



Joint United Nations Programme on HIV/AIDS

UNAIDS

UNHCR-UNICEF-WFP-UNDP-UNFPA
UNODC-ILO-UNESCO-WHO-WORLD BANK

Getting the message across: the mass media and the response to AIDS

UNAIDS BEST PRACTICE COLLECTION



Cover photo by UNAIDS

UNAIDS/05.29E (English original, December 2005)

© Joint United Nations Programme on HIV/AIDS (UNAIDS) 2005.

All rights reserved. Publications produced by UNAIDS can be obtained from the UNAIDS Information Centre. Requests for permission to reproduce or translate UNAIDS publications—whether for sale or for noncommercial distribution—should also be addressed to the Information Centre at the address below, or by fax, at +41 22 791 4187, or e-mail: publicationpermissions@unaids.org.

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of

UNAIDS concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by UNAIDS in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

UNAIDS does not warrant that the information contained in this publication is complete and correct and shall not be liable for any damages incurred as a result of its use.

WHO Library Cataloguing-in-Publication Data

Getting the message across : the mass media and the response to AIDS.

(UNAIDS best practice collection)

"UNAIDS/05.29E".

1.Acquired immunodeficiency syndrome – prevention and control. 2.HIV infections – prevention and control. 3.Mass media. I.UNAIDS. II.Series.

ISBN 92 9 173465 9

(NLM classification: WC 503.6)

UNAIDS – 20 avenue Appia – 1211 Geneva 27 – Switzerland
Telephone: (+41) 22 791 36 66 – Fax: (+41) 22 791 41 87
E-mail: unaids@unaids.org – Internet: <http://www.unaids.org>

Getting the message across:
the mass media and the response
to AIDS



Joint United Nations Programme on HIV/AIDS

UNAIDS

UNHCR • UNICEF • WFP • UNDP • UNFPA
UNODC • ILO • UNESCO • WHO • WORLD BANK

Acknowledgements

UNAIDS wishes to thank the many people who gave so generously of their time, experience and insights during the research for this report, and who extended a warm welcome to our author, Sue Armstrong.

Table of contents

Acknowledgements	2
Abbreviations and acronyms	4
Foreword	5
Executive Summary	7
Soul City: a model of “edutainment”	8
The Community Health Media Trust: giving a voice to people living with HIV	9
Takalani Sesame: big issues for small children	9
The lessons of experience	11
Introduction	13
Soul City: a model of “edutainment”	14
The Soul City vehicle	16
Reaching out to new audiences	16
Buying in talent and skills	18
Choosing topics, developing messages	18
The research process	21
The creative process	22
Collective decision-making and strong partnerships	23
Taking care of its staff	23
Measures of success	24
The Community Health Media Trust (CHMT): giving a voice to people living with HIV	26
The programme formula	27
Choosing topics, making programmes	29
Wider markets for the materials	30
Partnership with the SABC	31
Measuring the impact	32
Takalani Sesame: big issues for small children	35
The Takalani partnership	35
A multimedia model	36
HIV and AIDS on the agenda	37
Choosing topics, developing messages	39
Solid foundations: research	39
Making programmes	43
Outreach	45
Measuring success	47
The lessons of experience	51
Useful resources and contacts	56

Abbreviations and acronyms

AIDS	Acquired Immunodeficiency Syndrome
ARV	Antiretroviral (drug)
CBO	Community-based Organization
CHMT	Community Health Media Trust
DFID	Department for International Development (United Kingdom)
DoE	Department of Education (South Africa)
DoH	Department of Health (South Africa)
ECD	Early Childhood Development
ECE	Early Childhood Education
ICASA	Independent Communications Authority of South Africa
HIV	Human Immunodeficiency Virus
NGO	Nongovernmental Organization
MTCT	Mother-To-Child-Transmission
PLWHIV	People Living With HIV
PBS	Public Broadcasting Service (United States)
SABC	South African Broadcasting Corporation
STI	Sexually Transmitted Infection
TAC	Treatment Action Campaign
TB	Tuberculosis
USAID	United States Agency for International Development

Some research terms

Formative research describes the studies conducted generally in advance of programme-making to guide the development of programme concepts, treatments and scripts, and sometimes to get feedback from the target audience.

Summative research describes the studies conducted during or after broadcasts in order to examine their effectiveness in reaching their target audiences and making an impact.

Quantitative research aims primarily at evaluating something in terms of numbers, such as: the number of people reached by a programme; the number of households with television, or radio, or electricity; the proportions of people who do and do not know the basic facts about HIV and AIDS.

Qualitative research aims to find out about people's experiences and feelings, essentially, to fill in the picture behind the numbers and to provide the nuanced information required to design and analyse quantitative research.

Foreword

Knowledge is power in the struggle to cope with and contain HIV. People who are well-informed about the epidemic are able to assess the threat posed by the virus and to know how best to avoid infection, or, if they are HIV-positive, how to look after themselves and their partners and families. But for individuals to be able to act effectively on what they know, they need an enlightened environment. The mass media have a huge contribution to make on both fronts. Besides delivering direct information, they have the potential to influence attitudes, behaviour and even policy-making in a myriad of ways through their coverage of the epidemic in news, drama, documentary and discussion.

However, this is a double-edged sword. The media reflect as well as shape culture and social norms. Ensuring that the messages conveyed assist people to cope with and resist HIV rather than inadvertently falling victim to the epidemic requires wisdom, sensitivity and clarity of purpose. Recent events in Jamaica are salutary. Murderous homophobia there has been fuelled by a number of popular rap artists, whose shows and songs have been given exposure in the island's media. Besides spreading misery and fear in the gay community, this has caused serious setbacks to AIDS programmes, because of the association between homosexuality and the spread of HIV. Sadly, similar examples from elsewhere in which the media, wittingly or unwittingly, help to fuel prejudice and discrimination are not difficult to find.

However, the three case studies in this report are examples of what can be achieved when the media are used creatively towards positive outcomes. They offer lessons from experience that will be of value to people everywhere who are interested in harnessing the power of the mass media to help in the response to AIDS.

Executive Summary

Because of their central position in people's lives, the mass media have unrivalled potential to inform and educate the general public. Yet in the response to AIDS only a tiny fraction of that potential has been tapped. In surveys around the world, radio and television are cited as key sources of information about AIDS by large numbers of people. But although there are examples of imaginative and highly successful campaigns, by and large, media coverage of the epidemic is not sufficient to keep the public well informed. There are still millions of people who have never heard of AIDS, and many more who harbour serious misconceptions about the disease.

UNAIDS has been encouraging greater involvement of the mass media in responding to the epidemic. It recently produced a report, *The Media and HIV/AIDS: Making a difference*, which highlights the many ways in which media organizations can make an impact. Besides offering channels for the communication of public health information and messages, the media can, for example:

- stimulate and lead open and frank discussion of HIV and AIDS;
- provide a platform for those most affected by the epidemic to air their concerns and views, especially people living with the virus;
- challenge stigma and discrimination by providing accurate information about HIV and AIDS, and positive images and role models of infected and affected people;
- encourage leaders to take action, and keep policy-makers and service providers on their toes;
- help create an enabling environment for prevention of HIV infection, and a supportive environment for the care of people living with the virus;
- take steps to give the epidemic the attention it deserves on the news agenda, and to prevent "AIDS fatigue" or complacency from allowing this attention to slip;
- build capacity through partnerships that allow for the sharing and transfer of skills and expertise with others.

However, using the mass media effectively in the response to AIDS presents major challenges. Sensitive health information and often difficult science have to compete for broadcast time and audiences with a myriad of other topics and interest groups, both commercial and non-commercial. And people from the very different worlds of the creative arts and science have to find a common vision and work together as equal partners.

There are many examples from around the world of people and organizations meeting these challenges. This report looks in detail at just a few, and focuses on the Republic of South Africa, which is home to the largest number of people living with HIV in the world. The purpose of the report is to describe the processes by which an original idea for using the mass media to address HIV and AIDS is put into practice, and to share the lessons of experience with all those who wish to do something similar. For example, it looks at:

- how target audiences are chosen;
- how partnerships are formed and decisions made;
- how topics are chosen and messages developed;

- the research process that underpins the production of materials; and
- what ethical issues are raised by addressing HIV and AIDS in the media, and how they are handled.

For this report, a UNAIDS consultant visited South Africa to interview a wide range of people working on the frontline, from project managers, researchers and media executives, to film-makers, audience groups, and people living with HIV who present their own programmes. The aim was to find out not just what has to be done in practical terms, but to gain some insight into the thrills and frustrations of working in the tough environment of the mass media, and to discover the secrets of survival and success. The organizations have very different histories, target audiences and ways of working, and represent a wide range of experience.

Soul City: a model of “edutainment”

In the early 1990s, Garth Japhet was working as a medical doctor in community clinics in the remote rural areas and black townships of South Africa. He found himself dealing constantly with diseases that were preventable and emergencies that should not have happened. This convinced him there was a pressing need to give people information to safeguard their own health, and he decided to work with the mass media.

Research suggested that the most effective way to reach large audiences with health messages was to incorporate them into a popular entertainment format designed for prime time—an approach known as “edutainment” because it sets out to educate and entertain at the same time. Dr Japhet wanted to create a vehicle that could deal with a range of health and development issues over an extended period and in a realistic context, so he chose soap opera for TV and radio, to be supported by print material. In 1994, Soul City—a drama set in a community clinic in a poor, crowded neighbourhood—was launched.

The television drama is the centrepiece of a multimedia programme that includes in each series 13 hour-long television programmes and 60 15-minute radio dramas. Three 36-page colour illustrated booklets address in greater detail the issues raised in the dramas and are serialized in national newspapers and then distributed as booklets through the newspapers, clinics and nongovernmental organizations. In addition, there is a wide range of outreach materials and services.

Today, the Soul City Institute for Health and Development Communication is an established institution. It has a staff of 50; over 100 contract workers; strong professional relationships with a host of partners in the media and creative fields and in research, education, health and development; and ongoing support from a number of core donors and sponsors.

Soul City’s original target audience was “disadvantaged South Africans”, which, as a result of apartheid, meant predominantly black people. However, the drama goes out on prime time TV and so attracts a hugely diverse audience. In 1999, multimedia drama for children aged between eight and twelve years, called Soul Buddyz, was launched.

All materials are developed on a solid foundation of research which accounts for around 75% of the time and 15% of the budget of each edutainment series. Because the workload is cyclical, and many skills are required intermittently, Soul City employs a core staff to run the project, and buys in expertise as necessary on a contractual basis.

The Community Health Media Trust: giving a voice to people living with HIV

The Community Health Media Trust (CHMT) was established in 1998 by two Cape Town men, Jack Lewis, who runs a film company called Idol Pictures, and Zackie Achmat, of the Treatment Action Campaign (TAC). They realized that, although South Africa had one of the most serious HIV epidemics in the world, none of the coverage about it in the mass media spoke directly to people living with the virus. Together they set up a non-profit company specifically to address issues of concern to HIV-positive people, such as their rights, the quality of services, and access to treatment.

The programmes are broadcast under the series name, *Beat It*, and have an activist slant. They have been putting pressure on government to improve treatment services and provide antiretroviral drugs. Until the government announced a comprehensive treatment plan in 2003, CHMT's editorial stance, which often criticized the government, made it hard to sell the *Beat It* series, and impossible to work with the state-owned South African Broadcasting Corporation (SABC). The company eventually secured broadcast time for the first three series of *Beat It* with an independent commercial broadcaster, albeit with much more limited audience coverage. Then, with a change in the political climate in 2003, CHMT managed to secure a partnership deal with SABC Education, an organization that provides educational programmes to the national broadcaster and other outlets. The deal was for 26 half-hour television programmes to be made by CHMT, with each partner financing 13 programmes.

The new series, called *Siyayinqoba*¹ *Beat It*, was launched on SABC television in September 2004. Each 30-minute episode starts with a documentary short segment that provides background on an AIDS issue. This is watched by the programme presenter, an HIV-positive individual, in the company of a support group of people living with HIV. The group members—who are the same each week to encourage identification by the audience—take up the issues raised by the documentary segment and discuss them in the light of their own experiences. An expert comes in near the end of the programme to explain or expand on the technical information.

Material from the *Beat It* television programmes has been repackaged to produce a series of training videos, each one covering a single topic in detail. For trainers who may have limited knowledge of HIV and AIDS, CHMT has produced facilitators' notes to accompany the videos, and the packages have been sold to a wide variety of customers, including nongovernmental organizations, private companies and civil service organizations such as the police. In addition, CHMT supplies material to the Mindset Health Channel, a satellite broadcast channel that delivers free education to patients and health-care workers in clinics and hospitals across South Africa. Launched in 2004, the Channel is a public-private partnership involving the Department of Health. It aims to broadcast to all 4000 public health facilities in the country by 2009.

Takalani Sesame: big issues for small children

In 1969, *Sesame Street*, a television programme aimed at fostering the intellectual, cultural and emotional development of pre-school children, was launched in the United States of America. The action revolved around the fictional street, where a cast of 'Muppet' characters interacted with children and adults. The programme developed a worldwide reputation, and has been adapted for broadcasting in more than 140 countries.

¹ *Siyayinqoba* means "we are beating it" in isiZulu and isiXhosa

Sesame Street came to South Africa in 1996. Initially, material produced in the United States was dubbed into local languages for broadcasting to South African audiences. But there were formidable challenges in addressing children from such diverse cultures and backgrounds. Therefore, the South African Department of Education (DoE)—which recognized the potential of Sesame Street to deliver Early Childhood Education (ECE)—was keen to have the programmes created and produced locally. In 1997, the United States Agency for International Development (USAID) provided Sesame Workshop (the US-based parent company) with a grant to develop South Africa’s own version of Sesame Street, and in July 2000 Takalani² Sesame was launched officially on television.

Sesame Workshop is a non-profit educational organization that works in cooperation with the Public Broadcasting Service (PBS) in the United States to air its programmes there. In South Africa, it has formed a five-way partnership with USAID, the Department of Education, the SABC, and Sanlam, a financial services group that is the corporate sponsor. Sesame Workshop also collaborates with local production companies and advisers.

Takalani Sesame’s audience is pre-school children aged between three and seven years and their caregivers. The programmes are targeted especially at the population disadvantaged by apartheid—the seven out of eight children who have no exposure to Early Childhood Development (ECD) services. In the United States and everywhere else, Sesame Street is broadcast on television only. But in South Africa, where 30% of homes still do not have television, a radio version of Takalani Sesame and an outreach initiative were launched.

In a season, Takalani makes some 104 television and 100 radio programmes. Typically, half the programmes are adaptations of material that originates in the United States, while the other half use locally-generated material and feature a cast of South African Muppets made especially for Takalani in the United States. The 30-minute television programmes are broadcast daily on two SABC channels, and the 12-minute radio programmes go out three times a week in four different language versions, with regular repetitions to aid learning.

The objective of all Takalani Sesame programmes is to encourage children to develop self-esteem, to respect and appreciate others, and to develop basic skills with letters and numbers, life skills and a life-long love of learning. The programmes teach by example, presenting positive role models and positive behaviour. An outreach programme deepens the educational impact of the broadcasts through training educators and parents in the use of related printed materials, videos, audio-tapes, and web-based information.

