

Theater and Sexuality
A Proposal for Adolescent and Young Domestic Workers

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Presentation

The present publication “Theater and Sexuality: A proposal for Adolescent and Young Domestic Workers” demonstrates the experiences and results obtained during the execution of the project “Sexual and Reproductive Education in Lima Night Schools (2007-2009)”.

This project is a cooperation between the Asociación Grupo de Trabajo Redes (AGTR) and the Group of Finnish Women Naisten kehitysapu, part of the Naisialiitto Unioni (Feminist Association Unioni).

Naisialiitto Unioni, founded in 1892, is a feminist NGO whose primary objectives include women’s advocacy, eradicating gender discrimination in hopes of securing a civil society based on equality and tolerance.

AGTR, founded in 1989, is an NGO that has as its primary objective “defending, with their own participation, all the rights of those who have the legal age to work in domestic service, as well

as preventing the insertion of minors within this line of work as outlined by Peruvian Law; all this without neglecting others who are excluded”.

The two organizations have been collaborating since the foundation of AGTR, which has brought along an appreciation for both of our cultures, strengthened by continuous communication and the constant presence of Finnish volunteers. The realization of this and other previous projects have been possible with the support of the Ministry of Exterior Affairs of Finland.

The project Theater and Sexuality is a pioneering one due to its methodological proposal developed by Ágata Zumaeta. The main idea of this method is to not exclude the spectators from the theatrical presentation, but that instead they interact with the protagonists of the dramatization and in this way are involved in the decisions made by the domestic worker represented in the dramatization. The dramatizations discuss topics difficult to take on in conversation and do so in a way that adolescents can recognize situations they've faced in their own lives.

The methodology used in this project is based upon Paulo Freire and Augusto Boal's proposals. Thanks to these, the project has been able to deal with sexual and reproductive health in a participative, creative and appropriate way for the realities faced by domestic workers and other adolescents the majority of which are migrants, or children of migrants, who study in the Centers of Alternative Basic Education (CABE)¹ in Lima.

In “Theater and Sexuality” we can see the conditions in which domestic workers and other CABE students in Lima—who are vulnerable groups in Peruvian society—are taught. The Alternative Basic Education Program does not have the same resources the Regular Basic Education Program has. That is why the collaboration between an NGO, school authorities and teachers in CABE is very important in order to improve the attention given to students not only with issues like sexual and reproductive health but other issues with which a child's formation is based upon.

The testimonies given by teachers and students indicate that the information was given in an accessible and entertaining way, was of great value and useful. I hope you will share the book, DVD and four brochures with supplementary information with colleagues, family and friends. I also hope that the publication “Theater and Sexuality” can serve as motivation for other organizations to apply this method as a pedagogic tool for different issues.

On behalf of Naisasialiitto Unioni—Naisten kehitysapu I want to thank the excellent work carried out during these past three years of execution of the project and hope that we can continue with this experience in the future.

Helsinki, June 2009

Veera Bloomster

¹ In Spanish: Centros de Educación Básica Alternativa (CEBA).

1 Some Reflections on the Living Conditions of Adolescents and Young Domestic Workers

1.1 A Marginalized Sector

In Peru, domestic workers are part of one of the most marginalized groups in our society.² They are women who in general work without respect for the rights they have under law.³ They usually suffer discrimination, exploitation and abuse on a daily basis, situations that become hard for them to escape.⁴

Girls and adolescents who work in domestic service, especially, have a difficult future due largely in part to a lack of access to a good basic education, and for the lack of opportunities that permit them to study beyond high school, which would permit them to endeavor other occupations in the labor market if that were their desire.

That is, the meager educational capital they acquire conduces them to inevitably stay in domestic service.

1.2 Deficiencies in Basic Education

To speak of education in Peru is concerning in itself. To speak of education for adolescents in the poorest zones of the country turns out to be almost painful. To start with, the country has the lowest allocated budget towards education in Latin America.⁵

In 2001, 91% of children and adolescents attended elementary school, but only 65% of those studied high school education. That is, approximately 34% of adolescents between the ages of 12 and 16 did not attend school.⁶

The numbers in rural Peru are even more dramatic, that's because the coverage of education in these zones is even less than in urban zones by 27%. In rural areas, out of three girls who attend elementary school one abandons her education without even learning how to read. Late start and overage students is also considerable: eight out of ten rural girls in their third year of primary education are older than the appropriate age.⁷

² AGTR. *The most marginalized citizens*. Lima 2005.

³ Law 27986. Domestic Workers Law. 2003.

⁴ OJEDA Parra, Teresa. *Prisiones domésticas, ciudadanía restringidas*. UPCH Lima 2005.

⁵ HELFER, Gloria "The Education in Peru" in *Making Villa El Salvador an educative community: I District Congress on Education in Villa El Salvador*. DESCO, Lima 2001.

⁶ *Lineamiento de Políticas de Salud de los/as Adolescentes*. MIMSA, 2005.

⁷ Numbers from *Sistematización de Estudios Nacionales sobre Derechos Habitacionales y DESC de las mujeres*. CLADEM/ACCD, Lima 2008.

It's important to highlight these numbers because still today rural Peru supplies girls who go into domestic service in the cities, without having this transition mean an improvement in the quality of education they could have access to as a working person.

For families in extreme poverty, it's very difficult to enroll their children in public schools because they don't have the money to buy uniforms, school supplies or because they can't contribute to the Association of Parents,⁸ be it with monetary or labor contributions. To this we add, because of error in priorities or the need to cover their basic needs, that families consider more important for their children to work or contribute to the labors of the household. Because of gender discrimination it's still considered that it's not important for girls to attend school.⁹

To the above we should add that the academic institutions much of the time present deficiencies that affect the performance of its students. According to official reports half of the public schools find themselves in a normal or poor state (with 13% of schools considered to be in the brink of collapse affecting 650,000 students).¹⁰ At the same time two out of ten schools lack water services, four out of ten schools do not have a drainage system, 23% do not have potable water and two-thirds have deteriorating hygienic services.¹¹ In addition public schools also present deficiencies in furniture, equipment and technical resources. From these academic facilities those who finish basic education are generally not prepared for post-secondary education, if that's their goal and if they counted on the economic resources.

The scholastic failures affects one out two children before entering their fourth-year of elementary school, but we should also cite other causes that are as important such as malnutrition, poverty, domestic violence, abandonment and child labor.¹²

The preliminary results of the National Questionnaire on Child Labor,¹³ made in 2007 by the National Institute of Statistics and Information (NISI)¹⁴ in order to collect information on the economic activities of the population between the ages of 5 and 17, indicated that 42% of them worked and, even though 92% attend school, their academic achievements were very low.

Even those who do well in school end up having serious learning deficiencies. For example, according to the data from the National Evaluation of Student Performance made in 2004, out of every ten students only one reaches the competency of comprehension of texts.¹⁵ This same

⁸ In Spanish: Asociación de Padres de Familia (APAFA).

⁹ For more information see, *La educación de todas las niñas y niños es nuestro compromiso*. MINEDU/UNICEF. Lima, 2003.

¹⁰ VEXLER, *Idel in Informe sobre la educación peruana. Situación y perspectivas*.

(<http://www.ibe.unesco.org/International/ICE47/English/Natreps/reports/peru.pdf>) Seen in February 2009.

¹¹ CONSEJO NACIONAL DE EDUCACIÓN *Proyecto educativo nacional al 2021*. Lima, 2006.

¹² MINEDU/UNICEF. Op. cit.

¹³ In Spanish: Encuesta Nacional sobre Trabajo Infantil (ETI)

¹⁴ In Spanish: Instituto Nacional de Estadística e Informática (INEI). The consultant José Rodríguez presented the preliminary results of the questionnaire on April 16, 2009 at the Committee for the Prevention and Eradication of Child Labor (CPETI-Comité para la Prevención y Erradicación del Trabajo Infantil), headed by the Ministry of Work and Promotion of Employment (MINTRA-Ministerio de Trabajo y Promoción del Empleo).

¹⁵ RAMOS, Miguel y CHOQUE, Raúl *La educación como determinante social de la salud en el Perú*. Ministerio de Salud. Dirección General de Promoción de la Salud. Dirección Ejecutiva de Educación para la Salud; Organización Panamericana de la Salud, Lima 2007.

source indicates that almost the totality of students (97.1%) in their fifth year of high school show limits in reflection, making inferences, and in comprehending and resolving elementary mathematical situations.¹⁶

With this panorama, even with the best intentions of the academic authorities and motivated teachers, learning for children and adolescents keeps on accumulating difficulties.

1.3 Barriers for Post-secondary Studies

The deficient academic system, along with situations of poverty and extreme poverty, produce generations of adolescents and young adults with poor preparation for the labor market. To start with, post-secondary studies is almost discarded; while state universities have massive and rigorous competitive entry exams for few vacancies, private universities—even the not so good ones—have as a barrier their high monthly costs, leaving out those in the poorest sectors.

The Superior Technologic Institutes¹⁷, are in their majority private and in general the best ones are the most expensive. There are public ones though with a high demand that translates into very demanding admissions exams.

There's also the Productive Technical Academic Institutes¹⁸ both private and public. The duration of these studies vary from a few months to three years, depending on the nature of the program and specialty.¹⁹ M adolescents in poverty come to these to find a way out, more in accordance to their resources and capabilities although this route reduces their job opportunities in the future.

1.4 Poverty and the Labor Market

The large majority of adolescents and young adults who have worked since childhood, who live in very poor zones and have studied low quality institutions, generally have access only to temporary jobs of meager pay and grade, within an ample spectrum of unemployment and underemployment.

Every year according to the report by AFP Horizonte²⁰, about 140,000 adolescents enter the urban labor market but only one-third obtain a good-quality job; at the same time, 40% haven't received previous training.

According to the report by NISI in 2002 adolescents between the ages of 14 and 24 register as the group with the largest rate of unemployment. We're talking about two-thirds of the adolescent population who work odd jobs and informally with scarce employment opportunities,

¹⁶ CONSEJO NACIONAL DE EDUCACIÓN. Op. cit.

¹⁷ In Spanish: Institutos Superiores Tecnológicos (IST). These offer careers that vary from one to three years of studies.

¹⁸ In Spanish: Centros Educativos Técnico Productivos (CETPRO).

¹⁹ *La otra educación... Marco general para la construcción de la Educación Básica Alternativa*. MINEDU, Lima 2005.

²⁰ Administers Pension Funds

no-labor protection, health insurance or contract. It's estimated that more than half of these adolescents receive a monthly pay below 143 US dollars.²¹

Informal labor, unemployment and difficulties in obtaining professional training mark terrible barriers for adolescents and young adults; we should add to this the gender inequality that still persists. In Peru, women have less access to paid employment, and unemployment affects adolescent women in particular. Self-employment and unpaid work shows an over-representation of women. Even in paid employment there persists discriminatory conducts. Women, independent from where they work, are paid less than men. They earn less because they are in the worst paid occupations, be it because in the same occupation as men, they are paid less.²²

We must add that socio-cultural prejudices exist because of the “natural” connection made between women and domestic work. In the low-income popular sectors—and particularly in rural zones—the idea that domestic work is an obvious “way out” for girls and young women in poverty and without professional training persists. This idea is enforced by the common practices in families and communities.²³

For an adolescent or young adult that is already working in domestic service, what hope do they have of having another occupation? What options do they have of obtaining professional training facilitating their insertion in other labor markets? Very few.

1.5 Protection Services for Adolescents and Young Adults

Facing the present situation, young women in low-income urban sectors do not have access to effective services that can help them. The State approved the National Plan of Action for Childhood and Adolescence 2002-2010²⁴ recognizing the poor access that young women have to basic education and health services. In this way, an objective was set to reduce the rate of teen pregnancy by 30%; an objective that, one year before the end of the plan, is very hard to achieve for the number of pregnant teenagers and/or teen mothers has stayed at a 13% for almost a decade.

The State provides attention through some services:

First of all, there exists a Municipal Defensory for Children and Adolescents (MDCA)²⁵ with private autonomy and located within the local government that is in charge of protecting children and adolescents from different types of abuse. In general, MDCA usually attends to paternity claims, pension demands and cases of child abuse although the extent of its services has grown

²¹ Data in document *Diseño curricular básico de la educación superior tecnológica*. MINEDU, Agosto 2006. (<http://destp.minedu.gob.pe/docum/DCB-EST-sET2006.pdf>), seen in February 2009.

²² Data in CLADEM/ACCD, Op. cit.

²³ ANDERSON, Jeanine. *Invertir en la familia. Estudio sobre factores preventivos y de vulnerabilidad al trabajo infantil doméstico en familias rurales y urbanas: el caso de Perú*. Oficina Internacional del Trabajo, Lima 2007. In this study we can see in detail the role of the family, and that of the “aunts” and godmothers in the reproduction of child labor.

²⁴ In Spanish: *Plan Nacional de Acción por la Infancia y la Adolescencia (PNAIA) 2002-2010*. Gobierno del Peru, 2002.

