Part Two: Participatory Communication in Development and Humanitarian Contexts

Photo: An elderly woman engages Forum Theatre actors in discussion during a community show for the "Be a Man" campaign (© Irene Kulabako/HCP Uganda, Courtesy of Photoshare, Uganda, 2006)

Participatory Communication

Participatory communication has been defined as "a dynamic, interactional, and transformative process of dialogue between people, groups, and institutions that enables people, both individually and collectively, to realize their full potential and be engaged in their own welfare" (Singhal, 2003). Participatory communication initiatives create opportunities for people to articulate their views, identify common concerns, and seek solutions from within their community.

The teachings of Paulo Freire, the Brazilian educator and activist, had a major influence on the development of the participatory model. According to Freire, the process of raising questions and engaging in dialogue sparks "critical consciousness," which enables the shift from reflection to action (Freire, 1970). Since participatory communication emerged in the 1960s, non-governmental organizations and community-based groups have led the way in practice and innovation.

Key elements of participatory communication *include:*

- Identification and prioritization of needs, goals, measures of change, and desired outcomes by community members
- A focus on "horizontal" interactions, such as dialogue and exchange (versus "top-down" or "vertical" activities)
- An emphasis on self-representation to promote collective well-being
- A focus on collaborative processes rather than on "products"
- A focus on identifying solutions and positive models of change from within the community, rather than applying examples from outside
- Explicit integration of social empowerment and capacity-building goals
- Recurring cycles of reflection and action

The strength of participatory communication methods lies in their inherent respect for lived experience and local knowledge. The central role of community members ensures that messages and materials reflect the social and cultural dynamics

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Table 1. Development communication approaches and forms

Approaches/Goals	Forms/Channels
Public education and awareness-raising	Mass media (print, radio, television)
Advocacy and outreach	Interpersonal communication (IPC), such as home visits, group discussions, and peer education
"Social marketing," or promotion of specific products using marketing or advertising techniques	Traditional performance arts such as dance, drama, poetry, puppetry, and song
Community mobilization and engagement	Internet, mobile technology, social media, and other emerging media forms
Education entertainment ("enter-educate" or "edutainment")	Popular media (soap operas, songs, comics)
Participatory communication methods	Locally-generated media, including radio, video, and photography

of their daily lives. The resulting locally-specific messages resonate with community members in ways that cannot be produced by non-participatory methods.

Participatory approaches are highly valuable in development communication, or the use of communication to advance social development goals. These goals may include raising awareness around critical issues, improving access to information, increasing the use of available services, or mobilizing people around a common purpose. In most of these cases, communication activities seek to encourage certain changes in attitude or behavior at the individual, family, and/or community level. Related terms include information, education and communication (IEC), information and communication for development (ICD), behavior change communication (BCC), and communication for social change.

Development communication initiatives make use of many different approaches, channels, and forms, often in combination with one another (Table 1).

Effective development communication programs, even those centered on the use of media or technology, often build on existing social networks and traditional channels of communication. Dialogue and direct interpersonal exchange play an especially crucial role in successful communication for social change programs, particularly when they address highly sensitive issues (Cooper and Goodsmith, 2010).

Contrasts between participatory and non-participatory communication

In a highly participatory project, the community members most affected by the program or activity make major decisions about needs, goals, and desired outcomes. Organic, integrated processes ensure exchange and self-representation among concerned individuals and groups. Dialogue is ongoing and directly feeds back into the project's growth. In participatory approaches, the circle of communication is never broken.

Low-participation communication approaches, also called "diffusion-oriented" methods, tend to focus on changing individuals' behavior by sending messages to audiences in a one-way flow. They tend to focus on "products" such as television or radio programs, and may reach large numbers of people within relatively short periods of time. Low-participation, diffusion-based approaches rarely prioritize dialogue and community engagement, or may apply them in a limited or time-bound manner. In contrast, participatory initiatives "focus on community involvement" (Morris, 2000). Most social marketing and "enter-educate" campaigns, which often use mass media, exemplify diffusion-oriented approaches (Waisbord, 2000). While participatory approaches are often used with smaller numbers of people, levels of exposure and involvement are often much more intense than when individuals are passive viewers or receivers of messages.

