

# **Experiences with Stepping Stones in the Volta Region, Ghana**

## **Teun Bousema**

### **1. General idea**

Stepping Stones is an educational package that uses workshops to stimulate an open discussion in the community. Although it is described as a programme about HIV/AIDS, topics are far broader. It deals with all topics that are in some way related to relations and sex. Discussion groups are small and in peergroups: young men, young women, older men and older women. The program consists of 20 meetings. Most of the meetings are in peergroups of 10-25 people. Each peergroup has its own discussion leader. In the meetings several topics are discussed using video-clips, games, plays and discussions. Plays are introduced because drama has been shown to be an excellent way of expressing feelings in African communities. On two occasions all peergroups joined to look at each other's plays and discuss each other's ideas. The last meetings worked towards the final open community meeting. In this meeting everything that was learned during the previous months was shared with the entire community.

### **2. The village of Logba Tota**

Logba Tota is a village in the Volta Region in Eastern Ghana. It is situated on top of a mountain close to the border with Togo. The nearest road is about 8 kilometres away and there is little contact with the outside world. Close to Logba Tota there are a few settlements in the bush. Logba Tota has about 1400 inhabitants, the small settlements about 900 in total. The workshops were planned for the village of Logba Tota but were open to everybody. On several occasions people from the other settlements joined the workshops. Over 90% of the population is farmer by profession. This created some difficulty in planning the right time for the workshops to be held. There was a very busy yam (local potato) season that made workshops in that period impossible. Another time-factor that posed some difficulty was the local market. On market days all adults were absent. These two problems were taken into account in planning the workshops and therefore did not result in any absence. Occasional funerals made it necessary to postpone some meetings.

The population of Logba Tota is quite highly educated. The village has about 70% literacy which is high for West-African standards. Perhaps this was why the community was very much aware of the need for health education and especially education about HIV/AIDS. Before the Stepping Stones program started, there had been no education on this topic apart from sexual education at Junior Secondary School. Health education will become better now a health centre is functioning in the village. This health centre was built in the same period as the workshops were being held. Together with a health survey, these projects were part of the Logba Tota Health Project, headed by three Dutch volunteers.

### **3. The training of facilitators**

Of course, few people spoke English fluently and it was impossible for me to learn the local dialect up to such a level that I would be able to lead workshops in this language.

After consulting the chief, volunteers were chosen to help me with the workshops. Ideally, one facilitator per peer group would have been enough but I chose to double the number of facilitators for two reasons. First it would be possible that I would lose some people along the way. Especially young people tend to travel a lot and without prior notice. Secondly it could be easier for the inexperienced facilitators to have some help during the workshops. Both reasons turned out to be true. One young woman fell sick during a journey and missed two workshops and despite clear rules about attending all workshops, a young man missed two thirds of the workshops because of travelling. In the older age groups, the facilitators appreciated each other's help. The training started with some general advice on how to speak in public, how to lead discussions and how to motivate the participants. After this, we worked through all the items in the thick Stepping Stones manual. We did this in morning sessions and afternoon sessions. In every session one couple of facilitators led us through a workshop. The rest of the group did not have a manual and attended the workshop. This turned out to be an excellent test to see if it was possible to explain exercises. Furthermore, we saw examples of every exercise and every discussion. This gave an idea of how an exercise should or could work out. Dealing with the Stepping Stones manual turned out to be difficult, especially for the older facilitators. Their English was sufficient but not very good and it was difficult to tell things in their own words, regardless of whether that language was English or the local Logba dialect. It was considered useful to make an extra booklet that gave examples of how exercises turned out during the training, what the general idea of the exercise was and what difficulties could be expected.

Some exercises in the original manual did not work at all. Either because there was not enough discussion elicited or because the situation in Logba Tota turned out to differ too much from the situation in Uganda, where Stepping Stones was developed. This was especially true for the section 'Traditions'. Traditions differed from the Uganda situation and we made a new exercise using local traditions and examples.

After the training, a booklet of 30 pages was made, printed and handed out to the facilitators as extra help. Two statues were made by a woodcarver for condom demonstrations. The general idea was that these demonstrations should be as clear as possible. After an example from The Gambia, two male figures with life-size penises were carved and used during condom demonstrations.