²⁵ In Spanish: Defensoría Municipal del Niño y el Adolescente (DEMUNA)

to deal with problems of conduct in children, among other problems. The quantity and quality of the services provided by MDCA depends much on the financial resources they have which varies from municipality to municipality. As such, it's expected that in the poorest municipalities with a large population and with greater problems the MDCA cannot deal with the enormous amount of problems they are presented with.

It's important to point out that only some municipalities comply with the ordinance of having a registry with the number of adolescents who work in domestic service. Many municipalities blame lack of resources though their lack of interest on the issue is notorious.

In second place, we have the National Institute for the Wellbeing of Families (NIWF)²⁶ that according to their official objectives, "is an entity specialized in the execution and implementation of social programs directed at promoting the protection of and integral development of children, adolescents, adults and elders who find themselves in risky situations and/or abandonment; providing services that improve their condition, assuring their integral development."

The NIWF provides diverse services like homes for children and adolescents in abandonment or with protection needs, or the implementation of the plan for street educators to steer children and adolescents from dangerous jobs putting at risk their development. Also, there's the Pre-School Education Centers in poverty zones attending to a great number of children, offering breakfast and lunch; during the afternoons or weekends, they gather elementary school children to do homework.

The lack of resources limits the services offered by the NIWF and it reduces the institution to one that attends only to extreme cases of necessity. In addition, the necessary presence of adults in some matters distances the entity from adolescents.

In third place, we have the Emergency Centers for Women (ECW)²⁷ that's part of the Ministry of Women and Social Development.²⁸ There are 89 centers nationally and they strive to attend to children, adolescents and women victims of sex trafficking, which is one of the worst forms of sexual violence. At the same time they take care of victims of family violence. The ECW coordinates with the National Fiscal and Police Forces of Peru; they assume an active role in legal defense, they offer immediate psychological help as well as social help for the insertion of victims into their family networks or establishments.

We must note that the ECW are *reactive* entities operating once a problem is denounced. Their actions in preventive measures are very limited. The adolescent will go to these centers to ask for help once she has been a victim of some form of aggression.

One of the largest gaps in public services are the so-called "health centers with attention for adolescents." According to official data in Peru such services for adolescents are not present in

²⁶ In Spanish: Instituto Nacional para el Bienestar Familiar (INABIF).

²⁷ In Spanish: Centros de Emergencia de la Mujer (CEM).

²⁸ Ministerio de la Mujer y Desarrollo Social (MIMDES).

even 3% of public health establishments.²⁹ Liliana La Rosa, in two documents,³⁰ mentions the low budgets, the low number of personnel and the scarce preparation as factors that limit the health services attention to adolescents.

In relation to the labor capacities of working adolescents, the lack of interest is similar. The NGO CESIP in two capacity-building projects for working adolescents³¹ signals in their conclusion the weakness of public institutions, in this case the Municipalities, in their execution of protection policies for children and adolescents complying with current laws. Public employees, in the face of criticism, signal difficulties in gathering resources and the need for external financial help.³²

Finally, State and public institutions have yet to make the decision to prioritize attention to adolescents where it's essential, especially in sexual and reproductive health.³³

2. The Risks of being a Domestic Worker: Sexual and Reproductive Health

2.1 Vulnerability and Lack of Defense

Let's remember that domestic workers are part of the *most marginalized citizens*, for their occupation is not valued, not by them nor society, and their human and labor rights are frequently violated.³⁴ When these are minors, their violated rights add up, starting with the fact that 14 is the minimum age for working in domestic service and we often see 8 or 9 year old girls working as nannies in the peripheral districts of the capital!

Being poor and a minor in Peru means great vulnerability and defenselessness. And being a woman means more risks in a society with high numbers of gender violence. The very fact of being a poor adolescent means being in a complicated situation because we are talking about people who find themselves in a stage in their lives where they're exploring their own identity in an unfriendly social and familial context: gender roles that are imposed with many stereotypes and machismo, lack of resources and opportunities, authoritarianism and violence within and outside of their homes, etc.

²⁹ CHAVEZ, S. *Concepciones y percepciones sobre los Derechos Sexuales y Reproductivos en la Adolescencia: Recomendaciones para la Implementación del Plan Regional de Salud en la Región de La Libertad*. Consorcio de Investigación Económica y Social: CARE-Perú: Centro de Promoción y Defensa de los Derechos Sexuales y Reproductivos. Lima, 2007

³⁰ We refer to "Adolescencia y Juventud en el Perú. Género, Sexualidad y Servicios de Salud" in *Póliticas de Juventudes: Por la Igualdad de Oportunidades* (Varios autores, SPAJ. Lima, 2001) and *Modelos de atención de salud para adolescentes en el sector público. Estudio de diez experiencias en el Perú* (GTZ/MINSA. Lima, 2002).

³¹ In the texts *Adolescentes que trabajan en los mercados mayoristas de verduras No. 1 y No. 2* (Lima, 2002) and *Acción Multisectorial para la Promoción de Derechos y Protección de Niñas y Niños y Adolescentes que trabajan en los distritos de Comas y La Victoria* (Lima, 2006) both edited by CESIP.

³² *Intervenciones y estudios sobre la prevención y atención del embarazo en la adolescencia en Lima y Callao*. MIMDES/PROPOLI. Lima, 2006.

³³ It is one of the main conclusions in the text by GUTIÉRREZ, Rocio *Maternidad Adolescente: Construyendo nuevos destinos* (Manuela Ramos, Lima 2006) as well as VAZQUEZ, Enrique *¿Los niños... primero? Cuánto invirtió el Estado peruano en los niños, niñas y adolescentes, 2001-2003*. Universidad del Pacífico/Save the Children. Lima, 2004.

³⁴ AGTR 2005 Op. cit.

Undoubtedly, self esteem and confidence when making their own decisions is not strengthened in these environments. Quite the contrary, we are talking about adolescents with low self-esteem who frequently are in situations risking their sexual and reproductive health.

2.2 From Low Self-esteem to Lack of Assertiveness

Domestic work conduces to low self-esteem because those who do this job don't value what they do which makes them not admit this is their job or simply deny it, as is the case with young girls who work for neighbors or family; they and their parents usually say they simply "help". As such, in the process of building their identity a hole emerges, making it hard to give an exact response to the basic question as a teen: *Who am I?*³⁵

The adolescents who live in a situation of poverty and extreme poverty have enormous difficulties continuing with their education. Facing low performance in school and repeating school grades, the temptation to leave school to work in domestic service as a "live-in" worker to earn more (instead of "helping" only for tips of less than two US dollars and/or a plate of food which is what a young girl working as a nanny in a human settlement).

In our society, domestic child labor has a general character; there is the tendency towards not recognizing it, to make it "invisible". Additionally in Peru the parents usually consider it a form of learning experience. For some parents, by having a young girl "help" they are keeping her safe away from dangers, for she is being watched over while they are out working.

During vacation, January through March, many children and adolescents work in order to save money for school supplies and once school starts they stop. During the school year they work weekends or just a few hours each week. While domestic child labor is irregular, children are experiencing responsibilities that don't correspond to them: they are losing opportunities they will not have in the future.

It's important to point out that the difficulties children and adolescents face are not only the exhausting domestic chores, taking care of children or the errands they run. The familial situation is usually conflictive.

In Peru, the traditional model of the father being the breadwinner and the mother a housewife easily exceeds 35% of families. Young domestic workers usually come from households where the mother is the head of the family in many cases, single or abandoned. She, like the father or the older brothers is in constantly looking for a job, for what she is able to find pays poorly or are just odd jobs.

The tension produced by the lack of basic needs and the day-by-day insecurities affects the relationships within the household and it turns into violence, child abuse, miscommunication and other dangers.³⁶ Precisely, one of the factors that conduces children and adolescents into

³⁵ AGTR. *¿Quién soy yo?* Lima, 1997.

³⁶ AGTR *Darse cuenta: Hacer algo. Fortaleciendo a las familias de trabajadores infatiles domésticos en Pamplona Alta, San Juan de Miraflores, Lima, Perú.* Lima, 2007.

domestic service is the mistreatment and the risk of sexual abuse within their own family, linked to the incapacity of the family to offer a protective environment.³⁷

In the capital, a large part of adolescent domestic workers are children of migrants from the rural highlands of Peru. As urban adolescents, they experience on a daily basis the urban population's racist discrimination, they also experience how their parents perception of good education: parents believe that they will grow up right with physical punishment because that's how they themselves were raised. The breach between generations grows; parents see their young daughters immersed in a world very different from their own; in their way of dressing, relating to others and how they spend their recreational hours.

The different spaces in which adolescent domestic workers grow up in, including their own household, does not help them develop a good self-esteem nor does it help them make the right decisions especially with the opposite sex. Parents usually are authoritarian and restrictive which is risky when it comes to sexual and reproductive health.

2.3 The Risk of Teen Pregnancy

In Peru, as we have mentioned before, 13% of young girls between the ages of 15 and 19 are pregnant for the first time or are already mothers.³⁸ Teen pregnancy is associated principally with young girls who are sexually active, of low to no education and who have a low socio-economic profile, with communication problems and abandonment as well as difficulty accessing contraceptives.³⁹ And as Alcázar and Lovatón⁴⁰ affirm, teen motherhood comes consequently means early insertion into the labor market for low-quality jobs with very low pay. Also these young women have less chances of completing their basic education or post-secondary education.

Adolescent domestic workers are more vulnerable to pregnancy when the family environment is conflictive, the information on sexuality is charged with prejudices and contraceptives methods are unknown. We also add to this a limited education on lifeskills, more so if they are already living in the household of their employer. Finally, we mention that it's likely new couples come from similar home environments to which they now relate to with their own frustrations. Because of all of this, it's not adventurous to claim that their knowledge about practicing safe sex and their ability to negotiate with their partner is null or very little.

³⁷ FLORES, VEGA, CACERES Y RUZ 2002. Op. cit.

³⁸ The numbers are from ENDES 2000 and it maintains as such in the ENDES Continua 2004-2005.

³⁹ MIMDES/PROPOLI, Lima 2006. Op. cit.

⁴⁰ ÁLCAZAR, Lorena y LOVATÓN, Rodrigo. *Consecuencias socio-económicas de la maternidad adolescente: ¿Constituye un obstáculo para la formación de capital humano y el acceso a mejores empleos? Informe preliminary*. Lima 2006, en: <http://www.grade.org.pe/download/docs/Informe%20Final%20-%20Madres%20Adolescentes.pdf> (seen in February 2009).

We must highlight that teen girls live in very violent neighborhoods that offer no guarantees to their integrity. We live in a society where one in every five women has experienced sexual abuse before the age of 15 and where the aggressor is usually a family member.⁴¹

Teen pregnancy can be an obstacle that kills any chance of having expectations of improvement for a young domestic worker. If she is lucky, she will have a partner that will try to continue onward working part-time jobs with little pay. But there is also the case of many pregnant teens that are abandoned as well as those who don't know who the father of the baby is, as is the case with victims of rape.

Usually social and family networks are very weak and in the situation of scarce material resources, it will be hard for the pregnant teen not just to continue her education but also think about a life-plan for herself and the child.⁴² In many cases, the family of the pregnant teen or of the partner gives them a space to live in their home, but the teen comes to be responsible of the household chores, continuing to be a domestic worker without pay nor power to make decisions. If the child is a product of sexual violence, we are dealing not with a “mistake” but with a stigmatization that is difficult to erase.

For a domestic worker, a pregnancy limits and even prevents them from working in domestic service. Few are the families that will accept a domestic worker with a child or if accepted, offer her dignified employment conditions. Because of this, many domestic workers leave their children to the care of another woman in exchange for a pay that's barely enough for the child's food. The pregnancy, then, is added to a list of burdens that the young domestic worker will experience for years to come, like a chain of scars that can affect her mental health, and repercussions affecting her relationship with the child, reproducing family violence.⁴³

2.4 The Risk of HIV and STDs

According to Patricia García, Armando Cotrina y César Cárcamo,⁴⁴ the numbers on sexually transmitted diseases within adolescents who are sexually active are skewed because adolescents who are not sexually active are included in the denominator. Still, Chlamydia infections are the most frequent in adolescents, with a rate that doubles in individuals older than the age of 20. Gonorrhea, syphilis and human papillomavirus (HPV) also have high prevalence among adolescents. Many studies show that the prevalence of sexually transmitted diseases is higher within women populations.

In the case of HIV, it's important to note that the main form of transmission is still by sexual behavior and—specifically within women populations—the predominant form transmission is heterosexual. Though two-thirds of all AIDS cases correspond to individuals within the age group of 20 to 39, the proportion is the same for both sexes. The Ministry of Health⁴⁵ in a report

⁴¹ GÜEZMES, Ana; PALOMINO, Nancy y RAMOS, Miguel Violencia sexual y física contra las mujeres en el Perú. Estudio Multicéntrico de la OMS sobre la violencia de pareja y la salud de las mujeres. CMP Flora Tristán, Universidad Peruana Cayetano Heredia, OMS Lima, 2002.

⁴² GUTIÉRREZ, Rocío (2006) Op. cit.

⁴³ Testimonies of domestic workers that support this can be found in AGTR *La salud: derecho violado*. Lima, 2004.