Fusing different forms

Participatory and diffusion-oriented approaches can intersect. Some programs integrate elements of both. Examples include recording drama performances by community troupes to reach wider audiences, holding group discussion sessions after

Members of the Awareness Theatre Group of the Cambodian NGO Phare Ponleu Selpak perfom a skit addressing women's rights on a train platform in Pursat province. (2006, © Stéphane Janin, Courtesy of Photoshare)

video screenings or radio emissions, or using role-play techniques in peer education and training activities. Some diffusion-oriented projects engage audience members by inviting their responses and ideas through "call-in" components or similar methods. Several recent initiatives use interactive media channels to foster person-to-person exchange and group mobilization; others fuse traditional performance forms with electronic and digital technologies in ways that enable broad, even global dissemination.

Strict lines between participatory and diffusion models may diminish as communication programs draw on their respective strengths (Tufte, 2004). Decisionmaking about communication approaches should be based on analysis of local needs, resources, and constraints as well as the critical issue of sustainability. Above all, program personnel should collaborate with community members to develop approaches that are appropriate, mutually-reinforcing, and enabling.

Participatory communication in action

Participatory communication can take many different forms. Some projects center on performance modes such as drama, dance, or storytelling; others use media, such as radio or video. Many focus on interpersonal, dialogue-based activities. Table 2 identifies several major participatory communication approaches and program examples.

Table 2. Participatory communication program examples

Form/approach	Examples
Participatory drama, including interactive and "forum" theater approaches	DramAidE and Mothertongue (South Africa); Wan Smolbag (South Pacific region); Sistren Theatre (Jamaica); Tuelimishane (Tanzania)
Folk and traditional performance forms, such as song, dance, puppetry, poetry, and storytelling	Phare Ponlue Selpak (Cambodia); Proyecto Payaso (Guatemala); Bibi Bulak (Timor Leste)
Participatory media, including community radio and participatory or community-based video	TV Maxabomba (Brazil); CALANDRIA (Peru); Insight (multi-region); Video Volunteers and Radio Ujjas/Drishti Media (India); Nutzij (Guatemala); Maneno Mengi (Tanzania); Telemanita (Mexico); Through Our Eyes (multi-region)
Participatory photography, including photo-essays and social or personal documentary work	Shooting Back (multi-region); PhotoVoice (multi-region); Kids With Cameras (India); Binti Pamoja (Kenya)
Participatory interpersonal communication, including participatory learning and action (PLA) methods, interactive peer education and training techniques, and various forms of community dialogue	Stepping Stones (multi-region); Tostan (West Africa); Community Conversations (Ethiopia)

Note: For an in-depth discussion of participatory approaches and examples, see *Communication, Participation and Social Change: a review of communication initiatives addressing gender-based violence, gender norms, and harmful traditional practices in crisis-affected settings* (Cooper, Goodsmith, et. al., 2010)

Rx for participatory communication

The following questions can help program staff assess the potential of participatory communication approaches in their social development work:

- Is there a general lack of language-appropriate, culturally-specific materials for local audiences on critical issues?

- Is there a gap in reaching certain groups with important information due to low literacy levels and/or the inaccessibility of available print materials?

- Have current outreach activities (for example, mass sensitizations, health education talks) become repetitive or dull for participants?

- Are certain issues not being adequately addressed through existing activities and forums for discussion?

- Are community members in general not highly invested or engaged in program goals and activities?

- Are current activities maintaining their effect at the level of awareness-raising, without noticeable progress toward changes in local practice and behavior?

If the response to any of these questions is "yes," then it is very likely that participatory communication approaches can help revitalize community engagement and advance program goals.

In the case of Through Our Eyes, the American Refugee Committee (ARC) and Communication for Change (C4C) saw participatory media as a valuable addition to existing sensitization and outreach activities. Even more importantly, they felt that participatory video could help break through the silence that surrounds gender-based violence.

Special challenges in social change communication

As noted, most communication activities supporting health and development goals encourage certain changes in attitudes and behaviors at the individual and/or collective level. Some changes will be relatively easy to promote, particularly when people see them as having clear, immediate benefits to themselves and their family. Such aims may include increased use of maternal health services, taking measures to ensure access to clean drinking water, or monitoring children's nutritional status.

Efforts to address practices that are deeply rooted in cultural attitudes and beliefs face the greatest challenges of all.

Other objectives, such as uptake of family planning or voluntary counseling and testing services, can be more complex to promote because of local sensitivities and attitudes around issues of fertility and family size, sexuality, and gender/power dynamics between partners.

Communication efforts to address practices that are deeply rooted in cultural attitudes and beliefs face the greatest challenges of all because of the links between individual decision-making, behavior change, and social change within the wider community.

