El Teatro Lucha de Salud del Barrio: Theater and Environmental Health in Texas

By John Sullivan

Sylvia Castillo describes de Madres a Madres as a movement of mothers and their children that coalesced 15 years ago in her own kitchen. As this movement gathered additional membership and momentum, the group outgrew her home and moved into its official headquarters at La Casa Azul on Paschall Street in the heart of Houston’s near north side. Serving a densely urbanized area that functions as an unofficial “port of entry” for Latino immigrants and internal émigrés from the lower end of the Rio Grande Valley and rural West Texas, de Madres a Madres offers young-mother mentoring, prenatal education, job assistance, a weekly food bank and a virtual social-services roadmap based on years of experience in navigating and explaining the stressful cross-currents of healthcare access, housing, education and much more for neighborhood families in need of services and information.\[1\]

Over time, de Madres a Madres concentrated energy and resources on the very real threat posed to children’s health by environmental lead concentrations in local soil and housing.\[2\] Their efforts to educate parents and collaborate with neighborhood elementary schools in blood-lead-level screening of new students underscored the alarming proportions of this problem in the community and prompted Castillo to seek a more comprehensive, high-profile means of community outreach and a methodology for conducting a quantitative assay of the range and scope of lead pollution in her neighborhood. And then Sylvia Castillo discovered Augusto Boal’s Theatre of the Oppressed (TO).

Gathering, Networking, Setting the Stage

In 2001, the National Institute of Environmental Health Sciences (NIEHS) Center in Environmental Toxicology at the University of Texas Medical Branch in Galveston, Texas, launched a unique project to supplement its Community Outreach & Education Program (COEP). The center’s former director, Stephen R. Lloyd, is a genetic scientist We began to see new ways of infusing respect and mutual regard into the process of doing
who truly appreciates the power of live theater to shed light on difficult ideas with plain speech and compelling images. He hired me to create a TO-based Image Theatre educational curriculum in toxicology and risk assessment,[3] and produce Forum Theatre workshops and performances. He wanted to engage citizens, scientists, health care providers, regulatory personnel and public policy-makers in dialogue on the health effects of toxic exposures, and the possibilities of improved environmental health through more effective coalition-building and policy action. As these Community Environmental Forum Theater projects developed,[4] this new outreach methodology began to narrow the “gap of Otherness” that normally separates environmental-health specialists from “communities of interest.”[5] Terms like interaction, dialogue, participatory research, iterative processes, collaboration and project sustainability came to populate our discussions of how citizens and scientists could reconfigure our former, mostly utilitarian relationships. We began to see new ways of infusing respect and mutual regard into the process of doing public health.

In June 2002, our NIEHS Public Forum & Toxics Assistance division collaborated with Nuestra Palabra, Unidos Contros Environmental Racismo and Immaculate Heart Parish in a Forum Theatre project focused on 1,3 butadiene emissions from a petrochemical facility adjacent to Caesar Chavez High School and lead exposure pathways that place children and adults at risk in the Barrio Segundo neighborhood. Sylvia Castillo attended that performance, ostensibly to support two volunteers from de Madres a Madres who were performing with the Forum troupe. But the authenticity of the scenes touched her and she found the concept of spect-actor audience interventions intriguing. After the performance, Sylvia spoke with the cast, and together, we brainstormed the possibilities of a bilingual performance project to increase resident awareness and action on childhood lead exposures in the de Madres a Madres neighborhood. For six months or so, this idea gestated while we assembled a network of stakeholders.

The next fall, the NIEHS released a request for community research/outreach proposals through the Environmental Justice: Partnerships for Communication program and our coalition jumped on this opportunity to secure funding and technical support for our idea.[6] The process brought a Harris County near-north neighborhood healthcare provider, Casa de Amigos, and Center investigators from the Public Forum & Toxics Assistance and Asthma wings of our NIEHS COEP, Texas Southern University’s Environmental Justice Law Clinic as well as de Madres a Madres into the mix.

Throughout a series of planning meetings, we shared cultural perspectives, and discussed various designs for gathering and interpreting data. We ultimately cobbled together a research, health-education and promotion project that focused on:

- Deploying a site-specific “healthy homes”-style residential survey[7] to assay the extent of residential lead contamination and inspect physical structures for drainage, ventilation and efficiency of heating/cooling systems
- Measuring the concentration of environmental asthma triggers and respiratory irritants present in neighborhood homes
- Developing practical, culturally appropriate, low-cost interventions that residents could apply to reduce environmental risk in and around their living space
- Creating a context — and a bias — for collaborative policy initiatives that amplify and reconfigure new and existing resources to address the targeted issues, empower neighborhood families and increase the capacity of de Madres a Madres to serve the needs of this community

We called our project, Communities Organized against Asthma & Lead (COAL) / Comunidades Organizadas contra la Asma y el Plomo. By consensus, Jonathan Ward, chairman of the Division of Environmental
Toxicology/Deputy Director of the NIEHS Center at the University of Texas Medical Branch in Galveston was designated as principal investigator for Project COAL.

