PCI: 2005 Entertainment Summit: How Entertainment Is Being Used to Deal With Social and Health Issues Around the World
November 15, 2005
SONNY FOX: Good morning. My name is Sonny Fox and I am a senior consultant to the Population Communications International having run through all of the other possibilities, having been the board, chairman of the board and senior vice president of PCI and now senior consultant. I think I have run out of titles but not out of interest.

We are delighted to welcome you all here to what is going to be a really extraordinarily interesting and I think unique experience. For those of you who have any interest in how entertainment is currently being used to impact—tellingly and compellingly—on issues here and around the world. It is our hope that after you have finished the day you will understand the power inherent in story telling and how it can be tapped into. To encourage that interest there are several ways we will have hoped to have done that. One is in your brochures that you got you will find a list of all of the presenters with their E-mail addresses and we encourage you—with their approval of course—to follow up in contacting any of the presenters that you want to followup with and continue to investigate possibilities of association. So it is our hope also that out of this will come new associations, new partnerships and perhaps new resources for extending the reach of entertainment as a powerful weapon in dealing with health and social issues.

We have assembled from around the world an
extraordinary group of people who are currently involved in one way or the other in utilizing entertainment and for various reasons and for various purposes. We also have two extraordinary qualified researchers to talk about how we know that it works. Then after lunch we will have Neal Baer here who is as you can tell from this is a man who embodies to an extraordinary extent all of the qualities that we will be presenting for. He himself being a doctor and being an executive producer of a top network program in the United States.

Later today, we will break for lunch. It will be a box lunch I have to tell you, you know modesty and truth in advertising. It is a box lunch after which Neal will be there. Following Neal’s presentation we are going to stay in this room even though it looks like we have ended the process here at two o’clock—actually we are going to stay around with most of the presenters, ourselves and we hope many of you to talk to each other, to talk the presenters and engage in a conversation for as long as you wish until at least four o’clock this afternoon because I want to encourage a cross pollenization if you will of ideas. There are those of you in the room who properly probably should be up on the dais with us because you have done extraordinary things too. But what we want to do is to take advantage of your presence not only to be the recipients of information but also to engage in
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There are some people I want to thank before we get started, which is in most cases obligatory to say—in my case it’s a bit of enthusiasm I point out. First of all, I would like to thank the Kaiser Family Foundation for making available this lovely facility and for their support. I would like to thank the UN Foundation for giving us office space these last couple of weeks and being very helpful in getting us set up here in New York is the home base of PCI. I am from California so we have no staff here and we had to bring in a staff. Hayes Associates were very good and kind to helping us with that. And then the UN Foundation gave us office space so a lot of people have been very helpful. And then individuals too. Kathy Hand, whose father was head of protocol at the White House under Johnson and is very knowledgeable about this town. And I came...
to Kathy early on, I said in the words of Tennessee Williams, “I depend upon the kindness of strangers,” and I needed somebody by the hand in this unique group called the Beltway and make sure I wasn’t going to step on any mind fields as we organize this conference. So, Kathy has been a great guide and helpmate in that respect. And then Christie Kelly who is a freelancer has been helpful in all of the technical aspects of the designs of things like that. And she has been extremely helpful and supportive here too. So it has been—with the assistance of all those people that what you are going to see today is going to come about.

I want to start by introducing a tape that we just edited together. It is just a four and a half minute tape but it is a good introduction, I think, to PCI and to the whole idea in general of what happen in using entertainment and how it comes about in telling stories and saving lives. So I think what we will do right now is roll that film and then I am going to introduce executive of PCI.

[Video begins]

MALE SPEAKER: ...entertainment that is far more effective than any other media used.

FEMALE SPEAKER: [Inaudible]

MALE SPEAKER: Today in every room in the house and PCI communications helpful and useful information.

FEMALE SPEAKER: [Inaudible]
MALE SPEAKER: Today television and radio reaches into every corner of the globe. PCI works with broadcasters around the world with life saving—

FEMALE SPEAKER: [Inaudible]

FEMALE SPEAKER: It is great because they tell me—change people’s lives, actually our lives. The whole T.V. series because the [inaudible] happen here and this is why we like it.

FEMALE SPEAKER 2: And I think the way that [inaudible] international comes in from the ground [inaudible] and the process is used for determining [inaudible] is, what the experience is like, difference that go out and find out exactly what the listeners want to hear about, care about, what their values are.

MALE SPEAKER: [Inaudible] to work together changed the world, changed [inaudible].

[Video ends]

[Applause]

MICHAEL CASTLEN: Good morning. I am Michael Castlen and I am executive director of Population Communication International. I want to welcome everybody. I would also like to thank Sonny Fox for putting together this event. In fact, this is the tenth in a series of summit meetings that PCI has had over the last 20 years. This is our twentieth anniversary.
The summit series that we have has brought together media professionals, funders, people, broadcasters and NGO participants from around the world. We have had soap summits. We have had talk summit where we brought together talk show hosts. We have even actually had video game and prime time summits. So, I welcome everyone here.

This is the portion of the presentations, which is an advertisement for PCI. Sonny actually asked me to talk a little bit about what PCI is doing this year and what we plan to do in the future. So in starting my presentation in our twentieth—this is our twentieth year. PCI has played many roles in its 20 years. We have been a producer, an advisor, a writer, a teacher and a researcher. Our aim is to demonstrate that the power of communications in social change.

PCI has producer media content in four continents. We have produced television shows in India, Mexico, and China. Radio shows in India South America and the Caribbean. We produce comic books, films, and this is a demonstration of just some of those shows. PCI’s mission set outs to advance the goals of the UN Millennium Development Goals including reduction of poverty, improving the quality of living standards, women’s empowerment, gender inequality, child mortality reduction, HIV prevention and environmental stability. So far, shows that we have this year in China we are actually starting our third season of Beijing, you saw
some clips of that show earlier. This show is actually started broadcasting in ten cities on November first and will start broadcast in fifteen more cities, including Shanghai starting on December first. This year’s story line is about HIV/AIDS. We think that this is actually one of the first times in China that the HIV message actually has been in a commercial soap opera in China.

In South America, we partnered with local producers to run a radio program that is broadcast across Peru. This show Valero del Sol is actually a show that is going to have adolescent themes. It will launch December first and it actually broadcasted around 15 provincial stations, including Lima.

In Africa during the past five years, PCI has produced over 515 minute episodes of serial drama called [inaudible – foreign language]. We are actually experimenting right now on re-broadcasting that show on the world’s based satellite. It has exposed new audiences across eastern Africa including Tanzania, Uganda, which is beyond our original location, which was Kenya.

And I think most exciting in Latin America we are on the verge of launching 11 new shows in Mexico, Honduras, Guatemala and in the Caribbean across a whole range of issues where we have worked with coalitions of service providers, broadcasters and ministry people to really have some exciting...
The key to PCI’s success is that we build local capacity and we do that in two ways. We work with national broadcasters and we also work with community grass roots organizations in a coalition model. In Pakistan and India and China and Mexico we have worked with National Broadcasters actually produce commercial soap operas. And the Caribbean, Latin America and Asia we have worked with NGO to have community based shows that are on—for the most part on radio and have a full range of interventions.

WE have also used formal training programs with US universities to build skills and give credentials and expand context. With the University of Southern California, we have actually run for six years the media leadership program and trained more than thirty professionals. Taking our lessons learned over the past twenty years we have developed a program to train not only individuals, but coalitions and service providers in radio stations to create their own radio serial dramas. Our aim is to make communications an integral part of development communications overseas. Most recently, our training initiative has trained over 20 groups in Latin America. We hope to expand this program to Asia and Africa in the future. This is actually the training program that led to the launch of the eleven new community based shows that we will launch in February. A very, very exciting program.
What distinguishes us in entertainment education is that research is a very important part of what we do. We do everything from listener groups, audience polling, benchmarking, informative research, and research is an integral part of every part of our shows. We want to know that this is effective. This has actually lead to more than fifteen University based peer review evaluations have been published in academic journals, books, and other locations. You are going to hear a lot about that today.

Finally, I want to welcome everybody. There is a lot of stuff today. I think you are going to enjoy today’s presentations. So thank you very much.

SONNY FOX: There is obviously a lot more to say about PCI. If you go up on population.org, the website, you can find out a lot more.

Okay, I want to kick right into our first panel then. What we have in the first panel is as you will find out a fairly diverse group of people who are utilizing entertainment in diverse ways. And what we want you to do is listen to and take away from what you are going to be hearing today are how this can transliterate into being something that can be utilized by you in your areas of interest. Some of you are from, as I mentioned, from faith based groups, some from the department of Defense and DOD and public health and so on. Each of you will listen to what you are going to
hear and it will distill through the prism of your own
concerns, your own experience. So it will resonate
differently in many of you but what we hope is the constant
is the realization that this is a powerful, powerful
instrument to be utilized in advancing social and health
concerns and in changing attitudes, some of which have been
there for hundreds of years. The ability of the emotional
content of these two and the modeling content to brought
through the encrustations of sexists or religious or social
morays is what is unique to some of what we are going to
propose to you today. Those of you who are concerned of, for
instance, of AIDS, one of the things that is clear to us
anyway is if you go with just a pharmacological model and a
medical model and don’t deal with the social context of the
disease, especially in places like sub-Saharan Africa, and you
don’t deal with the role of women or the lack of empowerment
of women, it can be difficult, if not impossible, to get your
hands around that disease because it is that powerless in
women to say no and the way that they are treated by their
husbands in many ways, makes it almost impossible to deal
with, just as a medical model.

This is where what we do comes in. there is a range
of presentations you will be hearing and you will take away
from it that which you will that you will find most useful to
your concerns. But I hope that you will seek out at the end
of this the people whose areas are closest to yours and will follow up with those people to try to find out how you can actually incorporate some of this into your own concerns.

I am pleased to introduce our first speaker who is from Sesame Workshop. We have two actually Sesame Workshop today. Dan is executive vice president of the International Global Strategy. It is such a concern with how you reach out for partnerships, how you work within societies that are outside the United States, how do you take the power inherent in the entertainment for the Muppets and transliterate that into powerful entertainment in different societies that speak to different concerns. That is an extremely interesting and extremely important aspect of what is going to happen. So I commend to you by the way each of these people have extended bios in your books that you look at these because I am giving you a very shorthand introduction to people of great importance. So, I welcome as our first panelist Dan Victor.

[APPLAUSE]

DAN VICTOR: Thank you Sonny. Good morning. The theme of today’s presentation is an important one and one which Sesame Workshop; my organization has dedicated self over 36 years. Namely, how can we use mass media to reach and teach young children, their families, and their caregivers that take care of them the things that they need to know to survive and thrive in the modern world? I am going to
describe to you our philosophy, our research approach, our production process, and our multi-platform distribution approach as by focusing on one particular project, this is going to be a very non-theoretical presentation. The project I am going to focus on is a show called Takalani [misspelled?] Sesame, which is a co-production that we have in South Africa and its we think a paradigm for reaching and teaching millions of people with educational content as well as with content that addresses critical social issues and public health issues.

I am going to go really quickly. I think I am going to set the tone for going really quickly. Sonny said he would throw a shoe at us if we were over our allotted time and I am already halfway through it. If you have more detailed questions I am around so and we can talk further.

Who are we, who is Sesame Workshop? We are chartered by the New York State Department of education. We are an educational organization and not for profit, a tax-exempt organization and we think we are the largest informal educator in the world. Our philosophy that all children deserve a chance to learn and grow, to be prepared for school, to better understand the world and each other, to think, dream and discover, and to reach their highest potential. We have been engaged in 22 locally produced co-productions through the world. Our show appears in over a...
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hundred countries. We distinguish between syndication of the English language show, that is a US version of Sesame Street and local co-productions, which we produced with local television producers and experts in childhood education. These local co-productions which are driven by the needs and curriculum determined by local experts and academics and not mere program sales but they are local productions from educational, creative, cultural and very importantly political point of view. At the present time, we have local co-productions in Mexico, Germany, Netherlands, Japan, each one of those countries we have been over thirty years, Bangladesh, Russia, South Africa, Egypt, India, Jordan, Palestine and Israel. And with a little help from our friends coming soon, we hope, Indonesia, Afghanistan, Northern Ireland, Brazil and China. I just came back from the Middle East where we launched our Egyptian version, Allah Simpson, on a free satellite company called Future T.V., which has a footprint over entire Arab world.

This is a graphic presentation of our model for research and production and I am going to let my colleague Dr. Lewis Bernstein, who is appearing in the next panel go into this in greater depth and he can give you a much more interesting and informative view of this.

Takalani Sesame in 1992, we began exploring in South Africa the possibility of mounting a local co-production. The

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needs in the nation were fairly obvious. A tremendous need for early childhood education building cognitive skills, teaching basic life skills, but the specific needs and the capacity to produce a version of Sesame Street that met those needs was unknown. Over six years we assembled a wide range of local partners and in 1998, we put together the funding and execution sides of the equation. We began development and production Takalani with a local co-production partner and with SABC, the state broadcaster, as well as the Department of the Ministry of Education. The show debuted in 2000. Funding for the show was made possible by U.S. AID. The objective of the whole project was to launch a multimedia educational project to address the needs of disadvantaged South African children. And we launched it through television, radio and outreach. This is a very summary—I am sorry you can’t read it, I can see people squinting—of our curriculum, which was developed again with local partners. It had three major areas: literacy, which of course is reading, writing, listening, speaking and other forms of expression and communication; numeracy, mathematics; and lifestyles, which ran a very wide gambit, science, health and well-being, reasoning, sound and visual discretion, relational concepts, social units, etcetera.

I will run the open of the show so you can just get a flavor of what Takalani is like.
I could talk to you for four days—I know it is hard to compete—I really could talk to you for days about how each character was designed and how the choices were made about what the set would be and who the human characters would be. It was all very, very carefully designed to really create a new vision for South Africa that was just emerging from the dark days of apartheid. The show has really been a sensation but that is now what I want—I want to talk more about the elements of the entire project.

So, SABC was our distributor. We have national distribution. A total of 18 weekly airings, that is nine hours of Takalani Sesame on television every week. We decided to do an outreach through radio and other materials. Radio because we really needed to reach native speakers of tribal languages and we launched 2.5 hours of Takalani radio per week across four stations. You can see the different languages that they are addressing.

We traditionally do outreach in almost every country that we are in. It’s focused generally on print materials and we also have a trainer model where people who take care of young children are taught how to use those materials and the show in enhancing the educational messages of the show. We even did a small experiment with wind-up radio because we...
were concerned with the fact that some people in the remote countryside do not have access to electricity and therefore are unable to get radio.

We crafted a public/private partnership with Samland [misspelled?], which is an insurance and financial services company and very quickly wanted to become associated with this project in South Africa and with their support we supplemented the basic materials in outreach with specific materials about prevention of burns, parent education booklets, inserts into a magazine in four different languages, and also live radio events, which we found worked tremendous ways engendering excitement about the show and about the messages of the show. We had four events, which have drawn 30,000 people. This again is with Samland’s [misspelled?] support.

This is a picture of Kami [misspelled?] I am sure many of you have seen her. She is the first HIV positive mass media character for children ever created to teach children and their families about the social and public health issues around AIDS and HIV. The origin of Kami was that our local partners came to us after the second season and said that they felt that the curriculum had to be refocused on this critical public health issue for South Africa where there are 5.3 million HIV/AIDS victims. That is how Kami was born.

