

THEATRE IN HEALTH EDUCATIONAL SERVICES: AN APPRAISAL OF ANAM MALARIA PROJECT

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ABSTRACT

In recent years, several institutions and organizations including hospitals, medical groups, healthcare officers, Theatre Arts workers and etcetera have merged, consolidated or gone out of business to meet the challenging societal and environmental demands of the people. These increases in collaborations have challenged the practitioners with a new task of development and nation building those gears towards touching the psych of the people by giving them a concentrated peep into their life, environments, society, and add values either by involving them or by making them active observers. This collaboration gears towards bringing in individuals from different backgrounds, well versed in their chosen professions, to advocate for improved ways of solving societal and human problems through co-ordinate, analyzed and re-searched, processes through immersive, participatory, interactive, diagnostic, and performance-workshop-approaches. This study investigates the correlation between Theatre in Health Education for behavioral change amongst the people of Mmiata, and Umuoba Anam in Anambra West Local Government area of Anambra State. The gratification theory was used as the theoretical framework while the participatory research approach served as the research method to gather data. The mixed method was used for data analysis. The study further employs Simple Random Sampling Technique to select the households and different discussants. The study discovers that majority of households lack the knowledge of the dangers of mosquito and malaria transmission. The study concludes that the most effective way to prevent malaria is through awareness creation and conscientious efforts of the community.

Keywords: Health Services, Theatre in Education, Malaria, Anam.

PREAMBLE

Studies have shown that Applied Theatre is open for multidisciplinary studies that can enhance, beautify, solidify, authenticate its coast and build new tendencies. In the case of community health service, the immersive, participatory, interactive, and performance workshop approaches provide the researcher with a firsthand information through exploring new ideas, sharing health experiences, and becoming part of the solution to the problems discovered in the area. Unlike the previous means of communication which is between the sender and the receivers. It becomes discussion where everyone's voice matters. People are free to share experiences face to face with the solution providers. And still serve as the part of the solution team through group discussion. Summarily, this paper explores environmental improvements and using the theatre in producing creative kinds of information in any marriage between Theatre and Health Service and by examining the Anam Malaria Project, 2012.

The project, the Workshop and the Process: An Overview.

Anam is a river flood area located in Anambra West local government of Anambra State. It comprises of eight traditional communities. The rainy season the region can receive up to 200m of rain fall and as result of this, the water levels rise to 3meters in some areas and the people are forced to leave their farmlands and migrate to highlands settlements. The road is usually cut off, schools activities suspended for about three months. They are forced to respond to much hydrological system for their survival.

In a cross-community collaboration with the communities of Mmiata, Umuboa Aboregbu and Iyiora Anam, a malaria awareness program was commissioned to cushion the effects of mosquito and malaria sickness especially during this flood period on April 29th, 2012, by Chife Foundation, a Nongovernmental Organization in partnership with High Noon Rotary Club, Colorado, USA.

The goal of the program was on how to eradicate malaria in the region of Anam considering their meager health services combined with the growing health challenges and increased death rate because of malaria. The teams were charged with the task of possible way to eradicate malaria in Anam through prevention and treatment approaches that gears towards women, children and elderly. According to the executive director of the foundation, Mrs. Gesare Chife, a registered nurse, she said:

In concert with international efforts, today the Anam Community is proud to launch the Anam Malaria Program initiative, a campaign aimed at eradicating malaria in the coast of Anam. As the first step in a community Health Strategy, we plan to achieve this by focusing resources on pregnant women, nursing

mothers, children, and the elderly... the health center (will be) more than a hospital and aims at fostering a completely healthy town...through high quality integration of the traditional methods which will include local performance, music, dance diagnostic, research and refreshments (4).

The Team

The program comprises two teams, The Health Team and The Theatre Team. The Health Team was made up of Mrs. Gesare Chife, a registered nurse based in the United States of America. Julia Strickler is a licensed Naturopathic doctor, from Austin, Texas. She worked in the design of the public health system, "hybridizing traditional knowledge with allopathic methods" (Chife, 5). Akoto-Danso (Ghana) and Stacy Passmore (USA). They are to work on the socio-economic system and health related operational structures of the community.

On the other side of the coin, the Theatre Team was made of Theatre Arts graduates from the University of Nigeria Nsukka. They include Anthony Nnalue, (the researcher) Ikechukwu Erojikwe, PhD. Student, George Onuorah, Nwankwo Emmanuel, Theatre Arts graduates. They were challenged with the responsibility of bridging the communication gaps, educating the folks on the dangers of malaria and need for a healthy living. And possibly give the report life through performance.

