

Theatre: An Innovative Approach To Public Health Education

Evans Asante

Lecturer, Department Of Theatre Arts,
University Of Education, Winneba, Ghana

Abstract: *Community-based education is vital in public health issues of a community. It creates awareness of disease, emergent infections, safety and preventive measures. However, most of the modes of public education have not yielded the needed results thereby preventing the targeted audience from receiving the required education and knowledge for health education one of which is glaucoma. This study projects drama/theatre as a viable alternative mode of communication in public health education especially in rural communities. The paper places emphasis on educating people on glaucoma through various theatrical approaches based on the principles of health education. Some of the theatrical approaches explored in this work are participatory games, storytelling, role play and creative dramatics. Theatre has been used as a platform for Glaucoma education in Oyoko a community in the Eastern Region of Ghana. In the final analysis, theatre is projected to be fun, effective and an empowering education tool for awareness creation and an exciting way for people to actively learn towards a behavioral change.*

Keywords: *Community Theatre, Glaucoma, Participatory process, health education, Public Health, Oyoko*

I. INTRODUCTION

Glaucoma is becoming an increasingly major cause of blindness, as the world's population ages. New statistics gathered by World Health Organisation (2012) attests to this fact. Again, the World Health Organisation, posit that glaucoma is now the second leading cause of blindness globally, after cataract. Glaucoma, however, presents an even greater public health challenge than cataracts because the blindness it causes is irreversible. The urgent need for more public health action to tackle glaucoma is underscored by the work of many eye health practitioners including the above statistics.

It is estimated that even in the United States where public health education is higher, there are more than 3 million people afflicted with this disease. (GRF, 2015).

This situation is not different from Ghana in recent times. A report from Ghana health Service (2013) corroborates and states: "*Ghana is still experiencing an upsurge in the rate of blindness and Glaucoma the second most prevalent cause of blindness is not yet known among many. It is estimated that about 7.4 million Ghanaians aged above 30 years*

representing 27.7% of the national population are believed to be suffering from Glaucoma".

The statistics is frightening and the situation has obviously become an arduous task for the public health unit of the Ghana Health Service. Ironically, it is considered the least preventable cause of blindness. Issues of public health education are dependent on a number of factors including the kind of media approach employed. Community theatre, an art form which has the advantage of bringing community members together on a common platform whiles seeking for solutions to their problems can be employed in this quest.

Community health educators are always seeking for innovative ways in presenting health issues across to rural folks. (Hubley, 2002.) In the past some of the ways have been through radio programs, leaflets, news papers, van announcements, public lectures and TV. These medium forms irrespective of their rich advantages have not yielded much result at least in the area of glaucoma education since the problem still lingers on.

In recent times most educational events include enactment of theatre which allows time for audience participation and feedback. (Bolton, 1984). The element of audience participation and feedback which drama presents is what

makes it a unique approach to health education in rural communities where the level of literacy is generally low. (Kerr, 1989) Community Theatre, a platform on which community members can get the opportunity to identify their problems and find common possible solutions is probably a sure way of at least making this disease known and inculcating the habit of regular eye checkups to promote early detection and prevention.

II. COMMUNITY THEATRE AND PUBLIC HEALTH EDUCATION

Public health is an art. (Heather & Noble 2010) It is the art of preventing disease and promoting health through the organized efforts and informed choices of society, organizations, public and private, communities and individuals. It is said that the focus of public health intervention is to prevent rather than treat a disease. (Last, 2003) According to the World Health Organisation, (2013) the goal of public health is to improve lives through the prevention and treatment of disease. There are 2 distinct characteristics of public health one can get from the above discourse: 1. It deals with preventive rather than curative aspects of health and 2. It deals with population-level, rather than individual-level health issues

It is made clear that the main focus of public health is prevention of diseases. Diseases can only be prevented when they are known or detected. It is through constant awareness creation by which a disease can be made known to a larger populace.