We established new curriculum goals for Kami. They
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feel into three categories, knowledge, values and attitudes, and skills. Knowledge was basic information about HIV/AIDS. Values and attitudes, humanization, destigmatization, openness about the problem. Skills was coping with the illness and with death and dying.

This character was extremely well thought out. we identified an educational message for her, which was mainstreaming age appropriate, basic education messages on HIV and AIDS reducing stigma, breaking the silence, modeling positive community interactions related to HIV and AIDS, and transforming public perceptions of the disease.

This is her vital statistics. She is a girl because a disproportionate number of girls and women in South Africa are HIV positive. She is HIV positive and asymptomatic to counter misconceptions about the fact that HIV positive people aren’t necessarily sickly. She is an orphan; there are over 1.1 million children in South Africa who have lost one or both parents to HIV and AIDS. And her name is derived from the Swandi [misspelled?] word for acceptance. I would like for you to roll the one segment that just shows how we use Kami on Takalani Sesame.

[Video starts]

FEMALE SPEAKER: Wait, wait, and wait. Please [inaudible] we can’t go with [inaudible]. We can’t go without Kami.

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MALE SPEAKER: Kami, Kami. [inaudible]

KAMI: Huh-uh I don’t want to play.

MALE SPEAKER: [inaudible] outside activity?

KAMI: Because the other children exclude don’t want to play with me because I am HIV positive. [inaudible] They say they don’t want to touch me because they think I will make them sick.

FEMALE SPEAKER: Oh, but Kami we all know you can’t get HIV just by touching someone or by being friends with them.

MALE SPEAKER: Maybe we should go and tell the children and just go that they cannot get HIV by touching you.

FEMALE SPEAKER: Yeah. And then they wont be scared to play with you Kami and they will have much more fun.

MALE SPEAKER: Yeah. [inaudible]

KAMI: I have much more fun when I play with my friends.

FEMALE SPEAKER: Yea, okay. Now is everyone on the train.

MALE SPEAKER: Yeah. Yeah.

FEMALE SPEAKER: Ready.

[Interposing and music]

[Video Ends]

DAN VICTOR: Kami was a sensation, not only in South Africa but around the globe and here are a few of her
friends. She became the UNICEF champion for children and she came to signify really how people can address some of the social and public health issues around HIV and AIDS on a very basic level with younger children and with their families and caretakers. But she also became a catalyst for an ensemble of a new seriousness in South Africa for dealing openly and directly with the problems of AIDS and HIV.

Although we were dealing with young children, we realized that adults in particular have a very hard time talking about this with their kids. That is what gave birth to a spinoff program called Talk To Me. And Talk To Me was a national call to action campaign that makes an emotional appeal to parents, caregivers, and educators to talk with the children about HIV and AIDS. It promotes an open dialogue to help break the cycle of fear, discrimination, and stigma. It had an integrated communication strategy involving television program, radio programming, public service announcements, print advertising to promotion, publicity events, community outreach, supporting educational booklets, a national hotline call in center and a website. Our partner again was SABC and that is AB Education. They produced 36 multi-lingual public service announcements, which reached virtually 50 percent of the television audience in South Africa and a one-hour special and a reality-based current affairs format, which debuted on World AIDS Day. I just want to show you a segment

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of this show. Thanks.

[Video Starts]

FEMALE SPEAKER:  [Inaudible] Talk To Me about getting married.

MALE SPEAKER: I already know [inaudible].

FEMALE SPEAKER 2: Talk to them about HIV and AIDS.

MALE SPEAKER 2: Tonight on Talk To Me, we are going to talk about how to talk to our children about everything that is important to them, including HIV and AIDS.

FEMALE SPEAKER: [Inaudible].

FEMALE SPEAKER 3: I know one thing that I would like to talk about is the HIV and AID thing.

FEMALE SPEAKER: I want to talk to [inaudible] the appropriate way [inaudible]. Why?

FEMALE SPEAKER 4: I tell you.

FEMALE SPEAKER: She shocked me, she really did.

FEMALE SPEAKER 4: You didn’t tell me about HIV, I told her.

FEMALE SPEAKER 3: [Inaudible]

MALE SPEAKER: I want to talk about this stuff and survival.

FEMALE SPEAKER 4: Talk to me about my future.

MALE SPEAKER: I want you to talk to me about HIV assuming that [inaudible]

FEMALE SPEAKER: And the HIV epic to the economy.

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FEMALE SPEAKER: [Inaudible].

FEMALE SPEAKER: [Inaudible] themselves who get HIV. [Inaudible] and women who had AIDS.

FEMALE SPEAKER: [Inaudible]

MALE SPEAKER: [Inaudible]

[Video Ends]

DAN VICTOR: Okay. I think you can stop it now. By the way, you should notice that if you look up at the top that Kami emblem was the logo really for Talk To Me but she does not appear in the show. So it is kind of where the character kind of transcended the show she was in and became an icon for this whole new openness.

We also supplemented the whole program with radio, with print advertising, which reached nearly seven million people, was a resource booklet in English and four other languages, which was most recently reprinted and redistributed in four additional tribal languages. And we also managed to integrate Talk To Me with the South Africa Department of Health national campaign for HIV awareness called Comonoti [misspelled?]. The show was sensation. It was re-broadcasted this year as part of a four-hour telethon and also a huge radio campaign as well as a live show. And it just recently won the Japan prize.

I just want to talk a minute about how—about the impact both on the cognitive side and on the HIV side. On the
cognitive curriculum, we did some broad study of the educational effectiveness of the show. We found that 70 percent of urban children watched the show, 50 percent of rural children watch it, 30 percent of rural children listen regularly to the radio shows. Children who watch Takalani showed improvement in performance in reading and writing skills nearly doubled that of kids who did not watch. And television with mediation, that is with a caregiver instruction on how to use the telecast more effectively showed nearly triple the improvement. With respect to numerosity, the impact was about even for those who watched the show but was substantially higher for mediation. The results for life skills was even more dramatic with three hundred percent improvement over the control group for T.V. show viewing and ironically, a little less for mediation for T.V. show viewing. The impact of radio was predictable with little improvement in cognitive training for young children particularly in math but a very substantial improvement for life skills.

With respect to HIV there was substantial gains as you can see. In the four areas of coping with illness, discrimination, blood safety and basic knowledge. And Talk To Me itself found that people who watched the special were twice as likely to talk to their children in their households about HIV and AIDS as people who did not watch the show. The
future of Takalani is bright. We have been on five years on SABC through the support of Samland and U.S. AID and now we have a new commitment from SABC for additional five years. That means Takalani will be the flagship pre-school show in South America for at least 10 consecutive years. And we have high hopes for continuing to push the Talk to Me format, maybe into different areas.

Conclusion, this project represents a media project that served as a catalyst for changing perceptions of about critical health and social issues in South Africa. Not only teaching the audience it was intended for but also having impact in the society as a whole. The key to its success we believe local partners. That is our mount motto, local, local, local partners, serious and substantial and substantive research, which Lewis will talk about, public and private partnerships, and most importantly perhaps, a great sensational T.V. show. Thank you.

[Applause]

[No audio]

KAREN MERKEL: Thank you. Good morning everyone. I think it is going to be interesting. I have been struck how with the three sets of images and things that we have seen there is some much recency in the approaches that we take. The World Service Trust is the international development arm for the BBC. We work in partnership all over the world with
educational institutions, with broadcasters, with international agencies, with known governmental organizations, and with civil society organizations. In fact, we do nothing that is not inside some kind of partnership. Where can, we use the BBC's own distribution platforms and most often we also use broadcasting channels in the countries that we are working in. Every thing that we produce is produced in the language that is most suitable to reach the most number of people.

The BBC you probably know was established to inform, educate and entertain. We hope that we continue with this mantle and will do for a long time. But the global division has an additional rubric, which we work within. That is that we have to be impartial. We have to be independent. And we have to be accurate. The reason for this becomes only too apparent when you are working in some of the territories that we are working in where very often there is no other free media at all. So, we are the voice that people come to and they absolutely have to trust it.

That creates a very special set of responsibilities and I have to say really, really they feel quite weighty to carry. It means that essentially we walk an editorial tightrope, which actually I have learned to love and embrace. I started something of a campaigner and I now find myself in another position where we are looking at how come we look
this pursuit in the round, what are all the perspectives we can bring to bear to shine a light or to raise some heat on the matter.

Now we actually work in all kind of different media formats across different platforms but I am only going to talk about jargon of entertainment this morning. There is more besides but Sonny has only given us this tiny amount of time. So to focus on—I am sorry, there is no blame of course [laughter]—

SONNY FOX: And no guilt.

KAREN MERKEL: [Laughter] so to look at drama, I think I put down empathy as the entry point. Because I think that is the place where the trust becomes absolutely critical. We are saying to audiences please will you extend your trust and go on a journey with us. Let’s explore something together. And what we will do is guarantee that we will provide a safe environment in which we can explore a whole range of taboos, of deeply sensitive, difficult, concerning discussions and issues.

Then what we do is we provoke—we can’t always do that but we try—we try to find through a fictional framework an opportunity to provoke some thing that can create a discussion. Now because we have such enormous audiences we have to be very careful about how we work on that tightrope. So very often, what we will be doing is creating a climate
I am going to move on to Cambodia. I am going to do the opposite of Dan and I am now slightly regretting my choice because I thought it was great to choose one example so what I am going to do is take you on a quick romp through three different countries. So here we are in Cambodia. I am not going to talk to you about Cambodia because I am absolutely certain that virtually everybody in this room knows much more about Cambodia than I do.

However, the context that we found ourselves in Cambodia was one where there really wasn’t a lively media environment in which we could work. We were invited by the United Kingdom’s Department for International Development, DIFD, to construct a project. It is a model that we are not working with some much anymore but it was from our perspective a classic behavior change model. And we were asked to look at two issues, which was HIV/AIDS prevention, and maternal mortality, which are two key cornerstones in the millennium development goals, which were embraced earlier this morning.

Now Cambodia interestingly, you may or you may not know has the world’s highest prevalence rate for HIV outside of Africa and the Caribbean, which is enormously high. So, we faced this interesting challenge of not only having anybody to work with so we realized that we had to start completely
from scratch. What we did was we went to the University.

Their wasn’t really a mass communications department but we did find a lot of art students. And we found from them and their friends people that we could work with and train as writers. Now much of what we do is develop through paste building anyway so we then had to go back to the DIFD and say hello, DIFD we are not going to be able to do this unless we can this absolutely huge capacity building project. So eventually, they agreed. We have created a really lively dynamic group of writers who are working with one of the BBC’s most well known executives who started a famous soap called East Vendors. And he has been working with them for a couple of years now. And there still isn’t anybody who is over 24 years old on that team, which is quite something as a team of writers and performers and production and so on. So, in a sense they have the future ahead of them.

Now I am mindful of the time so I am not actually going to talk to you in great detail about the drama. It’s called Taste Of Life and Neal isn’t here at the moment but interestingly and of course not surprisingly it is set in a hospital. We built a set. You can see the set behind the people. We have also go a nursing college so we are able to both portray the real lives of the students as they are setting about having their relationships and of course see them in class as they are learning the lessons that they then
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have to enact inside the hospital and in that way we are able to get across some of the issues which really don’t lend themselves very much to dramatic interplay on things like diarrhea. You can only visit so many times, can’t you.

The drama is working extremely well and I will talk to you about the impact in a minute. But I am going to talk about this just for a second because as Dan was talking about, we too have a large outreach set of activities that surround the drama. We have call-in shows where we have been training the local people on the radio stations how to run call-in shows, which they have never done live before. And we have spots. I am going to show you this for one reason really but have a look.

[Video Starts]

[Inaudible – foreign language]

[Video Ends]

KAREN MERKEL: All right. I think the most important thing to say about that is that we are delighted to be able to tell you that we just learned that there is a huge—well basically that people now use the word "lock choice" [misspelled?] unanimously with condom, which is a fantastic position for us to be in Cambodia.

So the study that we have recently completed, you can see the results are very good. And we are doing another piece of work to see the extent to which we have mainstreamed

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stigma issues. So that is the latest piece of work that we are doing there. But I think what I want to say that the most important thing for that group of writers is that it is the first time there has been a drama [inaudible] on television in Cambodia. There has not been a locally produced, locally written drama that has the production values that it has had. And I think that is absolutely critical to the fact that it has been and is as successful as it is.

Now we are going to move on Nigeria. I don’t know how many of you are familiar with Nigeria. But many people say that if you can get development issues right in Nigeria, you will get them right for the rest of Africa. And there is some significant reasons why that is true. You may or may not know that Nigeria is experiencing now its second democratically—well, second elected government and there is an election coming up in two years time. But that is after decades of being submerged in a military regimen. So, the whole country was in many ways ossified with a lot of fantastic talent just literally bottled up.

There are some significant stats. I mean there are millions of stats about Nigeria but I have chosen these because I think it gives you the context that we are working in. one in five Africans living in the continent is a Nigerian and that is a phenomenal statistic. BBC is privilege enough to be able to say that one in four listeners to us in...
English is also a Nigerian. But then I think the third statistic is perhaps the one where we are concentrating most.

Next to China and India, at 19 million plus it has the largest single grouping of people living in objective poverty well under a dollar a day. That rather gives the light to the kind of stereotype image of Nigeria. Oh, it is very rich. It’s got lots of oil. It’s just corrupt; actually of course, it is many other things. And we were invited by the Department of International Development again to come and do a piece of work, which was looking at governance and helping to encourage Nigerians to have a discussion. We created over a long period of time and a great deal of consultation up and down the country a project called Voices. It has two parts to it. It has a drama, which is called Story, Story, which is set in a fictional marketplace. And the drama is followed up with discussion programs, which are called Talk, Talk and we worked with journalists all over the country from radio stations training them in discussion and how you can have discussion that isn’t talking heads, that isn’t experts, that can actually enable ordinary people to voice their views.

We have set Story, Story in a marketplace and it has been a really, really difficult challenge for us. We have a group of 24 writers who are completely and absolutely stunning. And they come from across the country and from all over the place.
all of the ethnic groups because actually there is over 200—but from certainly all the major ethnic groups are sitting around the table together. They take different views on virtually every subject you can think of but we need to maintain that balance in order that we can be sure that output people are listening to is absolutely authentic. That they will go on a journey—in Cambodia the country is much more homogenize, in Nigeria, it is absolutely heterogeneous and you ignore that actually peril.

So what we going to do now rather than me tell you about Story, Story I have chosen a bit not because it is most raving phonic because I think—it is in Nigerian English and I think for some of you that really would be too challenging a listen. But what has happened with the clip, where we are going to pick it up, the market, a series and a half before this particular episode, was burnt down in a very classic [inaudible] riot, which started from nothing. It started from nothing very serious and ended very, very quickly gets out of hand. So, the following series, the community was demoralized trying to rebuild itself. We needed to fine what was our phoenix going to be and then we realized that actually phoenix, it is a fictional idea so we couldn’t have phoenix. So where we are picking it up is where there is a meeting that is being called by the chairman of the market who is telling them that the market is going to be privatized.
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[Video begins]

MALE SPEAKER: I am tired of making promises that I don’t have the resources to [inaudible].