To do all of this effectively, we needed a vehicle to take the news of what we wanted to accomplish — and how and why — directly into a bilingual urban community bombarded with attractive messages in multiple media, all competing for time, attention and traction. We decided — after intense lobbying on my part, with Sylvia Castillo’s support — to make Augusto Boal’s Theatre of the Oppressed our primary mode of outreach, and I agreed to train and co-facilitate a troupe of community actors recruited and supported by de Madres a Madres with outreach funding provided through an NIEHS Environmental Justice grant. Our decision was influenced by a number of factors inherent in the intention and design of this unique collaboration, including:

- The Freirean principles at the core of Boal’s dramaturgy — the primacy and transitive nature of dialogue, centrality of personal expression and authentic voice, a relative equality of points-of-view, an iterative process of constant questioning and deconstruction of social/economic power dynamics, an anticolonial and inclusive approach to knowledge production — all reinforce the basic paradigm of Community Based Participatory Research that mandates framing research questions, data collection and interpretation, and the design of community interventions as a truly collaborative process.[8]
- TO’s image-making structures and the Forum’s spect-actor interventions incorporate local and expert knowledge; otherwise, our project might be weakened by “reality gaps” and unwarranted assumptions at the praxis level.
- Collaborative participation of the de Madres outreach troupe, neighborhood residents, and scientific/medical staff in Forum performances builds both issue awareness and basic trust throughout the community.
- The TO process provides a means for incorporating community ideas and attitudes to develop a culturally sensitive, reality-based model for deploying our environmental health barometer survey during the home-visit segment of the project.
- Using TO in community research is consistent with the translational science outreach mandate of the NIEHS: translational processes should be inclusive, interactive, connected to real life and relatively free of scientific jargon.
- And finally, the Public Forum & Toxic Assistance Division’s evolving string of stand-alone Community Environmental Forum Theatre projects demonstrates that this innovative method of communication serves as an effective educational and community-building tool.[9]
Phases of the Project COAL:

- **Phase 1:** The results of Forum performances will be used to assess community knowledge of: a) lead poisoning and prevention, b) asthma pathogenesis, c) asthma triggers and the role of specific triggers in complicating management of the disease. Phase 1 will also include Forum-able scenes designed to gather community input on culturally appropriate methods of deploying the survey and educating the community. (Year 1: 2003-2004)

- **Phase 2:** Based on preliminary results of survey and feedback from the last round of performances, the troupe will create two specifically educational non-Forum scenes that accurately represent environmental facts on the ground and model successful neighborhood-level responses to threats posed by lead and asthma triggers. This show will also feature Forum-able scenes that represent problems in risk communication and solicit effective suggestions from community spect-actors. (Year 2: 2004-2005)

- **Phase 3 (part 1):** The final TO phase would begin with a series of focus groups that use Image Theatre, action sociometry, group discussion and response checklists to consider the goals and achievements of Project COAL, the quality of the collaboration among project partners and the community, and to chart a course — both speculatively and in practical terms — for improving the comprehensive health of Houston’s near north side. (Year 3: 2005-2006)

- **Phase 3 (part 2):** The results of these focus groups, as well as analyzed and interpreted project data, will be incorporated into a new show, "Our Neighborhood of the Future," that tours the de Madres a Madres area offering spect-actors an opportunity to contribute sustainability-oriented suggestions for maintaining and magnifying our coalition of environmental health organizations and for initiating actions that will move public health policy in a progressive direction. (Year 4: 2006-2007)

Our proposal for Project COAL carried with it a massive dose of innovation and we had no idea how our plan would be received and interpreted by the NIEHS study groups that review grants submissions. The proposal FedExed its way to Research Triangle Park (North Carolina) in January 2003 and the long wait began. By July 2003 we received final word that Project COAL has been funded for a period of four years (September 2003 – August 2007). We all celebrated, but very briefly, and then launched a push to craft and perfect our respective pieces of this complex community puzzle.

While Center investigators retooled and translated the survey instrument and created a Quality Assurance/Quality Control model for monitoring various environmental factors germane to the study, Casa de Amigos geared up to serve as a lead/asthma informational interface, and de Madres a Madres rearranged its employee duty schedule to accommodate the new outreach and survey chores. I met with Maria Murillo, the de Madres a Madres teatro coordinator and soon-to-be bilingual co-facilitator, to recruit community actors, set up a schedule of rehearsals, and design a foundational training sequence that would equip this multigenerational group of citizens — all prior nonactors, of course — with an environmental-health knowledge base and the requisite performance chops to co-create a scientifically accurate, theatrically tight and visually/emotionally compelling grassroots performance that plays anywhere, with few to none of the typical acoustic, lighting, set and prop accoutrements normally associated...
with theatrical productions, and that constantly adjusts its mix of Spanish to English dialogue in sync with the site-specific needs of each audience.

**Learning the Facts & Perfecting the Moves: Teatro por la Salud Gets Legs**

Maria Murillo recruited a group of ten community members — six women, four men, ranging in age from 12 to 67 — to begin training in the philosophy and techniques of TO and the neighborhood facts of lead and asthma. The group’s experience of life in Houston varied, of course, by age, gender, education and country of birth and primary language; there were nearly equal numbers of first-, second- and third-generation generation Mexican Americans, and more recent immigrants (primarily from Mexico & Guatemala). Some of the immigrants were longtime U.S. residents and some were fairly recent arrivals. Two of the group were primarily Spanish speakers and Maria served as translator so that all the actors’ needs could be accommodated bilingually.[11] All of our sessions were held in the evenings or on Saturdays, according to a complicated schedule that made it possible for the actors to work their day jobs, go to school, and/or manage family obligations. And while we learned the rudiments of acting and dramatic structure, Maria contacted local venues to arrange our tour, and saturated neighborhood gathering points with bilingual fliers.

