



FLIP

YOUR WAY TO EASY VIDEO PRODUCTION

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How do you to recognize the snowball effect of a technology? At Staples High School the eleventh-grade health curriculum includes learning about safe teen behavior. One way the library media center has collaborated with the school health department is in creating lessons during which students create visuals that advertise how teens can make good decisions. In the past we have tied the health curriculum with the information and technology curriculum in a variety of visual products. This year we used Flip cameras to make public service announcements (PSAs).

How did we know they were going to have a lasting effect? Soon after finishing the health PSAs, a world language teacher offered class groups a chance to make a news presentation using French vocabulary. The students asked if they could *please* create Flip videos. The teacher was intrigued by their request and headed toward the library media center to investigate and plan a new unit. We overheard students saying that the health class's PSAs made them think about their own decisions. That's power and possible lifelong change in the making. The ease of using the Flip cameras not only improved the

quality of the videos and shortened the time it took to make them but, due to the quality and intensity of the arguments presented in the PSAs, student decision making may have changed for the better.

It is customary in Westport for our information and technology literacy integration coordinator, AKA troubadour of technology Bill Derry, to spend a day orienting new teachers to the technology services and resources of the district. Unbeknownst to us, the school librarians at Staples High School in Westport, Connecticut, the district had just acquired more Flip video

cameras (see specifications sidebar), and Bill Derry used the orientation to demonstrate them. Flip video cameras and the FlipShare software that comes with the cameras are very easy to use. The name Flip comes from the USB arm that flips out of the camera and allows immediate

uploading of video to a computer. At about \$150 each, these cameras are much less expensive than standard, more sophisticated video cameras; facilitate easy filming and deleting of clips, and speedy uploading; have improved MP4 video clip quality; and provide the ability to

use either the MP4 clips in iMovie or the Flip MOV files in Windows Movie Maker. In short, they are the quickest, simplest, and least expensive way to make brief videos.

By the time new-teacher orientation was over, two new health teachers

	4	3	2	1	Score
STORYBOARD	Storyboard is complete with sketches for each scene, detailed notes on titles, transitions, special effects, sound, etc. Storyboard reflects outstanding planning and organization for the visuals in the video.	Storyboard is relatively complete with sketches for most scenes, and notes on titles, transitions, special effects, sound, etc. Storyboard reflects effective planning and organization for the visuals in the video.	Storyboard has glaring omissions in scene planning. There are some sketches, and notes on titles, transitions, special effects, sound, etc. Storyboard reflects attempts at planning and organization for the visuals in the video.	Storyboard is not done or is so incomplete that it could not be used even as a general guide. Storyboard reflects very little planning of the visuals.	
SCRIPT	Script is complete and it is clear what each actor will say and do. Entries and exits are scripted, as are important movements. Script is quite professional.	Script is mostly complete. It is clear what each actor will say and do. Script shows planning.	Script has a few major flaws. It is not always clear what the actors are to say and do. Script shows an attempt at planning, but seems incomplete.	There is no script. Actors are expected to invent what they say and do as they go along.	
RESEARCH	Notes indicate that the group members developed questions about the assigned topic, consulted at least three reference sources, developed a position based on their sources, and correctly cited their sources.	Notes indicate that the group members consulted at least three reference sources, developed a position based on their sources, and correctly cited their sources.	Notes indicate that the group members consulted at least two reference sources, developed a position based on their sources, and correctly cited their sources.	There are fewer than two note cards OR sources are incorrectly cited.	
TEAMWORK	Students meet and discuss regularly. All students contribute to the discussion and all are listened to respectfully. All team members contribute a fair share of the work.	Students meet and discuss regularly. Most students contribute to the discussion and are listened to respectfully. All team members contribute a fair share of the work.	A couple of team meetings are held. Most students contribute to the discussion and are listened to respectfully. All team members contribute a fair share of the work.	Meetings are not held AND/OR some team members do not contribute a fair share of the work.	
CONCEPT	Team has a clear picture of what they are trying to achieve. Each member can describe what he/she is trying to do and generally how his/her work will contribute to the final product.	Team has a fairly clear picture of what they are trying to achieve. Each member can describe what he/she is trying to do overall but has trouble describing how his/her work will contribute to the final product.	Team has brainstormed their concept, but no clear focus has emerged for the team. Team members may describe the goals/final product differently.	Team has spent little effort on brainstorming and refining a concept. Team members are unclear on the goals and how their contributions will help them reach the goal.	

Figure 1. Health PSA rubric.