Besides providing pioneering radio programmes, Takalani was the first Sesame project to tackle the issue of HIV and AIDS. In September 2002, a five-year old girl Muppet with golden fur called Kami joined the show. Kami is an HIV-positive orphan whose mother died of AIDS. Her primary role is to humanize and destigmatize people living with HIV, and to open up discussion about issues such as coping with illness and loss.

² Takalani means “be happy” in the Tshivenda language

The lessons of experience

This report ends by looking at the lessons of experience that should help others who want to work with the mass media in the field of HIV and AIDS. Some examples include the following.

- Producing a pilot programme is an important first step in getting a new initiative off the ground.
- The more popular appeal an idea has, the easier it will be ‘sell’ to the media and to donors.
- Using a mix of media enables a project to make the maximum impact on the general public.
- Mass media projects involve many participants with different skills, viewpoints and ways of working. For such projects to succeed, teamwork is essential. So too is good management.
- Buying in services and expertise on a contractual basis is often the most cost-effective and efficient way of working.
- In educational broadcasting the review and decision-making processes are more complex than usual. Production companies need to be aware of this, and to take it into account in negotiating time schedules and budgets, or else it causes stress and friction.
- Involving creative people such as scriptwriters and producers in the development of messages—and even in field research where appropriate—can help them acquire a depth of knowledge and insights that are invaluable when it comes to making programmes.
- Enabling the general public to interact with a mass media project encourages awareness, debate and personal identification with the issues.
- Rigorous research is the key to effective use of the mass media for social purposes. It guarantees the quality and reliability of the product and its relevance to the target audience.
- The effect of appearing on nationwide television can be dramatic even for people who are already open in terms of their HIV status.
- Encouraging people to open up during interviews can release powerful feelings, including expectations that the interviewer will be able to help resolve their problems. Such expectations can be overwhelming if interviewers are not properly prepared.
- Organizations driven by a sense of mission need to be careful not to exploit the sense of commitment in their staff.
- Success breeds success. Continued support from media organizations and funders depends on proof that a project is achieving its goals.

Introduction

In the remote Kalahari village of D'Kar in Botswana, satellite dishes sprout like mushrooms from tiny one-roomed traditional huts. Here, televisions are often hooked up to car batteries in homes without electricity. In the informal settlement of Mfuleni on the outskirts of Cape Town, South Africa, the sounds of radio crackle from kiosks and the open doorways of makeshift homes, and the ghostly white light of television flickers behind thousands of curtained windows.

Such scenes are familiar across low- and middle-income countries, from Africa, to Asia, to Latin America. For today, even in the poorest homes, radio and television tend to be seen as necessities rather than luxuries. Although there are certainly parts of the world that radio and television do not reach, the coverage of the mass media is indeed massive. In the world's most populous country, China, an estimated 90% of people have access to radio and television. And in South Africa, where most of the research for this report was carried out, some 99% of people have access to radio and 70% to television, while just over half read newspapers.

Because of their central position in people's lives, the mass media have unrivalled potential to inform and educate the general public. Yet in the response to AIDS only a tiny fraction of that potential has been tapped. In surveys around the world, radio and television are cited as key sources of information about the AIDS epidemic by large proportions of people. But although there are examples of imaginative and highly successful campaigns, by and large, media coverage of the topic is too intermittent or superficial to keep the public well informed. Twenty years into the epidemic there are still millions of people around the world who have never heard of HIV or AIDS, and many more who harbour serious misconceptions about the disease.

Almost half of all new infections occur in young people between the ages of 15 and 24, yet only a minority of the world's young people can identify two ways of preventing the sexual spread of HIV and give the correct answer when confronted with three common myths about the disease. And very many people—young and old—are unaware that a healthy-looking person can be living with the virus.

One of the goals set by the international community at the turn of the millennium was to halt the spread of HIV and begin to reverse the epidemic by 2015. A knowledgeable general public is critical to achieving this goal, and in recent years UNAIDS has been urging mass media organizations to put their considerable energy into the effort. In 2004 it produced a report called *The Media and HIV/AIDS: Making a difference*, which highlights the many ways in which the media can make an impact on the AIDS epidemic. Besides offering channels for communicating public health information and messages, they can, for example:

- stimulate and lead open and frank discussion of HIV and AIDS;
- provide a platform for those most affected by the epidemic to be able to air their concerns and views, especially including people living with the virus;
- challenge stigma and discrimination by providing accurate information about HIV and AIDS, and positive images and role models of affected and infected people;
- encourage leaders to take action, and keep policy-makers and service providers on their toes;

- help create an enabling environment for prevention of HIV infection, and a supportive environment for the care of people living with the virus;
- take steps to give the epidemic the attention it deserves on the news agenda, and to prevent “AIDS fatigue” or complacency from allowing it to slip; and
- build capacity through partnerships that allow for the sharing and transfer of skills and expertise with others.

However, despite the obvious attraction of using the mass media in the response to AIDS, doing so effectively presents major challenges. Sensitive health information and often difficult science have to compete for broadcast time and audiences with a myriad of other topics and interest groups, both commercial and non-commercial. This means that people from the very different worlds of the creative arts and science need to find a common vision and work together as equal partners.

There are many examples from around the world of people and organizations meeting these challenges. This report looks in detail at just a few and focuses on South Africa, which is home to the largest number of people living with HIV in the world. The purpose of the report, which is a companion to *The Media and HIV/AIDS: Making a difference*, is to describe the processes by which an original idea for using the mass media in responding to AIDS is put into practice—how target audiences are chosen, messages developed, partnerships formed and decisions made—and to share the lessons of experience with all those who wish to do something similar.

To learn more about these issues, a UNAIDS consultant visited South Africa to interview a wide range of people working on the frontline, from project managers, researchers and media executives, to film-makers, and audience groups, along with people living with HIV who present their own media programmes. The aim was not just to find out what has to be done in practical terms, but to gain some insight into the thrills and frustrations of working in the tough environment of the mass media, and to discover the secrets of survival and success.

Soul City: a model of “edutainment”

In the late 1980s and early 1990s, Garth Japhet was working as a medical doctor in community clinics in the remote rural areas and black townships of South Africa. He found himself dealing day in and day out with diseases that were preventable and emergencies that should not have happened. He saw children dying of diarrhoea, women with severe anaemia at the end of pregnancy, men and women with sexually transmitted infections, and tuberculosis (TB). He grew increasingly frustrated at not being able to make an impact by working at the curative end of medicine, which failed to address the root causes of people’s ill-health.

A pivotal moment came when he undertook a survey to find out why so few women in the poor black communities in which he worked used antenatal services. The enquiry revealed that although the time and effort involved had a deterrent effect on busy women, most were also unaware of the benefits of professional care in pregnancy. This convinced Dr Japhet that there was a pressing need to give people accessible information to help them make healthy choices.

He started writing a weekly column for a couple of newspapers with wide circulation. The column took the form of questions and answers and proved highly popular, but Dr Japhet realized that his messages were only reaching those who were literate and had access to newspapers. The people who most needed the information—the poorest and often least educated

members of society—were being bypassed. So he started exploring ways of using radio and television, which even a decade ago reached the great majority of homes.

“It is not magic technological solutions... that will alleviate poverty and the spread of disease, but the active engagement of the communities that experience such problems. If people are to be empowered to do this, they need information and the opportunities to discuss and debate issues.”

Garth Japhet

Audience ratings showed that, in South Africa, education programmes on television rarely reached 500 000 viewers, whereas prime time drama regularly attracted audiences of seven million and more. Dr Japhet realized that the most effective way to deliver health messages if he wanted them not only to reach people, but to make an impact, would be to incorporate them into a popular entertainment format that would naturally have access to prime time on both radio and TV—an approach that has become known as “edutainment” because it sets out to educate and entertain at the same time. The editor of South Africa’s widest circulating daily newspaper, who was running Dr Japhet’s syndicated health column, believed in the idea and offered to pay the young doctor’s salary for three months to give him freedom to develop it further.

Garth Japhet’s first inclination was to create some kind of game show, but after spending time travelling and looking at how the broadcast media were being used internationally for health purposes, he decided that drama was the way forward.

By this time he had been joined by Shereen Usdin, another medical doctor who shared his vision, and together they began the tough task of raising funds. It was 1992; South Africa was in a volatile state in the dying days of apartheid, and funders were wary of committing themselves to projects in such uncertain times. But the two doctors managed to raise seed money from the United Nations Children’s Fund (UNICEF). With the help of two researchers from the local clinic, they produced a pilot programme for a television soap opera, which they named *Soul City*, as well as complementary pilot programmes for radio and print. This enabled them to raise the full budget for a multimedia series which was launched in 1994, the year of South Africa’s first democratic elections.

Explaining why he chose soap opera/drama as a format for delivering health messages, Garth Japhet says, “I wanted to create a vehicle that could deal with a range of health and development issues over an extended period of time.” This format offers flexibility, allowing the *Soul City* team to return to an issue as and when they feel it is necessary, as topics are woven in and out of the story line. It also allows them to present issues in their wider context and in ways that resonate with the real life experiences of their audiences.

Producing the pilot was a very important first step that served several functions, says Dr Japhet. It was his team’s first lesson in making programmes; it allowed them to test and iron out their relationship with the broadcaster; and it gave them a demonstration tape to take to other media outlets and funders when seeking support. The fact that *Soul City* already had the backing of the country’s top broadcaster and biggest selling national newspaper helped enormously in attracting other partners and funders, comments Dr Japhet.

Success has bred success, and today *Soul City* is an established institution (its full name is *Soul City: Institute for Health and Development Communication*). It has a staff of 50

and strong working relationships with a host of partners in the media and creative fields, as well as with research, education, and health and development institutions. It also has ongoing support from a number of core donors and sponsors. They include the South African Department of Health, the European Union, Development Cooperation Ireland, the Royal Netherlands Embassy, and the United Kingdom's Department for International Development (DFID). Furthermore, Soul City is seen as a model internationally.

The Soul City vehicle

Set in a community clinic in a poor, overcrowded township, with a cast of eminently recognizable characters, the Soul City television drama is the centrepiece of a multimedia programme. It is now into its seventh series (or season), and each series consists of:

- a 13-part television drama that goes out weekly in prime time, with each episode lasting one hour (in the first three series the episodes were 30 minutes each);
- a 60-part, 15 minute radio drama dealing with the same issues as the TV series, but with a more rural-based storyline—it is broadcast daily and is produced in nine of South Africa's languages;
- three 36-page colour-illustrated booklets that feature the same characters as the television drama, and that address in greater detail the issues raised in the dramas. The booklets are first serialized in ten major newspapers around the country, and then printed together and inserted as booklets into the newspapers for distribution. They are also made available through nongovernmental organizations and clinics, which has proved particularly effective in rural areas. Around one million copies of each booklet are distributed per series—over 30 million copies to date.

Soul City draws up a marketing and advertising strategy to raise public awareness, stimulate audiences and make the most of each series, as well as to give added exposure to its sponsors.

Reaching out to new audiences

Over the years, the Soul City initiative has grown organically, venturing into new related fields as the need became apparent and when the team believed it was feasible and worthwhile. In addition to the regular mass media series, for example, it has developed training materials for adults and life skills materials for school children based on the soap opera stories. These capitalize on the popularity and credibility of the Soul City brand name built up by the mass media initiatives.

Soul City's original target audience was "disadvantaged South Africans", which, as a result of apartheid, meant predominantly black people. Hence the doctors decided to centre the drama on a community clinic in a poor township. But as Dr Japhet points out, prime time TV and radio attract audiences that are hugely diverse in age range and background. In time the team realized it needed to speak more directly to its young viewers and listeners, and in 1999 Soul Buddyz—a television drama series for children aged between eight and 12 years—was launched.

The drama centres around a group of South African children from all walks of life who meet in a park after school and become firm friends. This group, the Soul Buddyz, have to deal with issues that children face all the time. They help each other and work for their community, while having lots of fun. At the end of each programme there is a short sequence of

comments from real children about the issues raised in the drama. Buddyz Buzz, as it is called, helps to give South African children a voice about the important issues affecting them.

The television drama is a 26-part series of 26-minute episodes that are broadcast weekly on SABC 1—South Africa's most popular television channel. There is very little radio programming in South Africa targeted at this age group. Nevertheless, Soul Buddyz is also attempting to reach children through this medium, with a 26-minute weekly programme that includes drama, docu-drama and a 15-minute phone-in hosted by a young person. The idea was piloted on three African language stations only, and evaluation after the 2001 series indicated that the radio programmes were only reaching around 7% of the target population, whereas TV reached about 65%. In the second series of Soul Buddyz, the radio programmes were produced and broadcast on all nine African language stations.

In addition, Soul Buddyz has produced a life skills book for Grade 7 school children, and a parenting booklet to accompany the series which is distributed to homes through a national Sunday newspaper and nongovernmental organizations. When children began phoning the Institute to ask how they could become a Soul Buddy, the idea for Soul Buddyz Clubs was born. They are formed under the guidance of a teacher or librarian who facilitates weekly meetings. Facilitators receive training from Soul City, which provides materials for use in the clubs and develops competitions. There are currently about 1900 Soul Buddyz Clubs nationwide, and demand is so strong that Soul City has now contracted out the work of managing them to a specialist agency.

Beyond the mass media

The Buddyz Clubs are just one part of a diverse programme of activities that go beyond Soul City's core mass media work. They include:

- * a wide-ranging advocacy programme. A special Advocacy Department was set up in 1999 aimed at creating an enabling environment for achieving optimal health. The department conducts focused campaigns; gives advocacy training to nongovernmental organizations and other civil society groups on working with the media; and works with journalists to enhance media coverage of health and development issues and train them in advocacy. It also produces booklets on the science of HIV and AIDS specifically to encourage rational and informed debate and sound policy-making.
- * Search for a Star. This is an award intended to nurture and support emerging acting talent in South Africa. Aspiring actors are auditioned, and the winner receives a year's contract with a South African casting agency, as well as a part in the next Soul City series.
- * Health and Development Worker of the Year. This award is intended to honour and celebrate people who make an exceptional contribution to their communities in the field of health and development.

Besides reaching out to wider audiences at home, the Soul City Institute is engaged in a five-year Regional Programme. In due course, it will provide training to eight other African countries in using multimedia for health purposes, and help them adapt some of Soul City's materials. Financed by the Royal Netherlands Embassy, DFID and the European Union, the programme is a partnership between Soul City and local organizations in the different countries. Strengthening and building capacity while developing a local brand are key objectives. An important aspect of the programme is that it allows for a regional approach to illnesses such as AIDS.

Buying in talent and skills

As mentioned with regard to the Buddyz Clubs above, outsourcing is in fact a key element in the Soul City model. The directors soon realized it would be most cost-effective and efficient to buy in expertise as necessary, on a contract basis, rather than trying to do everything in-house. The workload is cyclical, and this way, Soul City only has to employ people when they are needed. Also, responsibility for the quality of work and for meeting deadlines rests with the contractor. In theory, says Garth Japhet, “if they mess up, they’re out.” However, he says that in practice there is everything to be gained by resolving problems and building up trusting and long-term relationships with outside experts.

Outsourcing is feasible in South Africa, which has a diverse and well-developed economy and consequently a rich pool of skills on which to draw. But in the other African countries in which Soul City is working, this is not always the case. In some it is necessary to build up capacity through training, and then it makes sense to keep talent in-house in the immediate term.

Choosing topics, developing messages

Soul City has won many national and international awards for drama, as well as education. The key to its success is meticulous research that underpins the development of messages and story lines, and that takes about 75% of the total time needed to complete a mass media series.

