

PN-ACA-540

**“LOS ANGELITOS DE LA VIDA”
FOLLOW-UP ON RADIO DRAMA**

March 3–7, 1997
Santa Cruz and La Paz, Bolivia

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ACRONYMS

BASICS	Basic Support for Institutionalizing Child Survival
ERBOL	Educación Radiofónicas de Bolivia
IMCI	Integrated Management of Childhood Illness
JHU/CCP	Johns Hopkins University / Center for Communication
SNS	Secretaria Nacional de Salud
SRO	Oral Rehydrating Solution
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development

BACKGROUND

The mortality survey is a multi-method, community-based study of the biomedical, social, and behavioral processes contributing to children's death. The survey employs a variety of data collection tools, such as open histories, verbal autopsies, socioeconomic and demographic profiles, daily process reports, and medical record reviews, to establish the medical causes of child death and identify breakdowns in care-taking processes within the household and the broader community health system. Findings of the survey in El Alto, Bolivia, indicate that poor quality care within the household, together with inappropriate (and sometimes dangerous) treatment provided through the formal and informal health systems, led, in the majority of cases, to deaths which could have been prevented.

BASICS is finalizing its analysis of the survey and developing recommendations for intervention strategies, including activities with health systems, community leaders, and the wider population. On the basis of the Bolivian experience, BASICS is developing a manual for replication of the survey in other communities. Therefore, a strategy for using the case studies of infant deaths to produce a radio series and related activities aimed primarily at caretakers was developed. These more open-ended and qualitative data have considerable potential for guiding the development of effective, community-based, tailored interventions targeting both children's caretakers in the household setting, and, indirectly, health care providers in the wider system.

Radio Series - *Angelitos de la Vida*

Under a previous activity, BASICS consultant Esta de Fossard analyzed the material from the case studies and prepared a proposal for a radio drama, *Angelitos de la Vida*, and for the print material and competitions that would be part of the series. BASICS/Bolivia, with the support of de Fossard, held a design workshop in August of 1996 to create a precise framework and guidelines for the radio drama, *Los Angelitos de la Vida*.

Gridvia Kuncar, IEC consultant, BASICS/Bolivia, has the overall responsibility for the series *Angelitos de la Vida* in Bolivia. Ana Maria Aguilar has responsibility for oversight of the content. De Fossard is the principal creative consultant for the creation of the program design.

During the design workshop that was held in August of 1996, the following tasks were carried out:

- Definition of behaviors
- Definition and description of audiences
- Definition of objectives of the radio series and measures to identify changes in identified behaviors
- Definition of content of the series, number, duration, and sequence of programs

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- Preparation of glossaries for themes and behaviors
- Preparation of a preliminary calendar for preparation of scripts, review of scripts, production of pilot programs, pilot testing of programs, revision of programs, dissemination of series, monitoring, and evaluation

CURRENT CONSIDERATIONS FOR THE SERIES (ESTA DE FOSSARD)

- 1) Story (format)
- 2) Messages (format)
- 3) Scripts
- 4) Guide
- 5) Timeline

Story

There exist significant concerns on behalf of BASICS/Washington that the original proposal has been somewhat lost (“Los Angelitos” overall concept). BASICS/Washington wishes to reincorporate components of the proposal that de Fossard originally submitted. It is necessary, therefore, to reincorporate the idea of the importance of the “angelitos.”

It is important to have a story that is attractive. It should be a natural story that people would believe because then the technical child health message is considered. The message that we agreed upon is that both want and can prevent the deaths of the lives of children under-5-years old. What has occurred is that the messages are now being inserted rather unnaturally by the writers. An earlier suggestion proposed by de Fossard was that Natalio, the soccer star, has a dual purpose in life: 1) he wants to become a soccer star, and 2) because his younger sibling died at birth, he wants to make a difference in other children’s lives. This would serve as a motivation to prevent infant deaths and appeal to the audience’s emotions.

It seems that in the story’s the pilot episodes, Asunta is the one to consistently take charge of seeking care for the sick infants. There needs to be a logical reason for the story to be led to the health center. However, there also needs to be an emphasis on home care, recognizing danger signs at home, and why the mother should go to the health center. BASICS Technical Office René Salgado suggested that the focus should be on the caretakers and communities, and on presenting solutions.

De Fossard explained that soap operas are made up of a main plot and two or three sub-plots. One of the sub-plots should be how to reinforce positive behaviors in a health center. The sub-plot doesn’t need to appear in every episode.

Suggestion of Format by de Fossard

- 1) Music that expresses beauty and emotion
- 2) Natalio (main character) briefly reminds us with different words every time, "My life is for my brother and so all of the angelitos that can live."
- 3) Plot
 - (1) Main plot: How Natalio becomes a soccer star (in every episode)
 - (2) Sub-plot: Takes place in a health center
 - (3) Sub-plot: Asunta struggling as a street vendorHook (will be resolved later in the program)
- 4) Los Angelitos
 - a) Danger sound (very low, not intrusive).
 - b) HOST (speaking): What is wrong? What is the danger?
 - c) Case study (must decide how this will be interpreted), perhaps with the theme music very softly in the background. Cases might be alternated. (Case study briefly mentioned/referred to in the drama.)
 - d) Questions (very simple: Did she take him to the clinic on time? Did she give him SRO?)
 - e) Correct answers (very simple, teaching listeners something).
 - f) Question again (repeating the questions and answers with reinforcement; e.g., What day is it? Monday, that is right. Monday is the right answer.) This is in line with the IMCI initiative of interpersonal communication.
- 5) Story, end with a "hook" for the next episode.

ERBOL has explained that they must have at least one break during the episode (perhaps after #3—the Story) which would last approximately 30–60 seconds.

The sub-plots should vary each time; however, the episode must always include the main plot. In every episode, there needs to be a mention of a sick baby, and we should hear a sound effect that is a "danger signal." At the end of the episode, stopping at an exciting point, the narrator can ask "Did you hear the sound?" He goes on to say, "Listen to the story of this mother." Then, the case study is read by someone. Afterwards, someone, perhaps the narrator, responds to the study; it could also be a different individual every time or the same person. A doctor, mother, community worker, or neighbors could discuss how to respond to the story or provide a solution, depending on the problem at hand. There could also be a few short questions at the end, repeated in the three languages. The answers could also be in the three languages, always keeping them very short. The format could then end with a few minutes of the story, ending with a cliffhanger, so the show ends on a positive note to get the audience to tune in the next time—we want Natalio

to win at soccer and in saving children's lives. Because the audience respects him, they will want to help in his quest of saving the lives of babies in Bolivia.

Natalio could be the narrator, as an old man looking back on his life, telling his story. Or, he could, at the beginning of each episode, comment on last week's episode. The writers need to understand Natalio's motivation and life. They need to outline Natalio's story first, and then bring the sick babies (someone he knows, for example) into the show through the sub-plots in a natural way. Each plot needs no more than a maximum of three characters. It is not necessary to have the same characters in each plot all of the time, but there need to be a few constant characters and logical connections/associations. Every sub-plot must relate to the main plot.

Salgado inquired about the delivery of the medical messages in the series. The question was raised about the need for the messages being delivered in the same fashion each time, and it was decided that for reasons of consistency, the same format would be used every time. BASICS/Bolivia reviewed the health care behaviors and selected those that they felt could be affected or changed through radio. It was decided that each behavior should be repeated at least three times in order to make an impact. This effort would be reinforced with written materials and community interventions. The messages will focus on the recognition of danger signs (by health workers and mothers). The writers will need clear guidance on exactly what to write.

According to de Fossard's experience with the enter-educate formula, the questions at the end of the episode are a very effective educational method and make the audience feel good about themselves. The interactive method is the key to appealing to the intelligence (vanity—they like to think that they know all of the answers) of the audience and reinforcing the knowledge imparted. This also provides opportunities for communities (mothers' clubs) to work and learn together. The case study can be related without making the mother or father in the case look guilty, related in such a way that the narrator states that the people did not know how to prevent the death, and that they want others to know in order to save lives.

This format would address the concerns of BASICS/Washington by presenting concrete information (questions and answers) that could be measured. However, there needs to be a balance of messages in the story. Furthermore, there will be less chance for misunderstandings if the messages (danger signs) are clearly reiterated and allow for different perceptions (male and female perspectives).

Aguilar mentioned that it would be possible to remove the didactic section of the format to test the show both ways, or to use it for other purposes. Aguilar is not sure if this format would be appropriate for the entire nation. Perhaps it would be most appropriate in the areas where we have hands-on experience; if the series goes national, we would need partners (UNICEF, ERBOL, Mothercare). However, Aguilar worries that the potential partners might not understand the marriage of the education and entertainment working well. Aguilar stressed that BASICS/Bolivia is only responsible for what occurs in specific districts, not what occurs in the entire country.

Salgado would like to reincorporate the quiz and prizes that were in the original proposal. For example, the listeners could write the answers to the questions and send them in to the station (or BASICS) in the possibility of winning a prize (tickets to soccer games, a radio, tee shirts, or even just having the winners' names read on the radio). The interaction with the audience will be determined by the scope of the audience (national or local). Another consideration is the question of who will manage the process of audience interaction. De Fossard suggested that the Department (regional) of Health could be involved in answering listeners' questions and handing out prizes (we could pay a sum for this service). The format appeal depends entirely on the culture; even if there are regional differences, human emotions and the danger signs are universal and will appeal to all. Aguilar suggested that another validation occur in order to determine if this format is appropriate and would appeal to the audience.

Why bother with the story then in order to communicate? The story reflects real life and that these things happen to real people, possible *you*. It becomes personal, and, therefore, more interesting. The most difficult writing is the enter-educate style, because of the delicate balance and the ability to incorporate the messages in a natural way.

The interactive question/answer section could be written ahead of time and the writer could build the story from it. If it is a very new concept or a particularly difficult concept/message, it might need to be repeated more than once; otherwise, once should be sufficient. Printed materials are also a good reinforcement—i.e., danger sign cards for mothers (written and pictorial) and may already exist within the IMCI initiative. If so, it would be beneficial to mention on the radio that the listeners can get the cards at the health centers. However, the problem that will surface is that the initiative doesn't yet exist throughout the country and the cards may not be readily available everywhere. If the mother goes to a health center for a card or counseling, she may receive confusing information or lose trust if the workers know nothing about the information presented in the radio series. The danger signs, for example, within IMCI will vary from other organizations/health centers. De Fossard proposes that we could tell the listeners that these cards *may* be available, without making any promises that they will definitely be able to get one (disclaimer).

TIMELINE

There will be one story writer and one script writer. They will be doing this in blocks of five episodes (three weeks for writing), two weeks for revision and adjustment, and one week for recording, resulting in a total of six-week time blocks.

PARTNERSHIPS

On February 24, 1997, a meeting took place in La Paz at BASICS/Bolivia headquarters which included representatives from USAID, SNS, ERBOL, Mother Care, Proaudio, script writers, and individuals involved with the validation process of the pilot programs.

Two types of enter-educate programming:

- 1) **Non-technical information** (gain more interest and look for information, no learning)—traditional soap operas (no testing done on effectiveness).
- 2) **Technical information** (teach and learn facts)—our series would fall into this category, as we want to change behaviors and knowledge.

It is up to us to explain to our partners why we have chosen the second approach (combination of soap opera and messages) to obtain behavior change.

We have to help our writers understand the parameters and reach a consensus on where the story is going in order to produce quality work. They must work within specific guidelines.

NATIONAL OR REGIONAL

We could go national, or focus on “our” regions, but at the same time let other regions hear it. At the end of the program, there could be a summary of the story in the local languages (depending on the regions’ capacity for local broadcasting). We could have two sets of objectives: one for the regions that we are responsible for, and another (raising awareness and interest) for the rest of the country.

REVIEW OF BEHAVIORS TO CHANGE

The challenge exists to introduce the traditional healers (curanderos, yatiris) in the story as part of reality, but in a way that corresponds to the messages that we are giving. For example, the curandero could suggest to the mother that the child be taken to the health center, or given more liquids, etc. The stories collected need to be reviewed and analyzed to determine how the traditional healers intervened in a positive way and according to our recommendations.

Next steps

- Write two sample scripts with new format

- Present to potential Bolivian partners (if acceptable, have Bolivian writers do samples and record)
- Field test samples
- Determine who makes the decisions and how
- Talk to partners about what we want to do and why we want to do this in our way in order to achieve our goals
- Determine/refine the behaviors/messages to be highlighted in the series

On March 4, 1997, the sample scripts proposed by de Fossard, including the new format, were reviewed. Rodolfo (name later changed to Benito) is the narrator, a man telling the story of his wonderful friend who he wants the audience to get to know. His friend is Natalio, a man who had two great ambitions in life. One goal was to be a great soccer star and the other to save the lives of children. Benito needs to be in every episode. This character could also create a certain intrigue for the audience, as they become curious as to how he fits into Natalio's life.

Until now, this is the format (inter-active education) that has been used for children in Bolivia. All who were present at the meeting are in agreement with the proposed format and agree that it should be produced and tested in the three areas. There is an opportunity for more control over the messages with this type of format.

The inter-active section will be introduced by special music and a soft warning signal which should make the transition to the case study smooth and not too abrupt. The sample script shows that the case studies do not have to be used in the same way each time. For example, a character could mention that a friend of her's had a baby that died, and she does not want to see that happen to her sister; then insert the case study. The case study does not have to exactly match the situation that occurs in the story line, i.e., a pregnant woman in the story and a pregnant woman in the case study. It also should be noted that there does not need to be a case study in every episode. Yet, if there is a difficult disease or problem that needs a extra attention or mention, case studies can serve to reinforce those difficult messages. In order to avoid overwhelming the audience, the case studies should not all deal with death. Properly managed cases should also be included in the series.

The format, however, needs to remain intact, whether or not there is a case study in the episode. Kuncar suggested that the script writers be given a glossary, a list of desired behaviors to be changed, and the messages and the case study to be used for each episode prior to writing the scripts. It has been proven in other series that it is easier to identify the problems and the technical content (and case studies) first and work the story around that information. It is also important to keep in mind that the key to a good story is to look "through the window" into the characters' everyday lives, and not include too many "exciting" events all at once.

The objective of changing health worker behavior has been eliminated from the list of purposes originally outlined in the design document; however, messages to promote good interpersonal communication will still be incorporated into the stories.

INTER-ACTIVE SECTION

This section will include a case study and inter-active questions, or just the inter-active questions. The questions are based upon the behavior/messages and the case study that are highlighted in the episode, not the action that takes place in the story.

It is important to have questions that can be answered easily appear first in the inter-active section. The answers would be given just prior to asking the questions so that the audience will be able to answer them easily, building the audience's confidence and encouraging them to continue to participate. After the questions, the case study is introduced, and this is where the didactic segment is inserted, and this is when the more difficult questions will be posed. The questions should be short enough that they could be translated into different languages (Quechua or Aymara). The narrator poses the question, pauses, and then gives the correct answer in such a way that he reinforces the correct answers given by the audience. For example, he would ask: "How often should a woman who is three months pregnant go to the clinic for a check-up?" Pause. "Once a month, that is correct. A woman three months pregnant should go to the clinic once a month. All of you who got the answer correct should be very proud." This technique is that which is promoted in the IMCI training, and would be reinforced in the radio series.

