The fact that the whole class, except for maybe one or two, all went to get tested. And for me that was evidence of a mind-shift and for a lot of them they said they would never have done that, except they felt they had to practice what they preach; and that doing the project actually made them think differently about HIV and AIDS.

Interview 3, 2010.

The student participants commented on this, referring to personal transformation brought about by "not just saying lines of the script, but actually meaning what we say" (Respondent 2, FGD 3, 2010). The notion of 'practise what you preach' is reiterated by both the project manager and the participating students. If participants in TFA projects are inspired to adopt and practise the positive health behaviours that they advocate in their performances, then participation can have life-changing benefits for the participants.

The students also commented that they had learnt sensitivity from working on this project. One respondent commented:

We could be saying this amongst us but one person here could not be laughing at that joke, because they know that they are being affected in some way or the other. And that I realised in my group.

Respondent 3, FGD 3, 2010.

Working within a group had made the students aware of the need to be sensitive to others, and had made them more sensitive about the different ways that HIV affects people. The respondents also felt that the topic of HIV and AIDS had impacted on the class as a whole, and had made people behave differently. They had anticipated problems with working as a group, but reported that the level of commitment from all group members was far greater than when they had worked on other projects.

- R3: What surprised me is how dedicated we actually were.
R2: But it was totally surprising, everybody was just willing.
R1/3: Ya.
R2: And I think maybe that is because of the topic, HIV and AIDS.
R1: I was just going to say that.
R2: Because everybody has an opinion. Like some of the other projects that we did, a lot of those were kind of sketchy, didn't understand what was happening, but with this, everyone has their own opinion, everyone wants to put out their ideas, everyone...
R3: Has a voice.
R2: Ya, So I think everyone was more focused, ya, we all have a voice.

FGD 3, 2010.

This notion of *voice* is central to participation. One of the primary aims of participatory projects is to allow the community to voice their concerns and to speak out to bring about change. This focus group of students felt that dialogue had opened up and they all had a voice in the project because they had a common goal, to address HIV and AIDS issues.

I don't know if you guys noticed, that but I think it is more of the subject of the show were doing, because I don't think I've ever seen that much commitment in a TIE class before.

Respondent 2, FGD 3, 2010.

They attributed this commitment to both the serious nature of the topic, and to the profound impact that the input from the health promoter had had on them, suggesting that because of the workshop and the disclosure of the health promoter's HIV status, "everyone was more focused" (Respondent 2, FGD 3, 2010).

Over and above developing new performance skills and a greater awareness of HIV and AIDS issues, the project was recognised as valuable in developing the student participants in other ways. The project reportedly increased a sense of community amongst the participants, and also developed in them a sense of responsibility about the issues that they addressed. This sense of responsibility was directly applied in their own lives, as evidenced through the large number of students who went to test for HIV as part of their commitment to the project, and also in their sense that they need to take the ideas and concepts that they explored in the project further.

Although there was no formal reflection by the DUT students on their experience of the project and of their performances, one respondent reported that her group did this informally:

We actually did have like a feedback session, when we were sitting there waiting to get tested. We were thinking about how this whole experience had changed us.

Respondent 2, FGD 3, 2010.

The entire group (with the exception of just one student) went together to the campus clinic to get tested for HIV. Not only did participation in the project spur them into this positive action, but they also recognised that it had changed the way they viewed HIV and AIDS. It had challenged attitudes and helped to break down stigma, as well as challenged the individuals involved in the project to examine their behaviours and assess their personal risk of HIV infection.

The project had also built their confidence with regard to performance and to talking to others about HIV and AIDS. While the students reported that they would be able to do this work again, and that one of the groups was talking about taking their show to other areas, the project manager felt that they were not yet “at a stage where they can make something up” (Interview 3, 2010.) She felt that the parameters within which the students had worked were necessary for them to be able to grasp the key issues. This suggests that participation within certain parameters may be more effective than participation without outside intervention.

Potential for development and empowerment for the broader community

While the potential for development for the participants themselves is recognised above, it is difficult to measure this for the audience and the surrounding community of the University.

One of the participants discussed how participation had given her insight into the different ways that people understand the epidemic:

What changed with me was that I always thought it was because HIV and AIDS is such a broad thing, that you hear about it everywhere. I thought we all understand things in the same way but what I realised was that working in that project you hear so many different aspects of it and you realise we are not as educated as we claim we are ... the group gave me, as I said, different ways of looking at HIV and AIDS.

Respondent 3, FGD 3, 2010.

While participation had brought about an increase in her own knowledge, this is attributed to sharing discussion with her group rather than from an outside expert. This is evidence of participation opening up dialogue within the target group and allowing for the building of a greater understanding within the broad group or community.

Another student affirms that “I think if I was working alone I would still be in the dark as to other things that people told me about” (Respondent 1, FGD 3, 2010), and the focus group participants confirmed that the process of working in a group had allowed them to learn more.

Participating in the project had also made the students aware of the failure of many HIV and AIDS communication campaigns:

People are still not listening despite the love-Life adverts out there that they keep on playing.

Respondent 3, FGD 3, 2010.

This reference to the high-profile public media campaign of love-Life is interesting in that the student recognises the potential for greater learning through this small dialogue-based participatory campaign than top-down media initiatives such as love-Life.

The students made reference to what is commonly known as AIDS fatigue, in which young people in particular are bombarded with messages about HIV and AIDS:

R1: Because I think it's because it's been done too much that people don't listen; they don't care. Like it's: "Oh my god – not again".

R2: Exactly, not again, not again.

R1: So you become somewhat oblivious to what people say ... they have forced the issue a bit too much.

R2: You think you'll die to talk about AIDS – oh no.

R1: It's overdone, overdone.

Respondents 1 and 2, FGD 3, 2010.

When asked if they thought this was the case when they spoke to other students through the medium of theatre, they reported that this provoked a different response, because they had used a different approach.

R3: What was nice was also to draw in the audience. We didn't simply come and say "Ok, we are talking about AIDS".

R2: You had to watch the show and then at the end you realise, "Oh, it's an HIV and AIDS show," and I think it was a very nice way of coming into it. And the approach that came with it. We came with a different approach, a fun approach, and an understanding of your target audience. And we ... hit them.

Respondents 1 and 3, FGD 3, 2010.

Some of the students reported that the information that they had learnt gave them confidence to speak to their parents and to others. This suggests that capacity built in individual participants does have an impact on others in the community. This could enhance social development more broadly, as the participating students feel responsible to pass on the messages and explore the concepts from their plays with others.

The DUT project is another example of a positive experience of participation, where the benefits to the participants are tangible, and they feel that they can pass these benefits on to others.

A summary of the case study findings

This chapter has presented the significant findings from the research into the three case studies. The research finds that the SACTWU and UVHAA projects are similarly conceived, with similar levels of participation. However, the two projects have different results and a different impact for the participants and for the beneficiary communities. The DUT project involves participation at a greater level than the other two projects, with greater reported results for behaviour change for those participants.

While all three of the case studies reflect benefits for the participants, the potential for extending these benefits and for bringing about empowerment on a broader scale within the community is limited. This notion of empowerment and social change through TFA is explored in more detail in the following chapter, which brings together the data from the survey and from these case studies.