Figure 1 Proportion of time and budget spent on various stages of edutainment-creation

Phase	Amount of time taken	Proportion of budget
1: Research and planning	25%	5%
2: Development	50%	10%
3: Production	15%	70%
4: Implementation and promotion	10%	10%
5: Evaluation	ongoing	5%

Source: Soul City.

Soul City has to compete for broadcast time in the mainstream media with media outlets that do not have to do research and can make programmes much faster and cheaper. This means that there is always pressure to cut corners, says director of research, Dr Sue Goldstein. But she believes lack of knowledge and understanding of their target audience is why so many public health information campaigns fail to make an impact, and she resists compromising on cost.

The key questions in her mind at the beginning of a series are: what are the health and development issues that most concern people? What do people want and need to know about a topic? And what are the factors in the environment that encourage people to make healthy choices, or hamper them from doing so?

Before starting a new series, a coordinator is appointed to drive the process. His or her first step is to put an advertisement in a newspaper asking for suggestions for topics. Soul City is now enough of a household name to generate a good response, and the coordinator analyses these according to a set of criteria such as: is it a national issue? How much impact does it have on morbidity and mortality? Can it be dramatized? Are there support structures in

place for people who need help or advice or want to take action? And does it inspire the coordinator? “It helps enormously in the work of leading and inspiring the team if the coordinator feels passionate about the topics,” comments Dr Goldstein.

Once she has a strong shortlist, the coordinator seeks information from experts and other interested parties in the field before bringing the list to a brainstorming session with the Soul City project management team. This is where a final decision is made—typically there are four main topic areas per series. For the brainstorming session, Dr Goldstein provides background information, such as the morbidity and mortality levels associated with each issue, to give context and a sense of its relevance.

“In its first ten years, Soul City has dealt with 15 different health and development issues. Approximately 60% of the content has dealt with various aspects of the AIDS epidemic.”

Ten Years of Soul City leaflet, 2004

Next, the coordinator assesses what is going on at community level and draws up an inventory of activities, as well as commissioning a literature search on each topic from an individual or organization with specialist knowledge of the topics.

At this stage, Soul City needs to find out what its potential audience knows and feels about the various topics. Dr Goldstein’s department draws up a field research schedule, which identifies the type and number of people to be interviewed and the timeframe for doing so. Soul City has trained a team of about 10 researchers who work for the organization on a freelance basis. Interviews are tape recorded and transcribed verbatim before being handed in to Soul City for professional analysis.

The data gathered from all sources are then taken to a day-long message design workshop, which brings together a wide cast of characters—the Soul City project management team, the creative people who will be responsible for communicating the messages, a wide range of topic experts, and people affected by the issue. The workshop starts with presentations of the research data. Then people break up into small groups for discussions, before coming back together to share their thoughts, prioritize the messages, and identify which are most appropriate for broadcast and which for print media, explains Dr Goldstein.

Besides finalizing decisions about topics and messages, the aim of this workshop is to encourage topic experts and other stakeholders to become actively involved in the project and to appoint representatives as regular advisers, thereby ensuring the credibility of the edutainment. Following the workshop, the project management team draws up a detailed message brief. This lists the messages in order of priority, describes exactly what information should be communicated, and gives background and contextual information to help the creative people with their work. The message brief becomes the foundation document—the “Bible”—for the series, says Dr Goldstein. The process to this point takes about six months.

The next step is to brief the script and print writers. Typically this takes the form of a five-day creative workshop attended by the expert advisers, as well as the Soul City project management team and the creative people. Together they think up scenarios, and brainstorm about which characters in the soap opera could carry the message, and which new characters they need to introduce. This is where tensions invariably arise between the technical people with their eye on the message, and the creative people intent upon coming up with engaging

entertainment. Competing egos and professional pride have to be managed sensitively, says Dr Goldstein.

The creative people subsequently come up with a story outline which is checked by Soul City and the expert advisers before being developed into a draft script. This is tested on audience groups (see box below), and there are always surprises, says Dr Goldstein. Even when the creative and technical people are confident they have done a great job, audience research may reveal that the language is not authentic, that characters are unconvincing, that the story line is beginning to drag, or that there are unintended messages and inconsistencies that could undermine the project.

Soul City hears from its audience

It is a bright spring afternoon in Vosloorus, a busy township of small brick bungalows and dusty streets hemmed in by a sea of informal housing some 30 kilometres from Johannesburg. The door is open to number six Masianoke Street, and one by one, the five men and four women of the focus group arrive and settle down with chat and laughter on chairs and sofas around Lerato Selepe's small, neat living room. There are leafy pot plants, and a muted TV in the corner. This is the fourth time the group has met and the members are easy with each other and enthusiastic about their role as audience representatives. A little child snuggles in her father's lap, her tiny hands held gently in his, watching everyone wide-eyed.

Researcher Mbhali Mabogoane greets everyone, switches on her tape recorder and turns a quizzical face to the group. She asks a few questions, but group members need little prompting. All have read the latest script from Soul City and are soon arguing animatedly about the characters, the plot and the issues. Are nurses really as off-hand with patients as the nurse in the story? Oh yes, say most of the group. But one young man's mother is a nurse and he speaks up in her defence. He does not find the scene realistic.

There is much discussion about HIV testing and the risks and benefits of sharing results with partners; about family communication and resolving problems; and about doing volunteer work in the community. The conversation weaves seamlessly in and out of the drama and people's own personal lives—as if they are all characters in the same world. For nearly an hour, Ms Mabogoane lets them talk, prompting them occasionally back on course. Then she switches off the tape recorder, and everyone quiets and settles back in their chairs, ready to answer questions about their membership in the focus group.

"It's our job to give the writers advice about how things are in the community," explains one woman. The others nod in agreement. Being asked their opinions makes them feel good, and they take the responsibility of being the voice of township youth very seriously. "It's important that we're honest when we give our views about the scripts," comments a young man.

All the group's members are unemployed and welcome the Rand (R)100 (about US\$ 15) stipend they receive for attending the focus group. Soul City does not have a formal policy of paying interviewees. But researchers mostly do give a stipend of R50 (about US\$ 7.50) to R100 in recognition of the time and effort people take to work with them. With so many households in their township struggling to put food on the table, Ms Mabogoane's group in Vosloorus is sensitive about the pressure its members feel in South African society at present to do voluntary work. It is a matter of pride that they receive something for their service.

Someone looks at his watch. People stir and rise from their seats. The meeting is over and they bid farewell to each other and step out into the sunshine. Ms Mabogoane stays a little longer and talks briefly of herself. She started life as a social worker before turning to research, and has worked for a long time with Soul City on a freelance basis. She believes that her background in social work is a great advantage in understanding people and handling focus groups.



Ms Mabogoane commissions someone within the community to recruit interviewees according to the brief given to her by Soul City. It is important for consistency that the people who review scripts stay on board throughout a drama series of 13 episodes, get to know the story and watch it develop. Therefore, focus group members must be able and willing to attend regularly, she explains. However, flexibility is important too, and guided by the deadlines set by Soul City, Ms Mabogoane lets her interviewees decide what is most convenient for them.

Meeting up with the groups is the pleasurable part, and her job is to guide them with a few questions and then give them space to express themselves freely. The hardest work, she says, is in translating and transcribing the tapes, which can take up to three days for a single meeting.

The research process

Thuli Shongwe worked with Garth Japhet and Shereen Usdin on the original pilot programme for Soul City, and is today senior research officer at the Institute. She had no research background, having come straight from school into health promotion at the Alexandra clinic where she first met the two doctors. Ms Shongwe has learned everything on the job, and has taken a course in counselling.

“With qualitative research it’s the type of person you are, not the qualifications, that counts. Soul City looks for people with empathy, maturity and sensitivity, who are good at listening. It helps too if they have some personal exposure to the issues.”

Thuli Shongwe

She particularly enjoys “formative” research, which is the initial process of finding out what the target audience knows about the topics. “You learn what experience people have of the issues. The language people build around a subject tells you a lot about how they make meaning of it,” she says.

Soul City’s formative research involves about ten focus groups nationwide, with members selected to represent the target audience in terms of age, gender, residence, socio-economic status and special characteristics. The objective is to elicit people’s feelings and thoughts, not to set up a discussion in which people may become polarized, explains Ms Shongwe. Before the researchers go into the field they are thoroughly briefed at head office.

Ms Shongwe is a trainer and explains that, in this type of research, it is extremely important that the interviewer is aware of his or her own feelings about the issues, and that these are not allowed to affect the interviewing. During training they all explore their own psychological issues, by carrying out interviews with each other and doing similar exercises. If the trainers feel that a trainee is not going to be able to handle the job in the field, they do not let them proceed.

Ms Shongwe says it is important to make focus groups feel relaxed and free to talk, so “we go to where they are” and try to create as natural and non-threatening an environment as possible. As a matter of principle, researchers are asked not to dress in a manner that will set them apart or give them an air of authority.

With qualitative research, which is designed to encourage people to open up, it is extremely difficult for researchers to develop the professional detachment necessary to protect

themselves from what they hear, comments Ms Shongwe. She and her colleagues were not fully aware of the dangers until she herself became seriously depressed. “I’m a person who takes other people’s pain. I listen to them and go home with the pain. Also, I found that I was hearing people talk about experiences that I was having myself—I lost two of my family to AIDS.”

“We were so driven by deadlines and pressure of work that we didn’t look to our own self-care,” she adds. Today, Soul City has formal debriefing for people who work in the field, and a psychologist comes once a month to work with them.

Pressure comes also from the fact that encouraging people to open up can release all kinds of powerful feelings, including expectations that the interviewer will be able to help them, says Ms Shongwe. Such expectations can be overwhelming if researchers are not properly prepared, and in their training it is emphasized that they are there to listen, not to give advice. They do, however, have moral and ethical responsibilities towards the people they talk to. As a matter of principle, Soul City makes sure that there is an effective plan for referral or back-up support for interviewees. This is important in protecting both the researchers and the interviewees.

The creative process

Production of materials is the most costly part of the Soul City process, accounting for approximately 70% of the total budget. This phase is largely in the hands of the creative teams. However, the fact that edutainment is driven by the messages rather than by the drama means that the creative people do not have the degree of autonomy they usually enjoy. The imperative to get it right results in painstaking and often complicated decision-making procedures. Soul Buddyz, for example, is a co-production between Soul City and the SABC Education Unit. Soul City commissions the production company, but SABC Education has joint copyright and its own interests to protect in the development of the programmes. “It is sometimes difficult to know who you’re answerable to, and also to hold your ground as a communications expert in these circumstances,” commented one producer who has extensive experience in working in edutainment in South Africa.

This underlines the need to be very clear about the roles and responsibilities of all the different participants, says Dr Japhet, and also to work hard at building trusting relationships. Soul City involves the creative people as early as possible in the development of a series. Thus, not only do they gain an intimate understanding of what needs to be communicated and how the technical people feel and think, but producers are often able to pick up the phone to discuss a proposed change if they feel a storyline or dramatic device does not work.

Nevertheless, because Soul City’s review process always entails much tinkering with the scripts and ideas of the writers, the production phase is inherently stressful, says Dominique Mabaso, another producer who has worked with the Institute. “Although I strongly believe in the Soul City review process, you can get to the last stage and find out that, actually, the voice isn’t right, and you have to do it all over again. That really does happen.”

“The biggest problem I find with edutainment is that the focus is so enormously on getting the message right, that the original script, which may have been really creative, can get lost. It can so easily become stale, with no story anymore; no flow. It’s very frustrating for scriptwriters. There can be quite a lot of conflict between the message and the creative side,” she adds.

Frequent changes to the script have implications for budgets and timelines, and production companies are usually careful to make allowances for this in their contracts. But if problems crop up later in the production, there can be an issue about who pays, says Ms Mabaso. “The question is whether it’s a mistake on behalf of the production company that should have been picked up earlier, in which case the production company pays. Or is it something basic to the programme that researchers and reviewers should have noticed?”

Soul City recognizes there are many potential pitfalls in translating the messages into high quality edutainment. The project management team therefore keeps in close contact with the production company throughout the process. They review scripts and rough versions of programmes at every stage. And when an issue of special sensitivity is being filmed or recorded, someone from Soul City generally attends the session. This is where trust between the partners really counts, says Dr Japhet. “Creating edutainment is an interactive process, and the final product can be severely compromised by soured relationships between its co-creators.”

Collective decision-making and strong partnerships

Soul City’s senior managers are the “brains trust” of the organization, and are most often the originators of the energy and ideas. However, there is a system of joint decision-making by senior management in close consultation with the rest of the staff.

The Soul City staff are, in effect, the “technical hub” of the mass media campaigns— at the centre of a network of relationships with contractors of all kinds, as well as a variety of partners. The latter include topic experts and specialist organizations working in relevant fields, as well as Soul City’s sponsors and donors. For example, in dealing with the issue of violence against women, Soul City formed a partnership with a national network of organizations working in the field. One of the many benefits was that Soul City audiences had somewhere to turn for practical help if they needed it.

One of Soul City’s most important partnerships, however, is with its media outlets—the SABC and the newspapers. The mass media’s primary interest is reaching large audiences, which is the key to sales and to attracting advertising business on which many organizations depend for revenue. Soul City’s main tasks at the beginning were to learn how the media work and then to convince the media ‘gatekeepers’ that its ideas had mass popular appeal. Its continuing success depends upon nurturing the good relationships it has developed so it can hold its own in the media marketplace against fierce competition from other programme-makers and writers.

Having established relationships with the media has also already proved extremely helpful in raising funds, says Dr Japhet, since publicity for sponsors’ good works and exposure for their brand names are important preoccupations of sponsors and donors.

Taking care of its staff

Staff management is one of the most important but least talked-about issues in development work, says Dr Japhet. Too often nongovernmental organizations are driven by a sense of mission; there are dangers of staff taking on too much and of having unrealistic expectations of themselves and others. This quickly leads to burnout, which, besides causing misery to the individuals affected, undermines the efficiency and effectiveness of the organization.

Helen Starke, Soul City's manager of human resources, trained originally as a social worker and is well aware of the stresses inherent in this kind of work. "We make sure we don't exploit people's sense of commitment, and we aim to make everyone feel valued," she says. Soul City pays competitive salaries and a good deal of attention to the professional development of staff. Everyone has a career plan developed in consultation with the human resources unit, and an annual allowance of R2500 (approximately US\$ 420) earmarked for skills development, which they might spend, for example, on attending a workshop or conference. In addition, every member of staff is entitled to take a course, subject to approval by Soul City, up to the value of R8500 (US\$ 1425), which is subsidized according to the level of income. The lowest paid members of staff are entitled to a 95% subsidy, and the highest paid to 70%. Any additional costs have to be covered by sponsorship.

These entitlements, along with study time, are written into staff members' contracts. In mid-2004, 30 people out of a total staff of 48 were studying, and there were plans to send all staff on a time-management course that three members had attended and found particularly useful. In addition, Soul City has an employee assistance scheme which entitles all staff members to R1000 (US\$ 168) in the event of a family member's death.

But how easy is it to finance such schemes? Very, says Ms Starke. About 80% of Soul City's staff members were disadvantaged under apartheid, and in South Africa today skills development and capacity building are looked on particularly favourably by donors—particularly corporate sponsors.