Our ten-week training sequence resembled most of the introductory workshops I’ve facilitated in the techniques of Boal’s Theatre of the Oppressed. Without glossing over the initial “awkwardnesses” — some of which were due to linguistic/cultural barriers, and some to novel uses of physicality—this group quickly adapted to the sequence of activation and sensory re-tuning structures, trust exercises and nonverbal, physical improves. I used a wide range of improv scenarios with different dialogue, setting and situation parameters to prepare the actors for the moment on stage when a spect-actor would try to bend the structure of the scenario we had carefully rehearsed to force a different outcome.[12]

After a brief introduction to image-making structures, our teatro turned their image pictures toward a distinctly Freirean perspective, exploring points-of-view on family life, social and environmental problems in the neighborhood, making representations of common attitudes toward the environment, and recreating the overarching power dynamic that defined health, education, safety, politics and social relations on the near north side. At this point, we experimented with Boal image structures such as Real to Ideal to experience how this form could be used as speculative discourse to dream up a better reality. Image of the Image[13] also demonstrated that we could collaboratively construct a larger consensus by subtly reconfiguring each other’s tableaus. We called this process “tweaking the snapshot.” Our teatro cottoned onto the deep analytic possibilities of image-making in short order. We often used these structures to critique our process and interrogate our goals and our progress.[14]

At this juncture — about six weeks into the training — our rehearsals were visited by colleagues from the medical/scientific end of Project Coal, Dr. Brenda Reyes (City of Houston/Director of Childhood Lead Poisoning Prevention Program) and Dr. Ed Brooks (NIEHS investigator/UTMB Pediatric Asthma Specialist). Dr. Reyes and Dr. Brooks made bilingual presentations on lead and asthma pertinent to the environmental-health goals of the project. They engaged the group in an extensive discussion of developmental risk factors, neurotoxic effects (of lead exposure), asthma pathogenesis, asthma triggers and their effects, and incidence rates in Houston for asthma and lead poisoning. Members of the teatro also asked numerous questions about how existing medical research, and city health and housing institutions dealt with these serious problems. Both of our experts concurred that existing diagnostic and service gaps cause disjunctions and families continue to fall through the cracks.

Situations described in these two “promotoras-style”[15] training
sessions were later incorporated into the design of Forum scenes for our first show. I transcribed notes from the didactic and discussions sections and created a set of lead and asthma talking points that were carefully coded into the performances — we were extremely concerned that nothing important got missed or garbled in the dramatic translation.

When we returned to the workshop, we trained our focus on collaboratively designing scenes and image structures for public performance in the neighborhood.[16] The actual “flow of the show” evolved into the following format:

- Introduction of Teatro and purpose of the performance project
- Neighborhood image snapshots of social/environmental problems
- Pop-Ups (micro scenes portraying negative environmental situations that begin as a frozen image tableau)
- Audience warm-up structures: the "community handshake," the "cross & circle," and "dueling images"
- Lead Scene: “Why Does My Kid Have Trouble Learning?/Por que me hijo tiene problemas de aprendizaje?”
- Asthma Scene: “She’s Not Sick; She’s Just Lazy./Ella no esta enferma. Ella es peresosa.”
- Audience selects Forum-able scene
- Run & process spect-actor interventions
- Synoptic images (cast members create images in response to feelings & ideas about the show by expressed audience)
- Pops-Ups Redux: (micro scenes replayed with positive conclusions)
- Curtain-less call (we never performed anywhere near a genuine curtain)
- Questions & answers on lead and asthma risk factors, neurotoxic effects of lead, signs & symptoms of asthma, ozone-level relationship to asthma

We devoted the last week of rehearsals to fine-tuning the scenes and internalizing the sequence of performance activities and stage management business necessary for a smooth flow. Our last workshop was framed as a dress rehearsal and we performed for a small audience of project collaborators and interested health professionals who vetted our coverage of the health content, gave kudos and made recommendations. In late March, we launched our tour of Teatro por la Salud with a performance at Looscan Elementary School’s 8 a.m. cafecitos[17] meeting of school mothers and their preschool children.

Over the next 6 weeks, we visited another cafecitos group, as well as the Latino Learning Center, the Multicultural Educations & Counseling through the Arts Center (MECA), the Holy Name School auditorium and the Holy Name parish house. As we closed each performance, we distributed a survey to gauge the educational effects of our efforts.[18] Spect-actor interventions were video-taped to make a permanent record of the community environmental health knowledge base, risk perceptions, attitudes toward the survey process, and suggestions for culturally appropriate ways of conducting home visits. Phase 1 finished in late May with a special performance offered to local healthcare providers and public health officials at MECA.

Based on feedback from audiences and our own inside perceptions, we drew some important, though mostly unsurprising, preliminary conclusions:

- The best form of publicity for our performances on the near north side was word-of-mouth. Communities in the Schools representatives in local elementary schools were ideally situated to act as conduits for information about our performances and Project
COAL. Holy Name parish was another such nexus.