⁴⁴ GARCÍA, Patricia; COTRINA, Armando y CÁRCAMO, César (2008) Op. cit

⁴⁵ In Spanish: El Ministerio de Salud (MINSA)

made on this situation in 2001 deduces that half of these infections occur when the individual is younger than the age of 20.⁴⁶ On the other hand, women within the age group of 15 to 19 are part of a highly vulnerable sector: not only does this group contain 15% of maternal deaths, it's also the principal group where unsafe abortions occur and the group that is most affected by HIV/AIDS.⁴⁷

It's very alarming that only 45% of the adolescent population knows that the use of a condom can prevent the transmission of HIV, and that 65% do not know of the risk at all.⁴⁸ Though most women know of the different forms of contraceptives only a small percentage uses them or admits to using them (2% in the Peruvian highlands and 16% in the Amazonian jungle). The use of a condom is still tied to prejudices. A woman who uses them may still be seen as a "player" or an easy girl.

Even though now there's more information on sexual health available to adolescents and teenagers there's also a double discourse: on the one hand, people are critical of the stereotypical machista and the participation of the woman in the negotiation concerning her sexual activity is recognized; on the other hand, a wariness persists in the definition of gender roles, with the enchantment role still being controlled by the male and a general acceptance of the masculine initiative against the female counterpart that is passive or even repressed.⁴⁹

Adolescent and teenage domestic workers, because of the work conditions and the particular process of socialization they've had, tend to feel alone which makes them desire a partner. At the same time, because of previous experiences with abuse,⁵⁰ these women are in general very untrustworthy, making it hard for them to establish friendships with the opposite sex. It's common for them to respond passively or with fear to the male sexual initiative: an initiative that more than being an invitation is a constant pressure to have sexual relations. And, even if they want to turn them down these women don't know how to say 'No'. At the same time they ignore the risks of having intercourse without a condom. Herein lies the necessity to create appropriate channels of education in sexual and reproductive health for these adolescent and teenage domestic workers.

3. A Few Experiences: How to Educate Adolescents in Popular Urban Sectors on Sexual and Reproductive Health

3.1 State Initiatives

⁴⁶ Data in PEREZ, F., QUINTANA, A., HIDALGO, C. *Sexualidad y mujeres jóvenes* Negociación, protección y placer. IES Lima, 2003.

⁴⁷ CHAVEZ, S. (2007) Op. cit.

⁴⁸ Information found in Encuesta ENDES Continua 2004-2005 in <http://www.grade.org.pe/download/docs/Informe%20Final%20-%20Madres%20Adolescentes.pdf> (seen in February 2009).

⁴⁹ This configuration of the imaginary of sexuality between adolescents can be seen in AMPUERO, A. (1999) Op. cit. As well as ARIAS, R. and ARAMBURU, C. *Uno empieza a alucinar: Percepciones de los jóvenes sobre sexualidad, embarazo y acceso a los servicios de salud en Lima, Cuzco e Iquitos*. Redes Jóvenes. Lima, 1999 and in CÁCERES, C. (ed) *La (Re)configuración del Universo Sexual: Cultura(s) Sexual(es) y Salud Sexual entre los jóvenes de Lima a Vuelta del Milenio*. UPCH. Lima, 1999.

⁵⁰ In the daily work experience in AGTR-La Casa de Panchita, we have frequent consultations related to sexual abuse in their home and/or work place.

Academic institutes continue to be the main source of information for adolescents concerning topics related to sexuality though the importance of media outlets, as a space where adolescents receive (television) and experiment (internet) diverse contents dedicated to sexuality is increasing.

Despite having the popular opinion value greatly the importance of having sexual education in schools,⁵¹ and that the Ministry of Education⁵² offers a workshop on these matters to teachers and school authorities⁵³ the information on sexual and reproductive health in these institutions is limited, contained by moralism, practiced in a sporadic fashion and in an unidirectional form by teachers who openly admit their limitations and fears in tackling this issue.⁵⁴

Questions concerning sexuality that adolescents may have don't receive the appropriate attention with the conventional form with which sexual health is imparted in schools. They don't reach an appropriate knowledge that answers to their needs. Quite the contrary, they receive limited information, with ambivalent attitudes towards using contraceptive methods.⁵⁵

Experimentally in 1999 the Office of Tutorial and Integrated Prevention (OTIP)⁵⁶ of MINEDU organized the *Sessions Safe and Responsible Sexuality: Nationwide Prevention of Teen Pregnancy*. The project implied creating teams formed by authorities in order to coordinate with the different academic institutions, and expert panelists thus enabling the selection of student panelists.

This process evolved into educational workshops held in all high school classrooms where videos were shown, trained teachers presented panels followed by a participative panel with the students.

Finally the students, motivated by teachers and parents prepared dramatizations, even with dances, calling for pregnancy prevention. The organizers realized this process was costly because it entailed massive training of teachers and the accompaniment of specialists and experts during the activities, a cost that the State was unable to finance.

3.2 NGO Initiatives

⁵¹ In a survey done by the University of Lima in 2004, more than 90% considered sexual education in schools important or very important: http://www.manuelaenelcongreso.org/files/IIIeducaci%C3%B3n-UL_o.pdf (seen in February 2009).

⁵² In Spanish: Ministerio de Educación (MINEDU).

⁵³ In 2009 a massive workshop on sexual health was held for teachers and authorities in all of the Unidades de Gestión Educativa de Lima y Callao (UGEL).

⁵⁴ "60% of teachers feel they are not trained to tackle sexual education; they do not feel comfortable speaking of the subject, they don't know how to treat it with the students of different ages, they are embarrassed and feel insecure. There are others who are not convinced that the topic should be taught." See MINEDU.

⁵⁵ CHIRINOS, J et al. "Perfil de las estudiantes adolescentes sexualmente activas en colegios secundarios de Lima, Perú" in *Revista Médica Herediana* No. 10-Lima, 1999. Also in <http://www.scielo.org.pe/pdf/rmh/v10n2/v10n2a02.pdf> (seen in February 2009).

⁵⁶ In Spanish: Oficina de Tutoría y Prevención Integral (OTUPI).

The principal initiatives towards tackling this issue have arisen from the private sector, both from NGOs dedicated to sexual and reproductive health issues as well as other institutions and the Church. Here we present some of the projects executed by NGOs.

At the level of prevention of STDs/AIDS within adolescents,⁵⁷ the Kallpa Association developed an extensive project (from 1994 to 2001, in eight cities of the country), with the goal of improving the information and the negotiation tactics in teenagers who are in environments of pressure to have sexual relations, which entails the risk of HIV transmission. Their strategy was to diversify the resources of information and educational material (installation of a discoteque tent mounted in the schools, colored lights, music, videos, panels and games).

The problem emerged when negotiating with school directors, who were very distrustful of the open publicity of condoms. We also observed the challenge to have facilitators internalize the messages of prevention; that is, the interactive games and self-instructive panels were not enough.

The Peruvian Institute of Responsible Parenting (PIRP)⁵⁸ between 1998 and 2000 developed a multimedia-consulting module for adolescents. An interactive software was used for students selected from 26 schools, aided by personalized counseling sessions as well as workshops and seminars at the request of students and tutors.

Though these multimedia tools were of great help in spreading knowledge of STDs and HIV, there were problems in schools that lacked interactive computers. Also in terms of changes in conduct the results were relative: in a population of 454 students, there was only an increment of 7% in adolescents who would ask their partner to use a condom.

In 2000, the NGO Fomento de Vida organized in the districts of Villa el Salvador and San Juan de Miraflores in Lima a reproductive health prevention project in coordination with local governmental health programs and teen groups. Training was given to those responsible of every Unidades de Gestión Educativa de Lima y Callao (UGEL) and their teachers. The final result was the training of students in their fourth and fifth year of high school.⁵⁹

The Germinal Association between 2000 and 2001 created a project for the diffusion of information on sexuality, STDs and HIV/AIDS in the district of Rímac in Lima. The instrument used was Cultural Animation by way of radio messages, radio theater, messages taped with music listened to by adolescents; printed material was also used. The key to this project was the participation of adolescents as agents for communication and academic and community mobilization. They had the participation of municipal authorities and of various neighborhood organizations. They saw the need for an increase in building relationships with teachers and other institutions and actors such as the Ministry of Education, and of Health, the National Police, Public Security/Surveillance Services and private companies.

⁵⁷ In the following examples, the information was taken from Red SIDA Perú/Cooperación Técnica Alemana GTZ *Buenas practicas en la respuesta peruana al VIH y SIDA*. Lima, 2004.

⁵⁸ In Spanish: Instituto Peruano de Paternidad Responsable (INPPARES).

⁵⁹ To know more details about the projects mentioned see: MIMDES/PROPOLI (2006) Op cit.

In 2001 the NGO Taller de los Niños worked on *The Project for the Prevention of Undesired Pregnancies in High Risk Sectors: "Workshop with Sisters"*, in the district of San Juan de Lurigancho in Lima. Neighborhood workshops were held with teens grouped by age, from 11 to 13 and from 14 to 17, considering that each group has their own needs and interests. Topics such as values, decision-making, self-esteem, oncoming pressure from one's partner, and life planning were discussed. Simultaneously, a workshop involving mothers and daughters was developed to generate reflection and reinforce affective ties. Illiterate mothers were kept in mind in the design and implementation of the workshop.

In 2002 The Institute of Tropical Medicine organized the *Project AIDS-Impulse* in the Cono Norte (Northern Cone) of Lima. The strategy was based partly on training teachers as accompanying teachers, and secondly on training student leaders who would replicate what they learned. On the one hand, we observed that the students remembered the information and their knowledge increased over time (possibly because they were consulted repeatedly by their peers and because they looked for additional information). On the other hand however, no significant changes were observed between the students of the classrooms that had trained student leaders and the ones that didn't.

Finally, The Ruwarisun Education and Health Institute⁶⁰ proposed a program for education in pairs. It's based on the interrelation of teen guides and accompanying teachers directed by a coordinating committee. Professionals in health and community institutions accompanied the guides and teachers. The process begins with the selection of schools and health establishments; afterwards by way of surveys the students choose the accompanying teacher they feel most comfortable with.

Thus, teachers and professionals participate in the training workshop about adolescent participation, adolescent sexuality and program development. Next comes the selection of teen guides by teachers and professionals. Then the teen guides who are trained are able to replicate what they've learned with new students. The professionals offer differentiated attention at the schools and spaces for orientation.

The above-mentioned experiences⁶¹ indicate that there exists no one model for information, education and communication on issues of sexual and reproductive health for adolescents. The plurality of focal points responds to the diversity of scenarios sexuality in adolescents of popular sectors asks for.

Within this plurality, the AGTR focuses on providing attention to domestic workers. That's why our project considers locating a space that offered suitable conditions where domestic workers could receive training on sexual and reproductive health. That's how we chose to work in the Centers of Alternative Basic Education (CABE).

⁶⁰ LA PORTA, D; MENDOCILLA, A; MURGUÍA, C et al. *Manual Encuentros Significativos entre Adolescentes y Adultos: La Educación entre Pares, una Apuesta porque las Adolescentes sean Protagonistas de su Salud Sexual y Reproductiva*. IES. Lima, 2000.

⁶¹ Projects on sexual and reproductive health, done before the presentation of this publication, by AGTR are not included.

4. A Strategic Space for the Attention of Domestic Workers

4.1 CABA, what are they? Why do they interest us?

One of the challenges of providing attention to domestic workers is finding and bringing them together. The ideal day of gathering is Sunday⁶² though the point of gathering is spread out more and more around Lima. That's why we opted for the CABA because many domestic workers can be found there. Classes are usually Monday to Friday, 6 pm-10 pm, which is why these were named night schools, a term that is still used.

In 2004, the Ministry of Education modified the Basic Education for Adults mode, which is now Alternative Basic Education (ABE). The latter (ABE) is based on the objective of responding to the needs of adolescents and adults who did not have access to the academic system, who abandoned it—as is the case of children and adolescents who were unsuccessfully inserted into the Regular Basic Education (RBE)—or because of their older age couldn't attend one of the institutions of RBE. At the same time the ABE caters to those students who need to juggle work and school.⁶³

The ABE consists of two programs: the Alternative Basic Education for Children and Adolescents Program (ABECAP) and Alternative Basic Education for Young Adults and Adults (ABEYAA).⁶⁴ Both programs have a curriculum structure divided into three levels: Initial, Intermediate and Advanced (substituting the three conventional levels: Elementary, Middle and High School).

In this new model the advanced level consists of four years, differing from the conventional high school that consists of five years. The ABE also includes students with disabilities.

In 2005 the new curriculum was implemented in a sample of 50 academic institutions throughout the country. Currently, there are 164 CABA but the goal is for the curriculum to be implemented throughout all the country by the end of the present decade.

In 2007 a survey was taken at all the CABA schools in the 26 regions of the country. 1,634 students participated, from both ABECAP and ABEYAA. The survey showed that the majority of students were women but the difference between male and female was not significant. Also there were more adolescents in comparison to adults and children: 83% of CABA students were between 14 and 25 years old. The survey also showed that more than half were not part of a structured family nor did they lead a familial life. In addition, it was confirmed that domestic service was the second largest occupation within the student population the first being street vendor. Also, 70% of those surveyed worked more than 8 hrs a day, including a large number who worked more than ten or eleven hours a day.⁶⁵

⁶² Sunday tends to be a free day for those who do domestic work and enjoy the right to one rest day a week.