Employing a human resources staff member is often seen as a luxury by nongovernmental organizations, says Ms Starke. But she believes this opinion is misguided, especially in this kind of work where people find it hard to draw boundaries, and even well-meaning managers can have unrealistic expectations. So, there is a need for someone to be concerned for the welfare of staff. Such a person should be authoritative, well-trained and up to date on legislation and policy issues, she says.

Measures of success

Every series of Soul City is evaluated in detail by independent researchers. Indeed, the series is one of the most thoroughly evaluated communications interventions in the world. Below are some of the key findings from the last two evaluation processes.

- Altogether, Soul City's multimedia campaign reached 16.2 million South Africans (79% of its target audience). This includes 65% of rural people, and 50% of people without any formal education.
- Approximately two thirds of its audience are young people aged between 16 and 24 years.
- 47% of South Africans cited Soul City as their leading source of information on HIV and AIDS on television.
- 45% of 16 to 24-year-olds who had watched, listened to and read Soul City reported safer sexual behaviour, compared to 28% of those who had had no exposure to Soul City.

- Surveys before and after exposure to a Soul City multimedia campaign addressing sexual relationships between young people, violence against women, and HIV and AIDS, showed that young people were less likely to feel they needed to bow to peer pressure regarding sexual matters. The Soul City brand is as well known as Coca Cola among black South Africans. It is perceived as a trusted source of help and information.
- The booklet “Living Positively with HIV and AIDS” reached 38.5% of the adult population; on average, each booklet was seen by three people.
- Globally, very few studies have examined the unit cost of reaching people with mass media campaigns. A unit cost study of Soul City series 4 suggested that imparting knowledge about HIV and AIDS cost US\$ 0.60 per person reached. Stimulating an intention to act on AIDS information cost US\$ 0.70, and actually stimulating behaviour change cost US\$ 0.38. By comparison, a 1997 study in the United States found that the cost per student potentially exposed to a mass media smoking prevention campaign was US\$ 8.
- Soul City products and materials have been used in 14 different countries, including 11 in sub-Saharan Africa. The Institute has been asked to advise countries as diverse as New Zealand, Egypt and Viet Nam on setting up their own media vehicles using the same methodology.

The Community Health Media Trust (CHMT): giving a voice to people living with HIV

When Vuyani Jacobs tested positive for HIV in the early 1990s, he resigned from his job in a Cape Town bank, believing he did not have long to live. One day he was sitting at home bored and lonesome, flicking through channels on the TV when he came across a programme in which a plump, vivacious young woman was talking with others about being HIV-positive. “It was five past six on a Tuesday—I still remember it!” says Mr Jacobs with a broad grin, because it changed his life. “I had had TB and I thought I had full-blown AIDS and that I was dying. I didn’t know what HIV was doing inside my body. On the TV they were talking about having STIs and how to communicate with their partners and such things. Busi, this big woman, was telling of the pain of secrecy and what a relief it was to talk about her HIV status ... For me this was, Wow! I couldn’t wait till the next Tuesday.”

The programme was *Beat It*, the brainchild of two Cape Town men, Jack Lewis and Zackie Achmat, who had realized that although South Africa had one of the most serious epidemics in the world, none of the programmes and articles in the mass media dealing with AIDS spoke directly to people living with the virus.

The year was 1998. Zackie Achmat—himself HIV-positive—had recently started the Treatment Action Campaign with a number of other people, and Jack Lewis was running a video production company called *Idol Pictures*. Together they set up the Community Health Media Trust, a not-for-profit company specifically designed to address issues of concern to people living with HIV, such as their rights, the quality of services, and access to treatment.

“We set out to reach the broadest, most representative layer of people living with HIV and AIDS—which means, inevitably, in South Africa the poorest of the poor, the people in the informal settlements, and working class people,” says Mr Lewis.

Inspired by the example of the AIDS Coalition to Unleash Power (ACT UP) in the United States, the two men intended their programme to have an activist slant. However, they thought that this would make it hard to sell to mainstream broadcasters. So they came up with the original idea of reaching their audience by showing their videos on monitors at taxi ranks and bus shelters, which many millions of people pass through daily. But the idea was not logistically feasible. So, with seed money raised initially from the Ford Foundation, CHMT made some videos and approached broadcasters. As they had predicted, they had a hard time selling their idea, but in the end they had a lucky break with the independent commercial broadcaster, eTV.

The Independent Communications Authority of South Africa (ICASA) stipulates that every broadcaster must devote a certain minimum number of hours to educational programmes and must have a minimum percentage of locally-produced material. Besides being an attractive idea, *Beat It* also represented an opportunity for eTV to fulfil its statutory obligations in these respects.

In 1999 and 2000, eTV broadcast two series of *Beat It* for free. But when CHMT went back with its third series in 2003, the broadcaster asked for a substantial fee to air the programmes. CHMT managed to scrape together the money, but realized the arrangement was not sustainable over the long-term: donors would not look favourably at paying a commercial company for broadcast time. CHMT faced a crisis: there seemed little chance that the national

broadcaster, SABC, would take Beat It. “Our programmes were very political,” explains Mr Lewis. “We were pushing for treatment.”

But in 2003 the political climate changed. The South African Government announced it was to roll out treatment, including antiretrovirals, and the idea of working with the SABC suddenly seemed possible. Jack Lewis approached the national broadcaster, which directed him towards SABC Education, an organization that is only partly-funded by government, but whose main responsibility it is to provide educational programmes free of charge to SABC’s television and radio stations. SABC Education liked CHMT’s ideas and offered to do a co-production, with each partner funding 13 of the 26 proposed episodes. In September 2004, a new series of programmes produced by CHMT was launched on national television. It was targeted at people living with HIV and their families and caregivers.

The programme formula

The new series is called *Siyayinqoba Beat It*. Each 24-minute episode starts with a documentary segment of about 10 minutes that provides background on an AIDS issue. This is watched by the programme presenter, an HIV-positive individual, in the company of a support group of people living with HIV, in the informal setting of someone’s living room. The group members take up the issues raised by the documentary segment, discussing them in the light of their own experiences. “These people are the *crème de la crème* of treatment-literate HIV-positive ordinary South Africans,” says Jack Lewis. “They really know their stuff and they know a fantastic lot about HIV and AIDS. But they are not academic experts. So we have an expert who comes in and talks to them at the end of the programme for about five minutes. We deliberately don’t bring the experts into the main group discussion because we don’t want it to be dominated by them.”

The support group is the same from week to week so that audiences can get to know the different characters and to identify with them. The basic objective of *Siyayinqoba* is to make the science of HIV accessible to ordinary people, who may have little education, by relating it in terms of real life stories. “The nurses tell you how to take your medicine if you have TB, but people like me reflecting on my own experience with TB make it real,” explains Vuyani Jacobs, who is now a member of the programme’s support group and also a director of CHMT.

Busi Maquongo, the plump and bubbly young woman who first inspired Mr Jacobs when he saw her on television, is still a support group member. She lost her nine-month-old baby girl to AIDS. Her story of discovering subsequently that the antiretroviral drug Zidovudine (AZT) could have saved her baby, made a particularly powerful vehicle for exploring the complex issues of preventing mother-to-child transmission, and the tangled politics behind the lack of access to this service in South Africa. Having learned a great deal about mother-to-child transmission and its prevention since that first desperate experience, Mrs Maquongo has since given birth to a healthy baby boy, which she has also talked about on the programme.

“What this formula does is keep the discussion in the vernacular and raise the issues that are of concern to ordinary HIV-positive people and others affected by the epidemic—the partners, the family members, the colleagues and friends,” explains Jack Lewis. “The support group is drawn from as diverse backgrounds as we can get together. So we have a middle-aged coloured man; we have a white gay male, a Zulu woman who speaks real great ‘Zinglish’, which is her language preference, and we have males and females expressing the black experience in South Africa. They represent our target market. They’re all from the lower end of the

Lessons from life

Because it uses real life stories rather than scripted drama to teach the lessons of HIV and AIDS, Siyayinqoba can never be sure in advance how a documentary sequence will turn out. But very often, it is the unexpected element that gives this approach its power and credibility.

There is an episode in the current series which explores the issues around workplace treatment schemes, and which demonstrates this effect particularly well. After extensive research, the filmmakers managed to find Wiseman Gadu, an HIV-positive miner who works four kilometres underground in one of South Africa's deepest gold mines, and is taking antiretroviral drugs supplied by his employer. Mr Gadu was an excellent candidate for filming since he was living openly with the virus and was a key member of a peer education programme in the mines.

The camera crew filmed him at work and at home. While his wife was talking about her involvement with his treatment, an unanticipated, but hugely valuable lesson emerged. She mentioned that at one point her husband had been sharing his drugs with her, since she too is HIV-positive but had no other access to treatment. She said that the pharmacists at the mine clinic had discovered this practice because they counted her husband's pills and questioned him when he returned too soon for a repeat prescription. The couple had been counselled about the ill effects of sharing antiretrovirals, and Mrs Gadu said she now understood that this was wrong.

This unexpected revelation opened the way for the support group to look at some of the difficult, unanswered questions about workplace treatment programmes, such as: how does one person with access to treatment cope with being given the gift of life that may be denied to his or her loved ones at home? What, if any, responsibility should employers have for the wider family of their workers? And what happens if Mr Wiseman loses his job; will he still be able to gain access to treatment for himself?

earnings spectrum—some are without income, some earn R2000 to R3000 a month (US\$ 340 to US\$ 500), and they often live in informal settlements —because this identification element is critical to what we're trying to do.”

In its role as AIDS advocate, Siyayinqoba has featured clients meeting with clinic management to ask why a certain drug or ointment is not available. The government's comprehensive treatment programme announced in 2003 encourages the formation of client committees to monitor what is going on in health facilities. CHMT's stance, says Mr Lewis, “is that we want to support government every step of the way, to get every last drop of ink off the page and into the hospitals.” This depends as much on stimulating demand for treatment by making people aware of their rights and knowledgeable about the medicines as it does on getting the supply side right. Increasing treatment literacy among the general public is therefore a prime objective of the programmes, and treatment issues are addressed in one form or another in almost every episode.

The programme-makers believe too that treatment is the key to dispelling stigma and discrimination, since they argue that these reactions are the direct consequence of the perception of HIV infection as a deadly disease. “When you succeed in breaking the association between HIV and death, then you will automatically see the wall of fear and prejudice crumble,” says Mr Lewis.

Choosing topics, making programmes

As series director, Jack Lewis is responsible for coming up with ideas for topics to start the ball rolling. He relies heavily on AIDS activists drawn from organizations with real networks on the ground. These include the AIDS Consortium in Johannesburg; the AIDS Law Project; Médecins sans Frontières (MSF), which is working with urban and rural communities in the Cape; the clinics and health care workers; and TAC, with its grassroots membership of people living with HIV throughout South Africa. The input from such a diverse range of people at the heart of the AIDS epidemic ensures that the programme is in tune with its current realities and challenges.

Mr Lewis draws up a series of topic proposals which he discusses in workshops with his senior colleagues at CHMT, including Vuyani Jacobs and the two film producers, Hercules Joubert and David Le Page. They decide which are the most promising topics and what kind of stories they might find to illustrate them. They then set out to gather more information, searching the literature and talking to experts in the field, such as academics, medical practitioners, people living with HIV groups, and relevant nongovernmental organizations. CHMT then takes the topic ideas to a meeting with SABC Education, and together the partners brainstorm the messages and how to creatively shape them before drawing up a formal brief for their commissioning editors at SABC television. “As a general principle we try to tell positive stories,” says Mr Lewis, “because we don’t think negativism helps as a way of communicating.”

SABC Education has editorial control, and Futhi Ngubane, the project manager, has a fine line to walk between a number of different interest groups. She must make sure that proposed programmes are in line with the national education curriculum and with the SABC’s constitution, and that they satisfy ICASA’s requirements, as well as being sensitive to the concerns of the National Association of People Living with HIV/AIDS and the national HIV/AIDS directorate. She must also ensure that programmes are attractive to audiences, which is very important to the broadcaster in selling advertising.

Since SABC Education is independent, it does not have to toe a government party line. But since it understands that the programmes it is making with CHMT are sensitive and sometimes controversial, it recognizes that good background research is essential. “You have to know the facts to be able to stand your ground,” says the SABC’s Simphiwe Ngcobo, who has worked closely with CHMT. He adds that the credibility of the programmes hangs on the accuracy of the science.

Once topics have been given the go-ahead, CHMT’s two producers, Hercules Joubert and David Le Page, start doing their own detailed research and look for people whose stories can be used to personalize the issues. This is an extremely sensitive process, since the effect of appearing on nationwide television can be dramatic, even for people who are already open about their positive status. Again, a range of HIV and AIDS service organizations and nongovernmental organizations are involved in identifying possible candidates and making the initial contacts. “We never just turn up at people’s front doors with a camera,” says Mr Joubert. The idea of TV is generally attractive to people, he says. But once they become fully aware of the implications, most decline to take part in the programmes. Sometimes prospective candidates say they would be willing to participate as long as their identity is hidden, but this is unacceptable to Siyayinqoba, since hiding people’s identities promotes stigma and shame.

Before they proceed, film crews are required to obtain signed release forms—that is, formal letters of acknowledgement that subjects have been informed about, and have understood, the nature and purpose of filming, and that they are prepared to participate. “But I think there are hard calls here,” muses Jack Lewis. “When you’re doing AIDS media, you’re pushing at the boundaries of openness, and this is an issue that continually comes up: what can you do for the people whose lives are being exposed through the programme? Not a lot, to be honest. We rely on people having a thorough understanding of what it is we are asking them to do. We really brief them very carefully.”

CHMT also works in close cooperation with the LifeLine AIDS helpline, whose contact details it gives at the end of each programme.

Too close for comfort?

Hercules Joubert came to CHMT from a job in talk radio in Cape Town, where he met and was inspired by Zackie Achmat of TAC. Mr Joubert had no formal training in HIV, but a strong personal interest as a member of the gay community. He says that a person has to be motivated by passion rather than a desire for career advancement to do the kind of job he is doing, which is very different from routine journalism. One of the things he finds particularly difficult as a media professional, despite his journalistic background, is setting the boundaries of involvement with his subjects, and sticking to them. The needs and expectations of the people he works with can be stressful, and sometimes he finds himself offering help in a personal capacity.

Vuyani Jacobs has also found himself getting personally involved in helping people he was working with on programmes. “Sometimes we become like social workers,” he says. “We don’t work with actors, we work with real people—we can’t just leave them when we find them in need. It is stressful. I get very angry because I see the system failing people—failing me, failing everyone. I see all the laws and the policies that are there, but they are not yet reaching the people. It gives me determination, but it gives me a lot of frustration.”

CHMT does not have a formal procedure for protecting or debriefing its staff on the frontline, but the organization is still small enough to feel like a family and, by and large, people are able to get the support they need from their colleagues.

Throughout the making of the current series, a producer from SABC television has worked closely with the CHMT production crew. This has encouraged the broadcaster’s commitment to the programmes, as well as ensuring quality. “They monitor the technical level of the production and criticize if we are not up to standard,” says Jack Lewis. “I certainly think it has put pressure on us to raise our game in terms of production values—and that is very good. But there has been no undue interference in the subject matter that we are dealing with.”

