



BEYOND THE SILENCE



Report

For The 16 days of Activism Against Gender Violence Campaign project

Presented by:

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To

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WEPET would like to thank

- Population Services International (PSI) for their donation of Female Condoms.



- Kenyan Human Rights Commission (KHRC) for giving us the opportunity to perform at the International Human Rights Day on the 10th of December 2004.

WEPET would most especially thank its members and implementing team, for seeing the project through.

PROJECT TEAM MEMBERS



Agatha Wangui, Apophia Mwende, Christine Nduati, Lucy Nyokabi

GIM Nakhayo (*Admin Assistant*), **Naijeria Toweett** (*Artistic Director*)



INTRODUCTION

The 16 Days of Activism Against Gender Violence is an international campaign originating from the first Women's Global Leadership Institute sponsored by the Center for Women's Global Leadership in 1991.

Participants chose the dates, November 25, International Day Against Violence Against Women and December 10, International Human Rights Day, in order to symbolically link violence against women and human rights and to emphasize that such violence is a violation of human rights.

WEPET performed its theatre piece *Beyond the Silence* on the 10th of December 2004

PROJECT OBJECTIVE

Theatre can be used as a tool to facilitate fundamental change in and among people and as an effective tool of popular learning. Through dances, storytelling, song and role-playing people are catalysed to reconsider deeply held values, positions and prejudices. A theatrical experience becomes both a mirror for one self to see and interrogate him or herself as well, therefore a means of self or group therapy. We can confront ourselves on stage, we can find ourselves and if we can have the courage and determination we can change. As a means of entertainment theatre has the potential of empowering community and society thus serving as an instrument, which can induce development and change. With this in mind WEPET worked with four women artists to create and perform pieces that highlight the challenges faced by young women within HIV/Aids pandemic and the increased level of violence in Kenya and their role as the affected, infected and /or afflicted in both instances.



THE PROJECT

The Project begun with the auditioning of female artists to be part of the piece.

This was followed by

- ***Brain storming on HIV/Aids and Violence Against Women Issues.***

It emerged that there are several campaigns locally to end all forms of violence. In our particular discussion we focused on Sexual violence, with specially emphasis on Young women aged between 18 and 30. The most common Sexual violence meted out on women include but are not limited to

- ♣ Rape
- ♣ Assault
- ♣ Incest.

It was also noted that many young women found themselves taking on the role of caregivers and many have found themselves out of school and are forced to look for a source of income. Some become prostitutes and other take on extra work away from home.

All in all it was evident that many women, lack control of their sexual health, mainly due to lack of information concerning their sexual health. This had been contributed by lack of readily available information and access to such information, lack of forum to promote and discuss women's sexual and health issues.

The following were themes identified by other organisations to be addressed during the 16 days.

Themes

1. Sexual violence
2. Men to men
3. HIV/Aids and PEP
4. Access to justice
5. Access to information
6. Harmful cultural practises
7. Religion
8. Legislation: process and institution
9. Women Reproductive Health:



Following our discussion we chose to tackle Women Reproductive Health and in particular their choice and access to contraception in this case The Female condom.

The Female Condom

The existence of the Female condom provides choice of protection from infection and control for the women.

On discussion it emerged that, few women had seen the condom and were aware of how to use it. Much as a woman would choose to use the female condom, the man could at some point decide not to have sex if the woman made that choice.

Unlike the male condom there was no media coverage and campaign on this condom.

The few women who had used it found it clumsy and uncomfortable.

It was only after extensive research that the team discovered that the condom was supposed to be handed out free of charge to women by the Ministry of Health.



Talking about it

- ***Real life stories and identifying characters.***

The team went on to tell real life stories, and then proceeded to choose characters and give each character a bio line.

- ***Scripting and Identifying songs***

The piece was then scripted and songs identified to be included in the piece.

- ***Performance.***



After 8 days rehearsals we had a dress rehearsal on the 9th of December and performed on the 10 December, “International Human rights day at all Saints Cathedral Nairobi to an audience of about 500 people.

