

MedConference 2012

Cheryl Lekousi:

I never expected to follow an architect so there you go! And I am sorry if you were expecting a clown up here. Can I ask one question before we begin, does anybody work in centers where there are clowns available to the kids?

I am going to shorten a couple little things, but just historically want to give you a little bit about what is medical clowning, because people actually have a picture of what a clown is, white-faced and stuff, wigs, and that is not what you want in the hospitals. There have been clowns and jesters and all kinds of people sent to the hospital for the kids for centuries actually, but the medical clown is kind of a recent occurrence. It's only been a few decades since this has been happening. And as far as we know the first one to do was Patch Adams. He actually did write the book of *Gesundheit: Good Health is a Laughing Matter*, great reading. And the movie came and all of that. A few years later, Michael Christensen, who was a clown with the Big Apple circus had a loss in his life that made him think that, "gee this hospital environment maybe there is something I can do here..." He created the Big Apple Circus Clown caring unit. The Big Apple Circus clowns, as a clown I can say, they are fantastic! These are extremely talented clowns. And they bring these talents into the hospitals in New York.

And over the years – you know when you start something new – over the years you learn more and more about it. The troop that I work with, Hearts and Noses Clown Troop, we are having a clown anniversary this week. It's been fifteen years since we started, and we've changed a lot over those fifteen years. I came on in 1999, there was a parent in my special needs daycare that was an actress and a clown, "who said oh you should do this" and I said "I'm not a performer." She said, "oh no no no, you're about the kids, this is supposed to be about the kids, it's not about the clown."

And then it grew on me, and my next thing was what to wear to an interview if you are not a clown, but we figured it out. So what I know about kids, and again I work with little kids, but kids. What I know about kids is that for them to thrive they need to feel safe, need to be safe, they need to be in an environment that's familiar, they need to be able to explore, and their job is to play. And that's how they learn from one thing to the next. Even in the studies, I am sure they are not setting it up saying "do this...do this." They need to play with the children in order to get them to do the activities they want them to do.

That is what we as clowns want to do. We want to bring safely, we teach hygiene, safely, we want to bring play into an environment that can often take play away. So the goal of the medical clown is to provide support to the patients and their families, and truthfully to the staff. We want to promote the recovery process and minimize stress. So if you think of it, if you had a white-faced person with a big red wig, walking into your room, that's not going to ease your stress. So we don't do that. The other part of the medical clown that is happening, is happening all around the world, if you have any interest in this, when you go home google 'dream doctors', they're the unit in Israel. And they have promoted medical clowning in a wonderful way. They have done evidence based research, which I am not going to talk about today, you can go look it up. They also have the only university in the world where you can go and get a masters in medical clowning. In Europe there is the Adora clowns, in Canada there is the Doctor clowns.

They all have different models, but the experience of the child should be the same no matter where you go. I see patients in Boston who have been in Canada, who have been in another place in New York, and they ask me “do you know the clowns in...” you always say yes as a clown. What is happening in this now is what happened decades ago with drama therapy. Drama therapy is like art therapy and is now being recognized as something that helps the patient. So last year I and five of my clowns went to the first international conference on medicine and medical clowning in Israel. It was a wonderful experience. We go to meet with over 250 clowns from around the world, from as far away as New Zealand. We got to go into the hospitals and see their clowns in practice and see the different models of clowns. There is doctor clowns, like in New York, that put on the white robe and red nose. My clown troop are not doctor clowns, we are character clowns. So, I did bring in a little video, you get to see a few minutes of us in the hospital soon. We are each characters, so there is no white-face. What we are, is that we are a character of a person. So how does that work with kids? And, how do we not scare them?

There first thing and the most important rule for someone non essential, and I think we are kind of essential to some of the kids, but to the non essential, is to ask permission. I saw in the two speakers before me, respect and dignity, and permission, all those things are at the base of what a medical clown should do. So, the first thing we teach all the people in our troop and all the people that we teach outside, is that we ask permission. Now in drama therapy there is a lot of non-verbal communication. And with little children, bigger children and people from other countries, there is a lot of non-verbal communication. So, it takes time, so for a little kid who has never experienced a clown before is in this different environment, and I hope they are all in hospitals that we just saw, those were beautiful! [note: she refers to the talk of the architect who spoke before her].

But they are not all that beautiful. If they are in these different environments we have this word that has become common – nm institutionalized. The identity of the child who has been put out of their home into a space that is not like their home. With beds and equipment that’s like everybody else there, and even their pajamas are like all the other kids. Their identity is now that of the patient. Who can change that? A clown.