As observed early on in the discussion, theatre creates the platform for community members to meet and share ideas in finding common solutions to their communal issues/challenges. As Asiedu (1992) puts it, "in the traditional communal oriented societies of Africa, drama is a vehicle for communication or affirming the values of a society and for strengthening of the bonds that binds its members" (p34)

A people's theatre (community theatre) can be a useful tool in their public health education not just for Glaucoma but any other public health concern. Mdoe (2006, p16) referred to the people's theatre, as "enacting to the common man in his language and idiom and dealing with problems of *direct relevance* to his situation". A people's theatre concentrates on awakening the latent capacity of the people to take part, and to make their own decisions, and to organize themselves for common action. The interaction between the performers and the community members to whom the performance is presented is always seen to be a mutual one, especially in community theatres. The interaction brings a kind of cohesion and affinity between the performers and the community folks. Theatre thus becomes part and parcel of a people's cultural heritage and common culture. This form of indigenous theatres found in the people's cultural heritage has the elements of education, preservation and conservation of the people's values, as well as the promotion of knowledge of all forms.

The theatre is said to serve as a gathering place for the public presentation of ideas. (Arnold, 2008). These ideas are expressed through characters or actors who find themselves in

difficult and dangerous situations in the skit presented. In the theatre many people come together and work to achieve a common goal which is meant to have an impact on some other people. (Audience) An actor joins hand with other actors and other professionals before their product (play/skit) can be ready for consumption. Juxtaposing these presentation of ideas and working together for a common goal to the practices of Public health, one can say that theatre can play a vital role in public health education by bringing all community members together in fighting for a common goal which may be seeking for a way to prevent the spread of disease or any health related hazard.

Public health programmes have proven to play important roles in disease prevention efforts in both the developing world and in developed countries, through local health systems by creating the needed awareness of diseases and their common preventive measures. (NN/LM, 2004) Many types of media are used around the world for health promotion. In Africa, in both rural and urban settings, theatre has proven to be an effective and entertaining strategy for dissemination of health information and reinforcement of positive health messages. (Asiamah, 2002)

In a research to explore theatre as a public engagement tool for health-policy development, Martin (2006) observed that:

In a justice-based democracy, engagement of a large number of citizens of diverse perspectives is required for legitimate health-policy development. However, all current strategies of citizen participation are limited in their capacity to engage, either by lack of opportunity to educate citizens prior to soliciting their opinions or lack of large numbers of citizens.(p13)

His research findings revealed that most community members do not enjoy much participation in public health systems and procedures and so regard them as an affront to their orthodox way of health care. Many also do not see the relevance of engaging in public health issues because they may not or have just a little idea about diseases. There is, therefore, the need to find a viable means by which the interest of the community will be aroused in taking community health issues seriously. He concluded by recommending that community members should always be involved in health centered policies especially during awareness campaigns and advocacy. (Martin, 2006)

It can be referred from the above that theatre can overcome literacy barriers through use of local expressions and vernacular to incite the emotional and analytical responses in the audience.

The researcher thought it useful to utilise theatre, specifically created through participatory process, where performers are picked from the community. In this case the community owns both the process and the product and makes them more responsive. This approach gave birth to the Oyoko theatre for glaucoma education.

III. STATEMENT OF THE PROBLEM

After several years of public health campaigns, advocacies and education in the quest to find good eye health,

by government and non-governmental agencies, the country is still experiencing an upsurge in the rate of blindness; Glaucoma the second most prevalent cause of blindness in Ghana is not yet known among many. Eastern region in Ghana happens to be one of the major prone areas. However, research has revealed that health officials and other have had series of educational outreach programmes in the community and its environs. The question therefore is why was the level of knowledge still low? Has it got to do with the approach?

RESEARCH QUESTION

- ✓ What are the elements in community theatre that make it a community based educational tool?
- ✓ How do we develop a glaucoma education programme using a people's indigenous knowledge and culture?

