

https://dspace.org/

Removing the log in the other's eye: contradictions affecting HIV and AIDS interventions in Malawi, a case study of the Make Art/Stop Project

Abdulla, Sharifa

2013-09-13
http://hdl.handle.net/10539/13135

Downloaded from a DSpace repository. https://dspace.org/

Removing the Log in the Other's Eye: Contradictions Affecting HIV and AIDS Interventions in Malawi,

A Case Study of the Make Art/Stop AIDS Project

By

Sharifa Abdulla

Supervisor: Dr. Kennedy C. Chinyowa

This research report has been submitted to the Faculty of Humanities, University of the Witwatersrand in partial fulfillment of the degree of Master of Art in Dramatic Arts

March, 2013

Statement of Originality

This work is my own. It has not previously been submitted for a degree or diploma in any University. To the best of my knowledge and belief, the research report contains no material previously published or written by another person except where due reference is made in the report itself.

Signed 

Acknowledgements

To you my God, the God of all creation I give my first gratitude. I could not have made it without you. May Your Name be glorified in my life forever!

Thanks to my supervisor, Dr. Kennedy Chinyowa for his guidance and patience. With your guidance and never ending support I made it this far. You pushed me beyond what I thought were my limits, in a kind and fatherly way. Stay blessed.

Also thanks to Drama for life for the extensive experience and support.

To Goethe Institute for the scholarship to study for this MA

Thanks to my mentor Reason Beremauro from the Humanity's mentorship program

To Make Art/Stop AIDS and all the Participants

Thanks to Rosena Nhlabatsi and Smith Likongwe for reading my work and giving me valuable feedback in the course of my writing. Also thanks to Galia Boneh, Prof C. Kamlongera and Maria Soko Mpesi for your support.

Another load of thanks goes to my colleagues for making my academic journey more engaging and manageable.

Thanks to all my family for giving me motivation: My aunt Aisha Wheeler, little sister Hagira, Shamila, Eugene, Mark, Noel, Bonda, Sharon, Zakera and my father Rafique. Thanks also to all my friends.

A special thanks to Theogene Niwenshuti (Amani). My best of friends! You believed in me even when I didn't believe in myself. Thank you!

Dedication

To my wonderful mother Edith Edina Mbuzi Matekenya (a Matchona). Mayi wanga, ambuye adasankha inu kuti mundipatse moyo. Zikomo.

Abstract

Many efforts have been made to reduce the impact of HIV and AIDS in Malawi. Some of these intervention efforts seem to reproduce the very effect they are meant to reduce thereby creating contradictions that thwart intervention efforts. It appears that the means by which intervention efforts attempt to liberate communities often serve to recreate oppression rather than alleviate it. Using the case study of the Make Art/Stop AIDS project, this study identified and examined the paradoxes that have beset the practice of applied theatre as an intervention approach. The study uses the lenses of critical and post-critical performative pedagogy to unpack the contradictions that have arisen during the implementation of supposedly people centered approaches.

List of Abbreviations

AIDS	: Acquired Immune Deficiency Syndrome
CHANCO	: Chancellor College
FPA	: Fine and Performing Arts
HEAIDS	: Higher Education HIV/AIDS Programme
HIV	: Human Immuno-deficiency Virus
MASA	: Make Art/Stop AIDS
NGO	: Non-Governmental Organisation
OSISA	: Open Society Initiative for Southern Africa
PACED	: Process and Collaboration for Empowerment and Discussion
TFD	: Theatre for Development
UCLA	: University of California – Los Angeles
UNESCO	: United Nations Educational Scientific and Cultural Organization
US	: United States
USAID	: United States Agency for International Development

Table of contents

Statement of originality……..……..……..ii

Acknowledgements……...…….....iii

Dedication…….……iv

Abstract……..……...……v

Abbreviations…..……...……..vi

Table of contents……vii

CHAPTER 1 – GENERAL INTRODUCTION……1

1.1 Introduction……1

1.2 Research questions……4

1.3 Rationale……4

1.4 Literature Review……5

1.5 Theoretical Framework……9

1.6 Research Methodology……11

1.6.1 Ethnography of performance……11

1.6.2 Case study…… ……12

1.6.3 Participant Observation……13

1.6.4 Journaling……13

1.6.5 Audio and Visual Recordings……14

1.7 Ethical Considerations……14

1.8 Chapter Layout……15

CHAPTER 2 – BACKGROUND TO MAKE ART/STOP AIDS……17

2.1 Introduction……17

2.2 Project Formation……18

2.3 Conclusion……23

CHAPTER 3 – THE PROCESS AND COLLABORATION FOR EMPOWERMENT AND DISCUSSION MODEL……..**24**

3.1 Introduction……24

3.2 Stages of Implementation……26

(i) Entry stage……27

(ii) Group creation stage……..28

(iii) Engagement stage……32

(iv) Narrative stage……34

(v) Performance research stage ……35

(vi) Data analysis stage……..38

(vii) Performance creation stage……38

(viii) Rehearsal stage……39

(ix) The community entry stage……39

(x) Living with the community stage……43

(xi) The performance intervention stage……46

(xii) Community workshop stage……47

3.3 Conclusion……48

CHAPTER 4 – THE GAP BWTWEEN KNOWLEDGE AND ACTION……..49

4.1 Introduction……..49

4.2 Images speak louder than words……50

4.3 Bridging the gap in contradictions……58

4.4 Conclusion……61

CHAPTER 5 – THE USE OF FOLK MEDIA……..62

5.1 Introduction……62

5.2 Pre-packaged dances……62

5.3 Compromising the people's songs……67

5.4 Dancing to the men's tune……71

5.5 Conclusion……..74

CHAPTER 6 – GENERAL CONCLUSION……76

6.1 Introduction……..76

6.2 Summary of study……77

6.3 Recommendations and further research……79

References……81

CHAPTER 1

GENERAL INTRODUCTION

1.1 Introduction

There have been many efforts to combat the impact of HIV and AIDS in Malawi. Such efforts include the shift of approaches from a banking method[1] of intervention to a more collaborative approach that aims at empowering and involving the people as agents of their own change (see UNESCO 1995; Chinyowa 2005; Freire 1971; Darder 2003). Due to the complexity of the epidemic, placing a greater emphasis on the creative process and engaging people living with HIV in the process of intervention has become an alternative way of addressing the epidemic (Boneh and Jaganath 2011).

However some of these intervention efforts seem to reproduce the very effect they have been set up to reduce. This often comes into play due to the contradictory nature of project implementation and the opposing nature of the needs of the community and the demands of funders (Chinyowa 2009). In some cases, this arises due to simple clashes in ideology and understanding among practitioners and within the intervention itself. Such contradictions have thwarted some well-intended interventions that would have otherwise been successful. These paradoxes are not limited to funders and community needs. They may also be personal

[1] A method of education that likens the teacher to a depositor and the student to depositories that are just there to receive and store what they are given by the all knowing teacher.

contradictions existing within the facilitators, participants or individuals involved in HIV and AIDS education.

According to Simon Sinek (2010), great leaders inspire action or bring about change in people's attitude and behavior because they are driven by what they believe. Sinek (2010) describes this as working from the inside out. In Sinek's (2010) view, people follow because it feels right to do so not because they need to. Hence, they follow people who believe in what they are doing and live by example. A problem arises when the leader preaches something else and does the opposite. This raises paradoxes that may lead to frustrations within participating communities.

The contradictions that arise between what one believes and what one advocates may compromise the results of one's work. One cannot share what they do not have. They first need to receive, have and only then can they be able to share. Facilitators as leaders in HIV and AIDS education are not an exception. The contradictions that may exist between facilitators' beliefs, attitudes and perspectives and their work may undermine the effectiveness of their work in the fight against HIV and AIDS. The same applies to the intervention itself and participating individuals within the applied theatre process.

It is vital that someone who facilitates change in others should have experienced that change him/herself. If this is not the case, it may raise contradictions, which affect the facilitation negatively. Romanyshyn (2007) argues that it is almost impossible to separate the researcher from his research due to the multiple complexities involved. This suggests the difficulty of separating or removing oneself from one's practice especially in embodied work like applied

theatre. Change requires a shift in mind set, which the facilitator ought to have before he/she facilitates others.

Giroux (1994) refers to this shift as border crossing, which he argues is an important aspect of change. According to Giroux (1994), no change can occur without border crossing, which he describes as the crossing over from one state or condition to the other. It is equally important for someone who facilitates the crossing of a border to have crossed the border himself/herself in order to better facilitate others in their crossing, especially on sensitive personal issues like HIV and AIDS. The facilitator's own contradictions may affect the intervention and in turn affect the community which can then deter border crossing, or can even cause reverse border crossing for the community. There is a need therefore, for an examination of HIV and AIDS interventions for potential contradictions and essentially, how these contradictions can be addressed to enable meaningful change in people's attitudes, perceptions and perspectives in order to maximize the impact of HIV and AIDS interventions.

This study used a case study of the Make Art/Stop AIDS project in Malawi. It sought to identify and examine contradictions that affect facilitators and HIV and AIDS interventions. Apart from attempting to untangle the contradictions within individuals involved in HIV and AIDS interventions, the study also aimed to critically examine the methodologies and concepts that have given rise to potential contradictions that seem to affect facilitators, and undermine the efforts made in HIV and AIDS interventions.

1.2 Research questions

- What contradictions affect HIV and AIDS interventions?
- In what ways do these contradictions impinge upon the HIV and AIDS interventions?
- How can these contradictions be addressed?

1.3 Rationale

My interest in this research comes from personal experiences as a facilitator in applied theatre HIV and AIDS education. My engagement with the Drama for Life Program[2] as a reflexive practitioner has led me to critically look back at my practice. As a facilitator I had my own prejudices around issues of HIV and AIDS. I feared testing and yet I was advocating for HIV testing. I knew the facts about HIV and AIDS but I did nothing about it. I did not believe in what I was advocating. This raised questions like "What gives me the right to intervene in somebody else's life, when I need an intervention myself?" I did not practice what I preached, not because I did not want to but because I did not know how to bring myself to do it. After all, I was just doing my job. It was a situation of two blind people leading each other. Better still, I was trying to remove a twig from another's eye, when I had a log in my own.

This experience has made me wonder if I was the only one in such a situation and if not, what contradictions do other facilitators and individuals face that can compromise their interventions. It has also made me consider how such paradoxes can be addressed before facilitators themselves can help others to address their own challenges. Upon further reflection,

[2] Based at the University of Witwatersrand and concerned with using performance for social transformation

I realized the broader implication of contradictions as going beyond facilitators to include the intervention process as a whole. This has led me to explore possible contradictions that affect HIV interventions in general and how they can be addressed.

In addition to this, many theorists and practitioners have argued for the need and importance of shifting intervention paradigms from a top down to a more people centered approach (see UNESCO 1995; Escobar 1995; Chinyowa 2005). This shift is particularly important in HIV and AIDS education due to the devastating impact of the epidemic. However, these theorists do not delve into the contradictions that have emerged hand in hand with this shift particularly in the practice of applied theatre for HIV and AIDS education. Although the shift has seen an improvement in the effectiveness of interventions, it has also seen the emergence of contradictions in HIV and AIDS applied theatre interventions. These contradictions often work to compromise intervention efforts in their attempts to implement a more people centered approach.

As such, the potential contradictions that may exist in HIV and AIDS applied theatre interventions can adversely affect the project. This may produce paradoxical effects, which tend to reduce the effectiveness of well-intended interventions.

1.4 Literature Review

There is a wide range of interventions in the fight against HIV and AIDS in Malawi. Bill boards, posters, newspapers, magazines, radio and television programs all carry messages in an effort to relieve the country from the undeniable impact of HIV and AIDS. Apart from live plays and

theatre, there are also popular television and radio dramas such as *Tikuferanji* (TV series that tackles HIV and AIDS issues) that are aired every now and then. Through this medium information is disseminated to a larger audience at once, maximizing outreach within a short time frame.

However, these messages are limited as they are one sided, general, prescriptive, and do not allow active audience participation. They also lack interpersonal engagement, which is valuable in human communication (Mda 1993). Such programs are also exclusive as they only reach those who have access to radios and TVs. This accounts for a smaller population of Malawians, particularly for television programs that are not easily accessible to the rural Malawian.

On the other hand, interventions carried out through the medium of applied theatre are more inclusive and reach a wider audience because they can be taken to the community and tailored to the specific needs and culture of that community. Therefore, when we talk about accessible drama and theatre interventions in Malawi, the bigger part is applied drama and theatre.

The applied theatre process allows specificity and 'enables the participants to (re) discover their innate capacities for play, for imagining, for creating, for relating to others by exploring the self in the other and the other in the self' (Prentki and Preston 2009: 252). It allows the participants to draw experiences from the real world into the make believe world in order to understand reality better (O'Neill 1995). This makes applied theatre essential to HIV and AIDS education as it gives participants encouragement to reflect and act upon their situation and possibly change it for the better. According to Turner (1979), for meaningful consciousness and

change to take place, society has to look at itself more clearly by cutting out a piece of itself for inspection. Applied theatre facilitates such a process. It opens up new and alternative ways of knowing and understanding that enable a deep sense of empathy and community (Dimm 2002). This empathy is necessary in the fight against HIV and AIDS, as human relationships appear to be a larger problem than the disease itself.

To apply Mda's assertion, applied theatre is 'capable of being more effective since it uses interpersonal channels that have been found to have more impact than the mediated channels of electronic and print media' (1993:2). Not only does applied theatre subscribe to the axiom that 'what one sees, one remembers' (Mefalopulos, 2002), it also places emphasis on the physical presence of the body of participants, performers and audience and their ability to think and feel with those bodies during the process of communication. Due to its quality of embodiment and its provision for experiential learning, applied theatre has become widely used for HIV and AIDS intervention projects in Malawi.

However, the discourse around HIV and AIDS programs has been beset by contradictions and these have had an impact on the efficacy of the interventions. Fabian (2002) asserts that a contradiction arises when there are two activities or issues having contrary attitudes or effects. Many of these contradictions may be harmless, but they become a problem when they relate to sensitive issues like HIV and AIDS. Although much has been written about the successes and failures of HIV and AIDS interventions, not much appears to have been done on the contradictions affecting these interventions.