⁶³ MINEDU (2005) Op. cit.

⁶⁴ In Spanish: Programa de Educación Básica Alternativa para Niños y Adolescentes (PEBANA) and Programa Educación Básica Alternativa para Jóvenes y Adultos (PEBAJA).

⁶⁵ Data from the home page of MINEDU http://dineba.minedu.gob.pe/docu_investiga.php (last visit, March 2009)

AGTR's own experience working in schools, as will be seen later, can attest to this information and sees the CAFE as a strategic space for to provide attention to domestic workers and secondly to young males who are usually chosen by young female domestic workers as companions, in friendships or relationships. In the CAFE we also find children who do not identify themselves as domestic workers but who may do domestic work at home (6% of those surveyed responded to "helping at home"). We should consider that in much of the informal commercial work and even in small hostel businesses small "additional" domestic service is tacitly required.

4.2 The Difficulties of CAFE

If the quality of public education is deficient then in the case of CAFE it's worse, for night schools are the most discriminated. For example, it's often the case academic institution will not let night students use the library, laboratories or computers if these exist. In some schools these students don't have access to the hygienic services for they lock these at night.

When the students arrive at the CAFE they see that the classrooms haven't been cleaned after the morning and afternoon classes. Because of this students sometimes are forced to clean their own classrooms before studying. It's also possible for the lighting in the classrooms to be deficient, (if four bulbs are required, maybe only one works), and respiratory sickness due to the humid nights may be frequent, since broken windows are usually not replaced.

Since many years ago academic institutions with a student body that juggles school and work have seen a significant decrease in students, especially since the devaluation of our currency two decades ago. During that time the majority of students were adults whereas now the majority are young adults and even children.⁶⁶

Domestic workers matriculate not in February to start school in late March, but only until May or June and most do not finish the school year.⁶⁷ That is to say that you can see the decrease in student body as the school year advances.

The reasons for this desertion are generally the following:

- The employer of the domestic worker agrees to a contract that includes work and study, which permits her to attend two or three months only to have the employer tell her she can no longer attend school.
- The domestic worker is let go and she must leave school in order to find another job, which may not be in the same district and it's not easy to find another job that will let her study (the right to an education is one of the rights least respected).
- The domestic worker goes to her home province for vacation in July and does not return.
- Undesired pregnancy.

Now more than ever given that the students don't like or understand the curriculum of ABE, desertion is a grave problem.

⁶⁶ Blanca Figueroa's testimony, who has worked with domestic workers since 1974.

⁶⁷ Note the school year in the southern hemisphere starts in March, not August/September and ends in December, not June.

The directors and teachers of the CAFE feel they are the most abandoned by the academic system and they are. They almost never receive training on new pedagogic methods, which is received in an almost permanent manner by teachers in RBE. In fact, most teachers who work in the CAFE do it as a second job. As such, we are dealing with teachers who are fatigued after a day's work and who don't have the necessary resources to adequately instruct.

Besides these difficulties many teachers demonstrate an understanding attitude towards the needs and problems of domestic workers. They know the situation their students are in and also understand the problems with employers. This is very important especially with the very young domestic workers since attending school may be the only permission they get from their employers.⁶⁸

5. Why We Have Chosen Theater

5.1 What We Did Before

Established in 1989, AGTR attended to domestic workers from the beginning but it wasn't until 1998 when the locale La Casa de Panchita was inaugurated—at the request of the domestic workers—that an emphasis was placed on providing them with more diverse services.

At the beginning conferences on domestic worker's rights were offered though we soon realized that what domestic workers looked for on Sundays was a space for socialization, recreation, where the workshops would respond to their changing needs and desires. In this way, our methodology came to be more participative and very dynamic. The information and orientation on their rights was offered according to their demands (this has continued to be a priority).

At academic institutions we continue to give seminars though always trying to make them attractive and dynamic. These seminars were given at the schools during the night shift in front of a tired and sleepy audience of domestic workers. We saw the difficulty in captivating their attention and concentration. Which is why after an evaluation having proven the difficulty of having them remember the concepts taught, we decided to change our methods. This happened in 2002.

One of the first ideas suggested if we were to narrate situations similar to those experienced by the young domestic workers then they would identify with these and pay more attention remembering what was being taught. And maybe the best way to go about it was not through a conventional seminar but to employ stagecraft.⁶⁹

5.2 Theater: Communication and Participation

⁶⁸ We are talking about children younger than the age of 10; the employers or “godparents” do not let them study/go to school during the day.

⁶⁹ Ágata Zumaeta, social communicator and actress, who from the start was part of the team working with the schools, formulated and developed this new proposal for AGTR, elaborating a thesis paper and obtaining her undergraduate degree. The content explaining this proposal has been taken out of her thesis entitled, *Dramatization as a participative technique to inform domestic workers of their rights*. Universidad de Lima, 2008.

Theater can be a very useful communicative tool. Theater demands no oral skill or literacy in order for it to be effective. Theater communicates with a person in many aspects beyond thought and reason. It attracts emotion, beliefs, passion and prejudice. It helps confront aspects of our lives that we wish to ignore. It's an entertaining way to share and disseminate information.

Within development theater is a stimulating activity for participation: Theater for development can encourage the active participation of people whose voices are commonly not heard in public sometimes not even in their local community. Stories are used to help people express their grasp of what's happening in their everyday life; these stories can encourage participation in their daily lives. Theater for development converts private and individual stories into public and collective dramas.

One's rights can be defended using theater inasmuch that it can generate the public to participate in the problems presented. It can even have greater impact than other forms of advocacy. At the same time theater can be used as a form of therapy to help people confront traumatic situations and emotional problems particularly if the audience is part of vulnerable and marginalized sectors.

5.3 Paulo Freire and a New Proposal

The theatrical proposal stemmed from speeches given by the Brazilian pedagogy Paulo Freire who proposed that one should learn to be reflexive and critical of his/her own reality because being conscience of this will lead to a participation in his/her own transformation.

In the proposal elaborated by Zumaeta we offer domestic workers a space for reflection that aim to have them:

- **Recognize** that their situation is not an isolated case.
- **Understand** that it's possible to generate change within themselves, in their workplace and in the relationship with their partner.
- **Propose** what they can do to reach these changes.

That is:

1. Come to realize that with high self-esteem they will have the necessary strength to fight for a better life.
2. Come to realize that their rights go hand in hand with their work tasks and can learn to negotiate better work conditions.
3. Come to realize they can "say no" to pressures from their partner to have sexual relations.
4. Como to realize they can demand that their partner use a condom to prevent HIV and STDs or an undesired pregnancy.

Paulo Freire asserts that the need for humanization must come from the oppressed person who must search for the paths towards liberation since humanization won't come from those who keep him/her in that situation.

One great barrier towards the humanization of domestic workers is that they do not wish to be identified as such since they don't value what they do, just as society doesn't value their work.

It's essential for their liberation that they respect and value themselves as women and as domestic workers. For then the moment will come when not their employer or partner will take advantage of these women since they won't let it happen now that they know to value themselves and their work.⁷⁰

Freire says:

“The pedagogy of the oppressed like humanist and liberating pedagogy must have, then, two different but interrelated moments. The first, where those oppressed start to uncover the world of oppression and they come to commit in practice to their transformation; And the second where once the reality of oppression is transformed this pedagogy ceases to be of the oppressed and comes to be the pedagogy of men and women in the process of permanent liberation.”⁷¹

Applying the above mentioned to domestic workers:

- Domestic workers, parting from their own reflection and critiques of their reality, when empowered they come to know their rights and at the same time fulfill their obligations.
- Society will come value domestic workers. And these women will finally be full citizens no longer exploited or marginalized.

5.4 Augusto Boal and our Proposal

Concurrently, AGTR's proposal picked up the ideas by the Brazilian director and writer Augusto Boal whose theoretical and theatrical proposal, as well as his exercises for actors, caused a considerable impact within communicators in general.

His *Theater of the Oppressed* is not a modification of theater but instead is almost a return to its origins. It transforms the spectator into the protagonist of the dramatic action. In his words, “By way of this transformation the spectator is aided in preparing real actions that will stimulate his own liberation.”

For Boal the most popular, spontaneous and traditional stage set-ups had been appropriated by the dominant classes, creating a false wall that didn't exist before: one that separates actors from spectators where one imparts the message and the other receives it passively. Boal proposes a, *Poetry of the Oppressed* that doesn't impose values upon the spectators nor explains these critically but instead liberates them.⁷²

Boal uses theatrical language as a pedagogic method and a form of understanding and transformation of the social realities. He parts from the premise that as a language theater can be used by anyone.

⁷⁰ AGTR's long-term objective is empowerment: rights and (tasks), not one without the other. In our employment agency for domestic service, the LA CASA DE PANCHITA S.A.C, we instill a sense of responsibility: punctuality, efficiency, honesty, permanent improvement in labor abilities, capacity to resolve conflicts with employers, etc.

⁷¹ FREIRE, Paulo, *pedagogía del oprimido*. Editorial Saldaña. Lima, 1995.

⁷² BOAL, Augusto Teatro del oprimido Ed. Nueva Imagen, México D.F. 1980.

In the proposal by Zumaeta, theater is a form of communication that uses dramatizations where domestic workers critique their reality even if in a simple or initial manner and are able to propose solutions to the character they identify with, changing the reality created by the dramatization. This will motivate her to act it out later in her daily life.

Boal by way of a series of exercises, games, techniques (like image theater), and forms of theatricality (theater forum being the one most used), seeks to understand a reality in order to transform it. Boal leaves the passive spectator behind, the division between the actor and spectator disappears, as well as traditional conventions; the spectator becomes part of the action, of the performance.

The first technique used by Boal to make the spectator a participant and invite him or her to intervene is: simultaneous dramaturgy. It generally starts with a brief 10-20 minute scene. One of the spectators proposes a scene about a personal or known situation. For Boal it's more effective if the protagonist is one of the spectators.

Zumaeta's proposal is similar to simultaneous dramaturgy. The protagonist is a domestic worker and is always present; the majority of the students in the audience are domestic workers.

In Boal's proposal the actors can improvise parting from a script previously elaborated; they can also directly write the script and memorize the lines. The idea is to reach the point where the conflict arises.

For Zumaeta's proposal we decided the texts would be memorized, not to read them line-by-line but to be clear of the backbone of the scene. Parting from the interventions from the domestic workers during the dramatization, the team improvises until the conflict arises. For example in the following situation:

1. Assertiveness in the prevention of HIV/AIDS: When the young man tells her girlfriend, the domestic worker's character, that he doesn't want to use a condom.
2. Assertiveness in confronting the pressures from the partner to have sexual relations: When the young man tries to make the girlfriend, domestic worker's character, feel guilty if she doesn't accept.

In Boal's proposal every solution given by the spectator is dramatized and the spectator has the liberty to intervene and correct the actors' actions or lines, the actors in turn go back and interpret what is being proposed by the audience.

In Zumaeta's proposal whenever the conflict arises the actor who is acting out the domestic worker's character makes time during the scene to create a dialogue with the audience so they can help finding a solution.

The interventions by the domestic worker become the text of the characters, and they repeat it on stage in order to continue with the scene. This is done as many times as necessary. However, the group does not do the scene over again as Boal proposes.

This type of theater creates great excitement among the participants who want to give their opinion: Thus the wall that separates actors from spectators is knocked down. The actor must be ready to accept the spectators' suggestions: He/she is always the interpreter what changes is whom the actor is interpreting. The actor doesn't interpret an established text but instead the ideas and suggestions from the participative audience, in this case the domestic workers.

5.5 Freire and Boal's Proposals and Domestic Workers

The strong point of our proposal is to convert the theatrical action into a space for reflection where domestic workers can recognize that their own situation is not an isolated one, and also understand that it's possible to generate change not only within themselves but in their work and in their relationships. For example that they realize if they value themselves more, then they'll have the necessary strength to: fight for a better life, to demand respect for their rights, to complete their work tasks, fight off their partner's pressure to have sexual relations and even demand that their partner use a condom to prevent STDs and HIV or an undesired pregnancy.

The domestic worker must propel all these changes. Thus the day will come when neither their partner nor employer can take advantage of her because she won't let it happen. She will know how much she is worth as a woman and domestic worker. This is possible within the dynamics of participative theater.

5.6. The Students: The Audience

As spectators the students at the schools where we have our sessions—the majority being domestic workers—fit the **role of motivators** for the scenes; their active participation makes the story develop in different ways at each session according to the interventions made during the dramatization.

The suggestions made by the domestic workers to resolve the conflict, are taken like texts for the actor's character: "If he loves you, he will respect you." If the domestic worker's response is not the best the facilitator reflects upon the alternatives with her to find one that is more appropriate: "Have him marry you." "But, I don't want to get married just yet, I only want to wait longer; what do I tell him?"

The interventions made by the domestic worker come from reflection of their personal situation. She identifies with the story being dramatized, which is evident from what she says. For example: "It's very little pay, they should pay you more;" "Tell the employers to pay your insurance."

