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## Amusing Ourselves to Health and Happiness Entertainment Media and Social Change



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# Amusing Ourselves to Health and Happiness

Entertainment Media and Social Change

Prof. dr. M.P.A. Bouman

#### Inaugural lecture

Presented in shortened version on January 22nd, 2016 at the inaugural ceremony of the public acceptance of the appointment of Endowed Professor Entertainment Media and Social Change at the Erasmus Research Centre for Media, Communication and Culture (ERMeCC) of the Erasmus University Rotterdam (EUR). The Special Chair has been established on behalf of the Netherlands Entertainment-Education Foundation.

## Inaugural Lecture January 22nd, 2016

### **Amusing Ourselves to Health and Happiness**

#### Ladies and Gentlemen,

The motto of the Erasmus University is: Make it Happen! This is a motto to my heart. In my work I like to connect theory, policy and practice. It is therefore with great pleasure to present today my inaugural lecture about Entertainment Media and Social Change, the scientific domain of my Special Chair at this university.

But before I continue, I invite you to listen to the following audio fragment:

(audio tune of Medical Center West)

Do you recognize this tune? Yes.... this is the opening tune of Medical Center West (MCW), the popular Dutch hospital drama series broadcast by the TROS between 1988-1994. Every Friday eve-

ning on prime time, 2.5 million viewers in the Netherlands watched the 55 minute episode with stories of doctors, nurses and their patients. In the television season of 1992-1993 I had a chance to work with the scriptwriter of MCW and to integrate various health issues in the storylines of the series (nutrition and cardiovascular diseases, organ donation and woman and cardiovascular diseases). The research data in our effect study (a post-test-control group design) showed that regular viewers (intervention group) who watched the three episodes scored significantly better on knowledge items, then regular viewers (control group) who had not been able to watch the series that evening. Also, more



than 80% of the respondents agreed that they liked to be educated on health matters in such serials, that health information in such serials is useful and that entertainment and health communication can be combined very well (Bouman, Maas & Kok, 1998). Entertainment and education can well be combined, if and when the right conditions are created. With this research into Medical Center West, the entertainment education strategy first set ground

#### Socioeconomic health differences and low health literacy

In those days I worked as a health communication scientist within a national health organization. Research data from epidemiological studies in the Netherlands (and in other countries) showed that people with a lower socioeconomic status (meaning those with low income, education levels, and job status) live an average of seven years shorter and experience health problems twelve years earlier than higher socioeconomic status groups (Programmacommissie Sociaal-Economische Gezondheidsverschillen, 1994; Mackenbach, 1994). I found this data shocking. For me, this was a wake-up call. I went through a process, what they call the 'motoric moment' in the laws of drama, when the protagonist starts his or her quest in the story.

These enormous health inequalities made me realize that we do not effectively reach the people who need our health information most. According to data from Pharos, the expertise center for health disparities, more than 1.3 million people in the Netherlands between the ages of 16-65, are low literate. That is one in every nine Dutch persons, of which two-third are born and raised in the Netherlands. More than 25% of the Dutch population has a (very) low health literacy (Rademakers 2014; Pharos, 2015). They are not here with us in this auditorium, but they deserve as much, if not more of our attention. A large part of the Dutch population, although they can read and write, have difficulties with understanding brochures or websites, the filling in of forms, dealing with administrative paperwork and reading and understanding the instructions for medicine use. These facts have huge implications for their health. There is a clear connection between low literacy and health. The incidence of asthma, COPD, diabetes, cancer and cardiovascular diseases within these groups is much higher (Pharos, 2015).

Reducing socioeconomic health differences has been a key motivation for my work since the start of my career in 1983. My mentor, Everett Rogers, pointed out that change agents are inclined to communicate with clients who look like themselves. He calls this the heterophily gap (1995). Strangely enough, instead of investing in the development and testing of new communication methods, we are still inclined to label lower socioeconomic groups 'hard to reach groups. However, lower socioeconomic groups are not hard to reach, we can meet them every day on the street, but our traditional communication methods, with their emphasis on mainly cognitive and rational appeals, prove to be insufficient. Information about health issues has to compete with thousands of other communication messages. If the attention of our target audience is to be caught and held, especially when that audience is not already interested in health issues, it is no longer sufficient to rely solely on the rationality of our health message. Other, more emotionally appealing and popular communication methods also have to be brought into play. This means we have to be interested and study their lifestyles, their thinking and their media use. How to they like to process information? How do they talk with their neighbors and friends? How do they make use of social media and what television programs do they watch? And who already knows how to reach these groups and fascinate them?