- The electricity (our “coefficient of personal juice”) generated by audience interventions was directly related to the spect-actor’s personal involvement with the issue.
- The usefulness of spect-actor action proposals was directly related to the individual’s grasp of the issue.
- Humor was the best chaser for scientific facts, health/safety warnings and urgent suggestions for policy change.
- Audiences had no problem suspending disbelief despite the “barefoot theatre” production values — this was of course related to the actor’s craft and our use of detailed, recognizable, concrete scenic situations.
- Simultaneous English-to-Spanish translation slowed the pace and caused some confusion during the performances. This became glaringly apparent when Maria Murillo swapped out her acting spot and personally facilitated in Spanish at the Holy Name parish house performance. Our co-facilitation arrangement was most effective when a large number of audience members were bilingual or monolingual English speakers. Our cafecitos audiences universally preferred the performances en Español, solamente.
- Spect-actor interventions stressed patience, kind concern, especially for the health of children involved, and a nonjudgmental acceptance of attitudes and life-styles in gaining admittance — and entry through the front door—for the home inspection surveys. All seemed to agree that asthma episodes and lead poisoning should not be conflated with a basic lack of cleanliness or any connotations of parental neglect.
- There seemed to be no stigmas attached to lead-related health outcomes such as signs of ADHD, or failure to thrive. Asthma seemed to carry a “weak” stigma associated with a “frail constitution.”[19]
- The cafecitos audiences were the most receptive to information on children’s environmental health. More new recruits for the “healthy home”-style survey signed up through cafecitos than at any of the other performance venues. Mothers at these meetings invariably asked lots of questions and took home printed materials on environmental health.
- In general, audiences knew more about lead than they did about asthma. And again, generally, audiences were more eager to talk about asthma-related topics after the performances than lead.
- The most productive post-performance dialogues ensued when lead or asthma experts were, themselves, part of the audience and could “seed” discussion with facts from current research.

As our performance tour wound down, the home survey teams deployed throughout the neighborhood and our promotional/assessment activities segued neatly — almost — into the direct-contact data-collection process. In June 2004, I collaborated with Loree Primeau, PhD., OTR/University of Texas Medical Branch in constructing an interview guide for one-on-one personal interviews with each of the troupe members. This interview invited our community actors to discuss how their TO training and performance experiences had affected their personal lives and their self-perceived relationship to the community. The guide covered comprehensive topics such as leadership and educator skills development, personal and community impacts of TO & Project COAL, efficacy of bilingual versus Spanish-only performance formats, actor training, dramatic skills development, and changes in essential personal factors such as
self-esteem, assertiveness and ability to communicate. The bulk of this interview consisted of oral questions and responses, recorded for later transcription. Troupe members also made numerical ranking responses on various scales that measured concepts such as comfort with leadership role, efficacy as an educator, Forum Theatre actor competency, etc. We are currently using a grounded theory approach to code the interview transcripts and identify emergent themes that will be used to generate more questions for an in-depth follow-up interview with troupe members, nonactor project collaborators from all three institutions and audience members.

**Enter, El Teatro Lucha por la Salud del Barrio: Phase 2 Hits the Boards**

As more families enrolled in the project and more home inspection surveys yielded quantitative data on lead contamination and concentrations of asthma triggers, we rolled out Phase 2, our educational intervention that presented models of environmental-health awareness and safety-oriented behaviors to the community framed as theater. Preliminary survey data showed that approximately 20 percent of the homes inspected harbored levels of lead dust and/or lead paint chips that exceeded Environmental Protection Agency standard levels.[20] Window sills and wells, baseboards, doors, stairs and soil within the drip line around individual residences were marked as prominent exposure points for young children.

Many residents claimed relative unfamiliarity with asthma signs and symptoms, though triggers/allergens were detected in indoor air samples, and some survey respondents indicated that family members experienced periodic respiratory difficulty. An actual diagnosis of asthma by an M.D. was infrequent.

Additional information from the City of Houston indicated possible newly identified exposure pathways for lead via certain candies from Mexico and other Latin American countries with lead acetate in the paint on their plastic wrappers, as well as the persistence of low-fire Mexican pottery glazed with lead paint.[21] These quantitative factors and observations drawn from spect-actor interventions and anecdotal post-performance dialogue results were compiled as a second, more elaborated set of talking points to inform our process while creating the new performance.

This second show evolved more smoothly than our first effort. Most of the original actors returned after a five-month hiatus and we were blessed with an infusion of three new members who quickly picked up the conventions of image-making and the Forum.[22] While everyone enjoyed the heavy concentration on activation, trust and improv games during our rehearsals for Phase 1, we agreed to telescope the (re)training and composition process into six short weeks so we could focus on additional performances in the community. We devised a performance format that relied less on sparsely dialogued or narrated tableaus — such as the Snapshots and Pop-Ups—than in our first show, and forefronted more complex character development, situational conflict, toxicological and medical facts relevant to the project, and compelling action. An image that riffed on Playback Theater’s fluid sculpture form was inserted at the top of the show to launch the performance with a burst of energy rather than an unremarkable drone of dry explanation.

We crafted two noninteractive “teaching-by-showing” scenes that translated important risk-and-exposure pathway factors into character interactions framed within easily recognizable situations. In addition, three Forum scenes were created to depict how problems develop when residents don’t understand their environmental risks or can’t convince others to take risk factors seriously. We also included a de Madres a Madres capacity-building scene, “Encuentro en la Fiesta,” that opened with Maria shopping in a Fiesta Supermarketa where she ultimately explains the array of de Madres services to a young mother, recently arrived from El Paso and confused by her new context.
Based on the responses we received at various venues during Phase 1, and the fact that reaching mothers with young children was a primary project goal, we focused our promotional outreach on the cafecitos meetings at seven area elementary schools. The Community in the Schools representative at each school served as our promoter and we adapted our tour itinerary to mornings when the cafecitos were scheduled to meet. An additional community performance was scheduled for the Holy Name auditorium as the parish hall was our primary rehearsal space and we wanted to honor their commitment to neighborhood health. The group decided Teatro por la Salud, our unofficial name during the Phase 1, didn’t do the group justice and El Teatro Lucha por la Salud del Barrio finally emerged as more congruent with our goals and functions, and ultimately more inspiring.

