

THEATRE AS PARADIGM FOR PUBLIC HEALTH PEDAGOGY: A THEATRE-FOR-DEVELOPMENT INTERVENTION ON SCABIES AWARENESS AMONG NIGERIAN UNIVERSITY STUDENTS

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Abstract

*Scabies infection is a highly contagious parasitic skin infestation caused by a parasite called, *Sarcoptes scabiei* var. *hominis*. Despite being a rampant burden among students of Nigerian tertiary institutions, it remains one of the neglected public health concerns, rarely explored. This study therefore investigated the effectiveness of Theatre for Development (TfD) as a participatory pedagogy for promoting awareness on scabies infection among undergraduate students at the Federal University Oye Ekiti (FUOYE), Ekiti State, Nigeria. Despite growing scholarship on arts-based health communication, theatre has not been adequately explored as catalyst for scabies awareness in Nigerian universities. The study adopted a qualitative survey design. 550 students were engaged as respondents selected through cluster sampling across different faculties: Arts (200), Management Sciences (100), and Science (250) out of a student population of approximately 13,000. Data were gathered through three sequential stages: Pre intervention semi-structured interviews, a drama skit performance created around student experiences of the infection, and a post-intervention rapid appraisal session. Data were analyzed through qualitative descriptive analysis. Findings reveal that scabies is relatively prevalent among student, and is transmitted through: sharing of personal items, poor hygiene practices, untreated water usage and prolonged skin-to-skin contact. Post-intervention follow up proved the effectiveness of drama in, increasing students' understanding of the infection, reducing stigma associated with reporting symptoms, and encouraging behavioural changes such as improved hygiene practices and increased visits to the University health centre. The study concludes that theatre-based interventions are viable and culturally resonant complements to conventional health education within university communities, and recommends their formal integration into institutional health promotion frameworks.*

Keywords: Health Communication, Participatory Theatre, Public Health Education, Scabies Awareness, Theatre for Development

Introduction

Scabies remains a serious yet neglected public health problem in many low and middle-income countries, including Nigeria. It is a contagious skin infection that causes intense itching, small rashes and tiny bumps on the skin; the itching usually becomes worse at night. The itching

occurs between the fingers, around the wrists, under the arms, around the waist, on the buttocks or in the genital areas. Sometimes thin, thread-like lines (called burrows) may appear on the skin. When left untreated, constant scratching can break the skin and lead to secondary bacterial infections. According to the World Health Organization, scabies causes “intense itching and skin lesions” and can lead to further health complications if not properly treated (WHO, 2023). Globally, scabies affects hundreds of millions of individuals each year which makes it one of the most prevalent ectoparasitic diseases known to medical science. According to WHO, scabies is one of the most common dermatological conditions globally” (2023), and estimates suggest that over 565 million people are afflicted annually, with global prevalence rates reported between 0.2% and 71% across regions depending on socio-environmental conditions and population characteristics (Ma, Se, & Ms, 2024). Scabies is caused by a burrowing mite called *Sarcoptes scabiei* var. *hominis*. When this mite enters the skin, it lays eggs and multiplies within the skin, this infestation triggers severe pruritus, characteristic popular eruptions and superimposed bacterial infection that can escalate into serious complications if left untreated (Alsaidan et al., 2020).

Apart from the physical disturbance on the host, scabies infection has significant psychosocial consequences. The intense itching which occurs mostly at night often leads to sleep disturbance, reduced concentration on productive activities and emotional distress. However, perhaps more debilitating is the social stigma attached to visible skin infections. In universities, where peer perception and social belonging are central to identity formation, stigma can lead to concealment rather than early treatment-seeking behaviour. Students may avoid reporting symptoms for fear of discrimination or being laughed at, thereby inadvertently sustaining transmission cycles.

Despite its global burden, scabies has historically been under-emphasized in public health education and intervention programs. It remains classified as a Neglected Tropical Disease (NTD) by the World Health Organization, because of the persistent gaps in awareness, preventive education, and sustained behavioural change strategies at community and institutional levels. (Ma et al., 2024). Several studies have continued to state that the public knowledge of scabies infection, which is currently inadequate affect its control measures, even in communities where it is highly prevalent or endemic. For example, in community surveys from Ghana, only 29.3% of respondents showed they have good knowledge of scabies, and a similar trend was observed in attitudes and practices regarding transmission and control. (Kudzordzi et al., 2025). In high-risk student populations such as boarding schools, research shows that knowledge regarding the etiology and prevention of scabies remains low. This low awareness translates into poor hygiene practices despite moderate awareness (Wahdini, Sari, Nurcandra, & Sungkar, 2025).