The interventions by the domestic workers nurture the dramatization and give the actors/facilitators more tools to work with in developing the topic. The facilitator, as much as the spectator, makes the session's goal possible. Because of this the two are complemented and horizontality between the facilitator and spectator is produced in the interaction.

6. The Project

6.1. Sexual and Reproductive Education in Lima Night Schools

The project with the above name, fomented between Jan. 1st 2007 and Dec. 31st 2009, set the following goal: At the end of three years approximately 5,000 female and 3,000 male adolescents and young adults—all student in high school at various CABA (Centers of Alternative Basic Education) and those of ABE (Adult Basic Education)—the majority being domestic workers will have been informed about their sexual and reproductive rights.

For the execution of this project we count on the participation of a consultant from Unioni (Finland). From AGTR we have one coordinator, three facilitators and five volunteers from Finland's ETVO/KEPA⁷³ (some months of the year). At the same time, we have Peruvian and foreign volunteers from AGTR some of which are asked to collaborate specifically on this project.

The project was presented to 15 CABA. All agreed to partake in the project for the Advanced levels at their schools. In 2007 we worked with 4th and 5th grade classrooms; in 2008 with 3rd and 4th grade; in 2009 we are working with Initial and Intermediate levels that is, 1st and 2nd grade.

We record the attendance of domestic workers and male students who participate in at least one of the three sessions given that night students' attendance is usually not constant.

In the first months of 2007 three dramatizations were given, though the dialogues have been improved in these last three years.⁷⁴ Also during that time we created supplementary material like posters (these too have been modified).

Three information brochures were made as the different topics were being elaborated. The fourth brochure is complementary for it has frequently asked questions made by students and their answers.

Training for the facilitators developed through meetings, reading of manuals, books, Internet consultations and attendance to events concerning sexual and reproductive health. This is how it has been done in 2008 and now in 2009.

6.2. Dramatization as Participative Methodology

Our dramatizations as a method have the following characteristics:

The Element of Surprise:

Generally, domestic workers are unaware of the cultural activities that the city offers. We must point out that theatrical functions usually cross with their work or school hours and their monthly pay of around S/. 400 Nuevo Soles, around 138 US dollars, requires them to allot their money to necessities such as school supplies, transportation and helping their family. In the case that their pay is sufficient they spend it on clothes, make-up or cell phones. The majority of domestic

⁷³ Service Center for the Cooperation/Volunteer Program in Finland.

⁷⁴ In the DVD that accompanies this publication one can observe the three sessions, just as they were given in 2009.

workers have never been to the theater. All of a sudden not only do they witness live dramatizations, but these reflect their daily lives; this makes the impact all the more real.

Horizontality:

The theatrical game, plus the horizontal treatment we propose from the start makes it easier to establish a relationship of trust with the students.

Empathy:

To be able to put oneself in the place of domestic workers and the warm treatment we provide, contributes to diminish the distances produced by individuals with different life stories.

Sense of Humor:

When a domestic worker calls one of the facilitators “Miss”, a sense of humor is used to help her change the treatment she uses with her teachers and employers. The *clown* technique is also used to help them enter the game and express themselves.

6.3. The Three Dramatizations

- The objective of the *first dramatization* is to have the domestic workers know his/her sexual and reproductive rights⁷⁵ as well as understand that they should postpone motherhood and fatherhood until the appropriate moment. Another objective is to motivate them to use contraceptives, making this decision with their partner. This is done with the help of an expert, as it happens at health clinics.

It lasts almost an hour and three facilitators participate: one man and two women. We begin with motivational questions such as:

“Who knows one sexual and reproductive right?”
“What does it mean to have a ‘life plan’?”
“Have you been to a health clinic for a consultation?”

The dramatization focuses on a guy who proposes intimacy with his girlfriend. Worried, the girlfriend goes to a friend who recommends the couple go to a health clinic. There the obstetrician talks to them about their sexual and reproductive rights and gives them a brochure about contraceptive methods. Both are happy with the consultation.

⁷⁵ The rights that we worked with are:

1. Men and women have the right to know, love and respect our bodies.
2. Men and women have the right to freely choose his or her partner.
3. Men and women have the right to have sexual relations only when he or she desires.
4. Men and women have the right to be informed of and have available different contraceptive methods.
5. Men and women have the right to enjoy sexual relations without fear of being infected or having an unwanted pregnancy.
6. Men and women have the right to decide when to have children, and how many she/he will have.
7. Women have the right to have a safe pregnancy and labor in the best of conditions.

At the end, students are asked questions like:

“Who can tell us what our sexual and reproductive rights are?” (To encourage participation chocolates are given to those who participate).
“Has one of you thought about or come up with a life plan?”
“Who is encouraged to go to a health clinic after what he have talked about today?”

- The *second dramatization* has as its objective that the domestic workers know how to defend their body’s integrity and motive them to make the decision to abstain until they find the right partner.

It lasts twenty minutes and two facilitators participate: a man and a woman. After the presentation two questions are put on the table:

“Is it an obligation to have sexual relations with our partner?”
“What should we consider when we choose an ideal partner?”

The story deals with a couple that has been together six months. The young man asks his partner to have sexual relations arguing love, trust and the time they’ve been together. She, who feels harassed under pressure, turns to the spectators to ask for advice:

“Friends, can you help me? Should I or should I not give him the ‘test of love’?” (Students’ response).
“But, if I don’t give it to him he’ll leave me. For fear of him abandoning me, should I give it to him?” (Students’ response).
“Do you think if I do give him the ‘test of love’ he’ll love me more?” (Students’ response).
“But, being intimate with him will not make my relationship last longer. You know what? I prefer to wait.
“How can I tell him ‘NO’?” (Students’ response).

Finally, the young woman leaves her partner, making it understood that the relationship was not worth it because he’s not willing to respect her decision. Having finished the dramatization, the facilitator asks the following questions:

“What do you think of what we have just seen?” (Students’ response).
“The situation Pamela found herself in has happened to many of us, or maybe you know of a friend or family member that went through this. If this is so, what did she do?” (Students’ response).

Next, we propose a small game in which we introduce a “magical pot” where they will “cook up” the ideal partner; one they would like to have. For this we ask the audience for “ingredients” (qualities) to create the desired partner. The students simulate throwing in

the “ingredients” into the pot: “he should be kind”, “he should be a hard worker”. Afterwards, the same game is played through another lens: what *don’t* they want in their partner, to which the students respond: “he shouldn’t hit me,” “he shouldn’t be a liar.” The idea is for the audience to know what they want and what they don’t want in a partner.

Later in the same session we put forth questions and the answers are written on a flip chart:

“Is it an obligation to have sexual relations with your partner?” (After viewing and participating in the dramatization, we agree that the true test of love is to respect your partner’s decision to not have sexual relations and that young girls have the right to say ‘NO’. This stance can mean the end of a relationship but we stress that a partner that only wants to have sex is not worthwhile unlike one that’s willing to wait until she is ready).

Stemming from the “ingredients” given by the students we talk about what they should consider when choosing a partner.

- The ***third dramatization*** has as its objective teaching domestic workers how to protect themselves from STDs and HIV. This dramatization lasts about thirty minutes and three facilitators intervene: two women and one man. We use illustrations signaling male and female sexual and reproductive organs, a wooden penis model and condoms.

First we put forth motivational questions such as:

“How can our sexual organs become infected? How can we know our sexual organs are sick? What’s an STD?”

We later explain how to recognize, for both male and female, if our sexual organs or intimate parts are healthy or if they’re irritated or have been infected.

Afterwards we move to the dramatization about a couple. They have been together several months and he proposes they have sexual relations. She accepts but under the condition he use a condom. He resists accepting while the young girl tells him about the consequences if they don’t protect themselves. They both share their point of view with the audience and ask them for advice. Finally they agree to go to a pharmacy and buy a condom.

Immediately afterwards we offer an interactive discussion on the correct way to use a condom where it’s stressed that it’s the only method that protects against STDs and HIV but also from an undesired pregnancy. The session includes a demonstration showing the correct way to place a condom and we encourage the students to try it on the wooden model.⁷⁶

⁷⁶ We haven’t been able to do this exercise at all the CABA. The reason why is explained in the next chapter.

In 2007 there were successive retouches to the dramatizations generally to make them more conversational. For 2008 we saw it necessary to make modifications to the original structure of the dramatizations and their stage set-up. In 2009 we continued learning and looking for ways to make our work better.

6.4 The Three Sessions

In 2007, the three sessions carried out at the CAFE were in this order:

First Session

- That they know and understand their sexual and reproductive rights, and adopt healthy conducts.
- That they decide to postpone motherhood until the appropriate moment, having received schooling and work experience. (“To be a mother, yes; but not yet).

Second Session

- That they know how to defend the integrity of their body (“I love and will protect my body”).
- That they wait until they have an appropriate partner (“I demand a good partner”).

Third Session

- That they know how to protect themselves from STDs and HIV/AIDS.

Before the sessions we had an entrance quiz consisting of some questions for the students that could be answered freely (the answers were written down on a flip chart). Afterwards, there was an exit quiz with the same questions as the entrance quiz. To motivate participation we handed out chocolates to the students participating in the exit quiz.

We also asked the students to write down questions anonymously. Some of these were answered in the next session. This initiative helped the team a lot when evaluating the content and structure of the theatrical proposal.

We ended the session by handing out a helpful educational brochure. According to each session we would hand out: “I know how to demand respect for my sexual and reproductive rights”; “I know to value and love myself”; “I know how to care for my sexual organs.” The fourth brochure “Sexual Orientation: Questions and Answers,” was offered in the third session.⁷⁷

6.5 Modifications to the Proposal

Some changes were made during the second year, for example the dramatization *Saying No* became the first session; the dramatization concerning STDs and HIV/AIDS was kept as the second session and the one concerning sexual and reproductive rights became the last session.

At first we thought the session on sexual rights was necessary as an introductory frame. However we later noticed that for the necessities and demands of the students the *Saying No* session had a crucial characteristic since adolescents in the audience could relate more to the pressure’s

⁷⁷ The same brochures have been handed out these past three years.

coming from their partner (one of the reasons for dropping out rates of CABE students is pregnancy).

Modifications were made to the dramatization concerning sexual and reproductive rights. The situation where the couple visits the health clinic did not catch the domestic workers' interest, the theatrical proposal was very static and the fourth wall, that we wanted to avoid, was dangerously put up.

We opted then for a succession of brief frames each one about a specific right; this alternative came to be much more interactive, also proposing a competition among the students with the presentation of each scene.

This dramatization began with questions asking how we are to treat our sexual and reproductive rights:

“Who knows one sexual and reproductive right?”

“Have you ever gone to a health clinic for a consult?” (We later developed on the issue by laying out the seven sexual and reproductive rights).

A situation was dramatized and then we would ask which right was being violated or at the point of almost not being respected; on the other hand we also asked what rights were being respected. And as we mentioned the dilemma was put forth theatrically as a competition, women vs. men, half of the classroom against the other, to see who could come up with more rights, etc.

For example with the first right, “Men and women have the right to freely choose our own partner, the situation dramatized was of young ladies commenting if the young man they are observing would be a worthwhile partner. If comments would arise suggesting they choose this young man or recommending they look for another, immediately one facilitator asks: “What right do you think is not being respected?” And a round of answers from the students commences.

Another change concerned the issue of demonstrating the use of a condom in the session about the prevention of STDs and HIV/AIDS. The character of the girlfriend would end up being too self-sufficient and aggressive when suggesting her partner use a condom when it's proven that most adolescents take up this issue with much precaution and even embarrassment. We modified this character: asking the domestic workers in the audience, her equals, for suggestions showed her insecurities.

There was one more modification to this dramatization. During 2007 we closed this session with a demonstration on how to correctly use a condom. For this demonstration we used a wooden penis to show how to place the condom. We realized that this exercise restrained the female students. Almost no one would dare to replicate the demonstration: the majority didn't want to touch a condom and the general reaction was of nervous laughter and certain fear.

Also the teachers would see the demonstration with much apprehension and wasted no time in questioning whether this scene should be repeated next year. These reactions to a certain degree demonstrated the enormous difficulties in changing students' interpretations of their own sexuality as well clearly showing the limitations to teaching sexual and reproductive health in schools in popular sectors.

In 2007 the scene demonstrating the use of a condom was forbidden in two CABE but was acted out at the other 13 schools, though in the majority of these the uneasiness of the teachers and authorities was clear.

The team decided to take out this scene in 2008 and replace it with a more conventional explanation. The decision was not taken as a concession to the supposed prejudices but instead an attempt to work in a more coordinated and extensive way with the teachers. Also the impact, let's say, of confusion, on the students demanded that we avoid acted-out discussions that disturbed the objectives of knowledge, reflection and assertiveness that we desired.⁷⁸

We observed it was necessary to vary the timing of the sessions according to the schedule and the circumstances around the dramatizations. We soon notices the importance of taking into account the particularities of each space (it's not the same presenting the dramatizations in a gym or a small classroom), and to work having time work against us (many of the representations had to be shortened for we'd take too long setting up the stage, there'd be other school activities that would eat up our minutes or because upon arriving at the CABE we would be met with unbeknownst alternations).

