Contents lists available at ScienceDirect

Public Health

journal homepage: www.elsevier.com/locate/puhe



Themed Paper - Original Research

Even Mists Have Silver Linings: Promoting LGBTQ+ Acceptance and Solidarity through Community-Based Theatre in India



J. Pufahl ^{a, *}, S. Rawat ^b, J. Chaudary ^b, N.J. Shiff ^c

- ^a Center for Arts in Medicine, University of Florida, USA
- b The Humsafar Trust, Mumbai, India
- ^c Department of Community Health and Epidemiology, University of Saskatchewan, Canada

ARTICLE INFO

Article history: Received 1 October 2020 Received in revised form 18 January 2021 Accepted 22 February 2021

Keywords:

Community-based theatre

LGBTQ+ theatre LGBTO

LGBTQ+ rights LGBTQ+ solidarity

Allyship

Stigma interventions Applied theatre Prosocial behaviours

ABSTRACT

Objectives: This project aimed to assess the effectiveness of a community-based theatre intervention to improve attitudes towards and increase knowledge about LGBTQ+ communities among audiences in

Study design: This study was a program evaluation using pre- and post-show surveys that incorporated an adapted version of The Riddle Scale: Attitudes Towards Difference and questions assessing selfreported knowledge about LGBTQ+-related issues to assess changes in attitudes and knowledge after viewing the theatre intervention.

Methods: An original 90-min devised play was created by a company of Indian, American, and Canadian theatre artists using Participatory Action Research methods and was designed to bring audiences to a deeper understanding of LGBTQ+ identity. The show was performed four times in Mumbai, India, and pre-/post-show surveys were collected at each performance. Audience survey responses were analysed using parametric and non-parametric descriptive statistics as appropriate, and Likert scale questions were compared using Wilcoxon Signed Rank for non-parametric data.

Results: A total 184 surveys were completed across four performances between March 7 and 14, 2020. Significant increases in audiences' self-reported knowledge of LGBTQ+ identity, impacts of discrimination, and struggles faced by LGBTQ+ communities were reported after viewing the show. Furthermore, attitudes towards LGBTQ+ rights, understanding of the challenges of being LGBTQ+ in India, and recognition of the contributions LGBTQ+ individuals make to society improved significantly among our audiences after test. The play further fostered increased acceptance of prosocial behaviours towards LGBTQ+ individuals with higher percentages of audiences recognizing the importance of standing up to homophobia and anti-gay attitudes. While these observations were seen across audiences, they were particularly pronounced among cisgender heterosexual men and audiences ages 18-24.

Conclusion: Community-based theatre intervention is highly acceptable and effective as a medium for informing positive attitudes, improving knowledge, and promoting acceptance of and solidarity towards LGBTQ+ communities among young adult heterosexual audiences.

© 2021 The Royal Society for Public Health. Published by Elsevier Ltd. All rights reserved.

Introduction

Drafted in 1861, Section 377 of the Indian penal code criminalized non-peno-vaginal sexual acts in India, rendering same-sex sexual acts criminal and punishable. The law was widely used to blackmail, harass and extort LGBTQ+ individuals. Despite this, the LGBTQ+ movement in India grew visible over the last decade

This project was primarily conducted in Mumbai, India. Pre-project planning and post-project data analysis occurred at the University of Florida in Gainesville, FL, and at The Humsafar Trust in Mumbai, India.

through nation-wide sexual health projects and pride marches organized by independent LGBTQ+ groups and allies across India. However, inclusion of Section 377 in the penal code hindered sociocultural reforms, conversations on inclusion in educational and professional spaces, and was a barrier to legal redressal for violence and harassment.² Supportive judgements such as the National Legal Services (NALSA) verdict that recognized constitutional rights of transgender communities (2013),³ the Mental Health Act that recognized the vulnerability of LGBTQ+ communities to adverse mental health outcomes (2017),⁴ and the HIV AIDS Act that recognized equal rights for individuals living with HIV irrespective of their sexual and gender identities (2017)⁵ paved the way for the

^{*} Corresponding author. University of Florida Center for Arts in Medicine, PO Box 115800, Gainesville, FL, 32610, USA. Tel.: +1 352 273 0852; fax: +1 352 392 3802. E-mail address: jeffpuf@ufl.edu (J. Pufahl).

reading down of Section 377 on September 6, 2018, the landmark legislative event that decriminalized consensual same-sex sexual acts in India.¹

While the verdict created space for conversations on LGBTO+ rights, much remains to be accomplished to ensure equal rights and acceptance of LGBTQ+ communities in India. The sociocultural landscape in India remains largely hetero-patriarchal. with unfavourable attitudes towards non-heteronormative sexualities and gender identities. ^{6–10} Lack of political will in India, as well as contradictions in interpretations of various acts and verdicts¹¹ pose barriers to implementing protective policies for LGBTQ+ individuals. Although rapidly changing, media portrayals of LGBTQ+ communities draw from stereotypes that can be damaging to the LGBTQ+ community.⁷ Further, lack of sex education in Indian schools^{12,13} leaves limited scope for redressing these stereotypes. Despite decriminalization, Indian laws currently do not protect LGBTQ+ individuals against stigma and discrimination in educational and workplace settings. School syllabi for mainstream communities and healthcare providers do not include training on LGBTQ+ issues, and harmful practices such as aversion/ conversion therapies remain in place.¹⁴ Research studies highlight concerning levels of adverse mental and physical health outcomes such as self-harm, 15 anxiety, 15 poor self-esteem, 10,16 and depression 10,15,17-19 among LGBTQ+ communities resulting from lack of legal, societal and familial acceptance. Studies exploring general societal attitudes towards LGBTQ+ are limited^{20,21} and there remains much to accomplish. It is critical to educate Indians about LGBTO+ -related issues in Indian-specific contexts to further acceptance and greater empathy towards these communities.