#### **Entertainment-Education**

You probably understand already where I am heading to: the entertainment-media. We all know the general critique on entertainment. It is supposed to be brainless amusement that does not deserve a place in our cultural 'canon'. Neil Postman, in 1985, published his polemic book 'Amusing ourselves to Death' about the corrosive effects of television on our politics and public discourse. Postman argued that an overdose of insignificant and entertaining news would cause our cultural death. The media landscape has changed drastically in the thirty years since Postman wrote his book and new technological developments have been introduced. While Postman chose a culturally pessimistic view and emphasized the potential negative influence of television on public discourse and culture, I want to flip the coin and explore and investigate the potential positive role of entertainment media on social change. In my eyes 'Amusing ourselves to Health and Happiness', is as much a promising proposition than the one put forth by Postman.

Integrating social change issues in entertainment formats (in theater, film, music, television, new media, or experience parks) is known as the entertainment-education (EE) strategy (Singhal & Rogers, 1999; Bouman, 1999). The aim of the EE strategy is to highlight important social change issues such as health, sustainability, and social tolerance by using popular entertainment formats. According to Albert Bandura's (1986, 1994) social cognitive theory, people learn not only in formal learning situations, such as in schools, but also vicariously, by observing the overt behavior of models in real life people or characters seen in films and on television. The identified effects of EE storytelling have been described by various scholars. We know from various studies that Entertainment-Education

programs can attract large audiences in a way that conventional didactic approaches cannot. The direct effects on behavior change are modest, while the indirect effects via the encouragement of peer communication are considered to be substantial. Also, positive effects have been reported on awareness of and attitudes toward social change issues (Singhal et al., 2004; Bouman, 1999). Social psychological processes, such as social modeling, para social interaction and efficacy building play an important role in this.

#### **Grey's Anatomy**

To illustrate the power of storytelling I will show you an example of an entertainment series that is still running on television. Grey's Anatomy is an American medical drama television series that

premiered on American Broadcasting Company (ABC) on March 27, 2005, and is currently in its 12th season. In this popular hospital series the following storyline was broadcast. I will show you a short edited version of this storyline.

(Scene of Grey's Anatomy about 98%)

The effect research carried out by the Kaiser Family Foundation (Rideout, 2008) showed impressive results. Researchers asked 1500 respondents the following question: When a woman who is HIV positive becomes pregnant and receives the proper medicines, what is the chance that she delivers a healthy baby, which means a baby that is not infected by HIV?". In the baseline



study, 15% said that the chance would be more than 90%, a week after the broadcasting of the episode this was 61% and after four weeks it was still 45%. This storyline has been broadcast worldwide and been watched by millions of people.

#### **Elaboration Likelihood**

Perhaps you may think: "Why choose a drama line in a popular hospital series, or a storyline in a serious game, when people can also find this information on the internet? This runs parallel with new insights in health communication theory, which now accepts that, besides cognition (what do people think) the role of affect (what do people feel) is important in behavior change. To explain this I will refer to the Elaboration Likelihood Model (ELM) by Petty and Cacioppo (1986), a model that has later been extended by Slater & Rouner (2002). The ELM suggests that there are two possible routes people can follow in the persuasion process: the 'central route' and the 'peripheral route'. Persuasion through the central route is achieved through the receiver's thoughtful examination of the relevant issue. The peripheral route represents the persuasion process involved when elaboration is low. The ELM suggests that under conditions of relatively low elaboration, persuasive effects will be influenced much more by the receiver's use of simple decision rules or 'heuristic principles'. These heuristic principles represent simple decision procedures requiring little information processing. Petty and Cacioppo mention several types of heuristics. They distinguish a credibility heuristic which means that people trust statements from credible sources, such as the doctor in Grey's Anatomy. There is also a liking heuristic which indicates that people attribute correct opinions to people they like. Another type of heuristic is the consensus heuristic, which refers to people's reaction: if other people believe it, then it is probably true. And finally there are simple heuristics, such as the number of arguments and the sheer length of the health message. The interface of these routes to persuasion is the playground for the entertainment–education strategy. When a story is emotional appealing and attractive, the level of engagement is high. This is also called narrative involvement, transportation and immersion (Zillmann & Vorderer 2000; Moyer-Gusé, 2008; Murphy et al., 2013). In addition to connecting with the storyline, identifying with the characters also plays an important role in the persuasion process.