Scabies affects all age groups. However, young people, particularly students who live in shared accommodations are more vulnerable to the infection because of the frequent close contact they have with one another and the shared living conditions. Yet different studies consistently reveal that there is a troubling knowledge gaps among these young people. For example, in

Nigeria and across sub-Saharan Africa, awareness and education on scabies are conspicuously limited. Although school-based health education trials have demonstrated that targeted educational programs can significantly improve knowledge and preventive behaviours among students, these initiatives are sporadic and narrowly implemented. For instance, in a multicentre school study, baseline knowledge on scabies was low, but increased significantly after structured education, demonstrating that systematic awareness creation is both necessary and effective in such environments.(Ibekwe et al., 2020).However, conventional health education approaches often fail to sufficiently motivate behavioural change, particularly in populations that are desensitized to health messaging or influenced by entrenched cultural perceptions.

It is within this purview that creative pedagogies such as Theatre for Development (TfD) gain critical relevance. Applied theatre praxis, the umbrella that houses Theatre for development, has long recognized the effectiveness of performance and all its elements as catalyst for social dialogue, critical reflection, and inspiration for community action on issues affecting social wellbeing. As such, participatory theatre interventions have been successfully deployed in sub-Saharan Africa to address complex health issues such as HIV/AIDS, where they enabled community members to articulate lived experiences, confront cultural taboos, and collectively evaluate risk behaviours (Mabala& Allen, 2002). Similarly, theatre-based behaviour change approaches have been proven to improve community engagement and uptake of health control measures, by creating immersive experiences that make abstract medical information concrete and personally relevant.(Sule et al., 2022).These interventions amongst many others prove the potency of theatre, not just as an entertainment, but as a dialogic public health pedagogy; one that mobilizes the people within a community to ask questions, reconsider behavioural patterns and adopt healthier lifestyles.

Despite this promise, theatre as a tool for scabies awareness has remained under-researched, especially in Nigerian higher education institutions. Although, some scabies interventions, especially through traditional health education means have been documented, and have held in primary schools and in several rural communities, there is a lack of systematic inquiry into how theatre can mediate awareness, reform attitudes, and reduce the stigma associated with scabies infection among university students. Moreover, given the close social interactions and frequent skin contact among students in dormitories, lecture halls, and recreational spaces, universities represent a locus of both vulnerability and opportunity for targeted intervention.

This study therefore, seeks to address these gaps by positioning Theatre for Development as a paradigm for public health awareness, specifically within Federal University OyeE kiti (FUOYE). The study is grounded in a participatory performance intervention and explores how theatre can function as a catalyst for knowledge enhancement, behavioural change, and community dialogue around scabies infection. By documenting the processes and outcomes of a theatre-based intervention, this study aims to advance interdisciplinary scholarship at the intersection of Applied Theatre and Public Health, and to offer evidence-based strategies for

integrating creative modalities into health promotion frameworks in university settings and beyond.

Theatre as Paradigm for Public Health Education

Theatre had commonly been perceived as a mere expressive art in public health education, but in recent times its functions have evolved and is now seen as a pedagogical tool; one that has the ability to communicate complex health messages and influence people towards a choosing better behavioural patterns. Contemporary research in health communication increasingly recognises theatre as a participatory medium that can engage audiences more deeply than conventional health education methods. This is because theatre has several elements, such as music, dance, acting, that turn long talks into actions, and messages encoded in actions are easily and enjoyably assimilated and replicated until they become a lifestyle. This is particularly evident in studies where theatre has been intentionally applied to disseminate health information, address misconceptions, and promote preventive behaviours.

A growing body of scholarship has proved the effectiveness of theatre in health communication. For example, a recent study on theatre as a medium for well-being and healthcare education found that theatre performances can “efficiently promote well-being and spread crucial awareness about healthcare-related issues,”(Marzi et al., 2025) enhancing audience understanding of roles, behaviours, and communication in health. In the same vein, another research from South Africa demonstrates that theatre can be a playful and enjoyable mode of education, one that becomes a language that can be understood through embodied actions. By this, language and cultural barriers are conquered and educational health messages are conveyed successfully. The study showed that theatre not only communicates information, but also maximizes learning through interactive, culturally infused performance, recommending its formal integration into health sciences curricula. (Gause et al., 2024). Most importantly, theatre-based health interventions have yielded measurable improvements in knowledge and behaviour. A mixed-methods study of a theatre-based behaviour change intervention in Tanzania and Ethiopia reported that participants showed significant increases in knowledge of disease transmission and adoption of preventive health practices following theatre performances combined with capacity building workshops (Sule et al., 2022)

