

Supporting community action on AIDS in developing countries



FEEL! THINK! ACT!

A guide to interactive drama for sexual and reproductive health with young people

Acknowledgements

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The Alliance Regional Youth Programme organised an initial workshop and three interactive drama workshops between 2004 and 2007. The workshops allowed us to explore the various concepts and practice of using theatre and drama techniques for development and to share interactive drama activities for different purposes. We agreed on the content and approach of the toolkit and based it on our discussions and activities

We wish to acknowledge the ideas and creativity of the theatre and drama and participatory learning and action practitioners who have been developing this area of work over many years and in many countries. The resources on page 186 list the key documents that we have used in developing the toolkit. The tools described in the toolkit are the result of the creativity and enthusiasm of many people and the original source of each tool is rarely known.

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INDEX OF TOOLS

This is a list of all of the tools described in the toolkit. The page number shows the place where the tool is described fully. The tools are interactive and participatory. They are designed to help participants express their ideas and feelings, think through issues and work out solutions.

This variety of tools allows young people and communities to learn together in different and fresh ways and helps to get an all-round view of situations facing young people.

Select the most appropriate tools for your group and objective or topic. For example, mapping is good for learning about risky places in a community, whilst role-play is good for analysing interactions between young people and those who help or hinder communication about safer sex.



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Chapter 1USING INTERACTIVE DRAMA IN SRH WORK



About this toolkit

This toolkit contains ideas and drama and discussion activities aimed at helping us to learn about sexual and reproductive health (SRH) issues and to gain skills in facilitating and using interactive drama tools and techniques.

Why use interactive drama with communities on SRH issues?

Many of us are looking for better ways of working with young people to think about and take action to improve sexual and reproductive health. This toolkit looks at how we can use interactive drama for this purpose. We believe that interactive drama is an approach that allows us to look at our life experiences and understand better why we behave as we do and the effects of our behaviour. It helps us find ways to improve our sexual health that are safe, healthy and happy for everyone. This differs from the type of health education that gives people rules and messages

What are the aims of this toolkit?

- ▲ To encourage practitioners in drama and in SRH to share their knowledge and skills and work together to bring the power of interactive drama to change lives for the better.
- ▲ To increase the use of drama as a creative and participatory process to address SRH issues rather than a oneway message delivery tool.
- ▲ To equip practitioners with the knowledge, skills and attitudes that they need to use interactive drama effectively in SRH programmes and other areas.
- ▲ To enable practitioners to use drama in a positive way, which reduces stigma and discrimination towards vulnerable groups.



This toolkit is aimed at youth groups, community youth workers, community drama groups, teachers, people working in sexual and reproductive health and HIV programmes, and anyone who wants to use drama as a process of learning and action on sexual and reproductive health.

using one-way communication, such as talks, message plays or posters. The results of this approach are often disappointing – for example, many of us know the messages on how to protect ourselves from HIV infection but we do not always act on them.

There are hundreds of youth drama groups in African countries. Group members develop a love for drama in school, and decide to continue this activity after leaving school. They perform plays on social, health and environmental issues. Drama gives them a source of income and a way of expressing their culture.

Group members often have good skills in performance but are less skilled in using facilitation techniques to turn drama into a means of learning and behaviour change. There is a need to help them to develop their facilitation skills so that they can use drama in a more interactive way that engages the community.

What is in this toolkit?

This toolkit contains information that can help us to understand:

- ▲ the features and benefits of using interactive drama
- ▲ how to facilitate interactive drama sessions on SRH in a safe and ethical way
- ▲ how to use interactive drama on SRH with groups and the community
- ♠ how to use the learning from group work to develop a play and perform it in an interactive way with the community
- ▲ how to monitor and evaluate your programme
- ▲ essential information on SRH and life-skills.

What is SRH?

Sexual and reproductive health (SRH) is physical, emotional, social and spiritual wellbeing in those areas of life concerned with sexuality and having children. It includes our feelings and desires, sexual relationships. marriage, having children, protecting ourselves from infection and making choices about our sexual and reproductive lives.

How did we develop this toolkit?

The toolkit grew out of the experience of the Alliance, its partners and drama practitioners in Zimbabwe, Malawi and Zambia. We use drama techniques as a part of our participatory learning and action (PLA) tools with young people to explore problems, their causes, effects and solutions. We also use and observe plays being performed in communities by drama groups, teachers and others. We see great strengths in these drama-based approaches but would like to build on them in two ways:

- ▲ To increase the use of drama as part of a participatory process which engages young people from the start in defining problems, exploring their causes and consequences and finding solutions.
- ▲ To improve the content of performed drama so that it provides true information and shows more positive images and stories which do not discriminate or undermine vulnerable people, such as those of us living with HIV, girls or orphans.

The content of the toolkit was developed at three workshops which brought together theatre and SRH practitioners from Zambia, Malawi and Zimbabwe. Three of the participants, Gill Gordon, Ross Kidd and Takudzwa Mukiwa, wrote this guide.

How to use this toolkit

The toolkit looks at two broad ways of working:

- 1 In specific groups using interactive drama activities and discussion to explore issues, vision how things should be, find solutions and build skills.
- **2** Community events involving drama and discussion. These often begin with plays followed by discussion and action planning.

The toolkit describes activities which we can use in both these ways of working. We can work with key groups and the community to understand the issues deeply and agree on what they want to change and strengthen. We can then create a performance for a specific purpose for wider audiences based on local situations, culture and ideas.

The toolkit contains the following topics:

Chapter 1 introduces the toolkit.

Chapter 2 helps us to work together safely and ethically on the topic of SRH.

Chapter 3 equips us with key knowledge and positive attitudes on SRH.

Chapter 4 builds our understanding and skills in facilitation.

Chapter 5 builds our understanding and skills in drama tools and techniques.

Chapter 6 helps us to understand why we behave as we do and provides a framework for thinking about adopting and keeping behaviours which protect our health.

Chapter 7 provides ideas and tools for mobilising communities and groups to work on SRH and assess their current situation.





Chapter 8 provides ideas and tools to use with groups to understand the issues in greater depth and the causes and consequences of problems and to find solutions.

Chapter 9 provides ideas and activities to create and perform a play with audience interaction.

Chapter 10 gives some ideas for monitoring and evaluating interactive drama activities.

Chapter 11 provides key facts on SRH issues, gender, culture and life-skills. We can use this to ensure that we have correct facts on specific topics.



A definition of interactive drama

Drama-based activities on problems identified by the participating group or community and performed by the participants themselves and used as a stimulus for discussion aimed at problem- solving, decision-making and action.

What are the features of interactive drama?

There are three main features for interactive drama:

- 1 Participants are active, not a passive audience: Participants are the thinkers, doers, problem solvers and testers of new ideas. They use their experiences, needs, concerns, feelings and knowledge as a starting point for drama and a focus for discussion and action.
- 2 A facilitator: There is a need for a facilitator for the interactive drama processes and activities. The facilitator helps the group to work well together, carry out the activities and achieve their agreed results.
- 3 Combination of drama and discussion:

 Drama is combined with discussion to actively engage people in a learning process about what happens in their lives, why things happen, what they mean for their lives and how they can strengthen good practices and change harmful practices.



What are the benefits of using interactive drama?

- ▲ Learning about our lives: Interactive drama gets us to show, talk about and explore our different life experiences related to SRH. This helps us to learn more about ourselves in a meaningful way.
- ▲ Engages body, head and heart: By being actively involved in the drama, we can imagine and experience how someone might feel, think or act in a situation through taking on the roles of different characters. Through the interactions of the characters we also experience how people's thoughts, attitudes and actions affect them and others. This is very useful in addressing stigma and discrimination, sexuality, gender and relationship issues.
- ▲ Way of discussing sensitive issues: Drama is useful for raising and discussing sensitive issues, because people may feel more comfortable to say things through the voices of the characters than as themselves. The characters raise the issues and then people discuss them, talking about the characters rather than themselves. This opens up a safe space for more discussion than when people are discussing their own lives directly.
- ▲ Accessible: Most communities already use some form of performance with aspects of drama to express themselves on various issues. Drama is therefore a familiar activity. Taking part in basic drama does not require literacy or a high level of acting skill; hence most people can do it. People can speak in their own languages; hence they can understand issues better. Children and young people often enjoy drama and are able to express themselves more freely through it.
- ▲ Voice of the less powerful: Through expressing themselves through drama, the voices of people who are less powerful in our communities (e.g. youth and women) can be heard.

- ▲ Skills building: We can use drama to practise and develop various skills which can include, for example, communication, negotiation and assertiveness. By practising how to manage a real situation, people gain confidence.
- ▲ Builds collective action: Drama brings groups and communities together to discuss and solve problems together.
- ▲ Way of looking for and trying out solutions to problems: Drama allows us to imagine different social situations and work out different solutions to problems we come across. These solutions can be tested through drama because it gives us insights into the practicality of the solutions. In the process we can learn how to implement the solutions.

Challenges

Drama groups often depend on donors or NGOs for their funding and these bodies determine the topics of their plays. Some sponsors allow the drama groups to decide on the messages in the play, whilst others provide them with the messages. Some sponsors control the timing and number of the performances and the drama group may be forced to perform without sufficient research or time for interaction with the audiences. This results in 'hit and run' theatre with a minimum of audience interaction and limited follow-up.

This toolkit will show how to avoid 'hit and run' theatre with the community and use an approach that really engages the community.

For what purposes can we use interactive drama?

Drama can play a range of roles in SRH programmes:

- ▲ bringing people together and creating the opportunity for collective problem solving
- ▲ drawing out participation and the sharing of popular concerns and understanding
- ▲ stimulating discussion and a critical understanding of problems and concerns
- exploring our own sexuality and risk of HIV infection
- ▲ questioning our social and gender norms
- ▲ overcoming people's fears and building confidence and unity
- ▲ testing out possibilities and strategies for action
- ▲ developing individual and group skills and preparing for action
- ▲ building assertiveness and the ability to have more control over our lives
- ▲ creating mutual support and positive peer pressure
- ▲ advocating for community, service provider and government action.



Chapter 2 WORKING TOGETHER SAFELY ON SRH

What is special about SRH?

Using interactive drama for SRH is different to using it for topics, such as agriculture or malaria.

Sexuality is a private topic and we have strong feelings about it. Sexuality is the foundation of our lives as sexual beings who bring forth life – a wonderful and mysterious process. Our societies make up strict rules about sexual behaviour and how males and females should

behave. Because of HIV, sex is more strongly linked with death than in the past and fear about sexuality has increased. We fear people who do not fit into society's ideas about acceptable sexual and gender behaviour. We fear those of us who are living with HIV. If we are not careful about how we use interactive drama, we may help maintain or promote negative ideas about SRH by mirroring these fears without challenging them. We need to understand and take into account the important aspects of SRH that make it a special issue.

Activity: What is special about SRH?



Put up pieces of flipchart paper and ask participants to come up and write on them all their ideas about what makes sexual health a special topic. All ideas are welcome. Discuss the results of the activity.

> Sexual health is a special topic because it affects all of us.



An example of 'What is special about SRH?' ▲ It's best addressed when all the community members from our workshop

- ▲ It affects all age groups, young and old.
- ▲ It affects a person's mind and body. ▲ It talks about the reproductive organs and their
 - ▶ People don't easily discuss it due to cultural barriers
 - ▲ It's a gender issue.
 - ▲ It's special because it's the beginning of everybody's
 - ▲ It's fun talking about it! Half of all jokes are about sex!

 - ▲ It involves every race to be able to work together ▲ It can claim somebody's life if not handled properly.

 - ▲ It is controversial and people get mad easily. ▲ It is confusing!

Working together safely on SRH

Few societies talk openly about sexuality. We keep this part of our lives secret to protect ourselves from gossip, harassment, harm or punishment. In this section, we suggest some ways that can help create a safe, friendly space in which to explore sexual matters through drama and discussion – openly and without fear.

Ideas for creating a safe space for open discussions on sexuality

- ▲ Set clear guiding rules and expectations around confidentiality and listening.
- ▲ Be aware of your own feelings about the topics you are going to cover. This will help you feel more confident during the exercise. Try out the exercises yourself. Don't do any exercise, that you could not engage in yourself.
- ▲ Participants are more likely to trust you if you can share your feelings openly and, by doing this, you also lead by example.
- ▲ Use prayers and songs to relax people and create togetherness.
- ▲ Help participants to look after each other for example, by everyone having a buddy.
- ▲ Organise groups in a way that makes people feel safe for example, as peer groups.
- ▲ Take care how sensitive issues are depicted and talked about.
- ▲ Always remember to leave enough time for participants to share their feelings and to help the group create an atmosphere where participants know they will be listened to.
- ▲ Offer participants time out if they need to take a break.
- ▲ Know where people can go for help if they need it.

The following pages provide more ideas and activities on these points.

Guardian angels or buddies

These are friends in the group who look after us as individuals. They look out for how we are feeling and behaving and we can go to them at any time for comfort and help with problems. We can choose our quardian angel by forming a circle and turning to the person on the right. This is our quardian angel. We could also put names on slips of paper in a hat and ask everyone to pick one. As well as guardian angels, everyone should watch out for and take care of each other.

Divide into peer groups by age and sex to do sensitive activities

When we are using drama techniques to explore sexual issues, it is often helpful and safer to have separate peer groups of males and females and younger and older people. People will then feel freer to talk about their common problems and ideas and will be less afraid of being laughed at or criticised.

When people have worked in separate peer groups, we can facilitate them to share what they wish of their discussions. We can make this safer by giving the groups questions to discuss, asking them to use pictures, role-play or drama techniques to show their ideas and to ensure that people follow the guiding rules of listening, respect and keeping secrets.

Guiding rules on working together

Guiding rules help us to practise important life-skills in using the activities in the toolkit, such as expressing our point of view clearly, respecting others and keeping trust. This will help us form a strong group, reduce our fears and build our confidence.



An example of guiding rules from our Zambia workshop

We will:

- ▲ listen carefully to each other
- ▲ respect each other's views but feel free to disagree and question each other's ideas
- ▲ keep the discussion confidential we will keep each other's secrets ▲ help each other with problems
- ▲ not allow teasing, bullying or bad language
- ▲ let everyone participate in drama and discussions
- ▲ not force each other to tell personal things we will talk about 'people ▲ not have to do activities that we don't feel happy with – we'll just say
 - ▲ take ourselves out of the role after acting and go back to ourselves. After
 - this, no one should talk about us as if we are still in that role ▲ not use our work together as a reason for trying to have sex with
 - ▲ give feedback to each other on what we like and do not like, as we go
 - through the day and at the end of the day ▲ work together towards a common goal in groups and plenary

 - ▲ have fun, use energisers and be lively
 - ▲ be creative, think in new ways
 - ▲ start our sessions on time and be conscious of time, but allow sessions to be longer where the whole group agree.

Activity: Agreeing on how we want to work together

- 1 In single sex and age groups, talk together about:
 - ▲ How would we like everyone to behave in our interactive drama and SRH sessions?
 - ▲ What would we not like to happen?
 - ▲ What would make us feel safe and free to take part?
- 2 Write or draw your ideas.
- 3 Come together and present how you would like to work together, point by point, making sure that everyone understands and agrees with it.
- 4 Write or draw the ideas and put this on the wall or write them in a notebook. Remind each other of the guidelines and add new points if necessary.

Being trustworthy and keeping secrets

Trust is when we believe and have confidence in someone or something. Trustworthiness is being worthy of trust. It is when people can count on us to do our best, to keep our promises and to be a reliable friend. Participants need to trust each other so that they feel safe to share ideas and be creative when they explore SRH issues.

It is good to talk about sexuality and share our knowledge, but that does not mean that we should tell everyone about our own or other's sexual lives. Confidentiality means keeping secrets and not sharing private information with others without their permission. This is important because telling private information can result in harm

to the person concerned; for example, sexual harassment, punishment or hurt. As facilitators and actors we should never ask people to talk about their personal sexual experiences in a group or public setting, because it is not possible to ensure confidentiality in a group. It is best to talk about a sexual experience as if it happened to 'a person they used to know' or 'people like us' rather than telling people that it happened to them.

Tell people that they always have the right to keep quiet about their personal lives in discussions about sex and HIV. They never have to tell friends or others adults about their sexual lives or problems unless they choose to.

Trust activities – what are they and why use them?

Trust games are useful at all stages of group and drama work. They aim to:

- ▲ build up trust between participants and help people to feel safe to talk about sexuality and share their ideas and creativity
- ▲ relax the group, aid concentration and sensitivity and help the group to develop
- ▲ introduce and explore the idea of trust in relationships for example, between facilitators and young people or between sexual partners.

Select your games to suit the group.

As actors or facilitators, we should not

discuss people's secrets with outsiders. However, if a young person tells us that they are being abused or are at risk of abuse, then we need to get help and protection for that person. If a friend is at risk of abuse, we should encourage them to ask a trusted adult for help.



Circle of trust activity

Trust activity 1: Circle trust

→ How to do it

A group of six to eight people stand in a close circle. One person stands in the centre, eyes closed, body straight but relaxed, and falls forwards, backwards or sideways. The group gently pushes the person back into an upright position after each 'fall' or towards another side of the circle. Play the exercise gently, either in silence or singing a lullaby. Many people enjoy the feeling when they are in the middle! Divide into single sex groups if this is more comfortable. Afterwards ask:

- ▲ Did you trust the people in your group to always catch you when you were falling and put you back in the upright position?
- ▲ You have entrusted the group with your body. In what other ways would you trust the people in the group?
- ▲ How does this game relate to our lives and SRH?

→ Facilitator's note

It is important to emphasise the seriousness of safety, so that no one gets hurt.

Trust activity 2: Keeping a secret

→ What is it and why use it?

This is an activity to explore the importance of protecting our privacy and keeping secrets. It helps to encourage confidentiality and creates a safe climate in which to discuss sexuality.

- 1 Ask participants to sit or stand in a circle. Explain to participants that this is a serious exercise about trust.
- 2 Ask participants to think of a secret which they would not want anyone to know. Ask them to write this down on a small piece of paper or make a picture of it, fold it up and not show it to anyone.
- 3 Now ask participants to pass their piece of paper with the secret to the person to their left. No one should look at the folded pieces of paper.
- 4 Ask each person around the circle how it feels to have someone else holding their secret.
- 5 Now ask each person how in turn how it feels to hold someone else's secret.
- 6 Now ask the participants to give the pieces of paper with the secret back to the owner of the secret. Participants can now destroy their pieces of paper and relax.
- 7 Add any ideas from the section on trust and keeping secrets.
- 8 Ask:
 - ▲ What have we learned about keeping secrets in this game?
 - ▲ How shall we use what we have learned in our drama sessions?
 - ▲ What kind of things should we keep secret, and what could we share safely?

Trust activity 3: Blind walk

→ What is it and why use it?

In this activity participants go into pairs. One person shuts their eyes and the other leads them around using a sound. The game explores issues of trust and responsibility amongst participants.

- 1 Scatter chairs and other obstacles around the room.
- 2 Ask participants to go into pairs and label each other as A and B.
- 3 Ask all the As to close their eyes or blindfold them. Explain that B will lead A around the space back to where they started. They can 'lead' their partners in any way they choose. This could be by making a unique sound, touching or talking, or a mixture of both. They should make sure that A does not bump into anyone or anything in the space.
- 4 After some time, they swap positions and As lead Bs.
- 5 Ask:
 - ▲ How did the person being led feel? What helped them to feel safe?
 - ▲ How did the person leading feel?
 - ▲ How does this activity relate to our lives and work?





Sensitive issues

Take care how sensitive issues are shown in stories, role-play and drama. It is very likely that some of us have experienced one of the problems that come up for discussion; for example, HIV infection or a violent boyfriend. We should protect each other and talk about problems in a caring way without judging or joking.

Drama should never show bad things happening to someone in a way that makes the audience laugh at the situation, blame the victim or get sexually aroused by it.





Activity: Protecting each other

→ What is it and why use it?

We read a story, discuss it and suggest how it could be changed to protect those who have faced a problem. We could also ask participants to suggest a situation where someone was hurt by insensitive use of drama instead of the story below.

→ How to do it

1 Read the story below.

A play showed a servant girl who was raped by her landlord. In the scene, she was dressed in a tight skirt and bending over to sweep, whilst the man stood behind her peering at her bottom and looking excited. In the next scene, he was zipping up his trousers and she was crying with her clothes in disarray. During the play, the boys in the audience were laughing and getting excited, whilst the girls sat quietly looking down. Some girls started to weep.

- 2 Discuss these questions:
 - ▲ How do you think the girls felt?
 - ▲ How do you think the boys felt?
 - ▲ What was good or bad about the play?
 - ▲ What message does it give to the audience?
 - ▲ What might happen after the play?
- 3 Ask participants to prepare a role-play about rape and some questions for discussion which bring out the problem and its causes, but that also protect participants from harm and stigma and lead to problem solving. On the next page is an example.

A possible scene

The man comes in first – he is angry because he has quarrelled with his wife and she has gone to stay with her mother. He mutters about how women need to be taught to stay in their place. The servant girl is wearing an old loose shirt and *chitenge* to clean the house. Her movements are not sexy. The man comes in and tells her he wants sex. She refuses and tries to leave the room. He roughly throws her on the sofa and holds her down. The scene is cut here. She was raped.



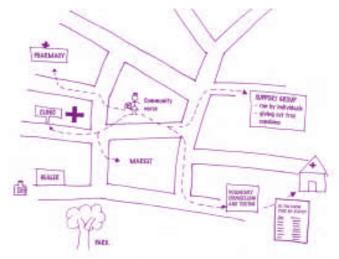
Example

- 1 Boys and girls discuss the scene in separate groups, answering these questions:
 - ▲ What happened in the scene? Does this happen in our communities?
 - ▲ How did you feel about what happened?
 - ▲ Why did the rape happen? What were the reasons? Who had some responsibility for the rape?
 - ▲ What do you think the results will be for the girl and the man?
 - ▲ What you do you think should happen next?
 - ▲ What can we do to prevent rape?
- 2 The boys and girls could share the main points in their discussions and ask:
 - What common views do we have?
 - ▲ What different views do we have?
 - ▲ How can we work together to change things and stop rape happening?

The facilitators encourage anyone who feels upset after the session to come for counselling and also to report if anyone has treated them like this. Ensure that everyone understands that rape is a crime and always the responsibility of the rapist and not the victim.

Referring people to local services and supporters

At the start of our work with groups and communities on SRH, we need to map with them all the available services and people who can support young people to meet their SRH needs (see Chapter 7, page 94). We can then refer them to the right person when they have problems or feel upset during an interactive drama and SRH session.



Talking about sex

We are not used to talking openly about sexuality. In our peer groups, we may joke or boast about sex, but many of us are not able to talk to our partners, family or peers about sexuality in a caring and helpful way.

We may not know which words to use because talking about sexual organs and acts is taboo. Should we use biological words such as 'penis', polite terms such as 'down there' or local 'street' words which are often used as insults? Should we make up some new words with our groups?

We need to choose words that are clearly understood, acceptable and positive. We all need to feel comfortable speaking and listening to the words we choose, whether individually or in groups or performing a play.



Words we use

In Zambia, some children called the vagina 'samosa', the penis 'banana' and breasts 'fritters'. In another part of Zambia, they called the penis 'Kalashnikov' and the vagina 'Baghdad'. The words related to food are positive, but the Kalashnikov rifle causes death and Baghdad is a place of suffering and death. These unhappy images may make young people frightened of their sexuality and unable to enjoy when they are mature. The words suggest male attack and female obedience even when suffering.

Activity: What shall we call it?

→ What is it and why use it?

We discuss and agree on acceptable words to use for different sexual activities and organs for our group and ways to find acceptable words with our community groups.

- 1 Explain that we all feel embarrassed about talking about sexual organs and sexual acts but we need to learn to do this in order to find ways to have a safe and happy sexual life. We are going to look at all the words we use and agree on which ones are acceptable.
- 2 Divide into single sex and, if appropriate, age groups.
- 3 Ask people to think of all the different ways that people might enjoy sexual pleasure. For each suggested activity, discuss what words the group would like to use for this practice and why. Write this practice in acceptable language on a piece of paper. Continue until all the sexual activities are written on separate pieces of paper.
- 4 Now think of all the sexual organs and repeat the activity in step 3.
- 5 Join with the other groups to share the words and agree on words that you can use with mixed age and sex groups.
- 6 Ask: 'How will we agree with community groups on acceptable sexual words to use in drama and SRH sessions?'
- 7 Keep the papers with different sexual activities so that you can use them in the activity 'How to enjoy our sexuality' on page 22.

Chapter 3SRH KNOWLEDGE AND ATTITUDES

Preparing ourselves

Before we work with communities on SRH issues, we need to prepare ourselves with the knowledge, positive attitudes and skills needed to facilitate activities in a helpful way. We do not want to encourage ideas that lead people into danger and increase stigma and discrimination. We need to explore SRH issues in our own lives and maybe change ourselves before we can work with others. People will trust us more if we explain that we have benefited from the activities ourselves and we are offering to facilitate the activities with others. We need to be positive role models.

Traditional dance-drama and stories often make fun of different types of behaviour, such as greed, laziness or disapproved sexual activity. Certain characters are shown in a bad light and blamed for the breakdown of community life. This is particularly true in current dramas about HIV. Those who get HIV are often depicted as ignorant or promiscuous, and therefore 'They deserve to get HIV'. This makes people think that they are not like that and do not need to think about their own behaviour. In reality, we are all a complex mixture of strengths and weaknesses, including those of us with HIV. We all do our best to respond well to the situations we find ourselves in.

Activity: Why we need correct knowledge, helpful attitudes and skills

→ What is it and why use it?

We use a case study to explore what can happen if a facilitator or actor does not have correct knowledge, positive attitudes and skills. We then replay the situation to show good knowledge, attitudes and skills. The case study is an example. Create one with your group to show your own experiences of when things went wrong.

→ How to use it

1 Role-play the following story or your own story.

A group of 16- to19-year-olds attend a drama which promotes abstinence by showing a person getting HIV through having sex and later dying. During the discussion afterwards, a young man asks the facilitator why the drama did not show condoms as a way of having sex more safely. The facilitator says that condoms are not really worth using because they have holes in them. Also, people with HIV make holes in condoms so they can infect others and not suffer alone.

A young woman says that condoms are better than nothing and, besides, she wants to use them for family planning. The facilitator replies that condoms are only meant for promiscuous people who have many sexual partners and she should use the pill. The drama and discussion end, and everyone goes home and talks about what they learned with their friends.

2 Ask:

- ▲ What information did the facilitator give the group?
- ▲ What attitudes did the facilitator have about people who might use condoms?
- ▲ What skills did the facilitator impart to the group?
- ▲ What effect may this drama have on the knowledge, attitudes and behaviour of the young people watching?
- ▲ What effect might it have on their SRH?
- 3 Invite participants to replay the role-play showing correct information, positive attitudes and teaching skills. Refer to the section on key facts about SRH in Chapter 11.
- 4 Repeat the same questions to process the role-play.



Summary on problems

- ▲ If we give wrong information about condom reliability, fewer people will use them and STIs, HIV and unwanted pregnancy are likely to increase.
- ▲ If we have an attitude that condoms are only for people who have many partners, we discourage faithful couples who do not know their HIV status from using them and stigmatise those that do.
- ▲ If we say that people with HIV make holes in condoms in order to infect others, we discourage people from protecting themselves and stigmatise people with HIV.
- ▲ If we are not able to show people the skill of putting on a condom correctly, people may use it wrongly.

What the facilitator should have said and done

- ▲ Condoms give about 90% protection if they are used correctly and consistently every time we have sex. This is far better than not using a condom.
- ▲ Condoms are good for all couples who do not know each other's HIV status or who have HIV, and for anyone who wants to avoid STIs or HIV or plan their pregnancies. They are good for married and unmarried people at any time of life.
- ▲ Most people with HIV are worried about infecting others and do their best to practise safer sex. The people who do not know their status are more likely to have unsafe sex.
- ▲ She correctly demonstrates condom use and allows people to practise.
- ▲ Abstinence is the only behaviour that is 100% effective against the sexual transmission of HIV and STIs.

SRH knowledge

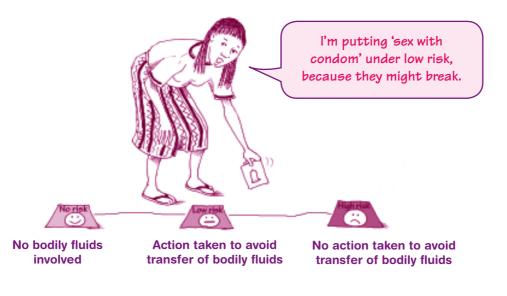
In this section we describe activities which help us understand some key facts and ideas about sexuality and HIV. There are further activities covering gender and other SRH issues in the other chapters. Chapter 11 gives key facts about SRH and life-skills. You can refer to these to ensure that people have correct information on different topics. A list of additional resources is given on page 186.

Key fact activity 1: How to enjoy our sexuality

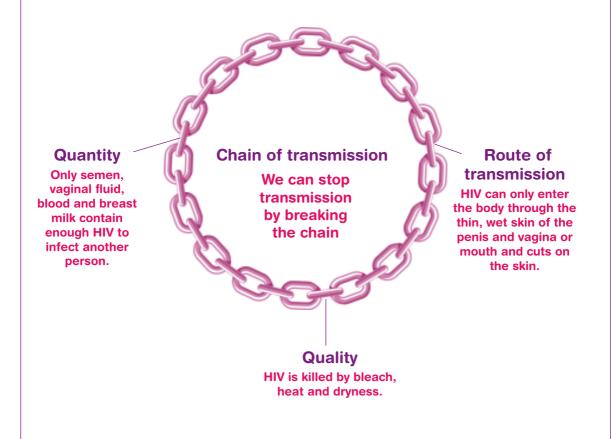
→ What is it and why use it?

People draw or write on pieces of paper all the different sexual activities that people might do alone or together to enjoy their sexuality and express their feelings. They then place the papers on a risk line from 'no risk' to 'high risk' of HIV with an explanation. This helps people to analyse the risk of HIV in sexual activities and to find ways to enjoy their sexuality safely. The chart on page 24 shows the level of risk for different activities.

- 1 Ask participants to go into same sex groups of four to six people. Give people pieces of paper and pens.
- 2 Ask people to draw or write on the pieces of paper all the different sexual activities that people might do alone or together to enjoy their sexuality and express their feelings. For example, dancing, hugging, kissing, oral sex, masturbation, intercourse with a condom. Put one activity on one piece of paper. Point out that we are talking about sexual activities, not the person with whom someone might do the activity.
 - N.B. If people have done the 'What shall we call it?' activity on page 19 they can use the pieces of paper with sexual activities drawn or written on them for this activity.
- 3 Make a line on the ground. Label one end 'high risk' of HIV infection. In the middle, put 'low risk', and at the other end add 'no risk'.



- 4 Ask everyone to take one piece of paper with a sexual activity on it and ask themselves:
 - ▲ Does this sexual activity have high, low or no risk of HIV infection?
 - ▲ What are the reasons for this?
- **5** Ask people one by one to place their sexual activity on the line in the place that shows the risk level, and to explain why.
- 6 Ask if everyone agrees and, if not, why they disagree. Add information if necessary and agree on where to place the sexual activity.
- 7 Continue until everyone has placed their sexual activity on the line. Add any sexual activities that have not been mentioned.
- 8 Ask:
 - ▲ What sexual activities can we enjoy that do not put us at any risk of HIV infection?
 - ▲ How can we reduce the risks of low and high risk activities?
 - ▲ What level of risk are we willing to live with?
- **9** Ask: What have we learned from this session and how will we use it in our lives?
- 10 Draw and explain the diagram below of the chain of transmission. Participants fill in the facts on amount (quantity) of bodily fluids, quality of HIV and entry point of bodily fluids into body (route).



The level of risk of acquiring HIV during different sexual activities

No risk of HIV	Low risk of HIV	High risk of HIV
Description These are sexual activities with no risk of HIV transmission because the activities do not involve semen, vaginal fluid and blood in any way.	Description These are sexual activities which involve semen, vaginal fluids or blood but people take care to prevent any of these fluids getting from one person on to the thin, wet skin or broken skin of the other person. These activities are not 100% risk-free, because condoms can break, there may be breaks in the skin and people may not manage to completely avoid fluids getting on to the genitals.	Description These are sexual activities where semen, vaginal fluids or blood from one person go on to the thin, wet skin in the vagina, penis, anus or broken skin of another person.
Examples include: Massage Hugging Masturbating yourself Body-to-body rubbing (not involving the genitals) Talking sexy Sexy dancing Sharing sexual fantasies Body kissing Washing together Using sex toys without sharing them	Examples include: Masturbating each other (cover cuts on the hands and wash after playing before you touch your own genitals). Open-mouth kissing (do not do this if either of you have bleeding gums or sores in the mouth). Vaginal intercourse with a condom and water-based lubricant. Oral sex is kissing or licking each other's genitals. The risk is greater for the person doing this, especially if they have mouth sores or either has untreated STIs. These are also easily transmitted through oral sex. Using a condom or piece of plastic over the vulva and avoiding ejaculation of semen into the mouth reduces the risk of oral sex.	Examples include: Any contact between blood, semen or vaginal fluid and the thin wet skin of the genitals or anus or breaks in the skin on the body or mouth. Vaginal intercourse without using a condom. Anal intercourse without using a condom. Sharing sex toys without cleaning them between partners. Sex that damages the thin, wet skin in the vagina, head of penis or rectum increases the risk of HIV infection further. Examples include dry sex, rough sex or sex using harsh substances in the vagina.

Key fact activity 2: HIV infection game

→ How to do it – round one

- 1 Make the same number of small pieces of paper as numbers of participants. Draw a 'X' on one fifth of the pieces and fold all the papers so no one can see what is written.
- Put three plastic bags, condoms or socks to one side.
- 3 Ask all participants to take a piece of paper, but not to look at it until instructed to.
- 4 Ask participants to walk around the room and, when you clap, shake hands with one person and remember their name.
- 5 Repeat so that participants shake hands again with one person and remember their name. Repeat once more.



- 6 Ask everyone to look at what is written on their slip of paper.
- **7** Ask the people with the 'X' to come forward. These people are those who have HIV infection in the game.
- 8 Ask everyone who shook hands with 'X' on the first round to come and sit in the middle.
- **9** Ask everyone who shook hands with 'X' in the second round or with any of the people sitting in the middle, to sit in the middle.
- **10** Ask everyone who shook hands with 'X' in the third round, or with any of the people sitting in the middle to sit down.
- **11** Ask:
 - ▲ What is the handshake pretending to be? (Sexual intercourse.) Stress that you cannot get HIV through shaking hands.
 - ▲ How many people have been exposed to HIV through shaking hands?

They have been exposed to HIV but we do not know whether they are infected or not. This is because not everyone who is exposed becomes infected. For example,

- there are many couples where one person is infected and the other is not, even though they have sex without a condom. We can be infected the first time we have sex or the 50th time, but we do not know when.
- 12 Count how many people were exposed on this round of the game. What did the people who were not exposed do to stay safe?
- 13 Point out that HIV can spread unknown through the community because, at first, there are no signs or symptoms and the virus remains in the body for life.

→ How to do it – game replay

- 1 Replay the game, but this time participants have a choice to protect themselves from HIV. Ask the participants how they can protect themselves from HIV. Make sure they include:
 - ▲ abstinence
 - having sex with one partner who does not have HIV and only has sex with you
 - ▲ having sex only using condoms
 - having sex without intercourse (fingertips shake)
 - Explain that the plastic bags represent condoms; people can refuse to shake hands with anyone; or the same two people can shake each other's hand three times.
- 2 Ask people to decide on their strategy and prepare.
- **3** Shuffle and hand out the papers again, asking people not to look at them.
- 4 Repeat the instructions for the three rounds, emphasising that people should do their own actions, not listen to the facilitator's instructions.

- **5** Repeat as in round 1 to find how many people are infected this time.
 - ▲ Ask everyone who shook hands with an 'X' on the first round to come and sit in the middle, unless they were wearing a plastic bag.
 - Ask everyone who shook hands with 'X' on the second round or any of the people in the middle to sit in the middle, unless they were wearing a plastic bag.
 - Ask everyone who shook hands with 'X' on the third round or any of the people in the middle to sit down, unless they were wearing a plastic bag.
- **6** Ask the people who are still sitting on the outside to explain what they were doing during the game.
- 7 Ask the following questions and explain what the answers tell us. Remember that anyone who has a 'X' is already infected whatever their behaviour, but they can prevent infecting another person if they abstain or wear a condom.
 - ▲ What was the person who refused to shake hands doing? (Not having sex.) Are they infected? (Not unless they had a 'X') How did they feel when they were refusing to shake hands? How did others feel when they refused to shake hands? How do they feel now?
 - ▲ What was the plastic bag? (A condom.) Did the people using the bag become infected? (Not unless they already had HIV.) How did the people feel when they shook hands with the bag on? How did people feel shaking hands with them? Did anyone say anything or laugh or go to another person? How do people feel about it now?

▲ What happened to the two people who shook hands with the same person all the time (having sex with one person who only has sex with you)?

If they shook hands with a person with a condom, they will not be infected.

If neither of them had HIV and they only shook hands with each other, they will not be infected.

If the person they shook hands with had HIV or they had HIV, both will be in the middle. In real life, one may still not be infected.

- 8 What were the people who touched fingertips doing? They were enjoying sexual activities without intercourse, such as caressing. Did they get HIV?

 No, because no semen, vaginal fluids or blood got on to the genital organs.
- 9 Ask people to summarise which people did not get exposed to HIV during this game:
 - anyone wearing a bag over their hand
 - ▲ anyone who refused to shake hands
 - anyone who shook hands with the same person throughout if that person did not have HIV
 - ▲ anyone who did fingertip shaking.

10 Make sure that the participants are all clear about the following statements:

To be safe when you are having sex only with each other, you should know that you are both free of HIV, or use condoms until you have a test.

If your partner has HIV, having sex only with that person will not protect you unless you use condoms.

People with the 'X' who used a plastic bag all the time or refused to shake hands, will not have infected anyone or been re-infected.

Those of us living with HIV can protect ourselves from more HIV and our partners by enjoying sexual activities without intercourse or by using condoms.

- **11** Refer to Chapter 11 for more information about HIV transmission and prevention.
- **12** Ask: What did we learn and how will we use it?

Protecting ourselves

In one workshop, the percentage of people exposed to HIV in round one was 90% and 32% in the replay. This means that if lots of people protect themselves, there is a 58% reduction in HIV transmission in the community.

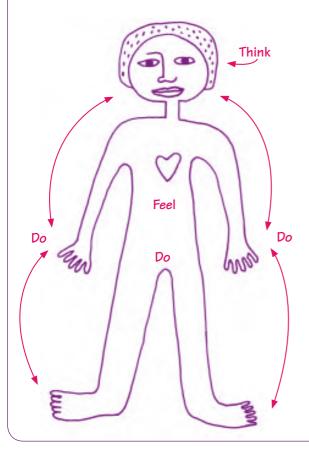
Attitudes

We all have feelings, values and attitudes in relation to sexual and reproductive issues. Some of these are positive and help us to live healthy and happy lives. Others may have a negative influence on ourselves or others. These can get in the way of working well with community groups if we are not aware of them and are not able put them to one side when we facilitate groups to do their own thinking and decision-making. For example, we may stigmatise people in drama without intending to or stop open discussions by showing disapproval. The ideas and activities in this section help us to explore our own values and attitudes and how these affect our actions.