ACHIEVEMENTS

- To be able to have a short elaborate and relevant theatrical piece in 10 days.
- Reached an audience of 500 adults (280 of them women) with a powerful message on respect to women reproductive health issues.
- Were able generate and facilitate discussions on women reproductive health problems with tentative solutions suggested and debated upon.
- Made useful contacts and networked with community development organisations working in women issues.
- Showed our solidarity , by participating in the International Women’s Aids Run on the 1st of December.
- Distributed over eight hundred female condoms to many women and men most of whom saw the condoms for the first time

CHALLENGES

- All available venues were fully booked since the period of November to December is filled with numerous activities.
- Inability to get 70% feedback on the performance since the audience broke off for lunch after our piece and a large number didn’t return after that.

RECOMMENDATIONS

- The issue of Women’s reproductive health and in particular the issue of choice should be explored further especially with the use of theatre and participatory methodologies.



Angie: “That is when I opted for the Femidom, because it gave me control of my sexuality,.....”

CONCLUSION

We hope to be able to pursue the issue of Reproductive Health issues in another extensive project.



FINANCIAL REPORT
EXPENDITURE

<u>BUDGET</u>	PROPOSED	ACTUAL
<i><u>Production Costs</u></i>	Ksh	Ksh
Rehearsal Space for 10 days @ Ksh 100 for 5 hours	5,000	5,000
Rehearsal Allowances for 10 days @ 500 for 6 pax (4 artists, Director and Admin Assistant).	30,000	30,000
Hire of performance Venue on 10th Dec	5,000	0
Performance Allowances	12,000	12,000
Costumes and Props	10,000	10,000
<i><u>Administrative Costs</u></i>		
Transporting cast to and from venue		3,000
Video Recording,	10,000	10,000
Photography,	2,500	2,500
Printing of Invitation Cards and contact cards	2,500	4,500
Participation Fee for Women's Aids Run.		2,500
<u>TOTAL</u>	<u>77,000</u>	<u>79,500</u>

NB:

- ♣ The above figures are in Kenya shillings (Ksh) having been converted from US dollars at the rate of USD 1= Ksh 79.
- ♣ The bank imposed a charge of USD 50.
- ♣ There was no charge for the hire of performance venue. We had however to pay to transport the cast to and from the venue.



APPENDICES

1. WEPET Profile
2. Questionnaire
3. Script

WEPET PROFILE

Women in Participatory Education Theatre (WE-PET), is a trust of female artistes with long and diverse theatrical experience.

WEPET was formed in June 2000 as a response to a need for a forum for women artists/artistes to

- Articulate development issues through participatory theatre as a medium of communication
- Performing theatre for entertainment.
- And encourage young women to join the arts and enhance their capacity to participate in development processes

WEPET compliments other organizations working with women issues and currently works locally in Nairobi and its suburbs.

WEPET has a current membership of 9 women and are in the process of expanding our membership base. First to include the numerous numbers of women performing artistes we have worked with since our inception.

Three of the members are office bearers namely, Chairperson, Secretary and Treasurer. There is an Administrator who manages the day-to-day activities of the Trust. All members play a role in the organisations decision-making process.

PAST ACHEIVEMENTS

- **ADF conference in Addis Ababa Ethiopia in December 2000**

WEPET performed a PET piece on the effects of AIDS in Africa.

- **Agender 2003 Festival**

In celebrating the Worlds Women Day, We-Pet in collaboration with Joy Mboya and the French Cultural and Cooperation Center (FCCC) organized the Arts Agender Festival from the 7th to 9th March. The event brought together participants from various artistic genres and provided the opportunity to highlight women's achievements in various fields as well as sharing of experiences/ideas and identifying areas that need to be addressed



PAST PROJECTS

- **Violence against Women Campaign**

A collaborative project with the Coalition of Violence against Women (COVAW) that covered 5 slum areas in Nairobi, WEPET performed PET pieces that prompted discussions on how best to detect and stop violence.

- **World Refugee Day Celebrations**

WEPET performed a PET piece on the World Refugee Day highlighting the plight of the Refugee Youth and the challenges they face living in a foreign land.

