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Summary Report on three-week training and supervised implementation of Interactive Theatre with VSO Rwanda

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Contents

1. Background	2
2. Planning.....	3
3. The aim and indicators of the training.....	3
4. The group	3
5. Needs Assessment findings.....	4
6. The training	6
7. What went well and what was challenging?	7
8. Next Steps and Recommendations.....	9
9. Feedback from Participants taken from Evaluation Forms	11
10. Conclusion.....	12

1. Background

In June 2017, Voluntary Service Overseas (VSO) and Theatre for a Change (TfaC) signed a Memorandum of Understanding to work together in partnership, with TfaC providing training and technical support to VSO staff, volunteers and participants in the use of interactive theatre techniques for advocacy and behaviour change in support of VSO's work on sexual and reproductive health and rights (SRHR).

After the first pilot project in Bangladesh in October 2017, Rwanda was identified as a site where another pilot project could take place (as well as Tanzania, Swaziland and Nepal). VSO Rwanda were particularly looking for innovative approaches to SRHR behaviour change in their communities, with a particular focus on bringing down “the wall of silence” when it comes to parents communicating with their children about SRHR.

In January 2018, TfaC travelled to Kigali and trained 19 participants in Interactive Theatre for Behaviour Change techniques. The participants were invited by VSO through their partnership with various organisations in Kigali district and the Eastern district of Nyagatare.



2. Planning

Planning for the pilot project had two main areas:

- The first involved content planning, ensuring that we integrated the needs of the group into the delivery of the training, and that training content would directly support VSO's ongoing campaigns and activities to promote effective communication about SHRH between parents and children in target communities. We did this by consulting with VSO staff and asking each of the participants to complete a training needs assessment form at the beginning of the training. A Monitoring, Evaluation and Learning (MEL) plan and materials were also developed.
- The second involved logistical planning including venue hire, participant recruitment and travel logistics, and visa/travel/insurance logistics for the TfaC trainers. We organised all training materials, and arranged for a national volunteer to be present throughout the training.

3. The aim and indicators of the training

VSO and TfaC agreed on the following aim and indicators in advance of the training:

Aim: to equip a group of parents and/or facilitators with the knowledge, attitudes and skills to be able to devise, perform and facilitate their own Interactive Theatre for Behaviour Change performances in community settings. Specifically, the training focused on how to use Interactive Theatre for Behaviour Change to promote effective communication between parents and children to improve the SRHR of children and youth.

Indicators: Participants to develop -

1. Knowledge of the principles of behaviour change and behaviour change facilitation;
2. Open and confident attitudes towards changing their own behaviour and facilitating the behaviour change process with others; and
3. The skills needed to change their behaviour and facilitate the behaviour change process with others.

4. The group

TfaC trained a group of 19 participants (10 female, 9 male). Participants were invited from various social theatre organisations, including THT, Urunana and Mashirika, as well as VSO



THEATRE
FOR A CHANGE



partner organisations, including UWEZO and the Umutara School for the Deaf. The youth club members came from the following areas:

Nyagatare District - 9 participants

Kigali City (Gasabo, Kicukiro, Nyarugenge) – 10 participants

Ages ranged from early 20's to late 40's. Most were working or volunteering. The group spoke Kinyarwanda and limited English, so translation was necessary.



5. Needs Assessment findings

All participants completed a Training Needs Assessment at the start of the training.

Feedback from this assessment indicates that participants' facilitation experience varies widely from no experience to fifteen years. On average, we estimate between 1 and 2 years.



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Groups that they are currently working with range from children – in and out of school - through to adults – men and women based in rural and urban areas. Youth are the most targeted group. Organisations include UWEZO, Muzanza Youth Association, National University of Rwanda Student Union, Urunana Development Communication, THT (Troupe des Personnes Handicappes Twuzuzanye), Mashirikia Performing Arts and Media Company, Youth Impact Mission and Peace Corps.

The key SRHR issues for their participants and communities are ineffective communication about sex, including avoidance/absence of dialogue, cultural barriers and lack of information regarding sex, family planning and modern contraceptives, sexuality, safe motherhood, STI's and sexual violence in families.

Participants indicated that they would like to develop the following skills as a facilitator: confidence, time management, effective communication, engagement and encouragement skills, how to challenge taboos, maximising outreach, decision-making skills, knowledge about subject, public communication, monitoring and evaluation skills and increasing repertoire of skills and activities.

Participants plan on using this training in their work in the following ways: to use drama techniques to empower their communities and engage with audiences; to sensitize people; to share skills with other trainers; and outreach.

Barriers to implementing this training may include: language, experience in theatre, self-confidence, resources and support, motivation of participants, and safe space.