Activity: Feel, think, do

→ What is it and why use it?

We imagine how we would feel and think and what we would do in different situations. We understand how our own feelings affect our behaviour and how this affects others. We learn how we can avoid allowing our own attitudes and values to influence our responses to sexual situations in an unhelpful way in our personal and professional lives.



→ How to do it

- 1 Draw a picture of a body on a flipchart.
 Ask people where in our body do we feel, where do we think and where do we do?
 For example, feelings heart; thoughts head, and do hands, feet, mouth, genitals, etc. Mark these on the body.
- 2 Explain that our feelings influence our thoughts and actions in helpful and unhelpful ways. In this activity we are going to learn more about ourselves and how our feelings influence our personal and professional lives.
- 3 Go into groups of four or five. Give each group one of the situations below.
 I am engaged to be married. My future spouse says we should use condoms.
 I think no one is home and go into my 13-year-old sister's room and find her masturbating.

A member of my drama group tells me, in confidence, that he or she has HIV. This person is the partner of a good friend of mine who has told me that they do not use condoms.

I see a group of my friends bullying a boy or girl whom they say is homosexual. I know this to be true.

4 Ask participants in their groups to read out the situation and then think individually:

- ▲ What would be my first gut feeling when this happened?
- ▲ What would I immediately think?
- ▲ What would I immediately do?

Stress that this activity only works if people recognise their first reaction to the situation and are honest in their answers.

- **5** After this, they can start to reflect together on:
 - ▲ Why did I feel this way?
 - ▲ Did my thoughts match my knowledge of the subject?
 - ▲ Was my response helpful?
- 6 Share the responses in the plenary and discuss what would be the most helpful response to each situation.

Ask each person to say one thing they have learned in this session and how they will use it.

Reducing stigma and discrimination

Stigma is when people look down on another person as being bad in some way. They stick negative labels on them and don't value them.

Discrimination is when a person or group of people is treated differently or unjustly because of things like illness, disability, gender, race, their work or religion. It is the result of the stigma, which could stop someone from having certain opportunities. It is the action we take towards people who are stigmatised.

People with HIV are often stigmatised, as are people from groups who are believed to have a high risk of HIV - such as people who sell sex and have same sex lovers.

We must all work together to reduce stigma and discrimination because it is against people's human rights, causes unhappiness, reduces our ability to prevent more HIV infections and prevents care and treatment for people living with HIV.



Ideas from our workshop

We are discriminated against for many reasons; for example, drinking beer, being tall, having had sex, never having had sex, having a big belly, looking young, having a dark complexion, teaching people about condoms, having a small body, for not going for voluntary counselling and testing (VCT) or for having gone for VCT, tribe or race, nationality, hairstyle, gender.

I am not alone with my stigma, so I feel comfortable.

Stigma does not just apply to HIV but to all things in life.

Being alone in the circle made us feel lonely and pointed at. When doing drama it is important to realise that we discriminate against people in many ways. In the role-play a girl was stigmatised because she had sex. Homosexuals and young people who sell sex are also stigmatised.

We felt encouraged because it brought the stigmatised group closer together and motivated them to stand up against those who were discriminating them.

Anti-stigma activity 1: Discrimination circle and pairs

→ What is it and why use it?

This game allows us to feel how it is to be stigmatised and to stigmatise others. It shows how important it is to support each other when we are stigmatised. We have all been stigmatised at some point in our lives.

- 1 Stand in a circle.
- 2 Ask people to go in the middle if they have ever been discriminated against because ... (for example, 'because you are short').
- 3 Those who feel that they have been discriminated against in this way at any time, hug and look at each other and then at the rest of the group. They are not alone!
- **4** Ask people to think individually about whether they have ever discriminated against someone for this reason and why.
- 5 Repeat, giving other ways in which a person might be discriminated against. Ask participants to also call out ways that one might be discriminated against. Tell people that they do not have to go in the middle if they do not wish to they can just keep quiet.
- **6** Discuss how it feels to be discriminated against and how people felt during the game.
- **7** Ask: What did people learn from the game?



Anti-stigma activity 2: Sharing experiences of discrimination

→ How to do it

- **1** Get into pairs. Each person describes to the other:
 - ▲ a time when I felt that I was discriminated against
 - ▲ how I felt when it happened.
- 2 Encourage people to listen to each other carefully.
- 3 Feed back the feelings to the whole group. Talk about how feeling like this would affect our SRH.
- 4 Repeat, this time telling each other:
 - ▲ a time when I discriminated against another person
 - ▲ the reasons why I discriminated against them.
- **5** Come together and share the reasons for discriminating against people.
- 6 Discuss how this affects SRH.
- 7 Ask: What can we do to reduce stigma and discrimination?



How do I feel to be stigmatised and discriminated against?

An outcast in the family Isolated

Lonely

Like a nobody, an object Useless

Humiliated

Painful feelings

Angry

Aggressive

Disturbed

Pressurised

Hurt

Stupid



Why do we discriminate against people?

Some examples from our workshop

- ▲ Alcoholics are rowdy, aggressive and frightening.
- ▲ Mentally ill people are unpredictable and out of control. Talkatives' say anything at any time; we fear they will say hurtful

 - ▲ Quiet people are frightening because we do not know what they are ■ We resent unproductive people for not doing anything and using our
 - We are jealous of intelligent people because we fear looking stupid. ▲ People with TB are isolated, as people are scared of being infected.

 - People with HIV are discriminated against due to the long period of illness and nursing. This leads to financial problems, which in turn aggravates the feelings. Morals and religious beliefs also impact on aggravates the recilings. World and STIs are seen as being promiscuous stigma, as people with HIV and STIs are seen as being promiscuous
 - We discriminate against sex workers but not the men who buy their
 - services.

3 SRH knowledge and attitudes

Stigma leads to very powerful feelings that reduce our self-esteem and confidence. Stigma affects our behaviour, our physical well-being and our productivity. We may not take care of ourselves or abuse ourselves. Stigma has a wider impact than only on the individual – our families and the whole community suffer when one person is discriminated against.

We need to find ways of acknowledging this situation by recognising the reasons why we stigmatise and standing up against stigma and its harmful effects.

Causes of stigma and discrimination

Examples of the causes of stigma are:

- ▲ lack of understanding of how HIV is spread and fear of AIDS because people have died
- anger and blame from the sick person's carer because HIV often leads to poverty
- ▲ dislike, fear and blame of people with HIV because it is sexually transmitted.

Some of the results of stigma and discrimination

- ▲ People with HIV are denied the right to have a job, a partner and children.
- ▲ People with HIV, or suspected of having HIV, are afraid of discrimination. Because of this, they avoid taking an HIV test, practising safer sex or seeking treatment.
- ▲ Mothers may avoid feeding their babies in a way that reduces the risk of HIV transmission in case people suspect and stigmatise them.
- Stigma causes anxiety and distress in people living with HIV, so they may become ill and die more quickly.

Ways to prevent stigma and discrimination

▲ Be aware that many of us may have HIV without knowing, because we have not taken an HIV test. People who have taken a test are often more courageous and responsible than those who stigmatise them.

- ▲ Treat those of us with HIV as we would all like to be treated. Involve everyone in activities and encourage those of us with HIV to share our experiences and teach others.
- ▲ Empower all community members with knowledge, skills, self-confidence and resources to cope with the epidemic.
- ▲ Speak out against all forms of discrimination against anyone, for any reason. Be courageous and do not follow the crowd in discriminating against young people, poor people, those who haven't been to school, women, those who sell sex and those of us with HIV.

How can we avoid stigmatising people in our drama work?

We need to move away from moralising and stereotyping drama, which shows how 'bad people' doing 'bad behaviour' leads to 'bad consequences'. This is a common way of teaching through stories in many cultures, but it can have harmful effects. We have to be very careful not to stigmatise people through our drama activities, either in the way we show different characters or their behaviour. If we show people with HIV in our plays as bad people with immoral behaviour, we increase stigma towards those of us living with HIV. If we do not question and ask people to think more deeply when they show stigmatising role-plays and stories, we reinforce stigma and discrimination.

We will question our stories, role-plays and drama for messages that increase stigma towards any person. We will make sure that we show human beings with respect and empathy and speak up whenever we notice a stigmatising situation. Our dramas need to show ordinary situations, not just extremes, so that people are aware that anyone can get HIV – for example, married couples living with HIV.

Anti-stigma activity 3: Wearing our anti-stigma glasses

→ What is it and why use it?

We make up short role-plays about a boy and girl and their friends showing how one of them has HIV and the other is at risk of HIV. We then look at the personal qualities of the boy and girl.

- **1** Go into groups of four.
- 2 Prepare a role-play to show a situation where a boy and girl are at risk of HIV.
- 3 Perform the role-plays to each other.
- **4** Swap role-plays and analyse the personal qualities of the boy and girl in the story. List them on flipchart paper.
- **5** Put up the lists and compare the qualities of the characters.
- 6 Ask:
 - ▲ What are the common qualities between the girl and boy? Those who have HIV? Those who are at risk?
 - ▲ What are the differences in qualities?
 - ▲ Are we stigmatising any of the characters? Which ones? Why has this happened?



Chapter 4 HOW TO FACILITATE INTERACTIVE DRAMA

A facilitator is a person who coordinates and helps a group to work well together to achieve their objectives. This is a different role from a person who provides information or instructions to a group – for example, as a lecture – followed by questions to see if people have understood. In this chapter, we learn about the skills needed to facilitate an interactive drama process and describe activities to help us gain these skills.

When we communicate with others, we show or tell something of our lives. This ability to show and tell is the basic idea of drama and something we can all do whether we are facilitators or participants.



The two roles of the facilitator

The facilitator has two roles, which are both essential, in the same way as a bicycle needs two wheels. Both roles must work for the group to move smoothly towards their destination.

The roles are:

- ▲ to encourage participation, group trust and cooperation
- ▲ to help the group to achieve their desired results.

Pocket your status as a facilitator, respect everyone. Call participants by their names. Show interest in the participants. Get everyone involved. Have clear objectives and questions. Use a good activity for the purpose. Stay focused. Probe to understand more.	How	to encourage group participation	How to achieve results
Use listening skills. Ask open-ended and probing questions. Do not be biased or judgemental. Encourage people to ask questions. Use groups effectively. Be aware how people are feeling. Know your subject. Be well prepared before the sessions. Analyse the results of discussions. Report back on group work. Manage time. Be creative.	every Call Show Get e Use Ask o Do n Enco	participants by their names. w interest in the participants. everyone involved. listening skills. open-ended and probing questions. not be biased or judgemental. purage people to ask questions. groups effectively.	Use a good activity for the purpose. Stay focused. Probe to understand more. Give participants tasks. Know your subject. Be well prepared before the sessions. Analyse the results of discussions. Report back on group work. Manage time.

TECHNIQUES FOR BUILDING PARTICIPATION

Our attitudes and behaviour

- ▲ Be friendly and relaxed. Be yourself. We all have our own styles of facilitation and people will know if we are acting in a way that is not true. Talk in a conversational tone and create an open atmosphere in which participants feel free to talk.
- ▲ Use body language to encourage everyone to speak. Look directly at people and encourage them to talk by walking close to invite responses, praising and smiling.
- ▲ Be positive, energetic, enthusiastic, focused and interested. Your own energy can affect participants' energy.
- ▲ We all have to find ways to manage our sexual lives safely and happily. Any of us may have HIV or other SRH problems. When we are doing this work, we need to think in a 'we together' way, not an 'us and them' way. This means we should forget our status whether we are a manager or a volunteer, young or old, male or female, living with HIV or not, we should respect everyone's personal power as human beings.

Children have less power than adults and in many cultures they are expected to be 'seen but not heard'. They are minors in law and often not involved in making decisions that affect them. We may be peer educators or drama group members working with children younger than ourselves, or adults working with young people. We need to respect the ability of younger people to take some responsibility and solve their own problems as they mature and contribute our knowledge and guidance when appropriate. We should also understand that younger people have full human rights; they are not objects that we can tell or force to do things for us.

Activity: Power and relationships between younger and older people

→ What is it and why use it?

This activity looks at relationships between people of different ages. It helps us recognise the need for respectful relationships, rather than approaching younger people in a critical or patronising way. This is an essential attitude for facilitators who work with younger people. We all need nurturing and care from people like our parents, but we also need to be treated as young adults who can solve problems, contribute to our communities and make decisions ourselves.

→ How to do it

- 1 Explain that in this activity we are going to look at the influence of age on the way that people interact with each other and the effect of this on what happens.
- 2 Describe the following situation.
 - A family of siblings are living alone together after their parents both died and they had no other family to look after them. Matilda is 16 years old, Ben is 12 and Sarah is 8. They are struggling to make ends meet and to get on well with each other. They are looking for a strategy to improve their situation. A community development worker called Timothy is trying to help them.
- 3 Divide into four groups. Ask each group to prepare and act a role-play showing interactions between Matilda, Timothy and her siblings. Each group shows one of the following types of interaction: between the older characters Matilda and Timothy and the younger children; or between Matilda and Timothy:

One person acts like an adult and treats a younger person or people like a young adult or adults. One person acts like a parent and treats another person or people like a child or children in a critical way.

One person acts like a parent and treats others in a patronising way.

One person acts like a parent and treats another person or people in a nurturing way.

In each role-play, ask people to get into the shoes of the players and respond as they would in this situation.

4 In the big group, show and discuss each role-play.

Ask the audience:

- ▲ What did you see happening?
- ▲ How are the older people behaving?
- ▲ How are the younger people responding?

Ask the players:

- ▲ How did it feel to act as the older person? Why do you think you behaved that way?
- ▲ How did it feel to be the younger person or people?
- Why do you think you behaved that way?
- ▲ What were the good and bad points about it?

Describe or act out how the interaction could go better, if necessary.

- 5 Repeat with the other role-plays. Ask;
 - ▲ What did we learn from the role-plays?
 - ▲ How can we use this learning at home and in our drama work?
- 6 Explain that our behaviour towards younger people affects the way they respond in group work. If we behave in a bossy and critical way, they may depend on us and stop thinking for themselves or rebel and refuse to listen to our ideas.

If we treat younger people as adults by drawing out their own ideas, we can expect more adult behaviour from them. They will do their own thinking and contribute to solving their own problems and making their own decisions. We help them to learn new knowledge, virtues and skills as they grow up, according to their age and ability. They are between childhood and adulthood and still need guidance and protection.



learn from mistakes.

Do!

- ▲ Respect that younger people have ideas, experience and ability.
- ▲ Listen to their concerns with respect and take them seriously.
- ▲ Accept that they have a right to participate in decisions that affect their lives
- ▲ Help them to think, decide, plan and act with the support of others where necessary.
- ▲ Help them to trust their own ideas and ability and challenge them to think more deeply.
- ▲ Encourage them to take responsibility.
- ▲ Be tolerant, patient and supportive.



Don't!

- ▲ See yourself as the expert and the only person with ideas and experience.
- ▲ Try to solve problems and make decisions for younger people.
- ▲ Impose your own ideas and solutions on younger people.
- ▲ Criticise, condemn or make fun of their ideas.
- ▲ Make them dependent on your advice.
- ▲ Talk, talk, talk, talk, talk!

Our communication skills

Facilitators use a number of important communication skills which help us in all our interactions in life. In this section, we are going to learn about each skill and do some activities to practise these skills.

Activity: What skills do we use in facilitation?

→ What is it and why use it?

In this activity we facilitate a small group discussion in front of participants to demonstrate some key skills. They observe, identify and define the skills and their purpose.

- 1 Ask eight participants to join you in the centre of a circle. Facilitate a discussion, using the discussion techniques in the box on the next page. Stop at intervals to ask participants to describe what you are doing as a facilitator to lead an effective discussion. Check that people understand each technique.
- 2 Review the points in the box and ensure that everyone understands each technique.
- **3** Explain that people will practise key skills in the following activities.



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Discussion technique	Purpose		
Open questions	Stimulate many ideas and opinions		
Body language, use people's names	Encourage people to contribute		
Listen carefully	Understand clearly how to lead the discussion		
Encouragers, e.g. nodding	Encourage people to keep talking		
Rephrasing	Clarify what a person says/show appreciation		
Redirecting question	Get others involved and get more views		
Probing questions	Draw out more information and views		
Observing and reacting	Encourage people who are silent		
Summarising	Help people understand and reach agreement		

How to ask questions

Good questions get everyone talking and giving opinions. Questions are our main tool for building participation. Keep your questions simple and easy to understand. If people don't understand, repeat or rephrase your question. Ask your question and then pause. Be patient and give people time to think and come up with an answer. Let them respond before asking more questions. Do not ask questions that:

- ▲ suggest the answer for example, 'You don't like condoms do you?'
- ▲ are judgemental for example, 'Why didn't you grow vegetables rather than selling sex?'
- ▲ make assumptions for example, 'What does your husband say about your pregnancy?'

Type of question	Purpose	Example	
Open	To encourage people to give their ideas freely.	What do you think about condoms?	
Closed	Response is a specific, factual and short answer or a 'yes' or 'no'.	Do you like condoms?	
Clarifying	Use 'What? Why? When? Where? How?' questions to learn more. Repeat your question, ask it in a different way, or ask others to add something.	How did you feel when she refused to use a condom? Where can you buy condoms in this community?	
Probing Following up	To deepen the discussion and bring out more details.	Could you tell me more about why you don't like condoms?	
Repeating in your own words what was said	To check whether you have understood, mirror back to the speaker and value what they said.	So what you are saying is that condoms make you feel like a prostitute. Is that right?	
Redirecting the question to others in the group	To build on one person's answer in order to get others involved in the discussion and encourage other views.	Malambo feels that condoms reduce sexual pleasure. What do others think?	

Activity: How to ask helpful questions

→ What is it and why use it?

In this activity people take it in turns around the circle to ask a question aimed at helping the person to talk about their problem. This helps to build questioning skills.

→ How to do it

- 1 Ask participants to give examples of the different types of questions outlined above and their purpose. Make sure that everyone is clear about them.
- 2 Ask participants to divide into two groups.
- 3 Ask each group to select a participant who will role-play seeking help for a problem that is difficult to talk about and quite complex. For example:

A young married woman (or man) has sex with someone else. She (or he) later hears people gossiping that this person is ill and maybe has AIDS. She is afraid that she may have HIV, but more afraid to tell her husband in case he leaves her. She tests negative for HIV, but the nurse tells her to avoid sex and come back in three months, because she may not have made antibodies to the virus yet. She doesn't know how she can avoid sex with her husband for so long. She feels very bad and doesn't know what to do about the situation. She goes to a support group and they try to encourage her to talk about her problem.

- 4 Ask each participant in turn to ask one question to help the person to talk. The person should get into the part and only answer if they find the question helpful. Participants should listen to each other's questions and answers carefully and ask a question that links to the previous one, rather than thinking of a question at the start.
- **5** When everyone has asked a question, ask the role-player to get out of role by saying something about their real selves.
- 6 Ask:
 - ▲ Which questions helped you to talk and which questions made you reluctant to talk?
 - ▲ How did you find the activity and what did you notice about how the questions affected the response?
 - ▲ What did you learn from the activity and how will you use it as a facilitator?

What is the worst thing that could happen?



So, you are most afraid that she will leave you. Is that right?



If you were her, what do you think would help you to cope?



How to listen

Listening is as important as asking questions. It is only by listening that we can know what our next question will be. Listening makes people feel valued. Most of us are poor listeners. We think we listen, but often we only hear part of what is said, or we shut out things we don't want to hear, or we become so focused on what we want to say in reply that we don't hear what is being said. Listening is hard work. We need to control our love of talking and focus our attention on what the speaker is saying.



Activity: Let's listen to each other

→ What is it and why use it?

In trios, participants try out listening skills under different conditions – sometimes with active listening, and sometimes without – and learn how to be more effective listeners.

→ How to do it - warm-up

As a warm-up, divide into pairs. Ask the As to think of everything that has happened to them today, and get ready to tell B. Ask the Bs to think of all that happened at a recent event and get ready to tell A. Then shout 'Go'. Naturally they are both going to speak at once. Ask the group, 'How much did each partner hear from the other?'

→ How to do it - round one

- 1 Form trios and ask each trio to find a separate space. Within each trio ask them to decide who is the speaker, listener and observer.
- 2 Ask the 'speakers' to stand up and give them the following instructions:
 - You will tell the 'listener' about an experience in your life or at work that has made a big impression on you. Think about this for a minute while I instruct the 'listeners'.
- 3 Brief the 'listeners' outside the room so the others cannot hear: You are going to listen carefully to what the 'speaker' says, but you will pretend not to be listening. How can you show that you are not listening and not interested? (Expected responses may be: not looking at speaker, bored face, no encouraging smiles.)
- 4 Ask the 'observers' to stand up and give them the following instructions: Your job is to carefully observe the other two and keep notes on what happens so that you can describe it.
- 5 Shout 'Play!' and stop all trios after five minutes.







- 6 When they have all finished, ask the 'speakers' to stand up. Ask:
 - ▲ How was it to tell your story?
 - ▲ How did you feel?

Allow everyone to talk because they will be very frustrated!

Ask: 'Why do you think the listeners were not listening/not interested?'

- 7 Ask the observers to explain what they saw in the listener.
- 8 Tell the speakers what you told the listeners. If emotions rise, allow the listeners to prove they did listen and were interested, by repeating the story.
- 9 Ask people to summarise what they have learned from this activity. As facilitators, we have to listen carefully and show that we are listening.

→ How to do it - round two

- 1 Rotate roles within each trio so that speakers become listeners, listeners become observers, and observers become speakers.
- 2 Ask the new 'speakers' to tell a story and ask the new 'listeners' to show that they are listening carefully. Allow 5 to 10 minutes for the groups to finish.
- 3 Ask the speakers to stand up and ask:
 - ▲ How was it to tell your story?
 - ▲ How did you feel?
 - ▲ What did the listener do that made you feel good, that made you think that they were interested in the story?
- 4 Ask the observers to give their comments and discuss. Ask: How can this exercise help you become better facilitators?

Feedback from our workshop



Round one: No response from the listener Listener

Pretended not to be listening Avoided eye contact and looked bored Frustrated because speaker upset

Difficult not to look at the speaker

Speaker

Felt useless, frustrated, ignored Did not get the attention of listener Felt the listener was not interested Was discouraged to tell the story

Round two: Full attention from the listener

Showed interest and listened carefully Asked questions to find out more Kept nodding my head to encourage Showed concern with my face and

Felt good because the listener was interested and concerned Happy because she was asking questions and showing interest Felt approval and praise

How to get everyone involved

- ▲ Observe and equalise participation. Check who is participating and who is left out.
- ▲ Involve shy people, younger people and women.

 Make room for their voices. Invite them to speak.

 Make sure they are listened to and their views are taken seriously. Create a scene in which the women take the stage to act out their ideas or ask people who make good suggestions to come up on 'stage' and act them out.
- ▲ Get contributions from different sectors. Move around the inside of the circle, stop at points and ask people in that sector to contribute.
- ▲ Restrain the talkative. Keep the big talkers from dominating the discussion by saying, 'Thanks for your point, but maybe we could hear from others.'
- ▲ Be tactful. Don't dismiss ideas you don't agree with. Say, 'Thank you. What do others think?' And be careful you don't show with your body language that you don't like the idea.
- ▲ Keep the process moving. Don't let it get bogged down. Know when to change to drama and when to stop the drama and switch to discussion. And know when to take a break!
- ▲ Share the responsibility of good group dynamics with the group. Elect monitors for tasks like time-keeping or the ground rules.

Say what you have to say and then listen!

Do not respond to a contribution by saying, 'Mary is trying to say ...' and repeating what she said yourself, unless it is clear that the group have not understood her. If you are not sure, check, and if some haven't understood ask a person who has to explain.

As a facilitator it is more important to listen than to talk, because the group's ideas are essential to the process of understanding the situation and exploring and solving problems. If you don't listen, you cannot steer the process to a good conclusion.



Activity: Group facilitation practice

→ What is it and why use it?

This activity allows everyone to have a turn at using the facilitation skills with a group for 10 minutes on a new topic and receive feedback. Participants practise skills too.

→ How to do it

- 1 Divide into groups of six to eight people.
- 2 Assign a topic. For example: 'Discuss the ways that young people like us learn about sex.'
- 3 Ask each group to select a facilitator. Shout "Play" to start the discussion. After 10 minutes, shout 'Stop' and ask each group to give feedback.
- **4** The facilitator gives feedback first and then the participants, using these questions:
 - ▲ What did you think went well?
 - ▲ What was difficult?
 - ▲ What are your suggestions for improvement?

Ask people to say:

When I/you did..... I noticed that.....

For example: 'When you looked disapproving when I talked about selling sex, I felt embarrassed and didn't want to talk again.'

Using groups effectively

Why use small groups?

People find it easier to talk in a small group, to participate actively and share ideas. In SRH it is often good to divide into separate sex and age groups. Members of the groups feel freer to talk and have similar problems and needs. The different groups then come together to share what they wish of their discussion and learning, through drama or other acceptable techniques.

Different types of groups

Buzz groups: Buzz groups are made up of two or three people sitting together. This is a good way of getting everyone to participate. For example, everyone practises a skill such as saying no, makes a sculpture or interviews a person. The third person can watch and give feedback.

Groups of four to eight members: This size of group allows for many ideas and is a good size

for making up a story, discussing a scene or exploring a problem. The bigger the group, the less chance for participation and the longer it will take to feed back and discuss everyone's ideas

The whole group: Many people find it difficult to talk in the whole group, so it is best to work in small groups and come together to share ideas. We bring the whole group together to start an activity, do an energiser, show group role-plays or develop a performance.

Ways to form groups

We may ask people to join the group that they are most interested in to do specific tasks or discuss topics. They might go into organisation groups to make action plans.

There are many ways to form groups, some of which work as energisers. We can mix people up by deciding on the number in each group (say, six) and dividing the total number

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of participants (24) by this number to find the number of groups (4). Then count off around the group in fours – '1-2-3-4-1-2-3-4' or call out four different names – 'mango, orange, banana, lemon, mango...' Then all the fours or all the mangos form one group, and so on.

It is good to change the groups for different activities so that people get a chance to work with different participants.

How are people feeling?

The facilitator should check on participants' interest and energy level from time to time and take action as needed. Here are some techniques to see how people are feeling. Look at participants for:

- ▲ Body language: Are members yawning, dozing, sagging, moving about or leaving?
- ▲ Facial expression: Are they focused or staring into space? Do they look upset?
- ▲ Side conversations: Have they withdrawn from the discussion and started their own conversations?
- ▲ Flow of discussion: Are they listening to each other or are they arguing and interrupting each other?

If any of the above is true, find out how participants are feeling. Ask: 'How are you feeling? Are you tired? Are we going too slow? Do you want a break?'

Use a 'mood meter' with participants. Ask them to show with their hands how they are feeling at different points of the session. It may be time for a break. People cannot concentrate for periods longer than two hours. When people are tired, hungry, uncomfortable or bored, participation will quickly drop. Read the group's mood or ask for their opinion and then move on to a new topic or activity. Taking a break will also help to re-energise.

If tension or conflict is preventing people from hearing each other, get everyone to stand up and find a new place in the circle to sit. You could also use a period of silence to help people relax and look for new insights.

You can also use humour to break tension or boredom. Sometimes if you say something funny, you can loosen up a tense situation or catch the attention of people whose minds have wandered. Sometimes a song or game will loosen up the mood and help to re-energise.



Using games

Games can be used for a number of purposes:

Warm-ups or ice-breakers: Games that help people to relax and feel free to participate actively. They help participants overcome any feelings of shyness or nervousness with a new group.

Wake-ups or energisers: Games that reenergise participants when they are feeling sleepy or energies are low, e.g. after sitting for a long time.

Tension relievers: Games that can bring a light, fun mood back into the group after a heavy or tense session.

Community builders: Games that help participants to get to know each other and to build a spirit of unity or teamwork within the whole group.

Topic introducers: Games that can be used to introduce a new topic. For example, many of the games can be used to illustrate the principles of communication, cooperation, team-building, leadership, etc.



How to select and use games

- ▲ Choose games that suit the objectives and type of participants.
- ▲ Choose the right type of game for the time of day for example, do not use a game that has lots of running after a heavy lunch.
- ▲ Use games at the start of morning and afternoon sessions or when starting again after breaks. You can also use them when energies are low.
- ▲ Choose games that are suited to the culture. For example, games involving body contact between men and women may be a problem in certain cultures.
- ▲ Make sure the game is not too competitive. Introduce walking (rather than running) to reduce the energy required and make things less competitive.
- ▲ Try to keep everyone involved. In games where people get eliminated, ask those eliminated to become the referees.
- ▲ Use games as a lead into the next activity, e.g. game played in pairs as a lead into an activity in buzz groups.
- ▲ Don't take too long introducing games. Often it is better to demonstrate the game and get it going. Teach the rules as you need them.
- ▲ Don't let a game drag on too long stop when interest is high.
- ▲ After playing a game, ask, 'How are you feeling?' If it is a topic introducing game, ask, 'What did you learn from the game?'
- ▲ Consider safety so that no one gets hurt.
- ▲ See the Alliance publication, *Ways to Energise Groups*, in Resources on page 186.

Some participants may feel anxious about games in case they fail or are laughed at. It is important to do the following:

- ▲ Explain why you are using the games and the purpose of the game.
- ▲ Explain and demonstrate the rules for the game clearly. Help anyone who finds it difficult.
- ▲ Invite people to participate but explain that the games are voluntary!
- ▲ Invite participants to suggest and facilitate games.
- ▲ Debrief the game by asking, 'How did you feel? What did you learn from the game?'

Working with feelings

Many of the exercises in this toolkit involve participants expressing the feelings behind their attitudes. These may be strong feelings, which we need to be ready to handle. We need to create a safe, non-threatening space where people can discuss and explore feelings openly (see Chapter 2 for tips on working with feelings).

Feelings are a powerful tool. Use them with the group to develop drama and role-plays, to build on stories, and as examples for the future. Remember that no feeling is wrong – it is only wrong to act on it in a harmful way. Some participants may find it difficult to accept certain feelings.

Be aware that some participants may be HIV positive or worried about their status. Many participants will be untested so some of the activities may raise emotional responses. Empathy means putting ourselves in the shoes of another person, feeling for them but remaining ourselves. This is different from sympathy, where we might become so affected by someone's emotions that we pity them as

victims and cannot help them.

If a person becomes very emotional, ask them how they are feeling and encourage them to talk about their feelings. Assure them that it is OK to feel like that. Ask the person if they would like to leave for a while and talk to someone they trust. You might want to encourage others to talk about their own feelings or debrief and change the activity. You may wish to work with a more experienced facilitator who can help you to manage the more challenging exercises.

You seem quite upset. Is there someone you would like to talk to?



An example from Taku

I work with refugees in England, some of whom have been tortured. I avoid inviting them to tell their own stories instead I ask them to make dramas or sculptures of people who are "something like them". This allows them to talk about their own experience without becoming too emotionally affected.

Some tools to help participants explore their feelings

- ▲ Sculpting is a good technique to help people to show how they feel about an issue.
- ▲ Songs, music, mime and dance help us to express our feelings.
- ▲ People can reflect on their feelings alone and then share what they wish in pairs. Pairs can share with the whole group what they learned from the experience.
- ▲ Invite individuals to talk about their own experience – this is called giving testimony.
- ▲ Remind people that we cannot ensure confidentiality in groups. Never pressurise anyone to share a personal experience.
- ▲ One-to-one, paired or small group counselling or talking with friends or in support groups can help people to share their feelings.
- ▲ Creating an imaginary character in a drama allows people to discuss the situation from a distance, which lessens the emotions of talking about one's own experience.



How to handle difficult situations

Discussion goes off track. Bring it back by repeating the last question or praise the point and 'park' it for further discussion later.

People are too general. Participants often make general responses; for example, 'The problem is caused by our culture.' Ask them to give some examples: 'What are the parts of our culture that cause the problem?'

Participants begin to argue. Disagreement is often helpful. It only becomes a problem when it turns into a fight and people stop trying to understand each other and repeat their points. Get the points of disagreement clearly. Then ask others, 'Do you understand each person's point of view?' To end the argument, say, 'We will need to include both of these points of view in our discussions. Now let's move on to another topic.'

A participant is drunk and disruptive. Involve the group in handling the situation in the normal way. Talk about what should be done.

A participant says that the drama is talking about someone in the community. Rephrase what was said briefly so that everyone understands, rather than arguing with the person who made the comment. Remind everyone that the issues in the play are real, but the characters are fictitious.

A participant begins to cry. Tell the person that it is OK to cry, acknowledge the touching nature of the topic and show your concern, for example, by touching them appropriately. Ask what you and the group can do to help them. If they have a buddy or close friend in the group, they might want that person to comfort and talk with them away from the group for a while. Continue to talk about the issue if appropriate.

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A participant tells the group that he or she is living with HIV. Some people in the group move away to avoid the person and make stigmatising comments. Thank the person for telling the group about his or her status. You could say, 'We are lucky that our friend has had the courage and responsibility to take an HIV test and share his status with us. If we all behaved as he has, we would make more progress in responding to the HIV epidemic. I wonder how many of us know our HIV status? Mr X, is there anything you would like to share with us to help us all to protect ourselves and others and to respect and not stigmatise those of us living with HIV?'

People say that a programme that you are working with is causing harm to the community and they want nothing to do with it. They are aggressive. Sit with them and ask them to tell you more about the programme. Say, 'What is troubling you about this programme? What do you think are the

bad effects of it and why? Then maybe we can spend some time talking about what can be done to improve the programme'. You could then use drama activities to explore the problem and find ways to solve it.

Participants say very stigmatising things about a character in the drama and suggest that she should be beaten to solve the problem. Explain that you would like to explore some other options for solving the problem because causing pain and fear is against people's rights and not very effective in changing behaviour. If you haven't done so, 'hot-seat' the characters so that participants can understand more clearly why everyone behaved as they did, empathise with them and see what else needs to change before the problem is solved. Invite volunteers to come and play the role of the girl to get into her shoes and see what might help her to change. Ask people to think of a time when they were judged for their behaviour.

Activity: Practising handling difficult situations

→ What is it and why use it?

Participants act out a difficult situation and people come up to act out how they would handle it. This gives different ideas on ways to handle such situations effectively and confidence through practising skills.

- 1 Ask participants to think of difficult situations that they have faced and agree on the ones that they want to work on.
- 2 Volunteers act out the first situation to show how the problem started and what happened.
- **3** People are then invited to come up and facilitate to prevent or handle the situation in a good way.
- 4 The facilitator, the group of actors and the participants give feedback on the good points and challenges with the first attempt. Others are invited to improve on or show a different strategy. This continues until people are satisfied with the outcome.
- 5 Repeat the activity with the other difficult situations.

TECHNIQUES FOR ACHIEVING RESULTS

As facilitators, we may be good at helping the group to enjoy themselves but we also need to ensure that the group achieves its objectives. Otherwise they may become frustrated and the purpose of using interactive drama to improve sexual and reproductive health will not happen. In this section, we learn some techniques to keep the group on track and achieve results.

Tips for getting the best out of the group

Agree on a clear focus and the objectives by asking what participants want to discuss. Help them to make the topic very clear so that everyone can contribute effectively. Identify a single issue and a clear focus within the issue.

Help the group to be creative by using tools that are easy and enjoyable to use, and encourage new ideas. Drama techniques bring out creativity.

Begin with a good open-ended question to get everyone talking. Use follow-up, probing questions to help dig deeper into the issue or solution.

Draw out information. It is important to have all the facts and opinions in the open. This makes it easier to come to a decision.

Add new information or ideas. Participants may need some new information or way of looking at things to see more clearly and deeply. The facilitators or people with particular knowledge can share this information through talking, stories, pictures or handouts.

Focus, focus, focus! Keep restating the focus or purpose of the exercise, especially when the discussion is getting bogged down. Explain, 'We are looking for a practical solution to Problem X to keep everyone on track.'

Using a problem-solving process

Decide which of the below steps in the problem-solving process you are going to focus on.

Where are we now?

- ▲ What resources and strengths do we have in our community?
- ▲ What are the good things about young people's SRH in our community?
- ▲ What are we doing to protect and strengthen young people's SRH?
- ▲ What SRH problems do we have? What is the core problem?
- ▲ How does the problem affect different groups in the community?
- ▲ What are the consequences of the problem?
- ▲ What are the causes, including root causes, of the problem?

What is our vision for the future?

- ▲ How would we like things to be?
- ▲ What changes would we like to see?

How can we reach our vision and objectives?

- ▲ What solutions and activities have we tried already?
- ▲ What went well or not, and why?
- ▲ How can we improve them?

Do we need new solutions?

- ▲ Will the solutions work? What might get in the way?
- ▲ What resources do the community and those outside have to carry out the solutions?
- ▲ What actions can we agree on and commit ourselves to do?
- ▲ What steps will we take?

One solution at a time. Focus drama-making and discussion on one solution at a time. Continue until this solution is tested to work or is shown to be unfeasible.

Help people to agree. Offer alternatives which have been proposed by different participants and ask people to choose – 'Do we do A or B?'

A key skill is balancing free discussion and encouraging new ways of looking at things. It is important that facilitators do not prevent free discussion by judging and imposing their own values. On the other hand, it is the facilitators' job to challenge people to think more deeply and in new ways so that groups do not reinforce negative attitudes – for example, that girls deserve to be raped if they wear short skirts.

Summarise at intervals to help people understand the flow and results of discussion and, if possible, agree on common ideas and differences. At the end, ask people to summarise the important points and name key issues and learning points.

Organise ideas and analyse results. The facilitator helps people to draw out the important points by identifying major issues for further thinking, summarising or giving major topics for more discussion. Ask groups to use a causes and consequences tree (see activity on next page) or organise ideas into a table, as shown below.

Feedback from small group work

At the end of an activity, small groups should share their results or learning in the big group. If people can read and write, a member of the team (or team) can record key ideas in a notebook to use in later activities.

We can make sharing results more interesting in these ways:

Creative report. Groups give their report in the form of a role-play, picture or song.

Round robin reporting. Each group presents only one new point at a time, going round the circle until all the points are finished. If time is short, groups can give the most important point.

One group, one topic. Each group reports on a different topic or question.

Common format. Groups summarise the findings using the same questions. This could be only the key question.

Collective report. Group reporters combine their reports.

Report back in paired groups.

Sometimes it is more helpful to have two small groups meet and share what they have learned. The smaller numbers allow for a more intensive discussion.

Problem	Effect	Causes	Coping strategy	Possible solutions
Early and forced marriages.	Early forced sex. Pregnancy and complications during labour. HIV from older husband. Unhappy girl with no education or work.	Poverty of family, need a dowry. Girls lack status and power to refuse. Culture accepts it.	Educate families and couple about SRH and the law. Try to prevent the marriage. Report to legal organisations. Do HIV test and use condoms to prevent pregnancy and HIV.	Mobilise community to stop early forced marriages. Engage all stakeholders in changing norms and practices. Help families to increase their income and share resources fairly.

Activity: Analysis using a causes and consequences tree

→ What is it and why use it?