- **HIV/Aids**

WEPET supported by Institute of Performing Artists Limited (IPAL) funded by sida through the Eastern African Theatre Institute (EATI) initiated a pilot project in Nairobi schools targeting girls between the ages of 14-16. The project involved performances of a PET piece on HIV/Aids issues that led to open discussions

CURRENT PROGRAMMES

WEPET has initiated the Women in Theatre (WIT) project

- ♣ To create an environment where women theatre artists can meet, explore ideas and the art in common.
- ♣ To produce their theatrical performances for a large audience
- ♣ To produce and promote high quality theatre art, which must always have women roles and issues in mind, whether written, directed, designed and most of all produced and administered by women.
- ♣ Promote women as theatre artists exploring gender roles and gender issues in the theatre arts and also traditional and experimental theatre.

Women in Theatre project (WIT) strives to examine the validity of gender roles in general, and women gender roles in particular, and how they relate to the creation of theatre and performance art. Traditional women's gender roles have been generally oppressive towards women, and the goal of femaleist theatre is to question the validity of traditional women roles, as well as explore new, more liberating and creative roles for women and how those changes affect human relationships.

WIT wishes to produce plays that focus on the forgotten side of the theatrical story - the fact that in life most important roles women occupy are often those not defined by their relationship to men. To do this WIT will focus on producing works by women playwrights that explore human relationships from a female, rather than traditional male perspective, supporting female performance artists and occasionally placing traditional works by male artists in a new context.



BEYOND THE SILENCE
QUESTIONNAIRE

Please indicate by ticking your

Age	15 and below	<input type="checkbox"/>	Sex : Female
	16 - 25	<input type="checkbox"/>	: Male
	26 - 35	<input type="checkbox"/>	
	36 - 45	<input type="checkbox"/>	
	46 - 55	<input type="checkbox"/>	
	56 and above	<input type="checkbox"/>	

Our audience consisted mainly of 16 - 45 year olds, there were a considerable number of 46 and above.

1 : Is the play relevant in highlighting the issues on women's reproductive health?

Yes

Most people found our play relevant

2: What did you like/ dislike about the play?

The play was too short and ended abruptly

It highlighted lack of options for women in terms of ability to take control of their sexuality; contraceptives not readily available and affordable. Most women lack information on Reproductive Health issues.

It involved the audience

3: What could have been done to improve the play?

Focus more on generating debate from audience as a way of furthering the contraceptive choice and availability and addressing HIV/STI issues

Use of Swahili to be able to reach a wider audience especially in rural areas.

4: What 3 new women's reproductive health issues did you learn from the play?

Existence of the Female Condom

5: What 3 other women's reproductive health issues would you have liked to be tackled in the play?

More emphasis on the female condom

Transactional sex.

Many womens ignorance on health issues.



SCRIPT
Four women, four stories



Christine Nduati as Mama Boi.

Aged: 30

- ♣ Pregnant, poor, physically, sexually, psychological abused
 - ♣ Quit work to be a housewife.
 - ♣ 7th Baby no control
 - ♣ No access to contraceptives



Apophia Mwende as Angie.

Aged: 22

- ♣ College, informed aware of her choices



Lucy Nyokabi as Mama Nicole.

Aged: 27

- ♣ Businesswoman, married,
 - ♣ Uses pill,
- ♣ HIV positive, 2 children, faithful to husband.



Agatha Wangui as Mwikali.

Aged: 25

- ♣ Single, orphan, house girl,
 - ♣ Abused by employer.



Script: BEYOND THE SILENCE

SONG: MEDIVAL DREAM – ORYEMA



Mama Boi

Mama Boi:

You what are you looking at,
Any you, have you never seen a pregnant woman in your life or what?
Just like all of you I was leading a normal life, a loving husband, 2 adorable children and a promising career.
I must confess I was comfortable until thing took a different turn.
Months earlier I had to quit my job, which I regret to this day, in order to take care of our young family. Since Paul my husband had a well paying job and could comfortably provide for the family, I had no objection. Everything seemed ok, but not for long, Paul lost his job and this meant
We had to move out, guess where, Kibera of course.