Addressing gender-based violence, harmful practices, and HIV/AIDS

Creating change around gender-based violence, harmful practices, and HIV/AIDS is complex because these issues involve private behavior, societal perceptions of gender, sexuality and identity, and underlying power relations. To be effective, communication efforts must take into account the highly sensitive nature of these issues, the way people make decisions, and the influences that affect them (Izett and Toubia, 1999). For example, consider a parent who learns about oral rehydration solution (ORS). The parent who sees its benefits will probably decide, without much difficulty, to adopt this behavior. Severe diarrhea has distinct symptoms and can swiftly lead to death. Children's health is an issue that people are likely to discuss openly. The parents' decision to provide ORS will probably receive support from others in the community because many people prioritize better health for children.

In contrast, consider the example of a parent who learns that early marriage can have harmful effects—that pregnancy and childbirth are dangerous for a girl whose body is not yet fully developed. As a result, this parent may decide that it would be better for the daughter to marry later on, and to continue her schooling in the meantime. However, a spouse or older relative may insist on the girl being married very young, because it is the accepted practice—a way of preventing out-of-wedlock pregnancy or

Sudanese refugee women listen to a weekly women's empowerment class in Touloum camp (2008, Chad, © Micah Albert, Courtesy of Photoshare)

ensuring a daughter's future. There may be economic motivations as well, such as the offer of bride-price. Further, there may be very little support in the wider community for girls' education. Because of all these factors, the parent may find it hard to prevent an early marriage from taking place.

Most forms of gender violence and harmful practices affecting women and girls are similarly rooted in cultural attitudes or conditions of inequality in their communities. For these reasons, it can be difficult for one person to make a change on their own, even if they wish to. Social change around these issues begins with individuals, but must involve the community as a whole. This is why critical consciousness-raising, dialogue, and reflection within and across different groups are so important to the process of communication for change.
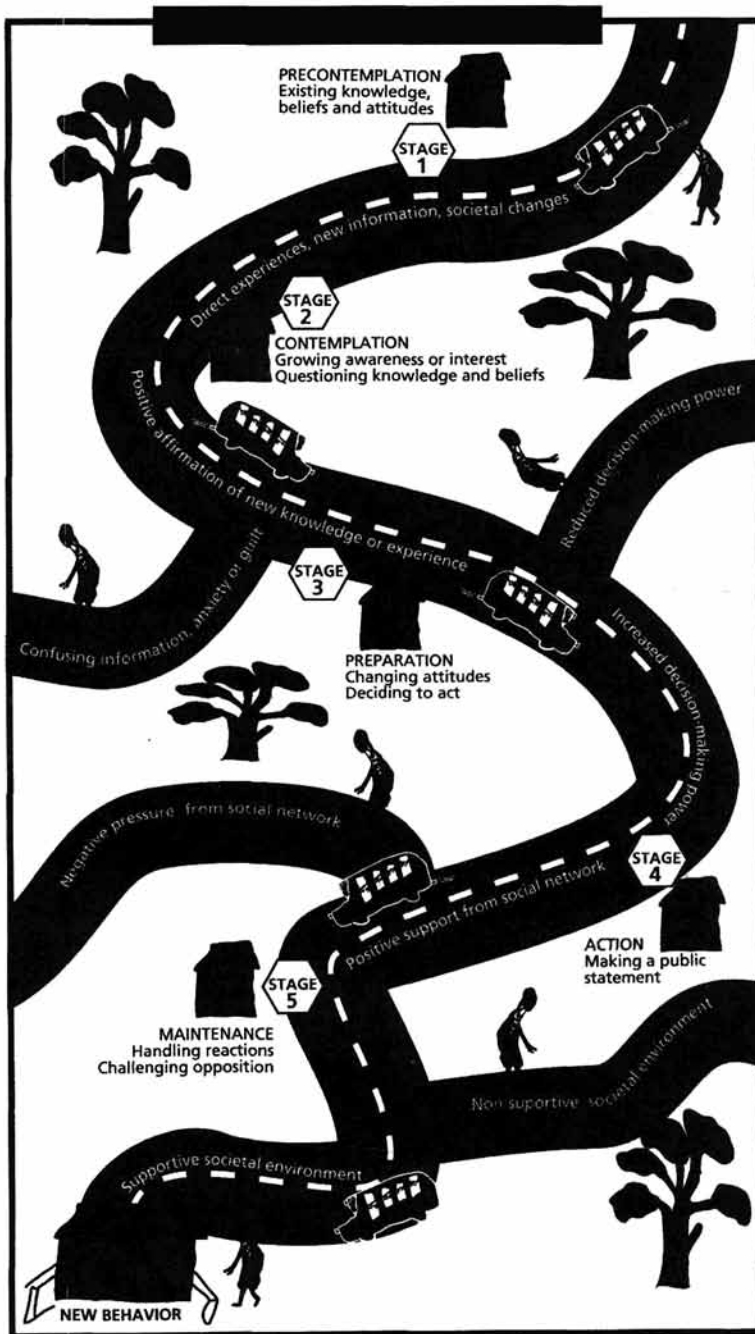
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Adolescents participate in a DramAidE forum theater performance at a high school in KwaZulu-Natal province, which has the highest HIV/AIDS prevalence in South Africa. (2000, © Patrick Coleman, Courtesy of Photoshare)