towards steps positive LGBTQ+ communities are very recent and primarily occur in urban settings. 22,23 As adults, individuals may not recognize the need for education around ingrained attitudes, harmful stereotypes, and lack of awareness about LGBTQ+ issues. Theatre-based learning can bridge this gap by introducing empathy and providing information on LGBTO+ communities in a sensitive manner. Theatre has been shown to be an effective method of health communication and education because it engages audiences on multiple levels (emotional, cognitive, visual, auditory, cultural, etc.) and can improve audience retention and comprehension of information.^{24,25} Community-based theatre is a collaboration between artists and members of a community with the purpose of creating theatre that expresses collective meaning and engages audiences to generate dialogue and promote social change.²⁶ This approach promotes acceptance and enhances learning, particularly about minority populations,^{27–29} challenges and breaks existing stereotypes among non-marginalized communities, 28-32 and can promote self-acceptance among LGBTQ+ communities in settings with unfavourable sociocultural attitudes.^{33,34} Instead of using statements and conclusions as a form of persuasion, community-based theatre often incorporates community narratives to motivate audiences because narratives allow audiences to become emotionally invested in the personal stories offered.³⁵ Moving audiences through powerful narratives helps spectators adapt their realworld beliefs and behaviours to the values and messages of the accounts to which they are exposed.³⁶

In India, community-based theatre has been used by groups such as Jana Sanskriti to educate communities about a variety of social issues.³⁷ While theatre and art have been used by LGBTQ+ organizations and groups for advocacy and sensitization,³⁸ there is limited research about the effectiveness of these media in informing attitudes and knowledge around LGBTQ+ stigma in mainstream communities in India. This project aimed to address this gap by assessing the effectiveness of a community-based theatre production in increasing knowledge about and

influencing prosocial attitudes towards LGBTQ+ communities among audience members.

Methods

From July 2019 to March 2020. American/Canadian theatre artists from the Center for Arts in Medicine at the University of Florida collaborated with an ensemble of community theatre artists in Mumbai, India, with the goal of creating an original communitybased play that would engage mainstream audiences in India in a conversation about LGBTQ+ identity and stigma. Funded through a US Consular grant (Theatre for the Social Good), the project was designed to bring collaborators from the United States to India for a creative playwriting residency with a local theatre organization. The creative team was led by the first author, an expert in theatre for health communication, and a Canadian colleague and expert in devising community-based theatre. The Indian team consisted of a local theatre producer (Five Senses Theatre), a playwright/dramaturg from the Mumbai LGBTQ+ community, a movement director, a lighting designer, two music composers and an acting/devising company made up of LGO and 'straight' young actors. Even Mists Have Silver Linings (EMHSL) was created between January 30 and March 6, 2020 and was performed four times in Mumbai at the G5A Centre for Contemporary Culture between March 7 and 14, 2020. The play was advertised and promoted through a variety of online and print media as well as several social media platforms (the US Consulate, Five Senses Theatre, G5A, LGBTQ+ community-based forums, etc.) local newspapers and word of mouth.

EMHSL is a collection of stories and insights told through multiple perspectives exploring themes of LGBTQ+ identities in India and was entirely co-authored and co-created by members of assembled company. Company members engaged in Participatory Action Research, 39 which involved conducting interviews with members of the Mumbai LGBTQ+ and heteronormative communities and incorporating interview themes into the play. The play and project were developed with guidance, education, and information from LGBTO+ individuals associated with the project in either professional or volunteer capacities. In the play, company members pose a series of questions (e.g. Why must I live a secret life to survive? Why does your homophobia translate into violence towards me?) that are then followed by juxtapositions of complex situations and encounters that shed light on, or provide insights into, those questions. The play is multilingual (English, Hindi, Urdu, Bengali, Marathi) and relies heavily on movement and physical theatre for storytelling. Scenes in the play are designed to normalize same-sex or gender queerness and illustrate the complexity and beauty inherent in all relationships. Themes explored include polyamory, cultural, community, and self-stigma, Indian transgender identities, 'coming out,' family acceptance/dynamics, bullying, and more. Company members also model 'straight' or heteronormative individuals grappling with their sexual identities to connect with audience members who may be in similar positions. The stories and characters portrayed in the play are designed to appeal to Indian audiences by introducing scenarios that both LGBTQ+ and heteronormative (or questioning) individuals might experience in Indian sociocultural environments. The cumulative effect of the play is designed to cultivate empathy in audiences, guiding them into a deeper and felt understanding of the LGBTQ+ experience and community.