CHAPTER 11: ANALYSIS AND FURTHER DISCUSSION

The findings generated from the data collected in the practitioner questionnaire and the data collected through the case study samples are brought together in this chapter. Based on the five key areas for investigation raised in the literature review, this discussion is arranged according to the following themes:

- 1: The question of participation and inside versus outside intervention;
- 2: The question of topic and content selection;
- 3: The question of professionalism;
- 4: The question of sustainability;
- 5: The question of efficacy.

Participation and outside intervention

A certain amount of outside intervention is necessary in order to bring coherence to a community-generated theatre production, resulting in a performance product of a higher quality, which may be more effective in spreading development messages. However, greater intervention by the outside catalyst may result in less community participation and therefore less conscientisation. Mda (1993) argues for a case of optimal intervention, balancing participation and intervention.

The survey conducted with 34 TFA practitioners shows that 67.74% of respondents noted that the process of participation and the end product of the performance are equally important in their interventions. This is evidence of a consciousness amongst these practitioners about finding this balance between outside intervention, on the level of input into the performance, and participation, building capacity and empowering the participants.

However, further investigation reflects that although there is a consciousness around this, and there may be a desire to achieve the balance between intervention and participation; in practice these are not always equal, and intervention outweighs participation in most of the surveyed TFA projects and the case studies.

Only 29% of the surveyed respondents stated that their work involved partnering with the target community. In other instances, the outside intervention organisation took the lead in this relationship, initiating and managing the TFA projects. In only 38.7% of the surveyed instances were the community participants involved in decision-making and management decisions with regard to the project.

The research data regarding decisions made about who participates in the theatre projects provides further evidence of a lack of balance in the intervention-participation relationship. The survey shows that in only 28.1% of the projects, participants in the projects are selected by the target community. Where participants are selected by funders or the implementing organisation, the project is more easily co-opted and may be indicative of the manipulation that Arnstein (1969) argues against. In these cases, manipulation is simply dressed-up as participation.

An analysis of the survey data shows that genuine participation, at the level of citizen power promoted by Arnstein is limited. While the implementing organisations may strive towards developing partnerships with the target community, this is not currently the norm, and the balance of power is unevenly weighted towards the outside implementing organisation.

While the surveyed TFA projects and the case study projects are all imagined to be participatory and empowering, in reality they only involve participation by a few at a limited level. Narayanasamy (2008) identifies the key criteria of participation as being (1) voluntary involvement in the project (2) involving shared decision making (3) including participation at different levels and (4) ultimately aiming to improve the well-being of the participants. However, all of these criteria are relative to the project and the context in which it is implemented. Looking for these criteria within the projects raises debates about the project components processes and their benefits for the target community.

Voluntary involvement in the project

The issue of voluntary participation is not explicitly explored in the survey; however, the results show that in over half of the surveyed projects, participants are chosen by the

outside intervention organisation, funders, or other experts. While these participants may have been willing to participate, it is unclear whether this is entirely voluntary. This may hinder development in that participants do not have full freedom of choice, which is recognised as a key component to development.

In the case of the Sinolwazi Drama Club, participation cannot be seen to be entirely voluntary. While there was no coercion involved in recruiting participants, the project was conceived as an income-generating opportunity for retrenched workers, and the payment of these participants and creation of jobs within the project meant that the participants stayed on with the project perhaps longer than they would have had the work been solely voluntary. This may have had a negative impact on development, as discussed below.

For the Man-to-Man Project, initial participation was voluntary, but a stipend was paid to participants. For the adult participants, there was an expectation that this stipend would be a salary, and when their expectations regarding the rate of pay were not met, they left the project. For the boys involved in the project, participation was voluntary and appeared to be more about fun rather than finance.

The evidence suggests that payment for participation may be counter to development, as the project becomes about earning money rather than working for the benefit of the community. This assertion that the 'benefit of the community' should outweigh personal gain may be idealistic, but I see this as a key component in development for social change, since substantial change can only be brought about through communal processes. These processes are undermined where individuals are paid to participate.

The motivation for voluntary participation could be investigated further, in order to understand why people choose to get involved in projects, and whether community development is their primary purpose. For the participants involved in the focus groups discussions that made up part of this research, their goals were primarily to 'help others' and to 'teach people'. This suggests that within the target community there is a sense of modernisation at play, where those who know about HIV and AIDS educate those who don't.

This feeling amongst participants may be influenced by the nature of the project. If the project sets itself up as a means to educate, then it appears that the participants will automatically take on this role. By extension, if the projects were more participatory and involved processes of problem-posing rather than educating, perhaps the participants would be encouraged to see this as their role in the community at the end of the intervention.

The research findings prove that most of the TFA explored in the survey and the case studies is informed by the modernisation paradigm to development, where development is driven from the outside. This finding could be extrapolated (with obvious exceptions) to broader TFA practice in South Africa. Where the modernisation paradigm informs practice, EE remains at the first generation level of spreading awareness. Arnstein (1969) suggests that participation in such projects is at the level of therapy, where participants are expected to be 'cured' through their involvement.

This notion of curing or improving the target community is at the heart of first generation EE. Most current practice in TFA involves spreading awareness about HIV and AIDS (71% of the surveyed group), and 61% of the surveyed sample reflect that their work is specifically designed to bring about behaviour change within a target group.

Comments from project participants in all of the three case-study focus groups echo these notions of teaching or 'curing' others. Participants felt that their primary goal was to 'teach others' through their theatre practice. They recognised that they themselves had learnt more about HIV and AIDS through the process of creating or rehearsing the plays, and that their responsibility was now to pass this knowledge on.

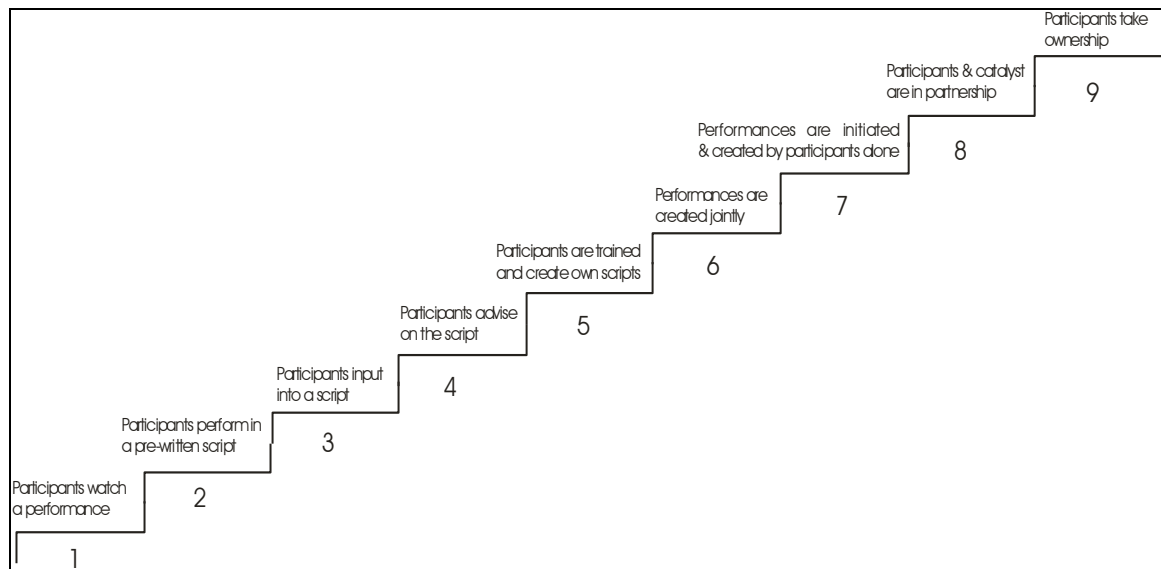
There was very little sense from the respondents that this knowledge was self-generated. Rather it appears that they had gathered it from 'experts' and that they now saw themselves as the conduits of this knowledge, as the local experts who could inform and educate others. Discussion with both the project managers and the participants involved in the research show that the participants have been skilled and educated through their involvement in the process of working on the performances. However, this appears to be reminiscent of 'banking education' rather than Freire's imagined empowering education.