Our most important decision for the new performance tour hinged on the cultural appropriateness of language, the connotations attached to whether we framed our performances monolingually or bilingually, and then, what proportions of Spanish to English we actually used, and whether we could vary these proportions to suit the changing needs of specific audiences and not impede the pace and rhythm of the show. This decision was complicated as some of our actors were more or less conversant in Spanish, while some were just learning English. My spoken Spanish is very limited — this was especially evident when we improvised — so we decided that Maria would be the primary facilitator for all the Phase 2 performances. This way, we were sure important health information would be communicated precisely and no linguistic/cultural filters would intrude on the magic of our live presence. I would co-facilitate the Holy Name performance as we expected to see more of a linguistic cross-section with that audience, but otherwise, I functioned as NIEHS Center/Project COAL liaison, stage manager and general sound system roadie. Consequently, our cafecitos audiences made strong connections with our Phase 2 show, much more so than with our previous effort. While the group’s deeper grasp of craft and familiarity with the general circumstances of performance were contributing factors, everyone — especially our audiences—acknowledged the choice of Spanish as a dominant factor.

We also added a surround of four omnidirectional microphones that gave the actors increased vocal edge in auditoriums and cafeterias with poor acoustics. As our improvisations morphed into solid scenarios, the following sequence of images and dramatized situations crystallized as our working format:

- **Fluid image:** “I Don’t Want to Hear About It!/Yo no quiero oir sobre eso!” (a group image-making / story-telling structure that dramatically builds solidarity and commitment to care for health and the environment)
- **intro to El Teatro Lucha... (mission & purpose)**

**Didactic Scenes**

- The Silent Killer/El Asesino Silenciosa (lead)
- Trying to Breathe on a Purple Day/Tratar de Respirar en un Dia Morado (asthma)

**The Forum**

- audience warm-up structures: “the crazy chicken,” “the cross & circle,” “image on-demand”[23]
- The Forum-able scenes: “I Really Want to Rent Your House!/Yo quiero rentar tu casa!”; “Dad & Son at Home on a Red Day./Papa y el hijo en un dia rojo”; “Dad Comes Home/Papa llega a casa”

**Processing & Cool-Down**
Synoptic images (cast members create images in response to feelings & ideas about the show expressed by audience)
- Curtain-less call
- Community dialogue (more or less informal discussion of ideas sparked by performance).

Our show toured near-north-side elementary schools from March until May 2005. The performances reached six cafecitos groups and a larger, communitywide audience at the Holy Name School. Approximately 260 audience members attended the targeted cafecitos performances; 60 community members gathered for the show at Holy Name School. We circulated a revised survey after each performance to measure attendees knowledge of facts about asthma and lead, all of which were imbedded in the performances.[24] We put the show to bed in June, and are now planning how to integrate members of the troupe as co-facilitators into next year’s round of Image Theatre and sociometry-based focus groups.

**What Have We Learned from El Teatro Lucha? Analyzing Data from Arts-Based Research**

The most unique aspect of Project Coal has been its use of Theatre of the Oppressed as an outreach, educational and assessment vehicle within the context of community-based collaborative science and service delivery. Spect-actor interventions, post-performance dialogue and anecdotal conversations, and results of our lead/-asthma facts survey produced the following data that have in no small way influenced both the overall interpretation of project home survey and indoor air quality measurement data and our choice of strategies for leveraging changes in public health policies and funding patterns that affect environmental health. Some of our most significant findings include:

- Residents in the 009 and other zip codes are aware of the neurotoxic effects of lead exposure and would like to see quick, decisive action on problem.
- Citizens are not clear on who should assume the lead role or direct responsibility for necessary changes in policy relevant to children’s environmental health.
- Adults are willing to accept more risk and uncertainty for themselves than they are when their children’s health is an issue.
- Community knowledge of asthma is still sketchy and influenced by cultural factors.
- Few people discuss the possibilities of lead poisoning, asthma risk factors, or asthma signs and symptoms with their physicians.
- Many community members have no medical home and visit local clinics or public hospitals — like Casa de Amigos — only in response to acute illnesses or emergencies.
- Undocumented residents have less access to healthcare and are less inclined to respond to outreach efforts.[25]
- Structural properties of old housing often contribute to the presence of asthma triggers such as mold.
- Some cosmetics, candies and low-fire glazed pots serve as lead exposure pathways for adults and children.
- Many community members are proximate to lead exposure pathways because of work and/or geographical location.
- Some children in the community are exposed to lead through folk remedies for colic — azarcon and greta.[26] This remedies were mentioned with some frequency during post-performance discussions.
Community residents are aware of and worried about the incidence of diabetes and obesity in the community. If audience members were asked to informally prioritize healthcare issues during post-performance discussions, these two problems invariably topped the list.

We communicated our theater-derived information to other members of the Project COAL working group during our more or less monthly meetings, to our External Advisory Board and in yearly reports to the NIEHS. Data from these reports were influential in establishing the need for a supplemental dietary survey that students from the UTMB medical school have circulated at de Madres a Madres on food-bank Fridays. We recently incorporated our findings into a three-hour workshop for all of our COAL partners that stimulated a frank discussion of our collective and individual needs midway through the project, and may serve as a prototype for the theatre-based focus groups we’ve planned as prelude to our final round of performances.