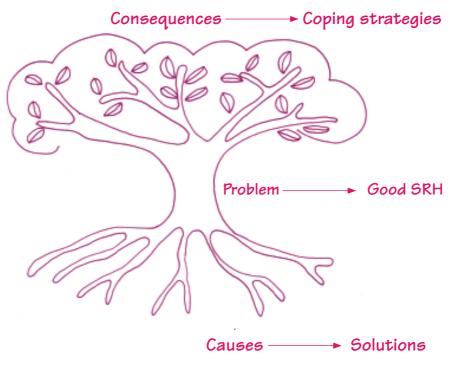
Participants will try out an approach for analysing problems and working out causes, effects, coping strategies and possible solutions.

→ How to do it

1 Ask participants to brainstorm a list of key problems facing young people in relation to SRH. Then assign one problem to each group and ask them to do a detailed analysis, looking at the causes, effects, coping strategies and possible solutions, using a causes and consequences tree.

Put the **problem** on the trunk of the tree. Think of all the **causes** of the problem and put them on the roots. For each cause, ask: 'But why does this happen?' to get to the deeper roots. Put the **consequences** of the problem as leaves on the tree. Using a different colour, write or draw by each cause on the root, a solution. For each consequence on the leaves write a coping strategy.

- **2** Each group presents its report, using the tree. After each presentation ask:
 - ▲ For comments and additions.
 - ▲ For differences and contradictions between the analysis in different groups.
 - ▲ Who will be the major beneficiaries of the solution?
 - ▲ Which of these problems can young people address on their own and for which problems do they need assistance from their parents, the community, or service providers?



Planning for action

Connect the drama work with people's lives. Ask questions, such as; 'What does this drama and discussion mean for us? What are we going to do in real life tomorrow?' People might decide to take action on a personal level or the group might agree to take joint action.

The group then needs to make an action plan, asking the questions: 'Who? What? When? Where? With what resources?' Help get agreement on a clear decision on who is to do what and when. Check that people know what they have promised to do and feel responsible for completing the task.

Tips for managing time

Managing time is an important skill. We need to allocate time realistically and know when to slow down and when to speed up. Here are some tips for managing time.

- ▲ Be well prepared and organised. Arrive before participants and organise the space and any materials.
- ▲ Set time limits for each activity beforehand as a rough guide, but be flexible. Allow enough time for processing what you have learned from the activities; otherwise, people will do the activities quickly but not spend enough time thinking deeply and learning from them. However, encourage people to keep their contributions to the point and set a good example.
- ▲ Assign a timekeeper to announce at intervals the time used up or the time remaining.
- ▲ Look at the topics and decide together which ones are most important. Focus on those and leave out the least important topics, if necessary.

Facilitating as a team

We can work better in a team; for example having a drama and a SRH person facilitating

together. The same two wheels on the bicycle! We can take turns in the leader and back-up role. One of us starts, and after a while the other one takes over.

The back-up facilitator can observe the process and level of participation. Listen carefully and document what people say. They may see things that the lead facilitator cannot see because he or she is in the heart of the action – for example, if the lead facilitator has a problem or has not seen participants who are trying to say something. The back-up person can help to keep the process on track, suggest a new question, propose a new way forward, or suggest a new scene that will raise a new issue or help encourage people to participate in the drama.

If an activity has more than one group, team members can each facilitate a group activity or discussion or make sure that each group participates in the discussion.

When we facilitate as a team, we should agree beforehand how we will signal 'taking over'. One technique is to ask a new question (within the topic) and then step in to take over the facilitation. Don't break the flow of the discussion by getting into a long talk with the main facilitator.

At the end of the meeting, sit together as a team with elected participants and review what happened.

- ▲ How was the level of participation? Who talked? Who didn't talk?
- ▲ How were the issues covered? Did we cover all we needed to cover?
- ▲ What issues came up which need more attention at the next meeting?
- ▲ How can we improve our facilitation techniques at the next meeting?
- ▲ How can we improve our teamwork?
- ▲ What is our plan for the next meeting?

EVALUATING INTERACTIVE DRAMA SESSIONS

What is evaluation and why use it?

Evaluation asks:

- ▲ Were our objectives achieved?
- ▲ Did the content, methods and processes help us to reach the objectives?

We can evaluate after each session and after a series of sessions and activities.

Evaluation helps participants to:

- assess what they gained and their participation in the sessions
- ▲ improve the sessions
- ▲ assess what was learned and then apply this at work or in the home (we discuss evaluation further in Chapter 10).
- ▲ plan the next session.

Ways to evaluate a session

1. Around the circle or task groups

Use a list of questions like the below examples.

- ▲ How was participation in the session today?
- ▲ What worked well and why?
- ▲ What did not work well and why?
- ▲ How can we improve the session?
- ▲ What was the most interesting thing you learned today?
- ▲ What new idea will you take back to your peers, family and community?
- ▲ What were our key achievements today?
- ▲ What concerns or issues need further discussion?
- ▲ How will you use what you learned today?
- ▲ What are our next steps?

Either ask for brief comments from each participant on a single question going around the circle and changing the question after each session. Or divide into task groups and ask each group to evaluate a different aspect of the session.

One-word feelings

Ask each person to think of a word that expresses how she/he feels about the session. Go around the circle getting one word from each person.

3. Show of hands

Ask participants to give their opinion about various aspects of the session through a show of hands (high – hand raised over head; medium – shoulder height; low – ground level). Ask questions such as:

- ▲ How did you feel about the session?
- ▲ How was the level of participation?
- ▲ How was the pace? Too fast? Too slow?

With negative ratings, ask participants to explain why and discuss. Ask, 'What can be done to improve the sessions?'

4. Steering group

Establish a 'steering group' of the facilitators and a few participants, who meet at the end of each session on a rotating basis. They review the session and finalise plans for the next session.

5. Observers

Select 'observers' for a session to observe the participation level, energy/interest level, pacing, and the use of different methods. The observers report at the end of the activity or session.

Review of previous session

At the start of each session, help participants reflect on:

- ▲ What did we achieve in the previous session?
- ▲ What did we agree to do in this session?
- ▲ How have you used what we did at the last session, and what happened?
- ▲ What were our suggestions for improving the group work?
- ▲ Where are we now in the whole process?

You could do this by going round the circle for comments, sharing in buzz groups or using the Margolis wheel (see page 124).

Chapter 5 DRAMA SKILLS

WARM-UP ACTIVITIES

We use drama skills to 'show and tell' something to participants at a group activity or to a wider audience in a play. We use our bodies and voices (and, of course, our minds) to create what we want to show. These are skills we often use in everyday life. The following activities can be used as warm-ups, to develop these skills and use them in role-play and drama activities or in a play.



Bat!

Warm-up activity 1: The forest

→ What is it and why use it?

This is a good activity for exploring our reactions in drama.



- 1 Explain that we will be walking through an imaginary dense forest, where we will meet different kinds of creatures, some lovely and some scary. Explain that you will be acting as the guide through the forest.
- 2 Ask people to name possible lovely or scary creatures that they might meet select three lovely and three scary creatures.



- 3 Ask people to walk around imagining that they are in this dense forest and are not sure whether they will meet the lovely creatures or the scary ones. Explain that you will shout out the name of a creature and everyone has to react as they would in the forest! For example, you might shout 'Bat!' and some may scream or fling their arms in the air! There is no right or wrong way, because everyone has got their own way of reacting.
- **4** Ask people to stand still or 'freeze' when they react and look around at how others reacted.
- **5** After the activity, discuss how we can use the activity for drama.

Warm-up activity 2: Imagery explorations

→ What is it and why use it?

In this activity, participants explore how to show different senses on stage and improve their acting. This is important because drama relies on making the audience believe in something which is not there on stage.

- 1 Encourage participants to find ways through which they can show each of the senses through body language. The senses can include the following:
 - ▲ nasal the sense of smell
 - ▲ oral the sense of taste
 - ▲ tactile the sense of touch
 - ▲ kinaesthetic muscular senses
 - ▲ visual the sense of seeing/vision
 - ▲ gastric feelings in the stomach
 - ▲ thermal the sense of heat and cold
 - ▲ aural the sense of hearing.
- 2 Ask participants the questions below. Add your own as well.
 - ▲ How could you show that something smells really badly?
 - ▲ How could you show that you are feeling cold?
 - ▲ How could you show that you are carrying something heavy?
 - ▲ How could you show that something tastes really nice?
 - ▲ How could you show that you are hearing something?
 - ▲ How could you show that you are seeing something you really like or are scared of?
- 3 Discuss what people saw during the activity and how it can be useful in drama activities.



Warm-up activity 3: Create an animal

→ What is it and why use it?

One of the features of drama is that it makes us creative. This is a particularly useful feature when we are seeking solutions to problems in SRH. This activity helps people to think creatively.

→ How to do it

- 1 Ask participants to get in pairs and explain that as a pair they have to use their bodies (not voices) to show an animal (one animal not more).
- **2** Give the pairs about five minutes to try out their animals on their own.
- **3** After five minutes call everyone back into the group and share the animals. The others have to try and guess what animal a pair has created before the pair tells them what it is.



Warm-up activity 4: Playing characters

→ What is it and why use it?

This activity helps to develop the idea of acting as another person, a character, in drama. This is important, because in drama we can act as other people we find in stories that we know or have created.

- 1 Ask each participant to think of an imaginary person whom they would like to 'be'.
- 2 Ask participants to think of the way in which their characters speak, walk or carry themselves around, and to explore it practically. They can also think about how old their character is, what the character likes and does not like, who their friends are, etc. Give participants around 10 minutes to do this as individuals.
- **3** Return to the large group and share examples of characters. While people are still acting as their character, people can ask questions to the character.
- **4** Discuss the experiences of the activity and how we can use it in SRH interactive drama sessions.

Warm-up activity 5: Occupations

→ What is it and why use it?

This activity helps participants to start making still pictures or sculptures with their bodies.

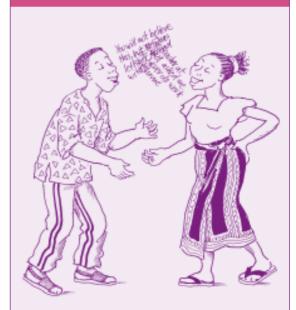
→ How to do it

- **1** Ask participants to walk quietly and calmly around the room.
- 2 On the words, 'Freeze as a ...', followed by an occupation, each person must quickly freeze in the pose of the occupation described. Some suggestions of occupations: fisherman, hairdresser, teacher, farmer, pop singer, bus driver, politician, nurse, waitress, mine worker, cattle herder.
- 3 People look at each other's images and talk about the different ways that people have showed the occupation and the different way that people see things. This exercise may lead into discussion on gender roles.

Variation: Try more difficult subjects, i.e. feelings such as anger, joy, fear, jealousy, sadness, death, birth, hopelessness, boredom, domination and lust.



Warm-up activity 6: Chitty-chatty



→ What is it and why use it?

This activity explores the importance of clear communication when we are doing our drama activities.

- 1 Ask participants to get in pairs and ask them to tell each other stories at the same time. Encourage them to keep talking while trying to listen to the other's story as well.
- 2 After about a minute, ask them how this felt and whether anyone could tell what the other was saying. Discuss what the participants observed during the exercise.
- **3** Ask the participants to find ways of sharing their stories in any way they choose so that they can understand each other.
- **4** Share and discuss findings from this task. How can it be applied to people talking in a role-play or on stage?

DRAMA TECHNIQUES

In this section we describe specific drama techniques and activities to help us understand how we can use them and develop our drama skills.

Images and sculptures

What is an image or sculpture?

When we talk of images or sculpture, we mean unmoving pictures that we create using our bodies in different poses. The images are 'frozen', not moving, and there is no verbal dialogue. Everything is communicated through body position, gesture and facial expression. Participants work individually, in pairs or in groups, to develop the body images or 'sculptures'. Participants can make the sculptures themselves, or one participant can take the role of 'sculptor' and mould the other participants like clay to show the image they would like to show. Then they stand back to look at the sculpture and draw out its meaning. The images become the focus for discussion.

The image, or sculpture, is incomplete without the discussion. Part of the discussion involves getting participants to add extra aspects of body language – gestures, facial expressions, body position, etc. – to strengthen the image. Participants take turns coming up to 'sculpt' new things on the sculpture. After the image has been strengthened and participants agree to it, they can discuss what it means.

Why use images and sculpture?

We can use images and sculpture in interactive drama sessions to learn more about our lives and find solutions to problems. We can also use these tools to help us devise a play to show to others. We can use them to help us create scenes and as part of the performance itself.

We can use images to:

▲ explore gender and power relations, feelings, and conflict – for example, wife kneeling on

- floor, husband sitting comfortably on chair: discuss the relationship
- ▲ express feelings; for example, helping children with HIV to show their feelings, such as, shame at being stigmatised
- express things without words for example, sexual desire
- ▲ identify problems or issues to talk about, if people find this hard to do at first through words
- ▲ look at how things might change for example, sculpture 1 current situation; sculpture 2 ideal or future situation; sculpture 3 what would need to happen to bring about the desired situation
- ▲ bring up topics for discussion and find out more about issues in greater depth
- ▲ bring out different ways of seeing issues
- generate ideas at the start of creating a drama and get people thinking about the issues when they are initially blank
- develop clear, focused ideas and scenes for drama
- ▲ focus the players' attention on how much their body language can communicate to an audience through gestures and expressions, and remove the pressure of having to invent dialogue
- develop the group's ability to observe and criticise constructively as the audience; both performers and audience have equal status in this process
- ▲ help the group to become more aware of the power of their bodies and feel more confident 'on stage'.

Tips for using images and sculpting

- ▲ Sculpting is a new form of drama for many communities, so explain it clearly at the start and show what a sculpture is demonstrate yourself, as part of your explanation.
- ▲ Introduce the concept of sculpting using local words, e.g. *chitombe* (Shona), *chiboliboli* or *fanizo* (Chichewa)



- ▲ If no one volunteers to begin the sculpture at the start, don't worry. You need to be prepared to wait a little someone always volunteers. Once it gets going, people will join in easily.
- ▲ Demonstrate yourself what a 'sculpture' is, or ask for a volunteer to show the others what one is.
- ▲ Begin with easy warm-up exercises and ask everyone to do their own image so they get used to it. For example, ask people to make image of a common issue such as hunger, coldness or happiness.
- ▲ Ask for volunteers to show their images/ sculptures first.

- ▲ If one person is the 'sculptor' and the other the model, he or she can either arrange the image through touch or gesture to show the model what to do.
- ▲ After each sculpture, ask questions to make sense of the images and learn from them. You can also ask participants how to strengthen the image by adding extra aspects of body language, such as gestures or facial expression.
- ▲ Tell people there is no right or wrong image. The aim is to express what we feel and to show different perspectives every perspective is valid.
- ▲ Be culturally sensitive for example, some cultures have restrictions on touching.
- ▲ Some topics might not be suitable for sculpting.
- ▲ Showing sculptures can raise emotional reactions in people. Make sure that people step out of the role they have been playing and shake it off.
- ▲ If everyone does a sculpture and wants to look around, go into pairs and look at each other or turn to each sculpture one at a time.

Images and sculpture activity 1: Mirroring

→ What is it and why use it?

One of the simplest ways of making images is to start in pairs. Then one person makes a pose, which the other tries to mirror. This activity encourages observation skills, as well.

- 1 Ask participants to get into pairs. One is A and the other is B.
- 2 Explain that A is going to get into a pose and freeze. This pose can show anything. It can be someone doing something or it can be showing how someone is feeling, for example.
- **3** B has to try to make a mirror image of A. Encourage the participants to observe even the small details.
- 4 A and B swap. B creates an image and A mirrors it.
- 5 Talk about the experiences of the activity.

Images and sculpture activity 2: Image of the word

→ What is it and why use it?

In this activity, participants use their imagination to make physical images of words. This activity helps to introduce the concept of images and themes to the participants and develops the ability to act naturally and freely without thinking too much.

→ How to do it

- 1 Explain to them that you will shout out a word (for example, 'woman', 'man', 'stigma', 'poverty', 'empowerment') and they will try to make an image that depicts that word.
- 2 Observe and discuss how different ways of depicting a word might lead to different understandings.





Images and sculpture activity 3: Complete the image

→ How to do it

- 1 Ask participants to sit in a circle on the floor and explain that you are going to do an image activity that helps us to explore how people interact together.
- 2 Ask two volunteers to come into the middle of the circle and ask them to shake hands and freeze (stay completely still).
- **3** Ask one of the participants to remove themselves from the frozen image and sit down, while the other remains in the same position.
- 4 Another participant stands up and completes the image to show a different relationship between the characters. The participant who was frozen first detaches himself or herself

from the image and another one comes on to make a new relationship. Continue in this cycle to explore different relationships. People can also do the activity in pairs.

5 Ask, 'How could we use this in drama activities?'



Images and sculpture activity 4: Paired sculpting

→ What is it and why use it?

We can create images using the body of one or more person.

- 1 Divide into pairs and ask partners to face each other. A is the sculptor, B is 'intelligent clay'. B stands still, but relaxed, with eyes closed, while A moulds him or her, as though he or she were a lump of clay, into a statue.
- 2 A begins to explore ways of moulding the 'clay' shaping the body position, all parts of the body, facial expressions and gestures. Remind A to work gently and not force B into impossible or uncomfortable positions. B should cooperate with A, holding the positions he or she has been put into.
- 3 Once the pairs are used to the process, get the sculptors to make a finished sculpture. When finished, ask them to walk around and look at the other sculptures.
- 4 Ask participants to say what they see and what they think is happening, then switch roles.
- 5 Once pairs are used to the technique, decide on a theme. Each pair works on their own. Then bring the pairs and their sculptures together and try to build a large sculpture based on the theme.
- **6** Ask, 'What story does it tell?' Discuss the image created and its meaning.



Images and sculpture activity 5: Relationships

→ What is it and why use it?

This activity uses images to show relationships between people. It is a useful entry point to analyse the relationships of different people.

→ How to do it

- 1 Ask players in pairs to create an image to show a couple. It can be any couple: heterosexual, homosexual, bisexual, young, old, insecure, trusting, unhappy, jealous, romantic and so on.
- 2 Each pair makes an image of their couple. The pairs could aim to show something about communication between couples. People could also do images of family or friends.
- 3 Ask:
 - ▲ What can the audience see in the image? Is there a general agreement in the group or widely differing interpretations?
 - ▲ What did the players intend to show about the relationship?
 - ▲ Were the players successful? Did

they make their intention clear to the audience through their body language? Is their reaction to each other obvious? What improvements might they make to the image?

Variations: The players make the image and then each one, in their pose, speaks one line that reveals what they are thinking to the audience. One of the couples from the above is selected. These players then make two separate images, using as many of the rest of the group as they wish. These images show a typical scene from the lives of the couple when they are apart. For example, the man at work or with his friends, parents and so on. Then the woman at work, with neighbours, with her children, at home and so on ...

Questions for discussion:

- ▲ What pressures does each of the partners have? What support?
- ▲ How does this affect communication between the partners?
- ▲ Is their health affected?

Images and sculpture activity 6: Team sculpting

→ What is it and why use it?

We can use a team sculpture to explore an issue or as an entry point for drama.

- 1 Divide into groups of eight people.
- 2 One person assumes a shape. The next person must add a shape, touching at some place on the previous shape. This continues until all are part of the sculpture.
- 3 Once all the groups have finished their sculpture, ask each sculpture to move without coming apart or changing shape.
- **4** Draw out the meaning of the sculpture and discuss with the group.

Images and sculpture activities 7: Bringing images to life

→ What is it and why use it?

Learning from images and sculptures is very important for SRH. We can also bring the images we create to life as part of the learning process. Below we have listed several activities through which you can bring images to life.

1. Opening up discussion

This can begin by asking the following questions:

- ▲ What do you see?
- ▲ Who are the characters portrayed?
- ▲ What do you think is happening?

2. Inner voice from the audience

Audience members can speak on behalf of the character what inner thoughts or feelings they might be having.

3. Inner voice from the characters

The facilitator taps a character on the shoulder and the character says what he or she is feeling and thinking.

4. Listening to our thoughts and feelings

Ask the still participants in a sculpture to listen to their thoughts and feelings as their characters inside the image. After a while, they do this out loud talking to themselves. Then, touching one person at a time, they say a word or sentence as their character in this situation. This could progress to making a scene. It is important for the participants to stop themselves from saying the same things over and over again – to break through that initial barrier of surface thinking.

5. Opposite images

After being sculpted into the first image, ask people in the image to take an opposite position in terms of power.

6. Gesture and phrase

People in the image/sculpture make a movement – the first logical movement in their situation – after a clap. Repeat three times.



People in the image make the first sound that comes to them after a clap. Repeat three times. Combine movement and sound and repeat three times.

7. Inner conflict

Divide into pairs and ask partners to sit back to back. Ask each pair to decide who is A (the person with the inner conflict) and B (the inner conscience). A establishes the problem creating inner conflict; B gives a counter-resolution and argues with A, who gives a different viewpoint. For example:

- A: I really want to have sex with him, he's so loving.
- B: But you are married. What if your husband finds out?
- A: But he has girlfriends all the time.
- B: Does that make it right for you to do it, too?

Variation: Two characters in dialogue. A third person moves from character to character, saying what each person is thinking.

Mime

In mime, we show a moving action through our body language, gestures and expressions, but do not say anything. Mime helps us to develop skills in communicating without words. We can use it to develop clear scenes for a play.

Activity: Mime the lie

→ What is it and why use it?

This is a warm-up game which shows that we don't always really do what we say we do. It gets us used to miming.

- 1 Stand in a circle. Explain and show people what a mime is; for example, mime weeding the field. The person who was standing next to you then asks, 'What are you doing?' You say, for example, 'I'm playing football.' Everyone will laugh.
- 2 The person who asked you now enters the circle and mimes what you said you were doing. The person next to them asks, 'What are you doing?' and the person doing the mime lies about what they are doing.
- 3 Repeat this until everyone has had a turn.
- 4 Ask people not to suggest things that will offend or embarrass others; for example, having sex. Participants can ask for a different action if they feel uncomfortable.
- **5** Ask how this game applies to our sexual and personal lives. 'Is what we do sometimes different from what we say? What effect might this have on our relationships and SRH?'





Role-playing

Role-playing is improvised or spontaneous drama in which participants take on roles and act out a specific situation. Unlike images, there is an emphasis on action and dialogue in role-play to help us see how things happen in different situations.

An example of a situation for a role-play can be 'a young person trying to negotiate condom use with their partner'. What these two young people do in the situation is their 'roles'.

When we are both ready to do that, then But what if we we'll both be healthy. want to have a baby?

Participants imagine that they are part of a real-life situation, and work out their responses to the situation as it develops. There is no

script; dialogue and action are made up by the actors as they go along. Through role-playing participants try out new and unfamiliar roles, play out problem situations or try out different ways of solving a problem. Role-playing is always followed by discussion. This helps participants get a deeper understanding of the situation, the roles and feelings involved, and the problems and how to solve them.

We can use role-plays to:

- explore problems in depth and try out different approaches to solve problems
- ▲ help participants practise communication skills - e.g. how to talk about sex with a partner, how to disclose one's HIV status, how to counsel someone with a problem
- ▲ build confidence by rehearsing ways to cope with difficult situations
- explore attitudes, beliefs, and values, e.g. stigmatising attitudes
- ▲ help participants to look at their feelings about different issues and express them openly
- ▲ help participants see how others think and feel, e.g. through playing the role of a woman who has been stigmatised a participant can begin to understand her viewpoint.

When can we use role-playing?

- ▲ Help participants overcome their initial shyness and become used to each other before introducing role-plays.
- ▲ Use warm-up games to overcome inhibitions and make participants feel less self-conscious.
- ▲ Divide into pairs, explain the situation and ask pairs to act it out. Since everyone is performing at the same time, no one is watching others and participants will be less shy.
- ▲ Never force an unwilling person to play a role; instead, call on volunteers. However, try to encourage everyone to take part.
- ▲ Role-playing can be done: a) in pairs with no observers, b) in small groups or c) with the whole group - a few actors at the centre and the others observing.



How do we organise role-playing?

- 1 Define the objectives for the session clearly: Do we want to understand a situation? Solve a problem? Try out certain roles? Practise skills? Or explore feelings?
- 2 Define the situation. Work together to describe the situation to be played out. Who are the characters? What is the background? How does the situation arise? Make the situation similar to situations people face in their daily lives.
- 3 Decide together who will play the different characters: If people do not volunteer, encourage them. Be cautious about people taking on a role which is close to their real one.
- 4 Allow time for the people playing the roles to prepare their characters and background and get into their roles. Help each other with unfamiliar roles.
- 5 Prepare observers. Agree what the observers are going to look for in the roleplay.
- **6** Act out the role-play. People can give a signal (e.g. 'Play!') to get the role-play going.
- 7 Cut the scene with a signal when it has achieved its purpose – that is, it has raised sufficient issues for a discussion or tested out a solution. Do not allow it to go on too long.

- 8 Discussion. Ask questions to help participants analyse what they learned from the role-play. Ask each actor to describe how they felt, then ask the observers to give their comments. Structure the discussion so that it examines:
 - ▲ Feelings. How did the actors feel?
 - ▲ Deeper understanding. What happened and what did we learn from it? For example, why did the characters behave as they did and what were the consequences?
 - ▲ Solutions or strategies. Did the strategy or solution work? If not, why not? How can we improve it? What else could have been done?
 - ▲ Application. What does it mean for us?
- 9 Getting out of role. Players may become very involved in their role. After the role play help them to get out of the role, especially if they played a distressing one. Ask each player to change seats or identify themselves by their real name and say something about themselves. Check with each person that they are back with their own character and remind the group that everyone was playing a role, not themselves.
- **10** Summary. Ask people what they have learned and how they will use their new insights. Add any additional points.

Role-playing activity 1: Warm-up and introduction

→ What is it and why use it?

This activity helps as a warm-up and introduction to role-playing.

→ How to do it

1 After briefly explaining to participants what a role-play is, use the situations and roles below to get participants into role-playing in pairs. You can also create your own situations and roles, but remember to keep them as a role-play for the warm-up and introduction.

A is trying to tell B something important, but B is occupied with something else and is not listening.

- **2** Give participants at least 10 minutes to do the activity. After five minutes, they can swap roles.
- **3** After 10 minutes, ask participants to come together. Discuss how the participants found the activity and what they think about it.
- 4 After the discussion ask the participants if there are any volunteers to show their short role-play. Participants can also suggest other situations and roles for other short role-plays.
- **5** Conclude by making sure that participants have understood what a role-play is.



Role-playing activity 2: Helping the audience understand

→ What is it and why use it?

When we role-play or act in a drama, we have to interact with the other characters in the play while at the same interacting or sharing with the audience all the time. The role-play or drama will not work if the actors on stage are just acting amongst themselves, forgetting to communicate with the audience, or if they are just acting for the audience and forgetting to interact with each other. In this activity, participants explore the importance of this three-way interaction and develop skills to implement it.

→ How to do it

- 1 Ask: 'Why is it important to show clearly what happens in a role-play or drama?' Discuss the importance of interaction between actors on stage and communication with the audience all the time.
- 2 Ask: 'What can we do to make sure that the audience understands what is happening in a role-play or drama?'
- 3 Explore practically how actors can do this well. There is no right way of doing it. Just explore the best way of getting the characters interacting while also ensuring that the audience is engaged. It is not necessary for the role-players to actually speak to the audience, although this is one way of engaging them.
- 4 Divide into three groups. In pairs in the groups, take it in turns to act a role-play in front of the group, making sure that there is three-way interaction between the two actors and the audience.
- 5 Bring the groups together and share the different strategies for three-way interaction.

Can the audience hear you?
Are your actions, gestures and facial
expressions clear?
Can the audience see what is happening?



Actors interacting with their backs to the audience



Actor talking to audience and ignoring other actor



Actors interacting together and engaging the audience

Stop-start drama

Stop-start drama uses a continuing process of role-playing and discussion to look at problems and how to solve them. A few participants act out a short scene to show the problem and then the facilitator shouts 'Stop' and asks the group to discuss the problem. For example, Is the problem real? Why is there a problem? How to solve it? Ideas which emerge from the discussion are then turned into new scenes performed by participants. Each new role play, after completion, is stopped for further discussion.

The role of the facilitator is to shape the drama-making and discussion, and keep it focused on the problem and how to solve it. Her or she gets each scene going, stops the drama at appropriate points, asks questions, draws out ideas from participants, encourages them to act out their ideas, and then leads the discussion.

Stop-start drama is:

- ▲ a short improvised role-play performed by participants
- ▲ combined with discussion to analyse each role-play
- ▲ led by a facilitator who shapes the whole process
- ▲ a technique that aims to understand issues, solve problems or practise skills.

Stop-start drama activity: Experiencing the technique

→ What is it and why use it?

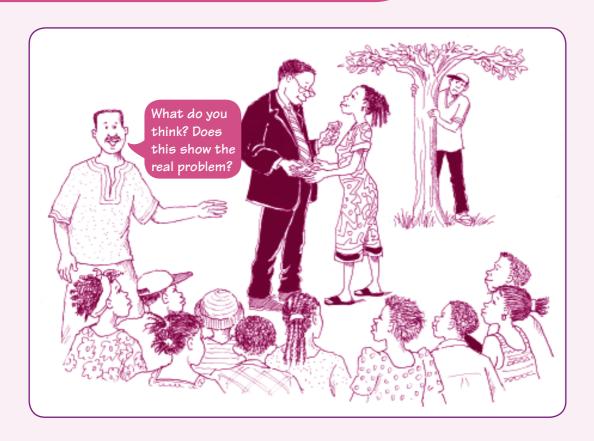
In this activity, we practise taking part in a stop-start drama with an experienced facilitator.

→ How to do it

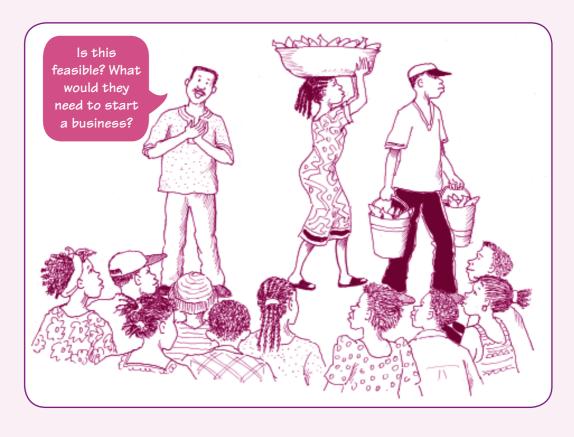
- 1 Ask a few participants to show an agreed problem through a short drama.
- 2 Stop the drama and ask: 'What do you think? Does this show the real problem? What is missing?'
- **3** Use the most appropriate responses to develop a new role-play. Invite those who make suggestions to act them out. Give the actors enough time to develop the scene before stopping it.
- 4 Ask questions at the end of each scene or when another problem arises during the roleplay. Use questions:
 - ▲ to analyse the problem
 - ▲ to pull out solutions
 - ▲ to assess the realism and consequences of each solution tried
 - ▲ to get agreement on action.

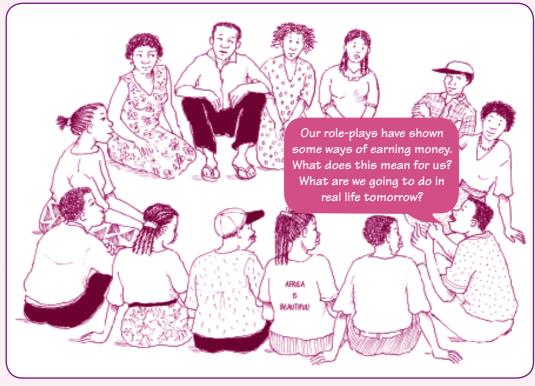
Direct some questions to the actors, e.g. 'How are you feeling right now? Why did you decide to go with her?'

- 5 Keep restating the focus to ensure the group is on track 'We are trying to find ways to stop child sexual abuse in our community.'
- 6 Connect play acting with reality. 'We have shown change in community attitudes to sexual abuse in our drama, but what does it mean for us? What are we going to do in real life tomorrow?'









Storytelling

Storytelling is a skill found in all cultures, and stories are a familiar way of learning for many people. Stories communicate ideas, feelings, values and culture. Storytellers adapt their traditional stories in the light of changes in the environment. This makes storytelling a powerful technique for change, especially when the stories are developed by the community, not imposed from outside. Stories are a low-cost, local medium that we can use in different ways to inform, stimulate discussion and motivate action; for example, at a clinic, in class or on the radio. We can start with stories to make up roleplays and drama or create a play for performance. Look at examples of stories from your community to help each other understand what stories are and how they can help in a learning process.



In this section, we try out some storytelling activities to increase our skills.

Storytelling activity 1: Building a story one sentence at a time

→ How to do it

Participants sit in a circle and take turns telling the story, a sentence or a number of sentences at a time, ending with 'and then' or 'but' as a signal for the next player to carry on. Everyone must listen carefully so that the stories make sense. Individuals cannot predict the story in advance, but they can introduce words such as 'suddenly', 'quickly', 'cautiously', 'surprisingly' and so on, to move along the action.

Variation: Building a story with clapping

Start a clapping rhythm, 'CLAP CLAP CLAP', then silence for four beats, then 'CLAP CLAP CLAP CLAP'.

The story is fitted into the four silent beats between claps. Each person adds a sentence or phrase to the story between the claps as it goes around the circle.



Storytelling activity 2: Interacting with the audience

→ How to do it

One player goes into the centre of the circle and tells a personal or made-up story. For example, 'What happened at the wedding' or 'How I was robbed'. The player tells the story in a way that gets a strong reaction from the audience, stopping to get a response. The others all call out 'and then?' at each stop, before the player continues.

Variation: One player tells a story but leaves the story open to comments, questions and other contributions from the other participants. In this way, the storyteller and the rest of the group share the telling of the story. Those in the circle question the action, feed in problems concerning the main character, provide local detail to characters and situations, and so on. Some extraordinary stories emerge – often very different from the teller's original idea!

Fortunately/ Unfortunately

We can play this game in pairs or in a circle. Player 1 begins a story: 'Fortunately, when I woke up this morning, it was a fine day ...' Player 2 continues: 'Unfortunately, I had a headache ...', and so on around the group.

Storytelling activity 3: Storytelling with an object

→ How to do it

Place a number of objects – for example, a cup, necklace, spoon, coat hanger and so on – in the centre of the circle. Ask each person to pick up an object that brings to mind a strong memory or story.

Give everyone time to think about the story that first comes to mind. If two or more people are attracted to the same object, let them all use it as a focus for their stories. When participants are ready, ask each person to tell her story to the group. Once the storytelling is finished, you could get participants to link their stories into one combined story.

Storytelling activity 4: Using scripted words

→ How to do it

Give out one slip of paper to every participant and ask them to write down a word or phrase and fold it up. Collect the slips of paper and distribute them at random.

One player starts a story, using in some way the word he or she has been given. The next person keeps the story going, incorporating the word he or she has been given. Each contribution should be brief – a sentence or two at most. The last person in the circle has to finish the story.

Storytelling activity 5: What makes a story interesting?

→ How to do it

Ask participants to do a graffiti wall of what makes a story interesting. They can think about what made them enjoy stories which they have heard, read or seen before. Discuss the findings. humour

What makes a story interesting? From our workshop in Malawi

The story poses problems rather than provides solutions. It is a personal, real-life story from the community.

The issues are relevant to the audience.

The story makes us feel - for example, we laugh, cry or feel afraid for the characters.

The attitudes of the characters are found in the community. The situations are found in the community.

The story makes us what to know what is going to happen next, it keeps us in suspense.

There is plenty of action and adventure, not just talking. It does not stigmatise or blame anyone.

The language that is used in the community, including local jokes and proverbs.

The story relates to traditional myths and legends. There is conflict and humour.

There confli humoi

It does ve stigmatise or blame anyone.

The story relates to traditional myths and legends.

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Chapter 6WHY DO WE BEHAVE AS WE DO?

Our behaviour as individuals has an important effect on our health, but we do not always have free choice in our behaviour, because of social and economic factors outside our control. If we understand the forces that influence our behaviour, we can work to strengthen those that enable us to practise healthy behaviours and reduce those that make it difficult. We can use drama activities with groups and communities to achieve this.

In this section, we explore why we behave as we do, using a framework and focus for exploring these issues for ourselves and with groups and the community.

Our behaviour is how we act and react in different situations in life. This can have good or bad effects on our own well-being and the well-being of others. For example, in relation to SRH:

- ▲ If we behave in a caring and respectful way towards those of us living with HIV, we can reduce stigma and discrimination and improve our well-being.
- ▲ If we have sex without knowing whether either of us have HIV or using a condom, we put others and ourselves at risk of contracting HIV.

Our aim is to facilitate drama and discussion with groups and the community to identify, promote and continue those behaviours that increase our well-being and change those which reduce our well-being. This requires different kinds of actions which empower individuals and groups and build an environment which makes it possible and even easy to adopt health behaviours.

The five groups of factors

This framework helps us to understand why we behave as we do and to develop activities to make it easier to adopt healthy behaviours. The five groups of factors are all important in influencing our individual behaviour and that of groups and the wider community.



1. The knowledge and thinking factors

What do we know?

For some of us, information alone is enough for us to practise healthy behaviour, because the other factors are in place. For example, a college student hears about

HIV on a radio programme and makes it a rule to use condoms whenever he has sex. People practise safer sex after talking about it with their friends and learning about ways to protect themselves from unwanted pregnancy and infections.

What do we need to know?

Some examples:

- ▲ how our bodies work
- ▲ how we can catch STIs and what we can do to protect ourselves
- ▲ STIs, including HIV, are real and can affect us badly in many ways treatment can cure some STIs and, if not, help people to stay healthy for a longer time

6 Why do we behave as we do?

▲ the methods that we can use to avoid unwanted pregnancy.

Chapter 11 provides key information about SRH topics.

However, most of us need more than information to enjoy social, emotional and physical sexual and reproductive health.

2. The feeling element (the strength of attitudes or feelings)

What do we feel and value?

We rarely make decisions on the basis of facts alone. For example, health is only one concern



among many when people have sex. The need for pleasure, closeness and power, and personal identity, may be more important than physical health needs.

Feelings that could help us to maintain safe sexual behaviour might include:

- ▲ a feeling of personal vulnerability to STIs and HIV
- ▲ a strong emotional commitment to a healthy behaviour; for example, staying with one partner or practising safer sex
- ▲ a concern to protect our partners, children or others we love
- ▲ a feeling of power over the planning of pregnancies
- ▲ a belief that safer sex is exciting.

The feelings, such as fear, influence our decisions and may make us feel bad, or love or hope for reward may make us feel good.

Moving towards good things may motivate us to change more than running away from bad things. Education that makes us very afraid (e.g. scaring people about HIV) can make us deny that the problem has anything to do with us or make us become too frightened to take action. Our fear makes us stigmatise those of us living with HIV. If we feel fear, we must know what we have to do to reduce the fear and feel able to do it.

3. The practical element What can we do?



We need to develop skills and confidence in practising a new behaviour; for example, talking with a partner about safer sex, using condoms, refusing unwanted sex or experimenting with new practices.

However, it is easier to use our skills and feel confident if others

support our new behaviour – for example, our peers and partners.

4. The interpersonal element (interacting with others)

What support do we get from others?