This sense that the participants now 'have knowledge' perpetuates imbalances in power, centralising the knowledge about HIV and AIDS amongst the few who were selected to participate. Knowledge is to some extent democratised, through involving a certain amount of participation in the projects, and being passed on to the community more broadly. However, the knowledge is not created locally, based on material circumstances, and as such cannot be anticipated to bring about any real conscientisation and subsequent shift in power.

Shared decision making and participation at different levels

Narayanasamy (2008) asserts that participation involves shared decision making and participation at different levels. When measured against the scale of theatre participation that I have put forward earlier in this thesis as a measure for TFA, the majority of the surveyed practices, as well as the case studies, come up short.

FIGURE 2: LEVELS OF THEATRE PARTICIPATION



Most of the surveyed practitioners note that their work is participatory, with just 6% responding that their work involves performances by hired actors from the outside rather than community members. However, it is apparent that this participation is limited to the

bottom levels of the ladder. In 12% of cases, the work of the surveyed organisations sits at the second level, where selected participants perform in a pre-written script. For 27% of the surveyed practitioners, the participation is at the third level, where the participants do have some input into the plays. A further 27% of cases can be mapped at the fourth level, where participants advise on the script. Only 21% of the surveyed organisations rank higher up this scale, at the sixth level, with participants and the outside organisation sharing decisions about the performances.

There is no evidence of contemporary TFA practice amongst the surveyed group that would rank at the eighth and ninth levels, indicative of partnerships or community ownership. There is also no reflection of sharing of decision-making that is indicative of genuine participation. Rather, the evidence reflects that decision-making powers are centralised in the outside intervention organisation.

The SACTWU Sinolwazi Drama Club would rank only at the second level on this TFA participation scale, where the participants perform in pre-written scripts. Although the scripts were informed by an understanding of the context in which they would be performed (factories in KZN), they were not directly informed by local knowledge and local input. Similarly, the UVHAA Man-to-Man Project would rank at the second level, with local people drawn into the performances created by outside experts. The DUT AAA-HA Project would rank higher up this scale, at the fifth level, where participants were previously trained in performance skills, and were taken through a workshop process on HIV and AIDS issues that led them to creating their own plays for this project.

These findings further support my argument that participation in TFA practice is used as a strategy to improve communicating about HIV and AIDS from an outside source rather than to bring about development in an empowering way. The participation that is encouraged in the case studies is indicative of second-generation EE, where selected participants are drawn in to communicate to the rest of the community, in a form of development-support communication.

The evidence shows that the contemporary TFA practice reflected by the surveyed group therefore remains at the levels of first and second generation EE, informed by the

paradigms of modernisation and development-support communication. Applied within these paradigms, participation is simply a useful strategy through which organisations pass on messages about HIV and AIDS in an attempt to influence the behaviour of the target community.

The research data reflects that there are few projects that reach Mda's (1993) proposed level of optimal intervention. The imbalance in the participation-intervention relationship suggests that the vital component of equality is lacking in the empowerment equation. Without the intervention-participation balance, and with unequal levels of participation and decision-making from the catalyst organisation and the local community, these projects cannot hope to be empowering in the Freireian sense. Where power rests in the hands of the outside organisation, the local community cannot be fully empowered themselves.

The composition and democratic practice of the organisational structure that manages the project also affects its efficacy in bringing about empowerment. Where there are unequal power relations within the project, participation can be limited. The dynamics of the SACTWU Sinolwazi project and the hierarchy of the organisation may have limited the ability of the participants to become more fully empowered. Similarly, the adult-child dynamics in the UVHAA Man-to-Man Project may prevent full empowerment, as the final responsibility for the project rests in the hands of adults. The dynamics between the staff and students in the DUT AAA-HA Project reflect less power imbalance, and the students are able to assume a greater amount of responsibility for the project, resulting in more participation and therefore greater empowerment.

The levels of participation may also be affected by the class position and background of the participants. Paulo Freire (2002) notes the importance of recognising the position of the oppressed in the process of education and conscientisation, and how this impacts on participation. While the SACTWU and UVHAA participants are both from the oppressed classes, the DUT students are representative of a more elite and educated middle-class community. This may place them in a more privileged position, where they are more confident and able to participate more fully and to reap the rewards of this participation.

Unless the notions of class and oppression are overtly addressed in such projects, in order to understand what might hinder participation, it is likely that participants may not be able to participate fully and to reach their full potential of personal empowerment.

The question of topic and content selection

The topic covered by all of the surveyed and researched projects is HIV and AIDS. The two primary goals noted by the surveyed practitioners are to spread awareness about HIV and AIDS, and to bring about behaviour change. As most of these organisations have specific mandates from their funders or elsewhere to address these issues, in almost every case the topic is imposed from the outside.

Although 58% of the surveyed practitioners reflect that they consult the target group about their issues of concern, this would seem to be within the bounds of HIV and AIDS issues. The survey results reflect that in 69.7% of cases, the goals for the project are determined by the community participants. However, it is evident that these specific goals are also determined within the parameters set by the intervention organisation.

In the case studies, two of the groups focus on HIV and AIDS because the local implementing organisations see an imperative to do so, based on local conditions. The SACWTU project recognises that their target community of workers is prone to HIV infection, and the UVHAA project is based in a rural community where HIV prevalence is high. In the case of the DUT project, the funders determined the topic, based on an understanding of the need for creative student-driven HIV and AIDS interventions in the HEI sector. The topic was therefore again selected from the outside.

When a topic is selected from the outside there is a danger that the participants may not relate to it, as it might not be an issue that they see as of concern to themselves. The case of the DUT project provides an interesting example of this. Although the initial response from the student participants to the topic was a negative one, their attitudes shifted radically after an initial workshop facilitated by a person who was HIV positive. This suggests that how the topic or content is addressed will have an effect on how the participants respond to it. A topic that is approached from an honest personal

perspective rather than a factual, knowledge-based perspective may be immediately more engaging for participants.

For TFA projects, once the broad topic of HIV and AIDS is agreed on, the next step is to decide on specific content for the theatre performance. The survey reflects that in only 30% of cases, is the content for the plays determined by the project participants. The intervention organisation and funders play a far greater role in determining this content (35% and 20% respectively), which is again typical of the modernisation approach to development.