Contact with the domestic workers at the CABE helped the AGTR team know about requests for orientation and help however it could. The students, both domestic workers and male students, have a lot of interest in learning about their sexual and reproductive rights and even more they ask for advice.

This can be seen on the one hand in the interest they show at the sessions (even with those who have rude comments), and on the other hand in the type of anonymous questions they would write down. The team saw for example that the sub par salary domestic workers earn a month⁷⁹ is a serious limitation to opting for birth control.

In addition domestic workers confront daily to *machista* attitudes in their social environment. In the CABE this manifests itself in the gross comments made by male students during the sessions.

At the same time when she gets out of school she finds herself in violent situations including dangerous gangs that circle the area.⁸⁰

⁷⁸ In 2009 we will evaluate if this demonstration is convenient or not, depending on the group, teachers and authorities.

⁷⁹ Approximately 95 US dollars in 2009.

⁸⁰ In 2005 the city police estimated that in Lima there existed more than 200 gangs with more than 4,000 adolescents between the ages of 11 and 17, (The *El Comercio* Newspaper Archive, 27/04/2006).

Another problem emerges when, despite their best intentions, teachers are usually conservative persons. That is they prefer imposing their ideals more than respecting their students' capacity to decide for themselves when it comes to their sexuality. This results in confusion for the students, for example in confronting their teacher's position that they should abstain until marriage; many come from areas where it's natural first to live together then get married (when it's possible to finance the ceremony). In addition, the presence of single mothers is common in their social world.

It's also the case that teachers present themselves as conservative because it's the politically correct thing to do in their profession; that is, they don't want to be exposed to critique from their authorities, other colleagues or even the parents because of insufficient protection of their child's moral values.

7 Concerns and Testimonies

7.1 From the Domestic Workers

In addition to the interactive games and the theatrical proposal that includes all students in the debate on sexuality, another space where we could trace their preoccupations and concerns for their sexual and reproductive health was in the questions they'd write down. Because they are anonymous we could trace a more sincere manner of showing their doubts. The questions could be grouped into three topics:

Firstly, we have the questions about sex and sexual health. The majority of students wanted to know when is the right time to have sexual relations. They also asked about different forms of contraceptives. They wanted to know when a person presented the symptoms of an STD, if you could have sex during a pregnancy or menstruation or what to do when a condom broke during sex.

“Is it necessary to marry before having sexual relations?” (Young female domestic worker, 14-17 years old).

Later we had questions about communication and trust with your partner. The majority of questions dealt with the problems of fidelity in a relationship and how to tell your partner you're not ready to have sex, that you have fear.

What should I do if my boyfriend breaks up with me over lack of trust? (Young female domestic worker, 18-26 years old).

There were a series of questions that we will label questions about love. They were general questions and demanded a subjective answer. They wanted to know if a long-distance relationship could work, or you find the right partner. Students wanted to know how to say: “I love you”. A question frequently asked by women was how to recognize if the other person truly loves you.

Is it true that a man who has you meet his family truly loves you? (Young woman, 14-17 years old).

Why are people scared of falling in love? (Young female domestic worker, 14-17 years old).

Having finished the dramatizations and the written question portion the AGTR team would collect personal testimonies. With these, the positive and optimistic opinion of students would shine. They would emphasize the importance of talking about sexual and reproductive health issues (because the spaces and moments to talk about these things is highly reduced, if not inexistent in their lives) and discovering that respect is the foundation of a relationship. In addition, the idea of respect goes hand-in-hand with self-esteem and a guarantee against a partner's betrayal and abuse.

"Well, I thought the talk was good; this way you can orient us on things that we don't know about and don't share with our families. I found it excellent to listen to this and have you orient us because there are things I would also like others to talk about: sexuality and those things, because I sometimes am afraid of talking with my family and now I can share more." (Young woman. 19 years old, 3rd B).

"Truthfully, it was great; I liked it, it was the first time I've seen [a dramatization]. I liked what the Miss did, who acted with the guy and what she said about couples, that they should respect each other. I thought it was important to have a better relationship and also not demand more from one's partner." (Young woman, 3rd A).

"The exposition was very good; think right, make decisions for one's self, and value myself as the woman that I am. Thank you." (Woman. 3rd)

"I liked the one about the couple that should respect each other." (Woman. 4th).

"I thought the theater was very nice because, since my parents have never given me advice and I've always been alone here [in Lima]. They've also never been affective and they don't explain things to me, I don't have anyone, when I come to class I listen and learn. There's one guy or person that I could like. (Woman domestic worker, born in Apurimac. 18 years old. 2nd B).

"I thought this was very nice because a man should always respect a woman. Having a good relationship means respecting each other." (Woman. 3rd).

"I thought it was excellent and it was good advice to reflect upon, though I don't have a partner but it will be of much help. Thank you. (Woman. 3rd).

"I thought it was really lovely, I am learning about self-esteem. I'm from a province and was raised without a father, only with my mother and I haven't received this advice from her. You know those of us from provinces are more timid; here I am loosening up practically alone." (Woman. 4th).

“It was very interesting and we’ve learned new things, guys don’t want to put on a condom and sometimes they say they do only to lie to us.” (Woman. 4th).

“Excellent to stay informed and be able to take care of our bodies”... “It’s nice to learn more about our rights”... “I didn’t know we had rights”... “(It was) nice all that you’ve taught us and entertaining with the prizes.” (Students from one CABA in Miraflores).

7.2 From the Teachers

We put into three groups the opinions from the teachers. Some professors were impressed with the way the dramatizations connected with the students, others were enthused with the pedagogic method of communication used by the AGTR team, though there were also teachers who were indifferent about the sessions, leaving the classroom to take care of other business.

And so, we have teachers who were very motivated with AGTR’s theatrical proposal, having a positive attitude towards our work and even hoped we could come to their school more often.

“Truthfully for me, the talk was very pleasant. Very didactic. I congratulate you because I think the girls have taken in a lot and they need these types of talks because they are practically alone, they’re in need of a lot of orientation: what we give them and much more, your team reinforces us. Excellent. A very good job. I truly congratulate you.” (Math teacher and 5th grade tutor. CABA Juana Alarco de Dammert).

“It was positive, kids should be informed about contraceptive methods. Most of them are domestic workers. We’ve had cases of students who became pregnant and were dismissed from their job, having to ask for help. I am a biology teacher and whenever I can I explain how to take care of their bodies and health. We can’t ignore these things, many are already sexually active and should be informed.” (1st and 5th grade High School teacher. CABA Jorge Chávez).

“It was excellent. First, because the kids understand more with this dynamic, they reflect more upon their problematic. Much of the time we present the problem but they see it as isolated, now they are involved, they’ve experienced the situation, and at the same time they’ve carried it out in an entertaining way. The important thing is they leave with different perspectives, they leave with other objectives and they understand the ideas more clearly. They girls in my group commented and have left more calm, because they always talk amongst each other but they don’t express it; there’s no one at the school who will confront the problem so directly.” (Teacher, CABA Scipión Llona).

“The talk was very interesting and appropriate for the level, in the same language student’s use. In my view, it has been understood in its totality. And so it’s been very adequate for which I congratulate the artists of the talk.” (Director, CABA Hipólito Unanue).

“I am very satisfied and thankful for your support, because through you my students learn how they should act in reference to sexual activity. They are just at that stage of discovery and, what better than to have a prepared group of people, with the right material, come bring knowledge to these kids who are of different ages! This has allowed them to be conscious about taking care

against STDs and HIV/AIDS. Thanks to the representatives of La Casa de Panchita. By way of theater, that was very entertaining and interesting for everyone, because not everyone knows how to read and write, they have understood [the concepts] and it has filled them with satisfaction in such a simple way that has turned out to be very valuable. Thank you.” (Teacher, 5th A, EDJA⁸¹ Angélica Rechare Corrales).

“The presentation was very nice; I really liked how you teach the subject to students principally about the control they should have when facing their partner. Yes; I liked it a lot, and you should come more often and do it with the students in 1st and 5th grade in high school.” (Teacher at the CABE Federico Villareal, 4th B).

However, we also had critiques relating to the content of the dramatizations. Especially for omitting aspects that some teachers considered should be taught in any lesson on sexuality like natural contraceptive methods; or for not putting emphasis on teaching moral values.

“The talk today has not been balanced, they haven’t been taught that for there to be an union there should be love. They’ve also not been taught about natural contraceptive methods. They have a different reality than yours and mine and their cultural level is not the same as ours. One should always start from the spiritual and not from the material. They see having sex as being natural, and to have sex there are requirements, especially love and affection.” (Biology teacher. CEBA Scipión Llona).

“I though it was a simple talk but also that the students have understood with the given examples. Instead, I would have liked for you to explain other methods to the kids, right? I see that you have touched upon only one method, the use of a condom... but I think there are other methods you should have also talked about, like natural methods, for example, that are the most recommended when one has a partner.” (Teacher. CABE Ricardo Palma).

“I congratulate you on the performance; it was really good but I recommend that when you talk about the methods, you tell them it’s better to wait, that you not provoke them to have relations just because it’s their right, that’s a pretext. They can use methods to avoid young girls from getting pregnant or getting STDs, but it’s better you highlight values and that relationships be with the one they’ll love for the rest of their lives. I teach religion but I’m not a fanatic, I just want them to wait and plan their lives.” (1st and 5th grade high school teacher. CEBA Jorge Chávez).

Suggestions were also made in regards to the method:

“Observing the talk you have given, I will say something very important; maybe before we’ve given talks about sexual education but we were missing the artistic side you’ve used to take on the issue. This has enabled you to sensitize the students better; I’ve seen them leave motivated. As you have noticed, they are a little introverted regarding their problems. I suggest the characters have an appropriate attire and maybe have a musical background they can relate to

⁸¹ An EDJA (Education for Young Adults) is an academic (nocturnal/night) institution with a different format than a CABE, but that will merge into the CABE program in 2010 at the latest.

better, right? Participation from their side, to you, that they be more integrated in the dramatization; have them participate.” (Coordinator of the *Innovation, Improvement and Good Quality Education Project*, CABE Elvira García y García).

There was a third group of comments that made reference to the realities experienced by their students, showing a common interest to have their students know how to confront dilemmas about sexuality.

“Some students think that having relations is a sport, and they can have a partner today and another tomorrow, and that’s just not how it is. I think that now you have exposed these limits, these dangers, taking care of yourself, knowing how to choose and being responsible, I think is very fitting. Very good, because this is what the kids need. I thank you for being here; I think this has been very fitting. We should be present [the teachers] because we are in class time and should be accompanying them and, well, sometimes teachers think we already know a lot and it’s not necessary, but I think it’s also necessary to be there. Thank you.” (Communications teacher. CABE Elvira García y García).

“I think it’s excellent because of how you’ve presented a real life situation. These adolescents need this type of orientation from a third person. We teachers orient, but I think they understand better in a more existential way. The way in which you have dramatized it I think sticks better than a good class taught by a teacher. I suggest this be permanent, at least once each term.” (Teacher at CABE Rosa de Santa María 3rd grade high school).

“I have loved how you explained it to the kids. It’s mostly so they learn and not be lied to so easily. I’m an adult but am always concerned for teens who are in problems.” (Teacher 2nd C, CABE Juana Alarco de Dammert).

“Interesting, because this way lets the kids loosen up, because sometimes they are a little tied up because they are shy to speak. Like I was saying to José [AGTR facilitator] we are going to take up this performance so they can practice it in the classroom. Also excellent is the recyclable material we can try out.” (Teacher. CABE Hipólito Unanue).

7.3 From the Volunteers

Peruvian and foreign volunteers participate in this project. They support the team in diverse ways: preparing helpful material, registering the number of participants, motivating, acting in some dramatizations, organizing the questions, collecting testimonies and participating in meetings for readjustments.

Many volunteers had not seen this type of information concerning sexual and reproductive health be delivered in such a way but maybe what surprised them the most was the student reactions, who could give enthusiastic remarks, or sometimes machista or aggressive remarks.

“I am very happy to be here with the kids. It’s really incredible that you can motivate so many of them, late into the evening, and achieve this; it’s a very good thing. The students are completely

involved. I liked that they were animated throughout the whole thing.” (Ralph, English volunteer, visitor from Anti-Slavery International).

“I think it’s very important that this issue is touched upon with domestic workers, especially with this type of dynamic that helps them understand it better. What I have seen is that they continue to pay attention by being involved, because when they are asked and make jokes they are obligated to pay attention, otherwise they will be embarrassed for not knowing what to say or say something totally out of place.” (Fulgencio, Peruvian volunteer).

“I thought the work was achieved within the planned objectives. The kids were very involved in the topic and they captured the message. I think we should coordinate better with the school administrators to insure a more appropriate space and communicate with the students.” (Zenaida, Peruvian volunteer).

“The kids usually understand but they don’t use some words like sexual relations. There are other words that can be used, easier; those are words that are too long and not often used.” (Merita, volunteer from Finland).