These academic findings align with broader research traditions that conceptualize theatre as not simply entertainment, but a medium of public discourse and social transformation. Participatory theatre approaches, such as community theatre and Theatre for Development, enable audiences to observe, reflect, and even rehearse alternative behaviours within a socially meaningful frame. Classic participatory action research on HIV/AIDS in Tanzania, for example, revealed that a popular theatre approach “stimulated communities to break the silence” about sensitive health issues and to openly discuss risk factors and behaviours. (Mabala & Allen, 2002).

The participatory nature of theatre is essential to its pedagogical power. Unlike passive educational formats, participatory theatre empowers audiences’ to co-construct meanings, ask

questions, and envision new possibilities for action. A review of performing arts in health engagement highlights how forum theatre and similar interactive drama forms invite community members to re-enact and transform scenarios, facilitating deeper exploration of barriers to health behaviour change and supporting collective problem solving. (Black, Chambers, Alun Davies, & Sonia Lewycka, 2019).

All these studies illustrate that theatre is not a peripheral educational strategy but innovative and evidence-informed public health pedagogy. Its capacity to blend narrative, emotion, interaction, and cultural relevance makes it especially well-suited for health issues that require not just knowledge transmission but reflection, dialogue, and behavioural engagement. For conditions like scabies, with low global awareness, complex transmission dynamics, and significant psychosocial implications, performative pedagogy provides a pathway through which information is not merely heard, but experienced, internalized, and acted upon.

Theoretical Framework

Paulo Friere's theory of Critical consciousness (Conscientization) sets a framework on which this study is anchored. Friere's educational philosophy is a pop out from the interventions he carried out with marginalized communities in Brazil; since then, it has become a foundation framework within participatory education, community development, and social transformation initiatives.

In Friere's conceptualization, education it is not an ordinary transmission or transfer of knowledge from the teacher to student, but a process that enables people to critically understand their social realities and actively participate in the transformation of their social realities. This implies that education is not just about storing knowledge, but about taking actions with the knowledge acquired. Central to this framework is the concept of conscientization; the development of critical awareness regarding the social, political, and economic forces that influence how people live. As Mustakova-Possardt (2003) explain, critical consciousness involves "achieving an in-depth understanding of the world, allowing for the perception and exposure of social and political contradictions, and taking action against oppressive elements in one's life."Freire's theory developed as a critique of what he termed the "banking model of education."

In this model, learners are treated as passive recipients of information deposited by teachers, thereby limiting critical engagement with knowledge. Freire argues that such an approach "transforms students into receiving objects... attempting to control thinking and action and inhibiting their creative power." (Critical Pedagogy And Educational Challenge – Education and Society,n.d.).In contrast, Freire advocates a problem-posing approach to education, which encourages dialogue, reflection, and collaborative inquiry between educators and learners. Through this dialogic process, individuals become capable of interpreting their lived experiences and identifying the structural conditions influencing them. According to Freire,

education should function as “the practice of freedom, the means by which men and women deal critically and creatively with reality and discover how to participate in the transformation of their world.”

To complement Freire’s critical consciousness framework, this study is equally informed by Behavioural Change Communication (BCC) theory. The theory provides a structural understanding of how health messages are designed, transmitted and acted upon at individual, interpersonal and community levels. Describing this theory Nancy and Dongre (2021) state that it is an interactive process with messages tailored and approached to sustain individual, community and societal behavior change; and maintain appropriate behaviours.

Unlike traditional top-down health education models, BCC gives priorities to participatory engagement to achieve behavioural outcomes. Recognizing that single intervention which target a specific behavioural risk often have little impact on the determinants that actually cause poor health, especially for vulnerable people. The strength of BCC as a theoretical lens in this study lies in its operationalization of communication channels, particularly entertainment and drama, as instruments for promoting health literacy. The entertainment approach within BCC promotes enjoyment, emotional stimulation, and excitement by exposing the audience to health messages through performance, making it especially well-suited to Theatre for Development interventions. In the context of scabies, where stigma and normalisation have blocked conventional health messaging, BCC principles illuminate how the drama skit, by tailoring its message to FUOYE students' lived experiences, created a culturally anchored communication strategy capable of motivating genuine behavioural reflection.