Communication for development theory suggests that this imposition of content may result in the communication messages missing their mark, as they are not generated by the target community. However, the case studies reflect that this is not the case. Careful research and a prior knowledge of both the key issues affecting the community and the local culture may ensure that the performance is recognisable and effective. Over half of the surveyed TFA practitioners (58.1%) consult the group about the issues at hand, suggesting that these interventions are informed by local knowledge and therefore do have the potential to be both appropriate and effective.

None of the participants in the case study projects questions the selection of HIV and AIDS as a topic for their interventions. Instead, they mention that they recognise the importance of the issues, and that they feel that they are providing vital and life-saving information to other members of their community. Connection with a topical and global health-related issue such as HIV and AIDS may give participants greater personal validation than participation in a project dealing with smaller local issues. However, this may undermine their confidence in their own perception of reality and their ability to identify and therefore solve their own problems.

The pre-determination of content in TFA projects does not allow for the vital step of problem-posing that Freire asserts is necessary for empowerment. The constant foregrounding of HIV and AIDS as an issue for concern may therefore be counter to development. Where participants rely on outside expert knowledge to inform the content of their plays, they continue to devalue their own understanding and experiences of HIV and AIDS. If the content of the plays does not deliberately explore these, the plays may

remain on a superficial educational level rather than transforming those who participate in them and those who watch them.

The study reflects that participants are comfortable in the role of teaching others about HIV and AIDS, and thus hoping to influence their behaviour. While this may bring about behaviour change for individuals, it is not likely to bring about significant social change. When measured against Arnstein's (1969) ladder of participation, most of the surveyed current practice is at the levels of informing (educating audiences about HIV and AIDS) and consulting (asking groups for their input about HIV and AIDS). These projects therefore remain at the level of tokenism and are not fully participatory.

The question of professionalism

The survey shows that only 22.48% of the surveyed TFA practitioners place an emphasis on work of a high aesthetic quality in their work, and that there is a greater drive towards seeing the process and the product as equally important in HIV and AIDS related theatre. This suggests that creating work that appears to be 'professional' is not a priority within contemporary practice.

Apart from the example of the DUT project, where the participants were drama students, none of the other case study participants had any experience of drama. The relatively short intervention with the UVHAA project meant that the participants received only two weeks of training before their performances. Although they may have had the natural exuberance of young boys in the spotlight, the performance could by no means be seen as polished. While the SACTWU group received more sustained theatre training when it was initiated, two of the performers in the group had received no training at all. Again, there may be some inherent talent and skill within the group, but nothing that has been formally developed or developed to a professional level.

While Mavrocordatos (2003) argues that poorly created theatre may be less effective than theatre created professionally; the case studies present evidence that contradicts this argument. In the UVHAA project, the project managers assert that the performances were successful specifically because they were roughly performed and appeared to be unpolished and amateur. Mavrocordatos further posits that theatre for development

projects work along the lines of home-movies, where only those who recognise the actors are engaged by the performances, and others in the audience are un-moved. However, the UVHAA project contradicts this assumption and reports from the project managers are that the performances by the young boys were equally as well received in the communities in which the boys were known, as in other communities further afield.

In the case of SACTWU, the fact that the participants were selected from a large group of auditionees, and that they were paid for their performances boosted their own confidence in their abilities. However, their work seems to be dogged by a sense of despondency, and the project manager feels that the performances have lost their energy and this affects their appeal. However, the group of participants report that their performances are very well-received and sought after by factories within the sector. If this is so, then this provides evidence that a professional and well presented performance is not a criterion for the success of the projects. This may be because the audiences are not well-versed in theatre and do not therefore have high expectations. However, without a formal reception study, it is not possible to explore this in more detail.

The DUT students felt that their work was of a better quality than other students would be able to create, because they were drama students. The project manager also felt that their work was of a high standard. This group has had more access to and experience of theatre and are therefore likely to have higher standards. Their audience of students may also be more theatre-literate, and have greater expectations. The reports from this project suggest that the performance was well-received, particularly because it was created by students for students, with an appealing and recognisable student aesthetic, and that it was effective because of this.

This evidence gives further support to the argument that striving towards professionalism in the performances should not overshadow the emphasis in process and participation. For both the participants and the audience, it is more important that the performance is created with a ring of authenticity that suggests that it is generated from the target community.

Professional script-writers might be able to create well-researched plays that appear to be authentic, in that they are well researched and deal with issues of local concern in an appropriate style and language. However, it appears to be the performance of these plays by 'ordinary' people that heightens the experience of watching them for the audience. These performers do not necessarily need to be recognisably from the same community as the audience to evoke this reaction. Rather, the sense of identity and connection appears to come from the fact that they are people 'like us' rather than professionals.

The question of sustainability

The survey data shows that the field of TFA is characterised by short-term projects that do not have a long life within the target community. The majority of TFA projects (42.42% of the surveyed sample) are short-term interventions, lasting just one month or less. Less than one quarter of the projects run between two and six months (24.24% of the surveyed sample), and one third (33.33% of the surveyed sample) are more long-term ongoing projects.

This evidence of short-term interventions indicates that many projects are on-off interventions and that most projects are not handed to the community to run on a sustained basis. There may be a number of reasons for this amongst the projects of the surveyed practitioners. An examination of the case studies reflects that it is a lack of either skills or resources that prevents this. While the lack of resources may be real, the lack of skills may simply be perceived.

In only 30% of the surveyed TFA practices were the content of the projects and the messages of the plays determined by the participants. This is evidence of a great reliance on outsiders in this regard, and suggests that these projects cannot hope to be sustainable without having empowered the participants to engage in meaningful dialogue about HIV and AIDS.

Most of the case study projects fit within the modernisation or DSC paradigm, where the performances are seen as a way to pass correct information to an audience who needs to be informed and encouraged to change behaviour. Although they were not initially

conceptualised as such, both the SACTWU project and the UVHAA project reflect that this is their main purpose. This has meant that there is a strong reliance on outside expert knowledge, and neither group had developed the confidence in their knowledge or skills to be able to create and perform plays on their own.

To some extent this perpetuates the culture of silence around HIV and AIDS, as participants may be afraid to speak up in case their ideas are seen as not 'correct'. This could be counteracted by involving participants to a greater extent during the process of working on the plays, and encouraging more dialogue about the content of the plays to create opportunities for participants to examine their own ideas. Only through the opening up of this dialogue can this confidence amongst the participants in their own self-knowledge be developed.

While there is evidence that confidence was built regarding the participants' performance skills, both the SACTWU and UVHAA participants noted that they would not be able to create other performances alone. Having plays written by an outside expert may hinder the group, in that an unequal power relationship is established from the start, with expert knowledge about the topic and about how to frame it in a play coming from the outside. In contrast to this, the DUT participants showed a great deal of confidence in their ability to create further plays.

From the start of the process, the DUT students were given greater opportunities to participate, and were seen as equal partners in the project process. The students were reliant on their own ideas to create performances and accountable for the success of their performances. This notion of accountability is vital for empowerment. Once the students had received a positive reaction to their first performances, their confidence in their ability to continue with the project grew. Only a lack of time and financial resources hindered them from continuing with the project.