If we decide that we want to make changes in our own behaviour or influence others



and our environment, we will need support from our partners, friends, peer group, family, organisations and community. Our personal relationships and interactions are affected by our age, sex, status, power and how we are expected to behave in our culture. We need to share responsibility with others

to achieve a widespread and lasting change in behaviours, attitudes and social norms. This usually means challenging some deepseated cultural and gender values and power structures and strengthening others.

The level of trust and the number of cooperative relationships that people in a group or community have with each other has a big effect on their health and well-being. We call this social capital. The higher the amount of social capital, the more effectively and harmoniously people can work together. Working with groups of young people and those who influence them to improve things using interactive drama builds social capital and supports group action.

Examples

A group of young people with HIV support each other and find ways to improve their lives. They take collective action to make condoms and antiretroviral drugs available in the community and teach other young people how to avoid HIV.

A group of young fathers meet to explore the issue of sexual violence using interactive drama activities. They agree as a group to stop all sex with underage children and beating their wives. They counsel each other, feed back their successes and failures to the group, act as role-models to other men, put on drama to change norms and take action if anyone abuses a young person or attacks their wife.

5. The situation element

Do we have the power and resources to do it?

Forces in our environment often shape our behaviour more than our individual knowledge, feelings and skills. We can explore these factors using drama activities and look for ways to deal with them.



Examples of situational factors:

- ▲ Some of us have risky sex for goods or money because we cannot meet our needs.
- ▲ Our community does not have the resources to provide services and do other activities that we need to achieve sexual and reproductive health.
- ▲ We are influenced by our personal and shared values, cultural and moral systems, including our religion.
- ▲ Laws tell us what we can and cannot do. For example, if homosexuality is a crime, we can only practise it secretly.
- ▲ Our political systems can prevent us from getting what we need and taking social action.

Awareness of these forces can help people to act outside them in some ways, but changes in the social and economic environment are also usually important. People need to live in an environment where safer behaviour is made easy, acceptable and even routine and where they have the power to make informed choices about sexual behaviour. They also need to have access to the necessary supplies and services such as high-quality family planning and STI and HIV services. We need to be able to form effective partnerships with people with resources and power.

How can drama help us to address these factors?

The table below gives some examples of how interactive drama activities can help us to address the different factors. In the next section we describe some activities that help us to understand why we behave as we do. They are useful for facilitators and actors, group work and developing plays.

Group of factors	Drama activities
Knowledge	Feed key information into drama activities with groups so that people can apply it to their own lives. Perform plays that provide true facts applied to life through the story. This way, people will remember the facts and use them. We remember 20% of information when we only hear it. We remember 30% of information when we only see it. We remember 50% of information when we hear and see it. We remember 70% of information when we hear, see and talk it. We remember 90% of information when we hear, see, talk and do it!
Feelings	Feelings are a major factor in our sexual behaviour and we need to bring them out. Drama is very good for showing and exploring feelings and how they affect our behaviour and lives. Drama builds our skills in understanding and empathising with other people's feelings. If our feelings are touched by drama, we are more likely to adopt caring, protective behaviour.
Skills	Drama increases our communication and assertiveness skills because we practise them in all drama activities. As we go through different drama activities, we learn how to solve problems, make good decisions, think deeply and question situations. These are all important skills in our SRH lives. Drama builds our confidence and sense that we can act to improve things.
Interpersonal	Drama is all about interaction between people and it increases our interpersonal skills. Working together in drama builds support in peer groups, between older and younger people, and stigmatised and powerful people, in the community. Drama builds positive peer pressure and triggers collective action.
Situation	We can use drama to build an environment which promotes caring, protection and support for everyone regardless of status and power. The drama activities around power can bring about more equality and build confidence. It can result in collective action to change laws, generate income and demand services. We can perform plays to advocate for change and reach policy-makers, lawyers and leaders.

Activity: Roads and avenues

→ What is it and why use it?

This is a serious game that brings up issues of power and control. A cat chases a mouse through 'roads' and 'avenues' that keep changing on the commands of an outsider. The nine people forming the roads obey the outsider without question, although they could have helped the chased or the chaser by disobeying the commands.

In life many people feel trapped or powerless, unable to control what is done to them by other people. In some situations, people do have the power to change things if they believe in their power and work together. In talking about this game, people may begin to see ways in which they could more effectively use their power, individually or in groups, in their own lives.

Use this activity with workers or community groups working on issues of empowerment, decision-making and choice to explore issues of power and control. It links up with themes, later in the toolkit, such as status and power, assertiveness, communication styles, resisting pressure and gender roles.

→ How to do it

- 1 We need at least 12 people to play this game. Decide on one person as the cat, one as the mouse and one as the controller. Ask the other people to stand in three rows with their arms raised at right angles, touching their neighbours' arms, to make 'roads'.
- 2 To play the game, the cat either walks or runs after the mouse, who can move in either direction along the 'roads' or 'avenues' and around the edge.



- When the controller shouts 'change', whenever he or she wishes, the people forming the 'roads' turn clockwise 90 degrees to the right to make new 'avenues'. This puts the cat and mouse in a different position, with more or less chance of escape.
- 4 Players continue with the game for some time, so that everyone really feels what is happening.
- **5** Change over so that everyone has an opportunity to play one of the 'active' roles.
- 6 Start discussion by asking;
 - ▲ How did the cat, the mouse and the controller feel? How did the people making the roads and avenues feel?
 - ▲ What is happening in this game?
 - ▲ What could you do to change the situation? Did anyone do that?
 - ▲ If not, why didn't anyone try to change the situation?
 - ▲ Can you think of situations in your lives that are similar to what is happening in this game?

6 Why do we behave as we do?



What we learned from 'roads and avenues' When things change, we have to adapt.

Sometimes, when we try to help someone, we can make things worse for them if we don't do it correctly. Culture and the environment may force us along a

particular path. The more options we have, the more we can remain safe. For example, if there are no condoms, we can just play with each other without intercourse. Everyone needs to act together to overcome the 'controller' or environmental issues.

Giving orders is not helpful; people need full information to make their own decisions.

Activity: How do the five factors affect our behaviour?

→ What is it and why use it?

In a brainstorm, everyone thinks freely and creatively to get as many different ideas as possible, no matter how crazy, without worrying about how good they are at this point. All the ideas are written down without comment, preferably in large letters on pieces of paper, until the group run out of ideas. The group then talk about each idea and take out repetitions or unhelpful ideas. They sort the ideas into groups and/ or decide which are most important. This activity helps us to understand more deeply the factors that influence our behaviour. This in turn helps us to find ways to support good behaviours.

→ How to use it

Participants may find it easier to explore a non-sexual behaviour first, before moving on to a sexual behaviour. The process is the same as the one described below.

- 1 In single sex groups, choose a sexual behaviour, such as the use of condoms, abstinence or staying with one faithful partner.
- 2 In two groups for each behaviour, one group lists freely all the things that might make this behaviour difficult, preferably

- on pieces of paper. The other group lists all the things that make it easy.
- **3** Groups then cluster their ideas into the five factors (rational, feeling, skills, interpersonal and situational).
- 4 Groups walk round and discuss each pair of groups' findings in turn.
- **5** Ask the following questions:
 - ▲ What are the common factors and the differences between factors which make the behaviour difficult and those that make it easier? Which question brought out the most factors?
 - ▲ What are the common factors and differences between males and females?
 - ▲ From your lists, which are the most important factors influencing sexual behaviour?
 - ▲ How will you find out more about these influences in your peers and communities?
 - ▲ Which factors does your work most address? Which are left out? Why?
 - ▲ How could your work address each of the factors that influence this particular sexual behaviour?

Activity: Why did Rosie die? Using a story

→ What is it and why use it?

We can question stories, role-play or drama to understand the factors that result in illness and death. We can then look for ways to solve the problems.

→ How to use it

- 1 Make up your own story or read the story 'Why did Rosie die?' in groups. You could also turn the story into a short drama.
- 2 List all the reasons why Rosie died on pieces of paper and put each one into the five elements of the framework. How do they all link together?
- 3 Ask:
 - ▲ Why did Rosie die? When someone gives an answer, say again, 'But why?' until you have made a chain of interlinking reasons why she died.
 - ▲ What could different people in the story and her community do to prevent the death of girls like Rosie? Make a plan to protect other young women from a similar tragedy.

Why did Rosie die?

Rosie was 15 years old, a pretty and friendly girl. She lived in a small rural town in a poor country. She went to school for 10 years and then left to help her parents on the farm. The rains were not good and food was scarce. Rosie wondered what she could do to earn some extra money.

An older man from the town, a wealthy man with a grain business, always chatted to Rosie when he visited her father. He brought her small gifts and said nice things. Her friends thought she was really lucky to have the interest of such a rich man, and kept asking whether they had 'done it' yet. Her mother encouraged her to be friendly to him, but she felt too embarrassed to talk to her about how a girl can look after herself with a man.

When he invited Rosie to his house one day, she agreed. In his room, he caressed her and offered her money if she would have

I will push in parliament for more resources for poor rural farmers.



sex with him. Rosie was scared, but she thought of the money. What if she got pregnant? No, she heard that you couldn't get pregnant the first time. What about this disease AIDS? How could she ask him to use a condom, with him so much older than her and a man too? Anyway, he seemed too clean, smart and fat to have AIDS. No, she needed the money, so she would try to please him, and hope for the best.

The money bought several meals for the children in the house, and Rosie carried on seeing her 'sugar daddy' for a while. Then he left town.

Rosie began to feel very sick in the mornings, and tired. She didn't see her period, and her breasts felt sore. She didn't say anything to her mother, but struggled to do her work as usual. After some months her belly swelled, and her mother noticed.

She talked to Rosie, and told her she was pregnant.

Food was still very scarce and, after much anguish, Rosie's mother thought it would be better if Rosie had an abortion. She knew of an old lady who could do abortions. It would be better to go to the hospital and have a doctor do it, but the cost these days was so high that the family could never afford it. If only Rosie's man was in town ... but he had travelled to a neighbouring country where business was more profitable.

So the terrified Rosie visited the old lady. However, the pregnancy was too far on, and Rosie started to bleed heavily. Her parents were too afraid to take her to hospital in case they were charged with causing abortion, so they tried all the local ways of stopping bleeding. But it was too late, and Rosie died.



How do we change our behaviour as individuals?

People have made different models to explain how we change our behaviour as individuals. The model in the table below has four stages that need to happen for lasting behaviour change.

Stage	How drama activities can help
We identify and accept the problem We have to be aware and accept that the way we behave causes problems.	We can use drama to show why certain behaviours result in problems and help people reassess their own behaviour in the light of this.
2. We commit to change with enthusiasm and confidence We make a decision to change, and feel strongly that the benefits will be greater than the disadvantages and that we can achieve the change.	Drama allows people to try out changes, think about the results and choose good changes for themselves. This helps them to identify changes that can work and develop confidence to make them.
3. We make a plan to change and develop skills to do it We are clear about what we want to change from and to, and how we will achieve the new behaviour or way of living. If we need new skills, we practise them and also look for the support and resources that we need. We make a plan with a clear and achievable first step.	Drama can show how we would like things to be. We then try out the steps that we need to take to reach our state. This helps us to know our goals for change and find ways to measure them so we know how we are progressing.
4. We make the change and keep to it If we change our behaviour we will find that it improves our lives, makes no difference or has a bad effect. We may find this out the first time we try the new behaviour, or after some time. If it works well we are more likely to keep to it, if we have the support and resources that we need.	We can use drama to try out the new behaviours and predict what might get in the way of the change or what might go wrong. This will help us to avoid these barriers and problems. We can also predict what might happen over time and what can help us to keep to the positive behaviour. We can also look at how we might change to another behaviour, if the first one does not work out. We can continue to meet in groups to learn from and support each other and use drama to develop more activities.

Chapter 7 MOBILISING THE COMMUNITY

We are now prepared to facilitate participatory activities on sexual and reproductive health with young people and those that influence them. We know that different factors influence our behaviour and we need to address these if we are to enjoy good sexual and reproductive health. In this chapter, we look at why it is important to mobilise the community and what steps and tools we can use to do this.

A model for empowering people and creating safer environments

This is a health promotion model aimed at reducing risk factors and strengthening protective factors at individual and group, community, services and laws and policy levels. It aims to empower children and families, build social capital and strong partnerships and create enabling environments.

Laws and policies

Services and supplies

The community

The individual and the group

Laws and policies Local, national and international laws.

policies and procedures

Services and supplies

Quality and accessibility of prevention, care, support, treatment and impact mitigation services – formal/informal

The community

Population characteristics, socioeconomic situation, social norms, values and traditions, social relationships

The individual (or group of similar individuals)

Knowledge, attitudes, behaviours, skills

Individual and group empowerment

When we hold group sessions to build our knowledge, trust, confidence, skills, virtues and relationships, we become empowered and strong as a group. We achieve more together and feel happier. Interactive drama is a good way of building social capital.

Community action

Community action can promote good social, cultural and gender norms and change those that no longer help. It can mobilise resources to build, to bring in income and to stop rights violations such as sexual abuse.

Improving services and supplies

We need good SRH services, schools, livelihood services, social services and police to address the situational factors. We can influence these by demanding good services and working with service providers to increase access for everyone.

Influencing and implementing laws and policies

Policies tell us what the government has committed to doing and what laws and rights we should enjoy. Policies may make it easier or more difficult to practise healthy behaviour and enjoy SRH. We can learn about and advocate good policies so that they are promoted and implemented. We can advocate changing harmful policies.

The box in the left-hand column shows what needs to happen to improve SRH and prevent and cope with HIV. Each of the components interacts with the others, with young people in the centre as active participants.

If we bring together these four components through people, organisations and communication, we can create the kind of community that allows young people to grow up happy, healthy and safe.

What is a community?

Before we think about community mobilisation, we need to define what we mean by a community. A community is a group of people who feel that they have something in common. For example, a community might be people who live in the same village; who work together; or who share interests. People usually belong to more than one community at the same time. For example, a health worker may identify himself or herself as part of the local community where he or she lives, and part of the wider 'health community' in the region, and may belong to a 'religious community'.

New communities form when people find themselves in new circumstances. For example, people living with HIV might begin to see themselves as a community, as they identify shared problems, needs and challenges.

Understanding communities involves understanding how people identify themselves, not how others identify them, and how the different sectors of the community overlap and interrelate.

We work with the community to identify different groups of young people and others, and to identify their roles and what their influences may be on the sexual and reproductive health of young people.

We can help groups to develop into communitybased organisations (CBOs) who can form partnerships with others and access resources to change things.

Activity: Run-around game

→ What is it and why use it?

People run around and then join groups with certain characteristics called by the facilitator and then by participants. The activity helps us to identify different groups or 'communities' in the wider community, how individuals may belong to several communities and how this affects their SRH and needs.

→ How to do it

- 1 Explain that we are a community working together on SRH, but within this community we also belong to other communities.
- 2 Explain that we will run around, and when the facilitator calls out a type of community for example, people of the same sex or age, who are at school or working and so on people should run to join the group that they belong to.
- 3 Once people are in their groups, discuss:
 - ▲ How do we feel about being in these groups?
 - ▲ What impact could belonging to these groups have on our SRH and HIV?
- 4 Invite people to call out other communities that they and others might belong to.



From our workshop in Uganda

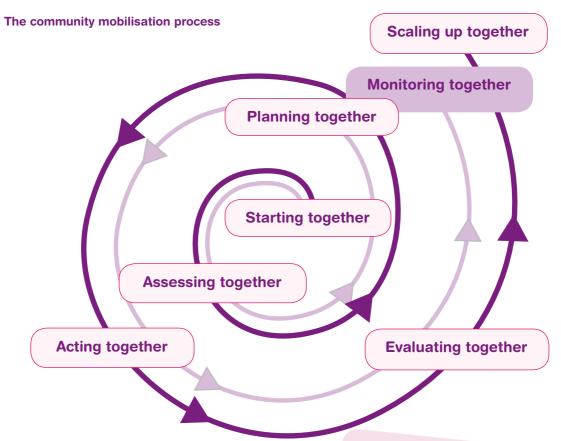
Some examples of types of community are based on sex, age, village, language, religion, occupation, hobbies, parents, married and living with an illness. We belong to different groups within the same community. This has effects on our power and how we relate to others in the wider community. We may not want to identify with certain groups because we feel stigmatised if others don't approve of our behaviour.

Interactive drama helps us to support each other as a group and link with other groups and organisations.

What is community mobilisation and participation?

Community mobilisation is a capacity-building process through which individuals, groups or organisations use participatory activities to learn about their situation and plan, carry out and evaluate activities to improve their lives. The community or people from outside may start the process. The community leads the action in a flexible and co-ordinated way. Individuals and groups meet, communicate and learn new knowledge, skills and attitudes in a continuous and empowering process, which results in positive change.

Community mobilisation tries to make sure that people most affected by HIV and other sexual and reproductive health problems, including those living with HIV, play an active and influential role in shaping an effective response to it. It means that community members take responsibility for addressing these problems themselves, with the support of others where necessary. Although community mobilisation may involve external support or resources at some point, this is not always necessary. Communities make decisions together and take responsibility for the outcomes of their actions together.



Why involve the community in improving SRH with young people?

We need to engage the whole community in identifying and addressing the influences on sexual and reproductive health because different groups have varying levels of power, views and influence on the situation. We need to work with different age and gender groups so that they can also understand their own SRH issues, their role on the well-being of young people and what they would like to change. The groups can then meet to share their ideas, find common ground and develop group and community plans.

Community mobilisation helps us to achieve our goals but it also has benefits that are greater than this. If a donor, government or community asks, 'What are the benefits of community mobilisation?' we can offer some of the reasons in the table on the next page.



An example from Zambia, Malawi and Zimbabwe

Young, Happy, Healthy and Safe (YHHS), YOCIC and FPAM mobilised communities to identify SRH problems and their causes and agree to activities to address them. They found that girls have the highest prevalence of HIV. Some of the causes were early marriage, sex for money or goods, sexual abuse, some cultural and gender teaching and lack of knowledge and access to services. It was essential to work with carers, traditional counsellors, teachers, health workers, older men and women, the police and the leaders. Without their engagement, the girls at risk, however assertive they were, could not change the whole environment.

Participation as a strategy to achieve a goal

- ▲ Helps us identify entry points into the community
- ▲ Enables us to explain the benefits of our work to the community
- ▲ Allows for a respectful and inclusive approach to SRH
- ▲ Builds trust and better communication
- ▲ Identifies with the community and involves them in identifying the problems and their causes and the barriers to solving them together
- ▲ Identify the various stakeholders and resources in the community
- ▲ Identify and reach the most vulnerable people and areas
- ▲ Identify beliefs and practices and how they may affect health with community members
- ▲ Designing strategies for more appropriate, effective and focused work
- ▲ Communities and groups who work well together have lower HIV rates and higher levels of condom use
- ▲ Data collection to improve planning, monitoring and evaluation
- ▲ Mobilises resources from inside and outside the community
- ▲ Increases demand and access to good services if community members demand this and contribute to services and activities
- ▲ Allows for greater community ownership, involvement and sustainability

Participation as a benefit in its own right

- ▲ It is everyone's human right to be involved in decisions about their lives and to be healthy
- ▲ Able to influence change in unhelpful policies, the introduction of new policies and the implementation of good existing policies
- ▲ A strong civil society has an important role to play in a country's development, alongside government and the private sector. When the three work cooperatively towards a development goal, this is called 'good governance'
- ▲ Leads to the empowerment of young people and women and the fairer distribution of knowledge and resources, e.g. young people are more able to control their sexual lives
- ▲ Communities gain new skills, knowledge, leadership and resources, which they use to address other problems
- ▲ Communities and groups develop more trust and cooperation to work well together to improve their lives. This can lead to effective collective action and changes in harmful norms and practices
- ▲ Community capacity and systems strengthened so that they are better able to address all causes of vulnerability
- ▲ Communities are able to collaborate and co-ordinate activities with different organisations to bring about change

Participatory learning and action (PLA)

PLA is a way to enable people in a community to participate together in learning and then act together on that learning. PLA is a family of approaches, tools, attitudes and behaviours to enable and empower people to present, share, analyse and enhance their knowledge and to plan, act, monitor, evaluate and scale up community action.

The principles of PLA are:

- ▲ participation and the valuing of local knowledge and experience
- ▲ empowerment
- ▲ group analysis and planning
- using interactive tools using local cheap materials, such as leaves and stones and chalk, rather than flipchart paper and markers
- ▲ actively involving people across a community – especially unheard voices and those most vulnerable
- ▲ interacting with people in a good way being respectful, non-judgemental, and being able to challenge ideas in a non-threatening way.

Anyone can use PLA. The tools are flexible and adaptable and we can use them at every stage of community mobilisation (see diagram on page 87).

Different types of tools

There are many types of tools that we can use for different purposes. All the tools involve group activities followed by discussion. They include making diagrams, drawings and cartoons, acting role-plays and drama and learning from them in interactive ways, games and sharing experiences. We can use the tools for any step in the community mobilisation process. See Resources, page 186, for toolkits on PLA.

How to select methods

There are many drama activities in this guide that we can use to explore problems and find solutions. When choosing an activity, we need to ask ourselves:

- ▲ Will it use participants' experience and help them participate actively?
- ▲ Is the method clear enough so that participants will feel comfortable doing it?
- ▲ Do the activities build skills and keep the sessions interesting?
- ▲ Does the method suit the participants, space and resources, and objectives?

Choose an activity that suits the objective and topic of the session; for example, are you sharing experiences, thinking about a problem more deeply, making a play? Is the topic sensitive or likely to cause argument?

Take into account the type of participants (age, gender, experience, education etc.) and the number of participants – for large numbers, use small groups.

Choose an activity that suits the amount of time and time in the day available. Check the method fits in with other activities that we use in our sessions

Using tools in a sequence

When we are planning PLA we need to develop a sequence of questions and tools, which will help us to identify problems, understand the causes and consequences of them, find solutions and plan and evaluate our actions.

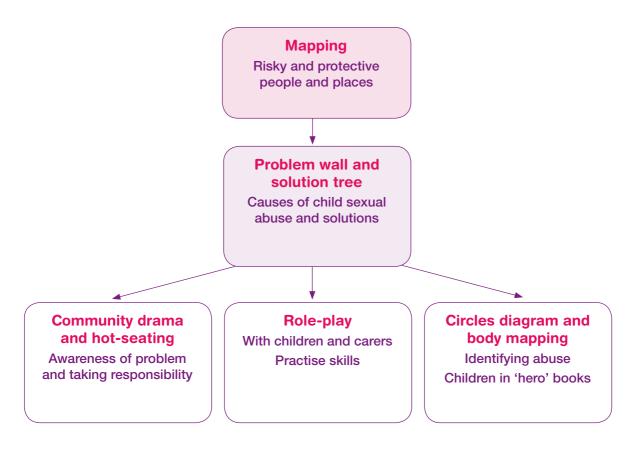
We can use PLA tools one after the other to build up an empowering sequence. We select a tool that builds upon the learning of the previous one. Stop-start drama is an example of a sequence using the same tool, role-play followed by discussion, in a rotation to answer several questions. A few participants act out a short scene to show the problem, and then the

7 Mobilising the community

facilitator shouts, 'Stop' and asks the group to discuss the problem; for example, 'Is the problem real? Why is there a problem? How can we solve it?' Ideas emerging from the discussion are then turned into new scenes performed by participants. Each new role-play, after completion, is stopped for further discussion.

The responsibilities of the whole PLA team are to:

- ▲ plan the PLA process
- ▲ facilitate the PLA process
- ▲ promote and ensure participation of all people, especially those most vulnerable
- ▲ mobilise groups
- ▲ build trust
- ▲ mediate conflict
- ▲ share information.



Example of a sequence on child abuse from Zimbabwe

Getting started in the community

If we are starting activities in a community for the first time, we will need to get permission from the key stakeholders by explaining what we hope to do and how we would like to go about it and seeking their support.

We may already be working in a community on SRH and want to start using some of the activities in this toolkit. We need to meet them to share the new approach and get their ideas on the best way to organise things.

If SRH is a new topic for our work, we need to take time to ensure that the key stakeholders understand and support our work. This is because it involves sensitive issues that people may have strong feelings and ideas about.

→ Step 1 Introducing ourselves to the community

Our first step is to introduce ourselves, explain our purpose and approach and get their permission and support to start. We need to build good relationships with the leaders and key people in the community who can support young people's SRH, as well as young people themselves, and gain everyone's engagement in the process.

It is important to be open and clear about what our purpose is, what we can offer and how we would like to work with the community.

→ Step 2 Learning about the community and SRH

We then need to work with the stakeholders and community members to get a broad understanding of the characteristics of the community, who lives there, what they do and their strengths and challenges.

We can start to focus more on SRH and young people. We identify different groups of young

people and who is most vulnerable to SRH problems. We identify community concerns and what changes they would like to see. We ask: 'What are the risk and protective factors and who has positive and negative influences on SRH well-being?'

We can start to use our interactive drama activities in this first stage and continue as we get more deeply into the process.

→ Step 3 Deciding what issues to mobilise for

At this point, young people and key adults discuss the issues that they would like to mobilise for and try to reach an agreement. If we can find some common issues to start with, we can address differences and conflicts in separate groups as we go on and work towards resolving them.

For example, everyone may agree that they want to reduce early pregnancies and HIV infection in young people, but they may have very different ideas about how to achieve this. We can then work with different groups in more depth and facilitate safe sharing of ideas and negotiation to try to reach agreement.

→ Step 4 Deciding who will engage in the mobilisation process

Young people need to be at the centre of the mobilisation process, including those who are most vulnerable; for example, young people living with HIV or young single mothers.

Community leaders and people who support young people or could support them better or put them at risk also need to engage in the process. For example, it is good to involve boys and girls, young men and women and older men and women carers. Health workers, teachers and livelihood workers are also important. It is helpful to set up a steering committee to coordinate, support and guide the process.



An example from rural Zambia

Young, Happy, Healthy and Safe (YHHS) first meet with the chief and headmen of the community to introduce the project and explain the approach. The leaders then arrange meetings with other key stakeholders, young people of different ages and gender, and parents and traditional counsellors. YHHS introduces the project with each group and uses some participatory activities to increase understanding of young people's SRH problems and needs and encourage key people to engage in a process to help them grow up happy, healthy and safe. They explore how different groups and organisations can contribute to achieving this goal. They explain that the first step is to work together to better understand the SRH situation for different groups in the community and then look for ways to improve things.

YHHS and the community set up a steering committee for the project, which includes leaders, service providers, teachers, other sectors and young people. The committee meets every month to review progress and challenges and find solutions to problems. The group members ensure that there is coordination between different groups and supporters, monitor activities and liaise with YHHS.

Young people and others come to the meetings to explain what they have been doing and how it is helping them, and to raise any problems or requests. Peer educators meet regularly with different groups of young people to facilitate participatory learning activities, including drama.

→ Step 5 Planning the practical steps for the process

We need to think about:

- ▲ the identity of the different groups and any protection issues, for example, how children will get home safely
- ▲ a safe, sheltered and private venue
- a convenient time and duration to meet for each group in terms of season, day and time and frequency of meetings
- how we can ensure that vulnerable people can attend the meetings and have a voice; for example, perhaps the community can provide child care for single mums and find some refreshments when there is hunger.

→ Step 6 Agreeing on key questions and tools for the process

We need to agree with our community group on the key questions and tools to help us explore the situation and find solutions.

Key questions

- ▲ Where are we now?
- ▲ What is our problem situation? How does it affect us and others?
- ▲ What are the immediate and root causes of the problem?
- ▲ What have we done and what are we doing now to solve the problem?
- ▲ What are our achievements and challenges?
- ▲ Where do we want to be?
- ▲ What do we want the situation to be like when the problem is solved?
- ▲ How will we get there?
- ▲ What do we need to do to improve the situation?
- ▲ Which are the best solutions?
- ▲ What barriers might get in the way of solving the problem?
- ▲ What do we have to do to make them work?
- ▲ Who will do what with whom, when, where, how, and with what resources?

In the next section, we describe some PLA tools that we can use to help us work through the steps listed above. For more tools, see *Tools Together Now* in Resources (page 186).

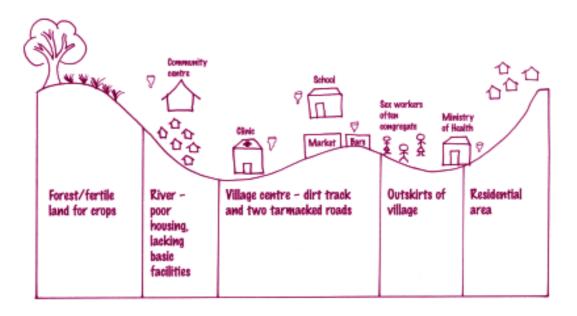
Community activity 1: Transect walk

→ What is it and why use it?

This is a walk through a community or location with community members to identify different people, places, activities and things related to SRH. Transect walks are useful to find out where people are found, meet or do various activities, and how they interact with one another; resources and problem spots; and places where community meetings and activities could take place. The walk also allows us to meet and talk with the community and start to develop a rapport.

→ How to do it

- 1 Explain the purpose of the walk to participants and agree on key issues to be discussed and areas identified.
- 2 Divide the location into sections and agree which small groups will walk in each section. Plan routes, but be flexible.
- 3 Agree on a time and place to meet after the walk and share learning.
- 4 If useful, use the information to draw a community map.
- **5** Do the walk at different times of the day and different seasons.
- 6 Include periods of observation during the walk; for example, having a drink in a bar or watching a school football match.
- 7 Ask permission if you use cameras.



Community activity 2: Mapping

→ What is it and why use it?

Mapping is a very useful tool for a number of purposes. It is a good tool to start with because people enjoy it and it helps them to see their community more clearly by explaining its characteristics to each other through the maps. Maps can show boundaries, resources, who lives where, what activities take place and what the protective and risk factors are.

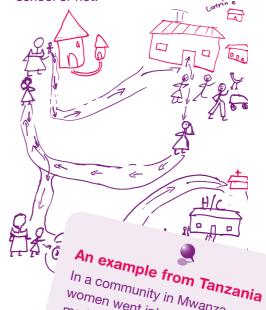
→ How to do it

- 1 We can draw different types of maps to show and tell different aspects of community life. Some examples of mapping for different purposes:
 - ▲ Mark the places that help people like us to enjoy good SRH. This could include health services, school, home, traditional counsellors, incomegenerating activities and so on.
 - ▲ Mark the places that are risky for SRH for people like us. This could include community water points, forest, home, traditional ceremonies, choir and so on.
 - ▲ Mark places where different types of young people meet and what they do there. This could include school, work places, leisure places, church, farms and so on.

Each of these maps can help us to understand more about which stakeholders to work with, where to meet different groups and some of the factors which protect young people and put them at risk. We can then use our interactive drama activities to explore them further.

2 Ask different groups to make their own maps – for example, a boys' map of risky places for sex might look different from a girls' map or adults' maps. Then share the

- maps, so people get to understand each other better and find common concerns and solutions.
- 3 We can make maps on the ground, using sticks, stones, flowers, beans and so on, to mark different aspects. We could also draw on concrete using chalk or on sand using a stick. This allows the diagram to be changed and expand as people discuss it, and allows everyone to participate whether they have been to school or not.



In a community in Mwanza, men and women went into separate groups and made maps to show all the places in the community where they felt at risk of unsafe sex. They presented their maps to each other. The men's map marked the bar and the guest house as risky, while the women marked almost everywhere - the well, the forest, the lake, their homes and the market. The men were shocked at the women's maps and the leaders made a plan to reduce the risks to women, including new laws aimed at protecting women.

Community activity 3: Social mapping

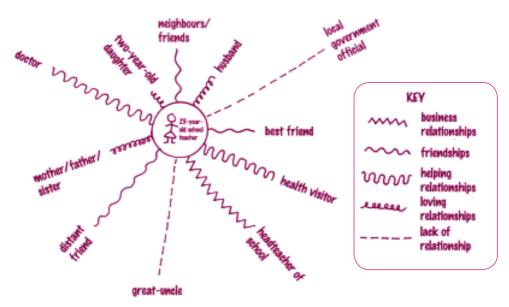
→ What is it and why use it?

We brainstorm to identify all the types or 'communities' of children and young people living in the site. We explore their vulnerabilities to SRH problems and where they are found. We meet with the different groups to learn more from them and agree on which groups we will meet and work with.

This helps us to: reach the most vulnerable and those who can support others; understand factors influencing sexual health in different groups; and design activities to address risk factors and strengthen protective factors.

→ How to do it

- 1 In age and single sex groups, ask people to brainstorm all the different types of young people of their age and sex, including their own group. For example, girls aged 10-14 years might name girls in and out of school, orphans, girls from poor houses, girls living with their parents or not and so on.
- 2 Discuss how belonging to each group might affect SRH. What would put them at risk and what would protect them?
- 3 Rank the groups from least to most at risk of SRH problems and in need of support.
- 4 Draw on the map where each of these groups might be found.
- 5 Each person takes one priority group and becomes a character from the group. Who are the people your character might meet for different reasons? Draw the character in the middle and make lines to show all the people they might meet with. See 'Character networks' on page 143.
- 6 Make a plan to meet and talk with the different groups, those most vulnerable and those who might support others.



Community activity 4: Community sculptures

→ What is it and why use it?

Participants build sculptures of the community and discuss them to learn more about how they see themselves as a community.

We can use these image activities to show something about the community and the people who live there. They could show good and bad points, what people are proud of and what they want to change, or 'burning issues' that people get excited about. They help us to understand situations more clearly and show what's important from different points of view.

They also further develop our body language skills. We can use them as a drama warm-up and or to link scenes in a drama. See Chapter 9.

→ How to do it

Variation 1: Team community sculpture

- 1 Explain that the aim is to build a sculpture of the community and learn from it.
- 2 Participants start from any point in their own idea of their community and build their sculpture. The sculpture forms the basis for a discussion of the community as they build the picture.
- 3 When everyone has finished, review all parts of the sculpture. If anyone wants to step out to look at the sculpture, replace the person with someone else, to allow him or her to see. You may want to map the sculpture on a large wall chart. Once the sculpture is complete, ask the following questions:
 - ▲ What makes this community a community? How do we show that?

- ▲ Who are the leaders of this community? Who are the powerful people in this community?
- ▲ What are the resources of this community? Its responsibilities?
- ▲ What impressions would an outsider receive?
- ▲ What characters, occupations and so on are shown?
- ▲ What emotions and situations?
- ▲ What or who is absent from the image? (This could be, for example, women, the poor, disabled people.)
- 4 Answer each of these questions through sculpting of the answer or adding a new dimension to the existing sculpture.
- 5 Does our sculpture tell us anything about SRH in our community?

Variation 2: Looking more closely

Divide the group into smaller groups of four or seven players. Each group prepares a different image based on aspects of the community brought up in variation 1; for example, crime, family life for the poor or the wealthy, the difficulties facing young women, a celebration. Present this to the others.

The images might show something about gender roles. When it was used in a stigma workshop in Zambia, the men showed the women as cooks, sex workers and housemaids, while the women portrayed themselves as farmers, truck drivers and nurses.

Questions for discussion:

- ▲ What can you see in the image?
- ▲ What issues does it raise?



Variation 3: Community snapshots

- 1 Divide into groups of four or five people. Explain the task.
- **2** Each person takes a turn at being the group 'photographer', who uses the bodies of other group members to build a sculpture showing the community from his or her point of view. The photographer arranges the bodies as he or she wants and then asks everyone to hold it for a moment while the picture is taken. Each person has three minute to build his or her picture.
- 3 Start with the next snapshot as soon as one has been made.

 This exercise moves experience out from the self into the bodies of the group. People may not completely understand a picture, but they are drawn in because they are part of it. The process of building four or five pictures makes public a shared awareness of individual roles in the community.
- **4** Discuss how someone should look, or what the picture is of, to focus the group on the structure and substance of their community life.
- 5 Once all the pictures have been created, say: 'To fix these images, let's run all the pictures in each group one after each other. Photographers, when your picture is shown, you have the chance to make any final adjustments to sharpen up the focus. Ready in each group? Picture one. Freeze! Photographers, what do you want to adjust?' (Allow time for each photographer to make changes and step out of the frame). 'Picture two. Freeze! Any adjustments to be made?'
- **6** After the pictures have been shown, give time for the groups to discuss the elements of the community they have portrayed.

Ask: 'What do these sculptures tell us about SRH in our community?'

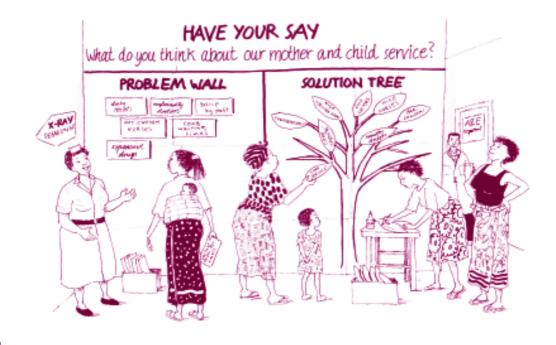
Community activity 5: Problem wall and solution tree

→ What is it and why use it?

People write or draw their problems in chalk as bricks on a wall or blackboard, or they can write or draw on pieces of paper and stick them on a wall or along the floor. They cluster the problems and look for solutions. This helps people to identify and discuss problems, group them and find possible solutions. A big group can do this over a period of time in a public place.

→ How to do it

- 1 Agree on a topic for example, the question, 'Why do you think there has been an increase in cases of child sexual abuse in our community?'
- 2 Locate a venue with a large blackboard, wall or floor. Use chalk to draw bricks on one section of the surface and a tree with leaves on the other. Alternatively cover the surface with paper, cut out lots of pieces of paper shaped like bricks and leaves and put masking tape or Sticky-stuff by the wall.
- 3 Invite people to think about the topic and to write or draw problems on separate bricks on the problem wall or to stick them up with tape.
- 4 Invite people to group similar problems together and discuss them.
- 5 Now ask people to think of solutions to the problem bricks. Draw or write them on the leaves on the solution tree.
- 6 Group any similar solutions.
- **7** Arrange to meet the community and discuss which solutions would be easy to do now, soon and later. Agree on an action plan.



Community activity 6: Community time-line

→ What is it and why use it?

This tool involves creating a 'community time-line' by acting out two or three 'living images' or still scenes showing life for young people in different generations. If people find it easier, they could act role-plays or draw pictures to show the differences or bring the image to life.

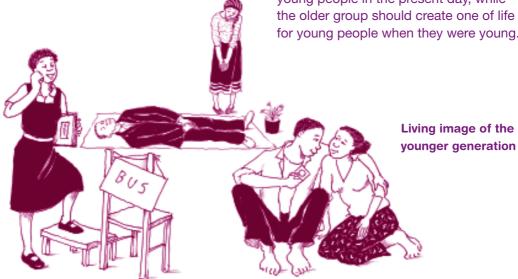
We can use this to identify what has changed and how this has affected sexual and gender values and practices over time and the results of this, in order to influence the process of change in a positive way.

→ How to do it

Before the session, think of a list of questions about social and sexual life in the community that will highlight how values and practices have changed over time. Examples might include:

- ▲ What types of work do people do?
- ▲ What kinds of festivals and holidays do people celebrate?
- ▲ How many children does a typical family have?