Makamani (2009) examines the contradictory nature of HIV and AIDS discourse in Zimbabwe. He focuses on texts and speeches made by Zimbabwean leaders at international conferences. He points out how political leaders in Zimbabwe have used their speeches on HIV and AIDS for political gain and to paint a good picture of themselves to the international community. He argues that leaders spoke of their commitment in the fight against HIV and AIDS when they have no such commitment. In Makamani's view, the picture given to the international community was contrary to what was happening on the ground. Due to such contradictions, no clear advances have been made in the fight against HIV and AIDS in Zimbabwe.

While Chinyowa (2009) concurs with Makamani about the entanglement of politics in HIV and AIDS, he directs his attention to a more aesthetic contradiction. Chinyowa argues that political activities influence the aesthetics of applied theatre in HIV and AIDS interventions, which in turn raise contradictions in the aesthetics. He uses syncretism, participation and folk media as examples of where such contradictions exist. Chinyowa (2009) argues that 'more often than not, communities are led into participating in workshops using 'folk' songs, dances, poems and stories that have already been planned for them'. This raises a contradiction since the approach claims to use what the participants bring to the interventions.

Kaluba (2009) examines the contradictions on the sexual behavior trends of young theatre practitioners and care-givers in HIV and AIDS. He focuses on the practices, perceptions and knowledge that lead facilitators to indulge in high-risk sexual activities. He explores the knowledge gaps that occur in HIV and AIDS education during the process of Theatre for Development in Zambia and how this gap can be decreased (Kaluba 2009).

Based on the literature mentioned above, it can be seen that contradictions are a problem in the fight against HIV and AIDS. However, apart from the views made by Makamani (2009), Chinyowa (2009) and Kaluba (2009), this study focuses on contradictions affecting facilitators in particular. It examines contradictions that confront facilitators in the course of their practice as HIV and AIDS educators. The study departs from Kaluba's as it does not focus on sexual behavior trends of facilitators but examines the personal as well as general contradictions that the facilitators face and how they can be addressed to enable effective change.

1.5 Theoretical framework

This study makes use of critical performative pedagogy as a theoretical lens through which HIV and AIDS interventions will be examined for possible contradictions. The principles underlying this theory include border crossing, dialogue, critical consciousness, liberation empowerment and sustainability. According to Giroux (1994), critical pedagogy is concerned with strategies of self-empowerment that enable people to move from one place to another or one state of mind to another, which he terms border crossing. It is an approach to learning that is aimed at transforming social structures and conditions that work to thwart democratic participation (Darder 2003). Thus serves to liberate people from oppressive situations that render them powerless over their own lives. The people's participation in addressing matters that affect them forms the core part of this theory. It involves the creation of a space for the marginalized to question the tensions that exist between themselves and dominant discourses (Giroux 1994).

McLaren (1995) describes critical pedagogy as a way of education that provides the condition for learners to question what they receive and the way things are. It also sets out to deconstruct the power relationships between the teacher and the student, which render the student as a container for storing information, imparted by the all-knowing teacher (Freire 1971). To address the contradiction of the student-teacher relationship, Freire (2005) argues for a dialogical approach which necessitates dialogue between the facilitator and the facilitated. It is only then that true learning and sustainable transformation can occur.

When applied to performance practice critical pedagogy becomes critical performative pedagogy (Howard 2004). It focuses on the positioning of the learner in his learning context where the learner becomes the agent of his own learning. The learning becomes a process of continuous engagement and negotiation (Prenkti and Preston 2009). In other words, learning becomes a reciprocal process between the educator and the learner. It entails an equal partnership between the facilitator and the participants in the process of acquiring knowledge.

However, there can be contradictions enshrined in what Elsworth (1989) calls 'repressive myths' that she has identified in critical pedagogy. These become contradictory because they tend to widen the very gap they intend to bridge by dividing groups into oppressors and oppressed, where one group is favored over the other. Thus post-critical pedagogy complements critical pedagogy by involving both the oppressor and the oppressed in the process of dialogue.

With this in mind the study combines both critical and post-critical performative pedagogy, which is an enhanced version of critical performative pedagogy. This is in order to bridge the

gap between the two related theories. While still using the principles of critical pedagogy discussed above, the study examines contradictions that confront facilitators in their attempts to meet these principles in their practice. It also examines the extent to which the Make Art/Stop AIDS project was able to apply these principles in the process of intervention. The study explores whether the project created what Howard calls a 'learning community that empowers participants, which generates critical understanding, and which promotes transformation' (2004:1).

The lenses of critical and post-critical performative pedagogy were necessary for unpacking the contradictions affecting the shift in HIV and AIDS interventions to a more people centered approach. It also provides a basis for empowerment, which is one of the fundamental concerns for HIV and AIDS interventions. Apart from empowerment of communities, it is also important that facilitators be empowered in order for them to be able to help others without contradicting themselves.

1.6 Research methodology

The ethnography of performance was used as an appropriate research methodology for this study. This method was chosen because it is a process based and participatory method of investigation that allows the researcher to engage collaboratively and closely with the subject of research (Chinyowa 2006). It is also closely linked to people's traditions and cultural experiences. The ethnography of performance was found to be best suited for this study since the study deals with topics that are closely linked to people's values, traditions, practices and experiences (Denzin 2003).

In addition, the study involves the researcher working collaboratively with the implementers, facilitators and participants during the project. As O'Toole (2006) suggests, the task of the researcher working within an ethnographic approach is to collect data in as 'natural' a condition as possible. The ethnography of performance facilitates such an investigation through the use of participant observation, journaling, visual and audio recordings for the collection of data in the context of a case study.

1.6.1 Case study

A case study is characterized by the examination of a phenomenon by identifying, observing, documenting and analyzing the data while looking for particular characteristics (O'Toole 2006). It allows the examination to happen in a particular context and time frame. This study involves examining Make Art/Stop AIDS as an applied theatre intervention for contradictions that affected the project in the process of its implementation.

Although there are many applied theatre projects dealing with HIV and AIDS in Malawi, the decision to focus on Make Art/Stop AIDS project as a case study emerged from my participation as assistant director, practitioner and facilitator in the project. Secondly the project's emphasis on collaboration, process and empowerment also distinguishes it as a model for applied theatre practice for HIV and AIDS interventions in Malawi. This contributes to making it a viable case study. It also suggests ethnography of performance as an appropriate methodology for the study due to the researchers in depth participation in the case study. Further details on the project formation and methodology will be provided in chapter 2.

1.6.2 Participant observation

Since Make Art/Stop AIDS is a project that focuses on process, participant observation was used to collect data during the entire intervention process. Through my active participation, as a researcher, I was able to collect data from within the process. My engagement with participants allowed me to closely observe contradictions that manifested themselves through the facilitators' interaction with participants and the participants' interactions and engagement with each other. The technique offered me a chance to observe and experience the research from within and not simply from above. According to Conquergood (1998), participant observation allows the researcher to experience the happenings and have a deeper understanding that could not be reached otherwise. O'Toole (2006) also argues that when collecting data from participants, one must read the sub-text with one's own eyes and ears.

As a participant observer therefore, I was able to engage closely with participants in the course of the theatre making process as well as the community in which the performance was staged. The approach enabled me to observe with my own eyes and ears and gain insight on traditions, experiences and reactions of facilitators and participants during the course of the intervention.

1.6.3 Journaling

Journaling is a form of reflective writing. It is useful in the documentation of experiences, happenings and the interpretation and understanding of those experiences by the writer in relation to other people's experiences. Journaling encourages reflective practice as a means of

self-examination. This examination involves taking a critical look at one's practice in order to improve it. This makes it a viable tool for research.

Organizations such as Higher Education HIV/AIDS Programme (2010) insist on the importance of journaling as it creates a basis for reflection and examination. O'Toole (2006) also asserts that journaling is important in order to keep account of the important moments of the research which may otherwise be forgotten. I employed journaling in order to keep data that was later used to examine contradictions that affected the project. Through journaling, I was able to document my observations and reflect on moments of the intervention.

1.6.4 Audio and visual recordings

Audio and visual recordings were also used in the study to complement my journal entries and other written documents. These helped me to collect data on other facilitators and their reflections on the project. The recordings were also used to closely examine and reexamine the process and implementation of the intervention since audio visual aids help to deepen understanding as they activate the senses (Kamlongera 2002). The video recordings also helped me to re-examine my participation and observations of the implementation process.

1.7 Ethical considerations

Ethical matters were considered during the course of this research. The process of ethical clearance was followed and clearance was obtained from the ethics committee at the University of the Witwatersrand. The research was done with respect to the code of ethical conduct from the school.

I received a letter granting me permission to conduct the research with the Make Art/Stop AIDS project from the director of the Make Art/Stop AIDS project, Dr Galia Boneh. No names were used in the writing of this report. All names were treated with as much respect and confidentiality as possible.

1.8 Chapter layout

This research report begins with a general introduction on the existence of contradictions in HIV and AIDS interventions. This was followed by setting the basis of the research which includes area of focus for the study, objectives, research questions, the importance of the study, literature review, theoretical framework and how the study was conducted.

Chapter 2: This chapter describes and analyses the background of the Make Art/Stop AIDS project. It examines its formation in order to explore whether or not the formation of the project contributes to the apparent contradictions that affected it.

Chapter 3: The chapter examines the project's methodology for contradictions that may have affected the project in the course of its implementation.

Chapter 4: In this chapter, I focus on contradictions about HIV and AIDS that are manifest within individuals involved in applied theatre practice. Based on a selected workshop, the chapter explores how the exercise of creating images revealed contradictions within participants' perceptions and attitudes towards HIV and AIDS. In other words, the chapter explores the gap between knowledge and action, appearance and reality, verbal and other creative responses.

Chapter 5: This chapter examines contradictions that arise due to the use of folk media. It examines how pre-packaged folk media adversely affects interventions. It also explores contradictory messages put forth by drumming and dancing. Furthermore, the chapter raises questions on who owns folk media and whose interest does it serve?

Chapter 6: This chapter concludes the study. It contains a summary of the findings on contradictions in HIV and AIDS interventions that emerged in the study and offers recommendations. It also suggests an area for further study.

CHAPTER 2

BACKGROUND TO THE MAKE ART/STOP AIDS PROJECT

2.1 Introduction

The modernist approach to development has relied on one knowledge system based on Western understanding (Escobar 1995). The dominance of this system of knowledge has overshadowed other systems of knowledge that might offer alternative ways to guide social action away from economistic and reductionistic ways of thinking (Escobar 1995:13). These initiatives have proved futile to a large extent (Escobar 1995: Chinyowa 2005). Thus a discourse that argues for development alternatives grounded in the peoples cultural experience has emerged in recent years (Chinyowa 2005). This emergence has seen the shift of paradigms from a top down approach to a bottom up approach, which is a more people centered approach.

Chinyowa (2005) further argues that the making or unmaking of initiatives needs to begin by examining local constructions of reality of the people who engage with them. This suggests that the adoption of internally driven interventions is more favorable as opposed to externally driven interventions. Contradictions are more likely to emerge when externally driven initiatives informed by Western epistemology are applied to deal with internal problems informed by indigenous understanding. However, externally driven initiatives still dominate in communities in spite of the emergence of people centered approaches. As a health and

developmental concern HIV and AIDS education initiatives that use applied theatre have not been spared.

This chapter examines the background of the Make Art/Stop AIDS as an applied theatre based HIV and AIDS initiative in order to explore aspects of the project's formation that appear to have adversely affected it. The sections that follow begin with a brief description of the project's formation followed by its analysis. The chapter provides insights into emerging contradictions that were inherent in the Make Art/Stop AIDS initiative.

2.2 Formation

The Make Art/Stop AIDS initiative was founded by David Gere from the University of California in Los Angeles (UCLA) under the Arts and Global Health Center, a project of the Department of World Arts and Cultures at UCLA. He established the Make Art/Sop AIDS network in 2004 while on a Fulbright research grant in India. It later expanded to Africa including South Africa, Ghana and then Malawi in 2008 and 2011. It is a network of scholars, artists and activists who are dedicated to ending the AIDS epidemic that has currently infected over 30 million people around the globe and more than 1 million people in Malawi with an estimated 84,000 new infections each year (USAID 2012).

Make Art/Stop AIDS was first implemented in Malawi in 2008 under the direction of Galia Boneh and Iddi Saaka who graduated from the University of Califonia (UCLA). The 2008 project was called "CHANCO-UCLA HIV and AIDS performance project" which culminated into a performance titled "This is my story". The project was a collaboration, which engaged 14

Chancellor College drama students, 3 University of California students and 6 local people living with HIV. It was a five week intensive process in which participants explored issues of HIV and AIDS, shared personal stories and finally created the performance which was performed at Domasi Teachers College and Chancellor College respectively.

Although this study draws from the 2008 project, it focuses mainly on the Make Art/Stop AIDS project that was implemented in 2011. The project brought together 3rd year drama students from Chancellor College and 6 people living with HIV to create a collaborative performance for a community of 13 villages around Makwapala Health Centre under group village head Machirika in Zomba district, in the Southern region of Malawi. The project was implemented as a course based intervention. The initial intervention ran for one year but projects that emerged from the initial project are still running.

The Make Art /Stop AIDS project operates under the Arts and Global Health Center- Africa in partnership with the Fine and Performing Arts Department at the University of Malawi, Chancellor College. The project was implemented with funding from Open Society Initiative for Southern Africa (OSISA) and assistance from the Fulbright Scholar Program of the U.S. State Department.

The initiative was founded on the principle that artists are an essential part of anti-AIDS efforts due to their capacity to shape insights that can alter people's perceptions and actions (Kamlongera 2004; Taylor 2003; Make Art/Stop AIDS 2012). This suggests that artists have a tremendous duty and responsibility towards the fight against HIV and AIDS. Through its contribution, the Make Art/Stop AIDS initiative seeks to unleash the transformative power of

the arts by advancing an awareness and appreciation for the power of art to address HIV and AIDS. It also seeks to inspire attitudinal change through the production and dissemination of original artwork. The project also aims to establish artists as key partners in HIV and AIDS interventions around the world.