These needs were addressed throughout the training in the following ways:

1. With regard to confidence and communication skills, we ensured that all participants frequently facilitated activities and learning energisers throughout the training. They each had opportunities to deliver sections of the workshops, and later in facilitation of interactive theatre, as well as supporting their fellow trainees throughout.
2. The strong emphasis on team building and the interactive nature of the methodology meant that a high level of trust amongst participants and confidence in a safe space developed remarkably quickly. This meant that initial sharing of experiences (first in pairs, then in smaller groups) was profound and enabled open and candid discussion about subjects that might normally remain taboo.
3. A number of participants expressed concerns about funding and resources required for their own implementation of the training. Over the course of the two weeks, they were able to experience how little is required to facilitate interactive theatre, particularly in performance. Each participant experienced a public performance, which required two wireless microphones and PA system, and an open space in the heart of a community.



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4. It is clear that participants work with a wide range of groups and we explored how the methodology can be applied and tailored to their specific contexts. For example, if working with a particularly sensitive group and/or children, there are various means of devising stories. Also, the interactive performances do not depend upon large public forums, but can take place on smaller scales – in community meetings etc.



6. The training

The training covered the following 10 modules over a period of 10 days:

1. Team Building & Current Patterns of Communication about Sex
2. Effective Communication & Introduction to Facilitation
3. Gender Expectations & The 6 Stages of Behaviour Change
4. Devising for Interactive Theatre
5. Performing Interactive Theatre



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6. Facilitating the Devising Process
7. Facilitating Character Development and Rehearsal
8. Internal Performance and Facilitating Touch Tag
9. Planning for Implementing Interactive Theatre in our Communities
10. Evaluation, Planning for Sustainability and Behaviour Change

It became clear early on during the training that ineffective communication manifested as avoidance and/or absence of dialogue about sex between parents and children. Therefore, we decided to include an extra workshop on Day 5 on Assertiveness Training, in which participants are able to identify aggressive and avoiding behaviours.

Due to time limitations in the Planning sessions at the end of Week 2, we decided to set-up an extra 4-hour session for participants on Monday morning of Week 3 to plan their workshops to be delivered to their peer groups in the week ahead.

7. What went well and what was challenging?

Successes include:

- *Steep Learning Curve* – The knowledge, attitudes and skills of the participants developed significantly throughout the training. This manifested in a variety of ways, including personal behaviour change, as well as notable changes in use of voice, body and space, indicative of a marked increase in confidence. Their facilitation style progressed from a more didactic approach to a more open and enabling one.
- *Positive Response to the Methodology* – The interactive and theatrical nature of the methodology proved particularly valuable to the participants. They could immediately see its applicability in their communities, particularly as a significant ratio of the group already work in community performance groups. There was a high level of enthusiasm which steadily grew throughout the three-week training and delivery period.
- *Efficient and Welcoming VSO staff* – Sophia Mutoni (Health Advisor), Fabien Munyaneza (Project Co-ordinator) and Bienvenu (Health Delivery Facilitator) were on top of all logistics, including last minute changes. They had excellent resources and the training venue at Amani Centre in Kigali was ideal, as were the two performance locations in the field. The organisation of the VSO Internal performance, and peer group workshop participants was excellent and crucial to implementation.



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- *Implementation Week 3* – The participants excelled in Week 3, where they had the opportunity to implement their training. Each participant planned and facilitated a workshop, as well as performing and facilitating an Interactive Performance to a large audience. It was clear they felt a palpable sense of achievement and increased confidence. The impact on peer participants and on community audiences was significant, with many making commitments and pledges to changing their own behaviours and promoting effective communication in their communities.

Challenges included:

- *Language* – It became clear early on that the level of English of the participants was much more limited than expected. By Day 2 a translator was hired, but the process of translation was time-consuming. At times, some of the subtlety and nuance of the methodology also seemed to get lost in translation - e.g. the types of questions and language to use when facilitating interactive theatre.
- *Lack of clarity with regards to recruitment criteria* – TfaC had expected a greater number of parents and participants with more facilitation experience. The gulf between those with more experience and those with less was significant. The training was tailored for parents, and therefore had to be readjusted for the demographic of the group.
- *Scheduling in Week 3* – It was unclear as to whether participants were clear about their commitment during Week 3. As a result, there were some absences during key implementation workshops and performances, which may affect their confidence and on-going practice in the field.
- *Unexpected absence* – There were a few family, health and work issues/commitments which affected participants' attendance. Whilst in most cases, this could not be helped, it affected group dynamics and – at times – morale.
- *Presence of children in audience* – During the VSO meeting, concern was raised about appropriateness of the performance pieces for children due to sensitive content (for e.g. unwanted pregnancy, abortion, STIs and death).