#### **Collaboration with entertainment professionals**

The scriptwriters of Grey's Anatomy designed this storyline not by accident. They worked in close collaboration with an organization called Hollywood Health and Society (HHS) in Los Angeles (Beck, 2004). This organization is part of the Norman Lear Center at de University of Southern California, in collaboration with the Centers for Disease Control & Prevention, various health organizations and the Bill & Melinda Gates Foundation. A team of ten people provides daily accurate and timely health information for Hollywood scriptwriters of series such as Emergency Room (ER), House, Grey's Anatomy, Law and Order and the Bold and the Beautiful.

Inspired by Hollywood Health and Society, the Center for Media & Health (CMH), with a research grant from ZonMw, have developed a digital platform called 'Tips for Scripts' (www.tipsvoorscripts. nl) which provides accurate health information for Dutch script and scenario writers. We also organize Tips for Scripts lunches in collaboration with partnering health organizations to exchange new ideas for future film scripts and television series with scenario and script writers. As a result, a film producer is interested in collaborating with the CMH and the RIVM to develop a drama series around the actual and pressing health issue of antibiotic resistance.



This brings me to ethical considerations of integrating social change issues in entertainment formats. How do you take care of issues such as transparency? Who decides which social issues are selected? How do you prevent communication of negative social values? In general, we follow the rule that it should concern social issues that are prioritized and grounded in policy papers and research studies that have been written and developed by various experts and expertise centers within a democratic process. Furthermore, every collaboration with social interest groups should be mentioned in the credits of the product description. These criteria demand a close collaboration with various stakeholders. The challenge to collaborate with creative media professionals and scriptwriters is one I like to take. Bridging different cultures, work rhythms and professional dilemmas' play an important role. The creative process of designing entertaining media formats demands other hemisphere preferences and brain modes than those of scientific trained health professionals (Bouman, 1999). I have studied these collaboration processes (as described in my book 'The Turtle and the Peacock' (Bouman, 1999) and designed various experiments (Bouman, 2002; 2005). I remember how a communication professional of a national health organization wanted to collaborate with a scriptwriter. He had all kinds of ideas. However during the first meeting with the producer and scriptwriter he said, with a certain disdain, that he was not a fan of soap series and he never watched this genre himself. This immediately set the tone. If you are not interested and have no respect for each other's professional domain then the collaboration is doomed to fail. I discovered in my own collaboration research (Bouman 1999, 2002, 2005) that certain terms and words had a negative connotation for scriptwriters. For example, the word education. They immediately said that they were not educators but storytellers. In my conversations with scriptwriters I noticed that they were afraid of losing their creative freedom during the collaboration. Once, when I collaborated on a big entertainment television project, Joop van den Ende took me aside before I entered an editorial meeting and said: 'Martine please be careful with the scriptwriters, they have a very sensitive nature." I also noticed this when I worked with the scriptwriter of Medical Center West, and discussed the storyline about nutrition and cardiovascular diseases. Initially he was not very happy and said: Martine .... how can I dramatize a meatball?' After a few drinks and conversations however he even started to enjoy this challenge.

French sociologist Pierre Bourdieu (1991; 1993) offers an interesting perspective on the dimensions and struggles within different fields of practice; in this case the health communication field and media field. If different professional domains want to collaborate they have to have a feel for the game and know the habitus of that specific field. That is an investment that needs to come from both sides.

Meanwhile we have gained a lot of experience in collaborating with the creative media sector. Since 1999, the Center for Media & Health, of which I am the founder and scientific director, has been able to design and test various innovative entertainment-education interventions and new research methods (www.media-health.nl). In collaboration with producers and topical experts, we developed programs such as Find Out, SOUND, Up2U and SndBites that address issues related to drugs, alcohol, sex and hearing loss prevention and target low-educated youths. We received international recognition for our work. In 2010 I had the privilege of receiving the international Everett Rogers Entertainment Education Achievement Award in Hollywood and in the same year we received the 'Golden Heron Award' for the best Dutch cross media production. The CMH has become the European expertise center on Entertainment Education. I am happy to share this expertise in my role as endowed professor with my students and new colleagues at the Erasmus University. I will continue to develop these experiments in my research agenda.