Following the formation of the Make Art/Stop AIDS project (Malawi) in 2008 and the yearlong intervention in 2011, more than three quarters of the drama students who participated in the project had gone for HIV testing. Most of these students had never gone for HIV testing before. Over 160 members of the audience had also gone for testing following the intervention. This testifies to the power of applied theatre to address HIV and AIDS.

However, based on the Make Art/Stop AIDS projects implemented in India, South Africa and Ghana, Make Art/Stop AIDS appears to have defined artists as those who practice art as a profession or for commercial purposes. This has tended to guide the project in its partnerships, collaboration and networking away from local people who equally possess art as a form of cultural celebration and for whom the interventions are targeted. For instance, when the project came to Malawi in 2008, it targeted drama students from the Department of Fine and Performing Arts at Chancellor College. The same trend was followed in 2011 as it introduced a course-based intervention working with performing arts students.

This mode of identification based on Western knowledge systems seems to contain limitations on who qualifies as an artist and thus dictates who is involved and directly participates in the theatre making process. It often excludes those for whom the theatre intervention is intended and contradicts the crucial notion by Freire (1971) which asserts that if educators are to help

others in the process of humanization, they have to do so in partnership with them. Thus, it stands contradictory to the current shift towards people centered approaches.

The Make Art/Stop AIDS initiative has, to a large extent, relied on hiring artists to create the art-work and then tour communities as evidenced in the India, Ghana and South African projects. This stands in contrast to the indigenous Malawian way of performance where performance is a community event where everyone participates and 'artists' cannot be separated from the rest of the community as each one has something to show (Abdulla 2009). Kamlongera (1992) argues that Malawian communities have thrived on performance. He further argues that dance, song and enactments have been part and parcel of everyday experience in local communities. Boal (1979) concurs when he argues that theatre was originally a practice shared by all people, a performance in which all could participate freely.

Given that indigenous Malawian performances were functional and theatrical in their own right (Kamlongera 1992), it can be argued that all members of the community participated in matters that affected them which facilitates ownership and sustainability according to Darder (2003). The communities could also be considered as having organic artists who can work in collaboration with the project in its attempt to establish a network of artists. It also suggests that building on the already existing structures in the communities can add value and sustainability to the HIV and AIDS initiatives. Often times when shows are put on by external artists, the community enjoys the performances as a source of entertainment only, which undermines its intervention function (Kamlongera 1987).

Perhaps the philosophy that guided the formation of Make Art/Stop AIDS could have been applicable in urban communities and townships where the distinction between artists and non-artists has become more visible due to the influence of other cultures. The urban population is also more prone to other forms of communication such as print, electronic media, and professional theatre forms that carry messages of HIV and AIDS.

As an externally formed intervention, Make Art/Stop AIDS's aim to establish 'artists' as key partners in HIV and AIDS interventions tended to overlook the economic situation in Malawi. The country's troubled economy seems to be putting 'artists' at a crossroads. Much as "artists" may want to commit themselves to the fight against HIV and AIDS using the transformative power of the performing arts, their challenging economic situation beckons them to resort to other forms of work other than HIV and AIDS interventions. This is evidenced by the results of the participants of the 2008 pilot phase of the Make Art/Stop AIDS project. Out of the 14 artists (students) who participated in the project, only 2 are currently involved in performing arts activities. The rest are working in banks, censorship boards, magazine and teaching while others are jobless.

The formation of the Make Art/Stop AIDS initiative did not take into account the economic realities in which Malawian artists operate and did not put up appropriate structures to support them. Furthermore, it did not make a careful examination of local constructions of the reality of Malawians, which was necessary for its continued application and sustainability.

As Chinyowa (2005) argues for the examination of the local constructions of reality, consideration of the contextual reality of Malawian communities should have been done in the

formation stages of the initiative. This would have helped to create an inclusive definition of the initiative's working partners that would be more contextual, culture friendly, people centered and sustainable for Malawi. The inclusion could have helped in the setting up of aims and objectives of a more people centered initiative. Otherwise, Make Art/Stop AIDS as an externally formed initiative intended to deal with internal problems of Malawian communities posed challenges of ownership and sustainability. These are essential to the intervention (Kamlongera 2004). For these reasons, the project subjected itself to potential contradictions during its formation.

2.3 Conclusion

The formation of the Make Art/Stop AIDS initiative affected its application in Malawi as it was characterized by contradictions. Underlining these contradictions was the paradox of an externally formed initiative informed by Western thought being applied to address problems of HIV and AIDS that were informed by indigenous understanding. This in turn created more contradictions in the definition and identification of the project's partners which contributed to the attainment of paradoxical results. It also created further contradictions within the PACED methodology as it took on an external character within the Malawian context. The following chapter examines the stages of this methodology.

CHAPTER 3

THE PROCESS AND COLLABORATION FOR EMPOWERMENT AND DISCUSSION (PACED) MODEL

3.1 Introduction

The implementation of the Make Art/Stop AIDS project was based on the Process and Collaboration for Empowerment and Discussion (PACED) model which approaches HIV and AIDS through emphasis on the creative process, involving people living with HIV and AIDS and focusing on barriers to prevention and care in the context in which they occur (Boneh and Jaganath 2011). As the acronym suggests, PACED is guided by the principles of Process, Collaboration, Empowerment and Discussion in its operation.

Many applied theatre practitioners contend that process based approaches are more effective as opposed to product oriented approaches (Prentki and Preston 2009; O'Neill 1995; Heathcote 1992). The process enables participants to explore the other and to engage deeper with the content of the intervention. According to Dimm (2002), it is only through stepping into the shoes of the other that true knowing, understanding and empathy are created. Because the applied theatre process facilitates such a condition, this suggests that projects using process-based approaches should strive for the inclusion of as many members of the community as possible. This leads us to the principle of collaboration, another aspect of the PACED model.

Parkinson (2006:3) defines collaboration as ‘a mutually beneficial, well-defined relationship entered into by two or more parties to achieve common goals’. She further asserts that the collaborative relationship includes ‘a jointly developed structure and shared responsibility’. When applied to interventions, the concept of collaboration advances Freire’s (1971) argument which advocates for a partnership between those who seek to facilitate others and those who are to be facilitated. This working relationship allows the distribution of power and acknowledges each partner’s ability to change the situation in which they find themselves. This is necessary to HIV and AIDS interventions as it facilitates empowerment, yet another principle of the PACED model of intervention.

Empowerment has become a buzz word for most practitioners in the field of applied theatre and development work in general. It has played a significant role in attracting funding for practitioners, as it is an underlining concept for most modern development approaches. Apparently there has not been a single agreed upon definition of the concept. The PACED model adopts Rowlands’s (1997) definition, which describes empowerment as the processes that lead people to perceive themselves as able and entitled to make decisions. Thus the question of who decides the message of a theatre work and how it is delivered serves as a fundamental concept in the PACED approach (Boneh and Jaganath 2011).

As the PACED model is alien to the Malawian context, the Make Art/Stop AIDS project was likely to face contradictions in its implementation. This chapter analyzes the PACED model by examining each stage of the methodology for potential contradictions in relation to the key concepts and processes that guide the model.

3.2 Stages of Implementation

The Process and Collaboration for Empowerment and Discussion methodology was implemented in Malawi in two phases. The first phase was undertaken by students and people living with HIV. The second phase involved collaboration with the community. The latter phase included participants from the first phase performing in the community and conducting community workshops, which culminated into a community festival.

Since there were two phases of the project in which two different groups of participants were involved, for purposes of analysis, I will refer to participants in the first phase as "facilipants" (facilitator participants) in order to distinguish them from the community workshop participants. It is important to note that the PACED methodology is a newly developed model, which was first used in Ghana in 2006 for the *Asetena pa concert party*[3] project followed by its application in Malawi.

In the sections below, I discuss the stages of the PACED methodology as implemented in Malawi. Although I mention all the stages, my analysis focuses on the stages that appeared to contain contradictions. I begin with a brief description of what happened in each stage followed by an analysis of the stage in relation to apparent contradictions that emerged in the particular stage.

[3] Engaged 5 Ghanaian popular artists and 5 people living with HIV to create a performance and toured some parts of Ghana.

(i) Entry stage

Since the PACED model focuses on collaboration, particularly with people living with HIV as asserted by Boneh and Jaganath (2011), in the first stage we focused on negotiation and collaboration between students and people living with HIV. The negotiations were mainly focused on a working contract as the structure could not accommodate much change. Apart from the fact that we had already designed the program, the program was also already packaged as a course based intervention subject to the University's rules.

We met the groups separately and briefed the participants on the project, which included informing them of what to expect from the program and what was expected of them. We also discussed their fears and anxieties about working with each other. The idea was to acknowledge the sensitivity of a working alliance between the students (undeclared HIV status) and people living with HIV. We also engaged the students group in creative exercises in order to assess their views on people living with HIV and to work through their anxieties. This proved useful as it later helped guide the management of the group.

The group of 26 third year drama students consisted of urban youth coming from working class families with the youngest members being 19 years of age. On the other hand, the 6 people living with HIV were mostly elderly people coming from rural communities whose main occupation was farming. They were mothers, fathers and grandmothers with the youngest

member being around 30 and the older ones above 50 years of age. Hence forth, I will refer to the combination of these groups as “facilipants”.

Although the collaboration was a mutually beneficial relationship with a shared goal and responsibility to engage and deal with issues affecting the facilipants and their community, it did not have an intervention structure that was jointly developed by all parties. On the contrary, we as practitioners and facilitators of the intervention were responsible for structuring the program in the absence of our collaborating partners. Hence, our working relationship reflected an unequal partnership between facilitators and the facilitated that was not likely to yield humanizing results. The relationship fell short of a healthy and complete collaboration, which Parkinson (2006) argues, should include a jointly developed structure.

Having established the collaboration, we moved on to the second stage of the methodology, which was aimed at creating a cohesive working group between facilitators, students and people living with HIV.

(ii) **Group creation stage**

Following the formation of the working contract, we engaged the “facilipants” in group building games and exercises. Through movement, games, exercises, songs and dances this stage worked towards removing barriers, building trust and creating a team. As Freire (2005) has argued, creating an environment of trust facilitates dialogue. The first meeting included a name game that facilitated the introduction of everyone in the group in a playful manner. The

workshops proceeded with more exercises and games, which were mainly borrowed from Boal's (2002) games, which included a variety of physical, voice, and mental alertness games. Each session often started with a yoga exercise called the sun salutation, which has its roots in Buddhism. Group yoga also characterized these workshops.

During the first few weeks of engagement there seemed to be feelings of hostility and discomfort within the group as each group appeared to fear the other. Often times the two groups would each cluster together on opposite sides of the space seeking the company of those they felt were similar to themselves. The people living with HIV mostly seemed to make extra efforts to distance themselves from the others. However, after continuous interactions with each other through games and exercises, we had managed to build trust, team spirit and togetherness.

The importance of games in group building cannot be overemphasized. Boal (2002), emphasizes the importance of playing games to facilitate the building of a group. However, these games are by no means universally appropriate especially in the context of the shift to a people centered approach. In spite of our objective to build trust, eliminate barriers and ultimately create familiarity, most of the exercises that we used were alien to the facilipants. They were imported from Boal, a Brazilian author and applied to workshops with local Malawians. As such instead of familiarity, they created feelings of alienation especially during the first workshops. As Kamlongera (2002) argues, the use of what is familiar to the people is important in order to facilitate ownership and familiarity especially when beginning a process.

Although it appeared easier for student participants to participate more freely as they could easily adjust to the games and exercises, it proved more difficult for the people living with HIV to adjust, which in turn hindered their participation. This may not have been due to their positive status alone but also vast differences in their level of education, age, culture, economic status and their living context. The context was tied to cultural limitations such as moral conduct and dressing codes. Since the female members living with HIV dressed in attire accompanied by *zitenje* (wrappers), it was hard for them to fully participate in some of the exercises as they involved intensive physical movements and inappropriate contact between males and females. Thus the unfamiliar games and exercises became a tool for oppression as it hindered the participation of all the facilipants in the process that was meant to be theirs.

Regardless of the notion that play facilitates familiarity (Chinyowa 2005; O'Neill 1995), the gap between the cultural contexts made it harder for the facilipants to play together. The non-students seemed to have been brought into an intimidating context, which was further highlighted by the alien games and exercises.

Due to what appears to have been the external origin and packaging of the project, we failed to maximize the use of Malawian games and dances that could not only have achieved the purpose of group creation, but could have also been more contextual based and familiar to the facilipants, which in turn could have encouraged dialogue. Instead, we imported games and exercises from external sources and roots to facilitate familiarity among local Malawians, thereby creating a contradiction.

Byam (1999) argues that target participants should provide the context within which workshops are carried out. Hence, the local games and exercises could have worked in place of the alien exercises. An example of such a song would be "*Sheli wanga*", a Malawian children's call and response song and dance, which includes each member of the group calling out her/his name and introducing themselves, and the others respond with chanting. This game could have been used in the introductory exercise. As Dekoven (2007) argues, ordinary children's games offer opportunities for a range of role taking and group building exercises. He also adds that such games may also be used in the service of 'reminding people how to play, how to explore spontaneity and the building of mutually supportive relationships (in Blatner and Wiener 2007:332). This is particularly true when such games belong to the traditions and culture of the participating individuals.

The above sentiments proved particularly true when we asked the facilipants to lead in traditional songs and dances of their choice. During such moments, the participation of the group of non-students suddenly picked up and they engaged freely. Although some students seemed to labor to participate, the overall engagement rose during these moments of familiarity.

The use of unfamiliar games and exercises in workshops that are meant to facilitate familiarity tends to create contradictions. It also takes away ownership of the workshop process from the participants, which in turn disempowers them. This contradicts the PACED principle of empowering people living with HIV. As Chambers (1992) argues, participation as an empowering process involves the shift of power to the locals. At the group building stage, this

shift of power includes the use of games and exercises that are familiar and contextual to local participants. This leads us to the next stage of the PACED methodology, which involved engagement with the local realities of the HIV and AIDS pandemic.