If sustaining a project is about the participants' confidence and their perceived ability to continue, then it would appear that encouraging dialogue and greater levels of participation in more of the project processes would make for more sustainable projects. Viewing the projects as partnerships of equality rather than interventions might encourage this.

A further factor than hinders sustainability is whether or not participants are confident about using the medium of theatre to engage with others on these issues. In only 27% of the surveyed practices is the medium selected by the participants. While the questionnaire does not allow respondents to give an indication of whether participants would have selected a different medium for communicating about HIV and AIDS issues, it does suggest that there may be cases where the medium is imposed on the group. Unless the participants are fully comfortable about performing, they will not continue to do so once the implementing organisation has withdrawn from the project.

Another factor that might encourage more sustainable projects is whether the participants are selected by the target community or by funders and organisations from the outside. In only 28% of cases is this local selection reported by the surveyed TFA practitioners. This lack of local involvement in this aspect of the projects may hinder the longevity of the projects because the participants do not have the necessary mandate and support from their community.

It is evident that current TFA practice, as reflected by the survey population, prevents the development of full partnerships between the community and the implementing organisation. To build more sustainable projects, there would need to be a greater emphasis on building specific skills and engendering a sense of empowerment amongst the participants. This would meet Arnstein's concept of citizen power, where project participants and beneficiaries are involved at all levels of decision-making of the projects.

The question of efficacy

While I have been critical of current practice, with its dependence on the modernisation approach to passing on information and attempting to influence behaviour, there are still tangible benefits from this work, for the participants and for the rest of the beneficiary community. The case studies show that improving the well-being of participants, one of the key identifiers of participation is present in all instances.

There are two primary areas to investigate under the umbrella of efficacy. Firstly, it is important to explore whether or not the project was effective in bringing about personal

development and empowerment for the participants. This can be evidenced by behaviour change and a sense of power and self-efficacy amongst the participants. Secondly, it is important to investigate whether or not the project was effective in bringing about empowerment and development more broadly within the community, on the level of social change. The question of efficacy is not explored in the practitioner survey, so this discussion is based on the case studies.

There is no doubt that the three case study projects have had a remarkable impact on the participants in each case, albeit in different ways. The SACTWU project participants mention that they have learnt a great deal through the project, and that participation has boosted their confidence in talking to others about HIV and AIDS issues. They also report an increased sense of responsibility with regard to their own behaviour choices and to setting an example for others. This is evidence that participating in TFA projects can increase knowledge and influence attitudes.

The self-awareness created through involvement in these projects can increase the confidence of individuals, and through this they may be able to develop the ability to “determine the course of their own lives”, which White identifies as an important indicator of empowerment (2004:24).

The DUT students also recognised this sense of responsibility, asserting that involvement in the project made them believe strongly that they should ‘practice what they preach’. Involvement in the project made the students question their own behaviour, and a large group of them went to the campus clinic to test for HIV as a result of participating in the project. This is evidence that participatory TFA projects can directly influence behaviour.

The UVHAA participants noted an increase in knowledge, and because of this they enjoyed an increased status in the community. Participating in the project meant that they had learnt not only about HIV and AIDS, but also essential life skills including resilience and confidence. One of the boys mentioned that he had learnt how to resist peer pressure. This is evidence that participation is effective in bringing about a greater personal power for the participants.

All of these benefits are, however, focused at the level of the individual participants, and we need to examine whether these benefits extend beyond the participants. Audiences may also have benefited from the shared information that is presented in the performances. Friends, family members and peers of these participants who have closer contact with them over a sustained period of time may have benefited from shared information and possibly from shared skills.

Where individuals pass on information on a personal basis, rather than within the confines of organisations and planned activities, then awareness of HIV and AIDS issues enters the consciousness of the community in a more natural way. This internal passing on of information may be more powerful than continuous interventions from, outside the community, and may have the potential for the development of a social movement. This shows how TFA can have an agenda-setting role, and may demonstrate the power to influence thinking about HIV and AIDS. If this influence is exerted at the levels of social groups, then this can foreseeably bring about change in beliefs and practice. However, for it to bring about broader change, this influence needs to be at the level of policy-makers and those in power.

The extent to which current TFA practice can empower or build a community more broadly is questionable. Malhotra, Schuler, and Boender (2002) caution that measuring empowerment is a complex issue, and must take into account the broad concepts of empowerment as well as local context-specific indicators. For the purposes of this study, I examine empowerment or the potential for empowerment in TFA projects against criteria based on a Freireian understanding of empowerment; namely equality, problem-posing, conscientisation, and praxis.

TFA practice and equality

The research data suggests that participants are not always recognised as equals within their own community group, within the structure of the project itself, or by the implementing organisation. In each case study, and in the majority of the surveyed practices, the expert information on HIV and AIDS comes from outside, from others who know 'more than' and are therefore recognised as 'more than' the participants. This lack of equality prevents the participants from becoming fully empowered.

The context in which these TFA projects operate, and the contexts within which the participants live both influence notions of power and equality, and will influence power relations and the balance of power within the group.

Where participants within the case study groups themselves start off as equals, a number of problems are recognised. The group of DUT students in the AAA-HA project noted that equality within the group created a certain amount of chaos, and that they needed outside intervention to ensure that they did not drown out each other's voices in creating their theatre performance.

This suggests that internal group issues of power and control can be addressed by the outside implementing organisation, but that this should be at the request of the group. It is important that in the process of intervening, the catalyst does not remove power from the participants, but finds a way to help them to balance power and responsibility amongst themselves.

In some instances, individuals may take on leadership roles within the group, upsetting the internal balance of power. In the case of the Sinolwazi Drama Club; the individual who has taken on this leadership role seemingly influences other participants negatively, given her own lack of enthusiasm for the project. Although ideally these groups should be encouraged to deal with these power issues on their own, the inherited legacy of the patriarchal society from which they come may prevent this. Again, outside intervention may help to redress this balance.

The group processes may be hindered by power-play within these projects, and a lack of equality within the projects may hinder development at both the personal and the community levels. However, participation in the projects, even where they do not allow for equality in the project itself, may have an impact on power relations within the beneficiary community.

The UVHAA project shows how one child, previously of a low status in the community, enjoyed a greater status after being involved in the project. While the project did not bring about equality, it certainly went some way towards giving the participants greater power in their own community. This is evidence that participation, even at minimal levels,

can bring about personal empowerment and effect changes in the balance of power within the target community.

TFA practice, problem-posing and conscientisation

Freire (1985) argues that problem solving involves learners examining their objective reality through investigating that reality, building on prior knowledge, and revising their understanding of reality-based new knowledge. Theatre can potentially be used to present a vision of reality that audiences can investigate and re-imagine for themselves based on newly acquired knowledge, thus providing a good vehicle for problem-posing. However, the collected data reflects that participation in problem-solving processes is minimal in TFA projects.

All three of the case study projects report that the participants gained access to new information through these projects, and that they personally learnt more about HIV and AIDS and about performing through their participation in the projects. The research data reflects that this newly acquired information builds the participants' confidence both in assessing their own behaviour and in speaking to others. To some extent, this acquisition of information can build the local capacity required to bring about development. However, this information does not always equate to the kind of knowledge envisioned in an understanding of critical consciousness, and thus may not bring about empowerment.