Wider markets for the materials

The lively, fast-paced discussion format of the television programmes allows many issues to be raised, but not to be tackled in any great depth. In order to make the most of the rich material it gathers, CHMT also uses it to create videos for training purposes. These are produced as a series, with each video covering a single topic in detail. The human rights material, for example, is spread across several weeks in the broadcast programmes, but in the training video it has been pulled out of the different programmes and packaged together. A typical one hour’s training session has about 20 minutes of information, followed by 40 minutes of questions and facilitated discussion.

To allow the videos to be used by trainers who may have limited knowledge of HIV and AIDS, CHMT has produced facilitators' notes to accompany them. The training videos are sold at a nominal price, and have attracted a wide range of customers, from nongovernmental organizations and community groups, to private companies and "parastatals" such as the police.

By mid-2004, approximately 1000 training sets had been sold, and CHMT is now in the process of updating the series and preparing versions in other African languages, including Xhosa and Zulu. As a result of a developing relationship with *Medécins sans Frontières* in Nairobi, Kenya, a Swahili version is being discussed for use in East Africa.

In addition, CHMT has become a supplier of material to the Mindset Health Channel, a satellite broadcast channel launched officially in 2004 to deliver free education to patients and health-care workers in clinics and hospitals in South Africa. The channel is a public-private partnership between Mindset Network (run by the Liberty Life and Mandela Foundations), the Department of Health, and Sentech, a company that operates transmission systems for South Africa's broadcasters. The channel receives support from USAID and a number of other donors. It aims to be in all 4000 public health-care facilities in South Africa within five years, and will broadcast directly into the waiting areas and staff rooms. The Health Channel uses the latest technology to allow programmes to be stored on site, so that health-care workers can view them on demand. Broadcasts are supported also by printed materials and web-based information.

"We're very excited about this," says Jack Lewis, "because it means that beyond SABC we have an ongoing outlet for our material that is aimed very much at our target market—people who, ideally, know or suspect they have HIV, as well as their partners, family, friends and caregivers."

The Health Channel was piloted in 48 clinics in nine provinces in 2003, and Ann Lamont, chief executive of Mindset Network commented, "At one of our pilot sites we have had reports that patients have shown an increased willingness to be tested and to go for counselling as a result of the programming. This is the kind of response we're aiming for on a mass scale around the country."

Only a certain number of people will be reached by any one medium, and not every medium is an appropriate vehicle for some messages. So "the best way to make an impact with an idea is to go the multimedia route—television, radio, print, websites..."

Simphiwe Ngcobo

There are also plans for *Siyayinqoba* to be turned into a radio series, and SABC Education and CHMT are currently working together on the details.

Partnership with the SABC

At the conclusion of negotiations in 2003, CHMT and SABC Education drew up a Memorandum of Understanding that clearly sets down the ground rules for their partnership, and the roles and contributions of the various participants. The people who work together most closely on *Siyayinqoba* have developed a good deal of trust and team spirit. However there are inherent stresses in a partnership between two such different sized entities: CHMT is a very small organization with precarious financial foundations, and a handful of people working out of offices in a little house in a residential suburb of Cape Town. SABC Education, on the other

hand, is an established organization with many staff, regular funding, good resources and office space alongside the national broadcaster in a modern tower block in Johannesburg.

CHMT became acutely aware of the implications of this asymmetry when negotiating the initial contract. At the time it was struggling to survive. It had raised the funds for a new series of *Beat It* on the understanding that it had eTV on board as a broadcaster. But eTV changed the terms after funding came through, and CHMT could neither pay the fees the broadcaster was asking for broadcast time, nor justify seeking extra funding for this purpose from its supporters. “We were in a very, very difficult position—to such an extent that I ended up getting a teaching job at the University of the Western Cape,” says Jack Lewis. “In effect, we had contracts with our donors that should have been completed in 2003 but that we just couldn’t complete. At one point, it looked like we might have to return the money.”

With its back to the wall, CHMT could not afford the time or legal advice to finesse the contract and had, in effect, to take a leap of faith in signing the terms that were put before it by the SABC. Even then, its problems were not over. With final editorial control in the hands of its partner, CHMT had to wait for a green light from SABC Education before it could go out and make the programmes that were already long overdue, according to its donors. The wait, during which its staff members were unable to work, cost money the organization did not have and CHMT had to draw on its reserves to survive. “Most of the people at CHMT are on limited contracts, if they don’t work, they don’t earn,” says Jack Lewis. “We just don’t have the same ability as the SABC to absorb delays.”

This is not an ongoing problem, however. Once the partnership was up and running, and production of the series had begun, things started to go more smoothly, although CHMT finds the additional administrative work puts pressure on its small staff team and limited funds. A project management team has been set up with members from SABC Education and CHMT. The team meets regularly and decision-making is relatively streamlined. CHMT management hopes that its achievements in face of difficult odds will be recognized by its donors and will help to restore confidence.

“I don’t think it’s ever going to be easy when you have entities of different sizes working together,” comments Jack Lewis. “I don’t think there are any easy ways around it. But I would say that the more you are aware of the possible difficulties, and the more donors recognize the fact that obstacles will arise over which you have no control, the easier it will be for small NGOs to work effectively.”

Measuring the impact

Before it started working with the SABC, CHMT had almost no budget for marketing or promoting its programmes. It had to rely on word of mouth to bring in audiences for the *Beat It* series. This put the organization in a double bind: programme makers need good audience figures to attract funders, but they also need funds to promote their programmes in order to bring in the viewers. The situation is better now that CHMT is in partnership with SABC Education. However, Jack Lewis uses every opportunity to push for more promotion of *Siyayinqoba* by the national broadcasters.

With previous *Beat It* series, CHMT did not have the funds for systematic evaluation either. Official television audience surveys show that in 2002 the programmes were reaching between 150 000 and 450 000 adult viewers per episode—or 8% to 23% of the potential audience. Otherwise, CHMT relied on anecdotal evidence to gauge the impact of its programmes.

“I travel on the train,” says Vuyani Jacobs, “and up till today I still find people coming up to me and saying, ‘You know what? You made a very big difference to my life.’ One guy told me he’d resigned from his job when he got his diagnosis, but he had taken back his notice after hearing my story on TV. Another guy told me he’d run away from home because he didn’t know how to talk about condoms with his partner. But he said, ‘You’ve got the same thing, and I now know what I must do.’ That’s the kind of feedback I get,” says Mr Jacobs, “on the trains, in the *shebeens*, [informal bars] everywhere I go.”

The first official audience ratings of the new series indicate that Siyayinqoba is reaching an average of about 30% of the potential viewers, with audiences ranging between 430 000 and 600 000 people each week. And there is also evidence of the programme’s impact from the LifeLine Counselling Centre. According to a report for October 2004, the AIDS helpline received a large number of calls on the 14th (4134), on the 21st (4587) and on the 28th (4220). These dates fell on Thursdays, the days on which Siyayinqoba is broadcast. At the end of each broadcast the AIDS helpline number is shown on the screen. The service also had very high call rates on the 22nd (4427) and the 23rd (4163), the days immediately following a Siyayinqoba broadcast focused on antiretroviral treatment. LifeLine concluded its report with a recommendation that the Department of Health make a special effort to provide public information on the topic through print and broadcast media.

In addition to the data from LifeLine and the official audience surveys, CHMT has been getting feedback from its viewers in the form of e-mails to its website (see box on page xx). But Beat It has also had an obvious impact on those who take part in the programmes. This is important, given the fact that the programme aims not just to reach out to people with HIV or AIDS, but to give them a platform to speak for themselves.

“I always used to talk about how Beat It changed my life, and then here I was, being recruited to be a presenter on the same programme!”, laughs Vuyani. “I just had to say, I am Vuyani Jacobs and I am living with HIV, and this is our programme, for us and all of our friends. The beautiful thing was that I was able to say things that I really believed in. I know how wonderful it is to be able to sit in your own home and have someone talking to you about your own pain and your own fears.”

For Busi Maquongo, it has been especially important to have the chance to educate and save other mothers and babies from going through what she experienced. “I was so hurt about my baby girl,” she says. “Before, I knew very little about HIV—and most of it wasn’t even true. I couldn’t see any sign of HIV on my skin, so I believed I was fine. The same thing happens with other women—they look at themselves and if there’s no sign, they think it means they don’t have HIV. And then they pass the virus on to their children. I didn’t want this to continue, so I had to do something. I don’t remember another TV programme in South Africa where HIV-positive people stand up and say, ‘Here we are! We look this good, but we still live with HIV, and we can still infect other people, so let’s do this and this to prevent it.’”

Ms Maquongo found that taking part in the programme was the easiest way to be open about her status. It saved her the ordeal of disclosing to family, friends and neighbours one by one and, she believes, it helped greatly in encouraging a positive response. “I knew that people with HIV were being chased away from their families and neglected by the community—you see things like that. But with me that never happened. I think they all accepted me because I appeared very powerful in the TV programme. I was standing up for the rights of people living with HIV and AIDS and I was very strong.”

John Vollenhoven, a middle-aged man affectionately known as Uncle John, has found that being part of the support group is empowering in a number of ways too. He sees himself as a role model for the coloured Afrikaans-speaking community, where HIV-positive people are particularly isolated by stigma and fear of AIDS. A former long-distance truck driver, Mr Vollenhoven lost his job after 21 years when illness began to keep him home from work regularly.

Now he works with a community organization developing organic vegetable gardens, a passion he has shared with viewers of Beat It. He is a strong advocate of openness, having found it an immense relief to disclose his status after five years of living with the secret of HIV. Today he works as a motivational speaker, going out to businesses, factories, schools, to talk about HIV and AIDS. Apart from giving him the welcome opportunity to reach out to others with HIV, John Vollenhoven also values being a member of the Beat It support group for what it has taught him. He says he used to be homophobic, but his attitudes have changed since he has got to know the gay men with whom he shares the platform.

What do the viewers say?

The following e-mails sent to CHMT give a brief glimpse of what the viewers are saying about about Siyayinqoba Beat It.

"I am in Swaziland, but I listen to the programme on Ligwalagwala FM, It's a very good programme, helpful and constructive, I wish we could have one like that here in Swaziland."

Futhile NMkhwanazi

"I like your show; just keep it up!!!"

Sifiso Ndlovu

"Hi everyone, I feel Siyayinqoba is the greatest show above them all... I just feel that it gives HIV-positive people all the support they need. And what I also like about the show is that most people in the programme are also victims of the virus and there's no better person to advise than one who knows how you feel, who has been in the same situation. So big 'up' to Siyayinqoba and the hosting crew."

Ntombi

"I watched the show for the first time this week. Very good show you guys have going, and also Anthony is very HANDSOME!!!! Will continue watching. Thanks."

Bradley

"Hi; my name is Mitchelle Mmathabo. I am living with HIV and I have been living with the virus for 7 years now... I got it from my baby's father who was abusive to me. I was 14 years of age then and I fell pregnant at 16 years. The day I delivered my baby I also learned that I was infected with HIV. It was a struggle in the beginning, people died in front of my eyes; my friends died..., members of the support group died and it felt really bad because I could see myself following. I make the least case scenario when it comes to discrimination because I always had people behind me; friends, family and colleagues.

I received most of my support from my mother. The painful part of HIV comes when you lose someone you love. It is not easy for me to go back where I have worked and trained because I will expect to see faces I use to see, people I have laughed with and lived with... it hurts... But the lesson I have personally learned is that we all need to grow up, we all need to wake up and smell the coffee, we all need to stand up and fight... we need to love and we need oneness... then we will conquer this virus.



“I was a regular viewer of Beat It when it started, but now I am not able due to the time it is set for; I am mostly at work when it is on. But nevertheless, I am impressed with seeing the improvements that you have done on the show. I think it is important that such shows are on the tele for people like me and the rest of the PWAs, but also for the people behind the PWAs and those opposing and discriminating [against] us too. I like the way all languages are spoken on the show because we are a diverse nation. Well, thank you to the brains behind the show, you have shown your most love and support to HIV-infected people out there in more than one way ... We will get there, no matter what ... Thank you and good night.”

Mitchelle Mmathabo Mabunda

The national broadcaster has been impressed and pleasantly surprised by the impact of Siyayinqoba Beat It so far, and SABC Education is considering a second series of the programme, says Jack Lewis.

Takalani Sesame: big issues for small children

In 1969 Sesame Street, a television programme aimed at fostering the intellectual, cultural and emotional development of pre-school children, was launched in the United States. The action revolved around the fictional street, where a cast of ‘Muppet’ characters interacted with children and adults. The programme achieved swift popularity at home and over the years, has developed a worldwide reputation. Sesame Street has been broadcast in various adaptations in 120 countries and is one of the most successful and widely researched edutainment initiatives of all time.

The programme first came to South Africa in 1996. Initially, material produced in the United States was dubbed into several local languages for broadcasting to South African audiences. Evaluation showed that Sesame Street was successful in reaching children and in raising awareness. But there were formidable challenges in addressing children from such a diverse range of cultures and backgrounds. Therefore, the South African Department of Education—which had a strong sense of mission and clear goals in developing its Early Childhood Education services—was keen to have the programmes created and produced locally.

In 1997, USAID provided Sesame Workshop (the US-based creator of Sesame Street) with a grant to develop South Africa’s own version of the programme. Intensive negotiations between the Department of Education, Sesame Workshop, and USAID followed, in which issues of copyright, decision-making, editorial control of content and treatment, and the development of local Muppet characters, were hammered out, and in July 2000, Takalani Sesame was launched on television.

The Takalani partnership

Sesame Workshop is a not-for-profit educational organization that works in cooperation with broadcasters in the United States, including the Public Broadcasting Service (PBS), to air its programmes there. When working abroad, a typical way of working is to create public-private partnerships which include a corporate sponsor and a local broadcaster. South Africa is unique in having the Department of Education as a formal partner, and one with a good deal of influence. However, post-apartheid South Africa was a high priority for aid from the United

States, which was especially interested in supporting education initiatives aimed at addressing the inequalities fostered by apartheid. USAID was therefore prepared to support the development of a local adaptation of Sesame Street in South Africa. Sesame Workshop secured corporate sponsorship from Sanlam, one of the oldest established financial services groups in South Africa, and entered into an agreement with the SABC to broadcast Takalani Sesame.

Managing a partnership between five such powerful organizations, each with its own agenda and interest in the project, is not always easy. “It’s like a marriage,” comments Charles Owen, head of children’s programming at SABC. “You really have to work at it, and decide what to do if there is a deadlock.” At the helm is a Project Team, which works out of offices at SABC headquarters in Johannesburg and is responsible for liaison between the five partners, as well as for overseeing all components of the production process.

The SABC Education unit, which works closely with the Department of Education and has its finger on the pulse of children’s needs and rights in South Africa, has a good deal of editorial control in making the programmes. However, Sesame Workshop remains in overall control of the creative process: it holds the copyright in all Takalani Sesame materials, and must give final agreement to decisions made by its South African partners.

A multimedia model

Takalani Sesame’s audience is pre-school children aged between three and seven years and their caregivers. The programmes are targeted especially at the population disadvantaged by apartheid—the seven out of eight children who have no exposure to Early Childhood Development (ECD) services. In the United States and everywhere else, Sesame Street is broadcast on television only. But in South Africa, 30% of homes still do not have television, so a radio version of Takalani Sesame and an educational outreach initiative were launched.

Takalani works from year to year, making about 104 television and 100 radio programmes in each series. Typically, half the programmes are adaptations of material that originates in the United States, while the other half use locally-generated material and feature a cast of South African Muppets made especially for Takalani in the United States. The intention is to increase the local content incrementally. The 30-minute television programmes are broadcast daily on two SABC channels, and the 12-minute radio programmes go out three times a week in four different language versions. On the basis of educational research which shows the value of repetition in reinforcing learning messages, programmes are repeated twice in a month, and six times over a period of a year.