Methodology

This study adopted a qualitative survey design to examine the effectiveness of drama as a participatory communication strategy for scabies awareness among university students. Qualitative approaches are particularly useful for exploring, perceptions, experiences, and behavioural responses within specific social settings. The study was conducted at the Oye campus of Federal University Oye Ekiti (FUOYE), Ekiti State, Nigeria, a federal institution with a large population of undergraduate students living in shared residential environments where communicable skin infections can easily spread. A total of 550 undergraduate students participated in the study. Participants selected through cluster sampling across different faculties of the institution, 200 students from Arts, 100 from Management Sciences, and 250 from Sciences. Data collection followed a three-stage process: pre-intervention interviews, a drama-based health intervention, and a post-intervention rapid appraisal. Semi- structured interviews were initially conducted with different clusters of students to explore their knowledge and experiences regarding scabies, which many participants colloquially referred to as “Sweetie”. Insights from these discussions informed the development of a drama skit depicting everyday campus behaviours associated with scabies transmission, including sharing clothing and poor hygiene practices. Immediately after the performances, rapid appraisal sessions were conducted with all participants to gather feedback and assess knowledge

acquisition. A follow-up evaluation was subsequently conducted one month after the intervention to observe reported behavioural changes. Data generated from interviews, discussions, and appraisal sessions were analysed using qualitative descriptive analysis. This allowed a presentation of contextualized accounts of participants' responses and behavioural interpretations.

Pre-Intervention Knowledge and Perceptions of Scabies

Data gathered during the pre-intervention semi-structured interviews revealed that scabies was widely prevalent among students at Federal University OyeEkiti. Participants indicated that the infection was commonly referred to by the slang expression "Sweety." The term reflects the peculiar sensation experienced during itching, which many students described as temporarily pleasurable despite the discomfort and irritation associated with the infection. This colloquial framing appeared to normalize the condition and contributed to delayed treatment-seeking behaviour.

Within the clusters surveyed during the baseline stage, 330 students (about 60% of the sample) acknowledged either experiencing the infection personally or knowing someone within their immediate hostel or social circle that had been affected. Despite this high prevalence, awareness of the medical nature of the infection remained limited. Many respondents initially perceived the condition as a minor skin irritation rather than a contagious disease requiring medical attention. In addition, some students associated the infection with environmental factors such as the widely used local water supply popularly referred to as "Oye water," which several respondents believed caused skin rashes when used without treatment.

The baseline interviews further revealed that embarrassment played a significant role in discouraging students from seeking treatment. Because the infection often manifests in private areas of the body, students expressed discomfort discussing the condition openly or visiting the university health centre for medical attention. Consequently, many students resorted to informal remedies or simply endured the itching until the symptoms became severe.

Structure of the Drama Intervention

The intervention was designed as a short drama skit consisting of two performance episodes that dramatized everyday student experiences related to hygiene practices, sharing of personal belongings, and symptom recognition. The characters, Ade, Uche, Folake, and Cynthia, were intentionally constructed as relatable figures representing typical student interactions within hostel environments.

Episode one focused on the theme of transmission through shared belongings and poor hygiene practices. In the scene, Ade is confronted by Uche for wearing his clothes without permission. Shortly afterwards, Cynthia enters the compound with Folake, who reprimands her for bathing with untreated water. Through this interaction, the scene subtly highlights two potential risk

factors identified during the baseline interviews: the sharing of personal items and the use of untreated water for bathing.



Plate 1: A scene the showing risk factor interactions between actors

Following the performance, students were engaged in a guided discussion. When asked whether they had experienced situations where friends or roommates used their personal belongings without permission, more than half of the respondents admitted that such practices were common within their hostel environments. In response to the question on the dangers of sharing personal belongings, participants noted that infections and bacteria could easily be transmitted through such habits.



Plate 2: The researcher facilitating a guided discussion with respondents

Episode Two addressed symptom recognition and the social stigma associated with the infection. In the scene, Uche is seen scratching various parts of his body while playing a game on his phone. Ade soon enters exhibiting similar symptoms, scratching his elbows and private areas while describing the itching sensation as “sweety.” Folake observes the behaviour, recognises the symptoms as scabies, and urges them to seek treatment at the university health centre rather than ignoring the condition.



Plate 3: A scene showing characters exhibiting symptoms of scabies infection, to aid audience recognition of the condition.