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8. Next Steps and Recommendations

Theatre for a Change would recommend the following:

- Whatsapp group – i.e. a forum for the trainee facilitators to share learning that arises from workshops and performances in their community. This is already set-up and active.
- VSO member of staff, Bienvenu (Health Delivery Facilitator) who attended 90% of the training, support and monitor the facilitators in future workshops and performances.
- VSO Project Manager Fabien Munyaneza and Health Advisor Sophia Mutoni identify appropriate forums and locations for focus discussions, workshops and interactive performances. Originally, they suggested that small organised performances would be more appropriate and more likely to be more successful. However, having organised the public interactive performance in Week 3 at a market place in Musaka (close to Kigali) and in a field in a small community in Gatunda, the outreach capacity became clear, as large crowds gathered, audiences participated and local district leaders and power holders congratulated the organisation and welcomed more such events.



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- We therefore recommend that VSO continue building alliances with key stakeholders and district leaders in target communities, who can both support the planning and delivery of interactive performances, and support the channelling of enthusiasm and energy generated by the performances into real action in support of promoting effective SHRH communication between parents and children.
- In addition, VSO to begin conversations with the following forums/organisations:
 - Cell Unit Forums (which act as traditional advice locations);
 - Utilizing VSOs extensive relationship with schools;
 - Monthly parents' evenings;
 - Umuganda (monthly community meetings) which take place across the country;
 - Teacher Training Colleges
 - Radio
- Evaluate the impact of performances on communities, and share this learning with TfaC and other VSO country offices.
- We suggest that the Training manual is translated into Kinyarwanda for the continued support of our trainees, given that the vast majority are not fluent English speakers.
- Once the group has had the chance to practice performing and facilitating in their communities, TfaC could offer additional training and support to further develop their facilitation and leadership skills. With the current cohort, we would recommend following on this training with further facilitation training. In the case of training trainers in this process, we would recommend recruiting an older, more experienced group of participants who would be capable of managing and leading trainings for community leaders and facilitators in these techniques.
- Theatre for a Change will continue to offer support to the VSO team as follows:
 - Support in the development of funding proposals to further impact and reach of pilot project activities;
 - Guidance regarding 3 and 6-month MEL activities;
 - Ongoing technical advice and support as needed; and
 - Through further Interactive Theatre and/or Interactive Radio Drama training opportunities.



9. Feedback from Participants taken from Evaluation Forms

Having read the Evaluation Forms which the participants completed on the final afternoon of the two-week workshop, feedback is mostly very positive, with the average score for each section as follows (on a scale from 1 to 5, with 1 = strongly disagree and 5 = strongly agree):

Statement	Average score
1. The objectives of the training were clearly defined.	4.9
2. Participation and interaction were encouraged.	4.8
3. The topics covered were relevant to me.	4.6
4. The content was organized and easy to follow.	4.9
5. The materials distributed were helpful.	4.6
6. This training experience will be useful in my work.	4.9
7. The trainers were knowledgeable about the training topics.	5.0
8. The trainers were well prepared.	4.8
9. The training objectives were met.	4.6

When asked how this training impacted them personally and professionally, participants responded in the following ways:

“Personally, I am empowered to talk about sexual and reproductive health. Professionally I am empowered to the point of thinking I am able to positively change the society.”

“As a teacher it will help me to speak to children about sexual and reproductive health.”

“Firstly, the training impacted my behaviours about talking about sexual and reproductive health. I am looking to totally change my behaviour. I came to this training not understanding how I might become a facilitator in theatre, but now I feel confident that I can contribute to community behaviour changes (effective communication between parents and children).”



THEATRE
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“I gained more knowledge and skills as an actor. I now feel in a good position to influence Rwandan society.”

“It has improved and enhanced my skills as a facilitator. I am a teacher so I will pass this training to others.”

10. Conclusion

The training with the Rwandan team proved a great success, with participants expressing significant impact on their personal behaviour change, as well as professional facilitators. They evidently really enjoyed the training, and their communication skills, capacity to interact and facilitate grew visibly over the two weeks. By Week 3 they were confidently facilitating workshops, interactive performances, and performing in the community. It is clear that they understood the methodology and its benefits, evidenced in their workshops facilitated to peers who left feeling inspired, making pledges and keen for further workshops. Most participants feel confident and enthusiastic about implementing the training in their own organisations and communities in the near future.

We will continue to collaborate with VSO to support the trainees in realising their goals. We look forward to pursuing the outreach possibilities already discussed with VSO. This includes further training in Legislative Theatre and Interactive Radio Drama.



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