#### **4. The first community meeting**

The workshops started with a community meeting to which everybody was invited. This meeting was announced in other meetings and church services. During the first community meeting, the Stepping Stones idea was explained and the facilitators were introduced. Everybody was invited to join the workshops. Those interested in attending the workshops were asked to go to the facilitator for their peer group and write their name on the list of participants. In case the people were unable to write, the facilitator assisted. The initial response was rather low. Especially young people were not present at the community meeting, perhaps because these meetings are traditionally held at 6 a.m. The facilitators for the young men and young women recruited more participants in bars and other places where young people meet. After a few days the number of

participants was found to be sufficient to start the workshops. All participants were invited to the first workshop.

## **5. The workshops**

Every week two workshops were held. The headmaster of the Junior Secondary School agreed that his classrooms could be used after school time, 2 p.m. This was the ideal time because all the attendants were working at their farms during the morning. The attendance was highest in the young men and young women groups (average attendance 28 and 24). In the older age groups the attendance differed per workshop despite the rule that people were to attend every workshop. Attendance ranged from 12 to 20 persons. The older men and women combined their groups on some occasions. Over 100 persons attended one or more workshops. Over 80% of the attendants were present at every workshop. The workshops that dealt with sex raised a lot of questions. I have been present near the school campus during these sessions to answer all questions. The knowledge about sexually transmitted diseases in general, infertility and impotence was minimal.

The Stepping Stones video was extremely useful in discussions. People found it very easy to refer to examples they had seen on the screen. After people had seen examples of men spending all the family's money in the pub and of men forcing women to have sex, discussions about similar situations in daily life were easier. In general the games and drama worked fine. Participants were sometimes a bit shy in acting out plays but this improved after a few workshops. Frozen images were a good alternative. Such a frozen image was for instance used in a meeting about hopes and fears about the future. Female participants showed an image of a woman in need of money. Five children were begging for money and she had her hands on her head, not knowing what to do. After this image, the participants showed another image. Now of a better situation. A woman with only three children. She had just enough money to get them through school and the image shows a happy family. Discussion on how to achieve this better situation followed.

## **6. The final community meeting**

During the final open community meeting all groups performed plays to express their concerns about topics in their community. Members of the four peer groups were allowed to choose a topic they would like to discuss. Because overlap was suspected, every group was asked to choose two topics. After consulting the other peer groups, one was chosen. The topic was presented by means of a play and a clear We-statement in which the group mentioned their ideas and wishes. The We-statement had been practised in previous workshops and was found to be extremely useful in expressing wishes and concerns in a non-aggressive way. People learnt to express their feelings in the following way (central words are presented in italics):

*When you spend a lot of money in the palmwine bar, I feel unhappy because I feel we need money for paying the school fees. What I would like is that you would discuss the best way of spending our money with me.*

Every group performed a play and gave a We-statement followed by a discussion with the audience.

### **Puberty Rite**

The older women came up with a ritual that is common in the Ewe tribe and is performed before a girl reaches the age of marriage (normally 18-25 years). A woman is not allowed to have sex before the rite is performed. If she gives birth to a child before she has performed the rites, she loses respect and in the old days she was expelled from the tribe. Now it is only a disgrace for the girl and her family. During the rites a church service is held in honour of the girls and the entire day is full of festivities. The girl has to buy a lot of nice cloths and perfumes as gifts for herself. A lot of friends are invited to celebrate the moment.

Originally, this ritual did not cost very much money and every girl performed this 'puberty rite' at the age of 15-18 years. Prices have gone up. At the present it is very difficult to find the money to buy all the necessary gifts (minimum of 10 pieces of cloth and 5 bottles of perfume). The costs can be as high as an average year wage. Therefore it is impossible for a girl to earn enough money to have her rites at the age of 18. Most women perform their rites when they are 25 to 30. Many already have children. To minimise the disgrace for the family, it is important to do the rites as soon as possible. Easy money for women is earned in the same way as everywhere in the world. Young women leave the village to earn money by means of prostitution in cities like Accra and Ho. What was supposed to be a happy start of adult life has turned into a reason for prostitution. Beside all other negative effects for the girls, there is also a risk of contracting HIV/AIDS or other sexually transmitted diseases.

The older women performed a play in which a young girl leaves Logba Tota and goes to Accra. She is looking for a job to find money for her puberty rites. She is turned down in many stores and eventually is forced into prostitution by a white tourist. She becomes infected with the HIV virus. In a so-called 'We statement' the women expressed their wish to change the original rite. The costs should be lower and people should return to the original idea of a nice festivity for the young girls.

### **Alcohol use.**

The young women thought alcohol use was a thing that needed attention in Logba Tota. The use of alcoholic beverages is a problem in many countries. In developing countries this problem tends to have a big impact on the family situation. Money has to be saved for hospital costs and school fees. If a husband is addicted to alcohol, the money he earns very often does not reach his house but is spent in a bar on the way from work to home.