EVALUATION OF THE SERIES

The evaluation will be based on knowledge and some behaviors (intentions) in the regions in which BASICS is implementing IMCI (baseline). It could fit into the household survey with some measurable indicators. Exit interviews will be conducted at facilities in order to determine what motivated the people to bring their babies to the facility, as part of the IMCI survey. Health workers' communication skills will not be considered. Furthermore, it is those regions in which the mortality surveillance project will be taking place. It will not be possible to show or measure the origin of the information due to the fact that there are so many things going on in the selected regions. The aspects that the evaluation team are interested in is what the caretakers know and what they do or intend to do. The WHO survey will be used in a modified version, which will occur in May of 1997. The survey of the specific knowledge of caretakers will have to be completed prior to the broadcast date of the series.

MONITORING THE RADIO PROGRAM

Certain groups should be established upon which constant monitoring can be imposed. The best way to do this is to have groups listen to the program every week (mothers' groups for example), or go into the market at the time that the program is on and determine how many are listening it. After a certain number of episodes, a deliberate message could be inserted that would ask the listeners to encourage their friends to tune in and to discuss the program in a group. During the week, there should be spots/announcements to promote the program (it is a good idea to include the previous week's cliffhanger—teaser). Kuncar mentioned that in the focus groups, it was determined that (500 radio stations in Bolivia) people do change radio stations looking for different programming. De Fossard will provide us with a sample that outlines the monitoring and evaluation component that was used in Nepal.

SUMMARY OF ACCOMPLISHMENTS

- 1) **Format:** A new format which includes case studies and interactive questioning was agreed upon. This will be tested in the next few weeks.
- 2) **Partnerships:** The sample episodes and the results of the validation will be shared with potential partners. A meeting with UNICEF will take place on April 15, 1997, in order to determine their definitive role in this project.
- 3) It was decided that the inter-active question/answer section would teach the audience what we want them to know, while still using the enter-educate approach.
- 4) **Validation/monitoring/evaluation:** The Bolivian team was given the guidelines for Evaluating Enter-educate Pilot Programs by de Fossard to use as a reference tool. It was decided that health workers' communication skills would not be evaluated due to the logistical difficulties involved. De Fossard agreed to provide a copy of the monitoring plan that was used for the enter-educate radio serial "Service Brings Reward" in Nepal, as a reference. A timeline for these activities still needs to be developed.
- 5) **Support materials:** The team was provided with the following items:
 1. A copy of the Spanish version of *Interactive Radio Instruction: What it is, How it works, and How to Manage it*. This is a book produced by the Educational Development Center in Washington D.C., and of which de Fossard is a co-author.
 2. A copy of the draft version of *Radio Serial Drama for Social Development: A Script Writer's Guide*. This is a book de Fossard has written for Johns Hopkins University Center for Communication Program (JHU/CCP). It will be published in May 1997.

3. A list of test guidelines for pilot-testing enter-educate radio serials (This is contained in the book mentioned in No. 2.)
 4. A set of Guidelines for Radio Actors.
 5. A set of guidelines and instructions on Edit-Free Radio Production (a method of producing radio serial dramas that virtually eliminates costly and time consuming post-editing). These last two sets of guidelines are taken from the forthcoming book *Radio Serial Drama for Social Development: A Program Manager's Guide*. This book is also being produced by JHU/CCP and it is hoped that it, too, will be published by May 1997.
 6. A list of overview points reminding the writers of the most important things to remember when creating serial dramas for social development.
 7. The draft of three full scripts demonstrating the new format that de Fossard suggested in February when it became apparent that the "angelitos" and the "case studies" had been dropped from the sample scripts we received.
 8. Together with these sample scripts, there is an overview of the points the writers should observe in these scripts that will assist them in their own writing.
 9. A suggested introduction by the narrator that should be recorded and played to pilot audiences before they listen to the test scripts.
 10. A prototype of production timeline.
- 6) De Fossard authored three scripts using the new format (English and Spanish). These were reviewed and "Bolivianized" by the BASICS staff.
 - 7) The meeting with ERBOL representative Sr. Grebe was successful. It was determined that there are great possibilities for support activities before, during, and after broadcasts. The staff of the local radio stations that will be transmitting the serial will be briefed about the importance of the serial and each station will have a special representative appointed to handle the affairs of the program.
 - 8) Review of sample scripts: There was general approval of the scripts; however, cultural adjustments need to be made.
 - 9) The technical director of PROAUDIO Studio is very experienced, particularly in the use of digital recording and editing. It is evident that this method of production is time consuming and expensive. He suggested that a full working day is needed (minimum) for the editing and mixing of each episode, not including the recording.

David Mondacca, the director of actors, has had little experience with radio actors. De Fossard gave him some quick guidelines on the essential elements of radio acting and suggested that Kuncar give him the full set of guidelines (translated into Spanish) with which she was provided.

The musician, Oscar Garcia, appears to be highly competent and has already scored the music for several television programs and a recent nationally acclaimed movie. He seems to have a clear understanding of what is required for the *los angelitos* music and indicated that he will need one month to complete this work.

- 10) A rehearsal was held for one scene of episode #2, with De Fossard giving direction and assistance to the actors. The major suggestions included—
- That they say their lines rather than read them
 - That they take their lines more slowly, and deliberately pause at the end of each sentence
 - That they think about the meaning of their lines while rehearsing and try to convey the meaning more naturally in their presentation

Parts of pilot episode #2 were recorded.

Overall, the performance was highly commendable. The scene in which the case study appeared was recorded. It discussed the death (pneumonia) of a very young child. The actress was asked to present this scene with emotion, but without crying because the validation indicated that the audience had trouble understanding the words when the actors cried. The actress gave a magnificent performance, suggesting that the case studies, when presented in this manner, will be highly effective.

FOLLOW-UP RECOMMENDATIONS

- ▶ The practicability of the date set for the airing of the serial (May 1, 1997) should be seriously reconsidered, due to the number of tasks that need to be accomplished.
- ▶ A realistic timeline needs to be created.
- ▶ The review process needs to be initiated.
- ▶ The validation of the sample scripts with the new format must be executed.
- ▶ The selection of case studies to be used in the serial must be finalized.

- ▶ Determination must be made as to which of the messages need to be included more than once.
- ▶ Changes to the Guía must be finalized, reviewed, and approved before on-going script writing begins.
- ▶ The writer needs to receive a copy of the Guía and adhere to it.
- ▶ A new story treatment by the writer must be completed that will allow for the natural introduction of the case studies.
- ▶ Original music for the serial must be composed.
- ▶ Appointment of a production house and a finalized agreement should be accomplished immediately.
- ▶ “X” number of scripts must be written and approved prior to the commencement of on-going scripting and production.
- ▶ It is recommended that PROAUDIO (if chosen) should adopt the edit-free production methodology which would considerably reduce time and cost without sacrificing quality. The technical editor agreed that he would be willing to try this method, but would appreciate having some hands-on training. There was no time for de Fossard to provide this training during this visit.
- ▶ The facilities at PROAUDIO are, at present, not suitable for drama production. The studio needs to be fully sound-proofed and some carpeting is required. Also, doors to the studio need internal locks to avoid interruptions during recording sessions. We were informed that these matters are being attended to in the next week, and that the studio should be operational within 10–14 days. It is essential that these matters are checked and approved before on-going production begins.

De Fossard’s recommendations on the validation of the new script, the overall evaluation (questionnaire), and the overall series can be found in Appendix G.

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APPENDIXES

APPENDIX A

AGENDA FOR MEETING IN BOLIVIA: WEEK OF MARCH 3-7, 1997

AGENDA PARA BOLIVIA
Visita de Esta de Fossard y Katrina Webster

domingo 2 de marzo

Hrs.

09:00 Llegada a Santa Cruz
Lectura de materiales
Revisión de agenda

lunes 3 de marzo y martes 4 de marzo

Jornada de trabajo con Ana María Aguilar, René Salgado, Carmen Casanovas y Gridvia Kuncar y David McCarthy

martes 4 de marzo

20:30 Viaje a La Paz

miércoles 5 de marzo (La Paz)

09:30 Security Briefing

10:00 Reunión Jorge Velasco y Paul Ehmer, USAID. Confirmado.

12:30 Recreo

15:00 Reunión Gridvia Kuncar, Ana María Guzman, BASICS

15:30 Reunión con el escritor guionista - Juan Recacoechea, Juan Carlos Orihuela, Gridvia Kuncar y Ana María Guzmán.

jueves 6 de marzo

09:00 Reunión Gridvia Juncar, Ana María Guzmán, BASICS

11:00 Reunión con ERBOL - Lic. Ronald Grebe

12:30 Recreo

14:30 Revisión del cuadro comparativo de propuestas de servicios de estudios de grabación

16:00 Reunión con productor y músico, Sergio Claros y Oscar García.
Visita a PROAUDIO.

viernes 7 de marzo

09:30 Reunión con Director de Actores, David Mondacca

11:00 Presentación de informes. Ana María Aguilar, Paul Ehmer, Jorge Velasco,
Carmen Casanovas, Gridvia Kuncar, Ana María Guzmán.

sábado 8 de marzo

Retorno a Washington

APPENDIX B
LIST OF CONTACTS

Appendix B

List of Contacts

Ana Maria Aguilar	BASICS
Carmen Casanovas	BASICS
Sergio Claros	PROAUDIO, Radio Producer
Paul Ehmer	USAID
Esta de Fossard-Nelson	Consultant for BASICS
Oscar Garcia	PROAUDIO, Musician
Ronald Grebe	ERBOL
Ana Maria Guzman	BASICS
Gridvia Kuncar	BASICS
David Mondacca	Director of Actors
David McCarthy	Consultant for BASICS
Juan Carlos Orihuela	Script writer
Rene Salgado	BASICS
Jorge Velasco	USAID
Katrina Webster	BASICS

APPENDIX C

**SUMMARY OF TECHNICAL ASPECTS OF THE RADIO SERIES
"LOS ANGELITOS DE LA VIDA"**

Propuesta elaborada por Ma. del Carmen Casanovas V.

Aspectos técnicos de la Radionovela "Los Angelitos"

I. Aspectos principales del taller técnico

Entre el 19 y 23 de agosto de 1996 se llevó a cabo el taller para la elaboración de la guía del radiodrama "Los Angelitos".

En esa oportunidad, al recapitular los problemas, resaltó el hecho de que 31.4 % de menores de un mes fallecen [70% en la primera semana], identificándose a éste como al principal problema; también se señaló que 87 % de las muertes son evitables. *El problema identificado fue el de la mortalidad de niños menores de cinco años (especialmente de los menores de un mes).*

El proyecto tiene como justificación el *contribuir a disminuir la muerte de los niños menores de 5 años, por medio del uso y aprovechamiento de la radio y de la recuperación del género de la dramatización como recurso del entretenimiento y educación.*

Se han identificado como audiencias para el cambio a la familia y el personal de salud; la primera debe ser sensibilizada sobre la magnitud del problema, ser capaz de cuidar correctamente al niño, demandar más información; en cuanto al personal, debe promover cuidado correcto del niño, abrir canales de comunicación y mejorar la calidez/calidad de la prestación de servicios; el foco primario entre el personal sería la auxiliar de enfermería.

II. Objetivos, propósitos y mensajes identificados

A. Para la familia

1. Incrementar el número de familias informadas sobre dimensión y causas de muerte en menores de 5 años y como prevenirla

El propósito es informar a las familias sobre la problemática de la muerte prevenible y evitable.

Mensajes:

- * la muerte de niños menores de 5 años es grave y nacional
- * cada día mueren más de 50 niños, mueren más de 2 niños cada hora

- * cada uno de nosotros puede hacer algo para evitar estas muertes: prevención y tratamiento con cuidados y acciones adecuados.
- * mueren por: diarreas, neumonías, IRAs, problemas de recién nacido

2. Mayor número de familias reconoce signos de riesgo y actúa adecuadamente

El propósito es enseñar a reconocer los signos de riesgo y cómo actuar en consecuencia.

Mensajes:

- * ante cualquier molestia de su niño actúe adecuadamente, no espere [cuidado pre-natal, control pre-natal, parto asistido+recién nacido, lactancia materna+alimentación complementaria, vacunas, diarreas, IRA]
- * cada niño tiene derecho de que sus padres hagan lo siguiente: asumir responsabilidad del cuidado del niño y buscar ayuda en caso necesario, asistir a CPN al menor 3 veces, mejorar la alimentación de la madre y cuidarse durante el embarazo, que la madre se prepare para el parto y busque asistencia durante el parto, que la familia busque y dé atención adecuada al recién nacido, que la madre asegure la lactancia materna exclusiva y la alimentación complementaria, que la familia asegure que el niño reciba todas las dosis de vacunas durante su primer año, que la familia inicia TRO cuando empieza la diarrea.

3. Mayor número de familias conoce y practica sus derechos y obligaciones en la atención del servicio de salud

El propósito es difundir los derechos y obligaciones y motivar su práctica

Mensajes:

- * Uds. tienen derecho a una buena atención y orientación en los centros de salud, tienen derecho a: ser recibidos, escuchados, atendidos, informados, a preguntar.
- * Ud. tiene la obligación de acudir al centro de salud, de dar toda la información del caso al personal de salud, de cumplir con todas las indicaciones médicas [APRECIAR]

4. Que un mayor número de familias acuda con confianza al centro de salud

El propósito es estimular a los usuarios a que acudan con confianza.

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Mensajes:

- * si llevamos a los niños a los centros de salud, vamos a ayudar a bajar la mortalidad actual del menor de cinco años.
- * hay enfermedades que no se puede tratar en la casa y solamente pueden ser atendidas en el centro de salud.
Signos de riesgo: recién nacido: no lacta-es débil-no llora, llanto débil-está frío o tiene fiebre-está quieto-tiene pus en el ombligo. IRA: tiene dificultad para respirar y alimentarse-respira rápido-se le hunde el pecho al respirar-tiene fiebre. Diarrea: tiene mucha sed-está aburrido-tiene los ojos hundidos-llora sin lágrimas-hace caquita con sangre-tiene fiebre.

B. Para el personal de salud

1. Incrementar el número de enfermeras que conocen habilidades y destrezas de comunicación interpersonal, en la prestación del servicio.

El propósito es demostrar a las enfermeras buenas habilidades de comunicación interpersonal.

Mensajes:

- * que la enfermera sea amable, hable en el idioma de la familia, que hable en lenguaje sencillo, que sepa escuchar.
- * que la enfermera pregunte si la persona ha entendido, que dé la orientación necesaria, que tenga una buena disposición, que salude con respeto, que pregunte qué desea y en qué se le puede servir
[RESPETAR]

2. Aumentar la autoestima de las enfermeras y el respeto por los usuarios.

El propósito es recrear y motivar actitudes y comportamientos de autoestima en las enfermeras, y respeto por los usuarios.

Mensajes:

- * Ud. (enfermera) vale mucho porque con su trabajo está ayudando a reducir la muerte de nuestros niños.
- * los padres la necesitan y confían en Ud. porque les ayuda a cuidar a sus niños.
- * por lo tanto, es muy importante RESPETAR

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3. Incrementar el número de enfermeras que dan más y mejor información correcta sobre salud infantil, estableciendo una buena relación con cualquiera de los miembros de la familia que acude al centro de salud.

El propósito es reforzar y actualizar los conocimientos sobre el manejo adecuado de casos y alentar su práctica y comunicación a las familias, de manera apropiada.

Mensajes:

- * recién nacido: reconocer que es grave y referir
- * IRA: si el niño es menor de 2 meses ver signos de gravedad y referir, si es mayor de 2 meses, respira rápido y se le hunde el pecho tiene neumonía grave, debe darle una dosis de cotrimoxazol, si es mayor de 2 meses y respira rápido tiene neumonía, debe darle tratamiento, explicar a la madre cuando volver de inmediato.
Diarreas: reconocer deshidratación, enseñar a la madre signos de deshidratación, si hay deshidratación enseña a la madre a preparar SRO y aplica el Plan B, en niño muy deshidratado-lo refiere.