- ▲ At what age do people reach puberty?
- ▲ How old are women and men when they first have sex?
- ▲ How do young people learn about sex?
- ▲ How old are women and men when they marry?
- ▲ Who makes decisions about marriage?
- ▲ What makes for a good marriage?
- ▲ What problems happen between married people?
- ▲ How common is divorce? What forms of sexual violence are common?
- 1 Explain the purpose of the tool to participants.
- 2 Divide the participants into two groups one to represent younger people, and one to represent older people. If helpful, they could form three groups to represent grandparents, parents and young people.
- 3 Ask each group to create a living image of life for young people according to the age group that they are representing. For example, the young people's group should create a still scene of life for young people in the present day, while the older group should create one of life for young people when they were young.



- 4 Read out the your list of questions. Encourage the groups to discuss the questions and to show some of their answers in their still scene.
- 5 Bring all of the participants back together. Starting with the older group, ask each group to present their still scene. Then show both scenes to form a 'community time-line'.
- 6 Encourage the participants to discuss the 'community time-line':
 - ▲ What has changed least or most between the different generations? Which of those changes are positive and negative?
 - ▲ How do those changes affect the sexual lives of young people?
 - ▲ How can younger and older people work together better to solve problems facing the community, such as HIV and early pregnancy?

7 Note any action points or decisions made by the groups and identify next steps.

→ Facilitator's notes

- ▲ Be prepared for this tool to reveal differences of opinion about changes that have, or have not, taken place through the generations. Welcome disagreements, as they can help to clarify thoughts.
- ▲ Challenge overly simple views, such as that the past was 'all good' and the present is 'all bad'. Encourage the participants to think about things that have stayed the same between the generations, as well as things that have changed.
- ▲ Remind the participants not only to state their views, but to explain them. Keep asking them, 'Why do you think that?'

Community activity 7: Image of the hour

→ What is it and why use it?

This tool explores human activity according to the time of day. It helps to identify different activities that people engage in at different hours of the day. We can portray differences in the division of labour for different people according to time and explore the result of these differences for family well-being, gender and SRH.

→ How to do it

- Explain that you will shout a time of day, beginning in the early morning. Individuals then make images or mimes to show what activity they would probably be doing at that time of day.
- 2 Encourage participants to observe the images of others while remaining in their image. After everyone has observed the

images of at least two other participants, discuss:

- ▲ What have you observed about the similarities and differences in activity between different people?
- ▲ Which is the most common activity?
- ▲ Why are there differences?
- 3 Call out different times through the day and ask participants to freeze in the images. Ask the questions listed above.
- 4 Summarise by asking:
 - ▲ What are the differences in terms of the activities by men and women, boys and girls? Why do these happen?
 - ▲ How do these differences affect different groups?
- 5 Discuss the issues and relate them to SRH.

Community activity 8: Who has responsibility for young people's SRH

→ What is it and why use it?

This is a 'hot-seating' activity that aims to identify who has some control over, and responsibility for, a problem. People often blame the person who suffers most from the problem, rather than recognise how the actions of many people in the community and larger political and economic forces play a role in enabling or hindering young people's sexual and reproductive health. It helps us all to take more responsibility for our actions and to plan action to create a more enabling environment.

→ How to do it

- 1 Develop a drama with a group of young people showing the lead-up to a sexual situation with a bad result. Use 'Character networks' on page 143 to identify a number of characters who have some influence over the reasons why this situation happened. The drama should show clearly a number of characters, who have some responsibility for the situation.
- 2 Perform the drama to the gathered community groups.
- 3 Tell the characters to stay in the front in role. They should keep quiet and listen to the audience first and then answer any questions in role.

Ask the audience:

- ▲ Which characters were acting responsibly in this story?
- ▲ Who had some control over the situation?
- Which different characters had some responsibility for the situation overall? Why?

Don't say anything yourself until the audience have mentioned all the characters. Add any that you think also have some responsibility.

- 4 Invite the audience to 'hot-seat' the characters. This means to ask them questions about what they felt and thought during the drama as their character and to explain why they behaved as they did.
- 5 Explain that often, when we have done something that went wrong, we make excuses and try to find someone else to blame. We don't want to admit our responsibility for the problem and try to do something about it. When we do this, we are not in control of the situation.
- 6 Ask each character in the drama to stay in role and one by one tell the audience the following four points:

Four-point plan

I **acknowledge** what part my actions (mention actions) played in the problem.

I **accept** my part of the responsibility (mention your part) for it.

I will **act** in the following ways (mention ways) to make things turn out as well as possible for everyone.

I will **think about how** I can avoid doing it again and change my behaviour in the following ways (mention ways).

7 Ask:

- ▲ What do you think about this four-point plan?
- ▲ How can we use it in our own lives?
- ▲ How can we use it as a community to improve young people's SRH?
- 8 The group could replay the drama to show everyone behaving responsibly and things turning out well.
- **9** Ask: 'What did we learn and how will we use it?'

10 Make a chart to show what different people in the community can do to support young people and how they can strengthen what they do.

→ Facilitator's notes

If you see that participants are putting all the responsibility on certain characters and not acknowledging the responsibilities of others, ask them to think about the roles that each character played one by one and challenge them to see responsibility more broadly.

Try to create a drama which has a range of characters, from young people, older people in the community, service providers and policy-makers. This helps people to see the importance of action at individual and community levels, but also supported by an enabling environment.



An example from Zambia

Martina is a 14-year-old schoolgirl in Grade 9. She comes from a poor family. Martina has a boyfriend called Fred, who helps her with her homework because she has too many domestic chores to do. Fred and Martina want to have sex and Fred manages to obtain some condoms for protection. Martina is also going out with an older man, Simon, who gives her money to buy food for her mother and essentials for school.

One day, the teacher calls Martina to his room and asks her if she will be his special girl because he finds her so beautiful. Martina's mother is pleased with this attention, hoping that the teacher will marry her daughter and help the family. She encourages Martina. Martina agrees, and asks the teacher to use condoms, but he refuses. He promises her high grades in her schoolwork.

A teacher called Martha comes into the teacher's room and sees what is going on. She wonders what to do about it, but decides she shouldn't offend him because she is his junior. Martina's mother's neighbour sees what is going on and noisily tells Martina's mother to

stop her daughter going around with men. Martina's mother shouts back and the neighbour gives up and goes home.

Another teacher, on a spot inspection, asks Fred to show what he has in his bag. She finds condoms and immediately suspends him for bad behaviour. Martha sees what is happening and doesn't really agree with it, but keeps quiet because the other teacher is so aggressive.

After some time, Martina starts vomiting and her mother finds out she is pregnant.

What did we learn?

We learned that we often blame young people, especially young girls, when they become pregnant or get STIs or HIV. We say that they are immoral and deserve the consequences. We stigmatise and punish them. And yet, many of us are contributing to the problem, either directly, by having unprotected sex with young people, or indirectly by refusing to give them the information, services and skills they need to stay safe. If everyone concerned fulfilled their responsibilities, many more young people would grow up happy, healthy and safe.

Community activity 9: Sources of advice and information

→ What is it and why use it?

This activity helps us to understand where young people get information and advice about growing up and sexuality from, what messages they receive and which are the best sources.

→ How to do it

- Divide into single sex groups. Agree on a situation that a young person might want more information and advice on. For example, a boy or girl might be trying to abstain from sex or to find out more about condoms.
- 2 Think of all the people in the community who might give this young person advice or information about this situation; for example, parents, friends, elders, priests, teachers, radio, video, etc.



- **3** Ask for volunteers to play the roles of each of these people, getting into the character and thinking about what they would say.
- 4 Role-play the situation of the young person going around seeking advice from each of these characters.
- **5** Ask the rest of the group to play themselves, listening to the advice from different people.
- 6 At the end, ask the people listening to the advice how they felt.
- **7** Ask people to line up the advisors in role in order of the best to the worst.
- 8 Ask:
 - ▲ How did you decide which advice was good to follow amongst all these different ideas?
 - ▲ What different things did you think about when you were deciding?
 - ▲ How free are we to decide on which advice we take?
 - ▲ What would improve the help that we get when we are growing up?

Chapter 8WORKING WITH GROUPS

In Chapter 7 we looked at the benefits of mobilising communities to improve young people's sexual and reproductive health and using participatory learning and action (PLA) tools, including drama to begin learning about the situation and identifying desired changes. We described how to work with key groups of young people and those who influence them, as well as important people such as leaders and service providers.

In this chapter, we describe more PLA and drama tools for continuing our work with our key groups to together understand the situation in more detail, set goals for change, find solutions and make action plans. We have divided the tools in this chapter into three sections

- 1 Tools that help us to understand our behaviour more deeply
- 2 Tools that help us to vision how we want things to be
- 3 Tools that help us to find solutions and build skills

Laws and policies Local, national and international laws, Laws and policies policies and procedures The community Services and supplies **Population** Services and supplies characteristics, socio-Quality and accessibility The community economic situation, of prevention, care, social norms, values support, treatment and traditions, social and impact mitigation relationships services - formal/informal The individual The individual (or group of similar individuals) Knowledge, attitudes, behaviours, skills

A model for empowering people and creating safer environments

Introduction

The objectives of working with groups are:

- ▲ to empower group members through building their skills to analyse their situation, make decisions, solve problems and identify and demand the support they need to grow up happy, healthy and safe in their sexual lives
- ▲ to build peer pressure for positive values and behaviour such as caring and equality; open communication and responsibility
- ▲ to take group action; for example, to make services more friendly and helpful to young people, to change harmful cultural and gender norms and make the community a safer place
- ▲ to develop into a community-based organisation
- ▲ to link up with other groups and organisations and form strong partnerships to address causes of problems and raise resources
- ▲ to advocate for the formulation and implementation of good policies.

In this chapter, we use the same framework and questions that we used in Chapter 7, page 84.

The approach and activities in this chapter work best when groups meet regularly, perhaps weekly or every two weeks. This is because the activities are in a sequence where each new activity builds on the one before, increasing trust, skills and the depth of the discussion. Try to find a private place and meet at times convenient to the groups.

It is often helpful to separate boys and girls and age groups to do an activity and then bring them together to share key points from their discussion. This allows people the safety to talk openly and then control what they share with the opposite sex or different age group. 'Show and tell' using images, role-plays or diagrams is interesting and easier than a verbal presentation. Working with groups of adults – for example, carers and young people can make a big impact because it builds a supportive environment and empowers carers.

Making a session plan

A clear plan for the session allows us to facilitate an enjoyable and productive meeting with a motivated group. We need to involve our groups on agreeing the topic and objectives for the session.

How do we involve groups in drama?

We can involve our groups in every stage of the process. For example, group members can:

- ▲ create role-plays, images and stories from their own reality to describe problems, causes and consequences; and show a good future and strategies for reaching it
- ▲ use their own creativity in expressing ideas and feelings in different ways
- ▲ learn through interactions during the drama or discussion and activities after the drama
- ▲ question the characters to understand them better; this is called 'hot-seating'
- ▲ replay the drama to change what happens and build skills
- ▲ create a story or drama for performance about a situation faced by children to show and tell adults who are in a position to do something about it. For example, a group might show a drama about child sexual abuse adults are not recognising the seriousness of the problem and taking responsibility to address it. We could use the drama to advocate for change in the legal bodies in the district. See Chapter 9 on making a play.

Planning a session on SRH using a drama activity

Question	Example of answers	
What topic will the session address?	The groups decided in the previous meeting that they wanted to look in more depth at the reasons why girls and boys start to have sex before 16 years, the age of consent.	
2. Which groups are we going to work with?	Boys and girls aged 10-14 years. Boys and girls aged 15-19 years. Parents and carers.	
3. What are our objectives for the session?	To all have a deeper understanding of the various reasons why boys and girls start to have sex before the age of 16 years. To rank the reasons in order of importance.	
4. When shall we meet?	In the early evening when people are back from work. We might have to meet the groups at different times for the first part of the activity and then bring them together to share at another session.	
5. Where shall we meet?	In the school so that groups can be in separate rooms and then come together.	
6. Which activity shall we use?	Role-plays to show situations leading up to boys and girls having early sex. If older people do not want to do role-plays, they can use the 'But why?' activity on page 110.	
7. How will the group be involved in the activity?	The boys and girls act role-plays in small single sex groups. The carers do role-plays or use the 'But why?' activity in single sex groups.	
8. How will we draw out the learning from the activity?	The boys and girls in their groups list all the reasons for early sex from their role-plays. They rank them in order of importance by voting. The carers rank the reasons from their 'But why?' activity by voting. All the groups meet and share their reasons and ranking. They look for common ideas and differences and ask for more information on the reasons. They present the role-plays and diagrams if this is helpful. They agree on which reasons for early sex they want to focus on at the next meeting.	
9. What do we think the next steps might be after the activity?	Arrange to meet again to identify and assess strategies to address the important causes. Discuss the issue with friends, family and stakeholders before the next meeting.	

UNDERSTANDING OUR BEHAVIOUR

In this section we describe activities that can answer the questions in the box. We learn more about why we behave how we do – what the influences on our lives at different levels are – and how we relate to each other. See also Chapter 6.

Where are we now?
What is our problem situation? How does it affect ourselves and others?

What are the immediate and root causes of the problem?



How we behave activities

Behaviour activity 1: Anonymous participatory survey

→ What is it and why use it?

Participants put a tick or cross on slips of paper anonymously in answer to questions about their sexual lives. The slips are collected and answers counted and recorded on a chart. At the end, the results are discussed and participants learn together about their feelings and behaviour around sex and its possible impact. Participants can be more honest about their behaviour because the survey is anonymous. The participants do the survey as a group and immediately see the group answers. There is solidarity and group motivation to maintain or adopt positive behaviours.

→ Materials

Enough slips of paper for the number of people doing the survey multiplied by the number of questions. Enough pens of the same colour. (You could use different-coloured paper or pens for males and females if you have enough people of each sex to keep results anonymous.) A container or bag to collect the slips.

- 1 Explain why we are doing the survey and how to ensure confidentiality. Participants should:
 - ▲ sit apart from each other so no one can see what another is writing
 - ▲ use the same colour pen
 - ▲ write something for each answer.
- **2** Give each participant as many slips of paper as there are questions. Participants answer each question on a new slip of paper.
- **3** Ask the first question. Participants should write:
 - ✓ if their answer is 'Yes'
 - X if their answer is 'No'
 - a -'number' if necessary
 - 'o' if they do not wish to answer the question or it is not applicable.

- Assure participants that you will mix up and throw the papers away after each question and no one will know who gave which answer.
- 4 When participants have finished answering the question, ask them to fold the paper and collect them in a basket (separate baskets, if counting males and females separately) and shake it.
- 5 Count and write up the results on a flipchart. Do not present at this stage.
- 6 Put the used papers in a safe place for disposal.
- 7 Continue asking the questions, counting and writing up the results in this way until you have finished.
- 8 Discuss the survey results with the group.

The process:

- ▲ How did you feel answering the questions?
- ▲ What did you learn from the process?
- ▲ How do we normally reveal information about our own experiences?

The results

- ▲ What have we learned from our survey?
- ▲ What are we pleased about?
- ▲ What are we concerned about?
- **9** Present each question one by one and discuss the results.
- **10** Summarise using these questions:
 - ▲ What things are we doing that help us to stay healthy and protect others?
 - What things are we doing that put ourselves and others at risk of HIV and SRH problems?
 - ▲ What action do we need to take to improve our sexual and reproductive well-being and reduce risks to ourselves and others?
- 11 Dispose of the papers.

→ Facilitator's tips

1 It is essential that the survey is completely anonymous and confidential so that participants are not put at risk of harassment or gossip. If confidentiality is not kept, participants will not be willing to give honest answers and the survey will be unethical.

To ensure confidentiality:

- ▲ Ask participants to sit apart from each other so no one can see what another person is writing.
- Never ask who gave a certain answer, even if it is unusual or not what was asked.
- ▲ Give everyone the same colour pens.
- Make sure that every question requires everyone to write something. If the question is not relevant or the person does not wish to answer it, they can write 'o'.
- ▲ If participants agree, you can ask the males to sit on one side and the females on the other, or use different-coloured papers or pens for males and females. You can then count and give the results from the male and females separately. This can help both to see more clearly their risks and the changes that they need to make to be safe. The results are still anonymous, unless you have a very small number of one sex.
- 2 You need at least two people to run this exercise; otherwise, it can become too slow. One person can ask the questions, one collects the slips after each question and records the answers on a flipchart. Make sure you don't muddle up the answer slips!

Sample questions

- 1 Can you talk openly about sex to close friends?
- 2 Have you ever had sex?
- 3 How old were you when you first had sex?
- 4 Were you happy to have sex then?
- 5 Last time you had sex, did you use a condom?
- **6** Have you ever had two sexual partners over the same period of time?
- 7 How many people have you had sex with in the last year?
- 8 Have you ever forced someone to have sex against their will?
- 9 Have you ever had sex for money or gifts?
- **10** Have you ever used drugs to make you feel sexy?
- 11 Have you ever had an HIV test and got the results?
- **12** Have you ever had an unwanted pregnancy?

Example from adults in Uganda Question Have you ever had sexual intercourse? Are you married now? Did you marry before the age of 18? Did you have sex before you married? Did you use a condom the first time you had sex? Did you use a condom the first time you had sex? Did you use a condom the first time you had sex? Have you ever had transactional sex, as a seller or a buyer? Have you ever had an HIV test and collected the results? Have you ever masturbated? Have you ever masturbated? Have you ever had more than one sexual partner?	16 6 16 6 9	
Have you ever had an HIV test. Have you ever masturbated? Have you ever had more than one sexual partner? Have you ever had more than one sexual partner? Have you ever had somebody to have sex against their have you ever forced somebody to have sex against their have you ever had somebody to have your marriage? Have you ever had an STI? Have you ever had an unwanted pregnancy or have you have you ever had an unwanted pregnancy intend it? Have you ever had an unwanted pregnancy or have you have you did not intend it? Have you ever had oral sex? Have you ever had sex with someone of the same set.	8 7 9 3	11 12 13 16

Behaviour activity 2: Role-play to show a problem

→ What is it and why use it?

Role-play is a very good technique for showing a problem and how it affects different people. Role-play holds a mirror up to our lives so we can see clearly the effect of situations or behaviours on others, empathise and commit ourselves to taking action.

→ How to do it

- 1 In small, single sex groups, invite people to act out role-plays of a situation leading up to someone like themselves being, for example, at risk of HIV infection. Make the role-plays true to life, not exaggerated or outside the experiences of the group.
- 2 In the big group, show the role-plays and discuss:

Questions

- ▲ What was happening in the role-play?
- ▲ Who was at risk of getting HIV?
- ▲ Why do you think they were at risk?
- ▲ What were the factors that caused the characters to be in the risky situation?
- ▲ What choices did each of them have?

Variation:

Act several short scenes showing points at which either of the characters made a decision leading to risk. Discuss at each decision point why the characters made that decision and what other choices they had.

Example

Millie and Fred are 15 years old. They are in love but they want to keep away from full sex until they are older. One day they walk back from choir with friends who stop to buy some beer. They share the beer and feel very happy. Millie and Fred don't feel like going home and walk down to the lakeside to admire the moon on the water. They put their arms round each other. Later they have sex without a condom because the health centre did not have any.

Replay the story to show how Millie and Fred could have avoided having sex. Ask:

- ▲ What would make it difficult for them to follow this path?
- ▲ What would make it easier?

Behaviour activity 3: But why?

→ What is it and why use it?

We can do the 'But why?' activity as a drawn diagram or a game. It is very useful for learning about the root causes of a problem and how causes are interlinked. We can then look for ways to address the root causes, because that will have a big effect on our all-over SRH well-being.

For example, if poverty is a major reason why girls have high risk sex with older men, income-generating activities for poor girls or families could give them more choices to have happy, healthy and safe sexual relationships. This would protect them from unwanted pregnancy, STIs, HIV and violence.

→ How to do it

- 1 Draw a picture of the problem and put it in the middle of the group. For example, girls have early sex.
- 2 Invite people to call out a reason why. Someone calls out an immediate cause; for example, they feel pressurised. That person sits by the problem picture. The facilitator asks: 'But why do they feel pressurised?' and someone gives an answer and sits next to the first person.



- 3 This continues until people run out of ideas. Then someone says a new immediate cause and repeats the 'But why?' questions.
- **4** Participants discuss which of the causes are most important.
- 5 They can then go on to act role-plays to show more about the most important causes.
- 6 It is important to record the causes and root causes so we can use them for further discussions.
 - 7 People can also draw a 'But why?' diagram with chalk on a wall or blackboard or make it on the ground with local materials.
 - 8 After using the 'But why?' tool, people can look for ways to address the immediate and root causes in order to make it easier for people to adopt safer behaviour.

Behaviour activity 4: Hot-seating

→ What is it and why use it?

In 'hot-seating' we show a role-play, sculpture or scene of a play, then the characters sit in front of the audience and stay in their roles. The participants ask the characters any questions they like in order to help them understand the situation and the characters better. They are trying to understand why the characters behave as they do and empathise with them.

We can use hot-seating to:

- ▲ reduce stigma, judging and making assumptions about people
- ▲ really listen to people so that we understand and empathise rather than judge
- clarify the motivations of the characters in a drama
- understand in more depth the causes and effects of risky behaviours
- prepare for finding and acting out solutions.

→ How to do it

Participants prepare a role-play to show a situation about the problem we are focusing on. They need time to get into role and really think who they are and why they behave as they do. The drama needs to have several characters, who influence the situation.

Example of a scenario

A girl asks her mother for school fees but her mother has no money to give her. She meets her classmate, who is well dressed and has a cellphone. The friend asks her why she is looking sad and wearing old clothes, etc. She suggests introducing her to an older man, who can help. In the final scene the girl has started a sexual relationship with the older man, who is paying her school fees. No-one is using condoms.

- **2** The actors perform the whole role-play. Then they sit at the front and stay in role.
- 3 The facilitator invites the audience to ask any questions they like of the actors, explaining that they are trying to understand the characters, not making assumptions about them, judging them or giving them advice. She encourages them to use open-ended and probing questions that encourage people to talk freely.
- 4 The facilitator keeps the discussion focused on the objective of the session. The characters should really think about their answers before responding.

Examples of questions and answers

Questions to girl with no money: How do you feel about your sugar daddy? Was there any other way you could get money? Have you told your parents what you are doing? Do you want to get married in the future?

Yes, of course I will marry. I like my sugar daddy. He is kind and loving and helps me pay my school fees. My father was never like that, only drunk and beating us.

Questions to schoolgirl with cellphone: How did you start going out with a sugar daddy? Do you enjoy your relationship with him? Where is your family? Do you have a younger boyfriend? Do you worry about HIV?

I'm his only girlfriend so we are safe. My parents are dead and I stay with my uncle. We did life-skills at school – about what we want in life. I decided that I want a good life, not poverty and hunger every day. So I looked at what I could offer and decided that I could please a rich sugar daddy.

Questions to sugar daddy: How do you feel about this girl? What do you get out of the relationship? Are you married? Do you ever think about HIV?

A young girl like her would not have HIV. This girl makes me feel young again. My wife is always busy and has no time for me. She only criticises me; there is no loving.

Questions to mother of school girl: Is there any way that you can earn money for the school fees? Where is the father? What does he do to meet your daughter's needs? Is there anyone else in the family who can help?

I am disabled and cannot work. Her father spends most of his time in the bar, spending our little money on drink and girls.

Discussion questions for learning

- ▲ What happened in the role-play?
- ▲ Does this situation happen in our communities?
- ▲ What might happen next? What might be the good and the bad effects of the situation for different characters?
- ▲ How did you feel about each of the characters? Who had some responsibility for the situation?
- ▲ What do you think are the causes of risky behaviour in each of the characters?
- ▲ How can we use our knowledge of the causes to help look for solutions?
- Divide into groups and ask each group to make a role-play to show more about the life of one of the characters. This will deepen our understanding of their situation and the effects of the problem and help when it comes to looking at solutions.

Ruth, why did you not want to have sex with your husband? Because I'm afraid of getting pregnant again too soon. Mshawa, how did you feel when she refused you?

Variations

Using hot-seating to reduce stigma and discrimination

Facilitate the activity as in the previous one, but ask these questions:

- ▲ What did we learn from this activity?
- ▲ What kind of questions did we ask?
- ▲ What are we assuming about the characters in asking these questions?
- ▲ Why do we judge some people?
- ▲ How does understanding more about people affect our judgement?

Judging ourselves

Ask participants to spend 10 minutes alone and think about:

- ▲ What have I done in my life that is unacceptable to some people?
- ▲ What judgements could others make against me?
- ▲ How would that make me feel?

Sharing

Ask participants to pair up with someone they feel comfortable with and discuss how it felt to do the reflection.

Ask participants:

- ▲ How was the activity?
- ▲ How are you feeling?
- ▲ What do you learn from this?
- ▲ How can we change the way we judge people?

How we relate to each other

Good relationships with friends, sexual partners, family and those that can support us have a positive effect on our sense of power and well-being. Trusting, caring, equal relationships with good communication enable us to take actions to improve our lives.

We can use drama activities to understand more about the people we relate to and how we relate to them, the effect of this on our lives and how we might want to improve things. The activities in this section focus on two key factors in relationships – how we behave or

communicate in a situation and our sense of power. The activities also help us to build up characters for a performance.

Gender relations are very important in sexual and reproductive health. Drama can help us to understand and improve gender relations. One way of doing this is to have boys and girls, men and women, working in separate groups to explore an issue using the same tool and then come together to share what they have learned and how they want to change. In this way, males and females become partners in change rather than rivals for power.

How we relate activity 1: Blind games

→ What is it and why use it?

Blind games are played with our eyes closed and this introduces a new sort of seeing. In daily living we get 80% of our information through our eyes. Once we close our eyes, we are forced to use other senses – hearing, touch and smell. This gives us a whole new world of awareness and makes us more vulnerable and open to each other, creating a warmer human experience and a new way of connecting to others.

Working blind is threatening at first. We may be physically disoriented by loss of sight, and socially disoriented – scared about what others will think. That's why we use a number of blind games to ease participants gradually into this new way of 'seeing'.

→ How to do it

Stand blind. Ask participants to find their own space in the room and then give the following instructions: 'Close your eyes. Keep your hands at your sides. Find your centre of gravity. Then try leaning

- forward, to the point of falling so that you have to take one step to keep yourself from falling. Then come back to your centre of gravity.'
- Walk blind. Ask participants to close their eyes and walk slowly around the room without talking. Explain the rules: 'Move slowly. Keep your arms by your side at all times. Reaching out with your hands might poke someone in the eye or invade other people's privacy. Stop if you bump into someone and negotiate your way around him/her.'
- 3 Find the hand. Once players are used to walking blind, clap and ask each player to find another player's hand. Use the following instructions: 'Touch and get to know the hand its texture, temperature, moisture, etc. [clap]. Open your eyes, see whose hand you have, and close your eyes again. Take a last feel of the hand so you know it well. Let go and walk about with your eyes closed, [pause]. Now find the hand again.

Different ways of behaving

Our families teach us how to behave at an early age. There are different ways of behaving in a situation and the way we behave affects whether things go well or badly.

We behave in a weak or passive way when we:

- ▲ take no action to demand our rights
- ▲ put others first so that we lose
- ▲ give in to what others want
- remain silent when we disagree or feel unhappy about something
- put up with anything
- ▲ say sorry a lot
- ▲ hide our feelings
- ▲ do not start something new, in case we fail
- ▲ allow others to make all the decisions
- ▲ follow the crowd and giving in to peer pressure.

We show fighting or aggressive behaviour when we:

- ▲ take our own rights with no thought for the other person
- ▲ say we will do something bad to a person to get what we want
- ▲ put ourselves first, even though others lose,

- ▲ make demands without listening to other people's ideas and needs
- ▲ become angry quickly when others disagree with us
- ▲ shout, push or force people
- make people feel that they need to defend themselves
- ▲ make people look small so that we look big.

We use assertive behaviour when we:

- ▲ stand up for our rights without putting down the rights of others
- ▲ respect ourselves and the other person
- ▲ listen and talk
- ▲ Tell people our thoughts and feelings clearly and honestly; say 'I' think and 'I' feel
- ▲ stick to our values and principles
- ▲ match our words to our body language
- ▲ act confident but respectful
- ▲ accept praise and feel good about ourselves
- ▲ accept true suggestions for making ourselves better and learn from them
- ▲ say 'no' without feeling bad
- ▲ disagree without getting angry
- ▲ say 'I feel angry' in a way that does not harm others
- ▲ ask for help when we need it.







How we relate activity 2: How strong (assertive) am I?¹

→ What is it and why use it?

- 1 In this activity, we try to understand our own behaviour better. We all behave in strong, fighting and weak ways at times. Some of us behave more often in one way or the other. In some situations, fighting or weak behaviour may be the best way of dealing with a situation.
- 2 Explain that you are going to call out some different ways of behaving. Ask people to raise two hands if they behave like this often, one hand if they do it sometimes and keep their hands down if they never do it.
- **3** Say some of the strong, weak and fighting behaviours, listed on the previous page, one by one and ask people to put their hands up as you explained. Ask: 'What have we learned about our own behaviour? Do we want to change it in any way?'



¹Alice Welbourn (1995) Stepping Stones: A Training Package on HIV/AIDS, Communication and Relationship Skills, Strategies for Hope Trust

How we relate activity 3: Aggressive, passive, assertive

→ What is it and why use it?

We use role-play to show and discuss attacking, passive and assertive ways of responding to situations and their results. We can also use role-play to practise assertiveness skills or develop a performance. The role-plays allow interesting possibilities for drama, as they can show the three different attitudes in relation to gender and power, but also personality.

→ How to do it

- 1 Discuss the meaning of assertive, aggressive and passive behaviour and act out the different ways that people can show these different behaviours.
- 2 Divide into groups of three. A is assertive, B passive and C aggressive. Each person takes it in turn to interact with the other two. For example:
 - ▲ Describe how HIV is a problem in their community and how it is transmitted.
 - ▲ Describe how to protect themselves from HIV.
 - ▲ Get them to do something for example, be faithful or use condoms.

People can take it in turns to be A, B and C. They have to keep to their character type but can try out different ways of showing it. This gives many variations on the situation and what happens. They do not need to perform to the whole group, but they can choose interesting scenes which show a problem, cause, effect or solution clearly; these could become a scene in a play.

For example, tell the stories of three friends who show the different behaviour types and are affected in some way by HIV in their communities. Then ask: 'How do they respond to the information they hear, to stories about the issues, publicly and privately? Does it change their sexual behaviour? What point are you trying to raise with the audience?'

- **3** Think of a problem situation between sexual partners, married or unmarried. Take it in turns to act the characters in this situation, either being aggressive, passive or assertive, with one person as the observer.
- **4** Discuss what effect the communication has on the situation. Ask: 'Was it helpful or not?'
- 5 In the big group, show some of the role-plays and discuss:
 - ▲ How do gender and power affect the type of communication?
 - ▲ How can we improve our communication in different situations?

Status and power

Our status and power have a big effect on our ability to take control over our lives and make good sexual decisions. We can use drama activities to understand what we mean by power, what gives us power and how we can increase our power and use it in caring and equal ways.

We can think of four sources of power for individuals:

Resources power. We have enough money, land or goods to live well; we can get good health care and education.

Personal power. We have confidence and high self-esteem. We feel that we are valuable and worthy of protection and rights. Maybe we feel loved by people and our god. We act to demand our rights.

Position or status power. We are born into a high-status family with enough resources. We have power because we are born male or have higher education or a good job. We belong to the ruling political party.

Knowledge and skills power. We know what to do to prevent STIs, HIV and pregnancy and we have the skills to ask for what we need and use it correctly.

These sources of power overlap and strengthen each other. They are important when we are trying to understand our behaviour and also in making up and discussing scenes and finding solutions.

Power activity 1: Thinking about our own power

→ What is it and why use it?

People do role-plays to show their different sources of power and how these affect their behaviour. This allows them to think about ways to increase their power in different ways.

- 1 Ask people in small single sex groups to talk about a time when they felt powerful and a time when they felt powerless. What made them feel powerful and what made them feel powerless?
- 2 In the big group, people share the things that made them feel powerful and powerless.
- **3** Explain the four sources of power and ask people to see if their sources of power fit under any of the four headings. Add other headings if necessary.
- **4** Go into four groups. Give each group one of the sources of power and ask them to prepare a role-play to show how this source of power or the lack of it affects behaviour.
- **5** Share the role-plays.
- 6 Discuss:
 - ▲ What happened in the role-play?
 - ▲ What power did different characters have, and how did this affect what happened in the situation?
 - ▲ In what ways can we increase our power from different sources?

Playing status is different from social status. Playing status means 'what you do' not 'who you are'. Someone of a 'low' social status can play 'high' status in a given situation and vice versa. For example; A gardener can play 'low' status at work whereas in his community he is a highly respected religious leader.

People 'play' low status to:	People can lower others' status:	
▲ keep the security of their position	▲ to 'put them in their place'	
▲ support higher status people	▲ to lower their confidence	
▲ attract sympathy	▲ by making fun of them	
▲ show respect.	▲ by frightening them.	
'Playing' high status:	Raising others' status:	
▲ to assert themselves	▲ to build up their confidence	
▲ to impress others	▲ by teaching them new skills	
▲ to inspire confidence in others	▲ by respecting them	
▲ to make people value their behaviour and ideas.	▲ by taking their advice.	

Power activity 2: Follow the hand

→ What is it and why use it?

This is a popular activity amongst drama people, used to explore issues of power. Some call it 'hypnosis'.

- 1 Ask participants to stand in pairs of A and B.
- **2** Explain that the activity will involve a lot of body movements.
- **3** Explain that participant A or B should hold out an open palm about an arm's length from the other's face. The objective of the game is to maintain the same distance between the face and the hand regardless of the movements the pair make.
- **4** Ask the participants holding out their hands to start moving them slowly in different directions, and those following to maintain the same distance. Move into different directions to explore different body postures. Swap after a while.
- 5 Ask participants:
 - ▲ How did it feel to lead and be led?
 - ▲ How did you feel about the responsibility of controlling someone?
 - ▲ How does this activity relate to power and sexual and reproductive health?

Developing empathy

Empathy activity 1: Walking in each other's shoes

→ What is it and why use it?

Participants 'walk in each other's shoes' by role-playing a problem situation which might happen to someone of the opposite sex. This helps males and females to understand and empathise with each other and shows that we have common needs. It helps us to work together to improve things for males and females.

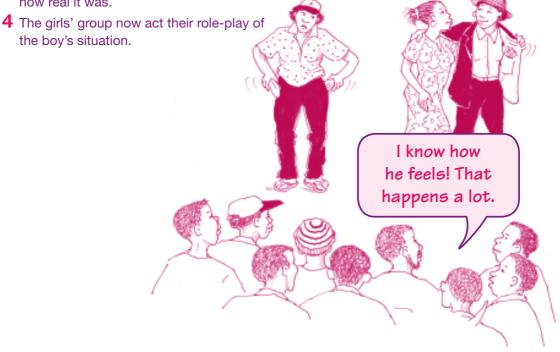
→ How to do it?

the boy's situation.

- 1 Divide into male and female groups.
- 2 Each group talks about what they think it is like to live life as a person of the opposite sex in relation to growing up and sexuality. They prepare a role-play to show and tell a problem situation involving this person.
- 3 The boys', group then act out the problem situation of the girl. The girls say how it feels to see this role-play of their lives and how real it was.

5 Ask participants:

- ▲ How similar or different were the two role-plays? If different, why is that?
- ▲ How might these different situations affect girls' and boys' experiences of growing up?
- Would you want to change your situation to that of the opposite sex? Why?
- ▲ How easy or difficult is it for boys and girls to try to 'walk in each other's shoes'? What makes it easy or difficult for both?
- ▲ What experience do we have of walking in each other's shoes?
- ▲ How can we help each other to walk more easily in each other's shoes?



Empathy activity 2: Testimony and individual monologues

→ What is it and why use it?

Each person thinks of a character like themselves and makes a statement on the issue being discussed, from that person's experience. People then develop a story from the characters and statements.

→ How to do it?

- 1 Participants sit in a circle. Explain that they will each think of a character like themselves and make a posture and statement, that expresses something about that person's feelings, experience or thoughts about the issue being discussed. If the group has a built up a lot of trust, people could make personal testimonies. However, it is often safer and easier for people to make a testimony for 'people like us', even if it is their own experience.
- 2 To help participants build up their courage to express themselves in the large group, get them to talk about it first in pairs.

Example of a personal testimony: 'I want a boyfriend because all my friends have boyfriends and they laugh

3 Each character steps forward, strikes a pose, and makes a one-sentence personal testimony.

An example:

at me.'

'I'm never going to have sex in my life, I'm too afraid of AIDS.'

'AIDS means American Intervention to Discourage Sex – I don't believe them.'

'We all have to die of something – a short and happy life is better than a long one in poverty and misery.'

- **4** Then ask one participant to tell a story, connecting the different images.
- **5** Ask participants;
 - ▲ What have we done to address our problems already?
 - What have we achieved and what are the challenges?



WHAT IS OUR VISION FOR THE FUTURE?

If we have a clear vision of a good future, we can agree on our goals and work together to identify the steps we need to take to get there. We can use images, stories or role-plays to show our situation is now and how we would like it to be in the future. This could be about changes in ourselves, our relationships or wider changes in our situation; for example, higher income or better services and policies.

Where do we want to be? What do we want the situation to be like when the problem is solved?

Activity: Stepping into the future

→ What is it and why use it?

In this activity we use images to show how things are now and how we would like them to be in the future. We could also look at what might happen in the future if things go on in the same way as they are now – our best and worst future. Participants make an image and then bring the images to life.

- 1 Divide into groups of five to eight people.
- 2 Ask each group to make up a character that is like themselves in age and sex. Give him or her a name.
- 3 Now make up a story about this character. Ask:
 - ▲ Who is she/he living with now?
 - ▲ Is she/he married or does she/he have a lover?
 - ▲ How is her/his relationship with her/his partner?
 - ▲ How do they both behave?
 - ▲ Does she/he have children?
 - ▲ What work does she/he do?
 - ▲ What work would she/he like to do?
 - ▲ How does she/he get money?
 - ▲ What are her/his hopes for the future?
 - ▲ What are her/his fears for the future?
- 4 Now imagine that she/he might have

- two possible futures, a best future and a worst future.
- 5 Agree together how the best future will be.
- 6 Make up a story to show how she/he reaches her best future.
- **7** Agree on how the worst future might be.
- 8 Make up a story to show how she/he reaches her worst future.
- **9** Make two group images to show these two futures. Show them to the group one at a time and invite people to ask questions about the image and the story leading up to the future.
 - ▲ What could she/he could do to make the best future happen?
 - ▲ What difficulties might she/he encounter?
 - ▲ What could others do to support her/ him?
 - ▲ What could the community do to support her/him?
 - ▲ What other things might need to change?
- 10 After you have seen all the images, ask people to think about: What first steps could the character like us take to set her/him off on a path to their good future?
 Make sure that this is a practical step that he/she could try out.

Variation: Story with a gap

Participants make up a story that starts with a problem situation and then shows a good situation, but there is a gap in the middle. Participants discuss and show through role-play or storytelling what happened to make the problem situation change into a good situation. People could also make pictures to show the situation now and later, and then discuss and add pictures to show the steps to take.