The objective of all Takalani Sesame programmes is to encourage children to develop self-esteem, to respect and appreciate others, and to develop basic skills with letters and numbers, as well as a life-long love of learning. As a general principle, the programmes try to teach by example, showing characters doing what one would want children to do, rather than relying on verbal messages about what not to do.

In addition to television and radio, the outreach component is designed to deepen the educational impact of the broadcasts through the use of printed materials, videos, tapes, and web-based information.

HIV and AIDS on the agenda

“Takalani Sesame is the most ambitious project outside the US,” says Gloria Britain, who heads the Project Office in Johannesburg. “No other country version has pushed at the boundaries of the United States model quite as much as South Africa.” Not only has Takalani pioneered the use of radio, but in September 2002 it became the first Sesame project to tackle the issue of HIV and AIDS.

South Africa has the largest number of people living with HIV of any country in the world—around 5 million in 2004. Nearly 2000 people a day die of AIDS-related diseases, most of them at home. Up to one million children have been orphaned by the epidemic. With HIV and AIDS being such a present and powerful force in people’s lives, Takalani’s South African partners believed they could not ignore it in their programmes. Indeed, Takalani offered an opportunity to help small children cope with the many confusing issues that AIDS raises in their own lives.

From the beginning, Sesame Workshop has aimed to meet the critical needs of its target audiences by addressing issues of special relevance to them. However, before Takalani, the organization had never addressed the issue of HIV and AIDS. Doing so in a way that would be appropriate for young children in South Africa represented an enormous challenge. Senior staff from Sesame Workshop flew to Johannesburg to consult with the partners and a range of expert advisers, including creative people, about how to go about it. The big questions were: what kind of characters would best represent the issues? Should the HIV-positive character be a human or a Muppet? If it was a Muppet, how could it be made ‘real’ for children? How do you explain to a child that a Muppet can have HIV or AIDS? There was debate, too, about how to position HIV and AIDS in the broader context of South African issues: to what extent it should be implicit and explicit in messages.

Eventually it was agreed that the HIV-positive individual should be a Muppet, and in September 2002 a five-year-old girl character with golden fur called Kami³ joined the show (see box below). Her primary role is to humanize the epidemic and dispel the stigma that people with HIV or AIDS must face, and to open discussion about issues such as coping with illness and loss.

Kami’s arrival on the scene was welcomed in South Africa, but caused some controversy in the United States. A small group of Republican congressmen sent a letter to the president of the Public Broadcasting Service that airs Sesame Street. The letter protested that plans to introduce a similar HIV-positive character in the United States in due course were inappropriate, given the age of the audience. They hinted that such a move might threaten public funding of PBS. The letter was widely condemned, and Kami has gained an international reputation, although she is still the only Muppet character in the Sesame family who is HIV-positive.

³ The name Kami is derived from the word “kamogelo”, which means “acceptance” and/or “welcome” in several South African languages, including isiZulu, Sepedi, Sesotho, and Setswana.

Who is Kami?

Sesame Workshop has a “Character Bible” that describes in minute detail every Muppet in its cast list, and their relationships with each other. This is the product of lengthy research and debate, and is one of the main reference documents for the writers and directors of programmes. Kami’s entry in the Character Bible describes her as a 5-year-old orphan living with HIV whose mother died recently of AIDS. She is rather beautiful, with big eyes and long eyelashes.

In order to challenge the stereotype of someone with HIV being skinny, Kami is well-shaped. She loves food, particularly healthy food, and is aware of the importance of exercise. She usually wears blue jeans, has a red ribbon in her hair, and wears a necklace of remembrance, made for her by her mother. Among her treasures are a memory box that she and her mother made together, a handmade rag doll and a scarf that belonged to her mother, and a scrapbook. As far as her character is concerned, Kami:

- * is emotionally and intellectually intelligent and, largely due to life experience, displays wisdom and insight beyond what would be expected from a 5-year-old;
- * is affectionate, and has a lot of empathy for others. People feel comfortable talking to her;
- * is articulate and literate. She can read and write at basic levels and enjoys practicing these skills;
- * has a store of accurate information about the world, especially about HIV and AIDS;
- * is somewhat reserved and tends to observe. But she opens up easily and enthusiastically when approached by someone;
- * has a poetic world view and is a natural story-teller;
- * is very good at impersonations;
- * has high self-esteem and is very resilient, largely due to the fact that her mother was very loving and caring;
- * is incredibly helpful, loves to have fun, but tires easily because of her illness;
- * loves nature because she and her mother lived in a rural home;
- * sometimes becomes frustrated because of the limitations imposed by her illness;
- * frequently refers to the past and the ways her mother did things.

Kami made her debut at Groote Schuur hospital, one of the few centres at the time to be offering antiretroviral treatment to children. Giving her a hug, South Africa’s Education Minister at the time, Kader Asmal, said, “Education is the only socially acceptable vaccine available to our people and represents our only hope to save our nation. We can’t continue to have HIV-positive children isolated, demonized, victimized. We want to make sure all our children are comfortable.” - ‘Tough pigs’ news extra – article by Brendan Boyle, Reuters News Agency

In keeping with its principle of modelling desired behaviour and avoiding negative images, a scene involving Kami will show caring, compassionate behaviour in dealing with some of the issues around HIV and AIDS. For example, if someone is bleeding, it would show characters taking the appropriate steps in a kindly fashion. And although it might present a scenario in which Kami is sad because other children do not want to play with her because of her HIV status, it would not depict children as teasing or victimizing her.

In 2004, a special radio series was made with a focus on HIV and AIDS. “Story time with Kami” was a 26-episode series, and scriptwriters from the different language stations came together in a workshop at which they identified traditional stories that could be used as vehicles for the messages.

Before Kami joined Takalani, a series of studies (formative research) were commissioned to find out about children's knowledge and perceptions of HIV and AIDS, and to provide a baseline for measuring the impact of the programmes.

Choosing topics, developing messages

Each new season of programme-making starts with a Content Seminar. This is an extremely intense process that typically stretches over two days and involves the Takalani Project Team, Sesame Workshop, SABC and the Department of Education, as well as the creative and research teams with whom they will work, and resource people from a wide range of fields, such as education, child development, health, nutrition, and language. The Department of Education stipulates that Takalani Sesame must be in line with the national curriculum, so this provides the framework for the content discussions.

The main purposes of the seminar are:

- to introduce everyone who will be involved in making the programmes to the Takalani Project, its objectives, philosophy and working practices;
- to share specialist information and expertise through presentations and discussion;
- through group discussion, to identify and define the target audiences, the messages, and the best way to use the different media.

The Content Seminar results in key documents being prepared by the Project Team to give the production people the information they need to make the programmes. These set out in detail the educational objectives, the topics and messages, and guidelines for presenting the facts. In addition, a production brief is put together by Sesame Workshop and given to the production teams, and a research brief is drawn up to guide the research process.

The Content Seminar provides an opportunity for organizations and institutions active in the field to share their thinking and the latest developments about the epidemic. These organizations have stressed the importance of differentiating between HIV, the infection, and AIDS as a potentially terminal condition. Making a distinction between the two stages encourages a more focused and effective response. It allows for messages to be better targeted and interventions more finely tuned to people's needs.

Solid foundations: research

As with Soul City, Takalani Sesame's programmes are based on a foundation of meticulous research. This is conducted to assess needs and to test materials as they are being developed, as well as to assess the impact of programmes after they have been launched. A Takalani Project Research Committee drives the process. The Committee has a representative from each of the partners—the Department of Education, SABC and Sesame Workshop—each with something unique to contribute in terms of knowledge and experience. Through the Committee, the Takalani Project commissions research from service providers. Again this is a demanding process that frequently pushes at the boundaries of what has been done before in South Africa and involves steep learning curves for everyone.

The Takalani Project sees the service providers as partners and likes to work closely with them, especially at key stages such as the design and development of research instruments, planning of fieldwork and analysis of the data. Furthermore, it expects researchers to tap into its considerable and growing fund of knowledge about children’s programming, broadcasting and early childhood development services.

For many research groups this is a new way of working, and managing the relationship takes a great deal of sensitivity and diplomacy. Helene Perold is Research Coordinator, and directly answerable to the Research Committee. “The best work gets done when there’s really good interaction between the different participants at all levels of the process,” she says. Since there is a strong tendency for professional people to guard their territory and independence jealously, the process of reaching agreement about the goals and methodology of the commissioned research is an important foundation for each of the Project’s studies.

To manage such tendencies effectively, it is necessary first to impress upon research companies that teamwork is expected, and then to have forums for regular interaction between all participants, says Ms Perold. “Researchers must not be given the impression that they can work on their own, simply going off with a brief and coming back with a report.” However, she warns, this does have implications for the budget. Unless contractors are sure they are going to be compensated for the time it really does take to work with a big ‘machine’, they are going to resist being drawn into a cumbersome process.

Even without the demands of teamwork, says Ms Perold, the kind of painstaking and sensitive research Takalani requires is very expensive—especially when it is conducted in rural areas where distances are often large and communications poor. It may be hard, or even impossible, to make any advance arrangements. “We mostly work with a fixed budget, and we are now much more realistic about what can be achieved with a limited amount of money.”

The research process starts once Takalani has decided on topics for the new season. The Research Committee draws up a research brief, which is put out to tender. The group which is awarded the contract has to design research instruments in accordance with the brief. These are reviewed by the Takalani Project team and refined according to feedback. Getting it right can involve several rounds of review and refinement, and it is this stage that often causes friction, says Helene Perold. Research groups can easily see it as a challenge to their independence and professional expertise.

Once agreed by the Takalani Research Committee, the research instruments are translated into the appropriate languages, tested in the field and final revisions are made if need be. Then the fieldworkers are trained to use them. Recruiting suitable people to carry out the fieldwork is a major challenge. Most people doing research for broadcasting in South Africa are trained and skilled in commercial market research techniques. These are mostly relevant to the

“You look at researchers that another agency might employ, for example. They may have a master’s degree, but they don’t know how to relate to children. And they don’t want to sit on the floor! Simple things like that. For me it’s vital that the people I work with are child-friendly and that they are interested in children and their lives.

Then obviously you have to have a pretty sharp mind... And you have to keep the research questions in your head, and to have a perception of what’s going to happen to the information you are collecting—that at some point, someone will have to create a script out of it.”

Glynis Clacherty, researcher

entertainment programmes that account for 80% of broadcast time. There is poor understanding of the educational role of broadcasting, and a few skills in social, cognitive or behavioural research needed to provide the basis for educational programmes.

A good researcher in this field, says Helene Perold, needs to have intellectual curiosity, empathy, and be familiar with the cultural, language, class and race complexities of South African society. The country has 11 official languages, and a huge diversity of lifestyles, circumstances and world views. Finding people who can work with and make sense of such diversity is not easy. Researchers not only need to *understand* the ‘reality’ of the people they are studying, but to be able to *translate* it into an idiom that is meaningful to the people who have to use the research findings—the Takalani Project Team initially, and then the programme makers. The creative people, in turn, have to be able to translate the findings back into programmes that speak to the target audience. These are the challenges of research for educational media, says Helene Perold, and there are very many points at which misunderstanding can occur, and information and subtleties get lost.

In addition to being sharp and sensitive, researchers also need to be fully aware of the ethical issues associated with their work, and know how to handle them. The three basic ethical principles governing Takalani’s research are:

- * **the principle of “freedom”**, this encompasses: voluntary, informed consent to participate (when working with children, such consent must be obtained from parents or guardians); freedom of participants to withdraw from research at any time; and protection of participants’ identity;
- * **the principle of “causing no harm”** to the research participants or any other person or group; and
- * **the principle of “doing good”** i.e. the research should have a purpose, and clearly be beneficial.

“Especially with sensitive issues like HIV and AIDS, you never isolate a group of people within an organization. So, if you’re doing research among mine workers, who tend to be black men working underground, you make sure you go and interview people all the way up to the managing director as well. Because if you don’t, you’re giving messages just in who you’re singling out for attention. In a school setting, for instance, you’d never ask to talk just to the orphaned children.”

Renee Bubb, researcher

When working with children, researchers are required to obtain voluntary, informed consent from parents or guardians, and they are expected to protect the anonymity of participants. In addition, says Helene Perold, they need to take responsibility for the effect the research exercise may have on participants—especially when the topics being investigated are sensitive. When research was being conducted on HIV and AIDS, for example, a special “kit” was developed, which took the form of an inventory of local organizations and resources to which people in distress or needing professional advice could be referred for support and guidance.

Looking after the researchers themselves is equally important. Fieldwork is often emotionally and physically demanding, and thorough briefing and debriefing sessions are crucial. Fieldworkers need to be supported and kept in touch at all times, says Ms Perold.

She says that one particularly challenging aspect of the Takalani Sesame research process is the analysis and interpretation of the data. While research teams are able to lay out their data collection methods in great detail, they tend to take the data *analysis* for granted and to underestimate the complexity of making sense of information collected in deep rural contexts. Once again, the different perspectives of the partners on the Research Committee can make researchers aware of their assumptions and can offer alternative interpretations of findings. “Involving fieldworkers in data interpretation can also help bridge the different worlds in which researchers of different racial and cultural backgrounds are located,” says Helene Perold.

A researcher speaks

Glynis Clacherty’s research agency was commissioned to gather material for the development of Takalani’s HIV and AIDS curriculum and television programmes dealing with the epidemic.

“For this research we talked to four different groups,” says Ms Clacherty. “We talked to children aged between three and seven years who were personally affected by HIV, either being positive themselves, or orphaned. We talked to caregivers of young children who were affected. And we talked to HIV-positive mothers and fathers of young children. Then we talked to a range of children generally, to get some understanding of their knowledge of HIV and AIDS.

“With all except the last group, we worked with children who were part of an existing support programme because they had been through distressing experiences, and we needed to make sure there was the possibility of follow-up. That has always been one of our principles when researching HIV and AIDS.

“Confidentiality is always an issue when doing research around this subject. In one community we actually ran the research with HIV-positive adults in the hospital rather than going to someone’s home. The NGO we worked through had discussed it with the support group and they said they did not want us to come to their houses as people would say: why are all those people visiting you? That’s how communities work. If you are going to the clinic on Wednesday, then you’ve got HIV, and if you go on a Thursday then you’ve been raped! So as a researcher, you have to be very careful and listen to people’s requests about how to protect them.

“When working with the little children, we structured the research so as to create some kind of emotional distance for them. We had hypothetical figures; ‘silhouette’ people. The children used them to make up families, and then they talked about them in the third person. What it did was to create an emotional distance where children could say: ‘this little boy can’t go and play because he always has to go home—he’s worried about his mother as she might need a drink of water’. We found children as young as six years old who had been looking after parents on their own, which is just heartbreaking. But the children were able to talk in a way that was emotionally protective for them, because they had these little pretend families. And you got all the details about how this hypothetical person felt, which told you how the actual child was feeling.”

The researchers worked with the smallest children in groups of around five. “It’s about all you can manage with little ones because they go off in all directions,” explains Ms Clacherty. “It’s almost like doing individual interviews, because children that age can’t have discussions. But there’s a protective dynamic in being part of a group.”