C. Para la comunidad

1. Mejorar la organización, movilización y participación de la comunidad en la disminución de la mortalidad de menores de 5 años.

El propósito es: informar a las organizaciones comunitarias sobre la gravedad de la mortalidad de menores de cinco años, enseñar mecanismos de organización y difusión sobre la problemática de la mortalidad de menores de cinco años en organizaciones comunitarias, motivar su participación en el análisis y vigilancia de la reducción de la muerte de menores de cinco años.

Mensajes:

- * la muerte de menores de cinco años es grave y nacional
- * cada día mueren más de 50 niños, cada hora más de 2
- * cada uno de nosotros podemos evitarla
- * mueren por diarreas, neumonías, IRAs, por problemas de recién nacido, podemos prevenir y tratar con cuidados y acciones adecuados.
- * que los subcomités de prensa, propaganda y relaciones públicas u otras aprovechen sus reuniones, ferias, actividades deportivas y sociales para hacer conocer la gravedad de la mortalidad de menores de cinco años y que es posible evitarla.

- * mecanismos de análisis y vigilancia (registro, formación de redes y análisis)
- * importancia de la participación comunitaria en la organización, difusión, análisis y vigilancia de la reducción de la muerte de menores de cinco años.

III. Los tres capítulos piloto

Se han validado tres capítulos (1, 16 y 26) para conocer la reacción de audiencias primarias y valorar la historia seleccionada para la trama de la radio-novela. La validación ha sido hecha en las tres regiones ecológicas del país, con enfermeras, madres y padres.

En relación al capítulo 1, no han existido problemas de comprensión, se ha identificado como un problema al hecho de acudir a un curandero ante problema de diarrea y - en el valle - criticado el creer en 'brujerías', no hubo observación en cuanto al resultado de la consulta en el centro, se captó como mensaje principal el hecho de que no es apropiado acudir al curandero, sin embargo, muy pocos han señalado que 'es una pena que se haya muerto una wawa'.

En el capítulo 16 se ha captado casi todo el contenido de enseñanza en cuanto a manejo de diarreas, hubo mucha reacción de rechazo [por las enfermeras] a la discusión entre enfermeras, al requerir repetir el mensaje educativo casi todas las madres lo hicieron adecuadamente.

El capítulo 26 ha sido captado como de recreación, aunque diferentes grupos han observado la falta de mensaje de salud.

IV. Relación entre la guía y el contenido de la Radionovela

- A. Se plantea contenido de mensajes para cada objetivo, incluso se desarrolla dicho contenido, sin embargo, es difícil 'dar mensajes' bajo la modalidad en que la Radionovela ha sido concebida, podría plantearse el reforzar los mensajes mediante la discusión dirigida [antes del siguiente capítulo o al final del actual], sin embargo, ello exige la organización de grupos de discusión [escuelas, clubes, reuniones comunitarias, etc.-].

Este problema se plantea con:

- la información sobre la gravedad del problema de mortalidad y la forma en que puede reducirse.
- la posibilidad de que la comunidad sepa analizar la magnitud del problema [formación de comités de vigilancia, etc.]

- B. Es necesario reforzar sistemáticamente el comportamiento deseado, en tal sentido parecen muy importantes:
- el control prenatal de la mujer embarazada
 - el parto bajo condiciones seguras [puede ser en el hogar]
 - la atención adecuada del recién nacido [en el hogar, en el servicio]
 - la lactancia exclusiva por 6 meses, la alimentación adecuada del menor de 5 años
 - la necesidad de vacunaciones en el niño hasta el año de edad
 - el manejo adecuado de la diarrea en el hogar
 - reconocimiento de gravedad en IRA y demanda oportuna de atención
 - reconocer signos de peligro en el RN
- C. En cuanto al personal, se refuerza la necesidad de una buena comunicación y manejo adecuado de casos, aunque entre los objetivos la segunda parte no está clara. Este sería un objetivo secundario y el foco principal es la comunidad.

V. **Contenido mínimo por tema**

Cuidado pre-natal

- Necesidad de tener por lo menos 3 CPN, a partir del primer trimestre de embarazo
- Necesidad de que la madre se alimente adecuadamente durante el embarazo
- Necesidad de que la mujer reconozca signos de riesgo y acuda oportunamente al servicio
- La mujer debe tener apoyo/ayuda durante el embarazo, evitando esfuerzos excesivos
- Vacuna TT en la mujer embarazada
- Vitamina A, hierro a la mujer embarazada

Conducta esperada:

Más mujeres embarazadas tienen por lo menos 3 CPN
Más mujeres embarazadas/lactantes reciben un alimento más al día
Resultado: menos neonatos fallecen
 menos mortinatos

Parto

- Atención por persona capacitada (partera, auxiliar, etc.)
- Contacto precoz madre-niño, lactancia inmediata

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- RN: cuidados del cordón umbilical, cuidado de los ojos, abrigo [contacto con la madre], BCG-Polio

Conducta esperada:

Más mujeres son atendidas en su parto por persona capacitada

Más mujeres tienen contacto precoz con su niño (en el hogar o servicio)

Más niños reciben lactancia materna dentro la hora del nacimiento

Resultado: menos neonatos fallecen

más madres amamantan exclusiva/prolongadamente a sus bebés

Recién nacido

- Signos de peligro: no lacta, está débil, no llora, está frío o tiene fiebre, no se ve bien, fiebre, **acudir al centro de salud de inmediato**
- Al trasladarlo: abrigarlo, amamantarlo o darle leche en goteo

Conducta esperada:

Más madres llevan a su niño al centro de salud, ante presencia de un signo de peligro

Más madres cumplen con cuidados mínimos de traslado del neonato enfermo

Resultado: menos neonatos fallecen

más neonatos enfermos son atendidos en servicios de salud

Lactancia materna/alimentación complementaria

- Lactancia exclusiva 6 meses (¿qué significa lactancia exclusiva?, ¿qué puede hacer la mujer trabajadora?)
- Alimentación adecuada desde los 6 meses
- Alimentación familiar desde el año

Conducta esperada:

Más madres amamantan exclusivamente a su niño hasta los 6 meses de edad

Más madres alimentan a su niño de 6-11 meses con tres comidas 'fuertes' y les dan dos sobrealimentaciones al día

Más madres alimentan a su niño de 6-11 meses en su propio plato

Resultado: menos niños tienen desnutrición grave

menos niños tienen infecciones graves

Vacunas

Esquema del PAI: BCG-Polio en RN, DPT-Polio a los 2-4-6 meses, Sarampión al año

Conducta esperada:

Más madres cumplen con el PAI regular

Resultado: más niños tienen esquema completo de vacunaciones al año de edad
menos niños enferman de enfermedades inmunoprevenibles

Diarrea

- Higiene en el hogar (cuidado de los alimentos, uso de agua segura, uso de letrinas/baños, disposición de desechos)
- TRO: lactancia, líquidos, alimentos
- Importancia de la alimentación
- Signos de deshidratación: no puede beber/sed, pliegue, ojos hundidos, irritabilidad/letargia, fiebre, **se debe acudir a un centro de salud**
- Sangre en las heces, **se debe acudir a un centro de salud**
- Diarrea por más de 14 días, **se debe acudir a un centro de salud**

Conducta esperada:

Más familias consumen alimentos/agua bajo condiciones higiénicas

Más madres alimentan adecuadamente a su niño con diarrea

Más madres saben cómo preparar y administrar TRO, más madres usan TRO

Más madres acuden al servicio en caso de disentería o diarrea prolongada

Resultado: menos niños tienen deshidratación grave
menos niños fallecen por diarrea/deshidratación

Neumonía

- Signos de peligro: respiración rápida, tiraje, fiebre, **acudir a un centro de salud**
- NO utilizar medicamentos sintomáticos
- Vaporización/líquidos en el niño con tos

Conducta esperada:

Más madres/responsables acuden al servicio ante signos de peligro de neumonía

Más madres evitan el uso de medicación sintomática

Resultado: menos niños fallecen de neumonía

Comunicación

- Uso de lenguaje sencillo
- Demostrar respeto
- Utilizar principios de buena comunicación/consejería

Conducta esperada:

Más madres/familias vuelven a control de sus niños menores de 5 años
Más madres/responsables cumplen las indicaciones del servicio de salud

Manejo adecuado de casos

- Manejo adecuado de neumonía
- Manejo adecuado de deshidratación
- Manejo de neumonía grave, incluye remisión
- Manejo de deshidratación grave, incluso remisión (si el caso no puede resolverse)
- Recomendaciones generales en cualquier caso: vacunas, vigilancia de crecimiento, vigilancia nutricional

VI. Recomendaciones

1. Sería deseable que gran parte de la trama transcurriera en la comunidad, incluso el personal de salud puede recabar mayor información dentro su misma comunidad, por ejemplo, la enfermera puede enterarse de la reacción de la gente ante la atención en el servicio al interior de su grupo de amigos-relaciones y transmitir ello al servicio; la enfermera podría llevar en algún momento un niño a otro servicio y valorar la calidad de atención en el mismo.
2. Parecería que, para facilitar el proceso en el tratamiento de problemas, la familia motivo de la Radionovela podría tener un menor de cinco años, bien cuidado y que tienda a 'hacer lo correcto', intercambiando experiencias con otras madres o familiares. De no ser esto posible, alguna vecina o amiga muy cercana (la misma madre del capítulo 16) podría ser el caso-índice a partir del cual se repase el manejo adecuado de un niño menor (vacunas, lactancia, manejo adecuado de casos en el hogar).
3. Parece imprescindible organizar debates en momentos-clave y con líderes de grupo, para lograr los objetivos de cambios de comportamiento en comunidad y representantes locales.
4. Sin recargar el contenido, puede irse reforzando la necesidad de un enfoque integral al menor de cinco años (por ejemplo, acude por IRA y se lo vacuna, pesa, etc.)

APPENDIX D

**REVISED TIMELINE FOR THE *LOS ANGELITOS DE LA VIDA* RADIO
DRAMA SERIES**

TAREAS Y ACTIVIDADES MARZO 19 A SEPTIEMBRE 1997

Tarea/actividad	17-21/03					24-28/03					31/03-04/04					07-11/04					14-18/04					21-25/04					28/04-02/05				
	L	M	M	J	V	L	M	M	J	V	L	M	M	J	V	L	M	M	J	V	L	M	M	J	V	L	M	M	J	V	L	M	M	J	V
GUIONIZACION 3 CAPITULOS VALIDACION	x	x	x	x	x																														
UNICEF	x																																		
ERBOL		x																																	
PANEL-REVISION GUIONES					x																														
ELABORACION CONTRATOS C.C. GRIEUSLA- DAVED MONDACCIA-PROAUDIO 3 CAPITULOS	x	x	x																																
CASTING				x																															
TRADUCCIONES AYMARA-QUECHUA				x	x																														
ENSAYOS				x	x																														
GRABACION +(SABADO 22/03						x																													
EDICION Y OCELAS							x	x	x	x	x																								
DISENO DE LA VALIDACION	x	x	x																																
APLICACION DE LA VALIDACION											x	x	x	x	x	x																			
SISTEMATIZACION																	x	x																	
AJUSTES-PANEL																		x																	
CONTRATOS: ESTUDIO, ESCRITOR Y ACTORES GUIONIZACION 5 CAPITULOS											x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x					
COMPOSICION MUSICA-CONTRATO											x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x					
PANEL REVISION 5 CAPITULOS																							x												
PRODUCCION NUEVO MATERIAL DE APOYO																			x	x	x	x	x	x											
DOM-PREPARACION															x	x																			
CURSO EDM- COE- TRINIDAD																							x	x	x	x									
AJUSTES A 5 CAPITULOS																							x	x											
ENSAYOS																							x	x											
GRABACION 9: AL 5: 26-04																																x	x	x	x

BEST AVAILABLE DOCUMENT

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TEC/BASICS/BOLIVIA
G.KUNCAR/A. GUZMAN

Tarea/actividad	5-9/05					12-16/05					19-23/05					26-30/05					2-6-06					9-13/06					16-20/06				
	L	M	M	J	V	L	M	M	J	V	L	M	M	J	V	L	M	M	J	V	L	M	M	J	V	L	M	M	J	V	L	M	M	J	V
VIAJE A CEIC CONFERENCE	X																																		
OHIO CONFERENCE		X	X																																
VACACIONES G.K.				X	X																														
EDICION 1 AL 5 CAPITULOS - CUÑAS	X	X	X	X	X	X	X																												
CALLER ERBOL									X	X																									
PROMOCION -PRODUCCION MATERIAL											X	X	X	X	X	X	X	X																	
ESTRENO																X																			
REPRISE (31-05)																																			
GUIONIZACION 6 AL 10 CAPITULOS	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X																				
PANEL REVISION CAP. 6 AL 10														X																					
AJUSTES														X	X																				
ENSAYOS														X	X																				
GRABACION 6 AL 10 (SABADO 31-05)																		X	X	X	X	X	X	X	X										
EDICION 6 AL 10																							X	X	X	X	X	X	X	X					
CURSO DEM-252											X	X	X	X	X																				
GUIONIZACION CAPITULOS 11 AL 15																X	X	X	X	X	X	X	X	X	X										
PANEL REVISION CAPITULOS 11 AL 15																									X										
AJUSTES																													X	X					
ENSAYOS																															X	X			

IEC-BASICS-BOLIVIA
G. KUNCAR/A. GUZMAN

Tarea/actividad	23-27/06					30/06 4/07					07-11/07					14-18/07					21-25/07					28-01/07-08					11-16/08									
	L	M	M	J	V	L	M	M	J	V	L	M	M	J	V	L	M	M	J	V	L	M	M	J	V	L	M	M	J	V	L	M	M	J	V					
GRABACION CAPITULO 11 AL 15	X	X	X	X	X																																			
EDICION CAPITULOS 11 AL 15						X	X	X	X	X																														
GUIONIZACION 16 AL 20 (19 y 20 /36 mar	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X																									
PANEL DE REVISION CAP. 16 AL 20															X																									
AJUSTES																X	X																							
GRABACION 16 AL 20 SABADO 19-07																	X	X	X																					
EDICION 16 AL 20																					X	X	X	X	X	X	X	X	X	X										
GUIONIZACION 21 AL 25																					X	X	X	X	X	X	X	X	X	X	X	X	X	X	X					
PANEL DE REVISION 21 - 25																																								X

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GUIONIZACION-JUAN CARLOS ORIHUELA-DEADLINES

CAPITULOS	Fecha de entrega	Fecha de Ajustes	Fecha de Pago
3 capítulos validación	21/03	-	31/03
Cap. 1 al 5	18/04	22/04	23/04
Cap. 6 al 10	22/05	27/05	28/05
Cap.11 al 15	13/06	17/06	20/06
Cap.16 al 20	10/07	15/07	18/07
Cap. 21 al 25	7/08	12/08	15/08

ESTUDIO DE GRABACION

CAPITULOS	Fecha de entrega
3 capítulos validación	31/03
Cap. 1 al 5	13/05
Cap. 6 al 10	13/06
Cap.11 al 15	4/07
Cap.16 al 20	4/08
Cap. 21 al 25	1/09

DIFUSION

CAPITULO	FECHA DE ESTRENO	FECHA DE REPRISE
1	28/05	31/05
2	4/06	7/06
3	11/06	14/06
4	18/06	21/06
5	25/06	28/06
6	2/07	5/07
7	9/07	12/07
8	16/07	19/07
9	23/07	26/07
10	30/07	2/08
11	13/08	16/08
12	20/08	23/08
13	27/08	30/08
14	3/09	6/09
15	10/09	13/09
16	17/09	20/09
17	24/09	27/09
18	1/10	4/10
19	8/10	11/10
20	15/10	18/10
21	22/10	25/10
22	29/10	1/11
23	5/11	8/11
24	12/11	15/11
25	19/11	22/11

ACTORES

IEC-BASICS-B
G. KUNZAR / A. GURMAN

GRABACION	FECHAS	PAGO
Cap. 3 validación	22 y 25 /03	25/03
Cap. 1-5	25,26,28,29 y 30 /04	30/04
Cap. 6-10	30 y 31 Mayo. 1,2,3,4 de Junio	1/06
Cap. 11-15	23,24,25,26 Junio	26/06
Cap. 16-20	16,17,18,19 Julio	20/07
Cap. 21-25	13,14,15,16,17 Agosto	18/08

PANELES DE REVISION DE GUIONES

Primer Panel de Revision de Capítulos de validación	21/Marzo 16:00 a 18:00hrs
Reunion de revision de resultados de la validación	11/ Abril.
Cap. 1. al 5	18/Abril
Cap. 6 al 10	23/Mayo
Cap. 11 al 15	12/Junio
Cap. 16 al 20	11/Julio
Cap. 21 al 25	8/Agosto

APPENDIX E

**REVISED FORMAT FOR “*LOS ANGELITOS DE LA VIDA*”
RADIO DRAMA SERIES**

NEW FORMAT FOR "LOS ANGELITOS" RADIO DRAMA

De Fossard explained that soap operas are made up of a main plot and two or three sub-plots. One of the sub-plots should be how to reinforce positive behaviors in a health center. The sub-plot doesn't need to come in every episode.