In Logba Tota, many people drank large quantities of alcohol. The farming community works from 6 am till 11 am and after this many men go to the palm wine bars that are numerous. Here they drink palm wine or a local gin called appeteshie. Although these drinks are affordable, many women expressed their concerns that money is spent on alcohol while it should have been spent on school fees and medical costs. Beside the financial consequences alcohol use can give rise to another problem. Men are very often drunk and this may result in domestic violence and harassment of women. Children and

wives are beaten and wives and other women are forced to have sex with the drunk men. Even in voluntary sex, it may lead to riskier sexual behaviour. When intoxicated, you may care less for protection and unwanted pregnancy and sexually transmitted diseases may be the result.

The young women performed a play in which a girl was raped by a drunk man. They expressed their concerns about alcohol use in the village. All the money should be brought home and be spent after discussing the family's needs with the wife. Men should stop drinking too much because this may result in rape or at least in risky sexual behaviour. If you are drunk, you may forget a condom when having sex and this is dangerous if there is a disease like HIV/AIDS all around you.

### **Widow Rite**

Like the older women, the older men were concerned about a tradition. If a man dies in the Ewe tribe, the woman is not allowed to marry again until she has performed the so-called 'widow rite'. The woman has to have sexual intercourse with a stranger before she can marry again. This rite is to be performed at a major event. A wedding or someone's funeral are common occasions for this purpose. The village elders decide when the woman is to have sex with a stranger. When this is announced, the woman has to accept the first man who comes up to her. He can decide when, where and how they will have sex. Of course the 'how' is not always the safest possible way. Beside the obvious risk of transmitting diseases, the rite is commonly seen as particularly unfriendly to women and old-fashioned.

The older man acted out a play in which a man dies. The wife has to sleep with a stranger. She is unable to resist and is practically raped. The man turns out to be HIV-positive. In a We-statement, the older man expressed their wish to abolish the rite completely.

### **Condom use**

The young men chose to draw the community's attention to the difficulties of using a condom. Women very often think it may make them infertile. The condom frequently gets lost inside the woman's body and may cause damage, so they think. Furthermore, the use of a condom is an expression of doubt. Doubt about the partner's faithfulness or the man's own HIV-status. Because of these factors a girl often turns a boy down when he proposes to use a condom. The young men used their time to explain to the community how a condom works and how you should use it. They mentioned that there is no danger of infertility or impotence because of condom use and in the dangerous time of AIDS, it is better to protect yourself in all cases.

The young men acted out a play in which a boy comes home after a long journey. He has not seen his girlfriend for a very long time and wants to make love. Although he has been faithful during his absence, he proposes to use a condom. The girl thinks this means he has had other sexual partners during his journey and turns him down. After explaining the risk of HIV, the girlfriend changes her mind and they end up happily in each other's arms.

## **7. The results of the open community meeting.**

The final open community meeting started with a short game in which all people got a note they weren't allowed to read. Ten percent of the people had a note with a + (indicating HIV-positive in the game), 90% had a - (indicating HIV-negative in the game). Each person shook hands with two or three other people and sat down. After the shaking of hands, everybody had to read their note. If there was a + on the note, they had to come forward. They were the HIV-positives in the game. Then the people who had shaken hands with them had to come forward. They were the people at high risk because they had had 'sexual contact' with the HIV-positives. Then the people who had shaken hands with these people. These were at a lower risk but could have been 'infected' during the game. In the end, the majority of the 300 attendants were somehow 'at risk'. It worked well to indicate the real danger of HIV/AIDS. Especially since a realistic percentage of HIV-positives was chosen.

After this game a short lecture was held about HIV. Many questions came from the audience. Too many to deal with during the meeting. Therefore we have arranged for six more Stepping Stones meetings in which new people can learn about the different topics. We also arranged two more open community meetings about HIV and about condoms.

### **School lessons**

Many people thought that the age limits were too strict. This was already mentioned in the first open community meeting. The public and especially the village elders and the chief thought that children in the age-group 12-15 years should have extra attention. After the final open community meeting a few facilitators and two teachers at the Junior Secondary School gathered to find a solution. A few topics were chosen from the Stepping Stones manual that would be suitable for this age-group. The general idea was that children should know something about HIV and condoms. We chose to make it a bit broader and also discuss your idea's about sex and relations. In this way it also became a discussion about 'when to have sex' and not only 'how to have sex'. Two facilitators were chosen to give the lessons as part of science classes.