(iii) **Engagement stage**

This stage began with the facilipants undergoing information based sessions on HIV and AIDS facilitated by health professionals from the Ministry of Health. After acquiring factual knowledge on HIV and AIDS, we moved on to an in-depth engagement with contextual realities of HIV and AIDS. This stage was characterized by debates, theatre exercises, reflections and discussions on complex issues pertaining to HIV and AIDS. Such issues included gender, poverty and other socio-economic challenges. Image theatre and forum theatre exercises allowed the facilipants to explore possibilities within oppressive or difficult situations. The facilipants also engaged with both rational and irrational myths and fears about HIV and AIDS that were held by the local community.

According to Boneh and Jaganath (2011), one of the vital principles of the PACED approach includes focusing on contextual barriers to prevention and care. This notion is what guided the intensive engagement that followed. Through debates the following questions were explored:

- Who is responsible for the poor, is it government or themselves?
- Should homosexuality be legalized in Malawi?
- Should activists concentrate on abstinence as an HIV preventive measure?

- Should government strive to make women financially independent over men as a way of combating HIV and AIDS?
- Should ARVs be given freely?
- Is it good to get tested for HIV while in school?

The debates covered 5 workshops out of the 7 workshops that were dealt with in this stage. Each of the 5 workshops began with yoga followed by traditional song and dance before moving on to the debates. We divided the facilipants into sub-groups, which either supported or rejected the views indicated in the questions above. The questioning complies with what Freire (1971) calls the problem posing approach to education. Since the issues related to the context in which the facilipants live, allowing them to engage with these issues and to think and reflect on them enabled the facilipants to take part in the exploration of their existing conditions and knowledge in order to understand how they came to be and how they might be different (Darder 2003).

Through the group debates, the facilipants engaged deeply and critically with the issues around each topic, as they had to think of arguments to support their positions. The debates encouraged critical thinking and reflection, which provided new insights and challenged the participants to step into other people's shoes, as they sometimes had to defend a position which they did not entirely support. In so doing, they were challenged to step outside the box and think differently. It also allowed the facilipants to question their living contexts, thus

subscribing to McLaren's (1995) argument that, critical education should provide a space for participants to question the way things are.

In spite of the above, however, the tools used to explore and critically engage with the issues appeared to create a contradiction between two important principles of the PACED methodology. Although the use of debates as a way of engaging with contextual issues relating to HIV and AIDS encouraged critical discussions, the debates took place at the expense of using the performing arts. Unlike the debates which offer abstract knowing, embodied performance allows the participants to not only imagine, but feel and understand other people's views.

According to Boneh and Jaganath (2011), the PACED model employs the performing arts in HIV and AIDS education. Although we used image theatre and forum theatre techniques in the last two workshops of this stage, to a large extent we were unable to successfully employ the performing arts to explore critical contextual issues in this stage of the intervention. Instead we focused more on the use of debates and discussions, which put two elements of the same model in conflict and created a contradiction within the applied theatre based model. However, as we moved on from engaging with general issues of HIV and AIDS to a more personal level, the employment of the performing arts became more apparent.

(iv) Narrative stage

Sheila Rubin asserts that, 'if you want to know me, then you must know my story' (in Blatner and Wiener 2007:251). Since knowing someone entails knowing their story, it was important

that the participants shared their stories. Everyone had a story to share, both infected and affected. This stage helped to bring the group even closer together and created more feelings of empathy (Dimm 2002) and a sense of what Heathcote (1991) calls brotherhood.
The stories were dramatized in order to explore the possible choices certain characters in the stories could have taken. That is to say, the role players negotiated their way out of oppressive situations by choosing alternative courses of action.

The story owners were made to play their own characters. In the first enactment, they acted as it had happened but in the second they reacted in a way they wished they had reacted and said what they wished they had said. Although this exercise did not provide what Bolton (1984) calls 'protection into emotion' as the participants were role-playing their own stories, it seemed to have given the story owner a new sense of power and confidence. Not only did the sharing of stories create empathy among facilipants, they also provided an opportunity to extract possible themes that would contribute to the creation of the final Theatre for Development performance that was to be held at Makwapala in Zomba.

From the personal stories shared in this stage, we identified problematic themes that would later contribute to the creation of the final performance intervention. But since the performance was to be held in a different rural community, we had to visit the community in order to conduct research on problematic themes relating to HIV and AIDS.

(v) Performance research stage

Since the PACED model deals with contextual issues of HIV and AIDS (Boneh and Jaganath 2011), there was need to research on these issues from the community in order to come up with a relevant intervention for the community. With this understanding, a trip to the community was arranged for the "facilipants" to go and learn about the issues of HIV and AIDS affecting the community at Makwapala, a rural community about 25 kilometers from Chancellor College. Prior to the research trip, contacts were made with the community to seek permission to conduct the research. Proper channels were followed with respect to community structures.

We were given a warm welcome at a local village arena. Without wasting time, we gathered some members of the community and led a traditional song in which everyone in the circle responded with dancing. In no time, the community members also led a song that we all danced to leading to what Kamlongera (2004) calls 'shared experience'. Apart from our intrusion by not letting the community members welcome us in a manner they saw fit, the dancing proved to be appropriate in creating rapport with the community which set a basis for dialogue.

After two or three songs, we separated the community members into focus groups and the research began. The research was conducted by trained research assistants from a research institution in Zomba so as to validate the findings for monitoring and evaluation purposes. The facilipants, were made to join the focus group discussions in order to observe how to conduct research and to collect data for the creation of a theatre for development (TFD) performance.

Although we had collected data for the creation of the TFD performance, the use of formal interviews to collect data for the creation of an intervention based on shared engagement and play poses a contradiction. As applied theatre practitioners our belief in the use of play and sharing as effective means for engagement and communication should guide us in conducting research for interventions. Otherwise, we contradict ourselves by using methods that enhance unequal power relationships. The approach tends to place those who ask questions above others answering the questions. This shifts the shared engagement to what Kamlogera (2004) terms as a simple extraction of information. As Kamlongera (2004) further argues, TFD should be based on shared experiences and shared understanding. He further rejects the conventional notion of research in TFD and argues that unlike conventional research, informal engagement and sharing allows a deeper knowing of the community and provides rich information about the issues in the community.

Nonetheless, a more informal engagement with the community through playful media such as singing, dancing and chatting could have offered a deeper understanding of the community as it could facilitate trust which leads to an intimate sharing of deeper issues on HIV and AIDS. Not only could we have had rich data accompanied by stories, we could have also learnt more about the ways and traditions of the community. This could have helped to avoid the inclusion of a bar scene in the performance containing inappropriate dressing which offended some members of the audience. The fact that the people involved in the creation of the performance were not the ones who conducted the research contributed to such slippages.

To validate the research purpose of monitoring and evaluation it had to be conducted by a registered research institution. However, the monitoring and evaluation of the project came at the cost of empowering facilipants and ultimately compromised the TFD performance. That is to say, the need for monitoring and evaluation contradicted the needs of those for whom the performance intervention was meant.

In addition to this, since the PACED model is a process that aims to empower its participants and equip them with the necessary skills for the creation of HIV and AIDS interventions (Boneh and Jaganath 2011), the use of external third party researchers stood in contrast to this aim. Most of the facilipants reportedly felt disempowered and betrayed by this external intrusion from the hired researchers.

(vi) Data analysis stage

This stage involved sharing data that the facilipants had collected from the target site and from their shared personal stories. This was followed by analysis of the most significant issues that emerged. It also included selecting themes for creating the performance through voting. This allowed for what Darder (2003) calls democratic participation.

The process involved the participation of all the facilipants as each participant reported the information he had collected from the community. Together we analyzed it and came up with a list of relevant themes. The process of theme selection was not only democratic but also participatory as all the themes that emerged from the research were written down in both English and Chichewa (local language) to suit all the facilipants. Each facilipant cast a vote as to

which theme they found the most appropriate for the creation of the performance. This was followed by the processing of the themes and then using them to create a performance.

(vii) Performance creation stage

From the chosen themes, facilipants created possible story lines and proceeded to create performance sketches. Guided by these storylines the directors of the project processed the material generated during data analysis stage and came up with a final storyline. Although the storylines had originally come from the facilipants, thereby empowering and giving ownership to them, the directors took away the process from the facilipants when they created the final storyline. Some journal entries on this day expressed feelings of disappointment as the participants had wanted to create the final storyline themselves. By feeling capable and confident of creating the storyline, the facilipants demonstrated the extent of the empowerment they had gained during the process of the PACED model. And by having the process taken away from them, they felt disempowered.

(viii) Rehearsal stage

Although the final working storyline had been created for the participants, the improvisation process of developing scenes that led to the creation of the play for the performance was handed to the participants. According to Taylor (2007), the process of improvisation means that a topic is constantly under review. He further argues that every performer is author of their own work within a collective statement (Taylor 2007). The participants constantly engaged in creating scenes, presenting them to the group and receiving comments which led to the

adjustment of the scenes and sometimes a removal of entire scenes. They worked and reworked the scenes, which also altered the story making this stage a continuous process of engagement and negotiation (Prentki and Preston 2009).

(ix) The community entry stage

As discussed earlier, collaboration is of fundamental importance in the PACED model. As the methodology is designed to tackle HIV and AIDS through engaging with contextual matters, there is need for involvement of the community for which the performance intervention is meant. Thus it makes the community a vital partner and stakeholder in the methodology which necessitates their inclusion.

While rehearsals for the Make Art/Stop AIDS TFD performance were in progress, briefings and negotiations for entry into the community were being conducted. Although negotiations included collaboration with the community and arrangements for facilipants to enter the community to perform the already packaged play, the intervention had already been created, planned and structured in the absence of the community and could not accommodate much change.

The exclusion of the community in the planning and creating stages of the intervention questions the extent of partnership, collaboration and the community's ownership of the intervention. As the host community holds the key to the unlocking of the border that enables them to cross from one state to the other (Giroux 1994), its exclusion from the creation of the

performance not only poses a contradiction, but also undermines the agency of the community in matters that affect it.

Chambers (1997) describes the tendency by practitioners to want communities to participate in their projects as opposed to participating in the community's projects as instrumental participation. This tendency points to a staged form of participation which undermines dialogue, collaboration and reciprocity. These concepts are essential to the empowerment of the community and the sustainability of the intervention.

In practice, the exclusion ignited feelings of being used and raised suspicions and mistrust between us and the community which threatened possibilities for healthy collaboration. It also undermined the capacity of the local authority, which explains the community leaders' resistance to participate in the project.

When the chiefs of the community were briefed about the project, they were reluctant to welcome the project into their villages, let alone to participate. Since the chiefs were vital stakeholders, we probed the cause of their reluctance. They conferred for a few seconds and responded that, "*Mvula isadawagwere ana imayamba yagwera akulu* (Before it rains on the children it rains first on the elders)". This was a metaphor suggesting that before the community benefits from the project, the chiefs should benefit first. They were referring to monetary benefit. They wanted to know how much they would receive for their participation in the project before they agreed to collaborate. The facilitator had made it clear that there would be no monetary benefit, hence the reluctance.

The instrumentality of this kind of participation cannot be overstated, but the question of who is instrumental to who arises when community leaders demand payment for their participation. This puts into question the aspect of participation and whether such participation can be sustainable. In spite of the problem of HIV and AIDS being prevalent in the community, the chiefs resisted the project and presented a challenge because they did not take part in the initial planning and decision making processes. Therefore if the facilitator wanted them to collaborate and participate in the project, she had to pay for it reducing collaboration and participation to a business transaction. This confirms Prentki's assertion that 'theatre is being applied to a world where being human has been reduced to a set of transactional economic relations' (Prentki and Preston 2009: 252).

"Many people like you come here with their projects and they give us money to take part *ndiye inu mukufuna mutidyere masuku pamutu*? (So you want to eat the apples right off our heads?)". This was the response of the chiefs when we informed them that apart from refreshments, there would be no payment for their participation. The chief's statement suggests the existence of mistrust and suspicion which came about due to their exclusion from the initial stages of the intervention. This according to Freire (2005) hinders dialogue, as dialogue is based on trust. Hence the stages that we followed in the implementation of the PACED methodology had contradictions that needed to be addressed.

As facilitators, we were not prepared to leave without earning the chiefs trust and collaboration. After failed attempts to convince the chiefs to participate in the project, we

resorted to presenting our argument in a language they could understand. According to Dickinson (2011), a mythical story requires another mythical story in order to counter the existing one. He also adds that if the community understands myths, then create myths for them. Since the chief's had used metaphor in their initial request for payment, we also responded by telling them the mythical story of a man who was walking along the pathway when suddenly he heard a strange noise. When he turned to look, a tree fell on him and covered both his legs. He was stuck there and couldn't move. Another man was passing by and saw the trapped man. The passerby rushed to lift the tree. But it was too heavy for him, so he asked the trapped man to push from underneath. The trapped man refused to push unless the passerby promised to pay him.

By the end of this story the chiefs murmured at the trapped man's ridiculous response and reaction. They claimed it was ridiculous for the man to ask for payment when he was the one who was trapped. Upon reflecting on the story, the chiefs finally agreed to collaborate and participate in the intervention. They even decided to create their own drama group to actively participate in the community workshops.

Although things turned out well in the end, it seems we had manipulated the chiefs into participating in an already structured intervention. As a methodology that strives for collaboration with stakeholders, the PACED model contradicts itself when it becomes more of an imposition than a healthy collaboration. This stage of the methodology needs to be part of the initial planning stages of the community intervention. Otherwise the PACED methodology tends to contradict the very principles that guide it.

(x) Living with the community stage

Having finally established the contract with the community chiefs, we worked from the community, performed from the community and conducted workshops while living with the community. The male and female facilipants lived in separate houses a few kilometers apart. Although I will refer to the male facilipants, my analysis of this stage mainly focuses on the female facilipants as I was living with them.