MALE SPEAKER 1: The involvement of the private sector, what does it offer security with this, that we will all be guaranteed—

MALE SPEAKER 2: In other countries [inaudible].

MALE SPEAKER: Initially it will be difficult in the long run, it will benefit all of us. We must always be responsible minded. That is the way [inaudible].

FEMALE SPEAKER: [Inaudible] I do not think that without it in writing it work. We cannot have water. We go no [inaudible].

[Interposing]

MALE SPEAKER: I told you one more time. You hear what you will not like. [inaudible] offers us security [inaudible] we are supposed to pay taxes among whatever. Look at [inaudible].

MALE SPEAKER 2: Not be by ourselves. Not all of us pay our taxes.

MALE SPEAKER: [Inaudible] we don’t want to tell you the type of element you want.

MALE SPEAKER 2: That is very correct. Shouldn’t we even consult it before deciding on your reform?

MALE SPEAKER: As a people we should hardly save the
booths.

MALE SPEAKER 2: Is that [inaudible]?

FEMALE SPEAKER: Yes. In fact, I think we should.

[Video ends]

KAREN MERKEL: We are moving from radio onto television. We cast it from television deliberately and again you know DIFD has asked us to focus on HIV prevention. So the drama is going to move around the back of the market and some of the characters will spill over and we will see how they interact and how we can explore now. And we are really lucky in that we managed to encourage some of the film makers for the Nigeria despite living in London to come back to Nigeria to work on this project with us, which is an amazing given how many people feel about their own country.

One of the issues that we struggled with and we still do is self-censorship in Nigeria. People are so concerned to paint a good story that they will actually say no, no, no, we can’t do that. And actually encouraging people to say the worse to also face the challenge and begin to imagine the future has been a real interesting proposition for us. One of the ways that we have handled that is by establishing a very, very firm galantine democracy—I can’t believe I am saying those words here in this country but nonetheless that is what we have had to do in Nigeria. And it is not anything that any bit that the media environment is use to. That has been an
enormous challenge for us to encourage writers to have their own voice.

So, we just got some top prime figures back. I am really sorry, we are a month too early with this conference but we are absolutely amazed to be able to tell you that one in three 15- to 24-year olds have been listening to Story, Story, which is just phenomenal figure for us. And they are describing as reality documentary drama and certainly the sequence I have not brought for you to hear. We like to say that it sounds like ER. It is very, very fast, you are in the middle of it and it has got a 3-D kind of sound. So, we are really delighted that people are picking that up.

Okay, moving swiftly on, mindful of the time. We are now moving to Burma. The BBC is an illegal listen in Burma. It is a treasonable offense to listen to us so we are known by the Burman government as the lies in disguise. Again, we were invited by the Department for International Development after we had done some work for our own foreign office, to construct a drama. We went in under the umbrella framework of HIV and malaria and have been very, very slowly beginning to explore other issues of citizenship. But just to tell you just a tiny bit of context. Absolutely all the information except any international broadcasting is censored in the country. And we just done the first independent nationwide piece of impact research, which we are still working on to
sort of, you know, process all the data. But we found some really shocking statistics around the poverty. I mean there is absolutely a grinding poverty within—and that figure is real as far as we can tell. And the government is spending, you know, just under a third of its income on its armed forces.

So our task here has been we are working—because we may not work inside Burma, well certainly not inadvertently—we are working with a group of exiles. They are all Burmese and we are constructing the drama with them. We are sending and we are getting our research through other means, which for obvious reasons I can’t describe here. One of the tasks that we are trying to do is to express reality back to Burma as authentically as we can. We use our own airwaves to do that so I am now going to let the works speak for itself.

[FVideo Starts]

FEMALE SPEAKER: Today we are recording our 150th episode of our Burma radio drama. In the drama [inaudible] and at the same time talk [inaudible] issues and [inaudible] is where the action takes place.

MALE SPEAKER: [Inaudible]

MALE SPEAKER 1: One of the real mindsets of doing a project like this on different things is that you have national [inaudible] of Burma and we have heritage, a really trusted voice among the Burmese community. But we know that.
KAREN MERKEL: Well you can see from the research that we are actually making a real difference. The real problem we have with this piece of work at the moment is because of all the governments around the world taking sanctions, which you know is not for us to comment on. And we can’t actually get any funding to continue the piece of work. But this is really, really difficult situation to be in where the international community is being forced to leave Burma. We remain actually the only international provider that is independent of any education at all. So, that is a real struggle for us right now.

What I wanted to talk about just to sort of wrap up was we have a piece of work that we are developing at the moment in Pakistan. You may or may not know that our in a sense our laboratory for all of our work has been Pakistani where we started and what is now in its eleventh year and it is a soap opera. We don’t actually do soap operas anymore but nonetheless we seek to invigorate that piece of work as often as we can and draw from it experiences that can feed into other situations. Now the position we have been in Pakistan is we have been invited by an international agency to produce and now this I will quote: “We want a soap opera against forced marriage.” Okay, now this presented us with a very
interesting editorial challenge because as I said at the beginning it is not our position as the BBC—we can’t take a position on anything. And that actually of course one person’s forced marriage is another’s arranged is another’s love match. So we realize that we had a particular challenge ahead of us to work with the funding agency, work with broadcast partners, work with NGOs, and obviously through our own BBC user service to come up with something that was going actually have some kind of meaning and would take audiences somewhere that they haven’t been before.

So, this is what we are planning to do and I thought I would tell you this now just so you got a sense of what our current thinking is around how we are trying to model things. What we decided is we wont do a long form serial. We are not going to do that at all. We are going to have a season on air and it is going to be looking at marriage and family life. What we are going to do is mix drama and documentary so the story will start—the drama start after the wedding. Then we are going to look at retrospectively and we are going to tell the story through all the characters except for the bride. So, they will each be telling us how they arrived at the wedding and through that we will introduce of course that there are all of these different views around this wedding. We are going to inter cut the drama with our own archive material from our BBC [inaudible] service, fabulous material
where we have been looking at things like all the killings
where we have been looking at the issue of forced marriage.
So the discussion can happen through the absolute reality of
the well-sourced information that we have already
broadcasted.

Then we are going to break seasons and we will break
the dramatic format. We will stage live discussion between
Pakistan and the UK so we will try to in a sense bring
together in a dramatic device the business that I was talking
about before of discussion and drama and how they can feed
each other. So we are going to leave the ending—it is a big
risk. And this is the dilemma whether to do this or not—we
are going to leave how we end the drama till we have had the
discussion. So, we are going to see what comes up. So that is
how we are going to finish it.

That is what I wanted to finish with which is the
future that we are facing. I do believe that for us actually
getting audiences to tell us these are the questions you
should be asking, seems to me to be the most personal place
for us to be in. You know at the BBC, we are very privileged
in that we can provide accessible guides through complex
issues. And that is one of the things that we pride ourselves
in doing but the world becomes ever more complex and it seems
that people have many, many questions that simply aren’t
answered. We think if we could find a way to articulate those

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that would be a really important contribution we could be making. We are doing in a media market that is changing as I speak. It becomes more and more crowded, have to have to a distinctive voice, how to work and take on board the cultural ecology of the places that you are working in. How could you use a very large reputation and not step on the tiny? How can you use a very large reputation and have a really meaningful sustained impact? And then of course there is connectivity.

We are doing a major amount of work in Somalia where you probably know there is no government and yet Somalia has an absolutely massive ownership of cell phones. They can all text but hardly any of them can read and write. So it is a really, really interesting dimension that we have in a world where increasingly we as broadcasters or as content providers are not going to be in a position where we can push material out but our audiences are all going to be pulling it down. They are going to be listening and viewing and experiencing material as and when they like. They won’t even be doing it at a whole go. You might think you could use some of that vast for 20 minutes and they will be enjoying in two minute pieces because that is the world we are going to be in.

So how can we work with used generated content? It seems to me that as a dramatist it takes me to a really fascinating place. It is almost perfect [inaudible] where we have audiences, they become dramatists themselves. They
become writers. They become actors. You can have a conversation and I think that is innovation that we have to embrace.

The last thing I wanted to say is that we too work very closely—our research and learning unit is a year old and they have been doing fantastic work in enabling us to take on board our impact studies and so on. The challenge that we have is how can we take onboard that material and continue to innovate. I think I say back to those at the social scientists in the room that there has to be a place where the art meets the science. And particularly this true for funders because funders want you to do wall to wall message, we don’t need time for the creative process. That is a really, really difficult place to be because if you can’t innovate you can’t make compelling programming. So I think that the plea is that the art has to have its place. There has to be that space for the creativity to wave the magic dust in order that audiences can imagine the future together. Thank you.

[Applause]

SONNY FOX: Thank you Karen. You are all running long but so fantastically long, I haven’t— you know it is difficult for me to throw anything at you.

Karen, one quick question to you and we will have question and answer later. But where do you do the Burma productions? North Thailand, Okay, and then you beam it in?
From Singapore, um. Okay.

Our next guest is an actress who has intersected PCI’s life in a very interesting way because about ten years or maybe about 15 years ago now, we were approached by a group out of Philadelphia called Rare. At that time Philadelphia, which is interested in worrying about dealing with the environments and ecology of islands. And they were in St. Lucien at the time and they said we have a problem with the doubling time of the population and some rare rainforest up in the northern part and we need to grab a hold of this. Can you do a soap opera with us? So we initiated a soap opera called [inaudible] down that at that time. Then it went to Florae Islands where it went on to do other shows out in the Micronesia and now they have come back to start another project in the Caribbean.

Concurrently we have been working with the soap opera community in this country for many, many years trying to get them to deal with the issues for this country within their soap operas. There is—now there is a whole kind of wonderful coming together of this because RARE then connected with an American soap opera and I want that story to be put in front of you in the form of Katie McClaine [misspelled?] who is a wonderful award-winning actress from the soap opera world in this country having played for several years on—about 10 years on All My Children and for the last two and half years
on As The World Turns. And Katie McClain took this trip to the Caribbean. Let me invite her to share this with you. Miss Katie McClaine, please.

KATIE MCCLAIN: Thank you very much. I can’t say how humbled I am to be in such company. It’s very inspiring. Really what I have to bring to you my own personal experience as an American and as artist.

I was born in Los Angeles in the heart of the entertainment world. Through certain family tragedies, I began to work very young in the entertainment business and my mother died of cancer, my aunt is here, my mother’s sister. My mother’s journey through her illness was a great inspiration for me to get more involved in the kind of socially responsible story telling through whatever media I found myself working in. I have worked in daytime television for sixteen years actually, God help me. But I have also done a lot of nighttime television and off Broadway as well.

I was trained by a teacher whom I have great esteem for. His name is Michael Howard and he gave me certain phrases that I think have been incredibly useful to me as artist but I think are useful for these programs that are being developed as well. And one of his phrases was: “The more personal, the more universal.” He trained us to dig deep within ourselves to be defined our emotional truth and that in finding that we could shake other people in their core,
which was sort of the whole point. This is something to me very rewarding about communicating on an emotional level with other people.

Another phrase he gave us was “freedom within structure.” So you can hear from these amazing people the structure of an organization and incredibly important and all the way down to you know the daily ins and outs of how you are going to devise this story line. How the actors are going to speak to each other.

One of the things that I did—my executive producer, Chris Boutman [misspelled?] of As The World Turns invited me to come down to this RARE program in St. Lucien. One of the things that I did in order to work with the artists and actress there was to do improvisations because these St. Lucien artists, they knew their stuff. They had studied, they had read, they cared about their environment. They cared about their social conditions. All they needed was a general structure. And what came out of that was a really exciting, very long but you know improvisation from which we could take like, “Aw, here is exciting, emotional, dynamics between a mother and a daughter or between the daughter and her roster boyfriend.” Because of the actors were already living a lot of these situations so they brought their emotional and personal experience to the table.

The other thing—well, two other things. One thing I
learned from David Merick and that was letting go of the things that you don’t have control over, which I think is really important in terms of organizing a group. You know I came away from St. Lucien at one point thinking you know some shit, different beach, everybody wants to be the king, you know but there is certain things, in order for people to work together, you have to decide that you know, like my job is often—I am the actor, it is not my job to run the production. It is not my job to tell the writer how to tell his story but as an actor, I bring my emotional intelligence to the table and it is my job to bring that to the table as well as I possibly can. I think that is a useful technique for working with other people that we all have our expertise in whatever we claim. But we can’t do every thing by ourselves we have to work together.

Another thing I learned from working soap operas was the importance of the story; you know all glory to the story. The story is everything and if you can find a way even if it is something like you knows I had a character on As The World Turns that had a hysterectomy and I have had a hysterectomy, I have never had a child. So what do I know about these issues? But it was my job to learn about it, to have empathy for it. And to a degree that I could go there. I found other people going there with me.

A funny thing about the condom in St. Lucien for I
think it was—they had a soap opera [inaudible] they called the condom the catapult because they couldn’t use the word “condom” on the radio, which I kind of thought was funny.

SONNY FOX: Which by the way somebody decided to put out a line of condoms finally called Catapult. It became the best selling condom on the island.

KATIE MCCLAIN: Aw, that is funny. There is also another quote that I came across that is very useful. And it is from Allen Ginsberg and it is, “Subjective reality becomes the objective truth.” So that is pretty much saying what I have been saying over and over again, which is you know if it is deeply true for this one person it is going to become true for a group. I think that is why this research that everybody is doing is so useful because you know there it is in the number. A lot of people are feeling a particular way about something.

Okay. Yeah, I think I just want to tell you from my point of view these issues that have been up already about empathy, about bringing up conversation, inspiring conversations about different viewpoints, or just about how much I have experienced using those techniques, how much success I have experienced. When I use those techniques in my work, I get a lot of letters from a lot of women telling me that they have been moved by what I have done.

One very incredible story in particular is when I was...
on All My Children, a woman wrote to me when she was about 14 years old: “I don’t know what to do with my life. I hate myself, I—you know—I watch soap operas all the time and you know I don’t know who I am, what do you think?” I was like, “Wow, you know this is quite a responsibility,” and I wrote her a very long letter giving her all the—you know I said, “Read, these are all the books that inspired me and you know watch PBS,” which is what I do. I got about 90 of my education—let’s be honest—from watching television frankly. I still hunker down in front PBS and just soak it all up. I am so grateful for that programming. So anyway, I wrote her back, and about 10 years later, we had an intern on As The World Turns, a new intern and she is bopping around and she is kind of giving me funny looks and I am wondering like who is this girl, this is strange, she is kind of mincing around me and I don’t know what she wants. And finally she comes up to me and she said, “You wrote me a letter about 14 years ago. And here it is and because of your letter I went to college, I studied broadcasting and now I am an intern at As the World Turns. And I want to be a producer.” I was like wow, that is amazing that you know that one letter from one soap opera actor could have such an impact on one person’s life. And I am a big believer on the one-on-one, you know, impact. You know you change one person’s life, you have changed the world, frankly, that is my opinion, and so I have
I just want to say one last thing. You know what Karen said about not moralizing, it is just so important that we can humanize these political issues through entertainment, through theatrical context. I just—I really believe in acting. It is so powerful. Here is an example of what we did in St. Lucien.

[Video Starts]

**FEMALE SPEAKER:**—facing the same problems. The organization of eastern Caribbean [inaudible] make a more dramatic impact. Broadcast our conservation messages to all nine-member nations.