### **Condom distribution**

During the workshops, it became clear that it is very difficult to obtain condoms in Logba Tota. Condoms are sold in a village nearby but that is an 8 kilometre walk through the bush. The only registered place in Logba Tota where condoms are available is the pharmacy. The owner of the pharmacy has her own policy of selling condoms. If she thinks a person is too young or suspects somebody of having a partner outside of marriage, she does not sell the person condoms. She answers the customer that they are sold out. With a population of 1400 inhabitants, only 4 to 10 condoms were sold per month. Although Stepping Stones is not about distributing many condoms as possible, the general opinion was that this should change.

The problem would be over as soon as the health clinic was functioning since this would be a new place to buy condoms. At the time this problem came up, the opening of the

clinic was still 6 to 8 months away. After consulting the chief, the royal families and village elders, an interim solution was found. The local authorities agreed that one girl and one boy were allowed to sell condoms at different locations in the village. They were rather surprised that the condom sales were that low and were very eager to improve the situation. In the first month the system worked, over 400 condoms were sold.

### **8. The plays and their impact**

The plays at the final community meeting were about puberty rite, widow rite, alcohol use and condom use. The way the problems concerning condom use were dealt with is discussed above. The availability was improved, extra lessons were offered to the general public and children in the age-group 12-15 years. The open community meeting itself was already very useful since people of all families and ages talked about the problem quite openly. Only the fact that the village elders used the word *condom* and expressed the benefits they see in using it, should make it easier to discuss their use in relations.

Alcohol abuse is very difficult to deal with. It is something that is beyond the aims of the original workshops. The only way in which the Stepping Stones program may have helped solving the problems is by means of opening discussion. During the workshops many problems came up. Stepping Stones created an atmosphere in which all problems could be discussed. From sexual uncertainties to child-beating and alcohol abuse. This is an enormous improvement and gives hope for future developments.

Traditions seemed to be less difficult to deal with than expected. People generally believed that traditions are very important. It is a way of respecting your ancestors. But if a tradition does not work anymore, like the puberty rite, it should be changed. The general idea was that the Puberty Rite is a good tradition but it has become too expensive. Therefore the rules should change. It should not cost as much as it does nowadays. A meeting was arranged for the time after my return to Europe. Together with the local authorities, some people from the workshops wanted to discuss their proposals to change the rite. I thought it was a good idea to do this without interference of a European. It is the tradition of the people from Logba Tota and there is always a danger that people accept a 'Western idea' without fully agreeing with its contents. The same discussion will be held about the Widow Rite with the remark that some people feel that this tradition should be abolished rather than changed.

### **9. Follow up**

The material that was used during the workshops is donated to the health centre. One local co-ordinator will make sure that workshops will continue in the future. Together with the nurse in charge, ways will be studied in which the material can be used best. The organisation ActionAid Accra will be involved in the follow up and will stay in touch with the co-ordinator in Logba Tota.

ActionAid Accra is an organisation that has experience with the Stepping Stones approach. They have organised workshops in several parts of Ghana but never in the

Volta Region. The workshops in Logba Tota were the first in this area. ActionAid Accra will do some follow up workshops in this village and will use the booklet that was made to adapt the material to the local situation. Workshops will be held in other parts of the Volta Region. Money for these future workshops comes from funds raised in The Netherlands. There has been personal contact with Juliana Gyanwa Adu Gyamfi and a contract has been made to arrange future work. ActionAid Accra will report their progress to me.

## **10. Acknowledgements**

Two types of help are essential for successful work: advise and financial aid. In the time I was preparing the workshops, I received support from Dr. Matthew Shaw working in the same field in The Gambia and Dr. Linnea Renton supervising projects like these world-wide. In Ghana, it was good to know that my work will continue in my absence. I thank Juliana Gyanwa Adu Gyamfi of ActionAid for taking care of that. Of course Charity, Mabel, Solace, Kriss, Frank, Proffit, Mawuli and Obo deserve credit for the success of the workshops in Logba Tota. I enjoyed working with these enthusiastic facilitators and hope they have learned as much from our collaboration as I have.

Financial support came on an individual basis and from some funds. I would like to thank Stichting Katholieke Noden in Hilversum for their contributions as well as Carmel College Salland and the Protestant Churches in Raalte. The money the medical student group Ferus Ebrius has kindly provided for my work will be used for the future workshops.

Contact: [teun\\_bousema@hotmail.com](mailto:teun_bousema@hotmail.com)