

Behind the Screen: Hollywood and Public Health
Online Discussion Forum Week 2: April 2-6, 2007
Facilitator: Vicki Beck, Hollywood, Health and Society

I can't believe this week has gone so quickly. We've now heard from five U.S. TV writer/producer/story editors at four top-rated primetime shows and one of the oldest daytime dramas on TV. David Foster deserves a huge THANKS and KUDOS too for writing such a smart show. If you haven't seen *House*, it's a real whodunit, with the culprit being very tricky to catch. And one of the underlying premises, according to Dr. House, is that "everyone lies." So he's always looking for that little dark hidden secret that will unlock the true cause of the patient's illness. Many times it's a behavior or something from their past that the patient doesn't want to be known, because they're embarrassed or they think someone might be mad at them. But there we are again....behavior. I think David hit the nail on the head for me. I love watching the character of Dr. House, and of course, we'd want him to be our doctor, even though he's a pretty crusty kinda guy. Not the most polite, diplomatic or gracious human being – to his boss, his staff or his patients. But we keep going back for more. So what does this mean about characters? Are the cantankerous and naughty ones good for carrying messages? Or do we need to avoid them because they might say something we don't like? What do you think about the people who carry the messages?

The USC study conducted on transplant storylines showed that *House* does educate viewers about issues. For example, of the six shows studied, *House* viewers were most likely to know that hospital transplant committees determine priority of patients on the list at that hospital. This is important because surveys show that some people believe that you can get higher priority if you are rich or famous. The *House* storyline featured the committee discussion and decision, so *House* viewers responded with a strong level of agreement about the role of the committee.

Betsy Snyder from *The Bold and The Beautiful* should get an award for finding the time to send us her comments. As we work with TV shows across the board, we recognize that daytime dramas have the toughest schedules because they are producing scripts every single day, and there are NO RERUNS for them. But their reach and impact is indisputable. *The Bold and The Beautiful* is only a half-hour show, but it has generated generations of fans around the world, since it is syndicated in more than 100 countries and going on 30 years in the United States. We hear that meetings can't be scheduled in some parts of Africa during the time the show airs, because no one would come. And that villagers will walk to the one house with the television, even if its miles away, to catch up on the titillating plot lines compromising characters they have come to know and love and hate for decades. But there's one thing you can't deny. Soap opera viewers are the most loyal fans in television – because they feature characters you've known since high school or college and they still visit your living room or bedroom on a regular basis. So it's no surprise that "Tony's HIV" caused such a huge spike in calls to the CDC's HIV/AIDS hotline. Or that the child abuse storyline this year created so much email and so many calls.

We weren't able to identify someone from a telenovela to comment this week, but we find that telenovelas have a similar effect on audiences. Two summers ago we worked with a Telemundo telenovela "Amarte Así" that featured an obese character with diabetes. The link to the CDC's National Diabetes Education Program was posted on the show's home page, and nearly 40% of all hits the month the storyline aired came from Telemundo. The next highest source of hits was the National Institute of Health at 10%. I think the data speaks for itself.....again and again and again. Daytime dramas and many telenovelas have very small audiences, compared to network shows, but they have enormous impact on viewers. When we can get Spanish-language viewers in the United States to go to diabetes information in droves, we know we are doing something right. It's a high-risk audience that's very hard to reach, but when you reach them, they are eager for information.

It's very gratifying to hear that colleagues in other countries are reaching out to national and local networks and tapping into existing TV shows. At the least, you can offer Web links and other resources, and explore opportunities in your market place. We hear quite a lot about international soaps that are produced for health campaigns in overseas markets, and much less about network-supported efforts, with the exception of the phenomenal work being done by Kaiser Family Foundation in partnership with UNICEF.

I'm especially interested in learning more about discussion groups for TV shows, since we'd like to stimulate more health promotion based on health storylines. Seems to me it's a common point for discussion, since it's not so personal. It's about THEM rather than US, but we all know there's some of US in THEM, or maybe we wish there was. A head of network daytime once told me that daytime dramas are about fantasy, and they're not supposed to be real. People watch them to escape to another place, outside their own reality. And you have to admit, she has a point. Do you think fantasy shows should still be accurate if they talk about health issues? Or do you think viewers discard them as total fantasy and don't believe anything at all?

I want to thank you for the opportunity to chat with all of you in the global health and education community these past five days. We are naturally bonded because we all care about the same things, and we all face similar challenges. I hope that my comments don't suggest that our efforts resulted in easy partnerships and support from the entertainment industry. It has taken a full ten years with dozens of partners and hundreds of colleagues to move this effort along – from its early days at the CDC to current days at the Norman Lear Center. We have all built on each other's progress and lessons, and we continue to do that. There are so many names to recognize that I could not begin to do justice to everyone who has contributed, either directly or indirectly, but you know who you are. I look forward to hearing back from you and following this discussion throughout the six weeks. Thank you for your involvement, your questions and your sharing. I am happy to respond to questions if you'd like to contact me through Srdjan and his group. They are absolutely the best --- our thanks and applause to everyone who has kept this conversation moving along this week.