**MALE SPEAKER:** The new series that we are developing in nine countries that make up the entire Caribbean. Over the years, we have done this through trial and error. We have very, very little training [inaudible].

**MALE SPEAKER 2:** One of the challenges is how do we continue to increase the quality of our production.

**FEMALE SPEAKER:** With an unique opportunity to reach a vast new audience and make a significant impact on population and conservation efforts in the region. It was clear that we needed outside help. We needed people who know how to reach an audience and move them to the core. In short, we need—

**MALE SPEAKER:** *As The World Turns* brought to you today by dash, popular laundry detergent made especially for

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MALE SPEAKER 2: Serial programs have been around since the Arabian Nights since Dickens, it is very old form of story telling. People basically get so involved in the characters lives that they want to know what happens next. We are dealing in the same media. We are dealing with basically serial story telling but they are able to change behavior in that same way we are able to sell soap.

MALE SPEAKER: How can you get awarding actors, directors, and writers here in St. Lucien to think for us? Who is going to be the first victim? Aw, here we go. All right.

FEMALE SPEAKER: When we found out the numbers of people who listened to the soap opera in St. Lucien and the percentage of people who have just been impacted by it and it have actually changed behaviors. To me that is just absolutely fascinating.

MALE SPEAKER: There are three parts to this scene.

FEMALE SPEAKER: It is all about the type of [inaudible].

FEMALE SPEAKER: You have got to see the body then you know that they are dead.

MALE SPEAKER: Maybe your girlfriend has been there for three months and they have to leave, you know what I am saying.
FEMALE SPEAKER: [Inaudible] say yes to everybody.

MALE SPEAKER: This guy is not approved.

MALE SPEAKER 2: A difference, a lot of tricks with them that we would use.

MALE SPEAKER: Hanger on—

MALE SPEAKER 2: —twins. Yes. Which we know make the program very, very exciting.

FEMALE SPEAKER: —a smorgasbord. Your mother knows you are having sex?

FEMALE SPEAKER 2: [Inaudible].

FEMALE SPEAKER: When haven’t you been?

FEMALE SPEAKER 2: And you mean now you prostitute to [inaudible] so what is that telling me. [Inaudible]

MALE SPEAKER: I would love to see anything; anything and this program would be one way of doing it. That could maybe think of [inaudible] as part of themselves.

FEMALE SPEAKER: We agree. To me it is really educational so that we would be able to live on this earth normal and safe for all children down the road.

FEMALE SPEAKER 2: He knows that to inspire conversation the message must be meaningful and relevant to local audiences. Our success in St. Lucien shows that it is possible to make conservation personal and to move people to take action. Now the task is to take the inspiration and creativity that turned a radio soap operas into a local voice for change and bring it
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to more places.

**MALE SPEAKER:** Emotional messages are always going to be more effective because in final analysis we act on what we feel, not just on what we know.

[Video Ends]

**KATIE MCCLAIN:** So that is why they are a great group. I just a couple of other things that I wanted to suggest to you. You know in America soap operas are—we have our sponsors and it is done for financial benefit. But a lot of times they won’t tell a certain social issue type of story lines as deeply as they might or they might not tell them at all because they are afraid of antagonizing the viewership and then they are afraid of antagonizing the sponsors. But I think that we all have a responsibility and I think this kind of group as well as reaching out to the people who actually watch the shows. Like Karen was saying, people can ask for this kind of programming. And I think if they knew that it was an option that they would. So that is something that I think everyone can participate in creating. So thanks for listening and thanks for being here and I look forward to your possible questions.

**SONNY FOX:** Thank you Katie. [Applause] I have known Vicki Beck for quite a while. She is now the director of Hollywood Health and Society at the USCA Edinburgh Norman Lear Center. That is a title that masks a long journey that

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she has taken from her days at a CBC over to that. I have asked Vicki to come and sort of take that trip with us again because the CBC being the world’s arguably perhaps the world’s leading public health organization. It is a very important part of what we do in the public health area here. Their trip that they took toward awareness of this power of communications I think is an interesting one. So, I welcome Vicki Beck to the platform. Thank you. [Applause]

VICKI BECK: Thank you Sonny. Katie’s presentation actually ended on a note I think is the perfect savoir for this story because we have asked, we do ask and we have results. That is what I am going to talk about today. It is also a wonderful opportunity I think to look back and to look forward and that is what I will do as I discuss the journey of the CDC from Atlanta to Hollywood and talk about the history, the outreach and the results.

If you look at this journey, in steps in order to measure it, it might be close to 3,000 miles, probably less than that. But if you look at the steps that preceded it the current activities that we undertake in Hollywood, there are almost as steps involved.

How did it all begin? Well like most things in entertainment, this story began in Hollywood. There were a couple of young EIS officers. These are graduates of CDC’s sort of specialized disease investigation program. We were
assigned to the LA County Health Department when they were invited to a studio for a consultation. It was the early seventies and the consultation was for a new pilot about disease investigations. So, the two young EIS officers who were also MDs came over and talked to the studio people, take the script with them, come back with extensive comments, as you might guess, and they were politely thanked and shown the door. This unique relationship in a way is the beginning of what become a very productive partnership between CDC and Hollywood some 20 years later. Because one of those young EIS was named Jeff Copeland. He became director of the CDC from 1998 to 2002. Sonny and others in this room may recall that it was under Jeff’s watch that CDC made the commitment to working with Hollywood on a wide range of public health topics.

But aside from this consequence, there are some other events that took place that lead to this new partnership. In the 1980’s, there was an article that came out in the CDC’s weekly journal, the WMWR. This was ’81 and it reported on five young homosexual men at three hospitals in LA County who had a mysterious new disease. By the following year, the disease was named AIDS. The surgeon general had called for sex education for all youth and at the same time; CDC was establishing programs in chronic disease, anti-tobacco, and violence. By the 1990’s, prevention was added to CDC’s name.
And communications were taking more of a health communication in social marketing approach. By 1994, the HIV program hosted an expert panel to consider CDC’s role with the entertainment industry. After two days of deliberation this panel which included members from advocacy, entertainment, academic, and public health organizations, they enthusiastically supported CDC to become a resource to the entertainment industry, not just on HIV but on topics across the agency. And by 1998, there was a pilot program established in the new office of communication under Vicki Farnworth [misspelled?].

At the same time, in the late ‘90s scientific evidence was also mounting in favor of a Hollywood partnership. CDC’s analysis of the health style surveyed indicated one out of five people in the United States were regular daytime viewers, 38 percent were regular prime time viewers, and a majority of these people reported that they learn something about a disease or how to prevent it from a daytime or prime time story line, and more than one third took some action with discussion being the primarily action but we also had percentages on people who would call for information, who would tell someone to do something who might do something themselves to prevent a problem. At the same the Kaiser studies were coming out on ER and Neal is going to
In developing countries, just like many other projects that you have heard about now this morning, there were soap operas being developed, evaluations were coming in and there were positive influences on health literacy, health promotion, and disease prevention. These projects were based on social cognitive theory which Arvind may touch on today at lunchtime.

So, in 1998 when this pilot project started many T.V. shows were already addressing health topics on T.V. Medical shows like *ER* and *Chicago Hope* had health content every week. Other prime time and daytime shows were starting to do story lines and had been doing story lines on HIV/AIDS, teen sex, rape, cancer, many other topics. Most shows had no health experts on staff or in consulting roles. And there were groups that were trying to work with Hollywood on their specific topic areas like reproductive health, environment, addiction, and topics like that.

So, the CDC established three main goals for their pilot project to ensure health content was accurate, to encourage timely topics were included in story lines, and to encourage prevention messages for health story lines. The pilot was very successful but there were limitations. One was the Atlanta location. Another was a lack of experience with entertainment industry. So jump to 2001, CDC put out a RFP

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and USC’s Anna Bryd school communication was awarded a cooperative agreement grant that would last for five years to develop, maintain, and evaluate an entertainment education program from public health. With the bonus of being able to evaluate programs, the USC project greatly expanded on the CDC outreach and evaluation with support from the USC faculty, graduate students, and fellows. We now have participation by other Universities as well.

In 2003, NCI, the National Cancer Institute, joined this cooperative agreement as an equal partner with CDC. And in 2005, two more health agencies, the Agency for health care resource and quality and Hearses, Division of Transportation funded us for specific projects. The USC program immediately developed a web presence because we know from other studies that writers use the web as their number one resource for health information. The links on our site make it very easy for writers to go from our site to tip sheets on health information that are housed on the CDC and NCI dedicated pages. We had 7,282 hits to our home page this past year, 762 downloads of our brochure and 936 downloads of our online newsletter.

There is a CDC webpage that links to our page as well and we work with CDC staff on tip sheets, which include case examples for a whole range of topics. Here is the NCI webpage. Both CDC and NCI are develop new sections if you
look up in the right hand corner that will depict cancer on T.V. and other health topics on T.V. And you probably see here As The World Turns, we had two big story lines we worked with them on this summer with Chris and Vivian. So, we have had a very good partnership with that show.

We also developed a very key partnership with the Writer’s Guild of America. The president of the Writer’s Guild serves as the co-chair of our advisory board. Every time there is a new president, that president steps into the co-chair position along with Neal Baer who is our other co-chair. Again, you will hear from him later. The partnership allows us to host an advisory board meetings at the Writer’s Guild and panel discussions at the Writer’s Guild as well. Our board includes prime time network executives, representatives from other entertainment groups, USC, LA County, CDC, NCI, and other public health groups like—oh, I mentioned L.A. County.

We have held 10 panel discussions in four years and we have used panelists from all of our funding agencies plus the local health experts at USC, UCLA, and the county health departments and advocacy groups as well. In the past year, we have responded to 243 requests from writers for health information. Many of these requests resulted in consultations on topics like HIV/AIDS, cancer, obesity, heart disease, transplants, medical errors, hospital infections, smoking,
and pregnancy. In the past three years, we assisted about
dozens Tela Novella story lines. CDC experts consulted this
summer on a major diabetes story line on Telemundo and in the
past two years we have conducted more than 50 briefings with
T.V. shows in LA and New York with a whole range of experts.
In fact, we are getting ready to do briefings in a couple of
weeks in New York.

We also conducted an international briefing by DVC,
a digital videoconference for Hollywood writers. They were at
a conference at Calcutta and we were contacted by the person
who was putting on the conference and asked if we could bring
together some Hollywood writers to talk about how they
integrated HIV and AIDS into their programming. So, we had
writers from Girlfriends, the Bold and the Beautiful and from
ER talking about these specific topics.

Population Communication International has played a
major role in the development of the center for health
awards. The award for daytime drama was first announced at
the 1999 Soap Summit Conference in New York by Jeff Copeland.
And the first Sentinel was given to One Life to Live at the
2000 Soap Summit in Los Angeles. We recognized soap operas
for the first four years. The awards were those on breast
cancer, diabetes, HIV/AIDS, and alcoholism. Two years ago we
added categories for prime time. And this past year on
September 28 which is actually this year but it is a new
funding year now, we added another category for Tele Novellas.

So, what are the results? I won't have time to discuss research, which we do quite a bit of but I will give you some top line results that are consistent with ongoing studies. These will be from a daytime drama, prime time drama, and a Tela Novella. CDC and NCI experts consulted or briefed writers on all of these story lines. Consulting is when we put them on the phone; a briefing is when we take the experts in to talk about a range of topics. So, they did a bit of both on these. The first one is Tony's HIV storyline, which appear on The Bold and The Beautiful. Two experts from CDC consulted. We asked and CBS agreed to air a public service announcement with the CDC's national 800 number for HIV/AIDS. It aired twice after very emotional episodes. The show reaches an estimated 4.5 million household in the United States and an estimated 350 million people in one hundred countries. It is believe to be the most watched TV show in the world. Three different evaluations were conducted in three different countries. The Kennedy Study showed that the second time that the public service announcement aired in the United States on August 13, there were more call attempts to HIV/AIDS 800 number than any other day that year when the 800 number aired on T.V. And if you can read the chart you will see that it also aired on MTV, aired with a Surgeon General
message, it aired during HIV testing day when there was an enormous amount of publicity and it aired after 60 Minutes. Of course this goes back to reason that people like daytime dramas and soap operas. They get emotional involved and relate to the characters and on this day with the highest spike, he had to divulge to his fiance that he was HIV positive. That is when it really spiked. It was over 5,000 callers.

The second study by O’Leary found that exposure to the story line in Botswana was associated with reduced HIV stigma among viewers compared to non-viewers based on data from a field study in Botswana. And what we have been told is that this show is hugely popular in Africa and business shuts down during the time that The Bold and The Beautiful people simply do not schedule meetings during that time.

A third study conducted by Single and Rogers evaluated audience interpretations of health content in focus group and personal interview settings. Respondents said they felt that Tony’s HIV showed an ideal situation but it was one that was far removed from Indian reality where stigma prevents self-disclosure of HIV status.

This story line on ER was a minor story line. It ran for three episodes, however giving it more opportunity to reenforce certain messages. It was an African American teen who is obese, eats a diet of fast food and lives in the inner city.

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with his single mom and younger siblings. He ends up with a heart attack and he is wheeled into the ER of course in a high drama kind of situation in that third episode. We have gotten to know him in the first two. And when he is discharged from the hospital, he is reminded for a third time to eat more fruits and vegetables and to exercise, which were the messages we wanted to reenforce.

And this study lead by Valetti [misspelled?] ER viewers who recalled the story line reported more healthy behaviors post test than they did pre-test. In other words after they saw the story line, they reported more healthy behaviors. We worked with Telemundo on a major story line that ran for several weeks about diabetes that aired on the family [inaudible] it featured a very popular major character named Don Pedro who came down with diabetes during this period of the story line. We asked and Telemundo agreed to put our web link on their home page. And it linked to—not our web link but CDC’s diabetes program web link. Data from the CDC indicates that 37 percent of all visitors that CDC site during August came from the TeleNovella web page when the story line was running. You can see the second highest source was down to 9.6 percent. There are arguments that Spanish language of U.S. may not be using the web as much as other populations in the United States but you can see that they are looking for health information.

So where does the journey take us from here? Websites
for T.V. shows are quickly becoming a source of health information online when a health story line airs. We just started providing weekly web links for health information from the home pages of these two very popular TV shows. In fact, *Gray’s Anatomy* is probably in the top five at this point. I am not sure about *House*, I think it is somewhere around eleven or twelve, if it is not in the top ten this week. I am not sure that changes.

This gives us the opportunity to drive people to our funding agency sites so CDC and NCI, AAHRQ and Hearst’s society especially when they do story lines that are very specific to topics like transplantation, HIV/AIDS. Now if there is a topic that the CDC or our funding agencies don’t handle we then drive them to other government sites and make sure they are receiving creditable information.

We do the same for other shows that we are working with. We ask and if they allow us, we give them the web links and then they are also able to drive viewers to very creditable sites for health information. We do hope to do more work internationally as we consider how to share this model for working with television shows in an established entertainment industry with our partners in other countries who have established entertainment industries. We also have post-doc fellow from Japan who is working with us right now on some research because he would like to share this model in Japan.
In closing, I would like to give you a sense of the return on investment for entertainment education for public health. For the past two years we have been funded just under $600,000 a year including all the indirect costs that go to the university. With shrinking budgets, we have gone from one to two and now four agencies. When you take a look at the cost of getting a message on television you can see the cost in that third column. You can see that entertainment education costs are pretty competitive. In the past year, we estimated that our experts influence more than 20 hours of health content on prime time shows. Now this is a very conservative estimate because we allow two minutes for a minor story line and ten minutes for a major story line. And it does not include web links, public service announcement or any of the work that we do with daytime or Tele Novella, which sometimes goes for weeks.