FINDING SOLUTIONS TO PROBLEMS

In this section, we describe some tools for finding and testing out different solutions, predicting what might go wrong and how to avoid it and building our skills. Drama tools can help us to be creative and imagine new ways of solving problems.

How will we get there?

What do we need to do to improve the situation?

Which are the best solutions?

What barriers might get in the way of solving the problem?

What do we have to do to make them work?

Who will do what with whom, when, where, how and with what resources?

Problem-solving activity 1: Building strategies for problem solving

→ What is it and why use it?

Participants share ways that they have solved problems before and then use these strategies to solve an existing problem.

- 1 Go into groups of five or six. Ask people to think of problems that they managed to solve in their lives. The problem could be big or small, and it doesn't have to be about sexuality.
- 2 Ask people to identify what they did to solve their problems and what helped them to succeed.
- **3** Ask people to prepare a role-play to show what helped them to solve problems.
- 4 Act out the role-plays and identify all the things that helped people to successfully solve their problems.
- **5** Ask: 'How we can strengthen these ways to make it easier for us to solve problems in future?'
- **6** Groups now select a problem that they have identified and use the identified strategies to solve it.

Problem-solving activity 2: Margolis wheel

→ What is it and why use it?

In the Margolis wheel some people (clients) present a problem to others (consultants), who give their ideas on how to solve the problem.

→ How to use it?

- 1 Explain that the aim of this activity is to find solutions to problems. Ask each participant to choose a problem so that everyone has a different problem.
- 2 To find solutions they are going to form a Margolis wheel where some people (clients) present a problem and others (consultants) give their ideas on how to solve it. Everyone will have a chance to play both roles.
- **3** Ask people to take a few minutes to think about how they will explain their problem to their consultants.
- 4 Divide the participants into two groups. Make one group the consultants and the other the clients.
- 5 Ask the consultants to take their chairs and make a circle in the middle of the room with the chairs facing outwards.
- 6 Ask the clients to take their chairs and place them in front of the consultants so everyone has a partner.
- 7 Explain that the clients now explain their problem to their consultants and the

- consultant has three minutes to suggest solutions. The client should write down the solutions.
- 8 Clap your hands after three minutes and ask the clients to stand up and move to the chair on their left. They now face a new consultant and again get their suggestions for three minutes.
- 9 Repeat two more times.
- 10 Change places so that the consultants become clients and vice versa, and clients move one place to the right so that they meet different consultants.
- **11** Repeat the activity.
- 12 Ask each person to write up all the suggestions that they were given by their consultants. In groups with the same cluster heading, write on a flipchart all the suggestions for that cluster.
- **13** Ask each group to present their findings and discuss. Combine, revise or remove suggestions to make them more practical and manageable.
- 14 Ask each group to make a grid showing which activities they want to carry out immediately, soon and later to address the challenges.
- 15 Ask each group to present their grids.
- **16** Ask: 'What did we learn and how will we use it?'

→ Facilitator's tips

We used the terms 'consultant' and 'client' because people enjoy seeing themselves as consultants. Use suitable terms for your group, but be sure that you acknowledge that everyone has the ability to find solutions to problems. It is not just higher-status people telling lower-status people what to do. A good consultant helps clients to find their own solutions.



An example of the Margolis wheel from our workshop in Lusaka

Participants did a brainstorm to list challenges in using interactive drama to address SRH issues in their communities. Each person took one of the challenges and formed it into a question to ask their consultants. In the Margolis wheel, everyone got some ideas about how to address their challenge and organised them for presentation. People enjoyed the activity and were surprised how many good ideas they gave and received in a short time. The next step was to discuss the solutions and further explore the practical and relevant ones through roleplay or a diagram to predict the best and worst results and factors that would help or hinder implementing each solution.

Problem-solving activity 3: The dilemma

→ What is it and why use it?

This is a sculpting activity that can help participants to work with others in exploring how they can solve their own dilemmas in relation to SRH.

→ How to use it?

- 1 Invite a participant to make a sculpture that portrays a dilemma in the life of someone like themselves, related to SRH. The sculpture could be made up of one or more characters. Explain that no one has to share their personal dilemmas and that participants should not share private information outside the workshop.
- 2 Ask participants to look at the sculpture carefully, and then ask:
 - ▲ What do you see in the image?
 - ▲ What do you think is happening?
 - ▲ Are participants' understandings of the image the same as those of the person who created the image?
- **3** Ask the characters portrayed in the image to bring the dilemma to life by moving and talking.
- 4 Invite other participants to share how the characters could get out of the dilemma. Ask people to come up and take on the role of different characters to achieve this.
- **5** After a while, also ask what needs to happen for the dilemma itself to go away.

Problem-solving activity 4: Showing solutions through role-play

→ What is it and why use it?

Role-play is a very useful tool for trying out different solutions to a problem, looking at the advantages and disadvantages of each and agreeing on what action to take. We can use role-play flexibly on any issue. See also 'Stopstart drama' in Chapter 5, page 69.

→ How to use it?

Variation 1

- 1 Participants act out a role-play or a drama showing a problem situation or the causes or effects of a problem.
- 2 The audience brainstorm to come up with solutions to the problem. They agree on possible solutions and then go into smaller groups to act out different solutions.
- **3** In the larger group, they act out the solutions one by one and discuss how practical they are, what could go wrong and how to avoid this.
- 4 They agree on next steps.

Variation 2

- 1 Act a drama showing a problem and a solution to the problem.
- 2 Ask the audience:
 - ▲ What was the problem?
 - ▲ Does this problem happen in our community?
 - ▲ What are the causes and effects of the problem?
 - ▲ Is the solution practical?
 - ▲ Will it solve the problem?
 - ▲ For whom will it solve the problem the individuals concerned and/or others who are or may be affected by the problem?
 - ▲ What are the possible benefits and costs of this solution?
 - ▲ How could we strengthen this solution?
 - ▲ What other solutions can we think of?

3 Summarise the solutions and agree on next steps; for example, trying out some of the solutions at the next meeting.

An example from our workshop in Lilongwe

Scene 1: Tim is top of the class. Bessie asks him for help with her Maths and tries to seduce him. He tells her to keep away from him; they argue.

Scene 2: Matilda tells James that she is in love with him and she won't leave him alone. He refuses to get involved and says he will report her to the teacher.

Scene 3: James reports Matilda to the teacher. He counsels them both. She apologises and they agree to be just friends.

After the drama, the audience hot-seat the characters to find out why they behaved as they did.

Solutions from the audience included:

- ▲ learning activities using role-play to help boys and girls be clear on the difference between acceptable ways of showing sexual interest, and harassment which involves touching, stalking or threats
- ▲ inviting someone from a law enforcement agency to give a talk to the school on harassment and abuse
- ▲ teachers and adults being good role models
- mobilising families and the community to raise awareness on all forms of sexual abuse, violence and harassment and have a community action plan to stop it.

Problem-solving activity 5: Play-replay

→ What is it and why use it?

This method helps to explore solutions to a problem. A short drama is presented showing a problem and the events leading to it. Then it is replayed and people can stop it to give their ideas on how the problem could have been avoided. These ideas are then played out.

→ How to do it

- 1 Divide into groups and ask each group to make a short role-play on, for example, things they fear might go wrong in starting a new relationship with a boy- or girlfriend or in a new marriage.
- **2** Each group presents its drama and the large group identifies the nature of each problem dramatised and then suggest solutions.
- 3 Play out a few solutions, using 'Stop-start drama', see Chapter 5, page 69.
- 4 Any member of the audience who wants to intervene, can clap their hands to stop the action, take over the character and re-play it to show a better way.
- 5 The new actor takes the place of someone in the drama and the action resumes.
- **6** If someone feels that any response or action is unrealistic, he or she calls out 'magic'. This stops the drama, and the person intervening must enter the scene and replay it in a more realistic manner.
- 7 Continue until people agree that the response is helpful. See example in Chapter 9, page 154.

Problem-solving activity 6: Talking to adults about sex

→ What is it and why use it?

Many personal problems, that can be solved through good communication, need a trusted person we can talk with about personal issues; for example, growing up and sexuality. In this activity, we identify whom we like to talk to and what good communication means to us through role-play. We practise communicating about a sensitive issue.

→ How to do it

- **1** Go into groups of four, girls with girls and boys with boys.
- 2 Ask people to think of a situation to do with sex and growing up when they wanted to talk to someone. The two stories below are given as examples, but you can use the situations given by the groups.

A friend of Alice's father tells her that she is becoming a beautiful young woman and he would like to take her out for a nice time in Chipata. She doesn't want to be rude to an older man, so she agrees politely. He says that he will clear it with her father, but her father says nothing to her about it. She is worried because she has heard people saying that he has a lot of girlfriends and he will soon have AIDS. The day comes and she wonders what to do.

8 Working with groups

Mazauso had a nice dream about a beautiful woman who was loving him. He felt so good in his dream, but then woke up and found that his bed was wet and sticky. What could have happened? He felt very guilty because of the dream and thought that God had punished him with this terrible sickness. Who can he talk to?

- 3 Ask each group to choose one common situation for people like them.
- 4 Ask two people to act a role-play showing the person with the problem and the helper talking together. The helper should be the person whom they would choose to go to for help and show the helper talking with them in a good way.
- 5 Now take it in turns to act the role-plays while others watch for what information is provided, what questions are asked and body language used, and what shows that the helper is understanding and supportive.
- 6 Ask these questions:
 - ▲ What did you think of the role-play?
 - ▲ Does such a thing happen?
 - ▲ How did the person with the problem behave?
 - ▲ How did the helper behave?
 - ▲ Can you think of ways that the helper could improve the help that they give?
- **7** Ask for volunteers to show the ways that the helper could improve and replay the scene. For example:

▲ how their face should look

▲ how their voice should sound

▲ what things they would say.

Uncle, my private parts have been feeling funny lately. Does this mean I have to wear a condom?



Practising communication skills

Role-play is a very useful tool for practising communication skills; for example, listening, assertiveness and negotiation. The following activities suggest some topics and role-play activities, but we can use them for any issue. Role-play is also a very useful tool for developing characters and scenes for a play.

Activity: Practising skills and strategies

→ What is it and why use it?

These are some role-play activities aimed at trying out communication skills and strategies that we can use in difficult situations. This builds our skills and can create interesting scenes and characters for a play.

→ How to use it?

- 1 Ask people to go into pairs to do some role-plays.
- 2 Choose topics that are important to the group. Here are some examples:
 - ▲ What is the worst thing that could happen if I brought up the topic of condoms with my partner, or what is the best thing that could happen?
 - ▲ How can I refuse sex with someone I love and want to continue a relationship with?
 - ▲ How can I tell someone that I have been diagnosed with an STI and he or she needs to go for a test?
 - ▲ I am feeling confident and happy. My best friend undermines those feelings and puts me down. How do I respond?
 - ▲ My friend is putting pressure on me to do something I don't want to do. How do I resist?
- **3** The pairs role-play their difficult situation. Analyse the role-play with the rest of the group.
 - ▲ How does A go about it? How does B react?
 - ▲ Is it a realistic situation?
 - ▲ Does A actually succeed in talking to B in a helpful way?



- 4 Play the scene with a young man telling a young woman, and vice versa. Ask, 'Are there any differences?'
- **5** The group analyse the tactics used by each player and suggest others. Replay scenes for different results.

Variation

- 1 Set up a series of role-plays between A and people in the community. Before A goes to see his or her friend or sexual partner, he or she goes to see different people in turn to ask for advice; for example, a close friend, an older relative, a brother or sister, a priest, a health worker, a friend of his or her partner, a community leader. These roles could be matched with particular attitudes, e.g. pragmatic, condemning, supportive.
- 2 Repeat the first scene. 'Does A find it easier to communicate with his or her partner? Is A confused by the advice received, threatened by it, or does A find some of it helpful?'

- **3** In a play, these scenarios could provide the audience with the main character's dilemma, and the other characters offer a range of advice, which covers:
- ▲ the attitudes, prejudices and fears held by ordinary people
- ▲ the attitudes of people with a vested interest in a particular viewpoint
- ▲ helpful ideas, attitudes and information.

You could create an ending yourselves, or ask your audience for suggestions on how the character should proceed, and after discussion present an ending based on their advice. It is important that the audience can relate to and empathise with the main character.



Activity: Saying what we want in sexual life

→ What is it and why use it?

We can use this activity to gain skills in talking about any aspect of sexual life. This one is an example where the desired behaviour is delaying sexual debut.

→ How to do it?

- Ask participants to imagine that they have decided to say no to sexual intercourse at this time. They should think of all the places and situations where they might be in danger of having sexual intercourse because someone is proposing it to them. For example, an older woman proposing a boy; a boy and girlfriend have strong sexual feelings for each other; an older man offering a girl money; a husband or wife wanting to wait until they have had an HIV test and so on.
- **2** Go into pairs. Give each pair two of the situations to role-play.
- 3 Start with the first situation. One person should try to persuade the other one to have sex, using any ways they wish. The person who wants to say no should use strong ways to keep to his or her decision to abstain.
- **4** The pairs now change over roles and role-play the second situation. This allows them both to practise being strong in refusing sex.
- 5 Bring everyone together and watch some of the role-plays, choosing different ones; for example, where the female wants to have sex and the male does not and vice versa, people of different ages, and where the pair love each other, and where they have just met or do not have a relationship or money is offered.

6 Ask first the role-players and then the audience:

The person resisting sex

- ▲ How did the person feel?
- ▲ What did the person do to refuse sex?

 What worked well and what did not work so well?
- ▲ Which ways used by the person proposing sex were difficult to resist?
- ▲ What were the best ways to resist them?

The person proposing sex

- ▲ How did the person feel?
- ▲ Which ways did they use to get their partner to have sex?
- ▲ Which ways worked well and what did not work well?
- **7** Ask what people have learned from the activity and summarise.

If you go with me tonight, I'll give you this money. I know you need it to buy some small things.



Activity: Good and bad situations about sex and money

→ What is it and why use it?

We have included this activity because poverty is an important reason why young people have unsafe sex, and role-play can help us to explore different types of sexual relationships where material rewards are involved and to identify ways to protect ourselves.

- 1 Divide into groups of three. Ask each group to do some role-plays to show good situations where a male is helping a female with money or goods, and vice versa. Then role-play some bad situations.
- **2** Each group selects the best role-play on a good situation and a bad situation and performs it to the big group.
- 3 Ask:
 - ▲ Do these situations happen in our community?
 - ▲ What are the causes and consequences?
 - ▲ How can a young person have a good sexual relationship in which her or his partner helps with money or goods?
 - ▲ How can a young person avoid unwanted pregnancy, STIs and HIV in a sexual relationship where the partner is older and/or richer?
 - ▲ How can young people who want to, earn a living in ways which do not involve sex for money or goods?
- 4 If appropriate, role-play asking for condom use in different sexual situations where money or goods are involved. Role-play saying "No" to a person who is offering money or goods in exchange for sex.
- 5 Ask the group to summarise learning and plan for the next meeting.



Activity: Speaking my truth

→ What is it and why use it?

This tool involves role-playing in threes and having one person 'speaking my truth', another listening and another challenging. We can use it to strengthen our confidence and ability to speak up for what we believe in and care about.

Support both females and males to speak up in the group about the things they care about. For example, challenge any participant who tries to silence another member of the group because of their sex or age.

→ How to do it?

- 1 Explain the purpose of the tool to participants.
- 2 Ask the group to think back on the issues about SRH that they have discussed. Ask each participant to think of one change in their lives that they really care about, but have not spoken about in the group before.
- 3 Divide the participants into groups of three people. Give each person in the groups a different role:

Person A: Speaker Person B: Listener

Person C: Challenger

- 4 Ask A to sit opposite B and 'speak my truth' by talking about the change that they care about. Tell C to try to challenge the right of A to speak. Ask A and B to respond to this challenge.
- **5** Ask the members of the groups to change roles and repeat the process until everyone has acted each role.



- 6 Bring all of the participants back together. Encourage them to discuss what they have learned from the activity. Ask them guestions such as:
 - ▲ What did it feel like as A to 'speak my truth' about the changes that you want to see? What did it feel like as B to hear this?
 - ▲ What did C do or say that made it harder to 'speak my truth'? How did the others deal with them?
 - ▲ What would help you to speak up in the face of opposition?
 - ▲ What difference, if any, does being a female or male, or being a young person or adult, make to people's ability to speak up?
- 7 Ask the group to make a list of what they could do to support each other to speak up about the SRH issues that they care about.

Chapter 9MAKING A PLAY FOR PERFORMANCE

We have been using interactive drama with the community and groups to identify problems, explore their causes and effects and find solutions. We may decide to create and perform a play to the whole community or key people such as leaders, service providers or other young people. It is important to think about preparing the play because the activities help us to identify issues and produce ideas for the play.

PREPARING A PLAY

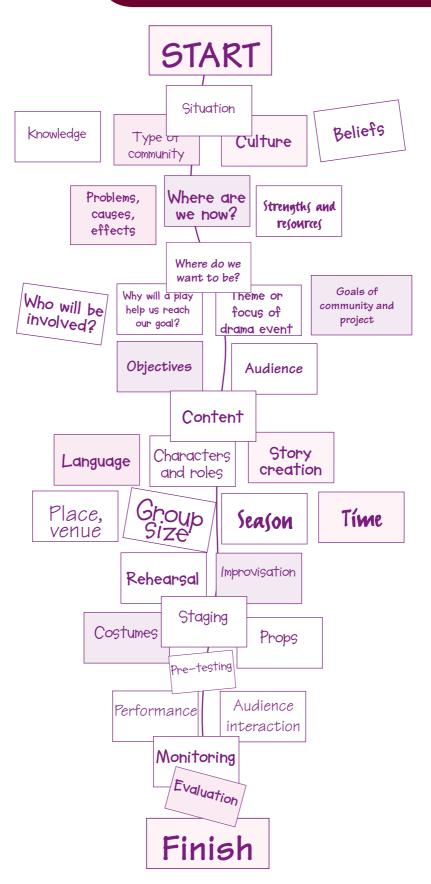
There are a number of stages and tasks we need to work through when we are preparing and performing a play. This helps to ensure that our play is relevant and achieves its objectives.

Activity: What do we need to think about when preparing a play?

→ What is it and why use it?

Participants write all the stages and tasks they can think of in preparing and performing a play. They organise these from 'Start' to 'Finish' along a line to show the order in which tasks should be done. This activity builds on participants' knowledge of drama and helps to make a clear plan for a drama event.

- 1 Give everyone three pieces of paper and ask them to write or draw/make a symbol of one task or thing to be considered on each piece of paper.
- 2 Mark a line along the groups, with 'Start' at one end and 'Finish' at the other.
- **3** Spread out all the papers on the floor and review them. Remove duplicates, ask for clarification and add any that are missing.
- 4 Discuss and agree on the order of the tasks from 'Start' to 'Finish'. Lay them on the line in order.
- 5 Some tasks will be carried out at the same time; people can place them next to each other.
- **6** Review the line and ensure that everyone is clear what the tasks involve and their purpose.



Questions we need to ask

Who is involved and why?

We have already worked with community groups using drama, visual and other activities to explore issues and build skills. We selected the groups we worked with because they were most affected by, or had the most influence on, the issues. We now need to decide who will be involved in developing, performing and facilitating the play.

Everyone may play a role. We need to include at least some people who have shown interest and skills in performing and others who are knowledgeable and interested in devising the story and facilitating the discussions afterwards. We need to agree on who will be involved, in what way, at each step of the process and to explain why they will be involved.

What is the situation?

We need to summarise all the information we have gathered through our work together with the community and our groups. For example:

- ▲ strengths and problems, causes and effects
- ▲ visions for the future and changes wanted
- ▲ possible solutions.

We also need to review our various activities, such as role-play and sculpting, to identify possible situations and scenes which we can use in the play.

Why are we going to use a play?

We need to explain why we have chosen to use a play to address a particular problem. We might want to:

- reach larger numbers or additional people than our working groups; to involve them, for example, in understanding a problem or finding solutions
- ▲ use a medium that has a greater impact than, for example, giving a talk or a leaflet
- ▲ strengthen other actions that we have taken; for example, to advocate for change to

the whole community, service providers or policy-makers.

What is the subject of the play?

When thinking about the subject, aim and objectives of the play, we also have to think about who we want to watch the play and why. Then we can make sure that our play reaches those who will help us to fulfil our objectives and is relevant to that particular audience. We can divide the audience into those who are most important and others for whom it is relevant.

We need to decide on a clear issue that we are showing in our play and focus on a particular part of it. For example, the subject 'HIV and AIDS' is too broad. We need to narrow it down by asking ourselves what we want to focus on about HIV and AIDS. The play could be about prevention, treatment, stigma, helping orphans, etc. Again, we need to focus by asking, for example, 'What about prevention?' This will make it easier for the audience to follow and understand the play and its ideas. We need to always ask ourselves 'What about it?' when we have an idea for a subject.



What are the objectives of the play?

Once we have a clear issue and focus for our play, we need to agree on a clear aim and objectives.

Aim

What do we hope to achieve from performing the play? What change do we hope to see?

Objectives

What has to happen first so that we achieve our aim? The aim and objectives have to be SMART:

Specific, Measurable, Achievable, Relevant, Time-based

Example

Theme: A major cause of early marriage is families not being able to care adequately for all their children.

Aim: To motivate and encourage men and women to plan their families according to their means, using effective contraception.

Objectives: By the end of the event, people will have explored:

- ▲ the good and bad impacts of having more children than a family can care for
- ▲ the reasons why people have more children than they can care for
- ▲ different methods of planning when to have children and their feelings about them
- ▲ barriers to using preferred family planning methods and ways to overcome them
- ways to motivate partners to plan children effectively.

Who is the performance for?

Our aim and objectives and what we have learned in our community and group work help us to decide which groups we want to influence in order to change and support healthy, happy and safe behaviour.

- ▲ Our primary audience is the main group of people whose behaviour we would like to influence and support. For example, young men and women aged 15–19 years.
- ▲ Our secondary audience includes people who affect the behaviours of the primary population and need to change in order to support them. For example, carers, older men and women who have sex with young people.
- ▲ Age and sex group. We need to respond to the specific understanding and needs of different age and sex groups.
- ▲ Group size. Do we want a smaller audience where people are closer to each other or the whole community? How big will our audience be?
- ▲ Types of community. What is the religious and cultural background of the community? How do we need to dress up and behave? What language should we use? What dances and songs will they understand or enjoy?

How are we going to use the play?

Now that we clearly understand why we are going to use a play and have a focused issue, we also need to think about how we will use it. We need to ask how will the actors and facilitator interact with the audience. Will the interaction be part of the performance or done through discussion afterwards?

Activity: Planning our drama

→ What is it and why use it?

This activity builds skills in planning a drama event in a clear way, using the ideas in this section.

→ How to do it

- 1 Explain the example below of a planning format.
- 2 Divide into small groups. Ask each group to select a subject and situation that they could use a drama event to address.
- **3** Ask the groups to use the planning format to make a plan for the drama event.
- 4 Share and comment on the plans in plenary.

Drama event planning format

Subject: Sexuality and SRH education for young people.

Situation: Carers are demonstrating against peer educators providing SRH education to their children.

Audience: Primary – 50 carers and community stakeholders. Secondary – young people.

Objectives:

- ▲ to enable carers and stakeholders to learn about the purpose and content of the SRH education provided
- ▲ to discuss their fears about SRH education and how they would like to see it taught.

Drama activity: A play showing a key SRH problem faced by young people; carers airing their fears about SRH education; SRH session in action which addresses problem and young people discussing it later.

Interaction: Hot-seat characters, followed by small group discussion on their own fears and looking for strategies to make the SRH education acceptable. Bring together to share strategies, and agree if possible.

When and where should we prepare our play?

Time and space are important factors in making a play.

- ▲ How long will it take to make up the play? We need clear timetables to guide when one step needs to move on to another, especially when time is short.
- ▲ How many sessions will be available? Using the time you have for the whole preparation of the play, decide how many sessions you will need and how long each session should last. When spacing the sessions, remember that people may forget what they learned in the previous sessions. Make the sessions as close as possible and recap on previous sessions.
- ▲ When is a good time for everyone to meet? Choosing convenient meeting times for everyone is essential to ensure that everyone can attend on time.
- ▲ Where will it all happen? Identify a space that you can use. Think about how easy it is for group members to come to, how free they will feel there and whether it is safe. Think about whether there is room for people to move around and whether you will be able to make noise, such as singing, drumming and dancing.

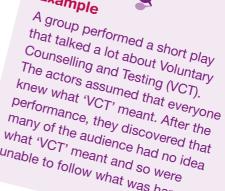
DEVELOPING THE CONTENT

The content of the play includes the story, the dialogue and acting and the characters. This section describes how to go about creating the content of the play.

What does our audience know about the issues in the play?

We need to find out what the audience already know about SRH and the issues we are showing in the play. We can learn from their knowledge as well as giving new information through the play. Our work with the community and our groups can help us to gain this understanding. We should not make assumptions about what people know or don't know about a topic.





unable to follow what was happening.



The story-line

Plays bring together a number of events or situations. In our play these have to clearly show the issue being explored. When making a play, one of the first questions we have to ask ourselves is, 'What happens in the play?' This will help us towards a story of events that we will call the story-line for the play.

The story-line helps us bring together a number of actions by people and understand the possible causes and effects of

those actions. We can then use our aim and objectives to decide how we want to use the story. We can use it to show others the possible effects of different actions, to share vital information about SRH or to find solutions to problems, for example.

The story-line depends on the interaction of different characters or the people in the story. Their interactions mark the events that form the story-line. When characters interact, there are causes and reasons for their actions and the effects.

Creating the story-line

Use the introductory activities in Chapter 5 to ensure that everyone understands what a story is and what could make it interesting. For our story we need to use the information gathered in the interactive group activities. Below are some suggestions as to how to do it.

A story is usually built in three phases: the beginning, the middle and the end. Thinking about this can help us to have an idea of what we will be doing when creating a story. Here are some questions to help us.

For the beginning:

- ▲ What happens which will lead to more events that you will wish to explore in the story?
- ▲ What will happen to get the interest of the audience and introduce the main characters?

For the middle:

- ▲ What different events and crises happen to the main character(s)?
- ▲ How does one event lead to another?
- ▲ What happens? What is the effect? What happens next?
- ▲ How do the characters feel? What do the characters want to do?
- ▲ What are the disagreements?

For the end:

- ▲ What is the major problem in the main character's life that has to be solved?
- ▲ Will the play show the solution or will we leave the problem hanging for the audience to solve?

Story-line activity 1: Story wheel

→ What is it and why use it?

This activity combines ideas and information into a story-line.

- **1** Ask participants to form two groups of equal numbers of people.
- 2 Now ask the participants in one of the groups to form a circle and sit facing outwards.
- **3** Ask the other group to make a circle around the first circle, with each group member sitting opposite someone in the other group.
- 4 Explain that the task is to use some of the information raised in the information production stage to create a story on a theme that you have chosen.
- 5 Each inner circle participant creates a story based the information and tells it to the person facing him or her in the outer circle. The participants in the outer circle listen carefully and find what they like most about the telling of the story, with a focus on events and their order and relevance to the theme.
- 6 After five minutes, ask the participants in the outer circle to move around one place to the right. They then tell the story that they just heard to the person facing them, adding their own ideas and information to it.
- 7 The outer circle participants move again to the right and the inner circle people tell the stories, again adding their own ideas and information.
- 8 Stop the activity after everyone has interacted. Bring everyone together and identify and discuss the most interesting stories.
- 9 Use these stories as the basic play and feed in other important issues. The stories will be mixed up, but that is part of this fun method. Interesting ideas will come out and the stories will have some common features.

Story-line activity 2: Making a story-board

→ What is it and why use it?

The group draw different events on pieces of paper and arrange them in a good sequence for a story and drama. They can change the pictures around to try out different stories.

→ How to do it

- 1 In small groups, draw simple stick figures on separate pieces of paper to show different events where characters interact in a way that has an impact on the issue we are concerned about.
- 2 In the big group, arrange the drawings in different sequences until everyone is happy that this is a good story-line for the play. This is called a story-board. Remember to have a beginning, a middle and an end to the story.
- **3** Put up the sequence so you can use it as you develop the drama.



Improvising drama

Variation 1: This is a quick way of starting an improvised drama. The drama is controlled by the storyteller or narrator. She says, for example;

'Once upon a time there was a [pause] mother and daughter.' (Two people from the group play these roles and go into the middle.)

'Now, the mother and daughter were always fighting. Let's watch that. Play!' Scene starts.

Scene 1: Improvised by 'Mother' and 'Daughter'.

Clap to stop and actors freeze in position.

'Now, to add insult to injury, the father is a drunkard.' (Another person plays the father.) 'Let's see what happens when he returns home. Play!'

Scene 2: Improvised by 'Father', 'Mother' and 'Daughter'.

Clap to stop.

'Now, what is the main problem for the mother?' Discuss with the group.

'OK, let's play the solution to her problem. Play!' Scene 3: Improvised by 'Mother' and other characters.

Clap to stop.

'Did you agree with her way of solving the problem? If not, suggest an alternative and try it out. Come and take over her role.'

And so on.

Variation 2: Divide participants into two groups (each no more than 10 people) – one group are the 'storytellers' and the other are 'actors'. The storytellers take the lead in shaping the direction of the story, while the actors follow that lead and act out the story.

Ask one person in the storytelling group to narrate a story on the theme or problem (e.g. unemployment). Once the story starts, the actors begin to play it out through mime. After a while, the storytellers stop and the actors play the scene. Interrupt at major points of decision and ask the key actors:

9 Making a play for performance

- ▲ What is happening to you right now?
- ▲ What are you thinking?
- ▲ How are you feeling?
- ▲ What can you do?
- ▲ What would you do next?

Where appropriate, invite the storytellers to continue with the story. When a new scene is introduced by the storytellers, get the actors to play it out. The storytelling and improvisation continues, with each group taking turns.

Storytellers tell the story or set the initial scene, set up additional scenes, or suggest new directions to the story.

Actors mime the story when it is being told by the storytellers and act out certain scenes with dialogue.

The facilitator directs the flow between actors and storytellers and provides continuity.

Story-line activity 3: Character building

→ What is it and why use it?

These activities help actors to understand and better portray the characters they are playing. People need time to get into the role and situation they are playing, especially if they are not playing a person like themselves.

- 1 Ask people to think about the character they are playing. Below are some important questions to ask about the character:
 - ▲ How old is their character?
 - ▲ Are they male or female?
 - ▲ What are their likes and dislikes?
 - ▲ What do they think of themselves?
 - ▲ What do they think of other characters in the story?
 - ▲ How do they feel about things?
 - ▲ What would he or she be like on a good day or a bad day?
 - ▲ How do they talk, walk, laugh and sit, and why?

- 2 Ask group members to interview each character about their behaviour, interests, attitudes, family and so on. People can be very free in their answers because they are playing a role, not themselves.
- 3 Role-play a meeting or TV panel game on a topic relevant to the play; for example, what people think should be done to encourage fidelity. Ask each character to engage in the discussion in the role of their character. Encourage them to bring out their attitudes, way of speaking and behaving and their general view of things.
- 4 In pairs, A gives B a description of someone they know very well, including how the person looks, dresses and walks, with typical gestures and ways of walking. A teaches B to act out three movements characteristic of this person and something they might say for each movement. B must try to act out the character as closely as possible under A's supervision. They change places and repeated and then perform what they have learned to the rest of the group.

An example using storytellers, actors and a facilitator

Storytellers: 'Wezi went to look for a job. Wherever she went, people shook their heads and sent her away. Then, in one office, the big man called her from the queue into his room. He said he would consider her if she showed him how she could please him with her pretty body.'

Facilitator: Stops storytellers and shouts, 'Play!' Scene shows the situation in the story. The facilitator intervenes by saying;

'Freeze! Wezi, how do you feel about this proposal? What are you going to do now? Big man, how do you feel?'

If there is no response from the actors, the facilitator turns to the storytellers and says, 'OK, storytellers, continue the story.'

Storytellers: 'Wezi decides to play for time. She says, "Thank you for your proposal. Let me go away and think about it." The big man says, "Don't take too long – the city is full of beautiful girls."'

Facilitator: 'Will Wezi return to the big man? What will happen? Let's see. Play!'

Story-line activity 3: Character networks

→ What is it and why use it?

This activity helps us to analyse the relationship networks that a person can have and their influence on him or her and helps create a story based on a character or characters. This activity works best after a role-play.

→ How to do it

- 1 Ask a participant to choose one character in the role-play.
- 2 Ask the participants to draw a picture of the character.
- 3 Ask participants to think of all the different types of people and organisations that can influence the character's behaviour in different ways.
- 4 Ask the participants to identify and draw the different links between the people and organisations. Write on the lines the kinds of links. You could also ask people to each play one of the people or organisations; they hold hands to show the network and say a line to explain the relationship.
- 5 Discuss and demonstrate through short scene presentations how the character is affected by the behaviour of the people/ organisations he or she is related to, and vice versa.



See also Chapter 7, page 95.

Scenes

A scene is a section of the story. A scene shows an event that happens at the same time and the same place. When making a play we need to think of scenes, because they help us present the story in a much clearer way.

The four Ws

- ▲ What is happening?
- ▲ Who is doing what?
- ▲ When is it happening?
- ▲ Where is it happening?

The four Ws help to outline the scene. The 'what' and the 'where' have to be the same for us to consider it a scene. The 'when' also has to be continuous. If the time changes and the characters in the scene

exit and return to the same place at a later time to do the same thing, it would be a new scene. Characters can come in and leave, but if they maintain the other Ws then the scene remains the same. For example, this can happen when characters enter a scene and then exit while other characters or a character remains in the scene.

We need to ask the following questions of the story-line:

Relevance

- ▲ Does the story-line achieve our objectives in a helpful way?
- ▲ How is the scene contributing to the play and objectives?

Audience interest

- ▲ Will the play keep the audience interested from start to finish?
- ▲ Does it have suspense so that the audience really wants to know what will happen next?
- ▲ What makes the story work well?

Is it believable?

If it is too imaginary, the audience may think that the play has nothing to do with them and you may not achieve your objectives.

- ▲ Is the story real enough for the audience to believe it?
- ▲ Is it based on events and experiences that have either happened before or could possibly happen?
- ▲ Are the characters believable or are they exaggerated stereotypes? Are any of the characters stigmatised?

Story-line activity 4: Important moments

→ What is it and why use it?

In this activity, participants find important and exciting moments in the story and create short scenes to show what happened. It is a useful way of making practical scenes for the play. It helps us pick out some of the essential events that need to be focused on in the play.

→ How to do it

- 1 Ask participants to identify the important moments in the experiences of the main characters in the story.
- 2 Ask participants to show through making a role-play how these moments happened, with special focus on the importance and excitement of the moment.
- **3** After creating the role-plays, assess them using the following criteria:
 - ▲ Why are we showing these ideas and information?
 - ▲ How will we show them?
 - ▲ How will this help us to achieve our objectives?



Story-line activity 5: Scene breakdowns

→ What is it and why use it?

This helps us to create scenes out of our stories.

→ How to do it

- 1 After creating your story, write it down or draw it on a sheet of paper.
- 2 Identify key events in the story. Write or draw them in the order that they happen in the story.
- **3** For each event, clearly state which characters are involved, what is happening, where it happens and when it happens.
- 4 This will give you a guide for the scenes. Try to merge those events that happen at the same place at the same time.
- 5 Use this scene guide to decide how you want to arrange the events.
 - ▲ Is it a flashback where you show the audience what happened in the past?
 - ▲ Will you tell it in the order in which it happened in time?



Analysing stories and characters

Stories and drama put across messages that come from our ideas and discussions. The messages may self-evident or they may be hidden in the story. Our messages should aim to be helpful, but if we are not careful they may reinforce negative attitudes. For example: Two brothers were the main characters in a play. One brother worked hard, went to church and kept away from sex. The other brother often got drunk, had many girlfriends and didn't do any work. This brother fell sick and tested positive for HIV. He took the diagnosis very badly and killed himself.

This play was intended to show that discrimination against people with HIV has bad consequences. But it also had a message that the people with HIV are lazy, drunkards and immoral.

When we are working together using interactive drama, we are learning all the time by questioning the stories, the role-plays and the characters in them. In this way we also learn more about ourselves, our attitudes and why we behave as we do. We need to discuss and question the values and attitudes put across in drama – stories, plays, songs, soap operas, etc. – especially those that deal with sexuality and relationships.

Stories and drama can influence people. If we are going to produce a performance to show others, we all have a responsibility to ensure that it promotes helpful attitudes and practices and do not encourage stigma and discrimination.

Activity: Analysing stories

→ What is it and why use it?

This activity provides guidance and practice in questioning stories and drama to understand what they are communicating and how helpful the messages are.

→ How to do it

- 1 Use the questions below to analyse stories, plays or songs dealing with SRH themes.
 - ▲ What did you like about the story/song/drama and what didn't you like?
 - ▲ What was the story/song/drama about? What were the most important ideas and feelings that came across for you?
 - ▲ What did you feel about the characters? Do you have friends or relatives like them?
 - ▲ If you were like one of the people in the play, how would you feel?
 - ▲ Did the play get you thinking or feeling differently about anything?
 - ▲ Did you learn anything from the play?
 - ▲ Is there anything that you might think about doing differently as a result of seeing the play?
 - ▲ What other help or services would you need?

Activity: Describing characters

→ What is it and why use it?

In this activity we describe the qualities of characters in a role-play or drama and then analyse them to see whether some are stigmatised or stereotyped.

→ How to do it

- Divide into groups and ask each group to act a role-play on a topic – for example, options for reducing the risk of HIV infection.
- 2 Ask each group to draw a picture of the heads of each of their characters on flipchart paper and label them.
- 3 Perform each role-play and ask the audience to call out the qualities of each character and write it around their head. If people cannot write, ask them to draw the head in a way that shows their qualities.

- 4 Look across all the characters and ask:
 - ▲ What can we observe about the characters? Are some totally bad and others totally good, or are they a mixture? Are some characters stigmatised?
 - ▲ What might be some of the reasons for the differences?
- Sexplain that all of us have strengths and weaknesses and we all behave in ways that hurt others at times. We should never create characters for people to hate because this causes stigma. We may not like a person's behaviour and try to change it, but they are human beings with good and bad points. People should be able to relate to all the characters so that they can see themselves, their family and friends in the story. The characters can build on each other as positive role models.

An example of 'describing characters' from a role-play about being faithful

Scene 1: Two friends, Masauso and Kaluba, try to convince Vivien to leave her boyfriend, Ben, but she insists she is in love with him.

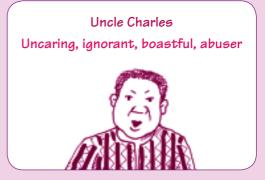
Scene 2: Masauso greets Uncle Charles and talks to him about this beautiful girl. Uncle Charles is pleased and gives him money.

Scene 3: The two friends insist that Vivien should meet the rich 'uncle', asking her, 'Don't you want new shoes or a cellphone?'

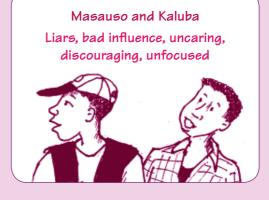
Scene 4: Uncle Charles meets Vivien and tells her she doesn't look happy to meet him and that he has a lot of money that can make her change her mind. Vivien insists she is in love someone and does not want all those material things.