The Health Team maintained competence, authority and standard in the health care issues while the Theatre Team exerts authority when the issue of aesthetic and performance are involved. The Health Team was mandated to seek for the best means of preventing and inexpensive means of treating malaria parasite. The product of the team's research gave birth to the play, *The New Beginning* which we shall study during the paper.

The Workshop Process

The research team recruited and trained four members of the community as research assistance and interpreters who helped with the administration of the questions to the people. The question is oral inform of interview. On getting to each family or a household, a brief introduction is done on the aims and objective of the project to gain their confidence and support. In each visit, they are always happy and willing to support and be part of the project. The process of data collection lasted for two weeks because of the number of persons and family visit by the team.

Participants:

Men, women, children, and elders of Iyiora Anam, Mmiata Anam, Umuoba Aboegbu, Ebenebe (A farm settlement), Theatre Artist, Healthcare Workers, and Chife Foundation.

Objectives of the Workshop:

To sort for the most inexpensive means to treat and prevent malaria and bridging the communication gap between the communities and the public through performances.

Immersive participatory and theatre for development approach adopted by the troupe involves the whole community both in the research process and the performance. Sequel to this, the problem of isolation amongst the community and the teams were eliminated. The teams were able to cover about 95 percent of the homes in the mentioned communities and 85 percent in-depth interview, ten hall meetings and a lot of group discussions were held. Data were collected on the current case of malaria; possible preventive measures were sampled. Due to the language problems, the interviews were conducted in Igbo with an audio recording machine and were later translated to English Language. The English version was later expanded for analysis and documentations.

Similarly, The Health Team adopted Akinsola's 'Precede Model' (73.), which aims at diagnosing the health problem of the communities, understanding the factors militating against them and develop preventive measures to promote a healthy environment. In the course of this investigation, we discovered that a lot of the community members have cases of malaria between one to four times annually and that they hardly treat malaria with drugs. Most of them prefer the local herbs and other measures they consider suitable than drugs. At the point of analysis of the data collected, both teams agreed that there is the need for participatory dramatic approach to showcase the dangers of malaria and mosquito bites. The introduction of an inexpensive means of preventing malaria and treatment was the highlight of the project. In the dramatic performance that highlighted the high points, the theatre team took the lead roles while the health officers took the health-related roles such as diagnosing and testing. Then the community members were made to play, from the dancers, drummers, to the village scenes for efficiency and to present the vital points as required for communication.

The Solution Play: *The New Beginning*

The performance starts with the elders seated, discussing in low tones and suddenly, a group of actors and drummer led by the narrator, an elderly man, in a procession form, mounts the stage. They sang various song and various dances with the entire community in participation. Suddenly, the drummers freeze as the narrator begins:

NARRATOR: Che... che...che.... e...e...e... Anam kwe nu!

ALL: Iya!

NARRATOR: Che...che... ch...e...e ...e...Anam kwe nu!

ALL: Iya!

NARRATOR: Chee...che... ch...e...e... Anam kwe zu ni!

ALL: Iya! (2)

The narrator immediately moves to raise the dramatic question of how malaria can be eliminated in Anam communities.

NARRATOR: Welcome to Anam, in Anambra West Local Government Area of Anambra State. Our major aim is to make Anam a malaria free community through a Community Health Strategy and Community Theatre Approaches. (*Stops abruptly. looks around as if he had made a mistake*). Anyway, I am a storyteller and the town crier. We have come to tell a story of Anam people and how they have been able to eliminate malaria in their towns. That was when men were still men. As a matter of fact, Malaria was a life-threatening disease in Anam. One day, the eight communities of Anam came together and ended this malaria scourge. (*He leaves and joins the audience*) (5).

The elders become so much engaged in the discussion to the solution that they become so tensed to the point that no elder could accept the others suggestion. Then the narrator comes in:

NARRATOR: This is not the time to establish ourselves as owners of words. We all know our strengths and weakness. Let us start considering the suggestions that have been made instead of sleeping here in the name of solving a problem but creating a new one. Some people suggested they we see the Oracle, some the Afa. Some the new church pastor, then some the Medical Team or The Hospital. What I want us to do is to send emissaries to all these places to inquire on our behalf and who ever came back with a convincing report will be accepted. (8)

The emissaries from the medicals brought back the most convincing report and thus the Health Team was sent for. The coming of the medical team coincided with the youth bring in the corpse of a man killed by the same malaria and the Health Team were challenged to prove that they have the solution to the problem of the community. They set to work with the dead man as the stage direction rightly states. (*they rush to the man lying on stage and inquired*)

HEALTH OFFICER: Can somebody explain what is wrong with this man?