Based on the average cost of ads for the same shows, my staff estimated a $720 million return on the $600,000 investment. The staff who estimated probably asked for a raise.

I would like to thank the many staff and colleagues who work with us. Some of you are in the audience today. Dave Brenner from CDC, Mike Miller from MCI, I saw [inaudible] Major walk in, Art and Mary Gabonese [misspelled?] may be here also from Hearst. We invite your partnership if there is...
some way that you would like to work with us, let us know. If
you would like to pursue this type of activity and get your
health content on T.V. shows in Hollywood, feel free to
contact me. Thank you very much.

[Applause]

SONNY FOX: —Steve Massy, vice president for External
Affairs and Development at Transatlantic Partners Against
AIDS. We got a whole new model. [Inaudible] in a place where
the television has been ignored namely in Russia and the
Ukraine. How an entity and how an American has been able to
be part of organization effect going on in Russia. I think it
is actually fascinating for those of you who are dealing
[inaudible].

STEPHEN MASSEY: Thank you so much Sonny to you and to
your colleagues at Population Communications International
for organizing this important event and I am certainly
delighted to be a part and really thank you for that
introduction. Just very quickly Transatlantic Partners
Against AIDS, which is the organization that I represent and
co-founded two and a half years ago, is a non-government
organization. We are based in Moscow with another office in
Kiev and a small office in New York that fights HIV/AIDS by
mobilizing policy leaders, media executives, and big business
in the fight against AIDS both in Russia and Ukraine. Before
I speak specifically about the media model that we have

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developed in Russia and Ukraine, let me give you just a brief introduction to the growing epidemic in Russia and Ukraine. For those of you that are not familiar with this region you might not know that HIV in Russia is actually the world’s fast growing epidemic. That does not mean that more people are living with AIDS in Russia and Ukraine compared to other places of course but that per capita more people are becoming infected in this region than in any other region of the world. About 500 Russians are estimated to be infected every single day with HIV. Estimated prevalence rates in both countries Russia and Ukraine hover around one to two percent of the adult population and the epidemic is highly concentrated among young people. Initially on injecting drug users and sex workers but increasingly shifting beyond those high risk groups into the general population.

This slide produced by UNAIDS reinforces the very quickly emerging epidemic in this region. You can see that in the late 1990s the epidemic took off with lightning speed and has reached epidemic proportions just in the past six years. This is also the world’s youngest epidemic. Over half of those infected are under the age of twenty-five. Virtually everyone infected in HIV in Russia and Ukraine is under the age of 30.

Now attitudes in this region are highly stigmatized. And there is much misinformation about HIV/AIDS in Russia and

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Ukraine. This is a relatively close society. There is no public discussion of sex. There is no sex education or drug use education in the school system. The Russian Orthodox Church has very conservative social values that it imposes on the ministry of the education and the school curriculums.

So how can we talk about HIV in a society that never talked about sex? You might remember that there was no sex in the Soviet Union. This is a survey that TPAA and the Kaiser Family Foundation conducted over the summer. When we asked a group of Russians, a sampling of the general population not just in Moscow but countrywide what they thought about HIV and the risk for infection. You can see that personally people felt that there was over 80 percent of the population thought that there was little or no risk to themselves for HIV. They did think, however, that people in their peer group were slightly more at risk for HIV infection.

A second slide here reinforces the stigma that we see in this region. Well the vast majority of Russians personally have sympathy for people who are living with AIDS, over sixty two percent of the Russian population would approach people living with AIDS with some degree of caution. This is not just the general population. We have also done surveys of doctors, mostly outside of Moscow and St. Petersburg and Kiev, the three largest urban centers in this region. We have them questions about what they think they know about HIV.
Over seventy percent of doctors in one study told us that they thought HIV could be transmitted by mosquitoes or by sharing everyday items, like pens, pencils, drinking fountains, toilet seats, etcetera. So, it is not the general population that doesn’t know much about HIV/AIDS but it is the medical community that has not been informed about how this epidemic has transmitted, again in a country with the fastest growing rate of transmission in the world.

Now while some of these statistics might seem a bit depressing, we also recognize that we have a huge opportunity in Russia and the Ukraine to use the media to communicate information about the HIV epidemic to the population. First, the people in this region trust television, radio, newspapers and magazines. You can see here when asked to choose the three choices of information that they felt were most reliable and trustworthy about HIV, 75 percent of the population listed television as one of top three sources of information. Television was followed by medical establishments, newspapers, magazines, radio and the Internet. What we also found with that survey is that people want to know more about HIV and they believe that the mass media can provide that kind of information.

The first question on this slide is mass media capable of providing real help in the fight against AIDS by bringing attention to this issue. Eighty percent, almost 80%
percent of Russians believe that the mass media is capable of doing more and over 55 percent of the Russian population felt that mass media was currently doing too little to focus on an issue of such important concern.

In January 2004, Secretary General of the United Nation Kofi Annan brought together the world’s media leaders at the first international summit of the global media AIDS initiative. At that meeting, Transatlantic Partners Against AIDS, which is my organization, brought Alexander DeValt who is the CEO of Gasprong [misspelled?] Media, Russia’s largest independent media company. We brought him to New York to launch a new initiative to mobilize Russian and Ukrainian media in the fight against AIDS almost concurrently presidents Bush and Putin meet in Bravoslvania [misspelled?] and called on the Russian and the American private sectors and individuals to come together in the fight against AIDS. Now this UN meeting the president’s statement and the extraordinary success of a similar model developed here in the United States by Kaiser and ViaCom called the NO HIV/AIDS Campaign, each had a catalytic effect on our ability to launch the Russian media partnership to combat HIV/AIDS. If can I can ask the tech group to please roll the tape.

Almost one year ago in Moscow IPAA, Russia’s gas prong media, Kaiser, and UN aides convened the first Eurasia media leader summit on HIV. At this historic meeting over
PCI 2005 Entertainment Summit: How Entertainment Is Being Used To Deal with Social and Health Issues Around the World
11/15/05

forty competing media leaders from Russia and Ukraine and central Asia and a few international celebrities including Richard Gere joined forces to develop and jointly launch the Stop speed or Stop AIDS campaign to help raise awareness and fight stigma and discrimination in Russia and the Ukraine. All of the participating media companies made specific commitments of air time for HIV messaging, for editorial content, and for HIV related program. The total sum of the commitments made that day was valued at over $15 million worth of free advertising on all of the Russian networks except the state channel. It was the first time anywhere in the world where competing media companies, these are media leaders who are competing with each other every day for ad dollars decided to join forces under the leadership of Secretary General Kofi Annan and the global media AIDS initiative to launch a national campaign on HIV.

They committed to an integrated cross platform three year campaign that would coordinate messaging, not just on television but across T.V., radio, print, online, outdoor and consumer products. Ads and message development was wholly owned by the media leaders and was done in partnership with international experts at Kaiser, UNAIDS, and ViaCom. We also worked very closely in the development of advertising with groups of people living with AIDS, with civil society, and with administrative health and the ministry of culture, each

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of which was working to develop their own AIDS programming and AIDS prevention services.

Just to give you a comparison the amount of federal dollars in Russia spent every year on HIV, and this includes for all services related to HIV prevention and treatment, in 2005 is $5 million. Our media campaign is worth $50 million, nearly 10 times the amount of funding that the Russian government puts to this issue by itself. All of the advertising was informed by ongoing focus group and survey research and was carried out by Russia and the Ukrainian research firms. It really legitimatizes this campaign in the eyes of our partners. And importantly all materials developed by this campaign are made available rights free, to any company that wants to place. We have seen them in—you will see the ads in just a moment—we have seen international companies come to us and ask for use of these ads. I think the first ad that you will is actually currently running on VH1 here in the United States. The message of these ads AIDS is not a problem of other people, is not just a problem of drug users and sex workers, AIDS affects everyone. Protect yourself. Please roll the first set of ads.

[Video Starts]

STEPHEN MASSEY: Imagine the world without young people. Four out of five Russians living with AIDS are under the age of thirty. Okay, if you could just pause the tape
STEPHEN MASSEY: This last slide clearly a reference to policy leaders, just an advocacy message here. For those of you that have had the good fortune to visit or spend time in Moscow, this is a very familiar street scene in front of the Kremlin where traffic is constantly stopped by the VIP cars that passes by. The only thing—nothing ever stops the VIP cars but HIV stops the VIP cars. It is a message that is both direct advocacies at the same time we are trying to change stereotypes about HIV. It was obviously a lot of research and thinking that went into these spots. For those of you that have seen ads from other parts of the world, these probably look a little bit different than the kind of ads that you are use to.

First, they appeal to Russia and the Ukrainian concerns about a quickly aging population and expected reductions in population size. For those of you that are familiar with Russia is expected to lose about 30 percent of its population over the next 50 years due to out migration, declining life expectancy, and a birth rate below replacement level. This is something that concerns the population of Russia and this is what I like to call the post-Soviet hangover. The concern about being a world power, how can Russia a country with a declining male life expectancy in a
declining population be a world power. That is second ad; the old city ad really plays on that. They are a bit more serious and somber than some of the other ads; this is very much characteristic of Russian advertising and what will work on Russian television. It is not something that necessarily works on MTV but this is something that really works on the mainstream networks that we are partnering with in Russia.

Finally, like I said, they have both the prevention and a stigma reduction message. These were the first national spots ever placed on Russian television about HIV. We have also launched over the summer a second series of ads, which help to create an emotional connection between the audience, and people living with AIDS, reinforcing the message that AIDS affects everyone, people just like you and me. Let’s roll those two spots.

[Video begins]

[Inaudible – foreign language]

**STEPHEN MASSEY:** What I think is really special about these last two spots is that these are actually young Russians and Ukrainians living with HIV. These are not fictional characters. The stories that you learn, these people—we learned about from their mom. That is the mom of young Shasta, who is telling us about her daughter growing up. Those are family photos that we collected when we spent two days with Shasta. Unfortunately, she just went into the
hospital and is now getting ARV treatment, one of just 1,200 Russians in the entire country that is on therapy right now. We use these characters and they become spokespeople for this campaign and are working with us to talk about their life stories and get that message out on television.

In addition to just the public service announcements that you have just seen, we do all sorts of other messaging. First, we work very closely with Kaiser and the Gates Foundation to train journalists in this region to be able to cover HIV/AIDS more effectively. One of the things that we find most troublesome is that there are leading publications including newspapers like Evistena [misspelled?] which is the leading, it is the New York Times equivalent in Russia, that run cover stories about how HIV is a plot of the CIA to keep Russia from reaching international prominence. So, this is mainstream media adding to stigma, adding to misinformation about HIV. We believe that there is a real opportunity to train journalists and increase the quality and frequency of coverage on HIV. We have now graduated over two hundred Russian and Ukrainian journalists from our HIV training program, which essentially provides them with a two-day series of briefings, trainings, workshops to help them better cover this issue. We also award many fellowships to journalists who want to undertake investigative reporting.

We have worked with Cosmopolitan, Glamour, and about 1 kaisernetwork.org makes every effort to ensure the accuracy of written transcripts, but due to the nature of transcribing recorded material and the deadlines involved, they may contain errors or incomplete content. We apologize for any inaccuracies.
20 other major Russian or international magazines that published in Russia to include long-form programming on HIV for the first time. *Cosmopolitan* has agreed to run a series, 14-part series on HIV and stamp the cover of every magazine in 2006 with “Cosmo against HIV,” which is the first time ever that a leading women’s magazine in the region has undertaken such a bold step in fighting the epidemic and informing the population.

You will see that all of our lineage messages reinforce a website that young people visit. We have over fifteen thousand visitors to our website every single month. That is atstopspeed.ru, at stopspeed.ru if you are a young person, you go to the left side of the site. If you are not a young person, which is what I think most of us fall into. Unfortunately, you go the right side of the site. It will you tips on how to talk your kids about HIV, where to get an HIV test, where is your local AIDS center, what resources and information are available to you.

We have also incorporated special events and celebrities into this campaign. Most American and Western celebrities but increasingly Russian celebrities are getting involved. This is a photograph of actress Julie Armon and lead singer of Russia’s Big Boy band, Smash, at a MTV event earlier this year distributing red “Stop AIDS” bracelets to all of the celebrities who went on stage to receive awards.
It was fantastic to see every single recipient of a MTV music award wearing a Stop AIDS bracelet and we had messaging going on throughout the broadcast of that show which reaches a hundred million people across Russia and the Ukraine and central Asia with AIDS messaging, including the advertisements that you just saw.

We have also launched an initiative to bring consumer products into this campaign. Again, repeat messaging across multiple platforms so we are working with cinema groups, Cinema Park, which is a lot like a low center complex here for example. They run our public service announcements in advance of the movies and feature presentations. We are working at AeroFleet, Ukrainian airlines to run these ads on long haul flights that start from Kiev or the destination is to Kiev and Ukraine. And for the first time anywhere in the world Coca-Cola will be introducing Stop AIDS messaging on it’s product. Beginning in January 2006 all new Coca-Cola cans produced under the Burn label which is the red bull equivalent that caters to young teens who goes to bars will have the Stop AIDS logo on those Coke cans. We are excited to include them in this campaign.

We are as I said on every single network. It is not just one or two networks. We are on competing networks, except for the state channel in Russia. In both Russia and the Ukraine, this is just a sampling of the some 40 partners.
that we work with in television, radio, online, news wire, print, and consumer goods. We also work very closely with our colleagues at Kaiser, the Gates Foundation and ViaCom, United Nations, the World Bank, the Russian government, the Ministry of Health and Culture, in particular of course people living with AIDS and the NGO community.

Just to talk a little bit about leverage resources and the impact of the campaign the amount of advertising space contributed is estimated at $49 million. What is very important to recognize is that 205 percent was our target and we have meet it. Twenty five percent of the advertising happens in prime time between 6:00 PM and midnight when people are watching. Just as an equivalent if you look at the no HIV/AIDS campaign here in the United States which is a partnership between Kaiser and ViaCom that the prime time is ratio usually less than five percent so we are hitting an amazing prime time ratio getting these ads on air when people are watching. We now have collected over 2,740 five minutes in Russia alone, just for the advertisements. It does not include the longer format Date Line style news stories that we run on both Shasta and Alec the two heroes of our campaign. We are also working on incorporating HIV themes in the popular story lines. There is a real world type show that is run on Russian television and we are working to introduce an HIV positive character in the first quarter of 2006. So
all of that airtime isn’t factored in here. About, like I said, two thousand, 745 minutes of free airline in Russia, about 500 minutes in Ukraine. The estimated value just in 2005 of the campaign over $50 million the goal is reach 200 million over the course of the three years.

It is the largest pro-social campaign in Russian history. And second only to the ViaCom campaign here in terms of media value for messaging. The leverage over resources is greater than a hundred to one in terms of what it costs to develop these ads and put this campaign on air. It is also a very concrete model for those of you who are working in public diplomacy. It is a very concrete model of US/Russian public/private partnership. It brings major companies and foundations like ViaCom, Gates, and Kaiser together with Russia and Ukraine’s largest media companies for the first time. And we are working to export this model to other countries. In fact, there was recently held by the Kaiser Family Foundation in South Africa, a media summit that bring together media leaders in the southern part of Africa to launch a similar initiative. In the spring of next year, there will be a summit of Caribbean media leaders to launch a Caribbean partnership on HIV.