#### **Chances for the Future**

We live in an interesting era. New developments in media technology create new opportunities for designing innovative entertainment media formats for social change. We already see an integration of 1st screen (television) and 2nd screen (computers, tablets and smartphones) and an increasing convergence of television and serious games (Immovator, 2015). And, technological developments will continue. One of the new developments is transmedia storytelling (also known as 360 degree or multiplatform storytelling) where the story is told from different perspectives across multiple platforms and formats using current digital technologies (Sangalang, Quintero Johnson & Ciancio, 2013). By using social media such as YouTube, blogs, Facebook, and Twitter, people become part of the story experience and become VUPs (viewer, user and player). The ambition of transmedia is to bring a story to life in different places, in a non-linear fashion (Jenkins, 2006).

New media technologies run fast. Virtual reality applications, such as Oculus Rift and Google Glass are in an experimental stage and very interesting. They offer the possibility of experiencing a story in a virtual 3-D reality. For example, in a simulation you can experience how it is to be refugee and to be hidden and locked up in a small truck, riding on a dangerous bumpy road to the border patrol. By getting immersed, you can have stronger experiences.



Media use becomes more and more interactive. The Center for Media &Health (CMH), developed the interactive online SndBites Experience (www.sndbites. nl) aimed at youths between the ages of 15 and 19 who go clubbing (Bouman, Drossaert & Pieterse, 2012). The viewer or player can choose from which perspective and character he or she wants to follow the storyline and easily switch to another perspective. There are also game elements involved to stimulate participation and heighten the involvement. I will show you the trailer:

(Scene of SndBites)

To develop such an interactive media format is challenging and complex. The use of new technological devices, although interesting also need some reflections. Daan Roosegaarde (a Dutch visionary designer) uses the term MAYA in his work, meaning Most Advanced Yet Acceptable. He likes to invent new things and experiment with out of the box concepts, but always within the reach of acceptability and adoptability. I like this expression. New media technologies can be of great help but only if they are accepted by and useful for the target audiences.

These developments also ask for new inventive and creative research methodologies to measure the effects of entertainment media for social change. Because of the fast and volatile character of new media communication, traditional surveys are not always suitable. To monitor virtual communication about a storyline in an entertainment series, we started a methodological experiment and developed markers. Markers are unique words or expressions that do not yet exist. In collaboration with the scriptwriters of the popular Dutch soap series Good Times, Bad Times (GTST) these markers were interwoven in the dialogues of two health storylines in the series. We used a social monitoring tool and data mining techniques to identify these markers in online conversations. This way we could trace down the direct effects of the series (Bouman, Drossaert & Pieterse, 2012).

Also, there are new types of formative research possible. An interesting and promising research method is the Positive Deviance (PD) approach (Pascale, Sternin & Sternin 2010; Bouman, Lubjuhn & Singhal in press). In this type of research the focus is on individuals or groups who have, against all odds, better outcomes than their peers (positive deviation of the norm) without having extra resources or means at their disposal. By using Discovery and Action Dialogues (DADs) it is possible to discover often ordinary and small micro behaviors that have caused the positive effects. These micro behaviors can be used as input and briefing for creative professionals in the design of storytelling formats (e.g. soap- drama series, films, serious games ) to create positive role models that the target audience can identify with.

#### Bloopers

This brings me to my vision and ideas for this Special Chair. But before I go deeper into that I want to share with you a reflection.

At an ICA conference in the USA I once made the mistake of telling my audience about the trials and errors in my own research. I thought it would be interesting to share these messy details as a learning process for future research. However, at such conferences this is 'not done', most of the time only success stories are presented. Because I also like to learn from mistakes, I decided to organize a "blooper" session at a conference in 2011. I will tell you how this blooper session went.