Scene 5: She meets Masauso and Kaluba again and is upset with them and tells them to leave her alone.

In the role-play the men were ignorant, stupid and uncaring, while the woman was clever, assertive, focused and a good role model. This stigmatises men and makes it less likely that they will engage with the story and think about how they might contribute to reducing HIV transmission. It makes men defensive and less likely to have more equal relationships with women.







Activity: Empowering descriptions¹

→ What is it and why use it?

In making stories we often create stereotypes and judge people, especially groups who are relatively powerless – for example, poor people, women or sex workers. This exercise looks at how to overcome this practice.

→ How to do it

1 Divide into small groups and give each group the two reports below or read them out to the whole group. The reports are by two health workers of a girl, Chama, after her pre natal consultation.

Report A: Low income. Single mother.

One-room house. First child – weight below average. Afraid of giving birth. Lazy. Illiterate.

Report B: Loss of appetite due to stress linked to loneliness (the father of her child is a political prisoner).

She enjoys a traditional vegetable soup, would like to include milk and meat in her

diet, but finds these expensive. She is worried about her small income and about looking after her first-born child, who was born without complications but with a below average weight.

2 Ask:

- ▲ What are the differences in the way Chama is described in the two reports?
- ▲ What are the implications?
- 3 Organise a report back and summary.

Description A: Describes Chama only as someone with problems; no reference to her strengths. The list is generated simply to justify the health worker's input.

Description B: Same observations, but described differently. Chama is described as a human being, an individual in her own right, with individual capacity, social relations, interests, etc.

¹Adapted from Community Conversations

THE STAGING

Staging is how we structure and adapt a play to show on stage. A stage is any place that we will use as the performance space for our audience. Below we have listed some elements which are important to think about.

Setting: Setting up the stage so people know the place and time that the play is set in.

Costumes: Clothes and materials to show our characters and the activities they are doing. For example, a poor man should wear poor clothes. The costumes help us feel different from our real selves.

Props: Objects that are used when performing a play to make it more real and clear.

Voice projection: We need to throw our voices across the space so the sound goes from our voices into our audience's ears.

Music: This strengthens our feelings about the play. Music reaches the tastes of people who do not like drama. It raises interest and helps attract a crowd to watch, but it is not necessary throughout the play.

Duration: How long will the play last and what time will there be for discussion during or after the performance?

Type of language: We need to choose a language which will be understood by our audience. We should take care about the words we use for sensitive sexual matters.

Making the performance interactive

When we perform plays, we need to ensure that the performance is well understood and creates the possibility of action from the audience. One way we can effectively achieve this is by making our plays interactive. We can do this in different ways, either during the performance or after. Below we have outlined some ways to make plays interactive for different purposes.

The characters ask questions to the audience: This is a way of actively engaging the audience in the actions of the play. A character asks the audience questions that they are expected to answer or think about. The simplest way to do this is to start with questions which require the audience to answer only 'Yes' or 'No'. For example, in a situation where a character has to make a decision to do something or not, he or she asks the audience what to do. Actors can ask further questions on why they should or should not do it.



Post-performance discussion: A play is performed and a facilitator facilitates a discussion on the content of the play and its relevance to the lives of the audience members. The discussion begins with the facilitator making sure that the audience understood what was happening in the play. People can go into smaller groups to discuss an idea and feed it back to the large group.

Play and replay: We describe this activity in Chapter 8, page 127. Here we used the technique to find solutions to problems. It is also an effective way of making performances interactive when looking for solutions to problems. The plays begins again and the facilitator invites audience members to stop the play when they think a character could have done something differently. They come on stage, replace the character and act out what they think the character could have done. The facilitator then invites the other audience members to comment on the possible impact of the suggested action and strategy on solving the problem.

Hot-seating: See Chapter 7, page 101, and Chapter 8, page 111. The actors stay in role at the front of the stage and answer questions on how they feel, what they think and why they behaved as they did.

The rehearsal

In the rehearsal, we get the performance ready for the audience. Our play must be acted well enough to show emotions and issues as well as telling a story. The activities in Chapter 5 can help us to increase our acting skills. In rehearsals we can ask questions about the effect the play will have on the audience and how well it communicates our message to the audience.

Styles of performance can include dance-drama, dialogue-drama and musicals. Be flexible in the style of performance that you hope to use. The rehearsal is the opportunity to try out different styles and select the style that achieves your objectives best. Forcing a style on an issue may cause problems for participants if they have never used it before and you do not have the confidence, abilities and time available. It is best to begin by using a style that is easy or familiar to everyone. When choosing a style, also consider whether the audience will understand it. It may be exciting to use a new style, but the audience may not understand what is happening.

Activity: Stop and justify

→ What is it and why use it?

This activity improves the actors' movement and action on stage.

→ How to do it

- 1 Explain to participants that this activity will make their movements and actions more clear cut.
- 2 Rehearse each scene and at various points of movement and action call on the actors to freeze and justify why they moved to a different point of the stage or why they did a particular action.
- **3** Agree on the clearest movements and actions.

The performance

The performance of the play is as important as its creation. This is the moment at which the audience's part in the process is critical. The rehearsal should help build momentum towards the performance. Consider the following:

- ▲ Where will the performance be? Consider the weather and privacy. If the play deals with a very sensitive issue you may want to control who comes.
- ▲ How will the audience know about the performance? People have to know and be invited to the performance.
- ▲ How will the audience get there? You have to ensure that your audience has access to the space where you intend to stage your performance.
- ▲ At what time will the performance be? Will the time be suitable for the audience?
- ▲ What will be needed? Are there any materials which will be needed? For example, you might think of using the opportunity to distribute pamphlets or condoms.
- ▲ How will you organise the interaction with the audience?

Activity: Exercises using controls

→ What is it and why use it?

This activity helps participants become more aware of body language, status games and assertiveness through role-play. See Chapter 8, pages 118-119 for more activities exploring status and power.

→ How to do it

- 1 Tell participants to divide into pairs to role-play using one of the following instructions:
 - a) A sits in one place, whilst B walks around talking. (Think about why A is seated and B not. Is A cooking? Is A a high-status person, while B has to stand?)
 - b) A sits and has to look up to B, who is standing.
 - c) A tries to make eye contact with B throughout the conversation.
 B keeps breaking eye contact or avoiding it. Repeat the conversation but have B try to make eye contact with A (and A resisting).
 - d) Try scenes with three or four people with one or two of the above controls.

2 Ask:

- ▲ How does this affect the scene?
- ▲ What is the balance of power and how is it affected by the players' movement and position?
- ▲ What are the differences between an assertive character who can move around and an aggressive one or a passive one?
- ▲ What are the differences between these types when they are seated, restricted to one spot?
- ▲ What are the differences between male and female movements?

SOME DRAMA STYLES Songs and music

Songs and music add to the enjoyment and power of drama. Music can increase our feelings of joy, sadness, laughter or suspense as we watch the story. We can use drums, for example, to build suspense, change the pace of the story or move from one scene to the next.

The words in songs can give powerful messages in an interesting and pleasurable way without preaching. We often remember the words of songs more easily than words without a tune. We can sing along to them alone or with friends over and over again and the message and feeling stays with us. Pop songs by celebrities are influential and attract young people.

Below are the words to a pop song from Zambia, that gives a powerful message about rights and gender equality.

House, money, car by Nalu

House, money, car.

That's not what I am looking for.

Why is it every guy I meet thinks that will open my door?

How about a man who just wants to get to know me?

How about a man who isn't trying to pay me?

How about a man who just has that one key?

How about a man who is just looking for real love?

Songs are also used by traditional counsellors to teach about SRH. Below are two songs from Zambia and Malawi.

Stop child sexual abuse

Why are you touching the child? Why are you touching her waist?

Leave her alone she is young Leave him alone he is young

Don't abuse children, they are our future leaders

Let us take care of them and protect

Boys and girls, men and women working together

HIV and AIDS

One, two, three

Boy and girls let us take the lead Let us fight HIV and AIDS for a better

future.

Men and women take the lead;

Let us help one another for a better tomorrow.

Dance-drama

Dance is used traditionally to show gender roles, courtship, war and work. Dance-drama is a popular and powerful way to tell a story

An example from Kamoto Theatre in Zambia

The dance-drama tells the story of four young men and women and their relationships. The young people propose love to each other and

9 Making a play for performance

choices for safer sex are shown through the dance; for example, a person suggests using a condom, the other refuses and negotiation is shown in different ways.

After the dance-drama, the facilitators and dancers sit with the audience and discuss their ideas about safer sex. They invite people to role-play different ways to persuade or refuse and demonstrate how to apply a condom correctly.

Using a traditional problem-solving process in Malawi

In Malawi, the chief holds an open court to discuss and solve problems with his people. The drama group perform a play based on their learning about problems with the community. The first part of the play shows the problem and its consequences. The second part of the play shows a court scene in which the problem is taken to the chief's court. It is acted in the real location of the court. There is an actor playing the chief but the real chief is in the audience.

When the court scene becomes heated, the actor chief asks the real chief to help and he gets into his community role. The audience also start to speak up and give their experience and views. In this way, there is no barrier between the audience and the actors, and the process is the one used in the community.

An example

Kondwani and Martha are parents living with HIV. Kondwani is too ill to work and the family is very poor. They force their daughter Taonga to marry a vendor called Masauso, so that they can get lobola and some money. Taonga sells goods but one day she gives a customer too much change. Masauso beats her up and complains to the family. The quarrel is taken to the chief's court.

The audience 'hot-seat' the actors – for example:

'Why did you force your child to marry?' 'Because we had problems.'

Then an audience member says, 'I did it because I had no money.'

Someone else says, 'So, is a girl supposed to support the whole family?

The chief says, 'Is the mother supposed to manage everything?'

After the play, mothers were heard to say, 'I'm sending my daughter back to school.'

Girls said, 'I won't agree to getting married early.'

After one month, many girls had gone back to school, even the married ones.

A step-by-step example of devising and performing a play

Topic: Early marriage



→ Step 1

The community and young people identified early marriage as a common problem. Groups of young people role-played different situations to find out what the causes and consequences of early marriage are. The table on the right shows what they found.

→ Step 2

The group decides to focus on one cause of early marriage: parents having more children than they can care for and men not agreeing with contraception. They did role-plays to list the reasons why men do not want to use contraception and selected the most important ones.

→ Step 3

They decide to prepare and perform a play because this will reach more people in the community. It will mirror a situation that is common in the community and will allow people to discuss it without feeling accused or pressured individually. It will touch people's feelings and build skills.

→ Step 4

They agreed on their objectives:

- ▲ to raise awareness of the role of too many children in poverty and early marriage
- ▲ to explore ideas on the good and bad points of using modern contraception to plan families
- ▲ to practise communication skills in matters relating to sexuality.

Their audience is 50 men and women between the ages of 18 and 35.

→ Step 5

They decide to show a drama and use play-replay to demonstrate and practise

Causes	Consequences			
Poverty – need money from <i>lobola</i>	The girl is taken out of school			
and can't afford to keep the girl now she is grown	The older man already has two wives – risk of HIV,			
More children than	STIs			
the family can maintain well	Against the law and rights			
Father spends a lot of family money on	No love in marriage			
drink	Childbirth dangerous			
Boys' education prioritised over girls	for girl because she is only 16 years old			
Father does not agree with contraception				
Many debts to pay and not enough income				

communication skills and provide positive role models.

→ Step 6

The group write a story based on their understanding from role-plays and other activities with their groups.

→ Step 7

The group make three scenes out of the story.

→ Step 8

They get into their characters and rehearse the performance.

→ Step 9

They perform their play.

→ Step 10

The actors and facilitator interact with the audience. The actors restart scene 3. They invite a member of the audience to take over the role of the wife and try to persuade the husband

Scene 1

A husband comes home late after having some beers. The wife is still up with their six children, who are complaining of hunger. He asks for his meal and she angrily tells him that there is no food because they have too many children. He sends the children away and tells her that they need a lot of children for the farm and old age and some may die. The wife says that she has too many and too close births; she is exhausted; they need to do something.

Scene 2

The wife meets her friend and they talk about her problem. The friend uses the pill and suggests that she gets them from the clinic. If her husband doesn't agree, she can hide them.

Scene 3

The husband discovers the contraceptive pills and confronts his wife. She says she cannot have any more children, as they have six already. He says that she is not God to decide on how many children they have and in any case the pills will make her stomach melt. The husband and wife turn their backs to each other, face the audience and ask them what they would do in this situation.

to allow her to use the pills. There was no progress after a while, so the facilitator stops it and invites another audience member to have a try. Different people try, until someone is successful and realistic.

→ Step 11

The facilitator asks people what they learned from the drama event and how they plan to use it. She gives out information on available services and arranges another meeting with the group to plan further activities to support people and reach others. A team member counts the number of men and women attending the event.

What we learned from audience feedback

- ▲ Each scene had a purpose and a point that developed the story. We learned why the father behaved as he did and the reasons why he thought they should have lots of children. The scenes had clear content and acting, so people could easily understand them.
- ▲ The play was realistic this really does happen in life. The actors did not exaggerate, for example, by shouting drunkenly that

- would distract the audience.
- ▲ The audience was engaged in the dialogue as they empathised with the characters.
- ▲ The ending was good because we were left in suspense. We wanted to see more and think about what can happen next.
- ▲ The wife succeeded because she talked about what her husband wanted too. She recognised his feelings, gave him more information about child-spacing and told him that she might die if she has more children. Although she has lower status than her husband, she showed personal and knowledge power; she was able to play the same status as him and gave herself more power to negotiate what she wanted without reducing his power. In the end, they could both get what they wanted.
- ▲ The facilitator asked the audience if this scene was believable and they said that it was. Sometimes the powerful character is a stereotype who refuses to listen or change regardless of what is said, or changes too easily. It is important in play–replay drama that the powerful character acts as a real person might, rather than in an extreme way.

Chapter 10MONITORING AND EVALUATION

Evaluation

Evaluation measures results or significant changes brought about by the programme.

Effectiveness

Has the intervention or programme produced powerful results, which help us to reach our objectives?

Efficiency

Has the intervention brought about changes with the minimum use of resources and waste?

Evaluation is carried out at specified times in the programme – for example, in the middle and/or at the end.

Summary of the difference between monitoring and evaluation



What are monitoring and evaluation?

We need monitoring and evaluation to measure both how well we are performing and our achievements. The two activities are linked together over the time frame of the programme.

Monitoring

Monitoring is an ongoing process of measuring progress. It asks the questions:

- ▲ What are we doing well and what is not going well? Why?
- ▲ What do we need to improve on?
- ▲ Who are we reaching with our activities? Are they the most vulnerable people?
- ▲ How many people of different age and sex are we reaching and where do they live?
- ▲ What does the programme cost? Are we using resources well?
- ▲ What immediate results can we see from our programme?

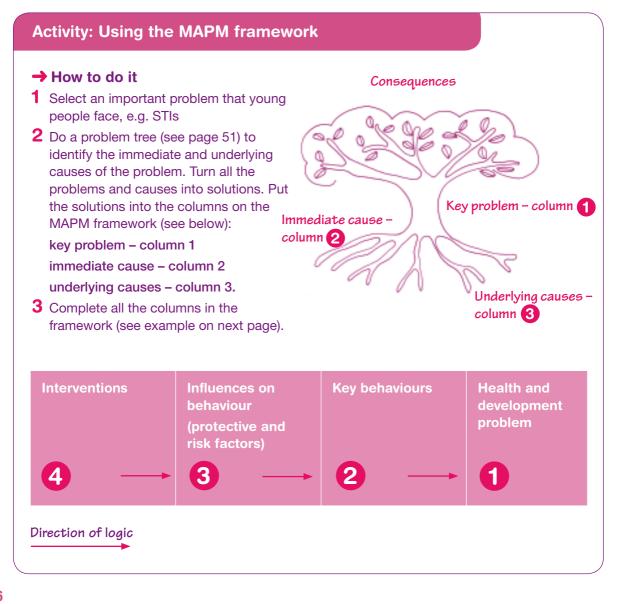
Item	Monitoring	Evaluation
Frequency	Routinely, ongoing	Periodic
Main action	Tracking process indicators	Measurement and analysis
Basic purpose	Check progress of activities, coverage and expenditure	Have we met our objectives? Measure changes brought about by the project
Focus	Resources used, activities delivered, results of the process, work plans	Effectiveness, efficiency and impact

A framework for monitoring and evaluation

Before we can monitor or evaluate our programme, we need to have a clear idea of our objectives from the start and how we will achieve them. We then need to decide how we will measure our performance and the changes brought about by the project. The tool below helps us to design and implement more effective programmes and identify more appropriate indicators for monitoring and evaluation. The mapping adolescent programming and measurement (MAPM) framework adds value to our PLA activities and fits our model, which includes community groups, services, and the wider environment, including policy. See Chapters 6 and 7 and Resources for references to MAPM.

Benefits of using the MAPM framework

The framework lays out in a logical way the interventions and changes that need to happen to reach our goal of improving sexual and reproductive health. We can relate the MAPM framework to our problem tree on page 51.



The framework can help us to:

- 1 Set up a monitoring plan for the interventions in column 4.
- 2 Decide what level of evaluation is feasible and appropriate. We can measure the effects of the interventions on the factors influencing behaviour (column 3) in the short term, followed by the behaviour itself (column 2) and finally the impact on health after some years (column 1).
- **3** Identify indicators for both monitoring and evaluation.
- 4 Develop effective interventions based on evidence, which guides the design of the programme and improving on an existing programme. This helps us to understand better what works in behaviour change and why it works.

The framework is completed using information from the PLA activities such as the problem and solutions tree from right to left (1 to 4). It then demonstrates the logic linking interventions to outcomes, reading from left to right. Below is part of a MAPM framework showing a worked example about condom use. This section deals only with individual/group behaviour in relation to condom use – they are only examples. We would need to develop separate frameworks for other behaviours, i.e. abstinence.

Interventions 4	Influences on behaviour (protective and risk factors) 3	Key behaviours	Adolescent health and development outcomes
Sexuality, life-skills and values education, including gender awareness	Increase knowledge, self-awareness, self- esteem in girls and boys	Increase use of condoms	Reduce early, unwanted pregnancy and STIs amongst young people in X community
Practise persuading partner to use a condom in role-play	Increase ability to negotiate condom use		
Practise requesting condoms from health worker using role-play	Decrease embarrassment about getting condoms		
Practise putting condoms on fingers/ model	Increase self- confidence and self-efficacy in using condoms consistently and correctly		
Perform drama to other young people and adults to reduce stigma towards condoms	Increase in positive attitudes to condoms		

Using the MAPM framework to develop interventions on many levels

The summary framework below shows how different levels interrelate – the behaviours of the individual/groups of young people, of others in the immediate environment, including services providers and of institutions (policies, legislation, etc).

Interventions	Key factors influencing behaviour	Key behaviours	Health and development outcome
Framework A: Individuals and groups Sexuality and life-skills education in youth groups Drama and peer education participatory activities to increase knowledge and change norms and perceptions on STI testing and treatment	Increase young people's knowledge of importance of STI testing and treatment Increase young people's life-skills so they can seek services (sense of self-efficacy) Decrease norms amongst young people which stigmatise them using a clinic	Young people's behaviour: Increased use of clinics for testing and treatment of STIs (Other behaviours analysed on separate frameworks: e.g. condom use, abstinence, etc.)	Decrease in STIs amongst young people
Framework B: Services Training of health providers in adolescent SRH (ASRH), including attitudes towards young clients Drama and orientation meetings for adults about young people using health services for prevention, testing and treatment of STIs	Increase health providers' knowledge about ASRH and their positive attitudes towards young people as clients for SRH services Decrease in social norms stigmatising young people who use health services for testing and treatment of STIs	Behaviour of others in environment: Health workers provide quality services to young people Parents support their children accessing health services Community leaders and traditional initiators promote young people accessing treatment	
Framework C: Policy Development of young- people-specific guidelines for clinics Advocacy with Ministry of Health for a national policy on adolescent-friendly health services (AFHS) and comprehensive prevention	Clear and enforceable policy and clinic guidelines on AFHS promoted through health systems	Institutional 'behaviour': Health clinics implement policies on AFHS	

Using the MAPM framework to develop indicators

We can turn the items on the framework into indicators to measure the process (column 4), outcomes (column 3) and impact (columns 2 and 1) of an intervention. Here is an example using the first framework shown in this section.

Programme interventions	Determinants (protective and risk factors)	Key behaviours	Adolescent health and development outcomes
Number and % of peer educators and drama group members trained in SRH and interactive drama	% of young people with correct knowledge on condom use	% of sexually active young people reporting correct and consistent use of condoms	Number and % of pregnancies in girls aged 13-18 in and out of school
% of trained educators facilitating learning according to quality standards	% of young people able to demonstrate life-skills to negotiate for condoms in roleplay, ask a provider for them and put them on correctly	Numbers of low or no-cost condoms distributed to young people from different sources	% and number of young people aged 13-18 reporting STIs
Number of interactive sessions held with young people by age, sex, vulnerability and site	% of young people reporting confidence to access condoms and use condoms consistently and correctly (self-efficacy)		
Qualitative process indicators on quality of training and SRH and interactive drama education	% of young people expressing positive feelings about condom use		
The indicators in this column are mainly concerned with process: coverage, quality and cost.	The indicators here show short- and medium-term change in factors influencing behaviour.	The indicators here show short-term impact.	The indicators here show long-term impact.

10 Monitoring and evaluation

These indicators also have an in-built time scale. A five-year initiative may not be able to achieve significant impact on the right-hand column, but it should be able to demonstrate change on at least the second and third column. Programmes are often negatively evaluated by using unrealistic outcome and impact indicators, while failing to measure positive impact on intermediate risk and protective factors. When the framework has been developed based on evidence (not on assumptions), then this will indicate progress towards the final health or development outcome.

Process questions and examples

If the people involved in the programme see the processes as helpful, they are likely to be useful in the development of other programmes. The process itself may determine whether a programme has been helpful. We now outline some key questions used in monitoring with examples.

Relevance to and participation of local people, including vulnerable people

- ▲ To what extent have young people, teachers and others in the local communities been actively involved in the design, implementation, monitoring and evaluation of the drama activities, based on local information and needs to ensure relevance and local ownership?
- ▲ Have vulnerable groups been included in planning and implementing activities?
- ▲ Have cross-cutting issues of vulnerability for example, gender, disability, HIV and child protection matters been considered and the concerns appropriately addressed?
- ▲ Do the different activities address and meet the most important needs?

There is no point in doing the wrong things very well! For example, a moving and exciting story is told with brilliant graphics at every school and youth club. It does not help because the story leads people to believe that it is only abuse from wicked strangers that puts young people at risk of HIV infection. Drama activities involving local young people show the reality – it is usually people close to children who abuse them – and the audience then looks for local solutions to the problem. This is more useful, whether or not the drama looks good to an outsider's eye, because they have deep meaning for the people themselves.

Quality of interventions

There is no benefit in reaching large numbers of people if the quality of the activities is poor. We need to monitor how well activities are being carried out.

- ▲ How effective are the interventions in achieving their purpose?
- ▲ How effective is the training in enabling drama groups and SRH workers to facilitate interactive drama sessions according to quality standards?
- ▲ Are those involved in this work motivated and enthusiastic about their work?
- ▲ How well are the different activities being done? If a drama is performed poorly, we cannot expect a positive impact.

Coverage and complementarity

- ▲ Have the interventions reached their intended populations and communities? Have they connected to and complemented the work of other government and non-governmental organisations?
- ▲ How does the programme meet the needs of the community? How many people are reached and who are they?

A checklist for monitoring the quality of an interactive drama session

Objectives and activity

- ✓ The objectives of the activity are clearly stated and relevant.
- ✓ The activity helps to meet the objectives.

The quality of the drama activity

- ✓ The activity included facilitated drama and discussion.
- All the participants, including less vocal people, were actively participating in the activities as thinkers, doers and problemsolvers.
- ✓ The group enjoyed the activity and paid attention throughout.
- ✓ There was discussion at the end of the session and agreement on action points and the next session.
- People talked about drama activity and the issues it raised with friends and family afterwards.
- ✓ The community made and implemented an action plan.

Indicators to monitoring the content of a drama event

- The information given was accurate and adequate.
- ✓ The stories, role-plays and characters were believable. People engaged with them as real people in a positive way and related the issues to themselves.
- The activity provided positive role models, especially of low-status or stigmatised people. It did not stigmatise anyone.
- The activity reflected positive attitudes towards sexuality.



A story or play that seems helpful to your drama group may give other listeners a different impression!

A group put on a series of plays that showed girls assertively asking boys to use condoms, with the boys portrayed as being rather stupid. The play was meant to encourage girls to be strong and take the initiative in insisting on condom use. However, at discussions after the play, the boys kept very quiet and the girls found out later that the boys became angry when they suggested using condoms. The group decided to change the play so that it showed boys and girls being equally caring and assertive in asking partners

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Sometimes programmes reach people or groups who have few problems, leaving those in the community with the most problems untouched. For example: a drama group and SRH peer educators spend most of their time working very intensively with a few groups, who make great progress. But the vast majority of young people are left untouched by the programme. The groups they work with are in a better situation than average, and very different from those most in need.

Efficiency and cost-effectiveness

Resources are very scarce and it is important that programmes are cost-effective and sustainable in the long term.

- ▲ Have the interventions been efficient in achieving clear activities and services (outputs) in relation to the resources used (inputs)? Would alternative approaches have been more effective?
- ▲ What does the programme cost? Are the available resources used in the most effective way?
- ▲ What is the cost per person reached effectively using different types of communication methods?

For example: well-trained peer educators reach people throughout communities using locally developed stories, role-play and a good supply of condoms. This is likely to be more costeffective than a programme that relies on video shows and qualified nurse-midwives, in the clinic, for all SRH education and contraceptive supplies – even though both programmes may cost the same.

Linkage to broader policy and advocacy issues

▲ To what extent are these interventions engaged with and influencing broader issues of policy, practice and advocacy for young people's sexual and reproductive health education and services at national and international levels?

Activity: Who do we reach?

→ How to do it

- 1 Obtain or draw a map of the area that your drama groups and peer educators are responsible for, and find out the population of that area.
- 2 Break the population down into groups relevant to sexual health as far as you can. (For example males and females aged 10-14 and 15-19 years). Can you break them down further? For example, by ethnic group, location, occupation, socio-economic status or HIV status.
- **3** Put markers on the map which show the location of your activities, the area covered and the approximate numbers reached.
- **4** Mark on the map all the organisations with whom you connect and collaborate.
- 5 Talk with users of the programme, community groups and other providers to find out whether those most in need use the programme.
- 6 Discuss whether you need to reach new groups or new areas.
- 7 Discuss how you can use insights and experience gained with groups to develop relevant programmes which reach more people, particularly those most in need.

For example, you could:

- ▲ perform drama and discussion in new communities or to more groups
- work through networks of young people to share new knowledge and ideas
- ▲ use the radio to share ideas
- train more outreach workers and provide them with learning materials.

Sustainability

- ▲ Are the interventions sustainable or would they stop without the support of the programme?
- ▲ Have the capacities and motivation of community members, young people, groups and service providers been built throughout the project to enable the activities to continue beyond funding?

Impact questions and examples

Impact refers to the columns 1 to 3 in the MAPM framework on page 155.

- ▲ What are the changes in the protective and risk factors influencing behaviour?
- ▲ What are the changes in behaviour influencing SRH?
- ▲ What are the changes in SRH in young people with specific characteristics?

Positive changes in 3 and 2 indicate progress towards final impact. It is essential to measure at least the changes in 2 and 3 and attempt to measure 1 after three to five years, because:

- ▲ The programme is a waste of time and money if, at the end of the day, the needs of the most vulnerable groups have not been met.
- ▲ We can learn what works and what does not work and adjust our programme.
- ▲ The programme may have some unexpected and possibly negative effects.

Sexuality is a complex part of life that links up with many aspects of our changing culture. Changes in one part of a culture can lead to changes in other aspects of life. For example: in a culture where it is a taboo for lactating women to have sexual intercourse, encouraging them to use contraception at this time might pressure them into early sex. They might then stop breastfeeding too early.

We need to understand how the proposed changes fit into the culture and predict the possible good and bad results of a change. This requires the active engagement of young people and other key people in identifying and selecting solutions and strategies.

We need to obtain regular feedback from groups and the community on what good and bad changes they see resulting from the programme.

For examples of indicators of change at the three levels, see MAPM on page 156.

Approaches and methods for monitoring and evaluation

The importance of participatory monitoring and evaluation

Community members can agree on the indicators of progress and then find ways to measure changes in these indicators. They could make pictures or symbols to show the changes they would like to see.

It is only possible to do true monitoring and evaluation if we, the drama and SRH workers and participants, are engaged in the activities and motivated to improve things. Then we will want to find out how well we are progressing and what changes we are achieving. If people feel that they are giving information to an outsider without seeing any benefit to themselves, they will often give the 'correct' answer to impress the interviewer, or because they believe the question is an improper one. When we work with groups and communities, as described in this toolkit, we get continuous feedback from our groups about the usefulness of the activities and programme in their lives. See monitoring and evaluation in Chapter 4, page 53. By talking about what is working well and what is not, together we can adapt the programme as we go along to make it more relevant and helpful. We can share our own good and bad experiences to encourage people

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to feel free in talking about theirs. We can ask what still needs to be done to help people to talk about weaknesses.

Using interactive drama tools for monitoring and evaluation

Some tools collect numbers – for example, the number of people who used a condom last time they had sex or the number who knew three ways of stopping mother-to-child transmission. We call these **quantitative** tools.

Other tools help us talk more widely in a free way in order to understand reasons for the numbers and effects. For example, the barriers to using condoms and what can help us to use them. These are qualitative tools.

We can use many of the same participatory drama and mapping tools for monitoring and evaluation that we have described in this guide. The first time, we use the tools to learn more about how things are, and then after some time we can use the same tools and questions to find out how things have changed. For example, we might use role-play to show communication between sexual partners about safer sex. After we have showed how we would like to communicate and practised skills for some time, we could repeat the role-plays to show how things have changed.

We can use many of the drama tools in regular monitoring and mid-term or final evaluation.

For example: in Zambia, sex workers acted out drama to tell their stories of how things have changed for them. This provided positive role models and helped others to learn new ways of behaving. It is a good process for monitoring progress, finding out if the programme is relevant to people's lives and measuring achievements.

Storytelling is another good monitoring and evaluation tool. Once a month, we could sit down with our groups and listen to each other's stories. Afterwards, we can summarise the lessons learned and discuss if we need to change anything.

In the 'Most significant change' storytelling technique, community members are invited to tell stories about 'the most significant change resulting from the drama and SRH activities'. The stories are collected and read, and the community agrees on the stories that best represent the most significant changes that have taken place.

When we are monitoring or evaluating a drama activity, we can use a mixture of methods with different groups. For example:

▲ Carry out small group discussions on a specific topic – that is, focus group discussions with members of the drama group and participants before and after the performance. Encourage the group to talk to each other about the drama.

- Talk with the people involved in creating and performing the drama, to understand their view of the impact.
- ▲ Watch the performance yourself and observe reactions and the discussion after the drama. After the play, ask characters to continue in role in the 'hot seat' so that the audience can ask them questions.
- ▲ Invite people to role-play some of the scenes to show what they would like to happen.
- ▲ Hold one-to-one interviews or discussions to learn in more depth what people are thinking and feeling.
- ▲ Ask people informally (either in groups or as individuals) what effect the programme has had on their lives. Go on to talk about specific areas of expected change.

Peer-to-peer monitoring and evaluation

This activity aims to overcome the barriers to talking openly about sexual behaviour and issues. Peers are trained to become researchers - they help design the questions on the specific topic being monitored and evaluated and then use them as prompts to conversation with three or four selected peers. They invite their peers to talk about issues that concern them, such as sexual relationships or the conflicts between traditional and new cultures or services at the clinic. They talk about 'people like us', not themselves, to ensure confidentiality. After the conversation, they record their conversation in a diary in as much detail as they can. They note down key words and ideas or draw pictures that help them to remember the conversation. They then meet with the project team and share the conversations and what they learned from them. The project team probes for deeper information and records the full findings and lessons.

In monitoring, the peer researchers sit down with their peers each month and converse using the prompts. This brings out trends and changes over time. In evaluation, the peers might do research at the mid-term review or end of project, repeating some questions and also asking peers to talk about significant changes.

Observation

In observation, we live or spend time in the community and keep our eyes and ears open for expected changes in attitudes and behaviour.

- ▲ Do we see more people buying condoms?
- ▲ Do we hear of cases of abuse being taken more seriously and dealt with effectively by the community?
- ▲ Do we see men staying at home more of the time, and women talking more openly about the need for change?

We can also interview people who stay in the same community as the drama participants and young people generally – for example, family members or health workers, to see if they have noticed any changes in interest, attitudes or behaviour.

Using quantitative methods to measure change

In quantitative methods, we ask individuals the same questions and then count what percentage of them answered in different ways. We can then compare changes from the start to the middle or end of the project and/or changes resulting from different interventions. See the next page for an example of this technique.

Example of an analysis using quantitative methods to measure change

Question	Intervention							
	Interactive drama to explore causes and effects of beating and find solutions. Communication skills practice. Community drama to advocate for change.			Three educational talks with separate groups of men and women on the effects of beating and the need to stop. Posters and leaflets giving this message.				
Sex	Male %	Male % (360) Female % (343)		Male % (365)		Female % (339)		
	Yes	No	Yes	No	Yes	No	Yes	No
Did you beat your sexual partner in the past one year? Baseline survey January 2003	56	44	11	89	59	41	13	87
Did you beat your sexual partner in the past one year? Final survey December 2005	31	9	7	93	48	52	11	89

The above results show that using interactive drama with community groups, strengthening skills and advocating for change has a significantly greater impact than giving messages alone through talks to groups, posters and leaflets.

Most people do not answer questions on their sexual behaviour truthfully, particularly in face-to-face interviews, because they feel embarrassed or fear being judged or punished. Many young people do not read and write well enough to fill in the questions themselves. It has been found that the answers on sexual behaviour often do not match the biological tests, such as STIs or pregnancy. People say that they have never had sex and yet they have an STI.

See page 107 for the 'Anonymous participatory survey'. This is a good tool for helping people to feel comfortable to give true answers without risk. We could use it at the start of the programme and then every year to measure change in behaviour or attitudes.

Find out how widespread behaviour and attitude change is by carrying out a confidential informal survey. Give people plenty of opportunity to talk about their difficulties and successes with making changes in their sex lives.

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Culture and gender

What is culture and how is it changing?

Culture describes what we think, learn and do as individuals and groups in our society and what our society considers important or its 'values'. Culture gives us guidelines on how we should meet our needs, relate to each other and raise children. It gives us our basic social values. Our culture is based on our social, religious, economic and environmental situation.

Culture is constantly changing, for good or ill. It is like a living tree with its roots in the soil and the leaves and fruits constantly renewing themselves. The roots are our traditions and the leaves and fruits allow us to develop our culture, based on influences in and outside our society. Young people are often the group who want to change things and this can cause disagreements with elders. We need to work with young people to keep the best of the old ideas and bring in the best of the new.

What is gender and how is it changing?

Our sex tells us about the differences between males and females. Only females have organs and hormones in their bodies, that enable them to have monthly periods, get pregnant, give birth to children and breastfeed. Only males have organs and hormones that produce sperm and make women pregnant. These differences are the work of nature and difficult to change.

Gender describes the differences in the way that boys and men, girls and women are expected to behave – their dress, the work they do, how they relate to others and their status. These differences are created by our culture, not nature, and we can change them.

Gender and SRH

Gender norms and roles have a big impact for good and ill on the sexual and reproductive health of males and females.

How do gender norms influence sexual and reproductive health?

Positive gender norms and values promote responsibility, happy sexual relationships and safe sexual behaviour.

Gender norms that give males a higher status and more power than females may result in sexual decision-making that is harmful to both males and females. For example:

- ▲ If females are expected to be quiet and obedient, they may find it impossible to refuse unsafe or unwanted sex even if it puts them at risk of HIV, STIs or pregnancy.
- ▲ If men make all the decisions about how money is spent in the house, they may be tempted to use some for their own pleasure and not share it in the best way to meet family needs.
- ▲ If it is acceptable for men to use violence to keep females in a lower position, females will be even less able to protect themselves and the family from HIV and other problems.
- ▲ If men make the decisions about the number and spacing of children, women and children may become malnourished and sick because of too many, and close, births.

Do we want to change some things about our gender relations?

We can identify these harmful cultural practices and find ways to make them safer. Young people can aim to have and benefit equally from each other's strengths, have more equal and fair gender relations that uphold their rights, improve relationships, reduce HIV and other sexual and reproductive health problems and benefit from female wisdom and ideas. Boys and girls should be encouraged to talk and work together and husbands and wives should listen to each other, care for their feelings and solve problems together.

Life-skills

What are life-skills?

Life-skills are abilities and tools that we can use to stay healthy, safe and happy in all areas of our lives, including our sexual lives. They help us to respond to life's needs, challenges and situations well. They help us to live effectively in our society. They are developed through observing adults, being taught by family, school and elders and experiences through our lives.

Which life-skills do young people need to grow up happy, healthy and safe?

There are three types of life-skills:

1. Understanding living with ourselves
These are skills which help us to feel good
about and respect ourselves, to be aware of
ourselves in the world and how we relate to
others; to cope with feelings such as anger,
stress and frustration in a good way; to set
realistic goals and develop decision-making and
problem-solving skills.

2. Relating to other people

Relationship skills are very important in all parts of our lives. If we have good relationships with our friends, family, partners, workmates and leaders, we will feel loved and supported and can communicate well about our needs, ideas and strengths. Good relationships help us to have a happy and safe sexual life. Belonging to groups can make us feel strong and able to change things together for the better.

Skills for relationships include: communication skills such as listening, empathy and asking good questions; being able to say what we think and feel openly without harming others; refusing to do things which we don't want to do; negotiating to reach a point acceptable to both of us; forming friendships; having good gender relations; and resolving disagreements.

3. Problem-solving and decision-making skills These skills enable us to work individually and together to have a good life. They include the skills to plan, analyse and solve problems, make good decisions, think critically and creatively, make a living, lead and advocate change and monitor our progress.

How do young people learn these life-skills?

We teach personal skills by helping young people to reflect on their lives, behaviour, strengths and weaknesses. We give them opportunities to practise communication and other skills. We demonstrate through drama, song, dance or stories how others have solved problems or made good decisions and allow young people to practise the skills through analysing real-life situations and the possible outcomes of different actions. We provide good role models and constantly demonstrate the use of life-skills to young people.

Virtues

What is a virtue?

A virtue is a good quality in someone's character. For example, a person may show the virtues of caring, respect, honesty and justice in their lives. In all religions, the purpose of life is to practise virtues and develop a good character. Virtues are the good in us all. They exist in all children and adults, but their potential is not always brought out and strengthened.

Virtues are different from values. Values are what we value and care about. They could be anything from getting rich to having many wives but they do not mean that we have a good character. Values come from our own culture, whereas virtues are universal.

What virtues will help young people to grow up happy, healthy and safe?