SONG: SINA RAHA (I have no happiness) – ZAWOSE



Mama Nicole

Mama Nicole:

I have been married to Peter for the last 6 years. I have never known such happiness – a very loving husband, understanding, caring and always there for me whenever I needed him. Then came our first child, Nicole, my husband became more loving than ever.



Peter works with the bank and his pay is quite handsome, it caters for all our needs. He opened a boutique for me, which is situated at the South B shopping centre. As my business started booming Ian was born and Peter was the happiest man ever known. Things were going in the right direction.



Mwikali: "Sunday, lunchtime was the best day,"

Mwikali: Right Direction indeed, I lost both my parents after they got sick and died. Since I am the 1st born, I have to take care of my 8 siblings. I was forced to look for work. It was hard especially because I had no formal education. After many months of rejection and being told Hakuna Kazi (*no vacancy*), I got work as a house help for a rich family. The job paid well and I was able to send money to help my family.

Mama Nicole: I tested HIV positive after undergoing a medical check up for a medical cover. Oh my God, the shock. No, no, it couldn't be true, how, who when. I was faithful to my husband and supposedly he was too. So where could I have contracted the virus?

Mama Boi: With no income and a family to take care off, I had to settle for manual work, cleaning houses, washing clothes, collecting garbage, virtually anything that came my way, in order to make ends meet.
My husband on the other hand had resorted to severe drinking of changaa. (*Elicit brew*) Let out his frustrations by physically abusing me notwithstanding the fact that I was expecting our 3rd child.
Life became unbearable and I even contemplated committing suicide but looking at the innocent faces of my children, I thought otherwise.

SONG: MUSA – DAUDI KABAKA

Mwikali: Life was ok, I used to get presents from the family every time, they went for shopping and some extra money. Sunday, lunchtime was the best day, after dropping his wife and children off at church, he came back home and we would have sex.

SONG: BENG BENG – FEMI KUTI

Mama Nicole: I tested HIV positive after undergoing a medical check up for a medical check up for a medical cover.
Oh my God, the shock, it can't be true. How, who and when?. Remember I am faithful to Peter and supposedly he is too. So where could I have contracted the disease?

SONG: TOMORROW – SALIF KEITA



Mama Boi:

I was pregnant once again and this was a big blow for me, I couldn't work any more. The beatings intensified as a result I had a miscarriage, as if that was not enough I got pregnant again and again and now this, my 7th and last.



Angie

Angie:

7 kids, who says those are many? Am the 6th born in a family of 15. My parents are farmers and have worked hard to see me through school and now an in campus. I made many friends and I enjoyed going out dancing and drinking, I got myself a man to maintain my lifestyle. It was a double blessing because he was my lecturer; he gave me money and ensured I had good grades. On our 3-month anniversary, he decided to stop using the condom. After sometime I started itching on my private parts, I had a thick, smelly yellowish discharge and pain while urinating. I went to see a doctor and he informed me that I had gonorrhoea. He advises me to continue using contraceptives that not only prevent pregnancies

Mwikali:

Is Dettol a contraceptive? I have been using it before and after sex.

Angie:

It is a disinfectant and antiseptic and is for external use only. As I was saying earlier the doctor advised me to continue using contraceptives that not only prevent pregnancies but also infection, which are male condoms and femidom.

Mama Nicole:

What is the point of using a condom and I am already infected.

Angie:

Condom use helps prevent re infection, and also reduces the risk of contracting STI's

Angie:

It is a disinfectant and is for external use only. Back to my relationship I asked my man to continue using a condom but he declined. That is when I opted for the Femidom, because it gave me control of my sexuality, but my joy was short lived, he strongly refused to have sex with me. Now I am torn, do I continue with the relationship and risk getting infected or do I break up wit him and risk my good grades.

SONG:

HERI NIWE PEKE YANGU (I 'd rather be single)– MUSHROOMS