Kelly Garrity and Nicole Ross had begun to develop an idea about using the cameras to make PSAs on curriculum-related health topics to promote positive health behaviors for teens. After several in-class lessons about the issues (including hearing guest speakers from the community and viewing public service announcements from a Dove Soap program <www.campaignforrealbeauty.com>), students had developed an appreciation of the need for effective, well-designed PSAs and were impressed with the idea that healthy behavior messages could have a lasting effect on their peers.

Previously, we had developed rubrics for critical thinking and how-to procedures for PhotoStory 3, so we were ready to try something newer. These two enthusiastic teachers presented us with a challenge, and we were up for it.

You may wonder how much experience we had using Flip cameras. During our 2009–2010 library media back-to-school professional development we had a half hour with Bill Derry to quickly learn the features of this simple-to-use camera, create a brief video in teams, and mount it to a shared folder. We were so busy with early school year routines that we had not even had time to practice!

Due to various curricular constraints, we determined that we could partner with each class on only four days. Students had approximately three and a half hours of class time during one week in the library media center to plan and carry out the project. This may seem rushed, but we have found that deadlines that extend beyond a week generally lead to procrastination. Therefore, as we began planning, the scheduling became important.

Outline of the creation of the PSA videos:

- One to one and a half class periods were spent on research and storyboarding.
- Approximately half a class period was allotted to refine and fine-tune the storyboard and get it approved by the health teacher.
- One or one and a half class periods were devoted to filming and downloading.
- A half or full class period was reserved to edit and save at school.
- Some groups used more time at home or during free periods at school to edit video in iMovie or Windows Movie Maker.

As we collaboratively planned the health PSA project, we kept our school goal in mind. It encompasses many of the student outcomes required by our department's curriculum, as well as many AASL Standards (2007). We would be providing a vehicle for students to use contemporary literacy skills in a real-world application. Knowing that the health curriculum timeframe allotted for only four days of work in the library media center, we thought the Flip cameras would help the students make effective, impactful videos efficiently in a short time frame.

Next, a rubric for the PSAs (see figure 1) was created relating to the health content of the project, the positive behavior promoted, how well groups could work together to plan and carry out the project, and the creation of the storyboards. Suggested topics included high school pressures, drinking and driving, drug abuse, suicide and depression, stereotyping, and decision making, but students were free to choose additional topics with the health teacher's approval.

Staples High School Goal and Objective

Overarching Goal: Develop and integrate real-world applications and assessments of contemporary literacy skills within disciplines, across disciplines, school-wide, district-wide, and within the community.

Objective: To provide opportunities for students to ask critical questions, know where to find information, synthesize and evaluate the information, use appropriate information across disciplines to solve real-world problems, work collaboratively, and use effective communication skills to present findings and persuade others.

Staples High School students have many opportunities to conduct critical thinking research in the library media center where they are guided in searching techniques, paraphrasing, and using the NoodleTools suite to create citations and note cards. Students know to use a variety of resources and often work in groups, so for this project they tended to get right to work. We pointed them to Health & Wellness Resource Center and Health Source–Consumer Edition databases, as well as leading health organization websites, such as CDC, MADD, SADD, Suicide Hotline, and NIH, to research facts and statistics related to the health issues they were studying. We often reminded them of the previously learned good research strategies.

Once we were ready to introduce the students to the cameras, we decided to follow a lesson model similar



to the one we experienced during our own professional development training. We showed the classes how to use the camera and the FlipShare software that comes loaded on each camera. The FlipShare software is a free download with free updates. It lets the users create and organize clips and share to networks. Our students are used to having choices available both in technology and final products, based on the objective of addressing student talents and abilities. Most of the health student groups chose to import their MP4 or MOV files into iMovie or Windows Movie Maker for more versatile editing. Some students brought in their own laptops, including laptops with Sony Vegas editing software, a program that was totally unfamiliar to us. The health teachers allowed students to use a choice of editing routes with the caveat that their finished PSA product needed to be compatible with the school's PC desktops in the health classrooms and saved to our network's shared folder so that the PSAs could easily be viewed in class. The health teachers and we provided support for the variety of avenues the

students took, reiterating often the importance of the information the audience would get from the PSAs.

A challenge for us as teacher-librarians has been copyright. It is natural for students to be drawn toward familiar music as they create storyboards. While we encouraged them to use copyright-free music or create their own, many chose to import songs from their own music libraries. Since citations were required and the PSAs were for class use only, during the project we allowed use of copyright music. However, we have done our own professional research and quite a bit of soul-searching during this process. We believe that our students are producing transformative, evocative mashups for educational purposes, which falls under fair use guidelines according to the Center for Social Media (n.d.). As we revise our rubric for next quarter, we will be reviewing our policy and rubric based on what we have learned from this project.