Suggestion of format by de Fossard:

- 1) **MUSIC** - that expresses beauty and emotion
- 2) **NARRATOR** (Benito) - briefly reminds us with different words every time, that his friend Natalio's life is for his sister who died, and all of the angelitos that can live.
- 3) **PLOT**
 - (1) **Main plot:** How Natalio becomes a soccer star (in every episode)
 - (2) **Sub-plot:** Takes place in a health center
 - (3) **Sub-plot:** Asunta struggling as a street vendor

HOOK (will be resolved later in the program)
- 4) **LOS ANGELITOS**
 - a) Danger sound (very low - not intrusive)
 - b) HOST (speaking): What is wrong? What is the danger?
 - c) Case study (must decide how this will be interpreted) - perhaps with the theme music very softly in the background. Cases might be alternated. (Case study briefly mentioned/referred to in the drama)
 - d) Questions (very simple - Did she take him to the clinic on time? Did she give him SRO?)
 - e) Correct answers (very simple, teaching them something)
 - f) Question again (repeating the questions and answers with reinforcement - ex: What day is it? Monday - that is right, Monday is the right answer.) This is in line with the IMCI initiative of interpersonal communication.
- 5) **STORY** (end with HOOK for next episode)

ERBOL has explained that they must have at least one break during the episode (perhaps after #3 - the Story) which would last approximately 30 - 60 seconds.

APPENDIX F
SAMPLE SCRIPTS THAT INCLUDE NEW FORMAT
AND GUIDELINES

MEMO TO: BASICS

FROM : Esta de Fossard

DATE: March 6, 1997

During this visit to Bolivia, I have given the *Los Angelitos* team, the following texts to assist them in their work:

1. a copy of the Spanish version of *Interactive Radio Instruction: What it is, How it works and How to Manage it*. This is a book produced by the Educational Development Center in Washington D.C., and of which I am a co-author
2. a copy of the draft version of *Radio Serial Drama for Social Development: A Script Writer's Guide*. This is a book I have written for Johns Hopkins University Center for Communication Program (JHU/CCP). It will be published in May 1997
3. a list of test guidelines for pilot-testing enter-educate radio serials (This is contained in the book mentioned in No. 2
4. A set of Guidelines for Radio Actors
5. A set of guidelines and instructions on Edit-Free Radio Production (a method of producing radio serial drama that virtually eliminates costly and time consuming post-editing). These last two sets of guidelines are taken from the forthcoming book *Radio Serial Drama for Social Development: A Program Manager's Guide*. This book also is being produced by JHU/CCP and it is hoped that it, too, will be published by May 1997.
6. A list of Overview Points reminding writers on the most important things to remember when creating serial drama for social development.
7. The draft of three full scripts demonstrating the new format that I suggested in February when it became apparent that the "angelitos" and the "case studies" had been dropped from the sample scripts we received.
8. Together with these sample scripts, there is an overview of the points the writers should observe in these scripts that will assist them in their own writing.
9. A suggested introduction by the narrator that should be recorded and played to pilot audiences before they listen to the test scripts.
10. (KATRINA--there may be also an outline of how the 20 case studies will be spread among the 50 episodes....if we get that far before I leave).

INTRODUCTION TO BE READ BY NARRATOR TO PILOT TEST AUDIENCES.

This should be recorded and played to the test audiences before they hear the test episodes.

Hello...my name is Benito. I am here today to invite you to listen to a story, or rather, part of a story. You will hear two episodes of a story that will be heard on the radio for a full year.

It is a beautiful story--about people whose lives are very much like yours. Sometimes it is a happy story; sometimes it is a very sad story, but always it is an interesting story. And it is a story from which we all can learn--just as we learn from everyday life.

El Zambo Angolita is the story of a young boy--Natalio-- who grows up in very difficult circumstances to become a famous soccer star. Because of a tragedy early in his life, Natalio develops another interest in life: an interest in saving the lives of young children.

I have watched Natalio from the very beginning of his life, and I can tell you he is an extraordinary person-- a special person. I invite you to listen for yourselves and find out what is so special about this young man. From time to time, I shall interrupt the story to talk to you, perhaps to ask you some questions, because I value your opinions and your knowledge. I hope you will join with me and share your knowledge with me.

So now, I invite you to listen to the two episodes of *El Zambo Angolita*.

CREATING THE STORY

A soap opera story

- tells a simple tale of ordinary people
- it deals with day to day events rather than highly dramatic occurrences
- it contains no more than four plots: a main plot and three sub-plots that are individual yet connected
- it relies on EMOTION as much as or more than ACTION to attract and hold the attention of the audience

An enter-educate soap opera is very similar to a regular soap opera except that it contains an educational message as well as an entertaining story. This message must be blended in to the main story naturally, gradually and subtly.

To create a successful enter-educate soap opera the writer should:

- **create an event list:** the writer should make a list of those events that would have to occur in the story in order for the message to be included.
- **develop recognizable characters** based on the type of people the audience knows in every day life. Each character must have a clearly defined personality, which shows in what the character says and does, how he reacts to situations and what others say about him. Even "good" characters must have some human flaw--nobody in this world is perfect and perfect characters are boring to the audience.
- **establish a theme** that resounds throughout the entire soap opera. A theme is a universal truth recognizable by all people at all times--such as love, bravery, hope (positive themes) or hatred, fear, jealousy (negative themes) The theme must suit and support the message, and should be apparent from the very first episode.
- **develop the outline of each of the plots:** usually one main plot and three sub-plots are sufficient for a 50 - 52 episode serial. Each plot must be individual, but all must be linked in a logical way.
- **determine how the message will be included** naturally, gradually and subtly through the three plots. It might be possible to divide the message so that certain parts of it are show in one plot and other parts in other plots.
- **determine the dramatic conflict** of each of the plots. It is the dramatic conflict and the emotion underlying it that keeps the audience interested in the serial. They want to know what is going to happen....who is going to win.... how the characters will overcome their difficulties. Each plot will have its own strong emotional attraction for the audience, but all--in the long run--combine to express the same THEME.

POINTS TO NOTICE ABOUT THIS SCRIPT (#1)

1. Simple story line. Soap opera is supposed to give the impression that we are looking in on the lives of ordinary people. Don't make the mistake of trying to put in too many EXCITING events. Build the suspense and the excitement out of ordinary events.
2. Limited number of characters. Only six characters appear in this episode (apart from the child Natalio--whose cries can be made by one of the adult actors in the studio at the time).
3. The characters have clear personalities, and we see from the start, the possibility of a difficulty or a conflict in the life of each major character. In this episode, we see Francisco as a fairly happy man...proud of his son and his wife, and perhaps a bit of a boaster. There is, however, already a note of tension in his life. He is worried by the fact that the soil is not producing very well, and he is beginning to be a little bit worried about whether or not to move to El Alto.
Jacinto is a sincere man who really wants to make things better for his family. He has trouble with his wife, Luisa who is very bad-tempered and does not seem to be helping him much. He is also faced with a serious problem when his leg is broken and he is no longer able to drive a taxi. (This is a real crisis in his life).
The nurse, Maria, so far seems to have a not very important role in the story--but she will come in again later. She does, however, hint at the THEME of the story--the need for people to be kind to and to help one another.
4. THEME. The theme of helping, kindness and caring begins to show through very subtly in this episode. The theme of "angels" is also hinted at when Jacinto refers to Maria as an "angel".
5. MYSTERY and SUSPENSE. The character of Rodolfo introduces an element of mystery, when he suggests that there is more to Natalio than meets the eye, and when he asks about the children who are calling him Tío Natalio. Rodolfo himself is a mystery at this point, because we do not know exactly who he is. This will become clear gradually as the story develops.
6. Introduction of various plots. The Main Plot (Natalio's story) is introduced, and two sub-plots are brought in. Sub-plot A: The story of Jacinto and Luisa. Sub-plot 2 (only just introduced)--the story of Maria. These three plots will continue throughout the serial, although they will not all necessarily appear in each episode.
7. Transition from one plot to another. Each scene depicts a different plot, but the dialogue at the end of one scene foreshadows or suggests where the next scene will be. This also helps the audience understand how the various plots are linked through certain characters. Each scene is kept fairly short. Each location in the story (Chicaloma, El Alto, etc) has its own transition music, which is played briefly as we move into that scene. This, together with the dialogue at the end of the previous scene, helps the audience know

quickly where the scene is set. All these musical transitions would have some “musical relationship”--they should be part of the one long composition the composer has put together for the serial, but each will be sufficiently different to identify the location quickly.

8. Lay out of script. Notice the following things about the way the script is presented on paper:
 - the cover sheet. Every script should have a cover sheet like this, showing the points identified on this sample
 - the page header. Every page of every script should contain this information
 - line numbering. Each speech and technical instruction is numbered, so the director and the reviewers can refer quickly and accurately to any portion of the script.
 - space between speeches. A double space is left between the end of one speech and the beginning of the next, so that actors will not be confused in reading their lines.
 - technical directions are underlined. Any instructions for the technician (music, sound effects [FX]) are underlined so that the actors will not accidentally read them, and so that the technicians can see quickly where their input is needed.
 - instructions to actors. The writer puts the instructions to the actor in CAPITAL LETTERS in brackets () immediately before the words he wants the actor to say in a certain way
 - no speeches are broken at the end of one page. If the whole speech will not fit on the bottom of the page, then the whole speech must be moved to the top of the next page.

EL ZAMBO ANGOLITA
EPISODE #1
WRITER: E de Fossard
DATE: March 5, 1997

EPISODE OBJECTIVES: After listening to this episode, listeners will

KNOW: that the serial is about the life of a great soccer player, Natalio Angola
that the serial is exciting and emotional
that there is some mystery in the story

DO: plan to listen regularly to the serial
encourage their friends to listen also

FEEL: interested in the story and motivated to listen

CHARACTERS

MUSIC and FX

Sports Announcer	Pg. 1 L.1	Theme Music
Rodolfo	Pg.1. L.3	Theme Music
Francisco	Pg. 1. L.5	Theme Music
Pablo	Pg. 1. L.6	FX:Soccer fans cheering
Jacinto	Pg. 1. L.8	FX:Soccer fans
Luisa	Pg. 1.L.10	FX:Soccer fans
Maria	Pg.1.L.12	FX:Children cheering
Asunta	Pg.1. L.15	FX:Soccer fans
Natalio (4 year old voice. Only a few words. Can be done by another actor in the studio)	Pg. 2. L.4	MUSIC. Chicaloma theme
	Pg. 2. L.6	MUSIC. Chicaloma theme
	Pg. 2. L. 7	FX. Young children playing
	Pg. 3. L.4	FX: Footsteps on gravel
	Pg. 3. L.12	MUSIC. Al Alto music
	Pg. 3. L.13	FX. Car stopping. Car door closing
	Pg. 4. L.11	Car starting
	Pg. 5. L.1	MUSIC: Station Break
	Pg. 5. L.2	MUSIC. Station break
	Pg. 5. L. 4	FX. Screech of car brakes. Thud
	Pg. 5.L.7	FX.Crowd noises
	Pg. 6. L.4	FX. Crowd noises
	Pg. 7. L.11	MUSIC. Chicaloma theme
	Pg. 8. L.11	MUSIC. Closing theme
	L. 13	Closing theme
	L. 15	Closing theme

1. MUSIC. THEME MUSIC. UP :10. FADE AND HOLD UNDER:
2. ANNOUNCER: *El ZAMBO Angolita*, by (writer's name)
3. MUSIC. THEME MUSIC UP :05. FADE AND HOLD UNDER
4. ANNOUNCER: *El ZAMBO Angolita* is brought to you by el proyecto BASICS y escuelas Radiofonenicas de Bolivia, ERBOL.
5. MUSIC. THEME MUSIC UP :05. FADE AND CROSS TO
6. FX. SOUNDS OF SOCCER GAME IN PROGRESS. VERY EXCITED AUDIENCE CHEERING. ETC.
7. VOICE OF SPORTS ANNOUNCER: Ladies and gentlemen, the excitement here is overwhelming. you've never seen such a crowd. Everyone is here to watch the spectacular match between the STRONGEST and (name of other team)....
8. FX. ROAR OF CROWD GREETING FAVORITE PLAYER.
9. SPORT ANN: (AT FEVER PITCH) and here he is ladies and gentlemen, the Man we've all been waiting for...the one...the only... Natalio Angola. (and give nick name)
- 10 FX. GREAT ROAR FROM CROWD. FADE FX DOWN AND GRADUALLY OUT UNDER
RODOLOPHO
- 11 RODOLPHO: The great Natalio Angola...What a man. What a soccer player...possibly the greatest soccer player Bolivia has ever known. But who is this man Natalio? Is he just the greatest soccer player of all time, or is there more to him than meets the eye?
12. FX. SOUND OF CHILDREN CHEERING AND CALLING "UNCLE NATALIO."
13. RODOLPHO: And who are those children in the stand there? Why are they calling him Uncle Natalio? They look so happy....so healthy... so excited.
14. SPORT ANN: (LOUDLY) And now, the game is about to begin...
15. FX. ROAR OF CROWD

1. RODOLFO: Stop!

2. FX. CROWD NOISE STOPS ABRUPTLY

3. RODOLFO: Let the game wait awhile. I want to tell you something..something you should know about this great Natalio. My name is Rodolpho and I have known and watched Natalio all his life.

4. MUSIC. CHICALOMA VILLAGE TRANSITION MUSIC BEGINS SOFTLY

5. RODOLFO: Come with me to the village of Chicaloma where Natalio is just a little boy of four years old....

6. MUSIC. CHICALOMA VILLAGE TRANSITION MUSIC . UP. 05. CROSS FADE TO:

7. FX. VILLAGE SOUNDS MIXED WITH SOUNDS OF YOUNG CHILDREN PLAYING.

8. FRANCISCO: (PROUDLY) Hey, look at that kid will you? That's my Natalio. Just look at him run!

9. PABLO: (LAUGHING) Francisco, you are a boaster. Your boy runs like that because you chase him so much. (LAUGHING) He learned to run by running away from you!