ELDERIII: We should be asking you the question you just asked us. I thought they said you have the solution to these incessant deaths. So don't ask us but tell us why he is dead. (*The doctor beckons on a fellow, and they whisper*)

DOCTOR: Autopsy.... autopsy.... Yes, hurry up arrange for the autopsy (as *the man is carried out of stage*)

The result of the autopsy showed the presence of malaria parasite. Consequently, everybody must be tested. The community did not waste time to approve of the general test since it will bring the desired result. Hence, they commenced:

HEALTH OFFICER II: (*Holding an individual's hand*) when last did you treat malaria?

VILLAGER I: Malaria kwa?

HEALTH OFFICER II: What do you do each time you are sick?

VILLAGER I: I use herbs, or I go to a nearby shop to buy drugs.

HEALTH OFFICERII: We must test you now for malaria parasite. (19)

They began the test using their Rapid Diagnostic Testing Machine (RDTM) and result from the blood sample collected showed 95 percent of malaria present. Due to the problem of healthcare facilities in the community, an affordable means of treatment and prevention was sort for, and they concluded that insecticide treated nets and some malaria drugs be given to the community as a solution to the problem.

HEALTH OFFICER III: People of Anam we greet you.

ALL: welcome my daughters

HEALTH OFFICER III: We have analyzed the information gathered and is obvious that malaria has been the cause of all these deaths. So, we have decided that it must be eliminated once and for all. (As she was speaking, song rises and was followed by bags of mosquito nets carried in by some people) these will stop mosquito from disturbing (pointing to the nets and drugs) the community again. (*The cast joined in the distribution of the nets while the Health Officers handled the drugs distributions at the end of the distributions.*)

HEALTH OFFICER: You take the drugs once a day after meals and then sleep under the treated nets. With these, malaria will be a history in Anam. (*An audience raises his hands*)

HEALTH OFFICER I: Yes, what is the problem?

AUDIENCE: How can we sleep under a net because the nets we have here is for fishing?

HEALTH OFFICER: This net is not for fishing but for sleeping. This is how to use it. *(She demonstrates the usage and everybody admired her. They were still celebrating when a mosquito silhouette flies in to infect the people. They all ran into their nets. And the mosquito silhouette dies as soon as it had contact with the nets. Celebrations and jublations engulf the entire community as the narrator comes to conclude the play).*

NARRATOR: Cheeee cheeeee cheeeee. Anam kwe nu!

ALL: Iya!

NARRATOR: Anam Kwe zu ni!

ALL: Iya!

NARRATOR: We have seen with our eyes how malaria has been chased out of our communities. I enjoin everybody to practice what he or she has learnt in the story. Try using your nets and taking your drugs as you have learnt. What has a beginning has an end... una eluo, but before then, meet my actors *(They introduce themselves and their roles and all bow).*

RESULTS:

The age, the sex and educational level of the respondents were considered so vital to get of the best information on behavioral change and improved health care system.

Sex: Male and Female

70, the result recorded an improved healthcare environment, communal relationship, especially on the restorative, and therapeutic aspect of the community lives. The program contributed substantially to the elimination malaria parasite in the communities and gave birth to a new hospital in the area.

This is because the result from the blood sample collected initially showed 95 percent of malaria parasite present in the below age brackets (Age Brackets: 18-30, 30-50, 50). The males have higher percentage of the parasite than the female.

Reason

The male respondents were careless about the adverse effects of mosquito than the female respondents and poor healthcare facilities in the communities and unaffordable means of treatment and prevention contribute immensely to these problems.

Solution:

Insecticide treated nets and some malaria drugs be given to the community as a solution to the problem. The mosquito treated nets become the most inexpensive means of preventing malaria in the area.

The people already with the parasite are treated under the health team and asked to be sleeping, henceforth, under the mosquito treated nets that was made available for such purpose.

As Obadiogwu rightly observes, "...workshops, however, illustrates the use of the theatre as an effective tool for social mobilization, conscientization and ...instrument for communal expression" (91).

CONCLUSION

The Theatre in Health Service has proven to be an effective instrument for mass mobilization, health care awareness and preventive measures with less drugs involvement. Community involvement in the solution to their problems makes healing and therapeutic process easy. According to Anna Dumitriu, "Arts for me are a way of investigating the world...in that way, I see no real distinction between arts and sciences at all..." (6), the fluidity of Theatre in the Health Services, Its adaptive potentials and its acknowledgement of the world as an artistic construct is affirmed by this study.

Community participation liberates them from individuals with negative visions of life and transforms them into individuals with positive vision of life. They become healthy and relevant by their contribution to the overall development and well-being of the communities.

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