#### (blowing a balloon)

I invited every participant in this session to share, in small subgroups, a blooper from their own research or intervention. Each story and lesson learned was symbolized by a balloon. Then one of the participants told about a project in a small rural village in India, where the village was provided with street lanterns for the first time. A heartwarming initiative! However within a few days after the celebration party of the new lanterns, all lanterns were found destroyed. The newly installed lanterns did not make it till the next morning. After talking to the villagers they learned that the women of the village, instead of going to the rice fields in the middle of the night for their sanitary stop, stayed closer to home. The new street lanterns caused a public display that none of the women appreciated. An important lesson was learned and the project failed. And you may understand what the storyteller did with the balloon after sharing the blooper:

#### (balloon deflates)

This was the most hilarious session that I had ever participated in at a scientific conference and after the session everyone was very enthusiastic about the learning value of their own research and practice. We learned a lot by sharing our miscalculations and trials and errors. I am in favor of giving such blooper sessions an allocated timeslot at scientific conferences and to pay more attention to a description of the process of the intervention and research in scientific articles and publications. To begin this practice, all of the professors here in the auditorium will find a balloon under their seat. I want to invite you to use this as a cue to action and start your own balloon session within your department and your team. When I meet you next time, I would love to hear your stories about the results.

#### Research

Those who are familiar with my work, know that I highly value the integration of theory, policy and practice in my academic work. Just like the Agora in the old Greece, the marketplace, where scientists, artists and the public could meet and exchange ideas. I am in favor of a dynamic interaction between science and society. I want to create, within my position as Special Chair, a hub where various stakeholders of social change can meet and develop new innovative and effective methods to serve underprivileged target audiences. I will focus on three key areas: (1) research, (2) teaching and (3) creating new collaborative partnerships

As the holder of the Special Chair on Entertainment Media and Social Change, it is my ambition to develop an interdisciplinary research program to develop and test new communication methods and innovative media formats in order to reach vulnerable groups in society. I will focus on a crossover between the top sectors of Health & Life Sciences and Creative Industry. Interesting research questions are: what level of interactivity would work for which target audience?; how can we design effective storylines within different new entertainment formats?; how does vicarious learning take

place and how do we measure that? More specifically, I am interested in prospective research and design thinking, the development of design criteria aimed at prospective users.

I see some interesting cross links with the work of my colleagues within the Erasmus Research Centre for Media, Communication and Culture (ERMeCC), such as the research of Jeroen Jansz (serious gaming), Peter Nikken (media literacy), Stijn Reinders (cultural heritage), Susanne Jansen (cultural sociology) and Tonny Krijnen (gender & media).

Within my Special Chair we will soon start with a PhD research to study the effect of interactive narrative persuasion for health communication. In this four-year project, we want to investigate if and how interactive and non-linear storytelling formats, in comparison with linear storytelling formats, influence the persuasion process and what the differences are in effects and appreciation between lower and higher educated users.

The academic world has its own rhythm and working culture. In the media world, new technological developments go fast. In order to keep from being overrun by the dynamic world of the creative media sector, I want to design a series of cumulative field experiments that are closely linked to practice and that will allow us to take our results and lessons learned into future experiments. By means of intermediary reports and a thorough evaluation at the end, we can create a coherent result that takes changes into account that may occur during the research process.

#### Teaching

To effectively apply the Entertainment-Education strategy, it is important to gain knowledge and skills both in academic and applied settings. For this reason, I have designed a new bachelor's course Entertainment Media and Social Change, which I will start teaching in the 4th semester this year (April/May 2016). In this course, I will teach students how to apply the theoretical framework of the Entertainment-Education strategy and discuss various formative and summative research methods by showing examples of EE media programs worldwide. I will also continue to give seminars and trainings in other settings, such as the Netherlands School of Public and Occupational Health (NSPOH), master classes for health organizations, and guest lectures at (inter)national universities. Furthermore, I will keep strengthening collaborative partnerships with public health organizations and (inter)national universities such as the University of Duisburg Essen(Germany), Brunel University in London (UK), the University of Texas of Texas at El Paso(USA), Royal Thimpu College (Bhutan) and the Universidad del Norte in Baranquilla (Colombia) where I am teaching as a visiting professor on Entertainment-Education for Social Change.