The assignment involved three researchers, all of whom knew how to relate to children in a warm, empathetic way, she says. “Two of them had worked as interpreters in a trauma counselling situation with a psychologist, so they weren’t thrown by sad stories. They’re the best people to be working in these kind of situations. They are quite highly skilled—but they do need debriefing fairly frequently. I tend to train up researchers myself, and I’ve had contact with the trauma centre, so I keep my eyes open for likely candidates from there.”



Did Ms Clacherty's research agency know exactly what it needed to find out? "Yes, Takalani gives a very clear brief," she says. "They were asking: how can we create a programme that will help affected people to talk about HIV within the family? So we wanted to know what was the dynamic in a household where people were HIV-positive. What age did families think young children should be told? What were their fears—the things they struggled with? And how did they think the media could help? We had some wonderful discussions about television with parents who were HIV-positive. Just recently they had been screening a Soul Buddyz episode where a mother had died. Two of the children in different groups had watched this and that really got the discussion going.

"We talked to some teenagers who were looking after orphans. And also some old wrinkled grannies, some of whom were looking after six or seven orphaned grandchildren. We asked them if they talked about HIV or AIDS in the family? I'll never forget one who said to me, 'the children are often sad, and they think that we don't love them because we can't talk about these things, but we do love them'. So, they talked about their struggles, and how to support children who have been bereaved.

"Then we looked at the children's knowledge about HIV and AIDS. We had an observer and a recorder working together. The recorder taped the children's responses to the questions, while the observer was looking at body language and trying to pick up other clues about their understanding and knowledge."

Ms Clacherty says it is important to leave time at the end of the research period to answer the questions of the interviewees. "As researchers you have your need to gather data, but you have to be aware that the people you're asking to open up to you have needs too, and you can't just walk away without giving them anything. Often they're scared that they may be HIV-infected, or wonder what will happen to them if they are.

"This wasn't necessary with the little children. But with the older children or adults the researcher always knew she would need to leave an hour or so at the end, because they would be desperate to ask questions. In fact, for these kind of occasions I make sure the researchers have some basic facts at their fingertips so that they have some answers."

Making programmes

Following the Content Seminar, the production companies contracted to make the television and radio programmes are given a detailed production brief drawn up by the Takalani Project Team. Their first task is to develop a treatment brief which describes their ideas for translating the messages into engaging television and radio programmes. The treatment briefs are extensively reviewed by all the Takalani partners, and refined in the light of feedback. Scripts are written and go through the same process. Then programme ideas are pre-tested with the target audience before being given approval for production.

Both television and radio production companies work under the close direction of executive producers and other senior editors from SABC Education and Sesame Workshop, who are some of the most important 'gatekeepers' in the whole project. It is SABC Education's responsibility, for example, to see that programmes are in line, not only with the Department of Education's educational agenda for early childhood development, but with the rules laid down for children's broadcasting by ICASA, and with the South African Children's Charter and the United Nations Charter on the Rights of the Child. "It's like a jigsaw puzzle," explains Charles Owen. "It can be a bit inhibiting until you understand how all the pieces fit together."

As a rule, Takalani commissions independent script writers to work with the production companies. Some have been with the Project over a number of seasons, so are familiar with the many different agendas that must be considered, as well as with the Sesame “brand”. This is an advantage because keeping faith with the messages while creating imaginative entertainment takes skill and experience. Currently, a master script is produced in English, from which all the different language programmes are developed. This is done by the TV channels and the local radio stations working in collaboration with language specialists, who must help ensure that programmes are culturally relevant and sensitive, as well as faithful to the original script and its messages.

“One of the things we did with Takalani was to take the scriptwriters with us on some of our field research. It was an innovative thing to do, and it really showed in the scripts they produced afterwards. Compared with the earlier scripts, it was just amazing. They had experienced a bit of the reality for people.”

Glynis Clacherty, researcher

As with the research process, making Takalani programmes is essentially a team effort. Production companies do not have the independence or autonomy they are generally accustomed to. Furthermore, they sometimes find themselves working for two masters: while they are immediately answerable to SABC Education, their contracts are with Sesame Workshop in the United States, which has ultimate editorial control, but does not have its finger directly on the South African pulse.

Takalani Sesame is a prestigious project, and creative people are generally proud to be associated with it. However, they are rarely fully prepared for the complexity of the production process. A common complaint is that it lacks a formal structure so that roles, responsibilities and chains of command are not clear. “People often have conflicting perceptions of their roles,” said one person. “The creative people see themselves as the content providers for programmes, whereas the education people feel this is essentially their role. The boundaries are not clear.” Another commented that it sometimes feels as though decision-making goes round and round in circles, without it being clear where it will stop, and often with conflicting messages coming back. “This is a much bigger management task than usual. It takes an inordinate amount of time, energy and resources just to deal with the relationships and to resolve people issues.”

Because of the red tape involved, meeting deadlines and staying within the budget is often a challenge. The stress increases because most of the creative people have other clients and other projects on the go at the same time, and therefore have limits on their flexibility.

Many of the stresses involved in programme-making are inherent to the creative process and therefore inevitable. But Charles Owen says that with a project as big as Takalani Sesame, it is important that the different participants recognize and respect each other’s expertise—and recognize, too, that they all need each other. “Then it’s a win-win situation,” Mr Owen says.

Takalani encourages families to talk about HIV and AIDS

Early one morning in Johannesburg, 10 people converge on Sasani Studios from all corners of the city. They park their cars outside the modern building and come in from the sunshine to squeeze themselves into a small, dark television studio.

There are film-makers, producers, editors, and other creative people who have come to see roughly-edited segments of a Takalani programme. Cradling cups of hot coffee, they greet each other and find themselves somewhere to sit facing the screens, notebooks in hand. The filming takes the small gathering into the homes of a number of South African families struggling to cope with HIV.

There is a small HIV-positive boy whose mother has died of AIDS, and who is being looked after by his grandparents in a tiny house crowded with family members who smoulder with unspoken thoughts and resentments. There is a family in which the teenage children are haunted by the suicide of their father, and are now constantly anxious about their HIV-positive mother. Meanwhile, their mother frets about how and when to tell her six-year-old daughter of her status. And there is a family of orphaned children in which the teenage girl finally breaks the news to her unsuspecting younger brother that their mother died of AIDS. At the moment of hearing this, the fragile shell of his composure breaks, and the little boy pulls his jersey up over his face and sobs.

The lights come up and everyone is silent for a while, moved by the raw power and intimacy of the three stories. This was a departure from the usual Takalani format in that it was neither fictional nor featured Muppets. In 2004, the Project received funding to put on a special programme about HIV and AIDS outside of its regular programme schedule. After conferring together, the partners decided this was an opportunity to target adults and that they should make programmes aimed at helping adults talk with children about sensitive issues, especially HIV and AIDS. The creative teams worked with HIV and AIDS organizations to identify families who had communications issues which they wanted to work out and who were prepared to share the process with Takalani.

The session at Sasani Studios was one of many in which the creative teams and Takalani Project people came together to view material and hammer out the final product. One of the main points for discussion was how best to package the programme, since there were so many messages "hidden" in the rich material that needed expanding and resolving in order to achieve a full impact. Together they decided that the programme should include a studio discussion after the documentary segment.

The television programme was the centrepiece of a special mass media campaign that included 10 five-minute radio programmes called "Conversations with my child" aimed at parents, caregivers, and teachers, as well as five public service announcements on television and radio aimed at the same audience. As the title suggests, the radio programmes took the form of conversations between adults and children about HIV and AIDS, and were positioned within a talk radio programme with a host, so that members of the public could call in to take part in a discussion afterwards.

Outreach

Until recently, Takalani has commissioned its own outreach in conjunction with SABC. However, SABC Education is busy developing a special unit that will provide for the outreach needs of all educational programming, including Takalani. This will help to streamline and coordinate the provision of educational materials to communities, which have been receiving the materials in a piecemeal fashion. It will also optimize the use of resources such as equipment and training services.

The person assigned to develop the new unit is Nikki Florence, a former teacher with long experience working in the nongovernmental organization sector, who has also worked directly with Takalani. She has been organizing consultative workshops around the country prior to drawing up a business strategy. The workshops involve all stakeholders/interested parties including the Department of Education and other relevant government departments, as well as those delivering education on the frontline—schools, nongovernmental organizations, community-based organizations—and ‘subject advisers’. Three basic questions are on the agenda:

- what do users want from SABC Education outreach services? (e.g. printed materials, videos, tape recordings, web pages, etc.)
- what resources, including equipment, are needed in order to use these products?
- what training is needed to enable people to use them?

Ms Florence allows the participants to discuss freely among themselves so that the individual community’s own ‘felt needs’ and priorities emerge. This is very important, she says. She knows from experience that materials provided without any analysis of what the teachers and learners actually want tend to be used while they are free and easy. But as soon as users start encountering problems, or it starts costing them money, they stop using them.

“If we want teachers to use our materials, we’ve got to ask what are they going to get out of it? And if we want kids to watch our programmes we’ve got to ask what are learners getting out of them?”

Nikki Florence, outreach specialist

The new unit will build on and extend the outreach infrastructure already established for the Takalani outreach programme. This includes more than 160 outreach sites. These are communities selected by the DoE as being especially needy, which have been provided with televisions, radios and video recorders to enable them to receive broadcasts. Once the equipment is installed, it is the responsibility of the Department of Education to monitor its use and maintain it. Security is an issue, says Ms Florence, and special metal cages have been built into walls to house expensive equipment. “Otherwise it tends to go walkies!” she says. In addition to the 160 fully-equipped outreach sites, Takalani secured additional funding that allowed another 460 schools beyond the reach of electricity to be provided with wind-up radios.

When the Takalani outreach team did an assessment of training needs, they found that a large proportion of teachers, especially in the more remote rural areas, were unqualified. They also found that there were no standards in existence for training in the use of multimedia. So they established standards and provided training courses that they managed to get formally accepted as credits towards the qualification of teachers. For the course, Takalani outreach developed an educators’ and facilitators’ training manual, and has to date trained over 80 ‘trainers of trainers’, around half of whom are in the nongovernmental organization sector, while the other half work in the government education system.

The training of frontline teachers has been contracted out to nongovernmental organizations. Not only was this considered most cost effective, but Takalani recognized that nongovernmental organizations already have their contacts and infrastructure set up at community level. They also have the trust of communities and the mandate for this kind of

activity. “This is very important,” says Ms Florence. “People at the grassroots don’t just accept anyone coming into their communities any more.” Because parents have an equally important role in early childhood development as do nurseries and pre-schools, nongovernmental organizations are also required to run workshops for parents in the use of the media.

Takalani’s partnership with nongovernmental organizations for training teachers is part of a wider strategy to work with others who have something to offer or share, such as resources, expertise, or outlets for materials. The National Parks Board, for example, is developing sites for conservation education in communities, and there are likely to be mutually beneficial opportunities to work together, explains Ms Florence. For the new outreach unit at SABC Education, she plans to map who is doing what, where and with which resources, so that opportunities for partnerships can be identified.

Meanwhile, to enhance the attraction of its outreach programme, and the commitment of people to use the materials, Takalani runs competitions for teachers and learners. “But so that it’s not always the same people winning, and so that the poorest areas aren’t having to compete with the richest, we hold competitions at different levels of the educational system; from the provincial level at the top, right down to community level,” says Ms Florence.

Measuring success

The Department of Education has great expectations of Takalani in fulfilling its vision for early childhood development—primarily delivering services to the millions of children bypassed by apartheid. With so much at stake, it is especially important to know how effective Takalani is at reaching its target audience and making an impact. The programme is under an almost constant process of review and evaluation. This is ‘summative research’, and in 2004, six separate studies were commissioned to give a picture of the performance of Takalani from different perspectives. They were:

- a review of television and radio programmes and outreach print materials by a panel of experts who are looking at the content and quality of materials, and how they support the Department of Education’s early childhood development curriculum;
- a study of the impact of Season 2 programmes on children between the ages of three and six years, in terms of literacy, numeracy and life skills, as well as knowledge, attitudes and skills with respect to HIV and AIDS;
- an assessment of the multilingual strategy used in a sample of television programmes in Seasons 2 and 3
- a quantitative study on the use of the radio programmes in homes and schools in rural areas that is looking at, among other things, whether children identify differently with characters depending on whether they see them on TV or hear them on the radio;
- an evaluation of the Project’s outreach strategy; and
- an assessment of the impact of the special HIV and AIDS programmes targeted at both children and adults.

These studies are ongoing. For insights into how Takalani has performed, it is necessary to turn to the results of past studies. For example, a November 2003 study carried out among a small sample of 40 children aged between three and six years and 40 caregivers,

looked in depth at how the target audience was responding to Takalani Sesame on the radio. The study focused on comprehension and appeal of the programmes. Selected findings included:

- Takalani Sesame is a favourite radio programme among rural children. Among their urban peers, television plays a more important role;
- “Learning while having fun” inspires children to become actively involved with the programmes;
- music is the strongest element of Takalani Sesame;
- appeal of and identification with the key Muppet characters is high, and these characters play a strong role in driving messages home, as children tend to remember who did what;
- the broadcast times of Takalani Sesame are a barrier to increasing listenership since they are aired during day care, pre-school or school hours—however, some rural schools have adopted Takalani Sesame as part of the curriculum; and
- there were gains in numeracy, literacy and life skills.

An evaluation of season 2 outreach materials sought feedback from children, parents, teachers, Department of Education officials and nongovernmental organization trainers in three provinces on three books, two posters and a programme guide. Reactions to the book *Lerato’s Mom*, which focuses on a child whose mother has died, gives an indication of the richness of the information obtained.

In one province, parents felt the story was too ‘heavy’ for children aged between three and five years, who would not understand about death. However, parents in another province welcomed the book, saying it was good to have something to read to their children as they found it hard to talk about these things. One parent stated that she wished she had had the story a year ago, because when her daughter died leaving a five-year-old child, she didn’t know what to tell her. A teacher, too, said it was difficult to talk about death at school, but that many young children were losing their parents. A Department of Education official considered *Lerato’s Mom* a good resource for early childhood development and felt it would offer therapy for children who had lost loved ones, and would provide opportunities for emotional development. Children, too, tended to be enthusiastic about the story: many felt it was valuable in teaching them about funerals and about the world.

These are just two examples from a great body of data gathered over the years Sesame Street has been in South Africa. Research—both formative and summative, and ranging from quantitative and qualitative studies, to surveys, literature reviews and expert panel reviews—is a high priority for the Takalani Sesame Project, and the key to its success. It enables it to keep its finger on the pulse of its audience, while at the same time ensuring that the products it delivers in the name of Takalani Sesame are educationally sound, as well as being entertaining and comprehensible.

The broadcaster's perspective

Each November, the SABC produces briefs of the programmes it wants to have created in order to fill its education slots on TV and radio for the year. It invites independent providers and production companies to bid to produce them. The programme briefs are developed on the basis of research and broad consultation with experts and other interested parties in the field. They describe the topics to be covered, the goals and aims of the programmes, the number of slots to be filled within each medium, and the rough production cost per minute. Charles Owen, head of children's programming at SABC, says that sometimes the brief gives an indication of the format a programme should take, such as magazine-style, drama, or animation. Or it might leave this open.

Companies make their bids for the slots, and they submit programme proposals. These are evaluated by an expert panel consisting of senior people from SABC Education and the channels. A shortlist is drawn up and the production companies chosen are asked to make a presentation to the panel, which then decides which programmes to commission.