10. FRANCISCO: You're just jealous, Pablo. Your boy is six years old and he is not as strong as my Natalio who has only just turned four. (CALLING) Go, Natalio, go... Get that ball, son. Hey, look at that, Pablo. Just look at him go.

11. PABLO: His legs go almost as fast as his mouth does. I've never known a four year old who can talk so much....That much I can vouch for.

12. FRANCISCO: That just shows how smart he is.

13. PABLO: All right, so he's not bad for a four year old. So, you're a lucky man. You have a smart son.

14. FRANCISCO: And another one on the way, remember. My wife will give birth very soon now....to our second son....and you see, he'll be...

15. PABLO: (INTERRUPTING) How do you know it will be a son?

EL ZAMBO ANGOLITA

Pagina 3 de 8

Episodio #1

Fecha: 4 de Marzo 1997

Escritor:

1. FRANCISCO: Of course it will be a son. A man like me....(BOASTFULLY) I want sons. I have sons!

2. PABLO: We'll see. So, you can stay and watch your four-year-old being brilliant if you like. I have work to do.

3. FRANCISCO: Me too. I'll walk with you to the field.

4. FX. SOUNDS OF TWO SETS OF FOOTSTEPS ON GRAVEL. HOLD SOFTLY UNDER DIALOGUE

5. FRANCISCO: Things are getting really tough around here. The soil seems to get worse every day....nothing's growing very well.

6. PABLO: Are you still thinking of moving to El Alto?

7. FRANCISCO: I don't know. I hate to leave Chicaloma. It's been our family home for ...forever.

8. PABLO: Your wife wants to go, doesn't she?

9. FRANCISCO: Yes. Asunta seems to think it might be better in El Alto... She thinks maybe she could find some sort of job there. There's nothing she can do here. But, I don't know....Well, at least we don't have to think about it until after the baby is born.

10. PABLO: (JOKING) The famous second son!

11. FRANCISCO: (LAUGHING) Yes, the famous second son. Hey, second sons are O.K.. I'm a second son remember. It's my older brother, Jacinto who's trying to get rich in El Alto.

12. MUSIC. EL ALTO TRANSITION MUSIC

13. FX. SOUND OF CAR STOPPING. DOOR SLAMMING

14. JACINTO: (OFF. COMING IN. EXHAUSTED) Whew....what a day.



15. LUISA: How many passengers did you have today, Jacinto?

16. JACINTO: (DEPRESSED) One.

EL ZAMBO ANGOLITA

Episodio #1

Escritor:

Pagina 4 de 8

Fecha: 4 de Marzo 1997

-
1. LUISA: (ANGRY) One?..One? Jacinto, you're mad. How can we make a living with the money from one passenger?
2. JACINTO: It's not my fault, Luisa. There are too many taxis in El Alto. And not enough people who can afford to take a taxi.
3. LUISA: So why, may I ask did you go into the taxi business?
4. JACINTO: What else was I supposed to do? I can't grow any crops. We don't have even two centimeters of our own land. So what I am supposed to do?
5. LUISA: (DEPRESSED) Oh, I don't know. It's so awful. We have no money. We have no land. We have three children and no beds...no chairs for them....or clothes.... or food. We'll never make a living here.
6. JACINTO: What happened to your idea of trying to set up a stall on the street...to sell matches and things like that.
7. LUISA: (ANGRY AGAIN) I'm scared. It's all very well for you. You're a man.... a big man.... people are afraid just when they look at you. But what's going to happen to me? (BECOMING HYSTERICAL) Out there on the street with all those thieves and murderers....and me all alone. You don't care what happens to me, do you, Jacinto?
8. JACINTO: (TRYING TO CALM HER) Of course I care, Luisa. You know I do. I have an idea. I'll get in touch with Francisco again and try to persuade him to come and join us. Then you and Asunta could work together. Maybe Francisco and I can build up a good taxi business together.
9. LUISA: How can you build up a taxi business when you have no passengers.
10. JACINTO: Well at least I have a taxi.
11. FX. SOUND OF A CAR STARTING UP RAPIDLY AND NOISILY
12. JACINTO: (SCREAMING) Hey!

52

13 LUISA: What? What's happening?

14. JACINTO: (YELLING AND RUNNING OFF) Hey...that's my taxi... Come back!

EL ZAMBO ANGOLITA

Episodio #1

Escritor:

Pagina 5 de 8

Fecha: 4 de Marzo 1997

1. MUSIC. MUSIC FOR STATION BREAK OR COMMERCIAL

STATION OR COMMERCIAL BREAK

Finishing with the words "And now let's return to El Zambio Angolita"

2. MUSIC.EL ALTO TRANSITION MUSIC

3. JACINTO: (OFF. CALLING LOUDLY) Stop! Stop!

4. FX. SCREECH OF BRAKES. A DULL THUD. (JACINTO HAS BEEN HIT BY THE CAR)

5. LUISA: (SCREAMING) Jacinto. Oh my God, Jacinto. He's been hit. (CALLING LOUDLY) Stop that man.... he ran into my husband. Stop him from running away. (BREATHLESS) Jacinto.... Jacinto....are you all right?

6. JACINTO: (GROANING) My leg....oh my leg....My taxi...Where's my taxi?

7. FX. GENERAL NOISES OF PEOPLE CROWDING ROUND ASKING WHAT'S WRONG.

ETC. HOLD UNDER

8. LUISA: It's all right. He left the taxi. He ran away. But you....

9. JACINTO: I'm....(GROANING) I think I'm all right. (PAINFULLY) Help...me...get...up.

10. MARIA: (OFF) No...no, don't get up.

11. LUISA: (ANGRY) Get out of the way. Of course he's got to get up. He can't lie in the middle of the road. Come on, Jacinto.

12. MARIA: No, please stop. I'm a nurse...My name's Maria and I'm telling you, don't move him please. Stand back everyone, please.

13. LUISA: Oh you want him to lie here so he can get run over again.



14. MARIA: (PATIENTLY) No, no please listen. Let me see what is wrong first. if you move him you might makes things worse.
15. LUISA: I can't afford to pay you.

EL ZAMBO ANGOLITA
Episodio #1
Escritor:

Pagina 6 de 8
Fecha: 4 de Marzo 1997

-
1. MARIA: I don't want to be paid, I just want to help.
2. JACINTO: (IN PAIN) Let her help, Luisa.
3. LUISA: (GRUDGINGLY) All right.....but remember, I can't pay you anything.
4. FX. NOISE OF PEOPLE PUSHING AND ASKING QUESTIONS
5. MARIA: Stand back everyone, please. Now senor....what's your name?
6. JACINTO: Jacinto ?? Oh, the pain is awful.
7. MARIA: I'm probably going to make it a bit worse... I must feel your leg and see where the trouble is.
8. JACINTO: (GROANING WHILE MARIA FEELS HIS LEG)
9. MARIA: So, it's broken, but it isn't too bad. You're lucky that driver wasn't going too fast.
10. JACINTO: (MISERABLY) He was driving MY taxi. Did he ruin it?
11. MARIA: There's a dint on the front fender where he hit you...but it looks O.K. otherwise.
12. JACINTO: Let me have a look.
13. MARIA: No...no, you mustn't stand on that leg. We must get you to the hospital so the doctor can set that leg.
14. LUISA: How are we supposed to get him to the hospital?
15. MARIA: I'll find a taxi.

16. LUISA: I can't afford a taxi.
17. JACINTO: I've got my own taxi.
18. LUISA: But you can't drive it.
19. MARIA: (TO LUISA) Can you drive, ma'am?

EL ZAMBO ANGOLITA
Episodio #1
Escritor:

Pagina 7 de 8
Fecha: 4 de Marzo 1997

1. LUISA: Of course not.
2. MARIA: Well....perhaps I....
3. JACINTO: Yes...yes...it's easy... I can tell you what to do...
4. LUISA: And what about me? Am I supposed to come with you?
5. JACINTO: You'd better stay and look after the children. I'll come back as soon as they fix my leg.
6. LUISA: And then what are you going to do? How are you going to drive the taxi with a broken leg?
7. JACINTO: Oh my God... I didn't think.....oh...what am I going to do?
8. MARIA: Right now, you're going to go to the hospital. Come on, I'll help you up.
9. JACINTO: (PAINFULLY) You're very kind, Maria. I don't know why you're helping me. You don't know me. You're an angel.
10. MARIA: (STRUGGLING TO HELP JACINTO INTO THE CAR) I'm a nurse. It's my.....job to help people.....Anyway, we're put on this earth to.....help each other aren't we? Someone will help you with your taxi,I'm sure.
11. MUSIC. CHICALOMA VILLAGE TRANSITION MUSIC.
12. PABLO: (CALLING OFF) Francisco.....hey Francisco.....hurry up.
13. FRANCISCO: What? What's the matter Pablo? Is it Asunta?

14. PABLO: No, it's telephone call...in ??? (Question: Where would the telephone be in the village?)
15. FRANCISCO: A telephone call.....for me.... Who is it?
16. PABLO: I think it's Luisa. Asunta is talking to her.. But you'd better come too.
17. JACINTO: (WORRIED) Luisa!....Is something wrong? (GOING OFF) I'm coming.
18. NATALIO: (CHILD) Mama, mama, mama...(Continues through next speech)

EL ZAMBO ANGOLITA

Episodio #1

Escritor:

Pagina 3 de 8

Fecha: 4 de Marzo 1997

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1. ASUNTA: (ON TELEPHONE) Well, perhaps he can... I'll ask.....oh he's here now. Francisco, it's..... quiet, Natalio. Please, no talking now.
2. FRANCISCO: Hey, Asunta, What's the matter with Jacinto?
3. ASUNTA: He's all right, but Luisa wants to know if you could help by driving the taxi for a few weeks...
4. FRANCISCO: Let me talk to her....
5. NATALIO: (INSISTENT) Papa, papa, papa. ..
6. FRANCISCO: Natalio. Shh. You talk to much. So, Luisa....Is he all right? (PAUSE) The taxi.... Well, I don't know..... I think...
7. ASUNTA: (GROANS) oh..... oh
8. FRANCISCO: Asunta....what?
9. NATALIO: (DISTRESSED) Mama.....Mama
10. ASUNTA: Oh....it's the baby... I think the baby's coming....
11. MUSIC... CLOSING MUSIC BEGINS. HOLD UNDER
12. RODOLFO: Natalio Angola. His little life seemed happy until that moment so many years ago. Little did he know..... Little did anyone know what was about to happen to change forever the life of El Zambio Angolita

13. MUSIC. CLOSING MUSIC UP: 05. FADE UNDER

14. ANNOUNCER: And so ends today's episode of El Zambio Angolita. Listen again at this same time next week...and ask your friends to listen with you. El Zambio Angolita has been brought to you by el proyecto BASICS, y Escuelas Radiofonicas de Bolivia, ERBOL.

15. MUSIC. CLOSING MUSIC TO END

NOTES ON EPISODE #2

Please note that it is impossible for me to write a script that is culturally appropriate to Bolivia. I am not a Bolivian. Please adjust the script as necessary to suit the culture.

There may be more information that needs to be included about pneumonia. I do not know all the details that should go in here.

Please feel free to change the names of the characters if I have mixed them up. There were so many characters in the original scripts that I had trouble remembering who is who.

EL ZAMBO ANGOLITA
EPISODE #2
WRITER: E de Fossard
DATE: March 5, 1997

EPISODE OBJECTIVES: After this episode, the listeners will

KNOW: - that rapid breathing in a baby is a sign of pneumonia
 - (please include any other signs that should be included here)
 - that when these signs are seen the baby should be taken IMMEDIATELY to a
 hospital or clinic for treatment

DO: - watch for signs of rapid breathing in a baby
 - watch for the other signs (list them if there are other signs)
 - take the baby to a clinic or hospital for treatment immediately any of these signs
 are noticed
 - advise other family members and friends and neighbors of what they have
 learned about the signs of pneumonia and what to do if these signs appear

FEEL: Moved by the story of what happened to Angelica, and motivated to do their best
 ensure that it does not happen to other babies.

CHARACTERS:

MUSIC AND FX LIST

Announcer
Rodolfo
Francisco
Pablo
Asunta
Jacinto
Luisa
Maria
Messenger's Voice
 (Can be played by another character)
Natalio (only a few words. Can
 be played by a nother character)

1. MUSIC. THEME MUSIC. UP :10. FADE AND HOLD UNDER ANNOUNCER:

2. ANNOUNCER: *El Zambio Angolita*, by (writer's name)

3. MUSIC. THEME MUSIC UP :05. FADE AND HOLD UNDER

4. ANNOUNCER: *El Zambio Angolita* is brought to you by el proyecto BASICS y escuelas Radiofonenicas de Bolivia, ERBOL.

5. MUSIC. THEME MUSIC UP :05. FADE AND CROSS TO

6. RODOLFO: Natalio Angola. This is the story of Natalio Angola, the famous Bolivian soccer star, whose life was more than soccer. Natalio Angola, the special person whose life I have watched from the very beginning. In our last episode, little Natalio was a happy, active, talkative four-year-old. His father was struggling to make ends meet and his mother was expecting her second child. His uncle Jacinto in El Alto suffered a broken leg and wanted help from Natalio's father to run his taxi. At one point in today's episode, you will hear this sound:

7. FX. DANGER SIGNAL

8. RODOLFO: That sound is very important. When you hear it, listen especially carefully. See if you know the answers to the questions that come after it. But now, let us go back to Chicaloma.

9. MUSIC. CHICALOMA THEME...05: FADE and MIX WITH

10. FX. GENERAL NOISES; NATALIO IS CRYING AND CALLING "MAMA, MAMA". ASUNTA IS GROANING WITH BIRTH PAINS. NATALIO'S CRIES SONTINUE THROUGHOUT SCENE.

11. FRANCISCO: (VERY WORRIED) What is happening here? Oh my God, Asunta...what?

12. ASUNTA: The baby.....the baby is coming.

13. FRANCISCO: (FRANTIC) It's too early....It can't be...

14 ASUNTA: (CALM BUT IN PAIN) The baby IS coming. We must get to the birth attendant...

1. FRANCISCO: Oh yes, quicky. Natalio, please be quiet. Your Mama is all right... Oh, Luisa...I forgot (TALKING INTO TELEPHONE) Luisa... I'm sorry. I must go, Asunta is having her baby....(PAUSE) What? I don't know... I don't know what you can do about the taxi... I must go... I'll try to do something.

2. FX. HANGING UP TELEPHONE

3. FRANCISCO: (GENTLY EVEN THOUGH HE IS WORRIED) Natalio...my son... stop crying. Your mama is going to be all right. She is going to give you a baby brother.

4. NATALIO: (TRIES TO CHOKE BACK HIS TEARS)

5. FRANCISCO: Please, someone help me get Asunta home... and someone, please go for the midwife.

6. VOICE: I'll go. I'll get her.

7. ASUNTA: The pain has passed a little. Let me walk while I can. I am so worried about Luisa. She said Jacinto will not be long in the hospital, but how can she manage if there is no one to drive his taxi?

8. MUSIC. EL ALTO TRANSITION MUSIC

9. LUISA: (UPSET. ALMOST ANGRY) So, what are we going to do, Jacinto? You've been home from the hospital for four hours and still we have no answer to our problem.