OBJECTIVES

The purposes of the study are

- ✓ To explore community theatre as an avenue for public health education.
- ✓ To develop an effective Glaucoma awareness programme through theatre.

IV. METHODOLOGY

THE LAB-SITE

Oyoko is a small community in the Eastern Region of Ghana, is about 4 miles away from Koforidua the Eastern regional capital. It has a population size of about 7000. The main economic activities in the community are farming and trading. They trade mostly in cola nuts. The Oyoko community is considered as one of the leading producers of cola nuts in Ghana. Cola nut business has therefore become an integral part of the people's life. In terms of social development, the community is not doing badly at all. The community can boast of a Senior High School, a clinic, a post office, a community centre and five public basic schools. Through this study in some parts of the Eastern region on the knowledge level of Glaucoma, it emerged that a larger proportion of the population in the Oyoko community had no idea about the disease. It therefore became the main study area for the research.

RESEARCH DESIGN

The study adopted a multi-methodological approach from the data collection stage through to the final performance stage. The data collection stage involved interviews with respondents, observation of community members and events, group discussions and content analysis of some literature on public health and glaucoma. Interviews were organised for ophthalmologists and other eye care specialist in the gathering of the data.

The second stage was mainly working within the Oyoko community adopted Participatory Performance Practice (PPP)

Participatory Rural Appraisal (PRA) and Adult Learning Cycles as means of reaching out to the community.

The final stage involved writing of the skit and performance. After gathering all the necessary stories and the needed information, a dramatic piece (Skit) was created in the local language of the lab site. Forum Theatre and Storytelling methods were employed in creating the community theatre.

SAMPLING AND SAMPLING TECHNIQUE

With a population of a little over 7000 the study concentrated on 400 main participants aged between 25 and 50. This age bracket forms the active working class. It is also mostly at this stage in life that most people take responsibility for their health concerns. This sample was basically for the purposes of gathering the data. Two main sampling techniques were adopted.

Respondents for health based interviews were purposively selected. A simple randomization process was used in soliciting views from other respondents. To get a fair representation of the population, the community was divided into clusters based on religion, schools, markets and hospital. Participants within these clusters had an equal chance of being selected as a respondent.

The forum theatre (dramatisation) was a public event hence, targeted the majority of the community folks. However, the selected participants were used in the creating and performance of the dramatic piece.

THE COMMUNITY THEATRE PROCESS

Community based theatre employs the peoples own indigenous art forms including drums, songs, dance art works etc in order to enhance the dramatic presentation process and immense a force of attraction. It is seen as community popular art form that is 'aimed at developing an individual and his/her community'. (Collins, Berbar, & Ricard 1997.) Experimenting community theatre as a platform for glaucoma education was initiated by the researcher in collaboration with the Eye Care Unit of Ghana Health Service in the Eastern region of Ghana. The drama was based on storytelling 'anansesem' approach which is common to the community folks.

CREATING THE STORY

The main ideas which informed the plot of the story were finding from the data collected which included:

- ✓ poor hospital attendance record
- ✓ People only were sent to the clinic on when their illness had become very critical
- ✓ There was no eye clinic in the community and so they tend to use their local medicine.
- ✓ Most people preferred the use of herbs to orthodox medicine
- ✓ Lack of general information on health matters

The observations made and issues concerning glaucoma education and general eye health therefore became the central ideas for the skit.

The practice of community theatre is that the issues in the play are investigated and created with the community and

performed jointly by the professional artists (outsiders) and members of the community (insiders). In both cases the presentations take place in the community itself, and the venue does not require any special elements of the theatre. The performance must be *popular*; the community's music, drama, dance, and puppetry must be used. Thus it takes indigenous community materials and recycles it into different forms.