Surveys

Pre- and post-intervention surveys incorporated an adapted version of the 'positive levels of attitude' section (questions 9–16) of the Attitudes Towards Difference Survey: The Riddle Scale⁴⁰ to

assess attitudinal change. The first (University of Florida) and second authors (Humsafar Trust) collaboratively adapted this section of the Riddle scale for cultural sensitivity to ensure that attitudes relevant to the Indian context were adequately assessed. The Humsafar Trust (humsafar.org) is one of India's foremost LGBTQ+ organizations with a long history of LGBTQ+ health advocacy in Mumbai. The study protocol was reviewed and approved by the University of Florida's and The Humsafar Trust's Institutional Review Boards. The Riddle scale has been used since 1985 to assess attitudes towards homosexuality, and the modified scale used in this study groups responses into four positive levels of attitude: **support**: the rights of LGBTQ+ people should be protected and safeguarded, admiration: being LGBTQ+ in society takes strength, *appreciation*: there is value in diversity – homophobic attitudes should be confronted, and *nurturance*: LGBTO+ people are an indispensable part of society. Surveys also included four questions about respondent demographics and five questions assessing knowledge about LGBTQ+ issues (see Fig. 1).

Audience members were asked to complete the pre-show paper survey prior to the start of the show. Post-show surveys were completed after the show, prior to a question-and-answer session with the cast. This was to ensure our evaluation assessed the effect of the show only, not show and discussion. All responses were anonymous. The paper survey data were entered into the University of Florida's Qualtrics system manually by two trained data entry personnel at the Humsafar Trust. The final entered data were checked for discrepancies, duplication and double entries, and 10% of surveys entered by each individual were randomly selected for review to ensure accuracy of data entry. Survey responses were analysed using parametric and non-parametric descriptive statistics as appropriate, and Likert scale questions were compared using Wilcoxon Signed Rank for non-parametric data. All analyses were conducted using SPSS Version 23.0.

Results

Approximately 325 people attended the play, and 184 surveys were completed. Survey respondents were gender balanced (48% men, 49% women, 3% prefer not to disclose or missing), as was the proportion of cis-women and cis-men (49% vs 48%); none of the respondents identified as transgender. Overall, 70% of respondents identified as 'straight,' 36% were aged 18–24, 38% aged 25–34 years, and $29\% \geq 35$ years.

Attitudes

Prior to viewing **EMHSL**, close to 98% of audience members either agreed or strongly agreed that *same sex attraction is normal* (Q1), LGBTQ+ individuals deserve the same rights as everybody else (Q2), and discriminating against LGBTQ+ people is wrong (Q3); 93% agreed or strongly agreed that examining one own's attitudes towards LGBTQ+ individuals is important (Q5); 95% felt that LGBTQ+ people are an important part of human diversity (Q6), and 94% agreed or strongly agreed that same-sex marriages are acceptable (Q10). Taken together, this indicates a high baseline level of acceptance and positive perceptions of LGBTQ+ people among audiences prior to attending the play, which did not change after play.

Although the audience were overall an accepting group, after viewing the performance there was a shift to a stronger appreciation of the struggle LGBTQ+ individuals face. After the show, 75% of respondents strongly agreed that it takes strength and courage for LGBTQ+ people to be themselves in today's world (Q4) as opposed to 63% before the show (P < 0.01) (Fig. 2a). A similar attitudinal shift was seen in response to Q8, LGBTQ+ people are an indispensable part of our society. They have contributed much to our world, and there is

much to be learned from their experiences (68% strongly agreed before vs 74% after, P < 0.01). Additionally, 84% of audience members strongly agreed that they considered themselves accepting of LGBTQ+ individuals (Q11) after the show compared with 76% at baseline (P < 0.01). When looking specifically at heterosexual men, initially 51% agreed and 46% strongly agreed with Q8, while after the show this shifted significantly to 33% agreement and 66% strong agreement (Fig. 2b). Cisgender heterosexual women did not exhibit a similarly significant shift in attitude.

Attitudes towards prosocial behaviours were assessed by Q7, it is important for me to stand up to those who demonstrate anti-gay behaviours like cracking gay jokes or making derogatory remarks about/to LGBTQ+ people and Q9, I would be proud to be part of an LGBTQ+ organization and to openly advocate for full and equal inclusion of LGBTQ+ people at all levels of our society. At baseline, 65% of audience members strongly agreed with the former and 67% with the latter, indicating high levels of prosociality and solidarity towards the LGBTQ+ community. However, after viewing the show, these numbers rose to 77% and 76%, respectively, indicating a stronger desire towards actionable solidarity (P < 0.001 and P < 0.05 respectively) (Fig. 2a). This change was particularly significant for heterosexual respondents aged 18–24 years (Fig. 2c).

Using the adapted Riddle scale to analyse audience responses, before the show there were high levels of **support** (90% strongly agreed with Q2 and Q3), **admiration** (62% strongly agreed with Q4 and Q5), **appreciation** (68% strongly agreed with Q6 and Q7) and **nurturance** (68% strongly agreed with Q8 and Q9). After the show, **support** remained at 90%; **admiration** rose to 71%, **appreciation** to 76% and **nurturance** to 76%.