The concept of living with the community has developed with the development of TFD in Malawi. According to Kamlongera (2004), living with the community is an essential part of the research component of TFD as it enables shared experiences, shared understanding and shared life. It reduces the gap that exists between practitioners and the community, which in turn challenges social structures that foster oppression through the creation of binary divisions based on economic and cultural supremacy. This thwarts the democratic participation of all people which may hinder empowerment. However, this stage comes too late in the PACED methodology as it could have been more appropriate in the research stage of the community intervention.

Direct engagement with the community by living with them enhanced familiarity between us and members of the community. The same can be said about the facilipants going to fetch water at the village borehole and carrying buckets on their heads just as the women in the village did. At the borehole, they also socialized with the village women. On one occasion the facilipants attended a funeral in the community. These efforts from the facilipants earned them acceptance by the community.

However, our stay in the community raised contradictions between the facilipants expectations and lifestyle and the living conditions and lifestyle of the community. To begin with, the male facilipants refused to live in the house the community had given us because it was grass thatched and did not have a cement floor. They threatened to go back to the city and commute to the village for the workshops if another house with iron sheets and a cement floor was not provided for them. Fortunately for the project another house was found after an intensive search a few kilometers from the initial house.

The incident almost cost us the acceptance and trust of the community as it gave the community the impression that we were insulting, rude and arrogant. This in turn could have jeopardized prospects of dialogue with the community during the intervention. As Freire (2005) has argued, no dialogue can come out of arrogance or a feeling of being superior over others. In order for dialogue to take place, there is need for humility between both parties. The facilipants rejection of the accommodation may have implied the community's inferiority which widened the gap and enhanced unequal power relationship between the facilipants and the community which in Heathcote's (1991) view hinders learning. The incident was still being talked about by some of the community members a few days after it had happened.

Although we were living with the community, our stay in the community contradicted the purpose and function of the concept which Kamlongera (2004) argues is to share the life and experiences of the community. Apart from the engagement with community groups during workshop time, the facilipants still remained isolated from the community. When the facilipants were not at the workshops, they would often gather together chatting and playing

with their sophisticated mobile phones. During the night the facilipants stayed up till late laughing and making noise until one of the community members complained about the noise. This lack of community etiquette widened the gap between us and the community as such behavior was alien to the community.

Although we tried to dress like the community, we did not eat like the community or live like the community. Our meals often consisted of meat, chicken and eggs with rice or nsima. Vegetables were included but not without meat, chicken or eggs which was far from the daily meals of the villagers. In addition, we employed two ladies from the village to cook for us and other smaller girls were employed on temporary basis to fetch bathing water.

This kind of VIP treatment was contrary to the way of life of the community. We lived in the village like we live in the city, all that had changed was the setting. This suggests that although we had crossed the physical borders of space from the city to the village, our minds and hearts did not cross the borders with us, to use Giroux's (1994) terminology. In short our way of living with the community contradicted the purpose of our stay, which was to bridge the cultural gap through living with the community. But instead of living with the community as we claimed, we were simply living in the community.

(xi) The Performance intervention stage

The community outreach was generally high with attendance of approximately 1500 members of the community between the two performances held at Govala and Machirika villages respectively. Both performances started with a football match between the facilipants and the

community to encourage the men who often shied away from such gatherings. The performances followed having interactive sessions at the end.

Through the play the audience engaged in dialogue about issues such as the fear of HIV testing and the use of condoms. They explored solutions to the problems thereby fulfilling the essence of TFD as it is a theatre that helps the community to solve its own problems (Mda 1993; Kerr 1995; Kamlongera 2002). Through these explorations the performance intervention acknowledged the capacity of the community to reflect and act upon its situation.

However, the community outreach still created a contradiction within the PACED approach itself. Although the community had participated in the research that informed the performance, the community had not participated in the creation process that led to the performance. On the contrary, they were participating in the product. This stands in contrast with a core concept of the PACED approach which asserts that 'performers and communities must have absolute freedom to determine the themes and content of the performance (Boneh and Jaganath 2011: 2).

Since process oriented approaches have proved more effective and empowering than product oriented approaches (O'Neill 1995; Prentki and Preston 2009), all stakeholders must be included or at least fairly represented in the process of creating the theatre. The Make Art Stop AIDS performance intervention lacked community representation in the theatre creation process as we did not involve the community in determining the themes and content of the performance as stated in the PACED model. The theatre making process provides participants with the opportunity to develop new ways of knowing and understanding which are necessary

to deal with the fear of HIV testing, stigma and discrimination. It is imperative for applied theatre practitioners to involve as many members of the target community as possible.

(xii) **Community workshops stage**

Having been participants themselves, the facilipants were given a chance to facilitate community workshops that were conducted with the community after the intervention performance. This was done in order to give the facilipants hands on experience in facilitation. We engaged 9 community groups in workshops. These included a chiefs group, a women's group, a support group and drama groups from the community. The facilipants facilitated the workshops for the groups to create interventions dealing with issues that they faced. Although the participants from the community groups created their performances based on issues they saw as problematic, they themselves did not engage critically with the issues like the facilipants did. The community workshops culminated into a community festival organized by the facilitators. Over 1200 members of the community were in attendance. After the festival, the team moved out of the community.

3.3 Conclusion

The concepts that underlined the PACED methodology as applied in the Make Art/Stop AIDS project created contradictions in the different stages of implementation. The collaborations in different stages of the intervention lacked involvement of all stakeholders. This resulted in the emergence of other contradictions that included the use of unfamiliar games and exercises to

create familiarity and ownership and the instrumental participation of the community at the product stage as opposed to the process stage.

In addition to this, other contradictions emerged due to the contradictory nature of the needs of the project that was evident in the performance research stage. The need for hired researchers for monitoring and evaluation contradicted the needs of those for whom the intervention was meant. Furthermore, the order of the stages of the methodology created paradoxical effects as some stages which should have come earlier came later in the process of intervention. The next chapter examines paradoxes that arose from the gap between knowledge and action. It explores the contradiction between reality and appearance in the views of the participants.

CHAPTER 4

THE GAP BETWEEN KNOWLEDGE AND ACTION

4.1 Introduction

According to Freire (2005), for transformation to take place, there is need for the co-existence of theory and practice, reflection and action, words and deeds which also entails a balance between knowledge and action. He further argues that without practice, theory becomes abstraction or verbalism, that is to say, simple words without action that are irrelevant to transformation. It appears that the gap between appearance and reality has characterized HIV and AIDS interventions in Malawi. While awareness of HIV and AIDS has been generally high, real change has been slow. Government and non-governmental organizations (NGOs) have done a great deal in sensitizing the general public about what can be termed as facts of HIV and AIDS. Currently, it is believed that a majority of Malawians have basic information pertaining to HIV and AIDS so much that if one were to ask a 10-12 year old about how to prevent HIV, one is likely to get the right response.

Apparently people seem to know the facts about HIV and AIDS but in spite of such knowledge their perceptions, attitudes and behaviors do not seem to reflect that knowledge. In other words, contradictory perceptions seem to manifest within the same individuals. This can be likened to the contradiction between Freire's theory and practice (in Darder 2003). It could also be a contributory factor to the minimal change that has occurred in HIV and AIDS education in

spite of the numerous efforts that have been made. The overload of information has tended to create fatigue around issues of HIV and AIDS to already over-sensitized communities as more identical information continues to be disseminated.

This chapter seeks to examine the gap between knowledge and action. It examines some of the contradictions between appearance and reality that emerged during the course of the Make Art/Stop AIDS project intervention.

4.2. Images speak louder than words

Freire (2005) contends that words are the essence of human dialogue which can lead to transformation and liberation. The word constitutes the dimensions of action and reflection. He further argues that without action, the word becomes simple verbalism which cannot facilitate change since there is no transformation without action. That is to say, when a contradiction between what people say and what they do arises, transformation is impossible. Such paradoxes have affected HIV and AIDS interventions, which in turn has hindered meaningful change in people's perceptions and attitudes towards HIV and AIDS.

In recognition of the need for a working relationship between students (with undeclared status) and people living with HIV in the first stage of the Make Art/Stop AIDS intervention, separate meetings were held to discuss and work through the participants' fears and anxieties about working closely with each other. My focus in this section will be on the workshop held with the student participants, who, for purposes of discussion, I will refer to as undeclared participants. It is important to note that some of these participants had been active facilitators

in HIV and AIDS interventions prior to their participation in the Make Art/Stop AIDS project. Nevertheless it was imperative for facilitators to know and understand the attitudes of the undeclared participants towards people living with HIV. However, it was difficult to know the truth of their words through verbal conversation alone.

According to Boal (2006), words are the work of reason, when we hear or speak them, they can override our senses and hinder our ability to see things more clearly. He further appeals for the need for alternative ways of communication that not only serve reason, but also the senses. Among other things, Boal (2006) sites images as a form of communication that transcends the word to reach concrete reality. In this regard, we engaged the undeclared participants in verbal expression as well as creative expression through the use of drawings.

When we asked the undeclared participants about how they felt working closely with people living with HIV, they appeared to have no problem. They expressed the following views;

- People living with HIV are normal people just like us
- With treatment they can live healthy positive lives
- One cannot know a person living with HIV just by looking at them
- It is good and important to go for HIV testing to know one's/your status

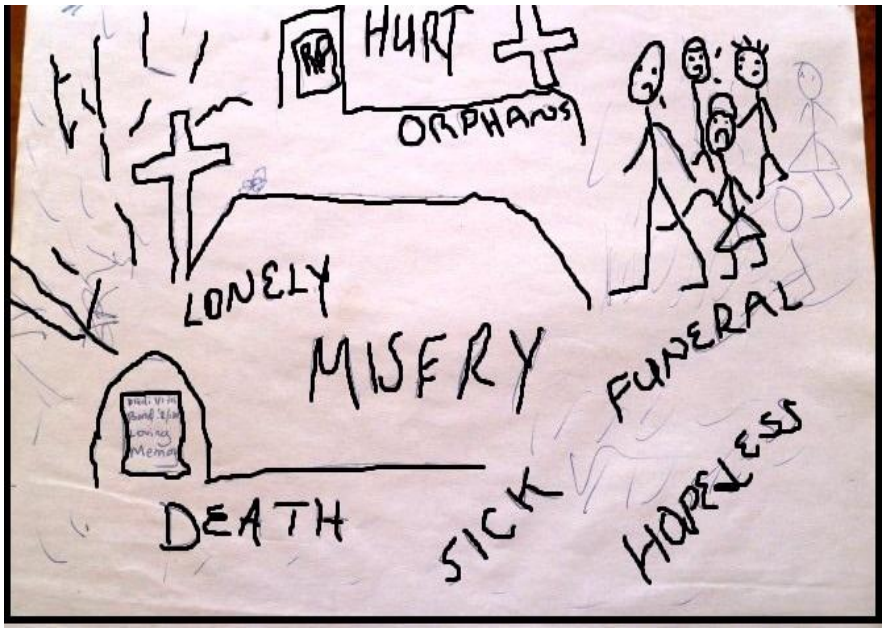
Thanks to the efforts of HIV and AIDS sensitization campaigns, the above views reflected the accurate knowledge that the undeclared participants had about people living with HIV. However, in spite of this knowledge, what emerged from their non-verbal image based

responses contradicted their verbal views. According to Hyle and Kearney (2004), images have the ability to surface unspoken thoughts and feelings. They offer an alternative glimpse into human-sense making than written or spoken words. Thus in order to have a deeper understanding of the undeclared participants' views, we asked them to draw an image or a picture of what they thought an HIV positive person looked like. The following were some of the images that emerged.

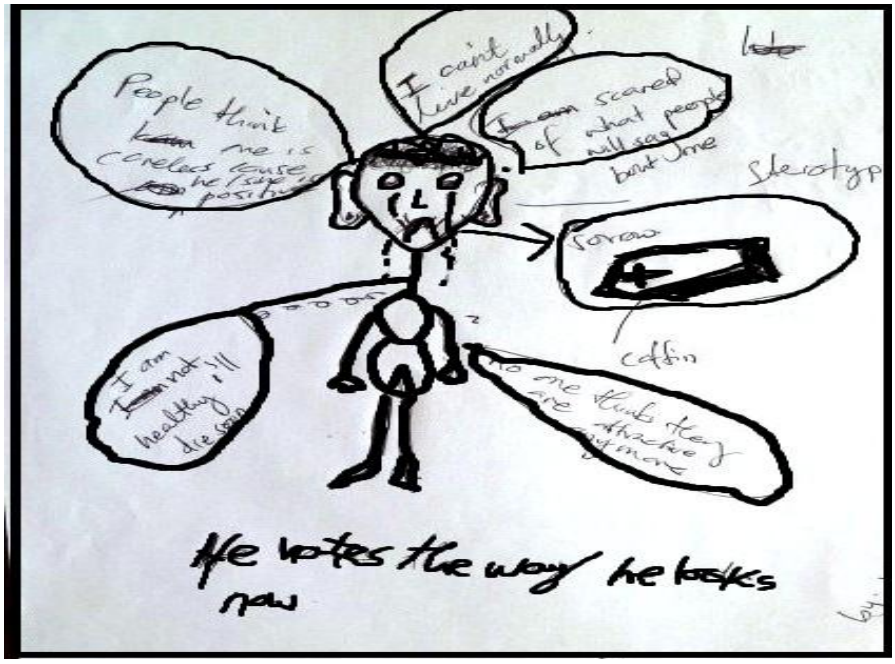
Drawing 1



Drawing 2



Drawing 3



Drawings can be a way of understanding the emotions and feelings that influence people's behaviors (Hyle and Kearney 2004). This can help to know whether a person's words are simple verbalism or transformational. The drawings that emerged from undeclared participants served to explore their inner feelings towards people living with HIV. This not only led to an understanding of how people who engage in applied theatre interventions view HIV and AIDS, but also their ability to facilitate such interventions.