Freire (1970) asserts that knowledge is practical, dynamic and entails a dialectical and dialogical relationship between "the knower and known" (Elias, 1994:63). I have previously noted how dialogue is not encouraged where TFA projects make use of outside experts in the creation of scripts. It would appear that this dialectical relationship between the knower and the known is also missing. Where participants are involved in projects where they do not actively question the assumptions and messages encapsulated in the pre-written scripts, they do not engage with this 'knowledge' dialectically, where the knowledge creates the knower, and the knower creates the knowledge. Rather than participants in TFA actively questioning their own lived experience, and the material conditions that bring about HIV and AIDS, we see a passive acceptance of what is handed down from the experts.

True conscientisation involves a step further than building knowledge, where people come to understand how they are prepared to challenge or transform reality. While participatory theatre should theoretically be able to bring about this transformation, my study reveals that this happens to a very limited extent in the TFA practice of the surveyed group. This points to the finding that while TFA practice remains at the current level of informing and changing people, it cannot be truly empowering.

TFA practice and praxis

Freire (1985) argues that participation and conscientisation necessarily brings about praxis, where reflection leads to action in an ongoing cycle. While I have mentioned some of the action that is a direct result of participation in the case study projects, this action is limited to the individual level, where participants are inspired to act based on the information or skills that they have developed during the course of the project.

Because participation is limited to a number of individuals, this action will also be limited to these individuals. The research reflects that participants in the case study projects take action in their own lives, with regard to talking to others about HIV and AIDS, helping others, and, in one case, getting tested for HIV. However, there is no indication of action taken that might challenge the social power imbalances that exacerbate the epidemic. If TFA practice hopes to bring about broader development with relation to HIV and AIDS, and how these issues are viewed in the community, then participation will need to be extended to include more people. Operating as it is at the current levels of first and second generation EE; TFA practice cannot bring about the required communal action necessary to effect social change.

In summary, the research data suggests that contemporary practice within HIV and AIDS theatre is not fully participatory, even though it does claim to be so. Current practice remains more at the level of intervention than participation, and most of the participation in the surveyed projects and in the case studies remains at lower levels of Arnstein's ladder of participation and of my own scale of TFA participation.

The processes of problem-solving, conscientisation, and praxis are limited by the fact that participation happens only at limited levels. Without a greater emphasis on the

processes of involvement for the participants, and a greater striving for equal partnerships between the implementing organisations and the beneficiary communities, there can be no expectation of lasting empowerment.

However, it is important to recognise that there are marked benefits for participants in the case study projects, and the participatory strategies employed by the surveyed practitioners are similarly likely to improve the wellbeing of participants. Even participation at the lowest levels can bring about these benefits. The challenge is to extend this to involve participation by more people at more levels. This will be discussed further in the following chapter.

CHAPTER 12: CONCLUSIONS

This chapter presents some of my conclusions, with recommendations for adjusting theory and further to inform research towards continuously improving work in the field of communicating about HIV and AIDS through theatre.

The analysis of the data collected through this study, gives insight into the current state of participatory TFA practice, its justifications and the challenges faced in implementing such projects. I set out to prove four hypotheses at the start of this study, and will add my conclusions to each one below.

Proving and disproving my hypotheses

Participation in theatre projects happens at different levels and in different ways.

The collected data proves this hypothesis, and reflects that participation does happen in theatre projects in a range of different ways and at different levels. The scale of participation that I propose as a measure for this reflects the different strategies that are used by intervention organisations to draw participants into their theatre projects.

This scale is particularly designed to measure projects that work towards a theatre performance at the end of a participatory process with individuals who are based in the beneficiary community. It is therefore not a suitable measure for other projects that may work only with role-play and other drama games, as many of the surveyed contemporary practitioners do. However, this scale can be adapted to measure other types of interventions.

While the case studies reflect different ways of participating and the different effects of this, it may be useful to do a comparative study of these effects for both the participants and the beneficiary community at large, to investigate if any one way is better than another.

Practitioners who are aware of appropriate theory will create theory-driven interventions that are consciously designed to meet their goals.

While the research data suggests that most practitioners work in projects that are theory-driven, their practice does not reflect that these theories are strictly applied. Rather, it is apparent that TFA practice is influenced by a wide range of theories and that these practitioners adapt and adjust these theories to suit their needs.

The theory of Paulo Freire is the most commonly applied theory that informs practice amongst the surveyed TFA practitioners. This is followed by theatre and performance theories. Communication for development theory and behaviour change theories are used to a lesser extent to inform the work of TFA practitioners. However, the practice of the surveyed practitioners reflects that their work adheres more to the theories of behaviour change communication than participatory development.

It seems that the surveyed TFA practitioners are primarily guided by the specific goals of increasing awareness about HIV and AIDS and changing behaviour to reduce HIV prevalence. Driven by these imperatives, current practice in TFA remains in the realm of modernisation and development support communication but makes use of participatory strategies. These strategies draw in community members to participate in theatre projects, but are not based on Freireian theory and the principle of equality that is a necessary component to bring about empowerment.

To some extent then, the research findings disprove this hypothesis, as practitioners are not guided by theory, but are rather guided by their goals, which are to a great extent determined by project funders and other gatekeepers.

Participants in inclusive participatory theatre projects are likely to feel a sense of empowerment through their involvement in the projects.

All of the case study examples reflect that participating in TFA projects has enormous benefits for the participating individuals and can build a sense of empowerment for these participants. The participants develop a sense of 'power to' and are able to effect change in their own lives. However, the benefits seem to be limited to the immediate participants

and there is limited potential to expand this sense of power without developing a greater sense of critical consciousness.

While the noted personal growth and more critical thought processes provide an example of problem-solving on an individual level, a solution to the epidemic will not be found unless opportunities are created for people to examine the conditions that have escalated the epidemic, particularly issues of social inequality and gender inequality. HIV and AIDS interventions must address these conditions, and provide a greater space for problem-posing.

The surveyed projects and case study examples show that current practice is dominated by a behaviour-change approach to communicating about HIV and AIDS. This means that in most cases, communication is based on bio-medical information about HIV transmission and prevention, with instructions to the audience as to how to avoid or to treat HIV infection. To address the problem more comprehensively than simply providing solutions, communication about HIV and AIDS must explore the more complex personal and political issues around sex and sexuality, gender, relationships and power. Without this critical exploration, HIV and AIDS interventions are likely to remain at the level of spreading awareness.

While this awareness about HIV and AIDS is vital in curbing the epidemic, HIV prevalence rates will not reduce without behaviour change. The research data provides evidence that individuals can be encouraged to make changes in their own lives through participating in theatre projects. This individual behaviour change can be spread throughout pockets of the community through social networks and through the opening up of dialogue about HIV and AIDS.

Empowerment, as defined by Sadan (1997), relates not only to the actual, but also to the *perceived* ability to make changes and take control over a situation. My hypothesis that participants in inclusive participatory theatre projects are likely to feel a sense of empowerment (this perceived ability) through their involvement in TFA projects is proven in this study, where there is evidence of a sense of personal empowerment for all of the participants in the case studies. This sense of empowerment creates agency for these participants, who are then able to bring about changes in their own lives.