#### Policy and Networking

On October 13, 2015, the House of Representatives or Second Chamber voted in favor of the new Media Law after much debate in the political and media arena. Secretary of State Sander Dekker wants public broadcasting organizations to develop more media content with an added social value and stop producing pure entertainment programs. In my opinion, this is throwing the baby out with the bath water. I see a potential and opportunity for creating entertainment with an added value. To discuss this, I had a meeting with the Media Policy department of the Ministry of Education, Culture and Science and later with Henk Hagoort the Chair of the board of directors of the Netherlands Public Broadcasting Organization (NPO). My suggestion is to develop a framework and criteria for designing entertainment programs with an added value. In that case, the power of entertainment formats would be used for social change purposes that fit with the aim and goal of the public broadcasting mandate. The new Media Law offers not just restrictions but also new chances. The Secretary of State wants to create, within the mandate of the public broadcasting, more room for social issue and health organizations to submit their own program ideas to the NPO. When these

program ideas are accepted by the NPO, the present broadcasting organizations and social issue and health organizations would become co-producers. I am very happy to hear that because these types of co-productions have long been restricted. This creates interesting opportunities. You can imagine how this collaboration with creative media professionals can enhance both the production of entertainment-education programs for social change as well as research into the effects of these programs. It is my intention to initiate and stimulate such collaborative partnerships. For this to become successful it is important to create a shared long term vision.

This brings me back to the first part of my lecture. My mission and focus is the development and testing of effective entertainment media formats for social change and bridging the health inequality gap. My reference points are the people and their health and well-being. I am very inspired by the book Theory U by Otto Scharmer (2008), about new leadership. Scharmer goes back to the source of our actions and manifestations. Just like him, I think there is great value in moments of reflection, to look at our own work with the eye of an outsider. Scharmer illustrates his argument by comparing new leadership with a painting, which you can look at from three different perspectives:

- We can focus on the product;
- We can focus on the process of designing;
- We can focus on the painter in front of his empty canvas.

Scharmer finds the third perspective the most interesting because it sheds light on the transformation process of the painter. These changes are the most profound because they tell us more about the result than when we only look at the product. As a scientist and holder of the Special Chair, I want to regularly put myself in front of the empty canvas, to feel from which source I want to start my work and research. I would also like to invite my collaboration partners in this because I believe that it stimulates our research projects and creates better results. Above all, it will help us to stay aware of our inner motive: making a difference and contributing to a healthier and sustainable society.

#### Word of thanks

This brings me to the final words of my inaugural lecture. First of all, I feel very privileged and happy to have joined the community of the Erasmus University on July 1st, 2015. Together, we can create an impact in a scientific domain that is dear to me: the Entertainment-Education strategy for Social Change. I thank the Executive Board of the Erasmus University for approving my appointment. Also, many thanks to Jeroen Jansz and Susanne Jansen of the Erasmus Research Centre, for Media Communication and Culture, and Dick Douwes, Dean of the Erasmus School of History, Culture and Communication, for supporting me and facilitating this Special Chair. I feel very welcomed and I look forward to our collaborative partnerships.

Also, special thanks to the board members of the Netherlands Entertainment-Education Foundation (NEEF) for establishing this Special Chair. I feel very privileged to have their support and trust in me as holder of this position.

An important step in my academic career dates back to my work at the Netherlands Heart Foundation. Bart Dekker, cardiologist, and at that time Medical Director, encouraged me to apply for a PhD research grant. If he would not have suggested this and showed his confidence in me, I might not have been where I am now. His encouragement and personal attention has been of great value to me.

I also want to express my appreciation to the many health organizations and social issue organizations that I have collaborated with in research projects or in consultancy assignments in the last 17 years. I look forward to continuing our collaboration in the future. The Netherlands Heart Foundation, Kidney Foundation and Alzheimer Foundation are partners in the project MediaLab: Health for All, of which this Special Chair is an essential part. And, this project has been made possible with a grant from the Friends Lottery. I thank them for their support.

After finishing my PhD at the Wageningen University, I founded the Center for Media & Health. It was a leap of faith and a balancing act between hope and fear. There was no structural funding for our research program. But with joint efforts we have built a unique expertise in the last 17 years and created effective and award winning interventions and communication programs. This was only possible because of teamwork. I want to express my sincere thanks to all co-workers and interns that have been part of the CMH team in the last 17 years. I especially want to thank my colleagues Hester Hollemans and Sarah Lubjuhn for their dedication, moral support and never ending energy. I could not wish for a better core team to work with.