During the discussion session that followed the episode, participants quickly identified the behaviour portrayed in the scene. When asked what was wrong with the characters, many respondents replied in unison that the characters were experiencing “Sweety.” Subsequent discussion revealed that students were familiar with the symptoms but rarely associated them with a specific medical condition.

Audience Responses during Rapid Appraisal

The rapid appraisal conducted after the performances provided deeper insight into students’ understanding of the infection and their attitudes toward prevention and treatment. When participants were asked how students at the university typically react to the infection, respondents described the itching as extremely disturbing, particularly at night, when it interferes with sleep. Others emphasized the embarrassment associated with scratching in public places such as classrooms or hostels.

Participants also acknowledged that severe scratching could lead to open wounds, blisters, and visible scars. These testimonies confirmed that while students were familiar with the

symptoms, the condition had been normalized within everyday campus life due to the widespread use of the slang term “Sweety.”

When discussions turned to possible causes, students identified several contributing factors, including the sharing of clothes and towels, prolonged skin-to-skin contact, and bathing with untreated water. Some respondents further acknowledged that sexual contact with infected individuals could facilitate the spread of the infection.

Emerging Behavioural Awareness

Beyond symptom recognition, the intervention stimulated critical reflection among participants regarding their personal hygiene practices and everyday social habits. Through the discussion sessions, students began to connect the dramatized situations with their own experiences in hostel environments. Many participants acknowledged that behaviours such as sharing towels, clothes, or bedding were common practices that could potentially contribute to the spread of infections.

The discussion also highlighted growing awareness regarding the importance of preventive measures. Students suggested practical strategies such as disinfecting bathing water, maintaining personal hygiene, avoiding the sharing of personal items, and seeking medical treatment when symptoms appear.

The findings of the study demonstrate that the drama intervention served not merely as an entertainment activity but as a catalyst for dialogue and reflection. By presenting familiar campus situations in a performative format, the skit created a space in which students could openly discuss an issue that had previously been treated with embarrassment or silence. The rapid appraisal responses therefore indicate that drama can effectively stimulate awareness and initiate conversations about health behaviours within a university community.

Discussion

The findings of this study reveal that drama can function as an effective participatory medium for health communication within university environments. The intervention demonstrated that a performative approach to health education can stimulate dialogue, challenge misconceptions, and encourage behavioural reflection among students. Within the context of Federal University Oye Ekiti, the drama skit created a platform through which students could collectively interrogate everyday habits that contribute to the spread of scabies.

One of the most striking outcomes of the study is the normalization of the infection through the colloquial term “Sweety.” Prior to the intervention, many students perceived the infection not as a contagious medical condition but as a common and almost humorous experience associated with intense itching. This linguistic framing effectively masked the seriousness of the disease and contributed to delays in seeking medical treatment. The drama intervention disrupted this perception by reframing the experience within a medical and public health context. Through the character of Folake, who identifies the symptoms and advises the infected

characters to seek treatment, the performance introduced an alternative narrative that repositioned the infection as a treatable health issue rather than a trivial inconvenience.

The findings also highlight how everyday social practices within university hostels contribute to the transmission of skin infections. The responses gathered during the rapid appraisal confirm that students frequently share personal items such as clothes, towels, and bedding materials. While such practices often emerge from communal living arrangements and social bonding among students, they simultaneously create pathways for the transmission of infectious conditions such as scabies. The first episode of the drama skit effectively dramatized this risk by presenting a relatable scenario in which a student wears his friend's clothes without permission. By mirroring a common campus experience, the performance enabled students to recognise how ordinary behaviours may have unintended health consequences.

Another significant issue that emerged from the findings is the role of embarrassment and stigma in shaping health-seeking behaviour. Students reported that the infection often affects private areas of the body and therefore generates feelings of shame when symptoms become visible or when itching occurs in public spaces. As a result, many students prefer to endure the discomfort rather than report the condition at the university health centre. The drama intervention helped to reduce this stigma by publicly dramatizing the condition in a non-judgmental and humorous manner. By transforming a private and embarrassing experience into a shared public narrative, the performance encouraged students to discuss the issue openly and consider seeking professional treatment.

The intervention further revealed the importance of culturally relevant communication strategies in public health education. Traditional health campaigns in university settings often rely on posters, pamphlets, or formal lectures, which may fail to capture students' attention or address deeply embedded social habits. In contrast, drama engages audiences emotionally and cognitively by presenting familiar experiences through storytelling, humor, and character interaction. The participatory discussion sessions that followed each performance allowed students not only to observe the narrative but also to interrogate it and relate it to their own lived realities.