However, if practitioners wish to escalate the effects of their projects from bringing about individual change to encouraging a re-examination of power structures and to bringing about societal change, then participatory theatre projects need to encourage participation at all levels, to build a greater critical consciousness.

Practitioners who ensure that their work is participatory are likely to achieve greater success in bringing about development and social change in the communities in which they work.

While all of the surveyed projects reflect that they make use of participatory strategies, theories of participation and empowerment suggest that the extent to which this participation happens is unlikely to bring about development and social change for the beneficiary communities. The low levels of participation encouraged by contemporary TFA practice mean that there are essential elements to empowerment missing from these projects.

Freire calls for liberatory education to involve an investigation into the root causes of oppression. In the case of HIV and AIDS, this would mean to understand fully how the epidemic affects the target community in question, and how to overcome the associated problems. While the simple medical answer to the question of what causes AIDS is *HIV*, any deeper understanding of the epidemic should explore the patterns that explain how and why HIV is transmitted as it is currently within the target community, and why AIDS has such a devastating effect on development in South Africa.

The key factor in empowerment education is *problem-posing* and not problem-solving. Neither the surveyed theatre projects nor the case studies provide convincing evidence that problem-posing is always present in their participatory processes. I would argue that the impetus to change cannot be presented in a staged play. It is only through participating in structured dialogue that a genuine consciousness can be created, and communities can find ways to take action towards addressing the specific conditions that continue to feed the epidemic. The essential element of *praxis* is missing from current practice.

My hypothesis that practitioners who ensure that their work is participatory are likely to achieve greater success in bringing about development and social change is disproved through this research. Rather than guaranteeing development, participating may in fact hinder it, if it is used as strategy to bring about compliance rather than to develop critical consciousness.

Adjusting expectations for practice

When measured against established scales of participation and expectations regarding the potential for empowerment through participatory theatre projects, contemporary practice in TFA comes up short. I would suggest that instead of discrediting this practice, when the research data clearly shows that it is useful; we should rather rethink the criteria against which we measure successful practice.

There may be a number of factors that affect development and empowerment for a group participating in any TFA project. My own research suggests that these factors include the following:

- The stated goals for the project;
- The theory informing the project;
- The input and information from outside organisations;
- The levels of participation;
- The structure of the project and potential for sustainability;
- The context of the beneficiary community.

Where the goals for development are determined outside the beneficiary community, as they are in many HIV and AIDS interventions, and in a large majority of the surveyed TFA practices; then the potential for empowerment is reduced.

Where organisations working in the field of TFA make choices about participation based on theories that essentially uphold existing power relations and do nothing to question the status quo, then this further impacts on the empowerment of those participating in their projects. This suggests a need for new theory to inform theatre practice that challenges the status quo. While Augusto Boal's work does this to some extent, there is

scope for this to be adapted to specifically focus on the tensions between health communication and development.

My research shows that where the stress is on intervention rather than participation, optimum intervention cannot be reached, and participation happens at reduced levels that cannot bring about genuine empowerment. The scale of participation that I propose for understanding TFA practice provides a guide as to how participation can be measured, and what levels should be aspired to, in order to bring about greater empowerment.

Empowerment can only, however, be brought about where projects are structured in such a way that the immediate participants and others from the beneficiary community are brought into the project at a wider range of levels, and where equal partnerships are developed between the TFA implementing organisation and the community members.

Projects that are created as partnerships will bring about greater sense of ownership for the beneficiary community. This sense of ownership may help to sustain projects that are then more effective in bringing about real change. Participation in a single theatre intervention cannot bring about social change. For individuals within the beneficiary communities to bring about change in their own lives, a wider programme is needed for community or social change to be addressed simultaneously.

These wider programmes must take into account the context of the local community. Where participants are drawn into decision-making at all levels of the project then this local knowledge is invaluable in guiding programmes that are cognisant of the local context, and are able to build knowledge in the Freireian sense, that can spur the community towards taking action.

At present, TFA appears to have an impact only at the micro-level of individuals and those with whom they come into contact. For greater impact at the macro-level, TFA may need to engage more directly with policy makers and those in structures of power, or more actively to encourage project participants to take on this role of engagement, for self-directed change.

Conclusion and areas for further research

While I have based the assumptions presented above on my own research, there are a number of gaps in understanding which my research has revealed.

How participants are recruited and selected for TFA projects, or why they self-select and choose to become involved, could be investigated further. This would also provide some insight into the motivation for participation and how these participants view their own development or the development of their communities. Future development communication thinking and theory could focus on the question of participant involvement to further our understanding of these dynamics.

My research is focused specifically on theatre that engages with HIV and AIDS issues, and therefore does not allow for an investigation into other issues. Further investigation into what local communities see as their primary concerns may show that HIV and AIDS are not a priority issue for attention. This may encourage theatre for development practitioners to broaden their practice and to allow the participating community to determine their own important topics for performance. Theatre for development practice can be better served by asking questions regarding the most pressing concerns of the communities that they work with, rather than making assumptions regarding these.

The issue of deciding on the subject matter for theatre projects is important if communities are to have a say in their own development. Where issues such as poverty, crime and unemployment dominate national consciousness, community groups may feel that HIV and AIDS are of less importance. To some extent this may drive up the prevalence rate, and this spurs donors on to invest more in HIV prevention programmes. However, if communities do not feel that HIV and AIDS are a priority, they are less likely to be meaningfully involved in such projects, and projects may have limited success.

The imposition of HIV and AIDS issues into a community may be counter to development. I anticipate a new wave in *dependency theory*, where beneficiary communities and other development activists argue that TFA interventions which are informed by the modernisation paradigm to development in fact serve to disempower communities. This raises questions that could be addressed by development and health

behaviour theorists, regarding the balance between national and international needs (for example, the Millennium Development Goals) and the needs of the local people in specific communities.

It is clear that the current approach to HIV and AIDS communication is overwhelmingly a western bio-medical approach, where expert opinion is held in higher regard than local knowledge. While HIV and AIDS are clearly problems that are not going to disappear without intervention, I would argue strongly that these interventions need to be informed at a greater level by local people who are encouraged to investigate these issues for themselves. This requires a greater emphasis on dialogue than we see in current TFA practice.

Placing an emphasis on dialogue requires that we further separate the product and the process of theatre, and that we focus more on the participatory processes of talking about HIV and AIDS and creating theatre performances based on shared and negotiated understanding of the conditions that give rise to HIV and AIDS, rather than on determining the messages presented in the finished plays.

This shift in emphasis would mark the move from communicating about HIV and AIDS as a health issue to that of a development issue. Only when more genuinely participatory practices override the currently preferred approach of encouraging behaviour-change can theatre be recognised as a creative way in which people can become empowered and effect real change in their own lives and their communities.

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APPENDICES

APPENDIX 1: APPLIED THEATRE PRACTITIONER QUESTIONNAIRE

The questionnaire forms part of a study conducted by Emma Durden as part of a PHD thesis being completed at the University of KwaZulu-Natal. The study is an attempt to better understand the current practice of applied theatre in Southern Africa and to explore the links between theory and practice.

Please note that participation is voluntary and you may withdraw from the study at any time without any negative or undesirable consequences to yourself. There are no personal benefits to participation in the research. However, the project seeks to improve understanding in the field at large and a report on the data collected will be made available to any interested participants. The questionnaire is anonymous, and confidentiality regarding your responses is guaranteed.