Knowledge

Although many of the respondents' self-rated knowledge about LGBTQ+ issues was high before the test, all questions about knowledge showed statistically significant increases after viewing the production for the audience as a whole, cisgender heterosexual men and women, and heterosexuals below 35 years of age (Figs. 3 and 4). The proportion of individuals who felt very knowledgeable and extremely knowledgeable after the show increased overall, with most striking changes being seen among heterosexual men who initially reported low levels of knowledge on some survey concepts. The proportion of audience members who reported no or slight knowledge about LGBTQ+ identity, impacts of discrimination on LGBTQ+ people, the struggles LGBTQ+ people go through, what it means to be an ally to LGBTQ+ people, and the barriers LGBTQ+ persons face in India dropped by between half and two thirds after the performance for all questions (21%-11%, 26%-14%, 28%-13%, 31%–14%, and 28%–18%, respectively) (Fig. 3a). A similar pattern was seen among heterosexual men (Fig. 3b). Although heterosexual women reported higher baseline levels of knowledge than heterosexual men, this pattern was again observed for all questions except that relating to barriers faced in India (Fig. 3c). Among heterosexuals aged 18-24, the largest gain in knowledge was about the meaning of being an ally to LGBTQ+ people, with 40% indicating no or slight knowledge prior to the show and 14% after the performance (Fig. 4).

Reactions to the show

The performance was highly rated by respondents, with 44% recommending and 53% strongly recommending the show and 44% agreeing and 33% strongly agreeing that the show was a powerful experience. Eighty-nine percent felt that the show should be seen by people across India, and 68% felt that the show helped them achieve a deeper understanding of LGBTQ+ issues. When rating

Please answer the following questions: Normal Not Normal I don't know 1. Same sex attraction is: Strongly Strongly Agree Neutral Disagree Agree Disagree 2. LGBTQ+ people deserve the same rights and privileges as everybody else. \bigcirc \bigcirc 3. Discriminating against LGBTQ+ people is wrong. 4. It takes strength and courage for LGBTQ+ people to be themselves in today's world. 5. It is important for me to examine my own attitudes toward LGBTO+ people. 6. There is great value in our human diversity. LGBTQ+ people are an important part of that diversity. 7. It is important for me to stand up to those who demonstrate anti-gay behaviours like cracking gay jokes or making derogatory remarks about/to LGBTQ+ people. 8. LGBTQ+ people are an indispensable part of our society. They have contributed much to our world and there is much to be learned from their experiences. 9. I would be proud to be part of an LGBTQ+ organization, and to openly advocate for full and equal inclusion of LGBTQ+ people at all levels of our society. 10. Same-sex marriages are acceptable. 11. I consider myself to be accepting of LGBTQ+ people. No Slightly Moderately Verv Extremely knowledgeable knowledgeable knowledgeable knowledgeable 12. Please rate your knowledge on the following topics: knowledge LGBTQ+ identity The impacts of discrimination on LGBTQ+ people The struggles LGBTQ+ people go through What it means to be an ally to LGBTQ+ people The barriers LGBTQ+ persons face in India

Fig. 1. Audience survey.

the importance of elements of the show, acting was ranked #1 by 43%, information #2 by 26% and the stories #3 by 28%.

Discussion

Activism begins with educated hope, a thinking beyond the narrative of what stands for the world today by seeing it as not enough. 41 **EMHSL** created a play-world where same—sex relation ships are both normal and celebrated and allowed audiences to imbibe these values through narrative persuasion.³⁶ The quality of the acting in the production helped to transport the audience into this play-world and facilitated powerful emotional experiences for many. These emotional experiences can be imprinted in the memories of viewers, becoming strong motivators for action.^{35,42} The vast majority of the audience held a supportive stance, but while support can contribute to an enabling environment, it may not always translate into action. People who support can be aware of the homophobic climate, and might work to safeguard LGBTQ+ rights, but may be uncomfortable with wider aspects of LGBTQ+ lives. A large proportion of audiences at post-test displayed increased admiration for LGBTQ+ communities and reported a shift in their attitudes by recognizing that being LGBTQ+ in our society requires strength. This signals a significant shift in perspectives and increased empathy towards LGBTQ+ people among our audience, which has been shown to motivate prosocial behaviour, caregiving and cooperation, and plays a role in decreasing aggression.⁴³ Our findings highlight an important movement towards appreciation (there is value in diversity homophobic attitudes should be confronted) among cisgender heterosexual men and heterosexual audiences aged 18—24 who, after seeing the play, indicated they were likely to be more willing to act as allies to the LGBTQ+ community and engage in prosocial behaviours such as taking a stand against homophobia and anti-gay stances. Taken together, these results show an overall shift in Mumbai audience attitudes towards the **appreciation** and **nurturance** end of the Riddle scale. The Riddle scale's definition of nurturance aligns well with the contemporary term 'solidarity,' which is defined as 'advocacy on behalf of others from the perspective of a shared, inclusive group.'⁴⁴ This movement towards **nurturance**/solidarity shows that an intervention such as **EMHSL** can be implemented in similar settings to promote empathy and prosociality towards LGBTQ+ individuals.

