Stories-without-an-ending: an adult education tool for dialogue and social change

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Grandmother Project – Change through Culture
Overview of presentation

• Grandmother Project - Change through Culture
• Revisiting strategies used in MCHN programs:
  • Who should be involved?
  • What type of change do we want to promote in communities?
• Chapter 1: Behavior Change or Social Change?
• Chapter 2: Promoting Social Change in Collectivist Cultures
• Chapter 3: Adult Education Methods to Promote Social Change
• Chapter 4: Developing and Using SWE
• Q & A
Grandmother Project – Change through Culture

• 4 pillars of the approach
  • Culture is the foundation of all community programs
  • Acknowledging the role and explicitly involving the elders, especially the grandmothers
  • Promoting communication between generations and between the sexes
  • Using communication/education approaches based on dialogue to encourage consensus-building
MCHN program planners have critical choices to make

• Which community actors should be involved?
• What type of change do we hope to see in communities and what approaches can best promote that change?
• Which community actors should be involved in MCHN programs?
Grandmothers are an abundant and underutilized resource for MCHN programs.
Focus on Families and Culture: Understanding family roles and influence to develop culturally-grounded and effective community nutrition interventions
• What type of change do we want to promote in communities?

- Improvements in health behaviors and health status?
- Increased capacity and confidence of families and communities to critically analyze problems and take action to solve them?
Recent study: *Time to Listen (2012)*
Anderson, Brown & Jean
CDA Collaborative Learning Projects
Cambridge, Massachusetts

- 2006-2012 → First major study to investigate *community perceptions of international aide programs*
- 6,000 interviewees in 20 countries
- Interviewees: had been involved in programs in various sectors and implemented by different organizations
Findings of the *Time to Listen* study:

- All interviewees expressed gratitude for the aid/support received.
- A large majority of respondents said that the cumulative effect of development programs has been negative.
  - Increased *a sense of dependency & passivity* on the part of communities
  - *Programs focus on problems*, needs, weaknesses and ignore community knowledge, strengths and capacity.
  - The *community capacity building rhetoric is not translated into action*.
  - Most *programs are expert-driven and top-down*.
  - *Very limited community participation* in decision-making.
Objective of GMP’s work and of the Stories-without-an-ending (SWE) is to:

- improve health behaviors and health status
- build community confidence and capacity to critically analyze problems and to take collective action to address them
What type of tools are needed to build community confidence, capacity, empowerment to address issues/problems related to MCHN and other aspects of family and community life?
• Many tools used in MCHN programs are based on concepts from the field of communication → how to get a message across.
SWE methodology draws on concepts from:

- **Adult education**: starting with and building on people’s experience
- **Community development**: building on community assets, knowledge, roles; collaborating with community leaders to empower them to catalyze change in the wider community
- **Anthropology**: the importance of collective decision-making in collectivist cultures to bring about change
- **Ecological models from Public Health**: importance of promoting change in social norms which requires a collective consensus-building process
Chapter 1: Behavior Change or Social Change?
• Women are embedded in a socio-cultural context
• There needs to be change in that wider social environment to enable them to change.
• There needs to be normative change, i.e. change in social norms
Choosing an approach to promote change
Table (page 14) summarizes two contrasting approaches

• Expert-driven approach to behavior change
• Community-driven approach to empowerment for social change
Alternative approaches to promote change in communities

**Expert-driven approach to promote behavior change**

- Communities are target groups, beneficiaries, audiences

**Community-driven approach to promote empowerment for social change**

- Communities are actors, partners
Alternative approaches to promote change in communities

**Expert-driven approach to promote behavior change**
- Use of messages to persuade, convince community members to change

**Community-driven approach to promote empowerment for social change**
- Use of dialogue and problem-solving to share information and catalyze critical reflection for consensus-building for change
Alternative approaches to promote change in communities

**Expert-driven approach to promote behavior change**

- Objective: to change individual knowledge, attitudes and behavior

**Community-driven approach to promote empowerment for social change**

- Objective: to change social norms
Alternative approaches to promote change in communities