Our workshop shuffled theater games, action sociometry, discussion and a simulated real-world interaction into a discussion of facts and data from the study, ongoing management and interpretation of data. We also applied them to sticking points and impediments — we called them speed-bumps — in the flow of data and the implementation of policy, ways and means of getting information into the community, effectiveness of the teatro, and personal connection to issues central to the project. Finally, we blended the results of these activities and our subsequent discussion into another embodied activity we call, “Talking to Power.” Sylvia Castillo used this theater game to choose the most appropriate Power Actor in the public-health power dynamic to approach[27] with her plan and a plea for action on comprehensive blood-lead-level testing for children with higher than normal exposure risk.

This technique also focused on choosing allies with political leverage and access to the Power Actor.[28] The success of this workshop dispelled much of our fear about approaching the community with such an unusual design for focus groups. We now confidently hope that this paratheatrical means of dialoguing with the community will yield critical input we need to co-design a final show that truly represents the tenor of the near north side as this neighborhood approaches the changes and challenges of environmental issues, new demographic patterns and social/economic imperatives that impact the future of Houston’s Latino community. More on all that, later.

Enduring Effects & (We Hope) Permanent Trends: Guiding TO Through the Scientific Looking-glass & Back Again

When we first discussed the design and logistics for Project COAL, I was simultaneously energized and overwhelmed by the prospects of melding TO and its emphasis on personal expression of feelings, sharing points-of-view and grappling with oppression and consequent empowerment with the weigh-and-measure features of objective science in a community-based research project. To the best of our knowledge, this proposal was a first for both TO and science; formally coding Forum Theatre techniques into the official text of an NIEHS proposal, and then having that proposal approved for funding was in itself a singular achievement.

But I still had personal misgivings: Suppose this community really didn’t like interactive theatre? Suppose my presence as a white male together with my absence of functional Spanish shut down the workshop process, or alienated our audiences? Suppose the residents recruited for the TO training were unresponsive to the games or unable to improvise? Suppose our group became an incompatible mix of personalities, or fundamental
None of these worst case scenarios were ever realized; quite the opposite. And our decision to focus on bilingual but mostly Spanish-language performances facilitated by Maria Murillo dissolved whatever few cultural filter effects we perceived during our first performance tour. But there still remained one important gray area: Will TO ultimately prove useful to this consortium of scientists, health care providers and social service specialists in an ambitious, long-term relationship intended to improve the environmental health of a heavily urbanized neighborhood faced with political marginalization, an eroding physical environment and chronic poverty?

So far, TO has increased the scope and reach of our systematic efforts to address the challenges of lead poisoning and asthma. The teatro has opened a unique and invaluable channel of transitive communication[29] through which our actors and our audiences can both actively inform, and also listen, with sensitivity. Neighborhood perceptions, beliefs and attitudes gathered from spect-actor interventions have informed the design and implementation of our home survey and our post-performance lead/asthma facts survey has kept accurate tabs on the quality of our didactic outreach toward the community. Our teatro now serves as a bridge for science into the community, a conversational medium for our public-health experts and people in the neighborhoods, a capacity-building tool for de Madres a Madres and a vital interface for all the component organizations of Project COAL. It’s not perfect, of course, but these relationships are alive and thriving.

Our efforts to conduct a systematic study of TO’s effects on ensemble participants could yield significant documentation of a transformational phenomenon I’ve experienced and observed so many times. All TO practitioners strive to activate change — again, a transitive phenomenon that feeds back from workshop participants, forum actors and spect-actors into each practitioner’s own personal field of being. This process is the true linchpin of empowerment.

But how do we measure personal power: reflexively, through introspective conversation, or objectively? And by extension, how do we gauge the actual impact of this interactive/relational outreach on the residents of the near north side? I can’t say we’ve resolved all the ambiguities in this study, but we are continuing with our analysis of TO’s impacts on individuals and communities using open, axial and selective coding strategies to analyze the texts of our interviews to date. Thus far, the following thematic coding categories have emerged:

- TO as Process
- Personal Transformations
- Community Transformations

Dr. Loree Primeau and I presented these preliminary results at the 2005 Pedagogy & Theatre of the Oppressed conference.[30] This analytic piece continues with our three newest troupe members scheduled for interviews. We plan to sample cafecitos and communitywide audience members to gain a sense of how well specific performance strategies increased aesthetic
Never before was I asked to document so much, connect a scored performance text so closely with specific facts and specific audience behavioral outcomes, or to measure those outcomes so scrupulously.

On a personal level, my time with El Teatro Lucha... has been a most significant milestone in my own development as a practitioner of Theatre of the Oppressed. Project COAL has given me a unique opportunity I never had directing Theater Degree Zero (Tucson, Ariz.) or the Theater of Liberation/Seattle Public Theater (Seattle, Wash.). Prior to COAL, most of my projects were medium- to short-term workshops, stand alone performances or limited duration tours.[32] With a total of 16 weeks devoted to training and development of our performances and another eight to ten weeks for touring the show, I felt for the very first time that our process and preparations — regardless of the fact we initially started from scratch — were commensurate with the demands of our roles as actors and health educators. And never before was I asked to document so much, connect a scored performance text so closely with specific facts and specific audience behavioral outcomes, or to measure those outcomes so scrupulously.