Although significant increases in knowledge levels were seen in the audience as a whole and across subgroups, the most notable changes occurred in the reduction of those with no or slight knowledge levels in cisgender heterosexual men and women, and those younger than 35 years of age. This suggests the show may be effective in younger audiences with lower baseline knowledge of LGBTO+ identity/issues. Young adults tend to be more receptive to new or challenging ideas than older adults and are more likely to adopt these ideas into their lives. 45 This is significant in an Indian context, where a shift in knowledge and attitudes in the 35 and under heteronormative population has much potential to influence sustained change. In patriarchal contexts, cisgender heterosexual men are often gatekeepers to personal freedoms at an individual level, and enactors of sociocultural attitudes at a societal level. 46–48 Heterosexual allies are integral to the acceptance and well-being of LGBTQ+ communities, and movement towards nurturance/

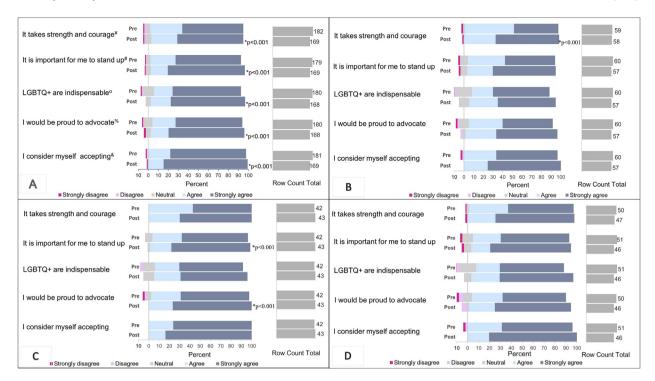


Fig. 2. Survey responses that showed statistically significant attitudinal changes after viewing the performance (A) all respondents (B) heterosexual men (C) heterosexuals aged 18-24 years (D) heterosexuals aged 25-34 years. $\frac{1}{2} = 1$ takes strength and courage for LGBTQ+ people to be themselves in today's world (Riddle scale question 11) 38; $\frac{1}{2} = 1$ t is important for me to stand up to those who demonstrate anti-gay behaviours like cracking gay jokes or making derogatory remarks about/to LGBTQ+ people (Riddle scale question 14); $\frac{1}{2} = 1$ Lorengte people are an indispensable part of our society. They have contributed much to our world, and there is much to be learned from their experiences (Riddle scale question 15); $\frac{1}{2} = 1$ would be proud to be part of an LGBTQ+ organization, and to openly advocate for full and equal inclusion of LGBTQ+ people at all levels of our society (Riddle scale question 16); $\frac{1}{2} = 1$ consider myself to be accepting of LGBTQ+ people.

solidarity signals a shift towards recognizing LGBTQ+ individuals as equal and valuable members of society. Increased solidarity leads to reduction in community stigma^{49,50} and creates more welcoming spaces for LGBTQ+ people.^{51,52} As LGBTQ+ prosociality improves in India, increased access to services, amenities, and opportunities is

bound to follow, which are critical steps to improve the social determinants of health of LGBTQ+ community.

To the best of our understanding, this is the first documented assessment of the role of community-based theatre as a catalyst to inform social change for LGBTQ+ communities in India. While

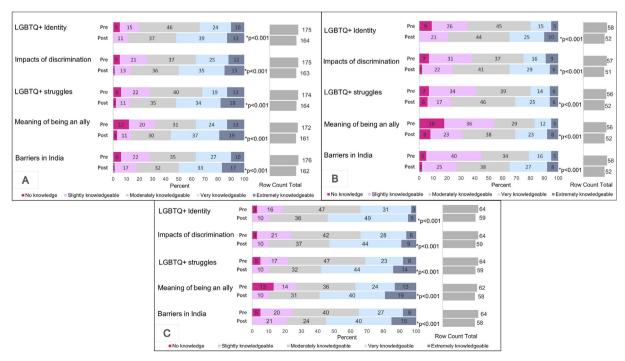


Fig. 3. Self-reported knowledge before and after viewing the theatre performance (A) all respondents (B) heterosexual men and (C) heterosexual women.

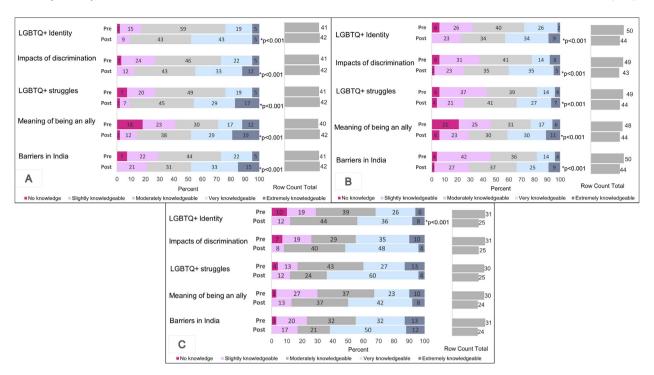


Fig. 4. Self-reported knowledge before and after viewing the theatre performance (A) heterosexuals 18−24 years of age (B) heterosexuals 25−34 years of age and (C) heterosexuals ≥35 years of age.

theatre is a familiar medium for information-education in India, the approach has rarely been adequately documented. The shifts in attitudes and knowledge triggered by a single viewing of *EMHSL* provide much needed insight into strategies and formats that can be used for similar endeavours in future. This study further provides evidence that theatre is an effective tool to improve support and advocacy for LGBTQ+ people in everyday settings in India.