THANKYOU FOR YOUR TIME AND YOUR PARTICIPATION

Please tick the relevant boxes below. If you find that your practice varies widely from project to project, please tick according to your most RECENT applied theatre project.

SECTION A: About you

Please tick which most accurately describes your work

1: I work mostly as:

An organisation	A researcher / academic	A consultant
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2: I work mostly in:

South Africa	Other African countries	Overseas
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3: I consider myself to be predominantly:

A theatre practitioner	A development practitioner	Both
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4: The work I do makes use predominantly of:

Scripted plays	Work-shopped plays	Role play and improvisation	Drama games and activities
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5: The duration of individual projects with one community / group is usually:

One month or less	Two to six months	Ongoing long-term projects
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SECTION B: Applying theory in your projects

Please tick which is most appropriate to describe your work

- 1: I am conscious of theory and deliberately apply theory to projects
- 2: I am conscious of theory but unconsciously apply this to projects
- 3: I create projects that are not theory-driven

SECTION C: The specific use of theory

If you consciously apply theory in your projects, please tick any of the boxes below that inform your projects

- 1: Communication for development theories
- 2: Paulo Freire and participation theories
- 3: Behaviour change theories
- 4: Theatre aesthetics and performance theories
- 5: Audience reception theory
- 6: No theory

SECTION D: About the theatre

If your work involves the creation of plays, please tick which is most appropriate to describe your work

- 1: We strive to create a theatre product of a high aesthetic standard
- 2: The standard of the theatre is secondary to the participatory process
- 3: The process and product are equally important in our work

SECTION E: About participation

Please tick the most appropriate block – if more than one group participates at these levels, please mark both (or more) blocks

1: Who determines the goals for your projects?

Funders	Other experts	My organisation	Gate-keepers in the community	Community participants
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2: Who determines who participates in your projects?

Funders	Other experts	My organisation	Gate-keepers in the community	Community participants
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3: Who determines the content / message for your projects?

Funders	Other experts	My organisation	Gate-keepers in the community	Community participants
---------	---------------	-----------------	-------------------------------	------------------------

4: Who determines the medium for your projects?

Funders	Other experts	My organisation	Gate-keepers in the community	Community participants
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5: Who trains the participants in your projects?

Funders	Other experts	My organisation	Gate-keepers in the community	Community participants
---------	---------------	-----------------	-------------------------------	------------------------

6: Who does the research for your projects?

Funders	Other experts	My organisation	Gate-keepers in the community	Community participants
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7: Who writes the plays for your projects?

Funders	Other experts	My organisation	Gate-keepers in the community	Community participants
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8: Who performs in the plays for your projects?

Funders	Other experts	My organisation	Gate-keepers in the community	Community participants
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9: Who does monitoring and evaluation for your projects?

Funders	Other experts	My organisation	Gate-keepers in the community	Community participants
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10: Who receives copies of the documentary evidence (videos, photos, reports) of your projects?

Funders	Other experts	My organisation	Gate-keepers in the community	Community participants
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SECTION F: Rationale behind the project and the selection of participants

IN BROAD TERMS, WHAT DOES YOUR WORK MOSTLY DEAL WITH?

Please tick which is most appropriate. If more than one, please give double ticks to the practices that you most often use.

- 1: Working with specific in-groups to pass pre-determined information to the community
- 2: Encouraging behaviour change with a target group
- 3: Spreading awareness about an issue
- 4: Consulting groups about their issues of concern
- 5: Hand-selecting individuals from target community / group to work on the project
- 6: Working with individuals selected by the target community / group themselves
- 7: Including individuals from the target community / group in managing the project
- 8: Creating partnerships with target community / groups where they decide on policy and management issues

SECTION G: Involvement in the project by the participants

Please tick which strategy most accurately describes your work.

- 1: Participants are selected to appear in performances based on scripts that are written by my organisation
- 2: Participants are selected to appear in performances in which they have some input
- 3: Participants are selected and trained in issues which they create performances about

4: Participants make recommendations about the content of performances which are then written by my organisation

5: The performances are created together by my organisation sharing decisions with the participants

6: The performances are initiated and created by the participants and all decisions are made by the group on their own

7: The target community / group initiates performances and creates scripts in consultation with my organisation.

8: The target community / group and my organisation are in full partnership regarding all aspects of the project.

Are there any other comments you would like to add about your work ?

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.....
.....

Are there any comments you would like to make about this questionnaire?

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.....
.....

THANKYOU FOR YOUR TIME AND PARTICIPATION

APPENDIX 2: SEMI-STRUCTURED INTERVIEWS WITH PROJECT CO-ORDINATORS

Preamble:

This questionnaire aims to better understand the current practice of applied theatre, and in particular community participation and theatre for development.

The questionnaire forms part of a study conducted by Emma Durden as part of a PHD thesis being completed at the University of KwaZulu-Natal.

Please note that participation is voluntary and you may withdraw from the study at any time without any negative or undesirable consequences to yourself. There are no personal benefits to participation in the research, however, the project seeks to improve understanding in the field at large and a report on the data collected will be made available to all participants.

The questionnaire is anonymous, and confidentiality regarding your responses is guaranteed. The discussion that we have will be recorded. The analysis of the discussion will be reported under the heading of your project, but your name will not be mentioned.

- 1: Please fill in the attached questionnaire.
- 2: What were the specific goals of this project?
- 3: Do you think those goals were achieved, if so – how?
- 4: What was your experience of participation in the project?
- 5: Did you receive any feedback from participants in the project?
- 5: What was your opinion of the final performance product that was created?
- 6: Did you receive any feedback from audiences on the performances?
- 7: What do you think would have been different if there had been less participation (eg: more professionals brought in)
- 8: What do you think would have been different if there had been more participation? What further participation could be considered?

APPENDIX 3: FOCUS GROUP DISCUSSION GUIDE WITH PROJECT PARTICIPANTS

Preamble:

I am hoping through this discussion to get some more information about how you experienced participation in the theatre project that you have recently been a part of. The discussion forms part of a study conducted by me (Emma Durden) as part of a PHD thesis being completed at the University of KwaZulu-Natal.

Please note that participation is voluntary and you may withdraw from the study at any time without any negative or undesirable consequences to yourself. There are no personal benefits to participation in the research, however, the project seeks to improve understanding in the field at large and a report on the data collected will be made available to all participants.

The discussion is anonymous, and confidentiality regarding your responses is guaranteed. The discussion that we have will be recorded. The analysis of the discussion will be reported under the heading of your project, but your name will not be mentioned.

QUESTIONS FOR PARTICIPANTS

1. Why did you choose to get involved in this project? What did you expect from it when you started?
2. What was your experience of the project?
3. Did you always know what was going on with the project? How?
4. Were you part of making decisions about the project? How?
5. Do you think you have been responsible for making the project a success? How?
6. Has the project made you feel differently about HIV and AIDS? How?
7. Have you learnt any new skills and knowledge through the project?
8. What could have made the project better for you?
9. They say that participatory projects make people feel stronger and more able to take control over their own lives. Do you feel this has changed? How?