The images of people in drawings 1 and 3 suggest that people living with HIV are unhealthy looking people as shown by the skinny and bonny looking bodies. Drawing 1 depicts the person as a walking skeleton, evidenced in the protruding ribs and bones in the upper body of the image. Since images have an ability to bring out unspoken thoughts and feelings (Hyle and Kearney 2004), the two images give the impression that people living with HIV can be identified by their appearance. It also suggests that people living with HIV are sickly, unattractive and unhealthy. These two views contradict the verbal views by the same participants that one cannot identify a person living with HIV by looking at them. It also stands in contrast with the sentiment that people living with HIV can live normal healthy lives. This in turn creates a paradoxical relationship between the appearance and the reality of the participants' perceptions which according to Freire (2005) hinders transformation.

Drawing 3 presents a sad face with tears flowing from the person's eyes. This face is accompanied by written words, which offer a description of the thoughts and feelings of the person in the image and those of the person who created the image. What comes out from the

image is the fear, misery and anxiety that characterizes the lives of people living with HIV, at least in the eyes of the undeclared participant who created the image. In spite of their professed knowledge, all three drawings suggest the recurring theme of death for people who are HIV positive.

The drawings contained symbols which represent events, feelings and processes that people living with HIV undergo in the views of the participants. Drawing 1 presents a tombstone, which symbolizes death. The person living with HIV is also walking towards it, almost falling into the grave. This is a metaphoric representation of the nearness to death of the person living with HIV. The arrow in the drawing points directly to the grave, which may symbolize that once a person is HIV positive, they are destined to death and have no other alternative. Drawing 3 also contains a symbol of death in the form of a coffin. While the person living with HIV is suffering and living a miserable life, death awaits him as the coffin suggests. The second image completes the journey to death as it portrays a funeral and an entire graveyard. These images suggest that once a person has HIV, they have embarked on a journey towards death. The second image through its portrayal of the grave yard suggests that people living with HIV are as good as dead. Drawing 2 further portrays the effects of the dying person living with HIV which includes orphaned children.

These symbols of death contradict the impression of life that was evident in the verbal views of the undeclared participants, which suggests that what they had said was not true. As Freire (2005) asserts, no true word is spoken without accompanying practice or action. He calls words

deprived of action 'idle chatter' or 'verbalism' (2005:87). Freire (2005) further argues that it is impossible for transformation to occur with such words or knowledge. Thus, instead of the words of the undeclared participants becoming a tool for dialogue, on the contrary they frustrated dialogue which in turn hindered their liberation from the fear of HIV that oppresses them. This is because by saying things that do not reflect their reality as regards HIV and AIDS, they misguide the dialogue to focus on unnecessary issues.

Boneh (2008) argues that the images that people have about living with HIV affects their attitudes towards it. Sutherland (2012) also asserts that things are not what they are, but what we perceive them to be. This suggests that regardless of the facts of HIV, the way people perceive HIV and people living with HIV determines their attitudes and behavior in relation to HIV. According to Freire (2005), when a gap exists between what one knows and their action, no change is possible. The perspectives and perceptions as illustrated by the images may have been responsible for the fear of HIV testing that the majority of participants shared later in the process. In spite of their verbal utterances that it was important to know one's status, three quarters of the group said they would never go for HIV testing especially while they were still in college. They claimed that if they were to be found HIV positive they would be devastated and would not be able to deal with it. Others said they would fail their examinations while a female participant claimed that life would simply be over. These later sentiments seem to reflect the undeclared participants' fear of HIV that was evident in the images they had created. It also suggests that the process of creating the images helped to liberate the participants from the confinement of reason which was manifest in their words. As Boal (2006) argues, words are

limited by reason and have the capacity to obstruct reality by conveying what is rational as opposed to the truth. Images on the other hand allowed each participant to dialogue with themselves and to express what was real to them.

Given that all the participants grew up being exposed to HIV and AIDS messages, it is baffling to see how little such knowledge had translated to. There seemed to be a minimal shift towards meaningful border crossing, which according to Giroux (1994) necessitates change. This questions whether the extensive knowledge of facts brings about meaningful change in people's attitudes. Freire (2005) argues that such knowledge is only transformational when it is accompanied by action. Otherwise when people change in theory, and not in practice, a contradiction that hinders change is created.

Another paradox emerged when considering that some of the undeclared participants who held the views discussed above had been facilitating HIV and AIDS interventions. This presents an interesting account that individuals who were struggling with prejudices relating to HIV and AIDS had been helping others address their own challenges. This tendency in human behavior for people to want to help others when they themselves are in deep need of help has existed from time immemorial. Even the Christian bible, which documents events as far back as 2000 years ago, questions such tendencies.

> Why do you look at the speck of sawdust in your brother's eye and pay no attention to the plank in your own eye? How can you say to your brother, "let me take the speck out of your eye", when all the time there is a plank in your own eye? You hypocrite, first

> take the plank out of your own eye, and then you will see clearly to remove the speck from your brothers eye (Mathew 7 verse 3 to 5).

The scripture above implies that before facilitators or activists embark on a mission to facilitate others to change their attitudes and behaviors they must deal with their own problematic attitudes in order to better facilitate others. Otherwise they may worsen the other's already problematic situation. Thus, instead of just equipping participants with tools to facilitate others, there is need for facilitators to first deal with their own prejudices. This would help achieve praxis which Freire (1971:2005) describes as the balanced relationship between theory and practice or words and deeds. That is why, in the workshops that followed, we engaged the participants in an intensive process which allowed them to explore their own prejudices and challenges regarding HIV and AIDS in order to shift their perspectives before they engaged in creating interventions for the community.

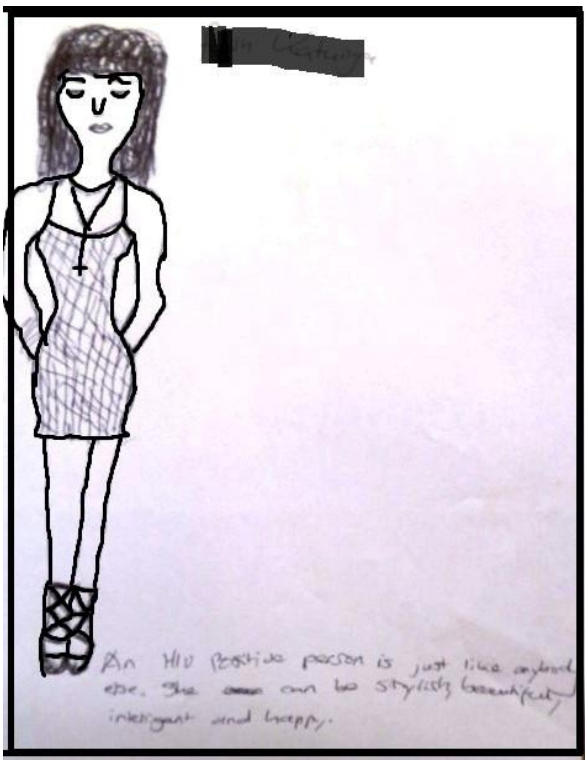
4.3 Bridging the gap in contradictions

Addressing the above contradictions entails bridging the gap between, knowledge and action, appearance and reality, words and action, verbal and non-verbal significations. The whole intervention of the Make Art/Stop AIDS process contributed to addressing these contradictions as shown in the stages of the PACED methodology discussed in chapter 3. Each stage had a contribution to untangling these paradoxes. Engaging closely with people living with HIV helped undeclared participants to realize their prejudices about being HIV positive. Exploring contextual realities of HIV and AIDS and sharing personal narratives relating to HIV and AIDS

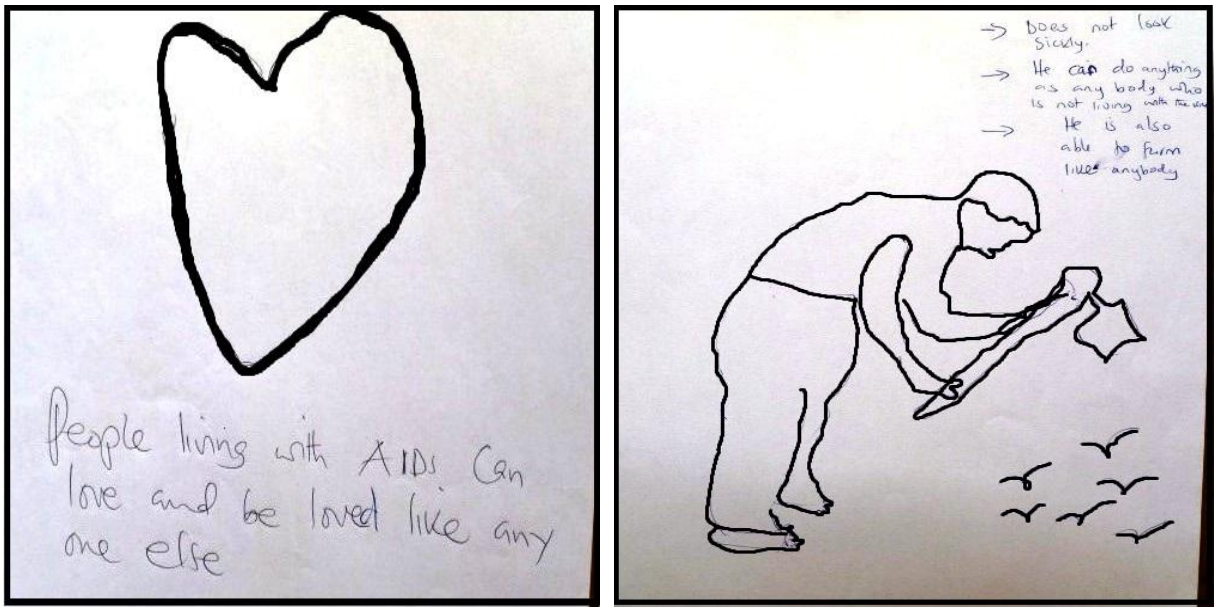
and dramatizing them also allowed the participants to develop empathy as they stepped into other people's shoes during the presentation of the sketches.

In the last workshop of the intervention, the undeclared participants were given the same task as in the first workshop. They were asked to create an image of their perceptions of people living with HIV. The following images emerged;

Drawing 1



Drawing 2 **Drawing 3**



Looking at the above images, there was a tremendous shift in perception and attitudes towards people living with HIV which suggests that the whole process of intervention facilitated border crossing (Giroux 1994). It also confirms that process based approaches are more powerful than product oriented ones (Prentki and Preston 2009: O'Neill 1995). In all three drawings, there was a portrayal of hope for people living with HIV contrary to the first images. Drawing 1 shows a well-dressed, healthy looking woman, which suggests that a person living with HIV can look like one who is not infected with HIV, thus cannot be identified through appearance. By showing a man working in a farm, the third image suggests that people infected with HIV can work and go about doing their daily chores like everybody else. The heart in the second image symbolizes a life of love. All the above images point to the shift in perception of the participants after their engagement with the Make Art/Stop AIDS project. Contrary to the perceptions of doom and death, these images are affirmation of hope and life after HIV. This reflected the border

crossing that had occurred within the undeclared participants and the balance between their knowledge on HIV and their attitudes in relation to it. It also bridges the gap between knowledge and action.

4.4 Conclusion

This chapter has examined how drawings revealed contradictions between appearance and reality. It has also looked at how such contradictions can affect HIV and AIDS interventions. The chapter has explored the contradictory nature of what people say as opposed to what they really feel and what they know as opposed to what they do in spite of their knowledge. It illustrated how drawing images as a creative exercise enabled participants to bring out the reality that influences their attitudes towards HIV and AIDS. The chapter also unpacked facilitators' attempts to help others address their prejudices when they themselves have not addressed theirs. The chapter that follows examines the paradoxes around the application of folk media in HIV and AIDS interventions. It interrogates how folk dances, songs and drumming create contradictions during the process of intervention.

CHAPTER 5

THE USE OF FOLK MEDIA

5.1 Introduction

Stichele (2000) describes folk media as the ways in which common people express themselves, communicate their ideas, values and beliefs. This may include beating drums, songs, dances, village criers, folk tales, proverbs, riddles and ceremonies such as initiations, funerals and weddings. The use of folk media in applied theatre interventions has become popular in recent years owing mainly to the popularization of what UNESCO refers to as 'the cultural dimension of development' (UNESCO 1995). This has seen the inclusion of communities as vital partners in development work as they are more knowledgeable about their culture.

However, communities are often 'led into participating in workshops using 'folk' songs, dances, poems and stories that have already been planned for them' (Chinyowa 2009: 4). This in turn contributes to contradictions that characterize HIV and AIDS interventions. Drawing from selected workshops from the Make Art/Stop AIDS project, this chapter examines contradictions that emerge through the use of folk media in HIV and AIDS interventions in Malawi.

5.2 Pre-packaged dances

Although folk media has been recognized as one way of encouraging participation and dialogue in development, there is need for further work on how to actually employ this medium (Kamlongera in Stichele 2000). Kamlongera argues that 'too much emphasis is placed on folk

media as a channel for communication at the expense of understanding the context in which these media operate' (in Stichele 2000). This section examines how *Chimtali*, a traditional Malawian dance was applied in an HIV and AIDS intervention during the performance stage in the Make Art/Stop AIDS project.

Chimtali is an all women's dance in which performers dance in a circle surrounding drummers. The dance is popular in the central region of Malawi among the *Chewa* people. Traditionally, two drummers play different rhythms on one round double-headed drum (Nthala 2009). In spite of the emergence of other versions of the dance over the years, the core *chimtali* dance, which is the most common version 'represents general traditional values of society and a display of female-ness in the Chewa dance domain' (Nthala 2009:149). The emerging versions were viewed by the community as undignified and disrespectful due to their emphasis on aggressive movement and the wriggling of the waist, hence they became unpopular. In the common version of *chimtali,* dancers perform with their backs slightly bent in moderate graceful movement, as it is a dance of decency, dignity and respect.

