The Celebration was envisioned as a three day information generating process which would link the activities occurring in a network of viewing/access centers throughout Manhattan, creating a multimedia two-way public information system.

The overall aims of the Public Access Celebration were the following:

1) To promote public awareness and participation in programming the public access channels.
2) To facilitate interaction between independent media resources programming the public access channels.
3) To foster awareness in cultural, educational, and service institutions of the potentials of communicating with their communities via closed-circuit video systems and/or the public access channels.
4) To help emerging communities define their information needs by participating in the public access experiment and to facilitate the participation of communities newly defined by information needs.
5) To create models for viewing/access centers.
6) To explore possibilities of directly involving cable subscribers and viewers in interactive television formats.
7) To explore possibilities of integrating various media into communications nets to create a flexible, broad-based public access information system.

Viewing Centers during the Public Access Celebration were set up to give people familiar with public access cable channels an opportunity to see "a wide variety of programs." Also, people who had cable tv and had been watching would have an opportunity to respond. What happened at each viewing center, what type of programming was done, and how much community involvement there was depended upon the efforts of the individual centers. The following reports reflect the expectations and actual experiences in several different centers.

As an extension of our commitment, for the past year, in generating community health information, Survival Arts Media chose to work with Bellevue
Hospital for the Public Access Celebration. We wanted to create a viewing center, utilizing Bellevue's extensive cable system (over seventy drops in day rooms, wards, and waiting areas), that would serve as a focal point initiating a dialogue between the hospital and its community.

Taping took place over the entire three-day celebration period. At the outset we evaluated the link-up to ensure that it was working properly and that staff and patients knew how to tune the cable converter. We set up two monitors in the main lobby, one for public access programs, the other for live feedback delivery from hospital staff, patients, and visitors, via a 1/2 inch portapak; a mobile video crew made tapes in different parts of the hospital, such as the male chest ward and the pediatrics project. Hospital workers and community people were interviewed about hospital services and their relationship to the community. These tapes were simultaneously played in the viewing center and throughout the entire hospital over public access channels.

By taping in different parts of the hospital, a more unified view of the overall hospital was created. Live feedback taping of responses to tapes shown in the viewing center provided the context and actualization for dialogue to take place between staff, administration, patients, and community. The issues which generally predominated these dialogues were (1) the need to clarify the patient's and his/her family's understanding of hospital procedures and treatment processes, and (2) the relationship between non-professional and professional staff members within the organizational complexities of the hospital.

The Central Park event was designed to integrate the viewing/access experience with a live cablecast. The idea was to take live programming out of a controlled studio environment and to increase our awareness of possible uses for mobile studio units in a decentralized municipal cable system.

Our flyers, posters, and other publicity invited all groups and individuals who wanted to provide entertainment, information, and/or their presence to come to the Celebration. Although time slots had been allocated to various groups, we planned for adequate flexibility to include any new activities or surprises that might materialize.

The degree of audience participation during the two days was not what we had hoped it would be. The focus of the performers, Teleprompter, and the audience was the spectacular nature of the event. The technicians and directors from Teleprompter, although extremely efficient in setting up the mobile studio, had no conception of the public access experience, nor any desire to concentrate on the involvement of the people working on and attending the Celebration. At some point we suggested that the camerapeople put aside their tripods and get into the event. The typical response was, "Well, we could try, but I know it wouldn't work."
Due to the rigidity of the Teleprompter crew there was no experimentation with different methods of programming and no opportunity for us to participate in the production end of the live broadcast.

The most interesting groups were those that stimulated audience participation. The Responsive Scene, an improvisational theater group, encouraged people to create, direct, and perform their own theater. At least half of the audience became involved in making up skits and creating hypothetical situations for the Responsive Scene to perform, while others left their seats to join the theater group as they chanted, talked, and did improvisations in the center of the mall. Some of the best entertainment came from people in the Park.

Criticism of the Park event is this - that its primary focus was the performer's relationship to the live broadcast rather than the viewer's relationship to the activities and the video/access experience. The customary separations, between the viewer and the performer, the amateur and the professional, were maintained.

For the full report of the public access situation in New York City, write to Survival Arts Media, 595 Broadway, New York City, 10012.