Just quickly on some results you can see that after being on air for just six months, percent of Russians who say they are familiar with one of the four ads that you saw
today, 46 percent, nearly half of the Russian population, can recognize these spots. That really speaks to the airtime and the prime time ratio that we are getting. Of those who recognized our ad, 47 percent say that the ads encouraged them to want to learn more about HIV and they believe that the ads would encourage others to want to learn more as well. We still have a bit of work to do there to get people to take that next step and go to our website or call the local AIDS center but we know that these ads are generating interest and making people want to learn more.

In conclusion, let me talk for a few summary remarks about the ingredients of how this campaign, I think, has been so successful. First it is a three-year campaign, we don’t try to achieve every thing in one ad or with one go. You can see there were no direct condom messages in those first ads. The studies that we did, the research that we did found that people when they saw a condom on television or they heard the word AIDS in the first five seconds of an ad would immediately change the channel or disassociate themselves with that ad. And all five ads that you saw the word AIDS was mentioned at the end of the ad so people are forced to watch the ad entirely, not sure exactly what the ad is about and then see the AIDS message at the end.

As we go forward we will continue with more direct AIDS messaging, more direct prevention messaging. It is an
ongoing conversation that we are undertaking with the Russian population and the messages that we are developing are suitable for rather conservative national television networks. The campaign is locally owned and is supported by the Russian government as I said which is fundamental. We have the endorsement of the Kremlin and the presidential administration in Russia. The president Yushchenko administration in Ukraine for these spots. They review them, they approve them, and they set on the ad committee with our ad agency as we develop these spots. So, they are fully involved and endorse these ads in a place like Russia and a place like Ukraine that type of support from the authorities is absolutely required to get free placement on national networks.

Finally, as I said research informs everything that we do. Kaiser and the World Bank and the Gates Foundation has been generous to provide us with resources to be able to poll the population and test the impact of these ads every six months over the course of the three year campaign. We will be using that research to be able to guide us in message development. In terms of what is next, I think that there are three things to take away from this in thinking about the future of this campaign. First Russia hosts the presidency of the G8 in 2006. This is the first time and a historic opportunity for Russia to demonstrate leadership on the world
stage in the context of the G8. We hope to use the Russian media partnership as a platform to raise awareness about Russia’s growing HIV problem in the context of Russia’s chairmanship of the G8. We are planning some special events in St. Petersburg, which is where the location of the summit will be using the platform of the Russian media partnership. We need to focus more on entertainment programming. I have been very inspired by some of the works that you all have described in terms of soap operas and dramas. That is something that we are just getting into in Russia. I look forward to working with many of the folks on this panel to help us as we begin to work with partners in the Russia media industry and entertainment industry to incorporate those types of story lines. And finally, we hope to replicate this model in other parts of this region. As I have said we have extended the program into Ukraine. We are also working in India with the Richard Gere Foundation to adapt some of the models of the Russian media partnership there and look forward to working with Kaiser, Gates and others as they develop similar projects in southern Africa and the Caribbean. You can learn much more about all of this on the materials that are located outside. If you would like copies of the ads, they are available to you also on our website. I look forward to answering your questions. Thanks.

[Applause]
SONNY FOX: Okay. So what you can tell from this group is as I started off saying, there are variegated approaches. You can also tell their commitment in the intensity of their presentations reflect that. The commitment of all of us who work in this area is intense because we know how effective and wonderful the results are. The bad news is that we do tend to go on at some length about these things. The result is we are gloriously off schedule so here I what I think we are going to be able to do or have to do. I was going to be very generous and give everybody a break for ten minutes. I think you will have to do that on your own as needed. We will wipe out the break. We are also going to have to cut the amount of question and answer time that is available and then we are going to ask the next two speakers to be as compressing as they can and what they are going to do on that part of the thing.

But in the meantime, we do have two microphones that are being. And those of you who have questions, maybe ten minutes to anybody on the panel and if you want to share some commentary from what you have heard you might be able to do. You are all so accomplished that I am willing to open it up to non-questions even if you will be fairly brief about it.

Okay. Do we have anybody who has a question for anybody on the panel? By the way, this is going to be carried tomorrow by kaiser.net. It will be webcasted.
STEPHANIE KINNEY: Yes. I am Stephanie Kinney, retired from the state department and involved in public diplomacy issues. I am particularly interested in your performance matrix. How you came to them? I think in the department the issue approving the value of public diplomacy in messaging has long been an important one. You may have some lessons learned or some experience to share in that area. Anybody that would feel they take that one.

SONNY FOX: Anyone, Okay. You all are looking at each other stunned. Is the question not clear or do you not feel competent to answer it? Dan you do—well, maybe the thing the matrix is better to trust to the next panel. I don’t know—

DAN VICTOR: I think so. I think Lewis can speak better to the matrix but we do formative testing which means we test the effectiveness of the show as we produce it and then we try to do broader studies to test the impact of various segments as they relate to particular curriculum goals. Our ideal in every country then summaratively testing which really is a third party independent test of the overall impact of the show on a much wider population of audience of the potential and the actual audience. As to the matrix of that, I am not equipped to answer that.

STEPEHN MASSEY: I think one of the lessons for all of us that work in entertainment media and trying affect social changes, it is very difficult to take what you are saying,
which is putting these things on air and seeing whether or not that leads to behavior change. We know that we can measure awareness levels or measure recognition rates, I was very pleased to say that half the Russian population recognizes our spots which is a great reality that we are actually getting the conversation of HIV out there on the airways and we know that by the ratings and by what people tell us whenever they look at stills of the ads. But does that make them go and learn more about AIDS or does it encourage them to talk to their partner about AIDS or does it make them change their sexual behavior, which of course what we want them to do, that is much more difficult to measure because of course we are not in their bedroom and we can’t watch whether or not they use a condom or not. So we rely on that kind of feedback that we do through survey. But surveys are and everyone here would recognize, are incredibly expensive and for donors it is something that they all want to see but they don’t want to fund. It is very difficult to find a donor that would like to pay $75,000, which is what it costs to do a national public awareness survey in a country like Russia. So there are very few—Kaiser is one of the very few international foundations that are willing to make those kinds of investments and we are very grateful that they are able to do that. But there aren’t many foundations or donors out there, partners that want to invest in that kind of work.
SONNY FOX: Karen? Oh, you passed it off to Vicki.

VICKI BECK: Very creative in looking at the results.

One of the surveys that we have been very fortunate to be involved in is the Health Styles National Survey, by Porto Novella. And that is the CDC agreement with Health Styles. We have been able to track self reported behavior. That was some of the data that I reported but tons more data on that and it is all available through our website. You go to the CDC site and we have reports of different years looking at people’s self reported behavior on discussion, as I mentioned before, calling for information, seeing a doctor. In addition to that, we have also been able to track intentions taking up another level and that is through a variety of surveys looking at online panel surveys. We have worked with the networks and sometimes adding questions to their surveys with their viewers, specifically for shows like ER, Gray’s Anatomy, other shows where we know that we have a good audience where we can get enough responses. We have also done some chat room surveys of targeted audiences and I just saw May Kennedy is in the audience here. She worked on this one. A syphilis story line appeared on ER. We wanted to find out whether or not gay men who saw that story line would be changed in anyway about their intention to be tested for syphilis. And we found that sixty six of those who were exposed to the story line intended to get tested for syphilis
compared to 33 percent who did not see the story line but it was the same population, target audience and it was through an invitation to take this survey that was posted in gay chat rooms. So, we use a variety of surveys and just as Stephen said, to go out and create survey is very, very expensive but we have been creative in being able to kind of piggyback on others. The Botswana survey that I mentioned was a piggyback survey that it is was field survey already being planned and we added questions.

SONNY FOX: Stephanie, one of the things that you should be aware of is that funding from foundations to groups such as PCI, is very—they are even more critical about getting some feedback as to the efficacy of what we are doing with their money. So PCI has been very, very active and there are a number of out on the resource table, there are takeaways for all of you from all of these organizations. PCI has an enormous amount of stuff out there on the research that has been documented on some of our shows. And Stephanie, all the rest of you, I encourage you to take away those including what I think of as the smoking gun of such research, that four-year, Tanzanian longitudinal survey over a huge population on the only country which has had a treatment and control model that has ever been available. So yes, there are ways of doing it, they are not easy but they have been done, Stephanie. Thanks for the question. Another question?
SUSAN BRINK: Susan Brink, with Health Mart Multimedia. This is specific to Vicki actually. You talked about diseases and problems that are ongoing right now, but would be the time turnaround if there need to be something to educate the US population very quickly. How fast does it take to get in something onto a television program? For example, I am thinking all of the information about the so-called pandemic.

VICKI BECK: It is a long lead-time. We had a briefing with Steve Osphof [misspelled?] recently in Los Angeles with a couple of shows and he did talk about pandemic flu. Steve Osphof is with Health and Human Services. He is assigned to Hawaii and the Pacific Islands, it is a tough assignment. But he uses to be the top—the director of epidemiologic science at CDC’s National Center for Infectious Diseases. And if one of the shows that he briefed decided to use that, it might get drafted into a script over the next month or two and then it has to be shot and then it has to go through post-productions. So, it is a timely process. That is why we also send out an online newsletter so that we can update people on timely topics without having to take in experts for briefings. You know what, I have to tell you it’s just like they say on Law and Order, they tear from the headlines, so if you are getting stories out there into the newspaper, into

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print media, that is going to spark their interest and they are likely to call us.

    SONNY FOX: That also depends too about some shows have different deadlines but they all have pretty good lead times but some shows will try—West Wing is starting to be as current as it can be as you know. So, it will depend somewhat on the show also, as to how flexible they are going to be.

    DAN VICTOR: It is much longer to put it into a show. I am from Sesame Street and use to be the executive producer but if you create a public service announcement that is quick. So, if we wanted to respond to the hurricane or 911 we were very quick in producing public service announcement with our cast, with our puppeteers using expert advice in mental health in civilians. But putting it into a show takes time.

    VICKI BECK: I might add Sonny that Telemundo also provided a whole list of web links for hurricane victims. So the networks do respond to that kind of thing like public service announcement and web links.

    MEG KENNEDY: Hi, I am Meg Kennedy, was with CDC and now teach at Virginia State University—

    SONNY FOX: You are not at the CDC anymore, Meg?

    MEG KENNEDY: No, not for the last month. I have a question for Karen and that is you said you were no longer using the soap opera format. And it is has been so successful in some many places. I think that there are people who
watched soap operas for 30 years, why?

KAREN MERKEL: I thought as I said it that perhaps that it was a mistake to wander into it. Actually there are several reasons and it is not because—I know there is not a member in the audience who doesn’t enjoy watching soaps and it is also not because audiences don’t enjoy them. I think they are difficult to evaluate. I think that it’s quite hard to turn around. I think they have a tertiary and I think they produce ultimately what can become deeply formulated dull writing. So I think they present particular challenges that you have to work too hard to combat. And because of the funding climate it is quite difficult to be sensitive to the needs of the media market, the needs of audiences and what you are trying to do with writers and building capacity and so on. It is like trying to turn around a tank. So for me I think serial format that allows—albeit it can maybe just a five week break is actually of really, really critical importance. And audiences in a sense don’t spot the joy and I think you can have more interesting story arcs. I think that it is—you know I don’t particularly want it to be trapped inside a formula that I think soaps often are so it’s those kind of reasons.

SONNY FOX: And it is the format of the Tele Novella been suggested to you because that has a beginning, a middle and an end. And it will go on for perhaps eight months and
then it will go off. So, it doesn’t go on endlessly and then you create a new one.

KAREN MERKEL: Yeah. I mean—but I really genuinely believe what I was saying at the very end is actually where Life Focus is now that having to look quite differently at how we are providing content. And that actually producing these really, really big formats that last for twenty minutes or forty minutes. How are we going to break into that when they really are becoming more interactive? So, in a sense that is sort of what I am beginning to try and pay attention to and for those of you who don’t know, with these really, really major endeavors they can take oh, I don’t know between eighteen months and two years to get off the ground. Then you are delivering something for perhaps three years. So of course, your thinking changes dramatically during that cycle. Then what are you going to do after three years. So I think there are really, really testing questions for those of use who are commissioning and producing kind of output.

SONNY FOX: And yes, the whole city has been going on for eight or nine years and very well and growing as it has been going on.

KATIE MCCLAIN: Can I throw something out there about that?

SONNY FOX: Yes, please Katie. Equal time for the soap opera world.

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KATIE MCCLAIN: I had had a meeting with Felicia Bear who is the executive of all ABC daytime for about five years. And this was a while ago and they were studying Tele Novella to emulate some of that content in order to hang on to a declining viewership. And then there was a soap opera called *Port Charles*, which actually implemented that—the shorter story lines. I think what Karen is saying is incredibly exciting because with the technology that they have now with podcast. They are starting to podcast—the day of the story line you can—the day of the soap you can podcast the story line and listen to it. So, it also leaves an opportunity open for topics that are particularly timely to come in in terms of like two characters could change. It could have a improv conversation about the pandemic, for example. You know that is something that hasn’t been done but could be done. I think there is a lot of opportunity.

SONNY FOX: Okay. I think we are going to call the question and answer at a halt now in order to get on with our next panel. So, I would thank this panel please. An applause for all of you. Thank you so very much. A reminder that—several things, one is a reminder about the resource table out there, which is indeed richly endowed with material from all of these organizations. Please if you would resume your seats. And also that there will be a web cast of all of these proceedings tomorrow on the Kaiser net webcast around the
world that can be picked up by anybody else around the world.

If you want URL address, we will get that for you. Finally, most of these people will be available for you to meet with after the proceedings are over in this room. So you can continue to hold conversations with them one on one.

We are now going to turn to some—answer some of the questions that were asked here a moment ago, which is how do we know that it works and how does it work. We have been very lucky to two extraordinarily prestigious gentlemen who work in this field. Arvind Singhal has been extremely important to PCI down through the years. He has conducted—he and his then partner F. Rogers, conducted not only very saline research, including the Tanzanian research, but have written books together and Arvind alone that have become sort of the bibles. If anybody who is interested in how to use what is known sometimes as education entertainment, I phrase I happen to abhor but nevertheless have to use. Arvind has working—as a matter of fact, the very—F. Rogers died recently about a year ago and the very last piece of research that F did with Arvind was one I happen to be the lead guy on, PCI consult investigator I guess it is called—something we did on Bold and the Beautiful in India. So, I have been very close to Arvind and worked with him over the years. I am very pleased that he was the first recipient earlier this year, about a month ago and at USC the first F. Everett Rogers Award that
is being given out to a prestigious who is doing research in this area. And Arvind was the first recipient of that. So, I am proud to present Arvind Singhal.

ARVIND SINGHAL, Ph.D.: I am happy to be part of anything that Sonny produces. The title of my presentation from Bangkok to Peru and Sonny has just said that I had evaluated or work on several PCI soap operas independent evaluations I must add and I think I reviewed two of PCIs radio soap opera initiatives. Thinka [misspelled?] was broadcasted in the 1996-1997 and Peru was broadcast in the year 2002-2003. so in essence it is sort of a design and evaluation entertainment education journey in India, which is my home country.