10. JACINTO: (PATIENTLY) I am trying to think of a solution, Luisa. The doctor at the hospital said I will not be able to drive for six weeks.

11. LUISA: Six weeks. We will all be dead by then. And that brother of yours...that Francisco....he was no help.

12. JACINTO: He has his own problems, Luisa. His wife is giving birth to their second baby.

13. LUISA: So? I have had three babies and you were not there. Having babies is women's business. It is not the work of men.

14. JACINTO: But it is good for a husband to be with his wife and help her at that time.

EL ZAMBO ANGOLITA

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Episodio # 2

Fecha: 5 de Marzo 1997

Escritor: E. de Fossard

1. LUISA: But you and me...WE are the ones who need help right now.
2. JACINTO: We all need help sometimes. And perhaps there is a way we can help ourselves. We have a little bit of money put aside to buy some clothes for the children...perhaps we could spend that on some supplies...
3. LUISA: And let the children go naked.
4. JACINTO: (PATIENTLY) No. We could buy some supplies and open a small stall. I could help you work in the stall while my leg is bad.
5. LUISA: We won't earn much money from such a stall...
6. JACINTO: Perhaps not, but it will be better than nothing...and perhaps.
7. VOICE: (OFF CALLING) Jacinto....Is there a senior Jacinto here?
8. JACINTO: I am senior Jacinto. Who are you?
9. VOICE: Just a messenger...somebody sent you this note...on the bus ...from Chicaloma. Good day, sir.
10. JACINTO: Thank you.... thank you very much. It must be....yes, it is...it's from Francisco. I wonder what his news is.
11. MUSIC. CHICALOMA TRANSITION THEME
12. PABLO: So, Francisco, I heard the good news... Your wife gave birth to your new baby yesterday. But...its' not a boy, I hear.
13. FRANCISCO: A boy? Why would I want a boy, Pablo? I already have a son, and now I have the most wonderful little daughter in the whole world. She is so beautiful.
14. PABLO: And your wife is well?
15. FRANCISCO: Asunta is fine. It was a good birth...everything went without trouble.
16. PABLO: Thank God.

1. FRANCISCO: Yes, thank God indeed. I think God has been good to me. But not so good to my brother, Jacinto. He is in trouble with that broken leg. I sent him a message that I will try to join him in a few days and help with his taxi.
2. PABLO: You might as well go to El Alto. Nothing's happening here. There's no rain, and nothing's growing. I am getting really worried, Francisco. We will have no crops to sell, and what will we live on then?
3. FRANCISCO: Yes, it is very bad. Perhaps when I go to El Alto, I can look around to see if there is something there to do that would give us a better life than we have here.
4. PABLO: So when will you go?
5. FRANCISCO: In a few days when Asunta is feeling strong again.
6. ASUNTA: (COMING IN) Asunta is already feeling fairly strong again. I have to be strong again. There is a lot to do if you are going off to El Alto in a few days. And I have two children to care for now....there's no time to sit around.
7. FRANCISCO: How is the baby? How is our little Angelica?
8. ASUNTA: She is fine. She's fast asleep....and Natalio is sitting beside her. He won't leave her side. He seems to think she is the most beautiful thing in the world. He calls her Angelita.
9. FRANCISCO: (SMILINGLY) That's nice...I like that... Angelita. He'll probably teach her to play soccer by the time she can walk. She is a lucky little girl to have Natalio as her brother.
10. ASUNTA: And we are lucky to have two healthy children. I pray to God they will stay that way.

11. MUSIC. STATION ANNOUNCEMENT MUSIC

BREAK FOR STATION ANNOUNCEMENTS
ending with the words,
"And now, let's go back to the story of El Zambio Angolita"

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12. MUSIC. STATION ANNOUNCEMENT MUSIC

EL ZAMBO ANGOLITA
Episodio # 2
Escritor: E. de Fossard

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Fecha: 5 de Marzo 1997

1. NATALIO: (OFF CALLING) Mama....Mama.....Mama...Angelita..
2. ASUNTA: All right, Natalio. I'm coming. The baby probably needs to be fed.
3. FRANCISCO: And I need to go back to work. I'll go to El Alto in three days.
4. PABLO: And while you're there see if you can find some work for us. I really don't like the look of things around here. Surely life in El Alto would be better than this.
5. FRANCISCO: Well, I'll find out in three days.

6. MUSIC. EL ALTO TRANSITION THEME

7. FX. DOOR BANGING

8. LUISA: (CALLING OFF) Is that you, Jacinto?
9. JACINTO: (OFF) Yes...He wasn't there.
10. LUISA: What do you mean he wasn't there? That message he sent four days ago said he would come today. Did you go to the right bus stop?
11. JACINTO: There's only one bus stop, Luisa. And there's only one bus from Chicoloma....and he wasn't on it.
12. LUISA: Just like Francisco. That brother of yours never was very reliable.
13. JACINTO: That's not quite fair, Luisa. Francisco usually does what he says he will do.
14. LUISA: Except when it comes to helping us. What are we going to do if Francisco isn't here to drive the taxi? You can't drive it and I can't drive it, so what do we do ?
15. JACINTO: Tomorrow we will pick up the supplies for our stall....perhaps that will help. But I'm worried about Francisco. I hope he's all right.

16. FX. KNOCK AT THE DOOR

EL ZAMBO ANGOLITA

Episodio # 2

Escritor: E. de Fossard

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Fecha: 5 de Marzo 1997

1. LUISA: Who's there?
2. MARIA: It's me. Maria,....the nurse.....you remember?
3. JACINTO: (PLEASED) Maria....please come in.
- 4.. MARIA: I just came by for a moment to see how you are. I have been thinking about you. How is the broken leg feeling?
5. JACINTO: Not too bad. It's more of a nuisance to me than a pain. It is so good of you to come by.
6. MARIA: Did you find someone to help with your taxi?
7. LUISA & JACINTO SPEAK AT THE SAME TIME:
 LUISA: Of course not
 JACINTO: We're not sure yet.
8. MARIA: Well come and see me when you find someone... or when you can drive again. I spoke to the manager of the hospital and he said there is always a need for taxis around there. He said you should come and speak to him.
9. JACINTO: Oh thank you. That is very kind of you.
10. MARIA: I must go now....but I shall try to see you again soon. (GOING OUT)
 Good-bye Jacinto. Good-bye, Luisa
11. BOTH: Good bye.
12. LUISA: So--what is going on between you two?
13. JACINTO: What is.....oh, Luisa, how can you say such a silly thing?
14. LUISA: I saw the way you looked at each other. And why did she bother to come all the way over here to see you? I know the signs... I know what's going on.
15. JACINTO: Oh, Luisa, don't be foolish. I am not that kind of man. You know that. There is nothing going on.

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1. LUISA: We'll see.
2. JACINTO: But I do wonder what's going on with Francisco. I am very worried about him. I do hope there is nothing wrong in Chicaloma.
3. MUSIC. CHICALOMA TRANSITION THEME
4. FX. SOUND OF NATALIO CRYING AND CALLING THE NAME "ANGELITA" SEVERAL TIMES
5. FRANCISCO: There, there, Natalio. It is all right. Your little sister is having some trouble breathing....but she will be all right. Babies often have troubles in the first few days of their life...
6. FX. DANGER SIGNAL SOUND
7. FRANCISCO: I'm sure she will be all right.
8. MUSIC. CASE STUDY MUSIC STARTS SOFTLY AND IS HELD UNDER RUDOLFO
9. RODOLFO: But little Angelica, just five days old, was not all right. She died in her mother's arms. Asunta is telling us. Listen, and see if you recognize the danger signs that Asunta did not know about because no one had told her. Listen and see if you know why little Angelica died.
10. MUSIC. CASE STUDY MUSIC CONTINUES UNDER ASUNTA
11. ASUNTA: (IN A STEADY BUT MOVING VOICE ASUNTA GIVES THE 'CASE STUDY' OF HOW ANGELICA DIED OF PNEUMONIA. SHE STRESSES THE PNEUMONIA SIGNS SIMPLY AND CLEARLY, AND SHE FINISHES WITH THE WORDS "MY LITTLE ANGELITA")
12. MUSIC. CASE STUDY MUSIC CONTINUES SOFTLY A FEW SECONDS
13. RODOLFO: Yes, a little angelita indeed. There are too many such angelitos in Bolivia. Too many babies who die. And so often it is only because their parents have not been given the information they need to keep them alive. Tell me, what was the first sign that Angelica had pneumonia? (Repeat the question in Quetcha and Aymara)

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14. ***PAUSE FOR LISTENER RESPONSE***

EL ZAMBO ANGOLITA
Episodio # 2
Escritor: E. de Fossard

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1. RODOLFO: Rapid breathing (repeat in Quetcha and Aymara), That is right. Tell me, what must we do if a baby or a child has this rapid breathing?

2. ***PAUSE FOR LISTENER RESPONSE***

3. RODOLFO: Take the baby to a hospital or clinic IMMEDIATELY for treatment. (Repeat in Quetcha and Aymara) That is right. We must all remember that. We must all make sure that all our family members and all our friends know that, so that little babies do not have to die of pneumonia. Angelica, the precious angelita died, but she did not have to die in vain. Let us be sure that because of her death other babies stay alive. Let us all become guardians of Bolivia's babies and keep them alive.

4. MUSIC. CASE STUDY MUSIC PLAYS SOFTLY FOR A 20 SECONDS. CROSS TO CHICALOMA MUSIC BRIEFLY.

5. PABLO: (SADLY) I do not know what to say to you my friend. My heart breaks for you.

6. FRANCISCO: Now my little Natalio will be more precious to me than ever.

7. NATALIO: (OFF. COUGHING) Papa.....(MISERABLY) Papa.....

8. FRANCISCO: Natalio. Oh, my God. not you, too. (HEARTFELT) Natalio!

9. MUSIC. CLOSING MUSIC. HOLD UNDER RODOLFO

10. RODOLFO: Natalio Angola. His baby sister died a tragic death and now his own life is under threat. Will it be that the death of his sister will be the cause of his own life being saved? And could it be that the effect of the death of that precious angelita will extend way beyond the little village of Chicoloma?

11. MUSIC. CLOSING MUSIC UP: 05. FADE UNDER

12. ANNOUNCER: And so ends today's episode of El Zambo Angolita. Listen again at this same time next week...and ask your friends to listen with you. El ZamboAngolita has been brought to you by el proyecto BASICS, y Escuelas Radiofónicas de Bolivia, ERBOL.

11. MUSIC. CLOSING MUSIC TO END

APPENDIX G

***RADIO SERIAL DRAMA FOR SOCIAL DEVELOPMENT: A
SCRIPTWRITER'S MANUAL
ESTA DE FOSSARD***

CHAPTER 10 - "TESTING THE PILOT PROGRAMS"

CHAPTER TEN TESTING THE PILOT PROGRAMS

Learning Objectives

- To understand the importance of pilot programs.
- To appreciate the importance of the writer being present at the pilot program tests.
- To know the five main areas of pilot testing that are significant for the writer.
- To know how to use the "Eight Ps" of effective enter-educate programming to check program revisions following pilot testing.

Exercise

After reading this chapter, assemble a pilot program test questionnaire for your audience, based on the questions suggested in this chapter and covering the five areas of importance to the writer. Use the questionnaire to test one or two of your completed episodes on a sample audience.

Compile the results of the tests and determine what revisions are needed to bring the scripts up to a more acceptable standard.

CHAPTER TEN TESTING THE PILOT PROGRAMS

Topics in This Chapter

- The importance of pilot programs
- The purpose of pilot scripts
- Five areas to be tested
- The Eight Ps of effective enter-educate programs

The Importance of Pilot Programs

Pilot programs guide the construction of future programs in the same way that a coastal pilot guides a ship in and out of port. Their purpose is to ensure that the story ideas and message presentation prepared by the design team and incorporated into the script are appropriate and likely to be successful. During pilot tests—which take place before full-time script writing and production begins—a sample audience listens to pilot programs created especially for the testing process and then responds to written questionnaires or participates in focus group discussions.

Even before formal pilot testing is done, some writers like to try out ideas on representative members of the audience. This type of testing does not require the scripts to be recorded on tape. Instead, the trial scripts can simply be read aloud to the audience, either by the writers themselves—if they are good readers—or by a couple of actors.

The program manager and the evaluation team decide when, where, and how to test the pilot programs on a formal basis. While the writers of pro-social drama are not expected to be experts in evaluation, they should be present during the tests and should join the evaluation team in interpreting the results. This lets them see firsthand how well their scripts meet the needs of the audience and of the project designers.

It is usually necessary to test only three or four programs if the writer fulfills these three important obligations while writing:

- Becoming well acquainted with the audience,
- Consistently using the Writer's Brief as the foundation for plot and message development, and
- Structuring the plots, characters, and settings of the serial correctly.

The pilot scripts, however, should not be limited to the first few episodes in the serial, because the story in these early episodes has not advanced very far and the message has only just been just introduced. Instead, pilot scripts should be drawn from different parts of the scope and sequence list, for example, episodes 1, 20, and 35 of a 52-episode serial. Pilot tests also can be used to try out two or three different interpretations of the story or message presentation to determine which approach is most attractive and appropriate to the audience.

If a serial has been well designed and well written, the pilot tests never should result in the need for major re-thinking or re-writing. Rather, the episodes tested will detect the need for minor changes, which will enhance the ability of the serial to promote social development.

The Purpose of Pilot Scripts

Pilot scripts are written especially to:

- Introduce the major characters and the central uniting character, to be sure that they are acceptable to the audience and that the audience is likely to trust and believe in them—especially the central uniting character;
- Convey some particular aspect of the message in two or three different ways to be sure that the audience can understand and appreciate the message; and
- Demonstrate the type of emotional involvement and dramatic suspense that listeners can expect in forthcoming episodes.

Five Areas to be Tested

The evaluation team probably will prepare the final questionnaire or discussion guide for the pilot test. Understandably, the evaluators' focus is on whether or not the audience has understood and absorbed the program's message. The writer, however, should ensure that these five other areas are covered:

1. **Do the listeners accept the program?** Do they believe that the program was designed and is appropriate for people just like themselves?
2. **Do the listeners understand the program,** including the progress of the story, the meaning and importance of the message, and the language used?
3. **Do the listeners trust the program?** Do they feel that the characters in the drama can be accepted as reliable authorities on the subject being discussed?
4. **Are the listeners attracted to the story?** Do they genuinely want to hear more of it?

5. **Do the listeners appreciate the program, both the story and the message?**

To gather detailed information on these five vital points, pilot tests—whether they take the form of focus group discussions or written questionnaires—can include some or all of the following questions:

1. **Does the audience accept the program?**

- Do you think this program is about people who live in a community like yours, or is it about total strangers?
- Do you think it is more suitable for men or for women?
- What age people do you think would enjoy this serial: people of your age or people of a different age?
- Do any of the characters in the story remind you of anyone you know? Who?
- Did any of the characters in the story say or do anything that you think would offend or upset any of your friends and relatives?

2. **Does the audience understand the story and the message?**

- What are the names of some of the characters and what are they like?
- What is happening in the story so far?
- What do you think is likely to happen next in the story?
- What do you think might happen eventually?
- Was there any part of the story that seemed foolish or unbelievable to you or anything that you did not understand?
- In one episode of this story, the people of the community will be faced with an AIDS epidemic. How do you think these characters [name two characters] will react to that news?
- Were there any words or phrases that you did not understand?
- Were you comfortable with the language used by each of the characters?
- Was there any information in the drama that might be useful for you or your friends? What was it?
- What main points of the information do you recall? (This question will help the writer determine if the pacing of the teaching is correct).
- Was there too much information?