In my personal life, I feel very privileged to be part of a circle of dear friends. Some friendships date back 50 years. Special thanks to Peter who has been more than a loyal friend. Peter, I walked a great part of my life's journey with you. I owe you more than I can express.

I am born in a loving family. That is the greatest gift a person can get. I am very fortunate to share my live with two sisters and a brother. Yvonne, Ingrid and Johan, you (and your families) are very dear and precious to me. I cannot imagine a life without you.

Most of all I want to honor my parents. I and grateful that both of you are here to share this special moment with me! Dad your hunger for knowledge has inspired me from childhood onwards. You have an inquisitive mind and always wonder how things work and why. Mum, in you I recognize a passion for freedom. You have always supported and encouraged me to follow my own path even when it was unconventional. I feel honored to be your daughter and thank both of you from the bottom of my heart!

I have said.

#### Script scene Greys Anatomy:

Doctor	: I am sorry that it took so long. Congratulations you are pregnant!
Woman	: You are sure?
Doctor	: It is a big day for pregnant ladies. I am supposed to give you these. This is a month supply for prenatal vitamins for sample. They are for free.
Woman	: No we need to schedule an abortion.
Doctor	: Oh Okay I am sorry.
Man	: I am sorry (to his wife). I am so sorry
Doctor	: I don't want to intrude, but you may want to sit with this for a few days before you make your decision.
Woman	: There is no decision to make I am HIV/Aids positive and the condom broke.
Man	: I am tested already (to the doctor) and I will again in six months, but so far I am fine.
Woman	: Please I want to get this over with. Is there any chance that we can take care of this today?
Doctor	: Yeah let me see what I can set up.
	(next scene)
Woman	: You disapprove (to the doctor) You are here to push some kind of agenda!
Doctor	: No! Listen If you want to have an abortion, because you want to have an abortion, that is between you and whatever God you may believe in. But if you want to have an abortion because you think that is what medicine is telling you to do, that's between you and me. I was ineffectual, I was unclear. I am on my heels lately and I was telling you that your baby might not be born sick. I was telling you that there is a 98% chance that your baby is born perfectly healthy. A 98% chance! There is a higher chance that your baby is being born with a down syndrome than you are passing HIV-Aids on to your child.
Woman	: I don't knowI can't
Doctor	: I know you gave up about having children a long time ago and it is difficult to re-adjust your thinking so quickly. Sarah, if you take your medicine responsibly, there is no reason why you cannot have a beautiful healthy baby. This is your chance to be a mum!
Woman	: A 98% chance?
Doctor	
20000	: A 98% chance!

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#### Summary

Our traditional communication methods, with their emphasis on mainly cognitive and rational appeals, prove to be insufficient for target audiences that are low literate. Other, more emotionally appealing and popular communication methods need to be brought into play such as integrating social change issues in entertainment formats in theater, film, music, television, new media, or experience parks. This is known as the Entertainment-Education (EE) strategy. We know from various studies that Entertainment-Education programs can attract research The Turtle large audiences in a way that conventional didactic approaches cannot. Positive effects have been reported on the awareness of, and attitudes toward social

Neil Postman, in 1985, published his polemic book Amusing Ourselves to Death Director of the Center for Media & about the corrosive effects of television on our politics and public discourse. Health in Gouda, the Netherlands, While Postman chose a culturally pessimistic view, Dr. Martine Bouman flips the international award winner coin and investigates the potential positive role of entertainment media on social and expert in the field of Enter- change. In her eyes Amusing Ourselves to Health and Happiness, is a promising research proposition that deserves a thorough scientific approach.

culture, narrative persuasion, health The Special Chair of Entertainment Media and Social Change seeks to effectively reach vulnerable groups in Dutch society and to bridge the realms of media, health and science. By establishing strong collaborative partnerships, all stakeholders can contribute to a healthier society.

> The Special Chair has been established by the Netherlands Entertainment-Education Foundation. It is part of a broader project MediaLab: Health for all, that has been made possible by a donation from the Friends Lottery in partnership with the Alzheimer Foundation, Kidney Foundation and Heart Foundation.

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