I would like for you to say hello to this seven year old girl whose name is Lallie [misspelled?] whom we first meet in village [inaudible] of India, northern Indian about three hundred miles west of New Delhi. As you can see she is a caregiver at home. She has two elder brothers who are in school in the local village school but not Lallie and you probably guessed why Lallie is not in school because she has got to stay at home and take care of her younger siblings. Six months later, when we arrive back in the same community, we noticed that Lallie was sitting right up in front. We noticed that now there were several girls who had joined the elementary school population. six months previously the ratio

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of girls to boys in village Lookson [misspelled?] was ten as to ninety. Ten percent girls and 90 percent boys but six months later the ratio had changed to 40-60, 40 percent girls and 60 percent boys.

So really as a researcher if you are engaging with the research side, for me I guess the simple question was how come Lallie now attends school. And as one delves into what possibility could be an answer to this one realizes the importance of a radio soap opera and what it was doing in this community of Lookson. This was a time when [inaudible] radio soap opera, which means happiness lies in small things, was being broadcast over the north there. And in this village community there were listener groups that had emerged spontaneously who began to write letters to [inaudible] radio expressing what an impact this program had made on their lives, not just as individuals but as a community. And we learned about this community because they sent to their [inaudible] radio a letter which was about the size of post collector, which was colored with markers and the back of the letter was signed not by one person but signed by a 184 people. In essence, the letter said that after listening to [inaudible] we have decide much like the plot in this radio program to send our girl children to school. We have decided as a community and we have come together and taken a pledge that we will not give or take dowry. In essence messages that

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were an integral part of the radio initiative and they were clearly finding resonance with this particular community.

So we decided to study this community in depth over the [inaudible] over 18 months and maybe we can say that perhaps the first community based evaluation of an entertainment education program. There were many insights that one learned about not just the effects of entertainment education programs but the process through which these effects occur. The simple answer really to this question how come Lallie now attends school is when you have an entertainment education program, let’s call it the air cover, which in this case [inaudible] and if you have also either spontaneously or through some design an opportunity for group based listening and given that these soaps run twice a week, week after week, month after month, if these groups listen to the program together over a period of time then they are just not listening. In fact, the program or its effects really begin once the program ends. And the conversations then begin. And it is in these conversations over a period of time that people come together and take certain decision, like the decision to send their girl child, like the decision not to give or take dowry. And then of course those decisions lead to certain actions, as was the case. So that was in essence the research lesson from doing a community based case study.

Now some years later as PCI was scoping out certain
programs in India, in the Indian state of Bahir [misspelled?] and as I was brought into some of these conversations based on the research that we have done on [inaudible] how we might have a strong program with various community reach outcomes. We decided that the lessons that we had learned from [inaudible] the importance of the air cover and the ground based orchestration group listening; we would try to put that into place for this next program. The next soap opera that was designed 2002-2003 was called Tiroo [misspelled?], which is really the name of the protagonist, a women protagonist, a fiery leader who worked in the village health center. There were many partners as you can see we sort of put Ohio University in the middle because we worked very closely, not just with PCI and all their radio and Johnneen [misspelled?] a group that I am going to tell a little bit about, but also we coordinated research with two outstanding institutions, Michigan State University and Johns Hopkins and our local research partner in India that was the Center for Media Studies.

I want to tell you a little bit about Johnneen, this organization in Bahig with whom we partnered while putting Peru project on the air. We had realized of course from our work in Lookson many years ago that it was important to have a ground-based orchestration to have something happening in the ground. And we discovered this organization, Johnneen,
which works in 25,000 villages of Bahig and of course, these numbers don't mean very much in the context of India but even then, in the context of Bahig they do mean a lot. What Johnneen does Johnneen means caring mother so it is an organization that works in the realm reproductive health services. What Johnneen does very innovatively, very astutely is they take the existing rural health providers in these villages who are very respected who most people would go to if they wish a health care contact, and they train them in a sort of crash course in reproductive health care. Johnneen trains not just the rural health provider, but also his spouse and that is important because in India most women will not go to many rural health providers and most of the health providers in India are male indeed.

Johnneen also brands their clinics so you can see the clinic is red and yellow. It has a logo. So in essence, they become a part of a network, a franchising network. A network that already existed but now the connections have been made between these rural health providers across the various villages.

Another thing, which Jimmyneen does, is that it takes these rural health providers and makes them independent vendors of about a dozen service delivery items. So, these rural health providers now have condoms and pills and pregnancy dipsticks and vitamins and folic acid and so on and so forth.

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so forth. So, in almost 25,000 villages of India where these
services did not exist, they do exist thanks to the work that
Jimmyneen has done. So, for us, for us meaning partners, who
were trying to not just put a soap opera on the air called
Tiroo but who were also trying to find partners, Jimmyneen
seemed like a wonderful partner and indeed they were.

So we worked with Jimmyneen and the twenty five
thousand rural health providers, the network of twenty five
thousand rural health providers to prepare the ground. In
many communities we help orchestrate before the radio soap
opera event went on the air through folk performances, the
notion of well tune in because a few weeks from now we will
begin this program.

We promoted once again the rural health providers in
these 25,000 villages and also in places where we primed the
ground and had community performances before the program went
on the air. We promoted the idea of group listening. In many
communities, several Bahir listening groups were formed in
advance of the broadcast. There were numerous other items
pre-publicity that was done. Here you see sort of a billboard
and 800 came up in Bahir in strategic locations promoting the
program so we have the Bahir logo. You see a little radio
transistor set, a little slogan which went along with the
radio program and what was really redeeming and wonderful to
note is that Jimmyneen actually became a sponsor of the
program. In essence, they saw so much value in the air cover they felt that their ground-based system was being suitably enhanced by this air cover.

There were different kind of research methods that me and my colleagues at Michigan State University and Johns Hopkins University we had sort of a research team that worked on this that various kind of research, quantitative data research that we put together. We had several rapid exposure assessments every two months to get a sense of how many people were listening. Pre-post surveys on the Sentinel side and also we were able to conduct quality experiment given that we have these different conditions. Certain communities where there was a lot of priming, where there were folk performances where there were listening groups that we had formed by design, and certain other communities where that did not happen so it set up certain conditions for us to look as a quality experiment. But of course then we were very interested in the hard surface statistics, given that Jimmyneen as we have said before on a daily basis these health providers hand out condoms and pills so it was easy in some ways to track how many condoms and pills they were handing out during the course of the Tiroo program.

Just sort of a very quick cursory view of some of the things that we found through those four rapid exposure assessments we found that ten percent of all households in
Bahir were listening to Tiroo and while is there because most programs like this typically have an audience if you are lucky of two to three percent because this is radio and TV has very rapidly made El roads. And so, the question is how come it is ten percent. And I think the answer is that given that we had worked with Jimmyneen, which had presence in 25,000 villages and promoted the program so extensively that perhaps helped that to its listenership. Of course, the program has got to be good if people are going to tune in and tune in to soap opera.

Here is just sort of a very cursory overview of the peoples survey results. We can get into more and more detail if you would like and I know that in your packages there is an executive summary of the project but in essence research was telling us that those who listened to Tiroo showed significantly higher gender equality perceptions, higher levels of self and collective efficacy, and most intriguingly higher usage of modern family planning methods, especially [inaudible]. [Inaudible] is a branded pill, which is marketed by Jimmyneen.

A little peek into the quality experimental results. Here we are talking about highly primed villages. Villages where there is a rural health providers belonging to the Jimmyneen network. A village where we did four performances and encouraged the notion of group listening prior to the
program being on the air. So in highly primed villages with Jimmyneen rural health providers listenership to Tiroo was four times higher than non-primed Jimmyneen villages and in these villages, the highly primed villages, the sales of condoms, contraceptive pills and pregnancy dipsticks, those are the three markers that we tracked, increased from two to six times. We tracked several communities and in some communities, it was two times for a certain service and in certain communities it was six times.

What I think most important or revealing for us is the creditability and the visibility of Jimmyneen’s rural health providers because they were enthralled in the process went up significantly. If you think about that a little, in essence what the air cover had done, what Tiroo had done given it was being beamed into these rural places, it had – the air cover in essence had added value to what Jimmyneen was already doing. So in essence, it helped them, it helped Jimmyneen do its work on the ground as it helped the PCI and other partners do their work on the air. You know that of course is a partnership.

WE did lots of qualitative enquiries. I am just going to skip that. And maybe end with this take away slide. Some of the basic insights we see an importance of an engaging air cover. We really believe and I think it has been said many times before partnerships on the ground that have a wide
reach and that can deliver services. We also at least from the Indian project have seen the value of priming the ground in advance of the broadcast. Getting the ground ready in essence. And also the importance of listening groups over a period of time. Groups that meet over a period of time because only when they meet over a period of time and have an entertaining story to discuss it is those discussions that lead to conversations to dissections and actions. Thank you very much.

SONNY FOX: Thank you, Arvind. Dr. Lewis Bernstein is the executive vice president of education and research over at Sesame Street. And is going to be taking us now onward as to how evaluation and processes are conducted over at Sesame Street in their world wide activities. Dr. Bernstein.

LEWIS BERNSTEIN, Ph.D.: Good morning, I am Unfortunately the last speaker before your lunch. And if any of you get hungry early or need to go out, please I will not take it personally. First, I am delighted to be here today and I thank you for the opportunity of sharing. So much I would like to share with you I am not sure I am going to be able to finish it all and I can ask you at some point when I finish the first part of this whether you want more or whether you would be like relieved of that obligation.

I want to start by saying it was never obvious when we first began in late 1960’s that research and production
could actually do something together. In fact, Joan Cooney [misspelled?] said, “For all of its obviousness in the thirtieth season of Sesame Street the notion of combining research with production was positively theoretical in 1967.” So, what I would like to do to share with you not just some of the research findings about Sesame Street but the process. And in some ways Dave Connell, who is the first executive producer of Sesame Street, he kind of very skeptical about the relationship of what he considered a force shotgun marriage between researchers and producers. He said, “With research there is a risk of intelligentizing materials and kind of making a joke, something that you tease apart until it wasn’t funny anymore.” He said, “I kept thinking of biologists who crossbreed a crocodile with an abalone in the great hopes of getting an abadile only something horrible could happen and they could end up with a crocbalone.” [Laughter] So after 37 years of marriage it seems Sesame Street has indeed produced an abadile. I just want to point out that each year we call ourselves when we create Sesame Street experimental so this is—we are coming up to our 37th experimental season of Sesame Street. And that is not a joke. Each year we take a look to see what the most pressing needs are for children and try to create a focus of how we can really have the most impact with Sesame Street domestically and with Sesame Streets around the world.

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I think one of the things that really is— in fact we have multi-platforms. We start with domestic Sesame Street but that is really our kind of air coverage. That is what in some ways we use as our basis as the hor devours to really attract children but we know as Arvind well described that if you don’t promote a show, if you don’t have a way to extend its reach with community outreach projects and have some grounding, if you don’t have a way to really create materials that you can drive children to that create— since they are already using interactive games that kind of take the messages of Sesame Street and expand them out into the real world and theme parks and home videos and magazines and books on radio in other countries with product licenses you don’t really extend the full impact of the series. So, we are very, very cautious and careful about designing multimedia platforms for our series.

I want to talk a little bit about our model. Very little bit. It involves three groups of individuals although when we first started it only involved research and production. We have contents specialists who help us decide on our curriculum priorities we have producers who are responsible for creating the elements for whatever we produce in whatever media we produce and we have researchers who represents the voice of the child and provide information about a program’s effectiveness before we begin, during
I would like to share a little bit about our processes. This is a complicated slide and I am going to sit on it for a little bit but I think it is important if you are interested in research findings. First of all, our process behind the scenes in that forced marriage, the dominate partner has to be production because producers have that obligation to look at a blank piece of paper and then create something that on the screen will be as innovative, as exciting to keep children’s attention so that we don’t lose, so that we can reach them in order to teach them. We in the research department know very well that we have to start off first identifying the need. Today when you look at the needs in America for children we have to look at the academic and cognitive needs of children, literacy, numeracy, and science. You have to look at their social and emotional behavioral needs because we can not take for grant a child will pay attention to literacy skills if they don’t have the social skills to sit to watch to engage in school, to be resilient, to understand how to regulate their behavior. And if we only look at emotional and behavioral skills and don’t think about their physical and mental health needs we are not delivering the full promise and at a time when in this country we are focusing so strongly on literacy, which is so greatly needed we don’t think about the issues of children being part of a
much larger world, globalization of the languages or in
culture. Then we are not doing a full service to children. So
we have to select those needs each year. We work with very
strong advisors to help advise us. Those advisors and the
internal research department develops curriculum and the
writers are a part of that process as are the puppeteers from
the beginning. So they sit in those research seminars and
take what we call the curriculum bath. They maybe doodling
while they are listening but something is sinking in. I will
show that in a little bit.

We develop research material. So of the new writers
when we first started said should we create a writer’s
notebook with a whole host of ideas that researchers thought
might be helpful to producers and to writers. Then we go into
experimental production. The first step on the way in
experimental production after something is produced—if we
have enough funds to do it—is formative testing. You will see
at the bottom there is some of the summative testing. The
simple distinction to keep in mind if you don’t know that
jargon is that a formative test is kind of like what a
teacher does when giving a quiz. It’s not so much to evaluate
the student but to evaluate the lesson plan and to see if the
teacher is conveying the information. Summative evaluations
are akin to a final exam. Had children who have watched
Sesame Street gained in the skills that we have put up in
that curriculum, that we had targeted as our outcomes?

So that is kind of what we do. We do formative testing, we will review, revise. We still do formative testing today even though we have 37 years of accumulated knowledge because we are always surprised about what we produce. We then go to broadcast and then we go to summative evaluation.

What I would like to do is just mention just one or two of the studies we have done over the past because I think they are instructive. First, we are always interested in reach. If we are not reaching children, if they are not watching *Sesame Street*, we know that we can’t teach them so over most of the years of *Sesame Street* we tend to reach 8-9 million viewers a week. That is a lot. In terms of what we have accomplished, we have done some very major studies. In the first years of *Sesame Street*, years one and two, the workshop received monies from the Office of education and we had the obligation to be accountable for that money. So when we first began we said we are going to create curriculum. We are going to focus very carefully, on what we produce and what we produce has to be measurable. What is measurable is often easier in the cognitive role than in the social world but we are going to create with our partners ETS. ETS became the evaluation group in Princeton, New Jersey. They do the college board exams. They are the ones who created a research
study. In year one and year two, they took a look at children who watched *Sesame Street*, children who were encouraged to watch *Sesame Street*, children who co-viewed with their parents. The major clear impact was that *Sesame Street* had reached its goal of preparing children for school. But there are a couple of other projects you may or may not know and I have left a book outside. We have done over a thousand studies either we or universities around the world. There is a book called *G is for Growing* out there you may want to take a look at it and check it out of the library.