The researcher together with the *Adonten Drama Troupe*, a community-based group created the scenarios through improvisation. There is in Ghana a storytelling art called *Anansesem* by Akan speaking people. The name, which literally means *Ananse* stories, is used both for the body of stories told and for the story-telling performance itself. (Sutherland, 1975). The skit for the health education was built on this tradition of storytelling. The community was divided into *circles* with each *circle* having a performing group. After a series of discussions and analysis, each group worked out a drama based on the problems identified. Then each group performed the drama after one week. We discussed each performance and tried to find solutions to some of the problems raised from the drama. Later we blended all four plays into one piece which really presented our case. The story created was fiction. But it was built on actual life experience that the community for whom (later with whom) the drama was developed recognised and even identified with it. The plays performed in all the circles had a common theme; *demystifying glaucoma* with the title "*Mma wani nna ho*" literally meaning Shine Your Eyes.

REHEARSING THE PLAY

Rehearsals for the Oyoko theatre experience were not like ordinary rehearsals which are mostly done behind closed doors. All rehearsal periods for this community project were taken as opportunity for creating the awareness of glaucoma. Rehearsals were done in the open where casual observers could ask about what was going on. It gave us the chance of talking to them (the observers) about the disease and the need to get their eyes screened frequently. By so doing the audience base for the final performance was made larger. Rehearsals were carried out in all four *circles* in the bid of creating the needed awareness.

Community theatre thrives on cultural action to create consciousness in the local people. (Asiamah, 2002) Some indigenous dances (*Kete and Sanga*) of the people were incorporated in the drama. The addition of these dances brought a lot of incidental audience even to our rehearsals.

THE PERFORMANCE AND FORUM (EDUCATIONAL PERFORMANCE)

The date for the performance was set on a 5th March day beginning the Glaucoma Awareness Month. This day was chosen for its significance in glaucoma education and eradication. The day coincidentally fell on a non-farming day so most community member were in their homes. Prior to the forum, a float was organised in the principal streets of the Oyoko community. The research, revealed that the youth in particular can be attracted to the performance grounds through the use of brass band music which the community members

termed as "*tenee*". The brass band became the main source of music for the float. It also served a lot as advertisement for the program.

The dramatic presentation titled *Shine Your Eyes* lasted a little above twenty minutes. Communal games, drumming and dances preceded the main performance. Audiences participated in the games and dances which prepared the stage for the main event.

The performance was based on the forum theatre concept. During the performance conscious efforts were made to deliberately offer opportunities for the audience to answer questions and comment on what on what was happening in the play. The idea here was to make it as much of the people's (the audience) own occasion as possible as that of the team. The performers consciously involved the audience in the performance by posing questions to them and demanding answers. There was a conscious direct involvement of the audience throughout the performance. Like the normal Augusto Boalean forum theatre, the play ended by posing a question to the audience. This led to further discussion, questions, and more deliberations of issues presented in the play.

POST PERFORMANCE PRODUCTION

Sometimes in between the play, the audience wanted further discussion on issues raised. Such an opportunity was provided to them. This is one of the advantages community theatre wields over other forms of media for community education. This opportunity helped the performers and the facilitators to assess how well their message has been absorbed. It also helped the audience understood issues more clearly as they were able to question events as they unfolded in the play. At this point qualified and glaucoma specialist were given the chance to address the main issues concerning the disease. There were two ophthalmic doctors from the regional eye care unit, representative from the Glaucoma Association of Ghana and other health workers from the nurses from the Oyoko Clinic.

ANALYSIS OF THE FORUM THEATRE

The central theme for the skit *Shine Your Eyes* was 'the need to go for routine eye screening' an act which will help early detection and medication. The play was in the local dialect *Twi* and so was easily comprehended by most of the audience.

The play captured events as they happen in the community with the character names being representative of popular figures in the community. As a means of enhancing audience involvement, 'volunteer actors' were invited in some scenes to actually participate in the ongoing process. An example is where in a hospital scene some of the audience (voluntary actors) were invited to have their eyes screened as part of the plot. The dramatization of the various issues was used to analyse and raise questions which could work on the consciousness of the community folk.