3. **Does the audience trust the program?**

- If you knew the people in the story personally, which ones would you trust?
- Which people would you *not* trust?
- Was there anything discussed in the story that you do not believe?
- Do you think that characters in a story can be relied upon to give good advice?
- Do you trust the source of information in the story?
- Is there someone else you would rather turn to for advice?

4. **Is the audience attracted to the story?**

- Which of the following words would you use to describe this story?
boring emotional
exciting interesting
funny suspenseful
ordinary embarrassing
realistic offensive
- Tell me about any of the characters that particularly attracted your attention? Why did this person attract your attention?
- If you had the choice of listening once a week at the same time to this program, a music program, or a magazine program, which would you choose? Why?
- Do you believe that this story could happen in real life?

5. **Does the audience appreciate the programs?**

- Do you think people would be likely to listen to this program on a regular basis? Why or why not?
- Is this drama an interesting way to learn some valuable lessons in life?
- Do you prefer to learn important information by listening to an expert give a talk?
- Would you recommend this drama to your friends and family?

The results of the pilot tests are tabulated and interpreted by the evaluators, who should share them with the writer and the other members of the review team. The program manager, review team, and writer then use the findings to decide how to improve the scripts, where necessary. Most often pilot scripts are written especially for testing purposes and are not part of the finished serial. It is not necessary, therefore, to re-write and re-test them unless they reveal serious problems. The changes and recommendations that arise during the pilot tests should be used as guidelines for future scripting.

Once full-scale writing and production is under way, it is a good idea for the writer occasionally to observe the broadcasts and the listeners' reactions, just to be sure everything stays on track.

The Eight Ps of Effective Enter-educate Programs

As a final test of the potential success of a serial, the writer may want to check each script against the **Eight Ps of Effective Enter-Educate Programs**. These recommend that, to be effective, a drama should be:

1. **Pervasive**—appealing to and influencing a wide spectrum of the community and encouraging a positive attitude toward the recommended change in behavior.
2. **Popular**—attracting and holding listeners' attention so that they not only enjoy listening and want to tune in regularly themselves, but also encourage others to listen and to consider adopting the new behaviors.
3. **Personal**—appealing to individual listeners who can identify with one of the varied characters who represent many different aspects of the listening audience.
4. **Passionate**—displaying a wide range of human emotions or passions that attract and involve the listening audience through the various plots and characters.
5. **Problem solving**—encouraging listeners to recognize the difficulties in their lives and to understand how the recommended change in behavior and social norms can improve their lives and their community.
6. **Persuasive**—presenting believable role-model characters who can demonstrate how listeners can move towards the new behavior comfortably, naturally, and gradually.
7. **Practicable**—using believable characters to present actions that audience members can understand and adopt comfortably themselves.
8. **Participatory**—showing the audience members how they can get involved personally in advocating and bringing about a positive social change.

**THE EIGHT Ps OF EFFECTIVE
ENTER-EDUCATE PROGRAMS**

1. Pervasive
2. Popular
3. Personal
4. Passionate
5. Problem solving
6. Persuasive
7. Practicable
8. Participatory

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Chapter Summary

- A pilot program guides and directs the construction of other programs. Pilot programs are written and tested before full-scale script writing begins.
- Even though trained researchers conduct the pilot program tests, writers should be involved in them so that they can see firsthand the strengths and weaknesses of the programs they are creating.
- Pilot scripts introduce main characters, include part of the message, and demonstrate the type of emotional involvement the drama will offer the audience.
- The writer needs to know whether the audience accepts, understands, trusts, is attracted to, and appreciates the programs.

APPENDIX H

**GUIDELINES FOR ACTORS IN ENTER-EDUCATE RADIO DRAMA
ESTA DE FOSSARD**

CHAPTER 9: GUIDELINES FOR ACTORS IN ENTER-EDUCATE RADIO DRAMA

- ◆ Interactive questions for actors
- ◆ Guidelines for enter-educate actors
- ◆ Acting in “interactive radio instruction” programs
- ◆ Preparing the script
- ◆ The actor’s voice
- ◆ Using diction marks
- ◆ Following script instructions
- ◆ Saying the lines instead of reading them
- ◆ In the studio
- ◆ The golden rules of enter-educate acting

Most actors have the majority of their experience working on television, street drama or stage drama. Radio drama is not common in many parts of the world, and the Program Manager setting up a radio serial drama might find it necessary to give some radio acting guidelines to those who will be regular members of the cast.

It is a good idea to bring all the chosen actors together and talk to them about the project and its aims and objectives. Allow the actors to get to know one another and the members of the project and recording staff with whom they will be working, perhaps by making the workshop a lunch or dinner meeting.

INTERACTIVE QUESTIONS FOR ACTORS

Start the workshop fairly informally so that actors realize they are being encouraged to take part in the learning process rather than just listening to a lecture. The following guidelines are designed to be used as an introduction to an acting workshop, in an inter-active session where actors are invited to discuss the questions. The answers suggested here can be shared with the actors after they have offered their own responses.

1. **Q. What is a radio actor?**

A: The word "actor" means the person who reads the script into the microphone. The "actor" plays the part of a "character" in the drama. Sometimes we also use the word "artist" to mean "actor." A "character" is a fictional or make believe person who appears in a story or a drama.

An actor is someone who pretends to be or imitates someone else. In order to imitate someone else convincingly, you must know A GREAT DEAL about the person you are imitating. There is more information about how to learn about your character later in this paper.

2. **Q. What is an enter-educate serial?**

A. "Enter-educate" is a combination of two words: "entertainment" and "education".

A serial is a form of drama in which the story continues through many episodes--typically at the rate of one 15-20 minute episode a week, for six to 12 months.

Serials are **entertaining** because they tell stories about believable people who have problems to overcome in their lives.

Serials are **entertaining** because they involve the EMOTIONS of the listeners. A serial drama gives listeners the chance to love, to hate, to laugh, to be afraid, and to experience both tragedy and triumph.

Serials also can **educate**, because the characters in them can provide ROLE MODELS for the listeners; people they admire and would like to copy. Also through the actions and lives of the characters, listeners can learn how they can make changes to improve their lives.

3. **Q. What is a radio serial drama actor?**

A. As an actor in an enter-educate radio serial, you are a very important member of your community. The serial in which you act can change people's attitudes and behavior, and allow them to improve the standard and the quality of their lives. The more convincing you are as an actor, the greater the chance your audience has of believing in your character and changing their lives for the better.

As an actor in an enter-educate serial, you must be part actor and part teacher. You must be able to act very well so that your listeners believe in the character you are portraying.

You also must understand how to present important information clearly and accurately so that your audience can hear it, understand it, remember it, and share it with others.

GUIDELINES FOR ENTER-EDUCATE ACTORS

The following guidelines can be used to assist actors to give their very best performance in the serial drama:

Preparing for your role

1. **Understand the purpose and objectives** of the enter-educate serial drama. Your director will probably bring the Program Manager to speak to you about the series. Be sure you completely understand what the series of programs is trying to accomplish.

Examples:

a. You may be chosen to act in a serial that is designed to demonstrate to a general audience that having a well-planned family can lead to a better quality of life. The programs will teach that part of having a well-planned family is choosing how many children to have and how far apart they will be. The **purpose** of these programs is to **encourage** people to believe sincerely that they can improve their lives by planning their families, and that they can confidently go to the local health post for advice and counseling. The focus of your acting here will be on creating a real and believable character whom the audience can recognize as being similar to someone who does--or could--exist in their own community.

b. The role you have been given might be in a serial that has more specific goals--perhaps to teach precise information about certain contraceptive methods. Perhaps the role you have been given is that of a health worker, whose job is to help community members make contraceptive choices. In this case, your task as an actor becomes more complex. You must still create a real and believable person, but, at the same time, you must demonstrate the way in which a health worker should address the clients, and you must be sure that when your script calls for giving advice, you express yourself particularly clearly--without stepping out of character.

2. **Be sure you are comfortable with the role you have been given.** Ask to see copies of some scripts before you accept the role. In serial dramas dealing with family planning matters, some of the speeches you are given might contain reference to intimate matters that you would find it difficult or embarrassing to read. That is understandable and acceptable, but it is better to decline the role at the outset than to ask to be dropped from the cast when production is already under way.

3. **Get to know your character**

It is important that you "get to know" the character you are playing. You can get to know your character from:

- a. the script
- b. the writer's character profile
- c. the director
- d. your own imagination

a. **The script** gives you the words the character will say. From what the character says, you can learn something--but not everything--about him or her. You can learn how the character reacts to other people; what she or he is doing and thinking at the moment. Sometimes, there will be directions in brackets at the beginning of a speech that will tell you more precisely HOW the character is speaking at this particular time. For example, the script might indicate in brackets (SADLY), which means that the character is feeling sad and therefore speaking sadly at this time.

b. A good serial drama script writer will prepare a profile for each of the major characters--and often for minor characters as well--in the drama. Each profile will contain information such as:

- job
- life ambition
- position in family
- level of education
- age
- religious beliefs
- attitude to change and new ideas
- physical size: height, weight, other physical characteristics
- color of skin, eyes
- hair style: bald; grey; long hair, etc.
- Interests or hobbies
- animals owned (pets or farm animals)
- favorite foods; favorite colors;
- personal habits: smoking; whistling; etc.
- personality characteristics: shy; egotistical; proud; etc
- personal fears or dislikes (fear of thunder, etc.)
- speech characteristics, etc.

If the writer does not give you these details, then you must create them in your own imagination, so that your character is really alive in your mind. Then you will be able to make the character come to life for your listeners. It is often a good idea to write down the character profile you create and refer to it from time to time as a reminder.

c. **The director** can tell you how he would like you to portray the character. He will tell you what type of voice he would like you to use, and what type of emphasis and emotion he would like your character to have.

d. **Your own imagination** is most important. You must be able to “see” the character in your mind’s eye. You must know the character as well as you know yourself. You should be able to describe the character clearly. Some actors like to model the character on someone they know, or work from a photograph of someone they think looks like the character they are portraying.

Every time you read a script, think about who your character really is, and make sure that you represent the character the same way every time.

4. **Know the Whole Story** . It is very helpful for an actor to know everything that is going to happen to the character from the beginning to the end of the serial. This is not always possible, however, because the writer does not always finish the story before recording begins.

Even if you do not know the whole story in advance, you should thoroughly understand what is happening in each particular episode. Read the whole script very carefully and be sure you understand what is happening between the first page and the last page. If there is anything in the episode that you do not understand, ask the director to explain it to you **before** recording begins.

You can be a convincing actor ONLY if you really understand what your character is doing, and why she or he is doing it.

ACTING IN INTERACTIVE RADIO INSTRUCTION PROGRAMS

You may be asked to be an actor in a serial drama that uses interactive instruction, and it is helpful for you to understand what that is and the difference it means in your acting.

Q. What is Interactive Radio Instruction?

A. Interactive Radio Instruction (IRI) is a type of distance education in which the radio takes the place of the instructor and the radio listeners are the students.

IRI, as its name suggests, keeps the listeners actively involved with the radio program or serial episode. The radio host asks questions to which the listeners must respond, either by giving oral answers, or by writing, or by carrying out an activity or holding a discussion.

5. Q. What are the special needs of an actor in an IRI program?

A. The actor in an IRI program must remember first that the listeners are trying to LEARN from the program. The actor must have a lively, interesting voice, and be aware all the time that he/she is helping the listeners to learn and therefore to improve the quality of their lives.

The actor in an IRI program also must be alert to leave the appropriate *PAUSE FOR LISTENER RESPONSE (PLR)*, and to give an enthusiastic response after each pause.

EXAMPLE:

HOST: So now, my friend, we have heard how Yousef made his clients feel very comfortable. He invited them to ask questions, and he gave simple, clear answers to each of their questions. Let's be sure that we, as health workers, could answer these questions, too. So my friends, tell me, how often must a woman have the injection of Depo Provera?

PLR :05

HOST: Every three months. That's right. And now, tell me, is the injectable mostly used for spacing births or for limiting births?

PLR :02

HOST: Spacing. That's right. The injectable is mostly used for spacing births. And here's our last question. Please tell me, Where is the injectable available?

PLR :05

HOST: Hospitals, health posts, and health centers. Those are correct answers. I hope you were able to answer all those question as well as Yousef did.

The figures after the *PLR* indicate the number of seconds you must wait before you give the reply. It is during this pause that the listeners are expected to give--out loud--the answer to the question.

Notice that immediately after the pause, the narrator gives the correct answer. If you were acting this part, you would have to be ready to come in with the answer very clearly and brightly, and to sound encouraging and cheerful each time you say "That's right", or "Yes."

PREPARING THE SCRIPT

You should be given your script several days in advance of the recording date. As soon as you receive your script, take the following steps:

- A. **Write your name on every page of the script.** Sometimes script pages are misplaced or dropped in the studio during rehearsal or recording. It saves a great deal of time and confusion if your script pages have your name on them and you can locate them quickly.
- B. **Check to be sure you have ALL the pages.** Each page of your script will be numbered in the top right-hand corner. On each page you will see both the number of that particular page and the total number of pages in the script....like this: *Page 2 of 9*. From this you can see that you should have nine pages in this particular script. Check the number on the top of each page to be sure you have all the pages. (You can see how a script page is laid out if you look at the sample page at the end of this paper).
- C. **Mark every speech that you have to read.** You can do this in one of two ways: a) use a highlighter pen and underline the name of your character each time it appears, or b) use the highlighter to highlight the whole of each of your speeches.
- a) JANET: This is not the time for making fun of me. I have had a bad day.

b) JANET: This is not the time for making fun of me. I have had a bad day.

Whichever method you choose, it is important to identify every one of your speeches clearly, so that there is less chance of you "missing your turn" during production.

- D. **Be sure that the pages of your script are not stapled together.**
If the script is stapled when you receive it, remove the staple and hold the pages together with a paper clip. You can, if you choose, leave the pages stapled until you arrive at the studio for recording, but you should never go in front of the microphone with the pages still stapled together. The noise of turning the pages of a stapled script is easily picked up and magnified by the microphone. In order to move to the next page, you must:
- turn slightly away from the microphone, or at least move the script pages away from the microphone.
 - lift the top page as quietly as possible
 - slip the top page behind all the other script pages, leaving the next page clear to read
 - be sure all pages are comfortably and firmly held in your hand
 - turn back to the microphone to continue reading
- E. **Do not bend or fold your script.** The script pages should be kept flat. Pages that have been folded are much harder to move quietly in front of the microphone, and folding the pages can result in some of the printed words being smudged or erased. Many radio actors keep their scripts in a stiff folder or on a clip board until they get to the studio.
- F. **Study the WHOLE script thoroughly.** It is not enough to read only *your* speeches. It is important that you understand the whole script and how your lines relate to those of other

characters. If there is anything in any part of the script that you do not understand, put a mark beside it and discuss it with the director before recording begins.