But there are two projects that were done that were interesting. John Wright and Aleatha [misspelled?] Houston in 1995 did a project called the Early Window Project studying a sample of pre-schoolers from both low and moderate-income families over three years. And the research found that those children who watched *Sesame Street* regularly, approximately two hours per week between the ages of two and three, a: developed pre-reading vocabulary in math and school readiness skills, b: spent less time watching cartoons and adult programs, less time playing video games and more time reading and looking at books. In a few years later, Aleatha Houston and Dan Anderson from the University of Massachusetts did a re-contact study. They found those children who were now adolescents and had participated in *Sesame Street* research as pre-schoolers. And they reported the teenagers who watched
Sesame Street often when they were in pre-school A: had higher grades in English, mathematics and science, B: spent more time reading books for pleasure outside of school, C: placed higher value on achievement in math and science, D: perceived themselves as more competent in school, E: expressed lower levels of aggressive attitudes.

I want to connect that to research recently done by James Hickman, a noble laureate in economics who took a look at the cost benefit analyses of investing in early childhood education. He compared all data from the high school in [inaudible] Michigan and early head start programs. Those children who were randomized into preschool and those children who did not get into preschool. It was very clear that those children who were in preschool had more success in school, they had less remedial classes that they had to go, they fell less into special classrooms, they fell less into the criminal justice system over the 25, 30 years that he followed the data. And found that there was really a cost benefit of investing early in early preschool childhood education. And much of that really accounts for the entire history of Sesame Street. We really wanted to focus on young children as early as possible to really educate them, to provide them with information.

I want to give a little bit of a case study on one of the recent goals because this conference is interested in
health. So let’s talk a little bit about health and if you can roll the tape, I would appreciate it.

[Video Starts]

FEMALE SPEAKER: For over 26 years Sesame Street has been teaching children letters, number, and healthy habits.

COOKIE MONSTER: [Inaudible].

FEMALE SPEAKER: The Sesame Workshop is a non-profit, educational organization behind Sesame Street. Once again raising the bar for useful education. [inaudible] is having for lunch is a national campaign designed to combat the health crisis facing today’s preschoolers by encouraging healthy choices early on in their development? Together with dedicated partners, Sesame Workshop is using the talent and power of Sesame Street to teach healthy foods …

SINGING VEGETABLES: We are vegetables and we are so good for you.

FEMALE SPEAKER: —physical fitness—

MALE SPEAKER: Walking is great for your lungs, heart, your muscles. It is great for your whole body.

FEMALE SPEAKER: —the importance of rest—the healthy habits from our campaign is reaching out to preschoolers, parents, and caregivers in their communities. In source, when product and promotion align reminding your book, videos, DVDs and CDs. Educational outreach initiative probably you have given to it. And a public service announcement helps start a
LEWIS BERNSTEIN, Ph.D.: Thank you. As you can see it is a multi-dimensional platform approach and you can see these are all of the elements that we are dealing with. And it is important to note that as the executive producer of that season when we did healthy habits for life I was dubious about how much we could actually convey to children and my wife is a pediatric endocrinologist and I told her how much do children really control of their health. She said well they need to understand and learn some very important messages that television can convey but you need to think about the parents and the caregiver. So, if you look at that right bottom corner public service announcements were really an important strategy for us to really reach parents. And we thought a little bit about multiple ways of approaching children. I guess my wife made clear to me as did all of the wonderful advisers and I would like to recognize Neal Eisenberg [misspelled?] who is here today, from kidshealth.org and the Morris Foundation. We had a group of advisors who really made it very clear to us that this country could not be lackadaisical about how it focuses on health of children. With 14 million children who are obese, and an additional 8.6 million children at risk that represents 25 percent of the U.S. population age two to
seventeen and obesity related adult disease is like heart disease and type II diabetes being found in children as young as three and four. With lower income preschoolers being at greater risk, we said we must think about how we felt because even if I as the executive producer was dubious about how funny we could make it. So we came up with a strategy, a multi-year content driven initiative to help young children and their caregivers establish an early foundation of healthy habits. We emphasize prevention and not intervention. And we decided to reach undersized target children.

The production phrase, I mentioned that our writers sat in that curriculum bath. Well one of the things that they heard was some of the advisors saying what are you going to do about Cookie Monster, you know he was created in the late 60’s as a monster to show children that you know you don’t have to be afraid of what is under your bed and if there is a monster, it could be a lovable monster like Cookie who is an obsessive character, granted, but certainly still lovable. So I said look we are not going to teach Cookie not to eat cookies. That is just not practical and one of the wonderful comments back from an advisor was look you know you can just teach Cookie what all children need to learn and that is there are anytime foods and there are sometime foods. Now one of our writers took that to heart and I will show that in a second. But we as producing, you know we have a multi-format
show on Sesame Street. There are studios segments that can last up to ten minutes. There are short segments of film and animation. So, I kind of push my writers to come up with a module on health, like we had done a couple of years earlier to teach children about the world around them called Global Grover. Let’s create a module that could be in every show. And our writers said you know what we really want to focus on studio segments. We think we can tell really funny interesting educational stories with our cast on our street. So, I said okay let’s do both? Let’s hedge our bets. Let’s see what comes out of the studio segments; let’s see what we can create in film and animation. Now let’s create at the top of the show a thirty second moment for parents where give a health message that parents can use with celebrities because celebrities have a powerful attraction to parents, children often don’t know who they are, and find ways to really highlight at the beginning of each show what our season’s curriculum is going to focus on. So, if you roll the next part of the tape I would appreciate it.

[Video Starts]

MALE SPEAKER: And now a happy healthy message from Sesame Street.

MALE SPEAKER 1: I am curious what do you have to say about this event.

GENE: I said this that you just kissed me.
PCI 2005 Entertainment Summit: How Entertainment Is Being Used To Deal with Social and Health Issues Around the World 11/15/05

[Laughter]

[Bells ringing]

ZOOIE: Jumping, jumping, jumping, jumping, jumping, jumping, jumping, jumping—

LEWIS BERNSTEIN, PH.D.: Feel free to jump if you like.

ELMO: Can I sing too?


FEMALE SPEAKER 2: Moving your body is a great way to stay healthy and strong.

ZOOIE: [Inaudible]

FEMALE SPEAKER 2: You can move it fast. Or you can move it slow.

ZOOIE: Elmo is moving slow.

FEMALE SPEAKER 2: It doesn’t matter how you do it just get up and move your body.

ZOOIE: Yeah.

FEMALE SPEAKER 2: Go, go, go, Elmo, go, go Elmo, go Elmo, go Elmo.

ZOOIE: Energy, energy, what is energy? What is energy? Energy is what keeps you going. Got to eat healthy foods to have energy and we believe [inaudible] different kinds of fuel. I need a banana for energy. I need my banana for energy.
[Music]

ELMO: [singing] It is fun to eat, so juicy and sweet now, so fun, to eat, I love fruit.

[Music]

ELMO AND ZOOIE: We love fruit.

MALE SPEAKER: Hey Antonio, do you know how to take of your teeth?

ANTONIO: Yes.

MALE SPEAKER: What do you do?

ANTONIO: Brush your teeth.

MALE SPEAKER: You brush your teeth like this?

ANTONIO: Brush your teeth like this.

MALE SPEAKER: This is good; show my friends out there. Show them how. What do you use? You use your hands like that? What do you use to brush them?

ANTONIO: You use your hands but you take a toothbrush and you put toothpaste on—

MALE SPEAKER: Yeah.

ANTONIO: —and then, you scrub it with a toothbrush.

MALE SPEAKER: Oh and that gives you a nice shiny smile. Show us your smile, Antonio.

[Music]

COOKIE MONSTER: Fruit, any time food, okay. Sometime food.

[Video Ends]
LEWIS BERNSTEIN, Ph.D.: You can see there are a couple of elements there I should have probably explained to you. Alicia Keys that was a moment at the top of the show with Elmo. The art takeoff of the American Bandstand was a called American FruitStand and it was the middle of plot line piece where Elmo and Zooie want to have ice cream and cookies at Hooper’s Store and Alotame says have you ever tried an apple, why don’t you just have an apple. And he said no, and he said well listen to this and then he goes off into that American FruitStand piece and sings to them. Antonio, that little boy, he should be the star of the future. He is just great. And Cookie Monster will, he has learnt but you know we all know if you have ever followed Cookie Monster’s career that he was very interested in fiber. He has eaten chairs for many, many years but it was nice for him to learn that lesson.

I am not going into as much detail as I would like in some of the formative research. We are really still in the middle of collecting data on how this campaign has really affected children but we did spend a lot of time online. We have a wonderful online site and surveying parents to get a sense of what some of those messages should be and what their beliefs are. It is kind of interesting that during the time that we collected this data we found that there were three groups of parents at least that we could surmise. One was the
strugglers who understood the importance of eating right but struggled with their own developing healthy habits for themselves and their children. The health conscientious group who knew a great deal about the issues and had consistent health behavior and they were probably the largest part of the icing and the skeptics who knew it was healthy but were not sure exactly if they were ready really to adopt those messages or at least they really weren’t sure if those messages were as truthful as they thought because perhaps they couldn’t break their styles of eating.

What was interesting with the child studies was that children when asked about health really tended to think much more about food or 58 percent mentioned food when asked what healthy means, 207 percent mentioned feeling good or not being sick, 21 percent mentioned growing and 10 percent mentioned exercise. I noticed the Washington Post this morning if any of you saw it, about the potential increase in one’s health if one exercises from one to four years depending on moderate or a good deal of exercise. One of the things we really wanted to do is try to model for children. The power of really adjusting to seeing messages of not just good nutrition but also exercise as a part of a lifestyle.

I want to show one very strange slide that was part of a much larger study that was interestingly done by our researchers. Look at the control slide first, close your eyes
to the other parts of this slide. When we asked children what do you prefer broccoli or chocolate. To our amazement, 22 percent said broccoli. We don’t know what is the matter with those children. [Laughter] But when we took two characters and we put one character—look at the third slide, condition two—and we put this character, I think it was from another show at the broccoli and we put Elmo at the chocolate, well all of a sudden there is a jump to 89 percent wanting chocolate but now look what happens when we put Elmo over at the broccoli in condition one, 50 percent choose broccoli and 50 percent choose the chocolate. That is not a surprise to me having grown up with Tony the Tiger when I was a child. The association of characters with food choices are clear but we noticed what the power is when we can associate our characters with good nutritional behavior.

Well one more slide. As Arvind had to say, it is important to note that a program is only as good as—it is a demographic way to reach the children across the country. But to really have effect one need to partner. Partner with making sure you deliver materials into schools, into home care, and daycare, reaching caregivers. One of the great new things that we are about to embark on is a relationship with the New Morris Foundation. Again, I thank you Neal for being here. Which has a fantastic website called ktell.org. What we are going to be doing is taking a look at how do we deliver
inside the classroom materials that can be used and can also help caregivers know how to deliver more information. Then we are going to make a triad so that there is information that can be delivered not just in the school but also in pediatric offices and in clinics so that we tie in the delivery of health information, not just into caregivers but also to pediatric offices. We will try to explore how we deliver that same material back to parents. So that is a way really of delivering more bang for the buck using the television series as a way to convey information but to use print material, DVD material and caregiver information to extend it into the classroom and into the school and into the home.

This is a stop point. I can stop here or I can give you another five minutes. Your call, Sonny.

SONNY FOX: [Inaudible]. Five more minutes.

LEWIS BERNSTEIN, Ph.D.: Okay. I will go fast. One other project that I think is really interesting it is not about health, except in the fact that is about resiliency for children. After 911 we were, we had pretty much produced 26 hours of Sesame Street a year. We had written 22 shows, we had four more shows to go. We said to deal in some ways with children and if this is what takes a long time to answer that question that was asked a while ago. We said what are the issues that we need to deal with and we meet with the advisers. We said let’s deal with on the side loss and fear,
two shows, and on the side of how do children deal with standing up to a bully or coping with intolerance. Let’s try to do two shows on that. We spent a lot of time thinking about those shows and developing them and producing them. Then we did a study about them. I would like to just show you a clip from the show that dealt with standing up to intolerance.

How do you deal with that for preschoolers? WE came up with a piece in which Big Bird has a pen pal whose name is Guliver, who is seagull, whom he had never met before. After a long correspondence with Gulvier, Gulvier was finally coming to Sesame Street and Big Bird was incredibly excited that Guliver would meet his best friend, Mr. Snuffupagus [misspelled?]. But all did not go the Big Bird had thought because Gulvier if you can roll the tape only wants to play birds.

[Video Starts]

BIG BIRD: Wait a minute. You don’t want to play with Snuffy because he is not a bird?

GULVIER: Yes that is right.

BIG BIRD: But that is no reason not to play with someone.

GULIVER: Well, it is where I come from. In my neighborhood, birds only play with birds. So I am not playing with a Snuffupagus.
MR. SNUFFUPAGUS: Well that kind of hurts my feelings. It doesn’t feel good at all.

BIG BIRD: No, it doesn’t feel good to me either. Listen Guliver; if you don’t want to play with my best friend then I don’t want to play with you.

GULIVER: you don’t?

BIG BIRD: No. Snuffy is my best friend.

GULIVER: But how can he be. He is so different. He doesn’t have feathers or a beak or anything.

BIG BIRD: So I don’t have fur like Snuffy either. We still care about each other and we love each other.

SNUFFY: We sure do. Umph.

[Video Ends]

LEWIS BERNSTEIN, Ph.D.: When we tested over 107 children in both lower income and middle income schools we did a pre-test on baseline, post-viewing comprehension and a one week post viewing after that to ask questions about what they took away from this show. What was interesting, in almost all of the children, 87 percent knew that problem that Guliver didn’t want to play with Big Bird’s other friend. One week later, 72 percent knew that. About half knew that Guliver only wanted to play with birds. Many also reported the resolution, 56 percent understood that in the end, he was willing to play—they sing the alphabet, they do play together—again on Sesame Street it is hard to just end with
that wonderfully important statement if you don’t want to
play with Snuffy, I can’t play with you. That was the para
line that we wanted to deliver. But we can’t end there so we
had to really take the next step and they did play together.

I just want to tell you that we took those four
shows. We created with funding from the New York State Mental
Health Bureau, a program that was called You Can Ask for
parents and for children, especially in the New York area, in
Spanish, Chinese and English. Children who were affected by
stress and trauma after 911 and created materials that went
out to caregivers. The interesting thing was that the
findings were very powerful. First of all, the New York State
Mental Health Bureau said this was the most used program that
they produced after 9-11.

The research that was done by an outside group said
95 percent of mothers said their children watched one of the
four stories and 96 percent said in those cases, that
ultimately they watched all four stories. Parents co-viewed
at 83 percent with their children. What it really leads to
was increased parent child communication. Very much like the
Talk to Me series did in South Africa. So, after two weeks
about one fourth of all parents told us they had changed the
way that they communicated with their children. After two
weeks about two thirds of parents told us the kit had made
them more comfortable in helping their child cope with stress

1 kaisernetwork.org makes every effort to ensure the accuracy of written transcripts, but due to the nature of transcribing recorded
material and the deadlines involved, they may contain errors or incomplete content. We apologize for any inaccuracies.
and two thirds said their child will now be able to better handle stress.

We learned an awful lot about how to deal with things but we still have not yet mastered how to quickly deliver information to children after hurricanes, after events like the spumoni and we are working taking what we have learnt from new catastrophes to create a kit for these unsettled times. We have actually mocked up a hundred such kits and delivered it to Louisiana and Mississippi. We are doing research on it now.

I have one more thing to present but if you want me back later; maybe we will be able to talk to you about it.

Thank you very much.

[Applause]

[END RECORDING]