Coordinating the content and timing of our performances with the actions of the home survey crew, the labs conducting assays of our environmental samples, release of data from the assays and collaborative interpretations of these data has been a unique challenge, something I’ve never before associated with doing theater. And the opportunity to integrate TO image structures and other embodied dialogic techniques into qualitative and action-research projects has opened a new personal perspective on the scope and range of possibilities for TO and other systems of applied theatre.

On a deeper level, doing a long and fairly intimate community-based theater with a group whose race, culture, language, level of economic means and position within the prevailing social power dynamic I do not share has been a humbling, frustrating but also illuminating experience. I learned very quickly that regardless of how much I wanted to understand and connect with every interesting new element of Latino culture, there were many rivers I couldn’t cross, even if my Spanish proficiency took a quantum leap. And the most significant of these rivers is privilege: This older white guy from a university with a good job and some relative status parachuting like a multicultural dilettante into the near-north-side neighborhood with the knowledge-technique-connections to raise awareness, activate community will, lift oppression and simultaneously check out the really cool food and music — I mean, really: who am I kidding?!

Recollecting Paulo Freire’s parables of well-meaning oppressors working with people on the other side of the power dynamic, I just tried to show what I know in terms of method, and then step aside and let the teatro use and morph these techniques to develop a performance format with a bias toward action that would make sense in their community, and to lead their neighbors, and me, but never more than was absolutely necessary. And I’d like to say this all worked like a watch, but it didn’t; that I slipped seamlessly and forever into the role of dependable Ally in the woodwork, but it wasn’t always that neat and clean. I will continue to struggle with structural aspects of this project that occasionally require my over-determined heavy hand, and to balance the objective, relatively linear needs of science, accounting and project protocols against the variously global needs of the neighborhood, and the affective, more personal needs

appeal and communicated environmental-health content. We’re also designing a second interview guide to structure conversations on the Forum Theatre experience with individuals we’ve identified as community hubs or interfaces — people with power, access to power and/or specialized knowledge pertinent to environmental health who have attended performances or otherwise supported the goals of Project COAL.[31]
of the troupe. These are artists, after all, "acrobats of the heart" when all is said and done, and the source of their craft must be nurtured.

Stepping back from this project, my role as teacher/facilitator, the teatro and its huge collective presence, and all the folks this traveling show has touched throughout the near north side of Houston Texas, I remember I was drawn to do theater for one very Brechtian reason: I wanted to make art that changed people and their real lives, fundamentally. You know, that was a long time back but I think I’ve finally seen it happen. At least a little. And then I remember a statement from the personal interviews we did with each member of the troupe. When we asked "J" to describe how she thought our teatro really affected the community, she jumped up from her seat, stretched her arms out above her head and literally, sang out: "Yeah...it...it made them jump right up like seeing the end of the world!"

Yeah, I’m thinking now, and maybe also, something like a beginning.
Maybe that, too.

John Sullivan co-directs the Public Forum & Toxics Assistance division of the National Institute of Environmental Health Sciences Center at the University of Texas Medical Branch at Galveston. He uses Augusto Boal’s Theatre of the Oppressed in “tox & risk” educational outreach to communities impacted by environmental toxics, primarily — but not exclusively — emanating from the petrochemical industry. He formerly directed Tucson’s Theater Degree Zero and the Theater of Liberation at Seattle Public Theater.

A note about what Sullivan is doing currently (October 2005) in the region affected by Hurricanes Katrina and Rita: “I’ll be visiting environmental action groups our Center previously worked with as well as establishing contact with groups we’ve never met to assess their immediate needs after the storm and help them rebuild capacity to serve their communities. We’re particularly concerned with Superfund site toxics that moved off-site in the flooding & hazardous chemical spills related to storm damage — like perhaps the Dupont DeLisle facility in MS & the Murphy Refinery in Chalmette LA. This part of my work precedes the theater.” —J.S.

Notes:
[1] Over the last 15 years, “de Madres a Madres has served to promote and assist mother-to-mother support for at-risk, predominantly Hispanic women, children and families to create a strong family structure.” The guiding principles of de Madres a Madres are: Hospitality, Personal Dignity, Interdependence, and Empowerment.

[2] Lead is a potent neurotoxin, especially for children younger than age 6. Lead poisoning has been linked to lower I.Q. scores in children exposed to even low levels of lead. Higher levels have been linked to chronic abdominal cramps, headaches, more extreme cognitive impairment, bone abnormalities and problems with red blood cell formation.

[3] This aspect of our Public Forum & Toxics Assistance division uses Theatre of the Oppressed dramaturgy with a special focus on image-making to guide communities with environmental-justice issues in an analysis of risk factors and perceptions, exposure pathways, and specific toxicological concepts such as: bioaccumulation, bio-magnification, differential susceptibility, chronic vs. acute exposures, and more. In the Forum, community actors represent the real-life impacts of pollution on families living near industrial fence-lines.


[5] This term implies a detached, strictly objective utilitarian research relationship between science and communities with no direct application of findings to real community needs. This frame of reference has been eclipsed by Community Based Participatory Research, a reconfigured power dynamic in which communities and scientists collaboratively frame research questions, collect and interpret data, and promote action leading toward necessary
policy change.