The songs are mostly a commentary on traditions and happenings in the community from the women's perspective. They are spiced by dances characterized by women in uniformed or non uniformed bright colored dressing accompanied by a *chitenje* (wrapper) wrapped around the waist. The costume is complemented by a *duku* (scarf) wrapped on the head in different styles depending on the age of the dancers. The dance allows women in the community to voice their opinions on matters that affect them. Hence, they participate in the process that facilitates

change. According to Darder (2003), having a voice is an emancipating and humanizing way of existence.

Unaware of the function and purpose of the dance, we (Make Art/Stop AIDS project) adopted it and used it in our performance intervention at Makwapala, a predominantly *Yao* speaking community in Zomba, located in the southern region of Malawi. Not only was the dance removed from its context and applied to a different context in a different community, it did not serve its function amongst the *Yao* people. By applying the dance to a context in which members of the community did not identify, we monopolized the power relationship between us and the community as they were at a disadvantage of not knowing. This hindered their participation and silenced them as they could not express themselves through the unfamiliar dance. Freire (2005) argues that silence is a form of oppression which dehumanizes people and takes away their ability to change the situations in which they find themselves.

Part of the song that was applied to the Yao context included;

> Call: *Amake mwana alikuti pano*? (Where is the mother of the child?)
>
> Response: *Ali m'nyumbamo yawatseka pakhosi nyama, akuchita manyazi kutulukira kubwalo.* (She is inside the house a piece of meat has closed her throat, she is ashamed to come out in the open).

This *chimtali* song is originally sung during wedding ceremonies. Yet we took the song and applied it to an HIV and AIDS performance that had nothing to do with weddings. Our inadequate knowledge of the dance raised contradictions in its use and application. Instead of it

being a women's only dance, the male participants in the project also participated in the dancing thereby contradicting the original ethic and function of the dance, which is to celebrate femaleness. As Nthala asserts, 'music and dance play a vital role as symbols of social boundaries' (Nthala 2009:30). The inclusion of male participants as dancers in an all women's dance may have been a symbol of crossing such boundaries, which results in alienation. Since the community sets up its own rules and codes of conduct in the making of their own identity and history, breaking such rules can be oppressive as it entails lack of acknowledgement of the community's freedom to determine how they live their lives.

According to Freire (2005), dialogue comes from naming the world which we live. This facilitates humanization. Thus by naming its world through the rules the community sets up, it humanizes itself. Establishing such self identity is after all the essence of folk media, according to Stichele (2000). Change should not be forced on people but facilitated through dialogue which leads to reflection and action (Freire 2005). That is to say, our presentation of the *chimtali* dance should not have been an imposition on the community, as this cannot liberate but domesticate communities and leave them vulnerable to manipulation.

The actual performance was introduced through an unidentified dance from the central region, followed by the *Chimtali* dance. The entire performance was in the form of a play with singing and dancing linking the scenes and sometimes commenting on the action. Some of the songs within the play also included *chimtali*. The first two songs were for *kalambula bwalo* (clearing/preparing the arena). These were meant to arouse interest and familiarity and to encourage participation in the audience.

Kamlongera (2004) argues for the use of what is familiar to the people in order to encourage ownership and empowerment. O'Neill (1995) concurs and discusses the importance of establishing such ownership when beginning a performance process. Although Make Art/Stop AIDS used folk media in the intervention, the inclusion of a *chimtali* dance at the beginning of the performance alienated the community instead of creating familiarity. Apart from the village drumbeaters who were hired for the performance, the rest of the community watched with interest and enjoyment as the performers danced. But they did not join the dance in spite of our invitation.

Yet prior to the performance, immediately after a football match between the Make Art/Stop AIDS performers and the community, when the facilitator led *Malangalanga*, a dance which was popular in the community and one which some community members were dancing during advertisements for the performance, the audience had joined the dance with enthusiasm even without being invited. This suggests that dances meant to enhance familiarity and create ownership should not be pre-packaged for the community but rather should be led by the community or in partnership with them. This according to Freire (1971) is a liberating principle that acknowledges the peoples humanity and agency.

On the other hand, when communities are made to participate in our dances and performances as opposed to us participating in theirs, it becomes instrumental participation rather than transformational learning (Chambers 1997). This may also imply us wanting the community to dialogue about our problems as opposed to theirs, which Freire (2005) considers as an imposition which serves not to liberate but to oppress.

‘Education about HIV and AIDS requires us to talk about sex, about relationships with sexual partners and about matters which touch us on a deeply personal level’ (HEAIDS 2010:13), thus it is vital that the local community participates freely and owns the process when such themes are discussed. Using unfamiliar dances taken out of their context alienates the community and affects their participation. It also compromises engagement with deeper issues that go beyond factual information. Without participation of the community, no meaningful change can occur (Darder 2003; Kamlongera 2002).

5.3 Compromising the people’s songs

In spite of the Make Art/Stop AIDS performance having been pre-packaged, the community workshops that followed were more community driven, a manifestation of Byam’s (1999) assertion that the community should provide the context within which the workshops must be conducted. It also placed the community at the centre of the workshop intervention process which, according to Prentki and Preston (2009), creates critical learning. This critical learning is vital in HIV and AIDS education as it promotes better understanding, which can alter people’s attitudes and perceptions.

Rowlands (1997) argues for processes that lead people to perceive themselves as able and entitled to make decisions. The community workshops that Make Art/Stop AIDS conducted fell under such empowerment processes as they were workshops in which community groups created interventions of their choice. Workshop participants determined the content of the

performances and the medium through which it was delivered, thereby making the community groups the centre of the HIV and AIDS interventions.

However, such empowerment and ownership is questionable when facilitators fall into the trap of dictating the content of the performance intervention. According to Freire (2005), any form of dictation is void of dialogue which presupposes monologue. He goes on to argue that monologue is a tool for domestication and to use it in the process of intervention is to create a new form of oppression. Thus, when facilitators encourage the use of folk songs while dictating their content, they are attempting to liberate participants by using oppressive means. While folk media has been found to encourage dialogue (Kamlongera in Stichele 2000), which frees participants as they are able to express themselves (Freire 2005), imposition of content tends to change the folk media into a tool for oppression.

An instance can be drawn from the last stage of the PACED methodology. On the first day of the workshops, the workshop facilitators arrived to meet the community groups for the first time. One of the nine community groups by the name of Kalupe drama group started singing a song. The song words were as follows;

> *anthu apadziko tembenukani mtima a yesu akubwera, ayesu akubwere x 3* (citizens of the world turn your hearts Jesus is coming, Jesus is coming x 3).

It was a beautiful melody and the singers danced happily as they voiced and asserted their beliefs. No sooner had they started the song, one of the facilitators stopped them saying, “No, change the song because there are people here who do not believe in Jesus. Why not put MASA

(Make Art/Stop AIDS) instead of Jesus?" The group seemed confused but their spirits were still very high. In no time the group had changed the words of the song to;

> *anthu apadziko tembenukani mtima a MASA akubwera, a MASA akubwera x 3* (citizens of the world turn your hearts MASA is coming, MASA is coming x 3).

Apart from the inappropriateness of MASA in the context of the song, the facilitators dictation of the content of the song suggests the contradicting loyalties of the facilitator with regard to whose needs, beliefs and ideologies comes first in the process of community intervention. Is it the community's or the practitioner's? In this case, the two came into conflict in the mind of the facilitator and created a contradiction. On the one hand the need to honour the beliefs of the community through the folk song and on the other, the need to please his funders. This contradicts the purpose of the intervention. As Freire (2005: 1971) suggests, if the facilitator does not work to serve the interests of his/her participants, he serves to foster oppression. Thus by manipulating the folk song to please his/her funder, the facilitator serves as an oppressor.

On the other hand, the facilitator's response to the lyrics of the song, appear to have been a reflection of his own oppression in relation to his supervisors. The manipulation of the song was intended to please the lead practitioner who did not believe in Jesus. Hence, the change of the song to reflect something that was neutral but not meaningful to the people. Ironically, the lead practitioner for whom the change was intended had previously made efforts to respect the people's beliefs. On one occasion, in spite of her own beliefs, she had made a prayer upon a

community member's request. Nevertheless, the facilitator's dictation of the song rejected the people's belief system while claiming to make use of their folk media.

Although the above scenario happened before the actual workshop began, it laid the basis for the way in which the workshops were to proceed with this group. The beginning of a workshop often sets the atmosphere for the engagement that follows. The song encounter created a monopoly of power on the part of the facilitator as it tended to set up a conventional 'teacher' and 'student' relationship. That is to say, it set up a power relationship where the facilitator (teacher) dictates his knowing and the participants (students) receive without question. Freire (1971) terms this banking education, which educators ought to be shifting away from. He likens the teacher to a depositor and the student to depositories. In this instance, there was no negotiation with the community to change the song but a simple imposition.

What also comes into question is whether facilitators are obliged to influence the folk traditions of the community. If facilitators reject and do not take into account and accept the community's religious beliefs, as manifested in their folk song, what then becomes of the intervention in its claim to empower communities through the use of folk media?

According to Stichele (2000), the creation of folk media depends on the values and beliefs of the community. In turn, the people's spiritual beliefs influence their attitudes and behavior in relation to HIV and AIDS. By stopping them from singing their own songs, facilitators create the impression that they do not believe in what the community believes. In other words, the community group feels a sense of judgment which is detrimental to the openness required to critically engage with HIV and AIDS issues. Thus instead of the song reflecting the people's

beliefs and ideologies, its content was manipulated to reflect the facilitators' own belief and ideology. As Chinyowa (2009) has argued, practitioners often tend to manipulate the process to suit their ideological ends, which appears to have left the practice of applied theatre at the crossroads in terms of both process and product. Does such a contradiction where facilitators dictate the content of folk media still count as meaningful intervention? If so, then whose folk media is it? More often than not, practitioners compromise the needs of the community in order to please their sponsors while claiming to intervene on behalf of the community.

5.4 Dancing to the men's tune

In one of the workshops during the third stage of the Make Art/Stop AIDS project, participants were divided into three groups to create images on the factors affecting the spread of HIV and AIDS in Malawi. This was part of engaging with contextual barriers to prevention and care within the process of intervention, which was also a core principle of the PACED methodology. This principle of engagement acknowledges the knowledge that participants bring to the workshop space. Such acknowledgement sets the basis for creative learning and creates a balance of power between the facilitator and the participants (Darder 2003).

The creation of images allowed participants to express their own thoughts and beliefs about the factors fuelling the spread of HIV and AIDS. This enabled them to name the world in which they exist, which in turn necessitates transformation (Freire 2005). The exercise provoked them to reflect upon their own social context.

For instance, one of the groups presented an image of a traditional dance performance with men standing in the middle of a circle and women dancing around them. The men in the centre were beating a drum. A male participant was crouched to form a drum in between the legs of the other male participant who was beating the drum while the women were dancing.

According to Boal, image theatre is 'based on the multiple mirror of the gaze of others' (2002:175). Thus when participants reflected on this image, they compared it with traditional ceremonies which encourage girls to have sex with men when they come of age. Some participants also identified the dance itself as a portrayal of male dominance. In Freire's (2005) view, to dominate is to oppress. Thus the image illustrated the oppression of women that exists in communities. To the participants, the image of men beating the drum and the women dancing meant that men make the decisions while women follow. By simply following, the women are unable to name the circumstances in which they find themselves. As Freire (2005) has argued, their humanity has been stolen from them. For to be able to name the world, is to be human.

Since participants came from different parts of the country, they agreed that the dance was a reflection of Malawian society. The image of men beating the drums and women dancing to the rhythm reflected the decision-making process where men make the decisions and women follow without question. The dominance of men over women renders dialogue impossible which in turn sustains the existing oppression. This makes it difficult for women to question men when it comes to issues of HIV and AIDS. The process of reflection and engagement encouraged the female participants to question the way things are in society. McLaren (1995)

has argued that any space that allows such interrogation facilitates conscientization which in turn sets the basis for change.

Although the participants engaged critically with the issues that emerged from the image, they did not engage with how folk media could be used to tackle the power relations between genders without contradicting itself. While the content of the folk dance could be working towards a change to a more balanced power relationship, at least as far as HIV and AIDS is concerned, the folk media itself could be sending out a subtle message that contradicts the content. The folk media tends to reinforce the existing dominance of men in the Malawian cultural context. The men beating the drums and the women dancing to the tune goes beyond the dance itself to imply male dominance over women.

Federman (2004) has argued that the subtle message of the medium behind the message is the message that people receive strongly as it works on the psyche. The beating of the drums by men and the dancing by women in folk media may symbolize the power relationship structure that exist in the communities where the men have the power to make decisions, and the women follow in the same way as they follow the tune of the drum. As Federman (2004:1) remarks, 'these dynamic processes that are entirely non-obvious comprise our ground or context. They all work silently to influence the way in which we interact with one another'. This suggests that folk media can be a tool to fostering and sustaining oppressive structures in communities. Thus by applying it to HIV and AIDS interventions, we may in essence be recreating oppression.

This above scenario also presents a challenge considering that most folk media in Malawi cannot be performed without the drum. Malawian women often refuse to dance in the absence of the drum. Yet the drum can only be beaten by men. This leaves us with the question that if drums are beaten only by men and women only dance to the tune, what likelihood is there for women to make their own decisions on issues relating to sex and reproductive health such as HIV and AIDS?

5.5 Conclusion

This chapter has demonstrated how folk media has the potential to create contradictions when applied to HIV and AIDS interventions. To begin with, pre-packaged dances have been shown to negatively affect active participation of the community as it alienates the community and minimizes dialogue instead of fostering familiarity and ownership. This often happens when a "one size fits all approach" is used in the application of folk media. When folk media is taken out from one cultural setting and applied to another, it poses serious challenges of communication. In some cases, contradictions arise within facilitators when they are confronted by a choice between the facilitators' own ideologies and those of the community. More often than not, facilitators compromise the community's values and beliefs and replace them with their own while claiming to be giving ownership to the community. Facilitators also claim to use folk media while imposing the content on the community. This raises questions of who does the folk media belong to? For whom is it created and who should create it and use it?