The field of health communication has developed many theories of how behavior change takes place. One important theory, the "stages of change" model, states that people move along several stages as they progress toward change (Piotrow, Kincaid et al., 1997). (See **Part 7, Monitoring and Evaluation** to learn more about theories of change.) (Figure 2 depicts the process of change as a winding road.

Signs and potential detours reflect the internal and external factors that can support and constrain an individual's progress. This model is especially valuable because it views personal behavior change in a social context.

Figure 2. Road to Individual Behavioral Change

PRECONTEMPLATION
Existing knowledge, beliefs and attitudes

STAGE 1

Direct experiences, new information, societal changes

STAGE 2

CONTEMPLATION
Growing awareness or interest
Questioning knowledge and beliefs

Positive affirmation of new knowledge or experience

Reduced decision-making power

Increased decision-making power

STAGE 3

Confusing information, anxiety or guilt

PREPARATION
Changing attitudes
Deciding to act

Negative pressure from social network

STAGE 4

Positive support from social network

ACTION
Making a public statement

STAGE 5

Non supportive social environment

MAINTENANCE
Handling reactions
Challenging opposition

Supportive societal environment

NEW BEHAVIOR

Source: Izett and Toubia (1999). Learning About Social Change: A Research and Evaluation Guidebook Using Female Circumcision as a Case Study. New York: Rainbo.

During the precontemplation stage, many individuals are unaware of the problem. Their views have been largely shaped by prevailing social and cultural attitudes. Experience or new information can help them become aware of the need for change, and move into the contemplation phase. At this stage, they might begin to question long-accepted attitudes or cultural practices and consider taking action. Ambivalent feelings or confusing information can keep people from advancing, while positive support for their new knowledge can help them move ahead to the preparation stage. At this point, they have the intention to change, and they make plans to do so.

As people gain confidence in their ability to make decisions and embrace change, they advance to the action stage. In this phase, they adopt the new behavior, or discontinue the practice that they have come to see as harmful. They may continue to encounter obstacles due to social pressure and other factors, and can benefit from the support of others who seek to make similar changes. In the maintenance stage, people are able to maintain the change in behavior or practice consistently. Individuals who have reached this point have high levels of self-efficacy, and may seek to actively promote change in their community (Izett and Toubia, 1999).

Change is not a linear process, and individuals and their communities can affect each other's behavior. By kindling awareness, reflection, dialogue and action, participatory approaches, including community video, can help individuals and communities move from one stage of change to the next.

Tipping the scales of social change

Female genital cutting/mutilation (FGC/M) has been practiced in many parts of Africa for centuries. Although it has negative effects on girls and women, it is a deeply-rooted tradition that can be very difficult to address.

Tostan is a Senegal-based organization that has provided non-formal education and skills training for rural women since 1991. The Tostan program combines literacy with practical and life skills. Hygiene, health, and human rights are also important themes of the program.

Ending female genital cutting/mutilation was not an original goal of Tostan's work. Most women would not even discuss it during sessions on women's health. But as women learned more about human rights and health problems related to female genital cutting/mutilation, they began to discuss it outside the sessions. Many became convinced that it was unnecessary and harmful. Eventually, residents of one village decided to stop practicing it. But they took it a step further. They visited nearby communities and encouraged them to follow their example. As a result, a group of 13 villages joined together to publicly declare that they would no longer practice female genital cutting/mutilation or insist that their sons marry girls who had undergone it. More than 1,000 Senegalese villages have now taken part in public declarations to end the practice, and Tostan has expanded its programs to several other African countries.

Tostan's work shows that learning, dialogue, and outreach can lead to shifts in cultural norms. The villages' public declarations against female genital cutting/mutilation marked the "tipping point" at which a critical mass of people changed their views and influenced others to change as well.

(Sources: Population Council, 1999; Feldman-Jacobs and Ryniak, 2006)

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