[6] "The purpose of Environmental Justice: Partnerships for Communication program is to institute mechanisms to bridge the crucial communication gap [between science and communities] so that the communities involved have a demonstrable role in identifying and defining problems and risks related to environmental health and in shaping future research approaches to such problems." Our Communities Organized Against Asthma & Lead (COAL) project is designated: R25 ES12595; Jonathan Ward, PhD (Principal Investigator) <http://www.niehs.nih.gov/translat/envjust/envjust.htm>

[7] The prototype for our home inspection/signs & symptoms of asthma survey derives in part from the following NIEHS CBPR project: R01 ES011378 — Principal Investigator: James W. Kreiger, M.D., M.P.H. "Healthy Homes II: Environmental and Clinical Asthma Control"


[9] Previous Community Environmental Forum Theater projects have resulted in productive collaborative relationships with community-based organizations such as: Mothers for Clean Air, Citizens for Environmental Justice, Nuestra Palabra, Clean Air/Clear Lake, Community In-Power & Development Association, Unidos Contros Environmental Racismo, Citizens League for Environmental Action Now, TexPIRG et al.


[12] Negotiating the spect-actor interventions was often tricky. The most difficult piece of the Forum for me, as a teacher, is the delicate dynamic among the Forum troupe and each spect-actor. When do you alter your character’s actions in response to new strategies, and how much? And when do you stand fast, refuse to budge? It’s difficult for me to demonstrate that intuition-driven response.


[14] Personal point-of-view images allowed troupe members to “speak” frankly about the practical management of the performance tour, adjustments in direction of the show, cash-flow problems, power imbalances, etc.

[15] Promotoras are para-professional workers employed in bilingual health promotion throughout the Southwest. Our training on asthma and lead topics covered information promotoras would also incorporate into their outreach efforts, but our short sessions were much less rigorous and comprehensive than the actual course given for promotoras certification.

[16] We incorporated the most salient aspects our lead and asthma training into “talking points” that were distributed to each troupe member and discussed at length before we folded these facts into our scenarios.

[17] Loosely translated as “little coffee group.”

[18] YES, NO, or DON’T KNOW responses to questions about lead/asthma risk factors and exposure pathways.

[19] Comments on our asthma scene often touched on the negative connotations associated with asthma and the implications for self-esteem when children carry that diagnosis.

[20] EPA standards for environmental lead include:

- **Dust Hazard:**
  - 40 micrograms per ft² for floors
  - 250 micrograms/ft² for interior window sills
- **Lead Soil Hazard:**
  - 400 parts per million in play areas of bare residential soil
  - 1,200 parts per million (average) in remainder of the yard
- **Lead Abatement Clearance Standards:**
  - 40 micrograms/ft² for floors
  - 250 micrograms/ft² for interior windowsills
  - 400 micrograms/ft² for window trowths
  <http://www.epa.gov/lead>

[21] There are presently no effective intergovernmental mechanisms for inspection of lead-tainted snack foods and pottery. Informal studies in Orange County, Calif., and Houston, Texas, point toward lax quality control as a primary cause of contaminated exports.

[22] Our new members were a most fortunate find. The old troupe collaborated closely in jump-starting their education into the nuances of analytic imagery and improvisation.

[23] With due respect to Augusto Boal, Julie McCarthy & Karla Galvao.

[24] Our new survey incorporated additional data on risks posed by lead and the effects of ozone and other environmental triggers on asthma-susceptible individuals.

[25] The issue of undocumented residents is convoluted, thorny and fraught with injustices. People recently arrived from Mexico or other Latin American countries often need services desperately but are usually disinclined to self-identify as needy.

[26] These products reportedly are recommended for the treatment of empacho (a general...
Spanish term for indigestion, diarrhea, and other stomach and intestinal illnesses) and are primarily given to infants and children. There is some adult use. Azarcon and greta are orange and yellow powders containing lead which pose significant hazards especially to children. Greta, for example, is approximately 99 percent lead oxide. “Rueda,” “Coral,” “Alarcon,” “Liga,” and “Maria Luisa” are also believed to be lead-containing compounds.

[27] Talking to Power is based on an action technique borrowed from Drama Therapy, the “social atom.” Starting from a basic power or ally atom, the “talker” selects the most appropriate “power actor” or “effective ally” from the group, sculpted and arrayed in a social power dynamic. The structure concludes with a dialogue between the “power actor” or “effective ally” and the “talker.” Please drop me an e-mail if you would like a complete description of this structure.

[28] We combined both the “power actor” and “effective ally” aspects of the exercise because an important de Madres a Madres ally with special access to the real-life “power actor” was part of our group.

[29] This two-way, transitive channeling of information, ideas, perceptions and feelings is a relatively unmediated application of Freirean principles and also superbly suitable for promoting unmediated communication among citizens and scientists or health care providers. It’s difficult for me to imagine a better outreach fit for CBPR.

[30] This work-in-progress presentation was entitled: “Evaluating Transformative Effects of Participation in Theatre of the Oppressed (TO): An Analytic Process Using Grounded Theory Procedures.” Dr. Loree Primeau, PhD./OTR (Associate Professor: UTMB School of Nursing) applied the lens of grounded theory to the results of an interview guide we created to gauge the transformational force of TO on individual participants and community audiences.

[31] This community hub aspect of our analysis will inform both the qualitative study of TO efficacy and our formulation of strategies to move public health policy toward, at least, a more just and comprehensive contingency plan for children exposed to high-moderate levels residential lead.

[32] The major exception being Theater Degree Zero’s tour of Victor Hugo Rascon Banda’s “Voces en el umbral/Voices on the Threshold” in 1997. This show enjoyed 19 performances in Arizona, Northern Sonora/Mexico and Seattle; both the company and its director had sufficient time to grow into the show.

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