8 The Results

8.1 To whom and to how many do we reach out to?

During the first years of the project we have reached out to a total of 6,021 students from 15 CABE in Metropolitan Lima. In 2007 we reached out to 3,474, and in 2008 to 2,547 students. During 2009 we have completed sessions with more than 2,000 students in order to reach the goal of 8,000 students in the CABE in Lima.

In 2007 and 2008, we see that two-thirds of the benefited student population was female and out of all of them more than 80% were domestic workers. In fact, the importance of CABE as a privileged space to locate, contact and inform domestic workers has been proven. Another valuable number is that within the group of domestic workers there are an equal number of girls in the ‘14 to 17 age group’ and the ‘18 to 25 age group’. Both groups added up equals 90% of the domestic worker population in the 15 CABE.

We’ve maintained the participation of almost all schools we started the project with. In the second semester of 2008 we ceased to work at one school due to internal problems at that CABE foreign to our initiative. In 2009 not only were we able to replace that school but we have also added one more CABE.

In almost three years we’ve been able to maintain a harmonious and efficient collaboration with authorities and teachers.

8.2 Changes that Occur within the Domestic Worker

When using this methodology the following changes within the domestic worker have occurred.⁸²

She identifies herself as a domestic worker

Many domestic workers say they are living with a “godmother”, preferring to consider themselves a “godchild” instead of a worker without pay. The dramatization allows them to “visualize” the labor relationship. Before starting the dramatization, it’s possible to find testimonies like this one:

I’m not working right now; I’m helping my sister. She only gives me lunch, gives me fruit, breakfast, everything. Sometimes she buys me clothes. In her house I clean, sweep, clean the bathroom, nothing more. (Age 14).

By having the main character be a domestic worker who admits to being one, helps the students accept who they are. And relating to the character makes the worker be involved with the story, for in the end it’s “her” story.

She dares to express what she feels and thinks

The domestic workers who study at night are not very participative; they even fall asleep at their desk.

The majority wake up very early they do the chores around the house and almost always leave late for classes. After classes they go to sleep very late, for they arrive at the employer’s house to wash the dinner dishes and some wash clothes at night. They use up sleep hours to finish homework and wake up early, once again, the next day.

The dramatizations as an interactive performance keeps them alert and the bits where the character asks the domestic workers for help solving a conflict motivates and encourages them to express what they feel, what they think.

As such they “act in a verbal manner” upon what they would do if they were in that situation themselves.

She comes to understand she has rights to protect

Knowing there is a law that exists to protect them motivates them to verbalize any doubts they could have about it.

The older domestic workers, above all, commented during the session about rights and duties; that when they started working there was no law and they had worked for years without any of the rights we had talked about being respected.

⁸² Some of these changes also refer to other dramatizations made by AGTR, not necessarily to the three shown in this publication.

She sums the courage to express her problems

Much of the time at the end of the session the domestic workers would approach us to talk about their own situation; they have a great necessity to be heard and at that moment had the courage to talk about their problems.

My aunt brought me (from a province), I work at her house but she doesn't pay me. Can you find me a job at La casa de Panchita?

In some cases, they've talked about situations of abuse or even sexual abuse. We should point out that AGTR has helped in the ways it can.

She knows of a place for protection

Many of them don't have a place to go on their rest day (usually Sunday). At each visit we invited them to La Casa de Panchita where they have the possibility of taking diverse workshops for free that help them empower themselves.

Even if it's the case they can't make it to La Casa de Panchita they have it as a very real option. They know that every Sunday of the year this place will be open to receive them. This generates a sense of security.

She realizes she is not alone

In the dramatization about self-esteem, the worker realizes that the discrimination she suffers is not something that only happens to her. This is very important because she finds examples of other workers who have had the same problems and confronted them.

A reevaluation of her cultural identity is produced

All domestic workers confronted with a discriminatory and racist society look for fast acculturation. Thus they modify their clothing and avoid revealing they speak quechua.

In the self-esteem session we motivate the workers to let us know they speak quechua and have them teach us to say some words in the language demonstrating our appreciation for their culture of origin.

She feels capable of uplifting her self-esteem

An exercise we do, place them in partners, have them look into each other's eyes and say something nice finishing with a hug is one that comes to be very difficult for them but when they do it it's very fulfilling. There were workers that when asked when was the last time someone had said something nice to them they replied, "I don't even remember anymore," and later they'd comment on how good it felt.

We know that in one session we can't change their self-esteem but small existential exercises give them a good feeling about themselves and towards their peers.

There are sessions that are more difficult than others; the number of students that participate in the self-esteem session is influential: less students means more intimacy and confidence when doing the exercise. Male student presence is also influential: they, even if a minority, appropriate with more ease the space than women do.

She is conscious of her rights as a woman

In the two sessions relating to relationships, assertiveness to confront the pressure of her partner to have sexual relations and assertiveness to prevent STDs/HIV, the workers realize that it has happened to them or has happened to other friends. It's possible that what they suggest to the character they will tell their own partner. They learn about the risks of ailing their sexual organs and/or having an undesired pregnancy.

Some erroneous myths are left behind: "If my private parts burn, will a cleanse heal me?" "I will not get pregnant on my first time."

To find the necessary strength to confront the pressures coming from their partner they will turn to advise from the facilitators, asking questions about "the case of a friend" or directly in a more personal manner.

The totality of these changes is part of the process of their empowerment.

8.3 Other Findings

- Deficiencies in infrastructure, furniture and equipment: creatively confronting these difficulties, the problems can be surpassed. Additionally our work methodology is very simple and it's possible to recreate in almost any space.
- The topic of sexual and reproductive health was not considered in the 2007 Annual Work Plan as content to be developed in class: by way of dialogue with directors and teachers it was incorporated in 2008.
- If a session has been scheduled with a date and time that coincides with a class taught by a teacher hired privately the class has preference for he/she must comply with the contract: we should understand and respect the administrative business of the CABE.
- Directors and teachers usually forget the written schedule agreed upon in March with the AGTR team: always remind them one or two days in advance of the date and time of the session.
- It's not common for directors and teachers to inform beforehand of last-minute changes or cancellation of sessions: it's necessary to constantly reach out by calling cell phones or house numbers (it's very difficult to communicate by a CABE phone number).
- Deficient communication or conflictive relationships between directors and teachers: coordinate with both, present a plan of action in a reunion with all teachers, do not opine about internal CABE situations.
- Directors and teachers who think they are doing us a favor giving permission for the session: through dialogue, make them feel they are an important aspect of the work since they know the students the best and can assist them.

- The feeling some teachers have that this is a way of competing with them: have an open dialogue so they understand we only want, along with them, to help domestic workers and the male students.
- Absence of teachers in the sessions: motivate them, asking and listening to their opinion; have them realize that without their commitment no positive change can be made to teaching not only in the topic of sexual and reproductive rights.
- Teachers' values and beliefs: be respectful of these.
- Impossibility of follow-up consultations with the domestic workers: collaborate with teachers to bring attention to these cases.

Despite the recent reduction in students, the CAFE are privileged places to massively access domestic workers. However those who wish to work coordinating in collaboration with a CAFE have to know the complexities of their labor and arm themselves with perseverance and positive attitude.

To summarize, we learned that to work in schools it's necessary to deepen the alliance with directors and teachers. And despite the difficulties we feel that just like us they too are content with the accomplished progress.

The similarity of the CAFE and AGTR objectives for the good of the students (in our case especially for those who work in domestic service), created the possibility of a deeper and stronger collaboration.

Bibliography

(Bibliography can be found in the original Spanish publication).

Appendix

Session 1

Objectives

1. Defend the integrity of our body
2. Decide to wait until you have found the right partner.

Duration of Activity: 60 minutes

Facilitators: Two. One man (CH) and one woman (CM)

Supplementary material: A pot, tape recorder, colored markers for paper and flip chart, informative documents.

1. Presentation

We are (name of facilitators). We come from the Asociación Grupo de Trabajo Redes (AGTR), where we assist domestic workers.

2. Attendance

We record attendance.

3. Motivational questions

Today we will learn to defend the integrity of our bodies and to wait until we have found the right partner.

- Is it an obligation to have sexual relations with our partner? (The answers are written on a flip chart).
- What should we consider when choosing a good partner? (The answers are written on a flip chart).

4. Develop Topic

CM: We are going to tell you a story about a couple, Luis and Pamela; they have been together six months. He wants to ask her for something, so let's see what she will respond.

(Luis is at the park, Pamela has not arrived yet; Luis asks the students about her).

Luis: (Talking to the students) Friends, have you seen a girl with glasses and red hair around here? She is my girlfriend and we agreed to meet at this park. (Response from the students). (In comes Pamela).

Pamela: I'm sorry for being late; it's just that my employer asked me to change the baby at the last minute.

Luis: It's all right, babe. You know, today marks five months that we've been together.

Pamela: Yes, it's true... isn't it wonderful?

Luis: Tell me, you love me right?

Pamela: Of course I love you.

Luis: So, why don't you prove it to me more?

Pamela: More? But how?

Luis: Well... giving me the test of love.

Pamela: The test of love?

Luis: You know, don't pretend, if I love you and you love me, why don't we do it? I will take care of you, nothing will happen to you. Come on, tell me yes. Or is it that you don't trust me?

Pamela: (Talking to the students). Friends, can you help me? Should I or should I not give him the test of love? (Response from students). But, if I don't give it to him he will leave me. For fear of him leaving me, should I give the test of love? (Response from students). Do you think if I give him the test of love he will love me more? (Response from students. If they say yes, Pamela will say,) But sleeping with him will not make the relationship last longer. You know what? I prefer waiting. How can I tell him 'no'? (Response from students). (Pamela approaches Luis).

Luis: So my love?

Pamela: The truth is that I prefer to wait; I don't feel ready yet. I think I can prove that I love you in other ways.

Luis: What? What are you talking about? Don't talk nonsense.

Pamela: It's not nonsense. If you really love me you will wait.

Luis: Then, we are over.

Pamela: That's a shame, because this means you only wanted to have sex with me! I thought you were worth it. It's your loss. (She leaves him alone on stage).

CM: What do you think about what we've just seen? (Response from students). What happened to Pamela maybe also happened to a lot of us or maybe you know of a friend or family member who has gone through this, if that's the case, how did that person respond? (Response from students).

CM: Now, let's play a game. We have here a pot; this pot is magical. In it we will make a delicious dessert that will transform into the partner we would like to have. It will have to be a partner we all like, for we will all make it but don't worry there will be enough pieces for everyone. For this, we will need you to give us the ingredients you'd like this partner to have. For example, we can put in ingredients like: "that he be funny", "that he be affectionate", "that he be hard working". Any characteristic that you think is important. (They play the game).

CM: Here we have the ingredients of the ideal partner. But just like there are ingredients that we would like this partner to have there are also other ingredients that we would *not* like it to have. Quickly, let's say the ingredients we would not like the partner to have: for example, "that he not hit us", "that he not be a liar", "that he not reproach us for things we have told him about our past". (They play the game). We have thrown in these ingredients so that when we meet a boy we remember to avoid people who have these, for it's better to be alone than in bad company. Now we know what want and don't want in a partner.

CM: Now we will answer the following questions:

- What does the "test of love" really mean to you? (The answers are written on a flip chart).

Generally we think that the “test of love” is when our partner asks us to have sexual relations to show that we love them.

- Is it an obligation to have sexual relations with our partner? (The answers are written on a flip chart).

No! We have proven today that the true test of love is not having sexual relations. We have the right to say: “No!” But it doesn’t mean it’s our fault instead it means these guys are not worth it. The one who’s worth it will come and will wait.

- What do we have to keep in mind when choosing a good partner? (The answers are written on a flip chart).

CM: If you have any questions you can write them on a piece of paper we gave you at the beginning of the talk and we’ll answer these on our next visit. Read the brochure we are handing out. If you have questions you can visit us at La Casa de Panchita.

Session 2

Objectives

1. Learn how to protect ourselves from sexually transmitted diseases (STDs) and HIV.

Duration of Activity: 60 minutes

Facilitators: Three. Two women (CM) and one man (CH).

Supplementary Material: illustrations of sexual and reproductive male and female organs, informative documents, tape recorder, 4 flip charts, colored markers for paper and whiteboard, model of male genitals and condoms.

1. Presentation

We are (name of facilitators). We come from the Asociación Grupo de Trabajo Redes (AGTR), where we assist domestic workers.

2. Attendance

We record attendance.

3. Motivational Questions

How can our sexual organs become sick? How can we find out if our sexual organs are infected? What is an STD? (Response from students).

4. Develop Topic

CM: Women and men know that our sexual organs, our intimate parts are OK when we feel good, comfortable. On the other hand if they are affected, we feel discomfort.

In the case of women, what signal warns us that our sexual organs are sick? (Response from students).

1. If from our vagina there's a flow of a greenish or yellowish fluid that can have a bad odor. Doctors call it excretion.
2. If our private parts are swollen, or we feel an itch or burn.
3. If we feel pain in the lower abdomen or pain like a cramp in the area where our ovaries are or inner thighs.
4. If around the vulva or anus we have wart, sore or injury.
5. If there is a ganglion or swelling close to our groin.
6. If we have pain when having sexual relations.

CH: In the case of men, what signs warn us that our sexual organs are sick? (Response from students).