There are over 50 well-known virtues promoted by religions and those who think about being a good person. Examples of virtues: caring, compassion, confidence, consideration, cooperation, courage, determination, diligence, forgiveness, friendliness, honesty, justice, kindness, love, modesty, peacefulness, respect, responsibility, tolerance, trustworthiness and understanding.

The practice of all of these virtues in children, young people and adults helps people to behave in a good way towards themselves and each other and makes life better and safer for everyone.

Self-esteem and confidence

Self-esteem means feeling good about ourselves. We love and respect ourselves. We expect others to do the same and treat us well. We are strong enough to say what we feel and think clearly.

People with high self-esteem do not think that they are better than other people. But they are able to accept their disappointments and frustrations and get on with their lives. Self-esteem is important in protecting ourselves from SRH problems. Adults and peers can help young people to have high self-esteem by loving, respecting and praising them and giving them tasks to do and challenges.

Our culture can lower women's self-esteem by training them to believe that they are inferior to men and should accept everything that men say. Girls and women may accept practices that are bad for them and the community.

Communication skills

What are communication skills?

We use communication skills to send and receive messages to each other. We use words, our bodies and gestures to send messages about what we are feeling and thinking. We listen to the messages that people send to us and look at their body language to understand the messages that we receive. These are skills that we use to send and receive messages between each other in person.

We can also send and receive messages through pictures, drama, radio, television, books and other art forms.

Good communication skills are very important in our lives, including our sexual lives. We often find it difficult to communicate well about sexuality and this causes problems. If we can communicate clearly and in a way that others can hear and understand us, we can cooperate, understand each other, live together and reduce many problems. Expressing our feelings and thoughts helps us to cope with challenges and to love and care for each other.

Which communication skills are important for all of us?

When we send a message, we need to use clear and honest language and say what we really mean, think and feel. Our body language should match the words we say because people believe body language more than words. When we receive a message, we need to listen carefully and put ourselves into the other person's shoes. We can ask questions which help the other person to talk more and think more deeply. For example ask questions that start with 'how', 'why' and 'what?', rather than questions which need a 'yes' or 'no' answer only. Looking at body language helps us to understand how a person is feeling. For example, are they sad or angry? We can check that we understand people by summarising what they have said and checking that we have understood it correctly or asking how they feel. Assertiveness, negotiation and conflict resolution are essential communication skills in having a safe and happy sexual life. See chapters 4, 7 and 8 for more information and activities on communication skills.

Assertiveness skills

Assertive behaviour is when someone says what they feel, think and would like in a clear and honest way that is good for themselves and the other person. Assertive behaviour increases our confidence and control over our lives.

People respect those who are assertive and relationships improve.

How to be assertive:

- ▲ Tell people your thoughts and feelings clearly and honestly. Say 'I feel/think/would like'. Do not apologise for what you think or put yourself down.
- ▲ Hold your head up, stand or sit straight in a relaxed way, make eye contact and match your facial expression to what you are saying.
- ▲ Speak so that people can hear you clearly.
- ▲ Accept other people's right to say 'no' and learn to say 'no' yourself.
- ▲ Accept praise and feel good about yourself.

 Accept true criticisms and learn from them.
- ▲ If you make a mistake say 'sorry'. If someone says 'sorry' to you, forgive them.
- ▲ Be principled and live by that. Respect yourself.
- ▲ Learn how to say that you feel angry in a way that does not harm other people.
- ▲ Do not be afraid of disagreeing with people. If everyone is able to say what she or he thinks clearly and cooperate to find a solution, everyone can win in the end.

Decision-making skills

When people make a decision, they look at different options and choose which one is the best before taking action. Often we have a choice about whether to have sex or not, but we still do it without thinking carefully about the results. It may just happen in an unplanned way because sexual feelings are strong and overcome our common sense. It is very important that young people learn how to make decisions on whether to have sex or not. They need to say 'no' and mean it until they are ready to say 'yes' at the right time. Young people can take responsibility for their sexual behaviour and its results and this will help to keep them happy, healthy and safe in their sexual lives.

Questions to help us to make a decision:

- 1. Where am I now in my life?
- 2. Where do I want to be?
- 3. What are my choices for getting there?
- 4. What are the good and bad points of each choice?

What resources would I need for each choice?

Who would support me if I made this choice? Who do I need to involve in the decision? What would help and hinder me in acting on this choice?

What might the good and bad results be?

- 5. Which is the best choice for me?
- 6. What steps do I need to take to act on my decision?

Making a sexual decision

When we make decisions about sex, we need to ask ourselves the following questions:

- ▲ Why am I thinking about having sex with this person? If we do have sex, what will be my reasons for doing it?
- ▲ Do I like or love this person? Do I have sexual feelings for them?
- ▲ Am I sober and not high from drugs? If not, would I still have sex with this person if I was sober?
- ▲ Have we talked together about having sex?
- ▲ How will I feel after we have had sex?
- ▲ Do I want to have this person as a boy or girl friend or to marry them? What does he or she want?
- ▲ If I get pregnant or impregnate, what will happen? Can we use a reliable method of contraception? What will we do if it fails and there is a pregnancy?
- ▲ How would our lives change if we had a child? Would we both share the responsibility?
- ▲ Could we get a safe abortion and how would we feel about this?

▲ Could either of us have an STI or HIV? How can we find out? How can we protect ourselves and how safe will we be?

Problem-solving skills

We all face problems throughout our lives. Asking for help and learning how to solve problems creatively are important skills to use in having a good life.

Seven steps to solving a problem

1. What is my problem?

Explain the problem clearly. If it is made up of several smaller problems, pick out the most important one that you can start working on.

- What are the causes of my problem?
 Analyse all the causes of the problem. Pick out the one which is most important and you can do most about to start with.
- 3. What are the possible solutions to the problem?

Identify all the options for solving the problem. Try to think of some new options if the ones that you have are not helpful.

4. Which is the best solution for me, and those I care about?

For each option, think about what you will need to do; what resources you will need and who will help you. How practical is that option? Think about the good and bad results of that option. On the basis of this, choose the most practical option with the best likely results.

5. What steps should I take to act on this option and when will I take them?

Making an action plan helps people to carry out their decisions one step at a time and monitor progress. This is motivating and builds confidence.

Who and what do I need to support me?
 Include in the plan ways to get needed resources and to engage helpers in providing support.

7. How will I know that I have solved the problem successfully?

It is motivating to have a clear idea of how we want things to be when the problem is solved. This also allows us to monitor and progress and adjust the plan as we go along if necessary.

Seeking help with a problem

Knowing where and how to seek help for problems and using this knowledge assertively is an important life skill. We can teach boys and girls that they have a right to help and encourage them to seek the best help.

Girls and boys often keep silent about problems they are facing in puberty and with their sexuality because they fear that they will be scolded for thinking about these things. Boys and men may feel that they are supposed to know how to solve problems because they are male. However, helping each other to solve problems makes all of us stronger as a peer group and a community.

Girls and boys have a right to correct and full information and help on everything to do with puberty and sexuality. Young people need helpers who have virtues and skills and who are trustworthy, caring and show empathy. Young people need to know the people and places to go to for help with different problems. For example:

- ▲ the clinic for health problems
- ▲ the traditional counsellor for puberty questions
- school for information
- ▲ the church for spiritual counselling
- support groups for help with living with HIV.

Boys and girls can learn to be strong and respectful in asking for help when they need it. Boys and girls can help each other as they are growing up by asking for and giving help to family and friends. Married couples should also

help each other and use the health services if they have any needs or problems to do with sexual or reproductive health. For example, during pregnancy and childbirth; problems in becoming pregnant or with HIV and STIs.

Traditional counsellors can work with the community to build on the existing help offered to young people so that it is easy for them to use and it meets their needs.

Friendship

Making and keeping good friendships is an important skill that helps young people to grow up happy, healthy and safe. If boy and girlfriends and married couples are good friends as well as lovers, their relationship is more likely to continue happily.

Good friends behave towards each other in the following ways:

- ▲ We share our ideas, feelings and dreams openly with our friend.
- ▲ We listen to our friend with all our heart and mind.
- ▲ We forgive and forget quarrels. We are willing to change if we see that we are doing wrong.
- ▲ We don't push each other to doing things we don't want to do.
- ▲ We are loyal and stand by each other when people are against us.
- ▲ We keep promises and know right from wrong.
- ▲ We love, respect and value each other.
- ▲ We imagine how it feels to be our friend and see things from their point of view.
- ▲ We share our time and things with them.
- ▲ We want the best for them.
- ▲ We solve problems together.

Love

Love is a special feeling that feeds our hearts. Love is accepting and caring for people just as they are and caring enough about them to help them to do better. Loving helps others to feel important and happy and become gentler and kinder.

Love is treating others the way that you would like them to treat you, with care and respect.

We can feel and show love to many different people in our lives. Strong love between parents and children starts at birth for many people and lasts for a lifetime. Parents and children show their love in physical ways by holding, breastfeeding, cuddling and kissing. We may hug and touch friends and family whom we love without any sexual feelings.

When we talk about 'falling in love' we often mean having sexual feelings as well. We find a person who is very special to us, who we want to be with, listen to, touch and get close to with our hearts, minds and bodies. We may show love in the ways described above and also by pleasing each other sexually. Sometimes people say 'I love you' when they only want to have sex with you, not love you.

If two people love each other and have sexual feelings as well, they can find ways to show their love without having sexual intercourse. Because they care about each other and find joy in being together as loving friends, they are able to wait for the right time for them to have sexual intercourse. If they do have sex, they will care about each other enough to protect themselves with condoms.

Love is an important part of a good marriage. Partners who love each other can find ways to talk about and solve problems. They are willing to make joint decisions that benefit both of them.

Respect

Respect involves loving each other and ourselves. When we are respectful we treat others as we want to be treated.

People earn respect through their good qualities and behaviour. You do not have to respect someone who is treating you badly. If you grow with respect, that is the beginning of good life.

Growing up for boys and girls

Puberty is the time when boys and girls start to change from a child to an adult. Adolescence is the period from puberty to adulthood. Most children reach puberty between the ages of 10 and 16 years.

Some of the physical signs of puberty are the same in boys and girls:

- ▲ faster growth
- ▲ change in body shape
- ▲ sweating more and different-smelling
- ▲ pimples are common
- underarm and pubic hair grows
- ▲ sexual feelings
- ▲ changes in behaviour.

Signs of puberty in boys:

- ▲ Voice becomes deep.
- ▲ Shoulders get wider.
- ▲ Chest grow bigger and stomach flatter.
- ▲ The penis and testes grow and produce sperm. The boy may ejaculate at night in wet dreams.
- ▲ Facial hair starts to grow.

Signs of puberty in girls:

- ▲ Breasts and sex organs grow.
- ▲ Hips get broader and waist narrower.
- ▲ The ovaries start to produce eggs.
- ▲ Once a month, blood starts coming from the vagina. This is called menstruation.

- ▲ A sweet-smelling white liquid also comes from the vagina.
- ▲ Girls may dream about sex and find they are wet between their legs in the morning.

Boys and girls often worry that their bodies are not normal as they are growing up. Children grow at different rates and have different sizes of penis, breasts and other parts. They are all fine and can normally make babies.

The chemicals (hormones) that change the body also change the mind, behaviour and emotions as we grow up. Young people have to find an independent identify and self-image as they grow up. This is normal. The changes in the body happen faster than the other changes. A boy and girl may be able to make a baby but not be mentally mature enough to raise it.

Growing up for boys - wet dreams

When a boy reaches the age of about 12, the male sex hormones tell his testes to produce sperm. The sperm goes through a tube to the prostate, where it is mixed with a milky liquid to become semen. This is stored until it comes out through the penis. It comes out of the penis in quick short bursts. This is called ejaculation. Sometimes a boy's first ejaculation happens at night when he is asleep. This is called a wet dream. The boy may have a sexy dream when it happens.

Wet dreams are normal. They are the body's way of practising for making babies. Some boys have them regularly for some years. Others have fewer.

Boys should feel good about having wet dreams and not feel worried or shy. They mean that his body is working well. Wet dreams do not mean that a boy should start having sexual intercourse with a girl. The wet dreams take care of the extra sperms. The boy may be capable of making a girl pregnant but not of being a father.

Girls also have sexy dreams and wake up wet between their legs. This shows that the girl is growing up. When she starts to have sex, the wetness will protect the vagina and make sex comfortable.

Growing up for girls - menstruation

After puberty, girls and women bleed through the vagina every month for three to six days. This bleeding is called 'attending monthly periods' or menstruation. It is normal, healthy and clean. Girls start their periods at different ages from about 10 to16 years. It is normal that girls start their menstruation at different times. If a girl gets to 20 years without having a period, refer her to the hospital, where they can find out what is happening.

Girls do not have to have sexual intercourse to start their periods. There is no need to frighten girls with stories of witchcraft and death and give them medicines to start menstruation.

Menstruation happens when an egg is released from the ovary every month. The egg goes down the Fallopian tube towards the womb. The womb lining become thick to make a nest if a baby comes. If the girl has sexual intercourse while the egg is in the Fallopian tube, the sperm may join with it to make a baby. The baby will grow in the wall of the womb for nine months. If the egg does not meet a sperm, the womb lining breaks down. It leaves the body through the vagina with the egg as blood during the monthly period.

Periods mean that a girl can get pregnant if she has sexual intercourse. A girl can get pregnant the first time she releases an egg, two weeks before she sees her first period, When she starts her periods, they are irregular and she could get pregnant at any time during the cycle.

Helping girls to look after themselves during menstruation

Girls may worry about menstruation because of the harmful attitude that menstrual blood

is dirty and secret, and their difficulties with keeping clean outside the house, for example, at school. In fact, periods are clean, healthy and not dangerous.

Some girls have pain during periods. Exercises, deep breathing, rubbing the belly and back and painkillers can reduce the pain.

Girls must keep themselves clean and healthy during menstruation.

- ▲ Cloths: Change them frequently and wash them with soap and dry in the sun or iron them.
- ▲ Toilet roll or cotton wool: Be careful that bits of toilet roll or cotton wool do not remain in the vagina for more than eight hours because they can cause infection.
- ▲ Sanitary towels: These are special pads made of cotton wool that are worn in the pants. They should be changed frequently to avoid smelling and infection.
- ▲ Wash at least twice a day during periods.
- ▲ Drink a lot of water and eat foods that replace blood such as beans, green vegetables, peas, meat, fish and eggs.
- ▲ It is normal for girls to feel moody before their periods.

Hygiene

- ▲ Wash the penis and pull the foreskin and wash underneath with clean water.
- Wash the vulva with water. Avoid using strong soap as it can irritate the delicate skin. Do not wash inside the vagina, because it keeps itself clean.

Sexual feelings

At puberty boys and girls start to think about sex and have sexual feelings. These feelings are good and natural and last for our whole lives. These feelings encourage men and women to have sexual intercourse, which is needed to make babies.

Sexual feelings are caused by sex hormones – chemicals in the body which make us feel sexy. When we feel sexy, the penis becomes erect, the vagina becomes wet, the heart rate and breathing get faster and we feel excited. Touching sensitive parts of the body for – example, the clitoris, nipples, penis, buttocks and other parts, increases sexual feelings.

We can decide what to do with our sexual feelings, and use our brains to manage them safely. We do not have to have sexual intercourse because we feel sexy. We will not get sick, our testicles will not burst and our sexual organs will not stop working or disappear.

We can reduce the feelings of being sexy by thinking about and doing something different; for example, sport, homework, talking with friends or having a cold shower. We can stroke our genitals until we reach orgasm. This is called masturbation. We can enjoy sexual activities that do not involve sexual intercourse, if we know that we can stop in time.

If we are feeling sexy we can avoid being alone with someone who gives us those feelings. Alcohol and drugs can increase sexual feelings and make us less careful. If we do decide to have sexual intercourse, we can use a condom to reduce the risk of infection and pregnancy. Condoms are about 90% effective.

Protecting our fertility

A boy starts to become fertile at puberty, when he begins to make sperm in the testes and has wet dreams. When he ejaculates mature sperm, he is fertile.

Girls are born with thousands of tiny, unripe eggs in their ovaries which they will release each month until they reach menopause. A girl will release one of these eggs 14 days before her first period and if she has sex, she can become pregnant because she is fertile. Boys and girls can make a baby together as soon as the sperm and eggs are mature and they meet after intercourse. People of all sizes and shapes can make a baby. It does not matter whether the penis or breasts are large or small; most young people are fertile.

Boys and girls need to protect their fertility as they grow up so that they can enjoy healthy children when they are ready. Boys and girls can protect their fertility in these ways:

- Avoid pregnancy before you are 18 years old. Before this, a girl may have difficulty delivering the baby safely and may injure her reproductive organs.
- Avoid getting an STI, including HIV, by either abstaining from sex, using condoms or having sex with one uninfected partner who also only has sex with you.
- ▲ If you get an STI, get treatment quickly to prevent damage to the tubes that carry the sperm and egg so they meet for fertilisation.
- ▲ Prevent infection of unborn babies by having a test for STIs and HIV before trying to get pregnant or early in pregnancy. You can then get treatment for STIs and take steps to reduce HIV infection in the baby.
- ▲ Avoid unsafe abortion because it can damage the reproductive organs and cause infertility.
- ▲ Eat healthy food and avoid drugs and too much alcohol as you are growing up.

Having a baby at the right time

Couples need to plan for pregnancy so that they are ready and able to care well for their baby. Pregnant women and new mothers need love and support from the father and others for the mother and baby to be healthy.

Childbearing is safer and healthier for the mother and children when:

- ▲ the mother is at least 18 years old
- ▲ the space between the births is at least three years

- ▲ women have no more than four children
- ▲ the mother is less than 35 years old
- women avoid unsafe abortion.

Pregnancies in girls under the age of 18 years may cause these problems:

- ▲ Delivery may be difficult and baby may be harmed or die. This is true whether the girl is married or single.
- ▲ The mother may leave school and cannot find well-paid work.
- ▲ The father has to pay damages if the girl is unmarried.

However, with help from family and friends, young people can become good parents and go back to their education later.

Having a happy, healthy and safe marriage

Happy, safe and healthy marriages that last for a long time help to reduce the spread of STIs and HIV and enable couples to live positively with HIV.

What helps a marriage to be happy, healthy and safe?

- ▲ Friendship and love
- ▲ Choosing a good partner
- ▲ Marrying at the right time
- ▲ Preparing well for marriage
- ▲ Communicating well in marriage
- ▲ Using life-skills and showing virtues
- ▲ Gender equality and mutual respect
- ▲ Having a happy sexual life
- ▲ Both having an HIV test and practising safer sex if either of you is positive
- ▲ Taking steps to reduce the risk of HIV and STI infection
- Planning for children together
- ▲ Solving problems in marriage, including sexual problems

- ▲ Avoiding domestic or sexual violence
- ▲ Cooperating to bring in an income and share household resources fairly

Enjoying sexual activity

Women and men both have sexual feelings and it is OK for either to propose sexual activity to the other. Men and women should both enjoy sexual activity. They enjoy it more if they help each other to have high sexual feelings.

During sexual activity, sexual feelings increase until the man and woman reach orgasm and enjoy great pleasure. During orgasm, the man releases semen (ejaculates). The woman has muscle contractions in the vagina and abdomen. Telling each other what gives us pleasure in sexual love can increase enjoyment for us both and brings us closer in love.

Women and men both have the right to say that they do not wish to have sexual activity. The partner may feel hurt so it is important to explain in a caring way why they do not want to have sex. They should not force each other to have sex. This is against their rights and shows a lack of caring. It damages the love between the couple.

Sometimes a man or woman is not able or does not want to have sexual intercourse.

A couple can satisfy their needs without having sexual intercourse in many different ways, limited only by their imagination: For example:

- ▲ The penis is put in the armpit or between the breasts or thighs.
- ▲ The couple move together with their clothes on.
- ▲ The man and woman stroke each other's genitals. This is called masturbation, which one of them could also do alone.
- ▲ Enjoying sexual love without intercourse may help couples to have sex only with each other and prevents HIV transmission.

Solving problems in friendship and marriage

We all face problems in our friendships and marriages from time to time. It is important that we talk to each other in a good way to solve these problems.

Trustworthiness, honesty and caring are all important virtues in friendship and marriage.

Sometimes friends or spouses do not understand each other well. Sometimes we feel angry or upset. Then we may think only of our own feelings and not listen to our friend's point of view. But if we listen carefully and imagine that we are in our friend's place, we can see how they are feeling. Then we can talk in a caring way and find ways to solve problems and understand each other better.

If we are feeling hurt or confused in friendship or marriage, it is best to tell our friend how we feel and what we would like. They can then say what they would like and we can discuss and agree. Sometimes a person we both trust can help us to talk to each other.

How to avoid pregnancy

- ▲ Abstinence is the best way to avoid pregnancy, because it is 100% safe.
- ▲ Enjoying sexual activities such as kissing, cuddling, dancing and masturbation. Couples should take care because the girl can get pregnant if the semen gets onto the vulva because sperm can swim into the vagina.
- ▲ Using a contraceptive.
- ▲ Practising withdrawal. This is when the man pulls his penis out of the woman before he ejaculates. This is not very safe because men release some fluid before they ejaculate which can contain sperm or HIV and they do not always pull out in time.
- ▲ Fertility awareness is when the woman learns about her menstrual cycle and body so that

she can know when she is fertile. The couple then have sex in the times when she is not fertile. Women can use different-coloured beads to count the days of their cycle and find out when they are fertile. This method is not good for young girls because their cycles are irregular.

What are contraceptives?

Contraceptives are effective ways that men and women can use to avoid pregnancy.

- ▲ Barrier contraceptives, such as a condom, stop the sperm getting into the vagina (condoms) or cervix (diaphragms) to meet the egg.
- ▲ Hormonal methods (the pill, injection and implants) stop the egg leaving the ovary and change the cervix and uterus so that fertilisation cannot happen.
- ▲ The IUD or loop is a small plastic object put into the uterus. It stops the egg and sperm meeting.
- ▲ Sterilisation is an operation which stops men and women from ever having a baby again. The tubes which carry the egg to the womb and the sperm to the penis are cut so that the egg and sperm cannot meet.

None of the below methods prevent pregnancy:

- Sex standing up.
- ▲ Urinating after sex.
- ▲ Washing after sex.
- Having sex in the water.
- ▲ Having sex during menstruation.
- ▲ Having sex with a boy younger than 15.
- ▲ Having sex with a girl who hasn't started her periods.
- ▲ Having sex with a mother who is breastfeeding.

Using a condom correctly

Using a male condom

It is very important to use the condom correctly every time you have sex. Otherwise it can break or slip off. If you only use the condom sometimes, it will not protect you well.

- ▲ Obtain condoms which are stored in a covered package out of the sun and have not reached their expiry date.
- ▲ Check to see that the package has no holes and the condom looks new. Do not unroll and blow into it to check that it does not have holes. It will not go on properly. Be careful not to tear it when you open the package.
- ▲ Put the condom on before putting the penis anywhere near the vagina and keep it on until you finish sex.
- ▲ Wait until the penis is erect and the vagina wet before applying it.
- ▲ Put the condom with the tip upwards and roll on the outside. Pinch the tip of the condom with one hand to leave room for the semen so the condom does not burst.
- ▲ Unroll the condom all the way down the penis towards the body.
- ▲ The vagina and condom need to be wet and slippery so that the condom does not break and sex is comfortable. Some condoms have a slippery fluid on them. Use saliva if the condom gets dry.
- ▲ Never use Vaseline, vegetable oil, body lotions or oils to make the condoms wet. Oils make the male condom burst.
- ▲ Enjoy sex together. The condom helps the man to go on for longer so the woman can reach orgasm.
- ▲ Condoms rarely break. Dryness and having intercourse for a long time, for example over 30 minutes can cause breakage.
- ▲ If you feel the condom break or slip off, stop sex at once, keep hold of the condom if you can and pull out. Use fingers to pull the condom out of the vagina.

- ▲ If the man has not yet ejaculated, the risk of pregnancy and infection is small. If he has ejaculated, go for emergency contraception immediately to prevent pregnancy.
- ▲ When the man has ejaculated and before the penis becomes soft, carefully pull out of the vagina. Hold the top of the condom to stop any semen spilling and pull it off.
- ▲ Tie the condom, wrap it in tissue and either bury it or throw it in a pit latrine.

Using a female condom

- ▲ Remove the condom from the package and rub the outside of the bag together to spread the lubricant inside it. Make sure that the inner ring is at the closed end of the bag and hold the condom with the open end hanging down
- ▲ Squeeze the inner ring with the thumb and middle finger and put it into the vaginal opening. Push the inner ring and the bag up into the vagina, as far as you can, with your first finger. The bag is slippery, so you need to do this slowly and carefully.
- Make sure that the condom is put in straight and not twisted in the vagina. The outer ring and about two centimetres of the bag will now lie outside the vagina.
- ▲ Guide the penis into the condom to make sure that it does not slip into the vagina outside the condom.
- ▲ Check to see that the condom is still in place and that the penis is still going into it. If the condom slips during sex, stop immediately and take the condom out. Put in a new one and add extra lubricant to the opening of the bag or penis. Female condoms are made of plastic therefore oil-based lubricants such as Vaseline can be used.
- ▲ After sex, you can stay together because it does not matter if the penis goes soft. When you are ready to pull out, squeeze and twist the outer ring gently; then pull the condom out, keeping the semen inside. Wrap the condom and throw it away or bury it.

Abortion

Abortion is the ending of a pregnancy before the baby has grown enough to live outside the mother.

Natural abortion is when the baby is born before it can survive. This can happen because the baby is not growing properly. Forced abortion is when a person does something to end a pregnancy. Women may do this because they are sick, have too many children or too close together, have been raped, want to continue school, are too young or are pressured by the father or family to end the pregnancy.

A legal abortion is one approved by a medical practitioners because to continue the pregnancy would harm the mother's physical or mental health. A safe abortion is one carried out by a medically qualified person in a clean environment during the first three months of pregnancy. Unsafe abortions are carried out by unqualified people using dangerous methods such as poisonous herbs and inserting sticks in the uterus. Never use a dangerous method to help a girl have an abortion. Unsafe abortion is a crime and you may kill or injure her. If someone has an abortion and gets fever, abdominal pains, smelly fluid coming from the vagina or heavy bleeding, they should rush to the clinic or hospital, because this can cause infertility or death.

Teach girls and boys to avoid unwanted pregnancy by abstaining or using a contraceptive.

What is HIV and AIDS?

HIV is the Human Immunodeficiency Virus that can lead to AIDS. Our immune system defends us against germs that make us sick. HIV weakens our immune system so that we get sick more often and it is harder to recover. If we do not get treatment for HIV with antiretroviral (ARV) medication we may get more serious illnesses and are diagnosed with AIDS.

'AIDS' stands for Acquired Immunodeficiency Syndrome. This means a group of illnesses resulting from low immunity, which may lead to death. Those of us living with HIV can remain healthy for many years before the immune system becomes weak. We are living with HIV – we do not have AIDS. See Chapter 3 for information and activities on how HIV is transmitted.

Prevention of HIV

We can all take some action to reduce our risk of HIV infection.

Having an HIV test

We can live with HIV for a number of years and not know it. The only way we can find out if we are living with HIV is to take a blood test which shows whether our immune system has produced antibodies to HIV.

If the test result is positive, we have HIV but unless we have symptoms of AIDS we do not have AIDS. If we live positively and have ART at the right time, we can live healthily for many years and not infect anyone else.

If the test result is negative, we may not have yet made antibodies to HIV. We should wait for three months without doing anything to put ourselves at risk of HIV and have another test. If we are still negative, we can protect ourselves from HIV and stay that way.

The benefits of having an HIV test

- ▲ If we are positive, we can live positively and avoid infecting others by enjoying sexual activities which do not involve sexual intercourse without a condom.
- We can take steps to avoid getting more HIV into our bodies. This can make us get sick more quickly or stop ARVs from working well.
- ▲ We can decide what to do about having a child and take steps to avoid transmission of HIV to the baby.

- ▲ We can start taking ARVs at the right time and stay healthy for longer.
- ▲ If we are negative, we can protect ourselves and stay that way. In a sexual relationship where neither of us have sex with anyone else, we can use contraceptives other than condoms if we choose to do so.

Prevention of sexual transmission

Abstinence is the only 100% safe way of protecting ourselves from pregnancy, STIs and HIV. Some people take abstinence to mean no sexual activity of any kind. Here we are taking abstinence to mean that a person does not have sexual intercourse in the vagina or anus. Young people can delay starting to have sexual intercourse and also stop for some time after they have started to have sex.

The advantages of abstinence

- ▲ It is a 100% safe way of protecting ourselves from pregnancy, STIs and sexually transmitted HIV.
- ▲ If we value sex as something special meant for marriage, we will feel happy if we keep to your values.
- ▲ If our friends and family value sex in this way, we will be accepted and have a good reputation.
- ▲ We will be able to enjoy ourselves with more friends without being tied to one relationship.
- ▲ We may have a bigger choice of marriage partners if we have more boys or girls as non-sexual friends, do not have a child and have a good reputation.
- ▲ We do not risk being emotionally hurt or used.
- ▲ We may have more energy for study and work.

Having sex with each other, without a condom, will only protect us if we are both free of HIV. If either of us contracted HIV before we met, then having frequent sex without a condom, as in marriage, puts us at high risk.

If we have both have unprotected sex with two partners over the same period of time, and those partners also have two partners and so on, if any of one in the network gets HIV, the rest of us are at high risk. This is because there is a large amount of HIV in bodily fluids when people are first infected and this easily transmits to others.

People can choose to have sex only with each other whether they are married or not.

Having an HIV test tells us whether we have HIV or not. This helps us to protect ourselves and our partners, and our unborn children and breastfeeding children. If one or both of us has HIV, we can use condoms or practise other safer sex methods to protect each other.

Prevention of parent-to-child transmission

Before and during pregnancy the man and woman can:

- ▲ have an HIV test to make an informed decision about pregnancy
- ▲ use condoms if one of them is living with HIV except during the fertile time
- ▲ start ARVs if advised by a health worker
- ▲ have sex only with each other if they are both free of HIV
- ▲ go for an STI check-up and have any STIs treated.

During pregnancy the man and woman can:

- ▲ practise safer sex by abstaining or using condoms if either partner has HIV, if they do not know their HIV status or if either is having sex with another person
- ▲ have an HIV test and go to the ante-natal clinic regularly.

During delivery:

▲ the mother and newborn baby take ARVs as advised by the health practitioner to reduce the risk of HIV transmission

- ▲ the mother should continue to take ARVs and treatment for illness to protect her own health
- ▲ the mother has a Caesarean section to take out the baby quickly if labour is long
- ▲ the baby is washed and birth fluids quickly removed from the eyes, nose and mouth.

During breastfeeding the mother should:

- not breastfeed at all; give suitable milk substitutes, or
- ▲ give only breast milk (give no other foods and drinks) for the first six months – then stop completely at one time and give other suitable foods
- ▲ continue to take ARVs and practise safer sex
- eat well and look after her health
- ▲ take the baby for regular check-ups and soon as there is any problem.

Living with HIV

Those of us living with HIV can have a good life for a long time by living positively. We can:

- ▲ eat well
- ▲ protect ourselves from infections
- ▲ get treatment for illnesses early
- ▲ continue with our work and social life when we are well
- ▲ protect ourselves and others from HIV and STIs by practising safer sex
- get support and love from our friends and family
- ▲ take steps to prevent HIV passing to the baby if we get pregnant
- ▲ take ARVs to protect our immune system.

Those of us who do not know our HIV status can also live positively as if we do have HIV. This will protect us and others from HIV and keep us healthy.

Those of us living with HIV have the same human rights as those who are negative or do not know their status. We have the right to:

- ▲ life
- education
- ▲ good nutrition
- ▲ being treated the same as everyone else and not be stigmatised
- ▲ make our own decisions about marriage, sexual activity and having children
- ▲ work
- ▲ health services and care
- ▲ privacy and confidentiality.

Those of us with HIV contribute to coping with the epidemic. Those of us who go for a test are courageous and responsible.

Many of us do not know our status because we are too fearful of the result. We pretend that we are free of HIV and look down on others. We often look down on, and treat badly, those of us who know that we are living with HIV or whose family live with HIV. Looking down on or badly treating people with HIV has many bad effects. Those of us with HIV make an important contribution to solving the problem of HIV in these ways:

- ▲ We act as role models for others to get tested and live positively.
- ▲ We show that one can live well for a longer period with HIV and reduce fear.
- ▲ We belong to post-test clubs and support groups, which provide essential support to others with HIV.
- ▲ We motivate and teach others how to avoid HIV by telling our stories and making HIV real.
- ▲ We act as leaders in taking action on HIV in the community, district and nation. We advocate rights, demand services and fight bad treatment. This makes life better for others with HIV and allows people to go for a test and be open about their HIV status.

STIs and their signs and symptoms

STIs are contracted by a person engaging in sexual activities with a person who has the germs in his or her body. They include gonorrhoea, syphilis, chancroids, chlamydia, herpes and HIV.

It is important to go quickly for treatment if we have any of the signs and symptoms below, because untreated STIs have serious consequences.

Symptoms of STIs for both men and women

- ▲ Burning pain when passing urine
- ▲ Sores, rashes or small hard bumps on the genitals, lips or anus
- Unusual liquid or discharge from the penis or vagina which may smell and be thick or yellowish
- ▲ Itching in the genital area
- ▲ Swollen glands in the groin

Symptoms of STIs for women

- ▲ Lower abdominal pains, fever and shivering
- ▲ Pain when having sex
- ▲ Bleeding from the vagina that is not a period

Symptoms of STIs for men

▲ Pain or swelling of the testes

Many females do not show any signs or symptoms when they have an STI. If a male knows he has an STI, he must tell his partner to go for treatment; otherwise she may become very sick or infertile or infect their unborn baby.

Consequences of STIs

Most STIs are curable if they are treated quickly and correctly. If left untreated, they can cause serious problems.

- ▲ Serious illness and death. Syphilis can attack different organs and finally cause death. HIV destroys the immune system and causes death without treatment.
- ▲ Infertility. STIs can cause infertility by blocking the tubes that carry the egg to meet the sperm for fertilisation. They can also block the male tubes and damage the testes.
- ▲ Pregnancy in tube. Blocked tubes can cause the baby to remain in the tube rather than move to the uterus. As the baby grows the tube can burst and the mother bleed to death.
- ▲ The unborn baby is infected. The baby may be stillborn, or be born blind, disabled or infected, for example with HIV.
- ▲ Some infections are not curable. Infections such as HIV and herpes stay in the body for life. The illness can come back and go on damaging the body. Medicines can help us to live with them.
- ▲ HIV is more easily transmitted in a person with an STI. STIs cause sore and discharges which make it easier for HIV to enter the body.
- ▲ Quarrels and divorce. STIs can lead to loss of trust, hurt feelings and quarrels. The couple may separate.

Treatment for STIs

It is very important to go for treatment quickly if we have any signs or symptoms of an STI.

Go to a clinic rather than traditional healer, because the clinic treatment kills all the germs so they do not continue to harm you.

We have a right to treatment. Do not feel shy or ashamed. Health workers at the clinic should treat us with respect. Tell your sexual partners to go for treatment quickly, otherwise they can have serious problems and infect you again.

Take all your medicine as you are instructed, otherwise the germs will stay in your body and make you ill. Do not share your drugs with your

partner or friend – neither of you will be cured and the drugs will no longer kill the germs.

Do not have sex until you have been fully treated, or use condoms. In the future, protect yourselves from STIs.

Prevention of STIs

We can all make a choice to reduce our risk of STIs in the same way as described for HIV. Different choices suit us at different times of our lives.

We can't tell by looking who has an STI as some STIs do not show signs and symptom Having sex only with each other reduces our contacts with people who may have an STI, but it is best we both to go for a check-up if we are sexually active.

What is sexual abuse?

Sexual abuse is when an adult makes sexual contact with a child in an unwanted and harmful way. Any sexual contact with a child under the age of 16 years is illegal.

Sexual abuse includes:

- ▲ looking at sexual parts
- ▲ touching any part of the body in a sexual way, especially the breasts, genitals, etc.
- ▲ oral, vaginal or anal intercourse
- ▲ forcing children into selling sex
- ▲ showing children pornographic materials.

Why is sexual abuse harmful and wrong?

Sexual abuse is a crime and people who do it should be arrested, tried and punished. Sexual abuse does great harm to children. They may:

- ▲ contract STIs or HIV or get pregnant, which can result in serious illness, death and infertility
- ▲ feel sadness, guilt, shame, fear and mistrust
- ▲ have very low self-esteem
- go back to an earlier stage of child development
- ▲ hate to be touched
- ▲ be unable to form happy and healthy sexual relationships, which may result in abused children being more at risk of HIV later in their lives.

What to do if a child is sexually abused

The abused person should not wash or change their clothes before going to the clinic or hospital. The police and clinic will need to examine the person to collect evidence.

Report it to the community leaders, the community police or nearest police post and the Victim Support Unit or Probation Office. Go to the clinic hospital with the abused person, The clinic will examine the abused person to

collect evidence. If necessary, the clinic will give emergency contraception to prevent pregnancy, and medicines to prevent HIV and STIs.

Involve social welfare in finding the child a safe place to live. If the abuse happened at home the child may need to live with relatives or be helped by social welfare.

Children who have been sexually abused need people who can help them to regain a sense of control, safety and self-esteem.

How to counsel and help a child who has been sexually abused

- ▲ Say the following: 'I believe what you told me. Thank you for telling me that this has happened to you. I am going to try to help you. I'm sorry that this has happened to you. It is not your fault. What this person did is very wrong.'
- ▲ Encourage the child to talk about what happened and how they feel. Show empathy and understanding.
- ▲ Stay calm, reassuring and non-judgemental.
- ▲ Answer the child's questions directly and honestly in a way suitable for their age.
- ▲ Explain to the child what is going to happen next.
- ▲ Tell them who else may need to know about the abuse; for example, the police. You cannot keep it a secret, because it is a crime.

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Abbreviations

AIDS Acquired immune deficiency syndrome

AFHS Adolescent-friendly health service

ASRH Adolescent sexual reproductive health

ARV Antiretroviral

ART Antiretroviral treatment

CBO Community-based organisation
HIV Human Immuno-deficiency virus

MAPM Mapping adolescent programming and

measurement

NGO Non-governmental organisation
PLA Participatory learning and action
SRH Sexual and reproductive health
STI Sexually transmitted infection

VCT Voluntary counselling and testing

YHHS Young, Happy, Healthy and Safe

YOCIC Youth for a Child in Christ



Who is the International HIV/AIDS Alliance?

Established in 1993, the International HIV/AIDS Alliance (the Alliance) is a global partnership of nationally-based organisations working to support community action on AIDS in developing countries. These national partners help local community groups and other non-governmental organisations (NGOs) to take action on AIDS, and are supported by technical expertise, policy work and fundraising carried out across the Alliance. In addition, the Alliance has extensive regional programmes, representative offices in the USA and Brussels, and works on a range of international activities such as support for South–South cooperation, operations research, training and good practice development, as well as policy analysis and advocacy.

Our mission is to support communities to reduce the spread of HIV and meet the challenges of AIDS. To date we have provided support to organisations from more than 40 developing countries for over 3,000 projects, reaching some of the poorest and most vulnerable communities with HIV prevention, care and support, and improved access to treatment.

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