After the forum, there was an eye screening session which was fully participated by majority of the audience to the surprise of the health workers. The reason being that, eye

screening sessions had been organized on several occasions but the people did not really give it much attention. More than three hundred people got their eyes screened for various diseases and those with problems were given either immediate care or referred to specialized health posts.

It can be inferred that there was an immediate impact of the education project, which if sustained will help the community in addressing the glaucoma menace.

V. FINDINGS AND DISCUSSION

People in most communities consider embarrassment and fear of confidentiality as the biggest barriers they faced when seeking health advice. This confirms Redman et al, (1997) assertion that "fear of confidentiality is a bane on proper health service"

Community theatre which was created through the participatory effort of the community helped in correcting this defect. The people felt part of the whole process and were not afraid sharing their experiences and community lifestyles.

The components of drama which makes it more advantageous in community health education than the other media are the fun, knowledge sharing, participatory, instant feedback, easy evaluation and very economical. Through theatre common myths surrounding glaucoma and other blinding causing diseases were explored without barriers. Theatre provides direct interaction with local communities during the field implementation.

Language which is mostly the barrier to most community education was easily overcome with the dramatic performance. Theatre is said to be no respecter of language. It transcends language. This feat over language barrier is supported by Breed (2002) when she states that "*the interactive and participatory dynamic of theatre fosters a web of human relationships that has its own unique systems of communication*".

In community education, it is almost always necessary to have a free flow of communication, with the community members (insiders) on one side and the educators (outsiders) on the other side. This two way communication is particularly important in health education to help in getting feedback and get all doubts cleared. (Yazachew, 2002.)

Notwithstanding the above positive observations, there were few lapses which were identified. It has been observed that a one-time theatrical presentation can stimulate and create some form of awareness but it does not have the capacity to sustain the required behavioral change. To reinforce the impact of a theatrical presentation, frequent follow-up workshops and activities should be organized in the community. Theatre cannot create change on its own. It only presents the message and creates the platform for the change. Theatre needs the support of civil societies, public agencies and other stakeholders to push forward the agenda set through theatre. A community theatre based project should preferably be a part of an overall development activity in order for its impact to live beyond just individual/group performance/s.

VI. CONCLUSION

The menace of glaucoma and other eye diseases continue to pose a challenge to the public health of many people. It has a negative effect on the social, economic and political development of many communities especially those communities which are more susceptible to these diseases. The pace and most of the medium through which people are being educated on these issues are not encouraging. There is the need for a pragmatic approach in educating the masses on the dangers and preventive measures of this public health issue. It is evidently clear that the over reliance on mass media in glaucoma and other health related issues have not yielded much results. This is may be partly due to different communities having specific issues and as such, addressing all communities as one may not yield the expected outcome.

The culture of a people cannot be ignored in addressing issues specific to their community, and this is where community theatre comes up top. There is enough evidence supporting the efficacy of theatre in community education and development. Theatre has been applied in many facets of rural education. (Asiamah, 2012, Sloman, 2011, Birdsall & June 1999) Theatre helps to break down barriers that traditional *formal* health promotion messages cannot.

This education approach was community specific and was fully embraced by majority of the community. The choice of language for the education, the choice of format, the ability of developing the creative skills of community members, the degree of community-based message construction, realistic characters, and the use of popular figures and jargons buttress how the community owned the education process.

It can be concluded, through this work, that community theatre is an appropriate participatory methodology for educating rural communities on health based issues. It is the feeling that this community health awareness project was successful in the application of theatre as a viable strategy for public health education. It did meet its stated objectives in terms of increasing knowledge amongst audience members, and demystifying the aura around Glaucoma and other eye related diseases. Immediacy effect, one of the elements of community theatre was realized as audience members had their eyes screened for the first time after the forum. Songs, poetry, dances, drama and other community arts are surely excellent ways of entertaining and teaching local communities.

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