SABC Education is partially independent of the national broadcaster in that it only gets one third of its funds from government and the rest from sponsorship and regular fund-raising. However it is responsible for overseeing the production of all educational content for SABC, and works closely with independent providers, as well as undertaking co-productions on a number of programmes. It shares the costs of co-production with its partner and raises its own funds, so is able to provide these programmes free to the national broadcaster.

The responsibility for developing the programme briefs also falls to SABC Education. It has to ensure that these are in line with national priorities, and that they fit with the language mandate, which stipulates that programmes must begin to incorporate languages other than English (South Africa has 11 official languages). The stations are given a mandate to provide a certain number of hours of education programmes, of which at least 60% of the content must be locally produced, not a foreign acquisition. The SABC mandate also stipulates that there be equity and gender equality in its programmes. The broadcaster is required to report monthly to the regulator, ICASA, that it is fulfilling its mandate on all counts.

Despite the detailed requirements of the briefs, the creative teams have a good deal of scope for their skills, says Mr Owen. Once commissioned, a production company is required to come up with a series outline, which has to be approved. Then it provides treatments for each individual episode in the series, describing the objectives, messages, and intended outcomes. When the treatments are approved, the production company works on the scripts. There is a clear path for editorial decisions, explains Mr Owen. However, some people still try to step beyond their area of expertise and interfere. He added that particularly with large projects it is very important that the roles, responsibilities and contributions of everyone be spelled out carefully, and that they be *managed* effectively. "Teamwork is important," comments Mr Owen. "Everyone needs to recognize and accept that they all need each other, and that it is a win-win situation."

The lessons of experience

As these brief case studies show, the mass media offer rich opportunities for effectively responding to HIV and AIDS. They can raise awareness and keep the issue alive in the public mind. They can deliver information and advice far and wide, and present role models and realistic scenarios that encourage identification and engagement with the issues. And, importantly, they can offer a public platform to people living with HIV and others close to the heart of the epidemic.

It is also clear that working with the mass media is extremely challenging. Making programmes is costly; competition for broadcast time and space in newspapers and magazines is fierce; and the pressures of deadlines, tight budgets, teamwork and red tape are constant. The organizations described here are meeting these challenges and managing to use the mass media often to powerful effect.

How are they doing it? Where did an initiative begin and how did it get off the ground? What are the essential elements of a mass media project? And what kind of expertise does it require? This section looks at the lessons of experience and highlights those that can help others who want to work with the mass media in the field of HIV, or indeed any other social issue.

- **Producing a pilot programme is an important first step in getting a new initiative off the ground.**

Producing a pilot programme or samples of print materials serves a number of purposes. It gives people working with the media for the first time an opportunity to learn what is involved. It allows an idea to be tested in the marketplace before too much has been invested in it, and allows for adjustments to be made according to feedback. And it gives people a demonstration tape or samples to take to donors and media outlets when seeking support. Sample products are more powerful than written proposals in selling an idea.

- **The more popular appeal an idea has, the easier it will be 'sell' to the media and to donors.**

Popular entertainment can earn money and attract advertising because of the promise of big audiences. It therefore has commercial value, which is a key advantage in a competitive marketplace. Large audiences are also especially attractive to donors and sponsors who are looking for exposure.

- **Using a mix of media enables a social or educational project to make the maximum impact on the general public**

Seeking outlets for information or advice across a variety of media makes sense for a number of reasons. First, it allows projects to reach a wider audience. Second, not all media are suitable vehicles for every message, and having a variety of media outlets gives projects greater choice and scope in what they can address. It also allows for the reinforcement of messages and information. Television drama, for example, may allow only superficial treatment of a topic, but issues raised in the drama can be addressed in greater depth in print, or in radio discussions.

- **Mass media projects involve many participants with different skills, viewpoints, and ways of working. For such projects to succeed, teamwork is essential. So too is good management.**

Building team spirit among the diversity of people brought together by media work is a huge challenge. It does not just happen; it has to be worked at. Essential prerequisites are that the respective roles, responsibilities and boundaries of all participants be made clear, and that mutual trust and respect be developed. In some cases, drawing up a Memorandum of Understanding that sets down the ground rules of a partnership can be useful. It is a good idea, too, to have forums for regular interaction between partners, and to keep everyone informed of what is going on and what decisions have been made, even if they are unable to attend meetings.

Good management is equally vital to the smooth running of a media project. A formal structure needs to be in place to guide the process, manage relationships, and support the participants. Everyone needs to understand how it works, and it should be transparent in its operations. Too often management happens by default rather than by design and adds to the pressures of an inherently stressful working environment. Sometimes, very small organizations working with much larger partners can find themselves overwhelmed by the administrative tasks. The lesson is that a realistic assessment should be made of the resources needed to manage the project properly, and funds sought specifically for this purpose in the budget.

- **Buying in services and expertise on a contractual basis is often the most cost-effective and efficient way of working.**

When working with the mass media, many skills and services are required only periodically. Contracting out such tasks means that the organization does not have to bear the cost of employing people when they are not productive. Furthermore, responsibility for the quality of work and for meeting deadlines rests with the contractor, thus relieving the organization of some of the pressures of production. However, this is only feasible in places where there is a rich pool of skills and services on which to draw. In some places it is necessary to build capacity through training, and keeping it in-house might make more sense.

- **In educational broadcasting the review and decision-making processes are more complex than usual. Production companies need to be aware of this, and to take it into account in negotiating time schedules and budgets. Otherwise, this complexity causes stress and friction.**

Even when it takes the form of edutainment, educational broadcasting is driven by the message rather than the entertainment. Therefore, the technical people keep close control of the creative process. This typically involves many ‘gatekeepers’, and a good deal of review and reworking of creative ideas. Conditions are ripe for stress, misunderstandings and friction between the different participants. But these can be minimized by frank discussion when service providers are being commissioned, and by making an effort to develop trust between all the team members.

- **Involving creative people such as scriptwriters and producers in the development of messages—and even in field research where appropriate—can give them a depth of knowledge and insights that are invaluable when it comes to making programmes.**

Translating educational messages into engaging television, radio or print is a highly skilled task. Involving script writers and other key creative people in the development process not only allows them to gain an intimate understanding of what needs to be communicated, but it helps them to appreciate how the technical people feel, and to build trust between the two very different groups.

- **Enabling the general public to interact with a mass media project or campaign can be very effective in encouraging awareness, debate and personal identification with the issues.**

Buddyz Buzz, which provides comments from real children at the end of an episode of Soul Buddyz, and the positioning of the Takalani specials on HIV and AIDS within a radio talk show, are just two examples of programmes that allow two-way communication with the general public. Such devices help to stimulate real engagement with the issues, and, in the field of HIV and AIDS in particular, to overcome denial, encourage openness, and challenge stigma.

- **The support and active involvement of academics, experts and others with a good reputation working in the same field will enhance the authority and credibility of a mass media project.**

One way to encourage such support is to involve key people and organizations in consultative workshops and other meetings as much as possible, and to suggest that they appoint representatives as regular advisers to the production.

- **Rigorous research is the key to effective use of the mass media for social purposes. It guarantees the quality and reliability of the product and its relevance to the target audience.**

To be successful, any organization using the mass media for social purposes needs a thorough understanding of its target audience—who they are, where and how they live, and the extent of their knowledge and perceptions of specific topics. It also needs detailed knowledge of the topics and issues it plans to address. Researching these aspects is time-consuming and costly, and there is constant pressure to cut corners because of competition for broadcast time and newspaper space from others who do not have to go through such rigorous processes. But doing so is short-sighted: lack of knowledge of the target audience is why so many public health information and other social campaigns fail to make an impact.

- **The effect of appearing on nationwide television can be dramatic even for people who are already open in terms of their HIV-positive status.**

In fact, the effect of exposure in any of the mass media can be dramatic. In order to avoid putting people under pressure to participate in a project, it is a good idea to use intermediaries, such as HIV and AIDS organizations and support groups, to identify possible candidates, make the first approach and prepare the ground. Thereafter, it is necessary, as a matter of course, to obtain a formal letter of acknowledgement that subjects have been informed about, and have understood the nature and purpose of the project and are prepared to participate. Ethics also dictate that a person should have the freedom to withdraw from participation at any point and for any reason.

- **Encouraging people to open up during research interviews can release all kinds of powerful feelings in them, including expectations that the interviewer will be able to help resolve their problems. Such expectations can be overwhelming if researchers are not properly prepared.**

Researchers need to be aware of the often powerful effect on their subjects of being interviewed, and they need to be equipped to handle it. They should be reminded that the researcher's job is to listen, not to give advice, and there should be an effective plan for referral

or backup support for interviewees, where necessary. This is as important in protecting the researchers as it is the interviewees. Working in collaboration with community-based organizations, nongovernmental organizations or other support organizations that already have people's trust can be a useful strategy.

Sometimes, however, interviewees may simply want answers to some practical questions, and it may be appropriate for a researcher to leave time for this at the end of a session. Again, he or she should be prepared, and either have the facts at their finger tips, information materials to hand out, or places to refer people for answers.

- **When researching sensitive topics, it is important that researchers are aware of their own feelings about the issues and that these are not allowed to affect the interviewing.**

During training or briefing for fieldwork, researchers should be required to explore their own attitudes and emotions regarding the topics to be investigated by carrying out interviews with each other, or similar exercises. If it becomes apparent that someone's emotional and/or intellectual 'baggage' is going to affect the research process in any way, they should not be sent to the field. This is especially important when the issues being explored are sensitive or painful.

- **Organizations that are driven by a sense of mission need to be careful not to exploit the sense of commitment in their staff.**

People working for social projects or campaigns often find it hard to draw boundaries between their work and their personal lives, and even well-meaning managers can have unrealistic expectations of their staff. During the interviews for this report many people acknowledged that burnout resulting from overwork and/or too close identification with the issues is a very real risk. Besides causing misery to the individuals affected, stress and burnout undermine the efficiency and effectiveness of a project, and practical steps should be taken to avoid them from the start. As the Soul City story shows, employing a skilled human resources staff member to supervise the welfare of staff is a very good idea. And much can be done in drawing up employment contracts and remuneration packages to protect people from exploitation and make them feel valued.

- **To have an impact, outreach materials need to be tailored to what the target audience actually wants and would find useful.**

Outreach programmes have the capacity to greatly enhance the depth and coverage of the education and information contained in the other media—television, radio and newspapers. But in order to have an impact, outreach materials must be as carefully planned and tailored to their target audience as other materials, rather than simply riding on the coat tails and popularity of the broadcasts or articles. Before re-packaging programmes for outreach, a project needs to find out what people really want, for what purposes, and how to make the materials most useful. Often this means providing equipment and/or training as well.

- **Continued support for a project depends on proving to donors, sponsors and media organizations that it is a success.**

Success breeds success. Media organizations and the funders of a project are likely to give it their continued support if they see evidence that it is reaching its target audience and achieving an impact. Monitoring and evaluation are therefore vital components of a project, and should be budgeted for explicitly. Monitoring and evaluation have other important purposes too. They are valuable in identifying problem areas in a project, suggesting how they might be resolved, and giving people a fresh perspective on how the project's dynamics work.

Useful resources and contacts

Japhet G (1999). *Edutainment. How to make edutainment work for you: a step by step guide to designing and managing an edutainment project for social development*. Soul City, South Africa.

De Fossard E (1997). *How to write a radio serial drama for social development: a scriptwriter's manual*. Johns Hopkins School of Public Health, Centre for Communication Programs. Baltimore, USA.

De Fossard E (1998). *How to design and produce radio serial drama for social development: a program manager's guide*. Johns Hopkins School of Public Health, Centre for Communication Programs. Baltimore, USA.

Soul City: Institute for Health and Development Communication
PO Box 1290
Houghton 2041
South Africa
E-mail: soulcity@soulcity.co.za
Tel: +27 11 643 5852
Fax: +27 11 643 6253
Website: <http://www.soulcity.org.za>

Community Health Media Trust
PO Box 62
Muizenberg 7950
South Africa
E-mail: idojack@iafrica.com
Tel: +27 21 788 9163
Website: <http://www.beatit.co.za>

Takalani Sesame
Private Bag X41
Auckland Park 2006
Gauteng, South Africa
Tel: +27 11 714 5282 (Gloria Britain)

Sesame Workshop
1 Lincoln Plaza,
New York 10023
USA
Tel: +1 212 875 6464 (Robert Knezevic)
Website: <http://www.sesameworkshop.org>

SABC Education
Private Bag X41
Auckland Park 2006
Gauteng, South Africa
Tel: +27 11 714 5019
Website: www.sabceducation.co.za

The Joint United Nations Programme on HIV/AIDS (UNAIDS) brings together ten UN agencies in a common effort to fight the epidemic: the Office of the United Nations High Commissioner for Refugees (UNHCR), the United Nations Children's Fund (UNICEF), the World Food Programme (WFP), the United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA), the United Nations Office on Drugs and Crime (UNODC), the International Labour Organization (ILO), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the World Health Organization (WHO), and the World Bank.

UNAIDS, as a cosponsored programme, unites the responses to the epidemic of its ten cosponsoring organizations and supplements these efforts with special initiatives. Its purpose is to lead and assist an expansion of the international response to HIV/AIDS on all fronts. UNAIDS works with a broad range of partners – governmental and nongovernmental, business, scientific and lay – to share knowledge, skills and best practices across boundaries.

Produced with environment-friendly materials

UNAIDS • BEST • PRACTICE • COLLECTION

The UNAIDS Best Practice Collection

- is a series of information materials from UNAIDS that promote learning, share experience and empower people and partners (people living with HIV, affected communities, civil society, governments, the private sector and international organizations) engaged in an expanded response to the HIV/AIDS epidemic and its impact;
- provides a voice to those working to combat the epidemic and mitigate its effects;
- provides information about what has worked in specific settings, for the benefit of others facing similar challenges;
- fills a gap in key policy and programmatic areas by providing technical and strategic guidance as well as state-of-the-art knowledge on prevention, care and impact- alleviation in multiple settings;
- aims at stimulating new initiatives in the interest of scaling up the country-level response to the HIV/AIDS epidemic; and
- is a UNAIDS interagency effort in partnership with other organizations and parties.

Find out more about the Best Practice Collection and other UNAIDS publications from www.unaids.org. Readers are encouraged to send their comments and suggestions to the UNAIDS Secretariat in care of the Best Practice Manager, UNAIDS, 20 avenue Appia, 1211 Geneva 27, Switzerland.

Getting the message across

Because of their often central position in people's lives, the mass media have unrivalled potential to inform and educate members of the general public. Yet in the response to AIDS only a tiny part of that potential has been tapped. In surveys around the world, radio and television have been cited as key sources of information about HIV by large numbers of people. But although there are examples of imaginative and highly successful campaigns, generally media coverage of the epidemic is not sufficient to keep the public well informed. There are still many millions of people who have never heard of AIDS, and many more who hold serious misconceptions about the disease.

This report examines in detail some successful media initiatives in the Republic of South Africa. It describes the processes by which original ideas for using the mass media to address HIV have been put into practice. It is hoped that these lessons of experience will be useful to all those who wish to undertake similar projects.



Joint United Nations Programme on HIV/AIDS

UNAIDS

UNHCR • UNICEF • WFP • UNDP • UNFPA
UNODC • ILO • UNESCO • WHO • WORLD BANK