



Mixed Blood Theatre uses theater as a tool to create a healthy relationship with the East African community in the Cedar-Riverside neighborhood of Minneapolis.

PHOTO BY RICH RYAN PHOTOGRAPHY, PROVIDED BY MIXED BLOOD THEATRE

## STORYTELLING AND PUBLIC HEALTH

# Mixed Blood Theatre listens to its community

BY LINDA PICONE

As the Cedar-Riverside area of Minneapolis became increasingly an East African immigrant community, Mixed Blood Theatre, in the center of the neighborhood, had to decide if it was going to be an island or an anchor.

“We tried to create an audience-performance relationship, which is what we knew,” says Jack Reuler, founder and ar-

tistic director of the theater. “But in 2015, we realized this was not the right relationship. So, we asked ourselves, ‘What if we

use theater as a tool to create a healthy relationship with the community?’ We stopped making the essence of our work being people coming to plays.”

Instead of opening theater seats to the community (which Mixed Blood has also done, with a no-fee option for tickets), Reuler and theater leaders decided to learn what was important to the people who lived in their neighborhood by going to them.

Starting in 2017, Mixed Blood began a series of “story circles” organized by Abdurrahman Mahmud, who had trained as a nurse in Ethiopia and spent a decade working with humanitarian organizations in Africa. Storytelling is an important art in the East African community, Mahmud says. “Bringing the people together was a great learning opportunity for us.” He and the theater wanted to explore health care disparities in the immigrant community.

That exploration, which they called Project 154, was initially funded by a

national organization, Artplace. When that funding ended, however, Reuler and Mahmud regrouped and began exploring ways to move the work forward. “We went from that specific project to a whole storytelling studio,” Mahmud says. “We’re now building partnerships between City of Nations Storytelling Studio and stakeholders in the community: religious leaders, health care providers and more.”

### Story circles

Community members were invited to take part in 25 storytelling sessions of nine to 13 people each, clustering people by gender, age, etc. Men and women were in different sessions, as were those who were in a generation born in Africa and those in a younger generation who were either born in the United States or grew up here. There were Somalis and those from Ethiopian ethnic groups.

“One of the great things we learned from the community were the taboo issues,” Mahmud says. “Something a young girl is not able to discuss with her mother or a young man may not be able to talk about at the dinner table.”

The three key “taboo” issues that came from the storytelling groups were:

- Reproductive health education issues.
- Mental health.
- Substance abuse.

“Each one of these taboo things triggers another one,” Mahmud says. “When a young girl at school experiences some kind of sexual incident or becomes pregnant and doesn’t have good communication with her mother, she may experience mental health issues and may even turn to substance abuse.”

“We wanted to take the three taboos out of the shadows and put them into the central conversation,” says Reuler.

There was always an appropriate facilitator for a storytelling session, Mahmud says. “The facilitator doesn’t guide what people talk about, they just open the sessions and capture what is said. They create trust.

“Many of the folks in Cedar-Riverside come from refugee camps. When you live in a refugee camp, it’s hard to speak freely

because of fear of repercussion. One of the roles the facilitator had was to tell people they could speak freely, that we were not recording anything, not taking any pictures—that we would not even take their name, if they weren’t comfortable.”



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Nevertheless, more than 250 people were willing to share their stories in the groups and 15 were willing to allow their stories to be put on the Project 154 website (<https://mixedblood.com/community/project-154/>). But, Mahmud says, “We had to negotiate a lot of things. A lot of women declined to come in front of the camera and tell their stories; that’s kind of taboo.” A majority of the participants were women, but only three agreed to do video profiles.

Comments from group participants included such things as:

“Usually, men don’t go to the hospital because of the fear of being diagnosed with an illness.”

“Us—Somali people and humans in general—we stigmatize people with mental health problems.”

“America is making me look weak.”

### Working for behavioral change

Project 154 “was really about changing the behavior of providers and patients, more than quantitative results,” Reuler says. The goal was to have health care providers understand East African immigrant culture and values to better work with their patients—and to have the immigrant community become better advocates for their own health care.

“One of our goals at City of Nations Storytelling Studio is to collect all these stories, put them in a video and then take it back to the community,” Mahmud says. “We want to go to all the stakeholders who are providing services to this community and educate them as to what the community’s issues are and how the community wants to be approached.”

For members of the immigrant community, he says, “We want people to be more comfortable saying they have an issue or they are struggling with addiction. We want to help them understand these issues deeply and at least to be comfortable to discuss these things in their own circles.

“That is where the real community engagement starts.”

In the next phase of Project 154, City of Nations Storytelling Studio, with the support of Mixed Blood, will support emerging artists to start conversations about some of the health issues that came out of the story circles, and a traveling exhibition, “Health Exchange: Stories from our Neighborhood,” will be presented at health care institutions to share the stories, experiences and lessons learned. The exhibition, which is accredited for CME, is expected to be done by the end of March.

“It has very clear outcomes for physicians,” says Reuler of the exhibition. “You should know this and this and this about the community.”

Abdu’s City of Nations Storytelling Studio, Mahmud’s organization, grew out of the Project 154 work. Currently, Mixed Blood Theatre hosts the studio, but the long-term goal is to have Mahmud build an independent model for integrating the arts and immigrant health. **MM**

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