- G. **Rehearse all your speeches ALOUD several times** so that you feel comfortable with them. Put in any “diction marks” you think are necessary to help you read the speech better. (You will find more information about diction marks later in these guidelines.)
- H. **Do not change any words in the script or ad-lib any of your lines.** In enter-educate drama, where the message is of vital importance, the actor does not have the same liberty as is often allowed in straight entertainment dramas. If there are any words that are difficult for you to pronounce or that seem out of place for your character, discuss them with the director before making any change. The director will consult with the Program Manager if there is any question about whether or not a certain word or line can be changed. The Program Manager has the final say in these decisions.
- I. **Take note of all sound effects (FX) that occur during or prior to your speeches.** In recording a serial, it is common for sound effects to be inserted during production rather than being edited in later. This could mean that a particular sound effect could be in use during, or immediately before, one of your speeches. You should give careful consideration to the difference this might make to the way you deliver your speech.
- I. **The director’s decision is final.** With regard to the interpretation and presentation of your character, there will be times when you may not entirely agree with your director. You should certainly discuss your ideas or concerns with her/him, but you must agree to abide by the director’s decision in the end. Having too many people making independent decisions results in confusion and sloppy production.
- J. **Believe in your character.** Even if you don’t particularly like the character you have been asked to portray, you must understand him/her and believe that you really are that character as you read the lines.

THE ACTOR’S VOICE

As a radio actor, your main **tool** is your voice, and it is worthwhile spending time to learn to use your voice well and then practicing to be sure you have complete control of your voice at the microphone. The following tips on voice control can be useful to radio actors:

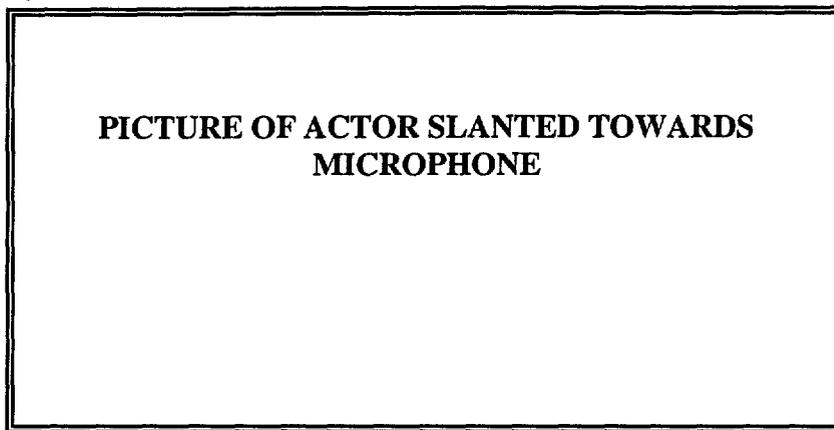
- 1. **plosives.** There are certain sounds that we call “plosives” because they can sound like miniature explosions when enlarged through the power of a microphone. The plosive sounds are b. p. d. t. k. Try saying these sounds directly into the microphone and hear how loud and unpleasant they sound. These sounds are particularly hard when they come at the beginning of a sentence.

It requires practice to learn to use these sounds softly at the beginning of the word so that they do not explode into the microphone. Some English words that actors use for practice are the following:

button	packet	dog	tempest	king
bucket	possum	dinner	teach	kill
Boston	package	don't	toast	kick

Think up a list of words in your own language that begin with these plosive sounds and practice saying them softly and gently.

Another way to cut down on the explosive sound of these letters is to speak across the microphone. This means that instead of standing (or sitting) with your face in a straight line to the microphone, you place yourself so that your face is on a diagonal line with the microphone. This creates a protection for the microphone from the direct blast of your voice.



2. Another sound that can create problems is the sound of the letter "s". When magnified by the microphone, the letter "s" can produce a very unpleasant hiss that makes an actor sound like a room full of snakes.

Practice is necessary to soften the "s" sound, particularly at the ends of words. Try swallowing the final "s" instead of giving it its full force. In the same way, putting stress on the second letter of a word that begins with "s" can prevent a hiss at the beginning of the word. Some actors also find it necessary to use the trick of speaking across the microphone to control the "s" sound as they do with the plosive sounds.

You can practice with the following English words to be sure that you are not hissing into the microphone as you say them:

desks	discs	several silly sneezes
sticks	spices	softly slinking across the grass

Now put together a list of "s" words from your own language and practice saying them correctly into the microphone. Again, the trick of speaking across the microphone can be helpful in softening the "s" sound.

3. **Breathing** requires careful control on the radio. The microphone is a very sensitive instrument that picks up the very slightest sound. Some people--men more often than women--have a heavy breathing pattern. On the radio, this can sound as if they are constantly panting or out of breath.

Generally, this problem can be cured by ensuring that you breathe through your nose rather than through your mouth. Try, also, to form the habit of taking short regular breaths rather than less frequent but very deep ones.

Sometimes a particular speech will require the actor to be "BREATHLESS" or to be "BREATHING DEEPLY." In this case, obviously, deep breathing is acceptable and breathing through the mouth will ensure a natural sound of breathlessness.

Experienced radio actors also find it helpful to practice breaking up long speeches with very short breaks, that do not spoil the flow of the sentence in the way that stopping to take a sudden breath would. It is similarly important to know WHERE to breathe in a long sentence. Some guidelines on how to divide, put emphasis on and break up a sentence are included below.

4. **Final consonants.** In order for your audience to be able to understand every word you say through a microphone, you must learn to **complete** each word. In everyday speech, we are inclined to run words together as we speak and not always pronounce the final letter of the word clearly. For radio purposes, it is important to be sure that final "t" or "d" or "g" is pronounced clearly.

5. **Tone.** Tone means the quality and sound of the voice.. It is important to be able to change the **tone** of your voice so that you can convey different meanings and feelings through your voice. Remember, as a radio actor you have **ONLY** your voice through which to convey emotion, so you must learn to make the best possible use of the emotional tone color of your voice.

For example, you can say the following sentence in different ways:

"This is not at all what I expected."

That sentence can be said in a tone of joy, or of shock, or of surprise, or of fear. It is the **tone of the your voice** more than the words that gives the audience the meaning of the words. Try saying that sentence with as many different emotional overtones as you can. Then, make up some more sentences of your own that can be expressed in a variety of different tones.

6. **Pitch.** The **pitch** or **level** of the voice is important in radio acting, because if the voice is pitched too low or too high, it will not broadcast clearly. It is necessary to learn to keep the voice up from the throat and down from the nose. As you speak, imagine your voice hitting a spot at the back of the soft palate on the top of the inside of your mouth. This soft palate is the resonating chamber for the voice, and a voice pitched to this spot will almost always have a full rich tone and a strong pitch.

7. **Rhythm.** A voice that has no rhythm to it but is on the same one flat note all the time is monotonous and hard to listen to. ..especially on radio. The radio actor must learn to use emphasis and rhythm to keep the voice interesting. This is achieved largely by putting

accent or stress on the important word or words in a sentence. For example, look at the different meanings that come out of the following sentence, depending on which word you stress:

Are you my mother?

Try saying this sentence four times, putting the stress on a different word each time.

Using Diction Marks

As you rehearse your script, you should read all the lines aloud. You will find that some sentences are long and will need to be broken up, so that they will be easier to read and easier for your listeners to understand. For example,

When I visited the village last week, I was horrified to find that there so many children sick with diarrhea that the clinic nurse did not have a chance to see all of them or give them medicine.

If you were the actor reading that line, you would find it easier to read if you put in **diction marks**, showing where to pause in the sentence very, very slightly and where to add stress as follows: (The two slash marks --//--mean PAUSE; the underlining means STRESS).

When I visited the village last week, // I was horrified // to find // that there were so many children sick with diarrhea // that the clinic nurse did not have a chance to see all of them // or give them medicine.

Learn to mark up your own scripts like this when you have long speeches to read. You will find it much easier to bring the full meaning clearly out of the words if you take the time to do this.

Following script instructions

As you read and rehearse your script, watch for any special instructions or punctuation marks that will help you interpret it correctly. Sometimes the writer will include instructions in brackets in the speech itself. For example,

MARY: (IN GREAT SURPRISE) But we weren't expecting you till next week.
(SUDDENLY AFRAID) Is there....anything wrong?

The series of full stops in the middle of the second sentence is called an **ellipses**. When you see these marks in a speech it means that you should hesitate quite naturally for a few seconds before going on with the speech.

Be sure you take note of all punctuation marks, such as question marks (?) and exclamation marks (!) so that you read the speech with the appropriate inflection or intonation.

Saying the lines instead of reading them

We have said that you must read every word of the script exactly as it is written, and that you must not "ad lib." This does not mean, however, that you should read the lines as if you were reading from a school book. You must understand your lines so well that you read them as if you were saying them.

You can do this if you THINK about what each line really means, and then read the words with that meaning in your mind. For example, the line "Please, come in." can be read (or said) with any of the following meanings:

- genuine welcome
- stiff politeness
- fear

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- amusement
- anger

or you can read the line as if it were nothing more than meaningless words on a page-- rather like the way a child would say them while learning to read.

You will find it much easier to read your lines naturally if you

- understand your character very well;
- fully understand what is happening in this episode of the drama;
- think about and understand the real meaning behind your lines.

It is your job, as an actor, to make your listening audience believe that your character is a real person; someone who is as real to them as are their own family members or friends.

In the studio

The following guidelines can assist you to do the best possible job in the recording studio:

1. Always be on time for rehearsals and recordings.
2. Be sure you have your name on every page of your own script.
3. Be sure that the pages of your script are not stapled together.
4. Be sure you have marked every speech that you are to read
5. Be sure you have rehearsed all your lines thoroughly, aloud.
6. Be ready to raise any questions you have with the director before recording begins.
7. Remember that the director is in charge and you should take your orders from the director only--or from anyone else appointed by the director, such the assistant director or the technician. Any questions or suggestions that the Program Manager might have will be discussed between the director and the Program manager and then passed on to you.
8. Some projects using enter-educate drama for development purposes have a script monitor in the control room during recording sessions. This person has the task of watching the script very carefully during recording and alerting the director if any mistakes are made in the words the actors use. If a word has been mis-read or changed incorrectly, the script monitor will advise the director, who will stop the recording. The Script Monitor will then go over the line with the actor to be sure it is correct.
9. Take careful note of where you are asked to stand in relation to the microphone. Usually the director or assistant director will put a strip of tape on the floor at the spot where you should stand once the technician has taken your voice level on the microphone. By standing with your toes touching the tape, you can be sure that you will be in the right place for your voice to be heard correctly through the microphone.

In a well equipped studio, each actor will have his or her own microphone. If this is not possible, then two or three actors will have to share a microphone. In this case it is especially important to take note of and remember your tape mark on the floor. You may have to step away from the microphone briefly to allow another actor to step up to it, and you need to be sure to go back to exactly the right spot when it is your turn to speak again.

Most directors prefer actors to stand during recording of a drama. Sitting makes good breathing more difficult, and most people act better (even if only using their voices) when they stand than when they sit.

THE GOLDEN RULES OF ENTER-EDUCATE ACTING

The following rules apply no matter I you are acting for radio, television, stage or street theater:

1. Understand the importance of the program to your audience.
2. Prepare your script and rehearse your lines thoroughly.
3. Be on time for all rehearsals and all recording sessions.
4. Do not ad-lib lines or alter any part of the script without the express permission of the director.
5. Remember that the director is the only person in charge of the production.

CHAPTER SUMMARY

Most actors have gained their experience on the stage, television or in street theater. They probably will need some assistance in learning to perform well on radio.

Actors should be helped to understand the importance of enter-educate drama and the value of their role in it.

Actors should be given particular assistance with how to act in interactive radio instruction programs that call for special acting techniques.

Preparing the script completely prior to rehearsing and recording is an important task for the actor.

All radio actors should pay particular attention to the tone, pitch and speed of their voices.

Actors can make the reading of long speeches easier by using appropriate diction marks.

Actors should take note of and follow the special instructions that the writer puts in brackets in the speeches.

Acting for radio is much easier and more effective if actors learn to say rather than read their lines.

There are special guidelines the actors must follow in the studio in order to enhance recording.

All radio actors should know the Golden Rules of Enter-Educate acting.

APPENDIX I

EDIT-FREE RADIO PRODUCTION GUIDELINES

**CHAPTER 10:
EDIT-FREE RADIO PRODUCTION
Esta de Fossard**

(PLEASE NOTE--THIS CHAPTER IS INCOMPLETE AS OF February 27, 1997. THIS IS AN OUTLINE OF WHAT THE CHAPTER WILL CONTAIN.)

Edit-free radio production is vital to the saving of time and money in a long running development radio series, such as an enter-educate serial drama. Edit-free production is a system in which expensive and time-consuming post recording editing is virtually eliminated. Music and sound effects are mixed in as the program is recorded, and if a mistake is made during recording, it is erased instantly and re-recorded.

Edit-free production is particularly beneficial for radio serial production, where a large number of programs must be recorded in rapid succession, but it is also valuable in places where recording and editing facilities are limited. With edit-free production, a fifteen minute program can be fully recorded in two hours--from final rehearsal to completion of the master tape.

Edit-free production is possible, however, only when all steps in the production process are well organized.

SOUND EFFECTS

The first step in edit-free production is the collection of a full range of sound effects that might be needed in the programs. The choice of sound effects is based on script content, and it is necessary to organize several field trips to collect the sounds. Do not rely on commercially prepared Sound Effects recordings or tapes when you are working in a developing country. Sound effects must be local and authentic. They must be collected by a highly trained sound engineer, using top quality recording equipment and reel to reel tape.

Sound effects can be stored in one of two ways:

- on cartridge tapes to be used in a cartridge machine
- on short (5 minute) cassette tapes

In either case, they must be clearly labeled.

STUDIO PRODUCTION

- 1 Successful studio production begins with a well-laid out script. For the purposes of trouble-free production, the cover page of the script should show:
 - The cast of characters that appear in this episode.
 - All sound effects and music listed in the order in which they appear in the episode.

- 2 Every page of each script must have a heading that shows:
 - the program title
 - the program number
 - the writer's name
 - the production date
- 3 The script must be clearly laid out with:
 - each speech and technical direction numbered
 - MUSIC and FX (sound effects) underlined
 - Sound effects that are made "live" in the studio can be shown differently from those that are recorded. The "live" effect" is given in brackets prior to the speech with which it will be heard.
- 4 During rehearsal, each actor highlights his or her speeches so that there will be no fumbling or missing lines during production.
- 5 The director runs the actors through a final rehearsal in the studio immediately prior to production.
- 6 At the same time, the studio and the control room are prepared for the recording session. Microphones are put in place in the studio, and the script stand and headphones are set up for the assistant director.
- 7 Pre-recorded sound effects and music are assembled in order ready to insert as recording proceeds. The control board is prepared, and recording tape readied.
- 8 The technician makes a last minute check with the script to be sure that all effects and music are ready and in the correct order.
- 9 The director's script stand and headphones are readied in the control room, and during the final rehearsal, the script monitor pays strict attention to ensure that all content details of the script are delivered correctly and clearly by the actors.
- 10 Voice levels are checked and microphone positions adjusted as needed.
- 11 Actors are instructed where to stand for the best microphone reception.
- 12 The actors' positions are marked on the floor with tape, so that they will not have to re-positioned frequently.
- 13 All "live" sound effects are assembled, ready for use.
- 14 A final check is made to ensure that actors have removed the staples from their scripts so that they can move from page to page noiselessly.

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- 15 Actors are reminded to turn slightly away from the microphone as they move one page behind the other.
- 16 The director makes a final check from the control room, and production is ready to commence.
- 17 If a mistake is made during recording, the director instructs the technicians to stop the tape.
- 18 The tape is then rewound, the error removed, the tape re-cued, and production continues with the rerecording of the error.
- 19 After production, editing is minimal....a simple task of closing any silences that were created as the re-takes were recorded.
The finished tape is stored in its box and marked with the program name and number and an indication of whether it has been rewound (tails in) or not (tails out).
- 20 The script that was used by the director during production is stamped "PRODUCTION COPY" and dated, and stored in the project archives.

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