<table>
<thead>
<tr>
<th>Expert-driven approach to promote behavior change</th>
<th>Community-driven approach to promote empowerment for social change</th>
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<tr>
<td>• Activities/materials: convey key messages</td>
<td>• Activities/materials: elicit dialogue and problem-solving</td>
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Alternative approaches to promote change in communities

**Expert-driven approach to promote behavior change**

- Fosters a sense of dependency on expert advice

**Community-driven approach to promote empowerment for social change**

- Fosters a sense of confidence in community capacity and empowerment
Program planners must make choices regarding:

• What changes they hope to bring about in communities?
• What are appropriate strategies, methods, tools to use to bring about that change?
GMP and the SWE methodology explicitly aim to both:

• improve health behaviors and health status
• build community confidence and capacity to critically analyze problems and take collective action to address them
Chapter 2: Promoting Social Change in Collectivist Cultures
Promoting social change in collectivist cultures

• “Taking the cultural context into account”
• Anthropologists have categorized cultures on a continuum: individualist – collectivist
• At least 70% of cultures in the world are collectivist (Africa, Asia, Latin America, The Pacific, non-western communities in the Global North)
• Do MCHN programs sufficiently build on the characteristics/structure of collectivist cultures?
Onion model

Helman, 2001, Culture, Health & Illness
Impact of collectivist culture

• It is very difficult for individuals to go against the opinions of the group.

• The group provides support to the individual.

• For social norms to change, there needs to be group consensus.
“The change process itself needs to be collective”.

Ntseane, Adult Educator
Botswana, 2011
GMP’s work and SWE tool

• Purpose of the tool: to catalyze discussion within peer groups and between peer groups in order to build consensus for community-wide change
Chapter 3: Adult Education Methods to Promote Social Change
Adult education principles

• All adults have experience.
• Educational activities should be based on their real-life experiences.
• They should challenge them to reflect on their experience and knowledge while considering new info to determine if/how the new info can be incorporated.
Paolo Freire (1921 – 1997)

• *Banking approach* and *problem-posing approach*

• Problem-posing codes \(\rightarrow\) SWE reflects that idea.

• He proposed group dialogue as a basis for:
  • collective solving problems;
  • for increasing collaboration/solidarity for action.
Chapter 4: Developing and Using Stories-Without-an-Ending
Description of a SWE

• The SWE deals with an issue/problem of concern to communities and/or to development programs.

• The SWE describes a real-life situation that is easily identifiable to participants.

• There are two characters who have contrasting viewpoints on the topic to be discussed (one more “traditional” and one more “modern”).

• In the dialogue between the, each one defends his/her position until the story ends.

• Discussion of the SWE is facilitated using a series of pre-prepared, open-ended questions.

• At the end of the discussion participants are encouraged to share the story and continue discussion of it with those in their families and neighborhoods.
Developing and using SWE with community groups

Phase I: Collecting information from community members on the issue to be addressed in the story

Phase II: Writing the problem-posing story and open-ended questions

Phase III: Presenting the story to a group and facilitating the discussion
• Step 7: Write the problem-posing story
• Step 9: Formulate a set of open-ended questions based on the experiential learning cycle.

• “I Can’t Imagine My Life Without Ba Mariama”
Step 11: Facilitating a group session to elicit discussion of a SWE

• Requires group facilitation skills.
• Training probably required to strengthen the listening, questioning and group management skills.
• The structure of the story and the questions “structure the behavior of the facilitator”.
• Chapter 4 contains many tips on the presentation of the SWE and facilitation of the discussion.
• Step 12: End the session: The session is over but the story has not ended

  • Encourage participants to share the story and to continue the discussion with others in their families and communities.
“The SWE methodology captivates participants to discuss an issue with which they are familiar. Compared to many approaches, nothing is imposed on them. People are asked to weigh the pros and cons of alternative behaviors. Many other methods impose ideas on people rather than making them think critically about their options. With these stories people don’t feel frustrated or criticized for their past beliefs and it makes them want to change.”

Mamadou Sow, Teacher & Facilitator with GMP
Thank you

www.grandmotherproject.org