Limitations

Although the audience survey was developed in collaboration with the Humsafar Trust to minimize incorrect responses resulting from cultural misunderstandings of terms/terminologies, the survey was administered in English, and we acknowledge that some terms may have been misunderstood or misinterpreted by audience members. Although many spectators were urban with some knowledge of English, it is possible that some may not have been comfortable enough with English to complete the survey, reducing the generalizability of the results. While individuals in the audience were not necessarily known to the performers and show organizers and survey responses were anonymous, we cannot exclude the possibility of a social desirability bias. Further, as the performances were held in Mumbai, the high level of acceptance is likely reflective of the relatively open-minded mindset of its urban, cosmopolitan inhabitants. Even though the performances were not ticketed, it is likely that the audiences attending the show were not representative of all educational and socio-economic strata, particularly those from lower- to middle-income brackets, and those with lower education, as the play was performed at a venue in South Mumbai in a location that sees a mix of individuals from upper economic classes. It is likely the play attracted an LGBTQ+ friendly audience with an interest in the subject matter, which may also affect generalizability of the results. We recognize our results may be completely different if this project was undertaken in a rural or less cosmopolitan setting. Additionally, there were relatively few individuals over the age of 50 years, limiting generalizability to this age group. Further, almost all of our respondents identified as cis-gender, and most identified as heterosexual or gay; thus, our findings are not representative or reflective of transgender communities. Lastly, while not exclusively a short-coming of this study, an important constraint to take into account is the translation of self-reported attitudes into real-life actions and behaviours. We recognize there could be substantial difference between what individuals report they would do and actual behaviour change. It is possible that individuals might not act on their reported desire to support LGBTQ+ individuals due to multiple sociocultural barriers towards acceptance of LGBTQ+ communities and allies in India. Additionally, the post-production survey reflects a single point in time, and it is not known whether the observed changes will be sustained. While interventions such as this show are promising first steps towards engaging mainstream communities in conversations on LGBTQ+ rights and acceptance, change can be sustained only when these efforts are integrated into population-wide educational programs educational programs.

Conclusion

Community-based theatre is highly acceptable and effective as a medium for informing positive attitudes, improving knowledge, and promoting acceptance of and prosocial behaviours towards LGBTQ+ communities. Considering what has been learned in this project, the authors recommend this intervention, or ones similar, be performed at educational institutions in major and minor urban centres across India. The play, combined with post-show discussion, can be a powerful tool for deepening conversations and creating the space for reflection among Indian heterosexual audiences, particularly cisgender, heterosexual men, and both heterosexual men and women aged 18–34. Further, theatre can be used as a tool to encourage dialogue and prosocial attitudes towards LGBTQ+ communities across different settings in India such as

corporations, workplaces and educational institutions, as part of diversity and inclusion training curricula. However, for a broader impact beyond informed, urban and educated audiences, the play would need to be re-created in local languages and sensitized for more conservative audiences to amplify impact.

Author statements

Acknowledgements

The authors would like to acknowledge and thank the US Consulate: Mumbai, and Anupa Godse for your guidance, assistance, and support. The authors would like to thank the study participants for contributing to this research and acknowledge the project company members for their work in supporting this research. Special thanks to the University of Florida for supporting this project: the Center for Arts in Medicine and Jill Sonke, and the College of the Arts and Anthony Kolenic. We would like to acknowledge the G5A Center for Contemporary Culture for supporting the project and the staff for distributing and collecting surveys. Deep gratitude to the founders and staff at the Humsafar Trust for the work you do in Mumbai, and for supporting this project.

Ethics approvals

This project was approved as exempt by the UF Internal Review Board on 2/6/2020; IRB202000182. The project was also reviewed and approved by the Humsafar Trust Internal Review Board.

Funding

This project/intervention was funded by the US Consulate: Mumbai (Theatre for the Social Good Grant # SIN65019GR0022). Funds went to the creation and public performances of the play. No funds were transferred to the Humsafar Trust for assistance in the research project. The funder did not contribute to the study design, collection, analysis, nor interpretation of data, nor writing of and decision to publish this manuscript.

Competing interests

None declared.

References

- Dixit P. Navtej Singh Johar v Union of India: decriminalising India's sodomy law. Int J Hum Right 2019;24(8):1011-30. https://doi.org/10.1080/ 13642987.2019.1690465.
- Li DH, Rawat S, Rhoton J, Patankar P, Ekstrand ML, Rosser BRS, et al. Harassment and violence among men who have sex with men (MSM) and hijras after reinstatement of India's "sodomy law. Sex Res Soc Pol 2017;14(3):324–30. https://doi.org/10.1007/s13178-016-0270-9.
- Sahu MK. National legal services authority v. Union of India & ors. (AIR 2014 SC 1863): a ray of hope for the LGBT community. BRICS Law J 2016;3(2):164–75. https://doi.org/10.21684/2412-2343-2016-3-2-164-75.
- Ministry of Law and Justice. *The mental healthcare act*. Gaz India; 2017.
 The Government of India. *HIV AIDS act*. 2017. Available from, http://naco.gov.
- The Government of India. HIV AIDS act. 2017. Available from, http://naco.gov in/hivaids-act-2017. [Accessed 14 October 2020].
- Asthana S, Oostvogels R. The social construction of male "homosexuality" in India: implications for HIV transmission and prevention. Soc Sci Med 2001;52(5):707–21. https://doi.org/10.1016/S0277-9536(00)00167-2.
- Bhugra D, Kalra G, Ventriglio A. Portrayal of gay characters in Bollywood cinema. *Int Rev Psychiatr* 2015;27(5):455–9. https://doi.org/10.3109/ 09540261.2015.1086320.
- 8. Thappa D, Singh N, Kaimal S. Homosexuality in India. *Indian J Sex Transm Dis* 2008;**29**(2):59–62. https://doi.org/10.4103/0253-7184.48725.
- Maroky AS, Ratheesh A, Viswanath B, Math SB, Chandrashekar CR, Seshadri SP. Ego-dystonicity' in homosexuality: an Indian perspective. Int J Soc Psychiatr 2015;61(4):311–8. https://doi.org/10.1177/0020764014543709.