Equally important is the environmental dimension highlighted by the participants, particularly the widespread perception that untreated water contributes to skin infections within the campus environment. While the study does not conduct laboratory testing of water sources, the repeated reference to "Oye water" during both the baseline interviews and the post-performance discussions suggests that students associate their hygiene challenges with the quality of available water. This perception underscores the need for integrated public health interventions that combine behavioural education with improvements in environmental sanitation and water safety.

The findings therefore reinforce the argument that arts-based interventions can serve as powerful tools for public health communication in higher education contexts. By transforming

everyday experiences into performative narratives, drama enables participants to critically reflect on their own behaviours while simultaneously fostering collective learning. Within the FUOYE community, the drama skit functioned as both an educational and dialogic platform, encouraging students to reconsider their hygiene practices and to recognize scabies as a preventable and treatable condition rather than a normalized aspect of campus life

Conclusion

This study examined the use of drama as a participatory communication strategy for promoting awareness about scabies infection among students of Federal University OyeEkiti. The findings reveal that scabies infection is relatively common within the student community. The study reveals that there are several behavioural and environmental factors that contribute to the spread of the infection among students. Behavioural factors such as sharing of personal belonging, poor hygiene practices, usage of untreated polluted water and prolonged skin-to-skin contact lead to its spread. These conditions are typical of communal living arrangements common in university environments.

The findings also prove that drama can function as an effective medium for health education and awareness creation. The Theatre for development intervention allowed the students to identify the symptoms of scabies infection; understand the causes of the infection and the modes of transmission. It also equipped them with the knowledge on preventive measures. Through relatable characters and familiar campus scenarios infused in the intervention, the performance translated medical information into everyday experiences that students could easily understand. The participatory discussions that followed the performances further strengthened the learning process by allowing students to reflect on their own behaviours and share personal experiences.

The follow-up evaluation conducted one month after the intervention revealed noticeable behavioural changes among the students. Many participants reported adopting preventive practices such as disinfecting bathing water, avoiding the sharing of towels and bedding materials, and seeking medical treatment when symptoms appear. Additionally, health personnel within the university indicated that students became more willing to visit the health centre for treatment after the intervention. These outcomes suggest that theatre-based health education can play a significant role in promoting behavioural change and improving health literacy within university communities.

Limitation

This study has some limitations which are essential to be acknowledged, within which the findings need to be interpreted carefully. First, the study employed a small sample drawn from a single institution. This constrains the generalizability of findings to other Nigerian universities. The sample size was adequate for exploratory qualitative inquiry but insufficient for statistical inference or quantitative claims about prevalence or behavioural change rates.

Implications for Theatre and Public Health Practice

The findings of this study have important implications for both theatre practice and public health education. First, the study reinforces the relevance of theatre as a viable tool for health communication, particularly within communities where conventional health campaigns may not effectively engage the target audience. By combining entertainment with education, theatre creates an interactive environment in which audiences are not passive recipients of information but active participants in the learning process.

Second, the study demonstrates the potential of Theatre for Development (TfD) approaches within university settings. Although TfD interventions are often associated with rural communities, the present study shows that similar strategies can be successfully adapted to urban and institutional environments such as universities. Through participatory drama, students were able to recognize the relationship between their daily habits and the spread of infectious diseases. This suggests that arts-based health interventions can complement traditional public health strategies by addressing behavioural and cultural dimensions of disease transmission.

Finally, the study illustrates how interdisciplinary collaboration between theatre practitioners and health professionals can enhance public health outcomes. When artistic performance is integrated with medical knowledge and community participation, it becomes possible to design interventions that are both informative and socially engaging.

Recommendations

Based on the findings of this study, the following recommendations are proposed:

1. Institutional Health Campaigns through Theatre: Universities should incorporate drama-based awareness programs into their health promotion campaigns. Theatre performances can be organized periodically within hostels, lecture halls, and other student gathering spaces to address communicable diseases and health-related behaviours.
2. Collaboration between Health Units and Theatre Departments: University health centres should collaborate with departments of theatre and performing arts to develop creative health education strategies that combine scientific knowledge with engaging performance techniques.
3. Student Peer Education: Students who participate in theatre-based health interventions can be trained as peer educators who will continue to disseminate information about disease prevention among their colleagues.
4. Further Research: Future studies should explore the use of theatre in addressing other health issues prevalent among university populations, including sexually transmitted infections, mental health awareness, and substance abuse. Quantitative research may also be conducted to measure the long-term impact of theatre-based interventions on behavioural change.

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