The chapter also showed that what people see in the folk media often goes beyond the content of the intervention. The subtle messages carried by the medium itself may convey a contradicting message to its content. By dancing to the drum which characterizes most folk media and is often beaten by men, women may be further subjecting themselves to men's domination in decision-making processes. This will in turn leave women vulnerable to HIV infection. Therefore it is important to be aware of such potential contradictions posed by folk media and how they can affect HIV and AIDS interventions. As McLuhan (1964) has argued, the content of any medium can blind us to the character of the medium itself.

CHAPTER 6

GENERAL CONCLUSION

6.1 Introduction

This study was concerned with identifying and examining the contradictions that affect HIV and AIDS interventions in Malawi. The main focus was on how facilitators engage with concepts and processes of intervention. In this chapter I conclude by providing a brief summary of my findings on the contradictions affecting HIV and AIDS interventions in Malawi. I also offer recommendations that can help to address these paradoxes in order to maximize effectiveness. Lastly, I suggest related areas that still need further research.

6.2 Summary of the study

Using a case study of the Make Art/Stop AIDS project, this study examined the methodologies, ideologies and processes which facilitators engage with in the course of their work. The study has concluded that HIV and AIDS interventions have been characterized by contradictions which compromise their effectiveness.

While practitioners have argued for people centered approaches (Escobar 1995; Chinyowa 2005; UNESCO 2005), externally driven interventions that tend to shift away from the people have been dominant in communities. Instead of liberating people, these initiatives have served

as instruments of oppression as they have excluded communities in the process of creating interventions that are meant for them (Freire 2005).

As illustrated by Make Art/Stop AIDS, the external origins of these initiatives adversely affects their implementation and exposes them to further contradictions. Due to their external nature, methodologies that are meant to empower people end up rendering them powerless as unfamiliar ideas and concepts create alienation among the communities. As evident in the PACED model discussed in chapter 3, these methodologies have created contradictions in the different stages of implementation mainly because of their external nature within the local community contexts. Thus, although there are elements of collaboration in different stages of the intervention, they lack involvement of all the stakeholders. More often than not, practitioners want to involve communities after the intervention has already been structured and planned, making their inclusion instrumental (Chambers 1997). This has resulted in the emergence of contradictions that include the use of unfamiliar games and exercises and the absence of agency and ownership among workshop participants.

The performance research stage of the PACED methodology also revealed how hired researchers contradict the needs of those for whom the intervention is intended. Again, when stages of implementation are not carefully designed to maximize the involvement of the community, it creates more paradoxical effects.

The study has also shown that there is often a gap between theory and practice within individuals engaging in HIV and AIDS interventions. There exists a contradiction between people's words and their deeds. That is to say, their verbal utterances oppose what they really

feel in relation to HIV and AIDS. This paradox has seen people having problematic attitudes and behavior relating to HIV and AIDS in spite of having accurate knowledge of the pandemic. The tendency by facilitators to want to help others address their prejudices when they themselves have not addressed theirs reduces their efforts to what Freire (2005) calls mere verbalism which cannot foster transformation.

This study has also shown that although folk media has been found to facilitate dialogue (Kamlongera in Stichele 2000), it also has the potential to create contradictions when applied to HIV and AIDS interventions. Pre-packaged dances have negatively affected active participation of the community as it alienates the community and minimizes dialogue instead of fostering familiarity and ownership. This happens when a "one size fits all approach" is used in the application of folk media. When taken out from one cultural setting and applied to another, folk media poses serious challenges of communication. Contradictions also arise within facilitators when confronted by a choice between the facilitators own ideologies and those of the community. Quite often, facilitators compromise the community's values and beliefs in favour of their own while claiming to be giving ownership to the community. They claim to use folk media while imposing their own content on the community. This raises questions of who does the folk media belong to? For whom is it created and who should create it and use it?

In addition, the study showed that what people see in the folk media often goes beyond the content of the intervention. Since the medium is the message, as argued by McLuhan (1964), the subtle messages carried by the medium itself can convey a contradicting message to its

content. By dancing to the drum which characterizes most folk media and is often beaten by men, women may further subject themselves to men's domination in decision-making processes. This in turn leaves women vulnerable to HIV infection. In this regard, folk media can be an instrument of oppression if not applied with caution.

These contradictions pose challenges for HIV and AIDS interventions and reduce their effectiveness. They negatively affect levels of participation, ownership, agency and sustainability. They ultimately create more contradictions within intervention efforts which hinder meaningful and sustainable change. This appears to have contributed to the slow change in people's attitudes towards HIV and AIDS in spite of numerous intervention efforts.

6.3 Recommendations and further research

People centered approaches to development interventions have emerged in order to allow community's to affect their own change (Escobar 1995; Chinyowa 2005). They serve to liberate people through participating in the making of their own history by acknowledging their ability to change the situations in which they find themselves. However, in their attempts to implement these approaches, practitioners find themselves submerged in contradictions. These thwart their efforts to address HIV and AIDS.

Therefore, in order to effectively implement people centered approaches, there is need for practitioners not only to examine the local realities of the people but to actively involve communities during the formation of these initiatives. Local communities should be involved in the formation of their own priorities and the designing of their own interventions. That is to

say, before any efforts are made to initiate an intervention, and to apply for funding, communities must participate in the development of the proposal to enable them to truly take charge of their own change. As Freire (2005) asserts, transformation cannot be done by someone naming the world on behalf of others. It is only through naming their own world that people are truly humanized. This suggests the need for communities to decide their own priorities and how to go about fulfilling them. Only then can practitioners claim to implement people centered interventions.

According to Kamlongera (1992), local communities possess their own ways of using performance to address problems that arise from within their contexts. Based on this, I suggest that practitioners identify the community members responsible for facilitating change to work together with outside practitioners in designing HIV and AIDS intervention strategies.

I also propose training of local facilitators, or choosing 'appropriate people' to lead groups in interventions. For instance, if the intervention is meant for a Yao setting, then the lead facilitator must be one who knows more about Yao traditions, preferably a Yao from the same community. This can help to minimize cultural slippages which alienate people from their own interventions.

However, further study needs to be done on the contradictions that may exist within the people centered approaches themselves. As suggested in chapter 5, folk media has the potential to be a tool for oppression. Thus there is need for further investigation on such cultural practices without allowing them to reinforce oppression and impede the success of HIV and AIDS interventions.

REFERENCES

Abdulla, S. 2009. *Challenges facing the Practice of Theatre for Development in Malawi: A Case Study of Creative Center for Community Mobilization (CRECCOM).* BA Thesis. University of Malawi, Chanco.

Blatner, A. and Wiener, D. 2007. *Interactive and Improvisational Drama*: *Varieties of Applied Theatre and Performance.* New York. iUniverse, Inc.

Boneh, G. and Jaganath, D. 2011. Performance as a Component of HIV/AIDS Education: Process and Collaboration for Empowerment and Discussion. *Framing Health Matters; American Journal of Public Health*. 101: 3, 2011, pp. 455 - 464. Available online. http://ajph.aphapublications.org/cgi/doi/10.2105/AJPH.2009.171991.

Boal, A. 2006. *The aesthetics of the Oppressed*. London. Routledge.

Boal, A. 2002. *Games for Actors and Non-Actors*. London and New York. Routledge.

Boal, A. 1979. *Theatre of the Oppressed.* London. Pluto Press.

Byam, D. 1999. *Community in Motion: Theatre for Development in Africa*. Westport (CT): Bergin and Harvey.

Chambers, R. 1997. *Whose Reality Counts? Putting the Last First.* London. Intermediate Technologies Publications.

Chambers, R. (1997). Paradigm Shifts and the Practice of Participatory Research and Development. In N. Nelson and S. Wright. (Eds.). *Power and Participatory Development*. London : Intermediate Technology Publications.

Chinyowa, K. C. 2005. *Manifestations of Play Aesthetics in African Theatre for Development.* Unpublished PhD thesis, Griffith University, Brisbane.

Chinyowa, K. C. (2009). A *Poetics of Contradictions? HIV/AIDS Interventions at the Crossroads of Localization and Globalization.* Drama Australia Journal, 33 : 2, 2010, pp. 21 - 30

Conquergood, D. (1998). *"Beyond the Text: Toward a Performative Cultural Politics", in the Future of Performance Studies: Visions and Revisions.* Washington DC. NCA.

Conquergood, D. (1999). *Performance Studies: Interventions and Radical Research.* London. Routledge.

Darder, A. et al. 2003. *The Critical Pedagogy Reader*. New York. Routledge.

Denzin, N. K. 2003. *Performance ethnography: Critical Pedagogy and the Politics of Culture*. California. Thousand Oaks, CA: Sage.

Dickinson, D. 2011. Myths, Science and Stories: Working with Peer Educators to Counter HIV/AIDS Myths. *African Journal of AIDS Research*, 10:1, 2011, pp 335 - 334.

Dimm, J.A. 2002. *Self and Other. Canada.* University of Victoria.

Escobar, A. 1995. *Encountering Development: The Making and Unmaking of the Third World*. Princeton (NJ). University Press.

Fabian, J. 2002. *Time and the Other: How Anthropology makes its Object*. New York. Columbia University Press.

Federman, M. 2004. *What is the Meaning of the Medium is the Message?* Available online. http://individual.utoronto.ca/markfederman/MeaningTheMediumistheMessage.pdf.

Freire, P. 1971. *Pedagogy of the Oppressed*. New York. Seabury press.

Freire, P. 2005. *Pedagogy of the Oppressed.* New York. The Continuum International Publishing Group.

Giroux, H. 1994. *Border Crossings: cultural workers and the politics of Education*. London. Routledge.

Heathcote, D. et al. 1991. *Collected Writings on Education and Drama.* Chicago. Northwestern University Press.

Kahai, S. 2009. *Closing the Knowing – Doing Gap in leadership*. Available online. http://www.leadingvirtually.com/closing-the-knowing-doing-gap-in-leadership/ December 14, 2012

Kaluba, P.K. 2009. *Examining the Contradictions Affecting Young Community Theatre Practitioners and Caregivers in HIV/AIDS Education: A Case Study of Kamoto Community Arts and Roma Ng'ombe Home Based Care Organisation in Zambia.* BA Hons, Long Essay. University of the Witwatersrand, Johannesburg.

Kamlongera, C. 1987. *Theatre for Development in Africa with case studies from Malawi and Zambia*. West Germany. German Foundation for International Development.

Kamlongera, C. et al. (1992), *Kubvina*: *An introduction to Malawian Theatre and Dance.* Zomba. University of Malawi.

Kamlongera, C. 2002. *Communicating with Communities Towards Empowerment Communication*. Harare. Unpublished Manuscript.

Kamlongera. C. 2004. 2nd ed, *Participatory communication strategy design, Harare:* SADC Centre of Communication for Development.

Kearney, K.S. and Hyle, A.E. 2004. Drawing out Emotions: The use of Participant-Produced Drawings in Qualitative Inquiry. *Qualitative Research*. London. Sage Publications. Vol 4 (3): 361-382.

Kerr, D. 1995. *African Popular Theatre*. London. James Currey.

Makamani, R. 2009. *Contradictory HIV/ AIDS Rhetoric(s) in Zimbabwe: An Analysis of Selected Online Media Texts.* Paper presented at the African Association of Rhetoric 2nd Biennial International Conference at the University of KwaZulu Natal.

Mda, Z. 1993. *When people play people: Development communication through theatre*. Johannesburg. Witwatersrand University Press.

McLaren, P. 1995. *Critical Pedagogy and Predatory Culture*. London. Routledge.

McLuhan, M. 1964. *Understanding Media: The Extensions of Man*. New York: McGraw Hill.

Mefalopulos, P. 2002 *Participatory Communication Strategy Design*: *A Handbook*. Rome. FAO.

Nelson, N. and Wright, S. (eds). 1995. *Power and Participatory Development: Theory and Practice*. London: ITDG Publishing.

Nthala, G.M. 2009. *The Chewa Art of Drumming and its Influence on Modern Malawian Music*. (MA thesis). University of the Free State.

O'Neill, C. 1995. *Drama Worlds: A Framework for Process Drama*. Portsmouth, NH. Heinemann.

O'Toole, J. 2006. *Doing Drama Research: Stepping into Enquiry in Drama, Theatre and Education.* Brisbane. Drama Australia Publications.

O'Toole, J. 1992. *The Process of Drama: Negotiating Art and Meaning*. London. Routledge

Parkinson, C. 2006. *Building Successful Collaborations: A Guide to Collaboration among Non-Profit Agencies and between Non-Profit Agencies and Businesses.* Cambridge and North Dumfries Foundation. Available online.

www.cfc-fcc.ca/link_docs/**collaboration**Report.pdf January 12, 2013.

Prentki, T. and Preston, S. 2009. *The Applied Theatre Reader*. London. Routledge.

Romanyshyn, R.D. 2007. *The wounded Researcher: Research with soul in mind.* New Orleans, LA. Spring Journal Books.

Rowlands, J. 1998. *Empowerment in the discourse and practice of development*, in H. Afshar, ed. *Women and Empowerment*: Illustrations from the 3rd World. London. Macmillan

Schechner, R. 2006. *Performance Studies: An Introduction*. UK. Routledge.

Shor.I. 1992. *Empowering education*. Chicago . University of Chicago Press.

Sinek, S. 2010. *How Great Leaders Inspire Action*. Available online http://www.ted.com/talks/simon_sinek_how_great_leaders_inspire_action.html August 16, 2012.

Stichele, P.V. 2000. Folk and Traditional Media for Rural Development. FAO. Available online http://www.fao.org/sd/CDdirect/CDan0029.htm February 14, 2013.

Sutherland, R. 2012. *Perspective is Everything*. TED Talks. Available online. http//www.ted.com. October 18, 2012.

Taylor. 2007. *Theatre for Development – Cultural Action or Development Utility?* Available online. *http://www.comminit.com/papers/p_0037.html* November 12, 2012

Taylor, P. 2003. *Applied Theatre: Creating Transformative Encounters in the Community*. New York. Heinemann.

Turner, V. 1979. Frame, Flow and Reflection: Ritual and Drama as Public Liminality. *Japanese Journal of Religious Studies*. Madison. Coda Press.