 Thomas B, Mimiaga MJ, Kumar S, Swaminathan S, Safren SA, Mayer KH. HIV in Indian MSM: reasons for a concentrated epidemic & strategies for prevention. *Indian J Med Res* 2011;134(6):920–9. https://doi.org/10.4103/0971-5916.92637.

- 11. Dutta A. Contradictory tendencies: the supreme court's NALSA judgment on transgender recognition and rights. Indian L. & Soc'y; 2014. p. 225.
- Das A. Sexuality education in India: examining the rhetoric, rethinking the future. Sex Educ 2014;14(2):210–24. https://doi.org/10.1080/14681811.2013.866546.
- 13. Ismail S, Shajahan A, Sathyanarayana Rao TS, Wylie K. Adolescent sex education in India: current perspectives. *Indian J Psychiatr* 2015;**57**(4):333–7. https://doi.org/10.4103/0019-5545.171843.
- Patra S. Conversion therapy for homosexuality: serious violation of ethics. *Indian I Med Ethics* 2016;1(3):194–5. https://doi.org/10.20529/ijme.2016.056.
- Sivasubramanian M, Mimiaga MJ, Mayer KH, Anand VR, Johnson CV, Prabhugate P, et al. Suicidality, clinical depression, and anxiety disorders are highly prevalent in men who have sex with men in Mumbai, India: findings from a community-recruited sample. *Psychol Health Med* 2011;16(40):450–62. https://doi.org/10.1080/13548506.2011.554645.
- Thomas B, Mimiaga MJ, Mayer KH, Perry NS, Swaminathan S, Safren SA. The influence of stigma on HIV risk behaviours among men who have sex with men in Chennai, India. AIDS Care. Psychol Socio-Medical Asp AIDS/HIV 2012;24(11): 1401–6. https://doi.org/10.1080/09540121.2012.672717.
- Logie CH, Newman PA, Chakrapani V, Shunmugam M. Adapting the minority stress model: associations between gender non-conformity stigma, HIVrelated stigma and depression among men who have sex with men in South India. Soc Sci Med 2012;74(8):1261–8. https://doi.org/10.1016/ j.socscimed.2012.01.008.
- Chakrapani V, Vijin PP, Logie CH, Newman PA, Shunmugam M, Sivasubramanian M, et al. Assessment of a "Transgender Identity Stigma" scale among trans women in India: findings from exploratory and confirmatory factor analyses. *Int J Transgenderism* 2017;18(3):271–81. https://doi.org/ 10.1080/15532739.2017.1303417.
- Mimiaga MJ, Closson EF, Thomas B, Mayer KH, Betancourt T, Menon S, et al. Garnering an in-depth understanding of men who have sex with men in Chennai, India: a qualitative analysis of sexual minority status and psychological distress. *Arch Sex Behav* 2015;44:2077–86. https://doi.org/10.1007/ s10508-014-0369-0
- 20. Anand P. Attitude towards homosexuality: a survey-based study. *J Psychosoc Res* 2016;**11**(1):157–66. https://doi.org/10.12740/APP/64040.
- Banwari G, Mistry K, Soni A, Parikh N, Gandhi H. Medical students and interns' knowledge about and attitude towards homosexuality. J Postgrad Med 2015;61(2):95–100. https://doi.org/10.4103/0022-3859.153103.
- Shah SP. Queering critiques of neoliberalism in India: urbanism and inequality in the era of transnational "LGBTQ" rights. Antipode 2015;34(5):947–73. https://doi.org/10.1111/anti.12112.
- Dey S. Queering virtual groups: exploring Facebook groups as a space for identity construction and social justice among the LGBTQ community in India. Dissertation Abstracts Inter Section A. Humanities and Social Sciences; 2020. https://surface. svr.edu/etd/1088.
- Blair C, Valadez JJ, Falkland J. The use of professional theatre for health promotion including HIV/AIDS. J Dev Comm 1999;10(1):9–15.
- Ball S. Theatre and health education: meeting of minds or marriage of convenience? Health Educ J 1994;53(2):222-5. https://doi.org/10.1177/001789699405300212.
- Cohen-Cruz J. Local acts: Community-based performance in the United States. Rutgers University Press; 2005.
- 27. Ünalan PC, Uzuner A, Ifçili S, Akman M, Hancolu S, Thulesius HO. Using theatre in education in a traditional lecture oriented medical curriculum. *BMC Med Educ* 2009;**15**(73):9. https://doi.org/10.1186/1472-6920-9-73.
- Di Biasio D, Boudreau K, Quinn P. How theatre can promote inclusive engineering campuses. In: ASEE annual conference and exposition, conference proceedings: 2018.
- Tarasoff LA, Epstein R, Green DC, Anderson S, Ross LE. Using interactive theatre to help fertility providers better understand sexual and gender minority patients. Med Humanit 2014;40:135–41. https://doi.org/10.1136/medhum-2014-010516
- Houseal J, Ray K, Teitelbaum S. Identifying, confronting and disrupting stereotypes: role on the wall in an intergenerational LGBTQ applied theatre project. Res Drama Educ 2013;18(2):204–8. https://doi.org/10.1080/13569783.2013.787263.
- 31. Lee JA, Finney S De. Using popular theatre for engaging racialized minority girls in exploring questions of identity and belonging. *Child Youth Serv* 2005;**26**(2): 95–118. https://doi.org/10.1300/J024v26n02_06.
- Christensen MC. Using feminist leadership to build a performance-based, peer education program. *Qual Soc Work* 2013;12(3):254–69. https://doi.org/ 10.1177/1473325011429022.
- Halverson ER. InsideOut: facilitating gay youth identity development through a performance-based youth organization. *Identity* 2005;5(1):67–90. https://doi.org/10.1207/s1532706xid0501_5.
- 34. Rosenfeld Halverson E. Telling, adapting, and performing personal stories: understanding identity development and literacy learning for stigmatized youth. Dissertation Abstracts International Section A: Humanities and Social Sciences; 2005.