Students made decisions together about how to convey original

messages from the research they had done. Observing students plan, develop creative ideas, and effectively use costumes and props to convey the information was almost more important than the finished product. The film was to be between one and three minutes in length and most wound up around one and a half minutes. Students were subjects in some PSAs; some PSAs were totally filmed with use of sticky note messages; childhood action figures were used as models in another; but the upshot was that no two were alike. By giving the students choice about how to put together their PSAs, we allowed the learners to synthesize the information to be presented and find a unique way of telling their "story." In a traditional health paper or presentation, primarily a list of facts and information is presented, with less emphasis on creativity, synthesis, and ownership. These Flip PSAs contained more originality and investment to find solutions and a conduit to address teen behavior.

Several hurdles had to be cleared during the project. The students wanted to do more editing with a larger variety of software than originally expected. We helped students maneuver through the crazy path of default saving to the hard drives of our laptops, and then moving files and saving to students' local drives so as not to lose video files. We also had the time constraint of filming and importing clips within a class period so that teams' clips could be deleted from the cameras that had to be made ready for the next class to film. Perhaps one group per class experienced greater frustration, lost some footage, or procrastinated in the storyboard stage. We plan efforts to minimize this frustration with our next group of classes by discussing early how to avoid these pitfalls.

It was an intense two-week period with great rewards. Kelly Garrity's five classes, most with thirty-five students, and Nicole Ross's two classes of twenty-five to thirty totaled over two hundred students producing about eight to ten PSAs per class. It was a stimulating learning endeavor for all involved. See one of the PSAs "SHS FLIP Health PSA on Teen Depression" on YouTube: <<http://www.youtube.com/watch?v=a6U8IpKAsPw>>.

Student comments and written reflections on their ideas, their filming techniques, and their



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Works Cited:

American Association of School Librarians. 2007. "Standards for the 21st-Century Learner." <http://ala.org/ala/mgrps/divs/aasl/guidelinesandstandards/learningstandards/AASL_LearningStandards.pdf> (accessed February 4, 2010).

Center for Social Media. n.d. "Code of Best Practices in Fair Use for Media Literacy Education." <www.centerforsocialmedia.org/resources/publications/code_for_media_literacy_education> (accessed February 4, 2010).

creative videos told us they were moved by the statistics they learned, and they reported their awareness of the influence their PSAs might have on themselves and their peers. Excitement built during the process. Students suggested to us that we would need tissues while viewing the finished productions. Their pride was evident on their faces, in their comments, and in their reflective writing. Students had succeeded in using contemporary literacy skills of both research and production; they had worked toward a solution of a real-life problem; and they had effectively persuaded others to think about their own behaviors.

The coolest part is that our health classes run for only one marking period, and so we get to practice and improve the collaborative methods of introduction, research, storyboard planning and checking, filming, editing, saving, and presenting three more quarters this year! This was truly a village effort of district administrators, school librarians, health teachers, and teens with inspiring ideas to produce insightful and moving public service announcements on positive health behaviors for our teens.

Specifications regarding Flip Ultra camera:

- Holds 120 minutes of video clips on 4GB built-in memory
- Runs on AA batteries
- Pocket sized
- 4 GB built-in memory
- Easy to learn and use to shoot film and edit
- USB arm flips out and plugs directly into computer's USB port for easy uploading
- Comes with protective fabric sleeve
- Comes with FlipShare video software for quick editing and uploading to social networks or other editing software (such as iMovie or Windows Movie Maker)
- Standard cost is \$149.00
- Offers accessories, sometimes free (check website)
- Now comes in HD also <www.theflip.com/en-us>

Our Tips for Using the Flip Camera

- Use the camera when it has a relative advantage (such as short production schedule and brief videos) over more sophisticated video cameras.
- Use the flip.com website tutorials for yourself and make your own videos.
- Know that students will learn how to use the cameras with little instruction.
- Find out ahead of time exactly how your students will need to save their clips and videos (according to your network setup), demonstrate the procedure, and assume you will need to assist groups.
- Get a set of inexpensive headsets for each computer if students add sound.
- Emphasize detailed storyboarding so that students, if they so choose, may edit in the camera, which is a time-saver and encourages problem solving.
- Teach students the importance of copyright.
- Become a learning community where students and teachers are taking risks and helping each other with new technology.
- Start small, perhaps with one class!



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