1. If when we urinate we feel pain, itching or a burn in the penis or testicles.
2. If the penis or testicles become swollen.
3. If puss comes out of the penis.
4. If around the penis, testicles or anus there are warts, sores or an injury.
5. If there is a ganglion or swelling close to our groin.
6. If we wake up in the morning, the penis excretes a single drop of transparent liquid.

CM: If men and women observe one or more of these signs he or she should go to a health clinic as soon as possible. With some illnesses or infections the pain will subside but that doesn't mean you have healed but that the infection remains inside your body. That's why you should always consult with a doctor.

Now we will learn in what ways male and female sexual organs can become ill.

CM: Female sexual organs can get infected in two ways:

1. When we inadequately cleanse our private parts:
 - When we don't clean ourselves properly after doing number 2; the correct way is to place the toilet paper over the anus and pull it up, towards the back.
 - If we do internal cleanses the correct way is to rub clean water from the outside because only its natural moisture cleanses the vagina inside.
2. When some changes occur in our bodies that cause our body's defense mechanisms to break down.
 - In the case that we become pregnant.
 - In the case we are taking antibiotics.

CH: Men as well as women can get sick if a sick person infects them.

You can contract an infection when blood, semen or vaginal moisture of a sick person enters the body of a healthy person during sexual relations.

Doctors call this type of infection a Sexually Transmitted Disease (STD). If you let time pass without being treated, some of these infections can harm other organs in your body.

The Human Immunodeficiency Virus (HIV) is an STD that has no cure; it progresses to AIDS, the consequence being that our body's defense mechanism is weakened so much we can contract other illnesses leading to a terminal state.

CM: Now we will have a brief dramatization about a couple. They are Martín and Fiorella. They have been together seven months. They are walking through a park and Martín proposes something to Fiorella.

(Fiorella and Martín at the park).

Martín: Come one, babe! We have talked about this before! You know I love you a lot, are you not aware of that yet? Tell me yes!

Fiorella: I don't know...

Martín: Come on, you want to too, or do you not feel like it?

Fiorella: Ok... but... do you have a condom?

Martín: Condom? Oh no. I don't use ponchos or caps!

Fiorella: Then, maybe not. If it's not with a condom... No!

Martín: What? But you already told me yes. The problem is you don't love me.

Fiorella: Is he right? What do you guys think? Should I accept or not? He should use a condom, right? (Response from students).

Fiorella: Look Martin, I do love you but you know what? We have to take care of ourselves. Are you not aware we can contract an STD or even AIDS?

Martín: AIDS! Hey, what's the matter with you? I am healthy. (Shows his muscle).

Fiorella: Hmm, from the outside you look good that's true, that's why I like you, right? But, what about the rest? Or am I really the first one you will be with?

Martín: Well... umm... I... Well, the truth is that you're not but I know who I've been with! Only with quiet girls.

Fiorella: Ha! That's not enough. (Talking to students). You feel the same way? How do you know who is a quiet girl? How do you know if that girl has not had sexual relations without a condom and now has an STD? (Response from students). Don't you know that sleeping with someone also means sleeping with her past partners?

Martín: What are you talking about?

Fiorella: What? You don't know? (Talking to students). You guys didn't know either? (Response from students). Although you look healthy you don't know if you are infected. The only protection against an STD is using a condom.

Martín: (Talking to the students). I have been to a health clinic because I was "burnt" before.⁸³ And, if I do have one of those things that doesn't bother men but that a woman can be infected with? But, don't you think Fiorella is distrustful? Why will I do what she wants me to do? Besides, it doesn't feel the same with a condom! What should I do? (Response from students).

Martín: The truth is, Fiorellita, I can't be that unfortunate! Do you really think I will infect you with an STD?

Fiorella: If I tell you this it's because I love you and I love myself too. But if you don't agree we will leave it at that. You don't have to accept what I ask from you, and neither do I. We are equal.

Martín: C'mon babe, don't be like that. Mmm... Ok! We will do it with a condom. But at the beginning, can we do a little bit without the condom? Just the tip, then I'll take it out and put on the condom.

Fiorella: (Irritated) You can't be serious, Martín...

Martín: Why babe? Nothing is going to happen right guys? (Response from students).

Fiorella: Of course something can happen, don't you know that a man does not have to ejaculate inside a woman to infect her or get her pregnant? There is a fluid called pre-ejaculation fluid that contains spermatozoids, the same as semen, and can leave a woman pregnant or infect with an STD.

Martín: Really, love? Jeez! I didn't know... I'm lucky to have a girlfriend who is so informed, don't you think so guys? (Response from students). Forgive me Fiorella, we are idiots those of us who think our girlfriends are "easy" because they know how to take care of themselves.

Fiorella: Ok love, besides what's important is that we communicate with each other and if something bothers us we say it and we don't stay quiet... You know what?

Martín: What?

⁸³ To infect someone with an STD.

Fiorella: I've heard that with a condom it lasts more.

Martín: Yeah?

Fiorella: Yes.

Martín: Let's go right now to the pharmacy and buy one.

Fiorella: Let's go. (Both exit stage).

CM: What have we just seen? Why did Fiorella ask Martín to use a condom? (Response from students). It's very important to use a condom to protect yourself from STDs and HIV/AIDS.

CM: A condom is the only method that on top of preventing a pregnancy, it protects us from getting infected with an STD or HIV/AIDS. It's very important men and women know how to use it correctly.

The condom should be bought at a pharmacy, not at any store. If it's hit by the sun or stored improperly it will get damaged. Before buying, you should check the expiration date. It can say EXP next to the date, which means it's good for use only until that day.

We will demonstrate how to put on a condom correctly. (Take out the model and condom and do the demonstration).

1. We have to make sure the packaging is not damaged. That is, we should press it softly and should feel a little inflated.
2. We open the packaging at the opening with our fingers, not teeth, scissors or knife since damage could be made to the condom.
3. The border of the condom should be on the outside to unroll it carefully.
4. We place the condom over the penis pressing the tip to let the air go. This is very important because this sack must hold the semen. If air is kept inside it may burst.
5. Afterwards you unroll the condom slowly covering the entire penis. You shouldn't use Vaseline or other type of lubricants/greases; the condom is already moist enough to easily unroll. If grease is applied it'll be ruined.
6. The condom should be placed before the penis touches a woman's private parts. After sex the condom should be removed before the penis softens. It's removed with the hand to avoid the semen from dripping.
7. You tie the condom into a knot and throw it away in a trash can, not a toilet.
8. A condom should only be used once. You cannot wash it. You have to use a new one every time.

CH: Who wants to try it so we know you've understood? (We show the model of the penis).

CM: It's better to get it wrong right now and not when we find ourselves in the real situation with our partner. (The students who wish to try it will place the condom on the wooden model).

CM: Now we will ask some questions to reinforce what we have learned today.

1. If someone tells us that a woman who has an infection in her sexual organs its because she had sexual relations with a man and he infected her; is this true? Why? (Response from students).

(Women can have an ailment in their private parts without ever having sexual relations. The cause could have been poor hygiene or changes in her body that produced a weakened defense and the infection.)

2. People who have been infected with STDs look sick and weak. Is this true? Why? (Response from students)

(A person may look healthy and have an infection or ailment in their sexual organs; it's even possible the person doesn't know of he/she is sick).

3. There are people who think only prostitutes and homosexuals get STDs and HIVE/AIDS. Is this true? Why?

(Anyone could be infected with an STD or HIV/AIDS. It only takes having sexual relations once, with one person and without a condom to get infected).

CH: Do you have any other questions? (Their questions are answered).

CH: If you wish to talk more about this issue or other issues you can come to La Casa de Panchita. We are there every Sunday from 9 am to 7 pm. We are going to hand out a brochure.

Session 3

Objectives

1. Know and understand our sexual and reproductive rights.
2. Understand it's important and possible to hold off on parenthood until a more appropriate moment.
3. Motivate to have healthier conducts by deciding, with your partner, to use contraceptives with the orientation of a prepared person from a health clinic.

Duration of Activity: 60 minutes.

Facilitators: Three. 2 women (CM) and one man (CH).

Supplementary material: Seven sexual and reproductive rights posters, information brochure, tape recorder, flip chart with seven sexual and reproductive rights, blank flip chart, colored markers for paper use, chocolates and condoms.

1. Presentation

We are (name of facilitators). We come from the Asociación Grupo de Trabajo Redes (AGTR), where we assist domestic workers.

2. Attendance

We record attendance.

3. Motivational Questions

Today we will discuss our sexual and reproductive rights.

- Who knows one sexual and reproductive right? (Answers are written on a flip chart).
- Have you ever been to a health clinic for a consultation? (Answers written on a flip chart).

4. Develop Topic

CM: Here we have seven sexual and reproductive rights:

1. Men and women have the right to know, love and respect our bodies.
2. Men and women have the right to freely choose his or her partner.
3. Men and women have the right to have sexual relations only when he or she desires.
4. Men and women have the right to be informed of and have available different contraceptive methods.
5. Men and women have the right to enjoy sexual relations without fear of being infected or having an unwanted pregnancy.
6. Men and women have the right to decide when to have children, and how many she/he will have.
7. Women have the right to have a safe pregnancy and a labor in the best of conditions.

CM: Now that you know what they are, we're going to play a game. We're going to perform small situations in which you will have to guess which right is being violated, which one is about to be disregarded or to the contrary one that is being respected. Understood? OK, first situation.

(Present it as a competition, women vs. men, half of the classroom vs. the other half; who will guess more rights?).

1. Men and women have the right to freely choose his or her partner.

(Young man from afar tying his shoe.)

Ágata: My friend, that's the guy you should be with.

Lilly: But... I don't know, I don't like Pedro.

Ágata: It's all right with Pedro. Pedro is cholito,⁸⁴ Luis has light-colored eyes. Come on, talk to him.

José: What right do you think is not being respected? (Response from students).

2. Men and women have the right to have sexual relations only when he or she desires.

José: Come one, babe, I know you want to.

Ágata: I don't know. I still don't feel prepared.

José: Don't be difficult; look how much time we've been together, say yes, prove to me you love me or do you want me to go?

Ágata: I...

Lilly: What right do you think is not being respected? (Response from students).

3. Women have the right to have a safe pregnancy and labor in the best of conditions.

(Young pregnant woman carrying two chairs and a backpack).

Lilly: Friend, you shouldn't be picking up such a load, you could get hurt. How far along are you?

Ágata: I don't know, around four months.

Lilly: What? You haven't been to the doctor?

Ágata: I don't have insurance. (Health insurance).

Lilly: Insurance is important, as are your monthly check-ups. Why don't you ask your employers if they'll give you insurance?

José: What right do you think is not being respected? (Response from students).

4. Men and women have the right to enjoy sexual relations without fear of being infected or having an unwanted pregnancy.

José: Well, love? What do you say?

Lilly: OK. Last time you were able to wait for me and I liked that. Now I feel prepared.

José: Of course love, I love you. Shall we go?

⁸⁴ Cholito is a form of the word cholo, which is a racial connotation applied to people of mixed race (Hispanic and Indian heritage). Usually with a negative connotation, but used widely colloquially.

Lilly: Do you have a condom?

José: What? No, latex does me harm. We can do it without one, don't worry nothing will happen. Let's go.

Lilly: No, I'm afraid.

Ágata: What right do you think is not being respected? (Response from students).

5. Men and women have the right to know, love and respect their bodies.

Lilly: Hi friend, what's wrong? You look uncomfortable.

Ágata: I don't feel good. I have an itch and it burns when I urinate.

Lilly: That could be an infection. Have you gone to the health clinic?

Ágata: No, I'm embarrassed. It will go away on it's own.

Lilly: Infections don't go away on their own. Going to the gynecologist is normal. You shouldn't be embarrassed or scared. If you want I'll go with you; the infection could get worse.

José: What right do you think is not being respected? (Response from students).

6. Men and women have the right to decide when to have children, and how many she/he will have.

Ágata: Thank goodness my period came. I was worried.

José: Yeah. It's annoying being worried every month. And, if we go to a health clinic to have them tell us what contraceptive method to use?

Ágata: You're right. It's for the best that way we take care of ourselves until we decide to have a baby.

José: Yes, because I'm tired of being scared every month.

CM: What right will they employ? (Response from students).

7. Men and women have the right to be informed of and have different contraceptive methods available.

Ágata: Silvia is pregnant.

Lilly: How silly. Why didn't she take care of herself?

Ágata: She did. He would not come inside her.

Lilly: But, that's how my son Marito was born.

Ágata: Right? (To the public). That's also how I take care of myself. Now what do I do?

Lilly: If you want I can take you to a health clinic to have them explain what contraceptive methods there are.

CH: What right will they employ? (Response from students).

CM: Now we will give a prize to those who can give us situations in which a right is being violated or respected.

Exit Quiz:

- Who can tell me a sexual and reproductive right? (Answers written on a flip chart).
- Who is now encouraged to go to a health clinic for a consult? (Answers written on a flip chart).

CM: If you have any more questions you can write them on the small sheet of paper you were given at the beginning of the talk.

Read the brochure we are handing out and if you have questions about it you can visit us at La Casa de Panchita.