 Graaf A. Chapter 13. The role of absorption processes in narrative health communication. Narrative absorption. John Benjamins Publishing Company; 2017.

- **36.** Kinnebrock S, Bilandzic H. How to make a story work: introducing the concept of narrativity into narrative persuasion. In: *International communication association conference*; 2006.
- 37. Brahma J, Pavarala V, Belavadi V. Driving social change through forum theatre: a study of Jana Sanskriti in West Bengal, India. *Asia Pacific Media Educ* 2019;**29**(2). https://doi.org/10.1177/1326365X19864477.
- Advocacy at the humsafar Trust [Internet]. [cited 2020 Sep 10]. Available from, https://humsafar.org/advocacy/.
- Baum F, MacDougall C, Smith D. Participatory action research. J Epidemiol Community Health 2006;60(10):854–7. https://doi.org/10.1136/ jech.2004.028662.
- Riddle D. The Riddle scale. Alone no more: developing a school support system for gay, lesbian and bisexual youth. 1994.
- Duggan L, Muñoz JE. Hope and hopelessness: a dialogue. Women Perform 2009;19(2):275–83. https://doi.org/10.1080/07407700903064946.
- Stuttaford M, Bryanston C, Hundt GL, Connor M, Thorogood M, Tollman S. Use of applied theatre in health research dissemination and data validation: a pilot study from South Africa. *Health* 2006; 10(1):31–45. https://doi.org/10.1177/ 1363459306058985
- 43. Decety J, Cowell J. Empathy, justice, and moral behaviours. *AJOB Neuroscience* 2015;**6**(3):3–14. https://doi.org/10.1080/21507740.2015.1047055.
- Louis WR, Thomas E, Chapman CM, Achia T, Wibisono S, Mirnajafi Z, Droogendyk L. Emerging research on intergroup prosociality: group members'

- charitable giving, positive contact, allyship, and solidarity with others. *Soc. Personal. Psychol. Compass* 2019;**13**(3):e12436. https://doi.org/10.1111/spc3.12436.
- Chawla A. Gender inequality in India. In: The Routledge handbook of exclusion, inequality and stigma in India; 2020.
- Kandiyoti D. Bargaining with patriarchy. Gend Soc 1988;2(3):274–90. https://doi.org/10.1177/089124388002003004.
- Sur A. Persistent patriarchy theories of race and gender in science. Econ Polit Wkly 2008;43(43):73–8. http://www.jstor.org/stable/40278105.
- 48. Dinas E. "Openness to Change": political events and the increased sensitivity of young adults. *Polit Res Q* 2013;**66**(4):868–82. https://doi.org/10.1177/1065912913475874.
- 49. Mayberry M. Gay-Straight Alliances: youth empowerment and working toward reducing stigma of LGBT youth. *Humanity Soc* 2013;**37**(1):35–54. https://doi.org/10.1177/0160597612454358.
- Gonzalez KA, Riggle EDB, Rostosky SS. Cultivating positive feelings and attitudes: a path to prejudice reduction and ally behaviours. *Transl Issues Psychol Sci* 2015;1(4):372–81. https://doi.org/10.1037/tps0000049.
- Sabat IE, Martinez LR, Wessel JL. Neo-activism: engaging allies in modern workplace discrimination reduction. *Ind Organ Psychol* 2013;6(4):480–5. https://doi.org/10.1111/jops.12089.
- Webster JR, Adams GA, Maranto CL, Sawyer K, Thoroughgood C. Workplace contextual supports for LGBT employees: a review, meta-analysis, and agenda for future research. *Hum Resour Manage* 2018;57(1):193–210. https://doi.org/ 10.1002/hrm.21873.