Completely not medical, completely doesn’t fit the environment. So we come to the door, and when we come to the door we ask permission. And that’s an actual ask. A lot of kids are taught respect adults, and if they ask you to do something you do it. Not the clown. When we come to the door, we make sure that that child sees us, takes us in, has some sort of recognition that we are there and this is real. I heard a teenager a few weeks ago, going, “what did they put in that shot?” But we make sure that it is ok with them for us to enter.

Now there is all kinds of training on hygiene which I’m not going to get into about how close you should get to a kid if you have props and toys. We actually gown in mask and gloves and all that, and that’s what you’re left for the visual parts of the clown. So if we get permission, and we usually do, first if we don’t. What if someone really doesn’t want us there? Anybody in the room. A nurse comes in and says no. A doctor says no, mum shakes her head saying no, we say goodbye. And that is a gift, cause who else in the hospital is able to leave because a kid doesn’t want us there. Not very many people. Even the cleaning people have to get the bathroom clean. So, that’s a gift in itself, and it’s

enough. It's a respect of what they want. But I tell you, I don't have a statistic, for awhile we were counting and it was 90 something percent. Most of the kids, including teenagers, want us in. Why? Hospitals are boring, and we don't look boring. So we enter.

There are many different situations that we get into in the room. People say what do you do? Do you do magic, do you do tricks, do you do songs, do you juggle, sure all of that or none of that, because the truth of it, is it's not about being funny. It's really not, even though we are clowns, it's about being present. When I go into a room, whether it's two kids, or three kids, or one kind, inside my clown is going "huh! there you are! I am so glad to be with you!" Everything else that happens, is just what happens. So what we are looking for in these visits is to create an environment of play. To create an environment that makes a child feel like kid. Cause that's what they should be. We are not there for the illness, we are not there for the disability, we are not there for the therapies, we are there to play. So we are there only for the child. And any type of play can happen. And we make an offer, or we ask a question. Or clowns delight in find a problem. I go in a room and say "ehh have you seen Esther?" And then you put a finger puppet on their pillow and you start to play. It's an offer. It's that constant checking in with them, is this what you want? Are you with me?

If a kid was doing something I would ask them something about what they're doing, what they're watching, what game they're playing. And it goes from there. I mean clowns have pockets, we always have all kinds of stuff in our pockets. My father, who's actually professional magician, I have on card trick I can do successfully.

So you go in the room and you start to play, and it can be different at different ages. I am spectacular at peek a boo because I see a lot of little children. And if peek a boo is what's going to work for that child, that's all we do, but it's with a heart connection.

I said we clown for everybody that is there. I want to talk about one special population and that's the newborn. People ask would you send a clown into a newborn room? What are you going to do? I don't know how many people in here are parents, but I know that when my child was born that was the most perfect beautiful baby ever. And I knew that because everybody that I saw told me "that is the most beautiful perfect baby ever!" And every parent should hear that. But what if your child is born and their ill and they are hospitalized, and then grandma and grandpa come in and they are like "ohhh", and your best friend comes in and they hug and clown goes in and – I have seen kids with facial deformities, but you always find something in that child, that is the child. A clown will come in and go "huh! can I peek?" And they always say yes. I don't care what's happening with deformities, you will see the child. It's the light behind their eyes, it's the softness of their cheek. A clown will turn to child and say "that is the most beautiful child, look at the eye lashes on those eyes." We find whatever it is, and that's our gift to the parent.

Teenagers. Do teenagers want clown? Boy teenagers do. I tell you that I find that teenagers want magic, they want a song. My clown knows how to rap, my clown does magic, although my clown is really stupid and dumb and always needs some help. And whatever happens in that room is because of the power of the child. The best thing that can happen in a connection with a child is that you get to know them this quickly and you follow a dream. So what do I mean by that? I am going to tell you one story that happened to our clown Frizzle, and I stood back and watched it. It was miracle. One of the hospitals we go to is Boston Medical Center and a lot of the children and teenagers

we see there have been harmed because they are living in terrible environments. So there was this one child who had been knifed, teenager actually, we went in and we were talking and we were chatting and it wasn't going very well. He was this big tough kid who had been knifed. But yet he had said yes to clowns. So Frizzle asked him, "so what do you like to do?" Because then you get something to play on. He said sleep. And she said "I love sleep, naps, do you ever dream?" And he perked up and he said, "yeah..." "So what do you dream about?" He said, "well, different things?" But it got to the point through our visit were he said he dreams about owning a restaurant. This kid that had been knifed. So we asked him what would you cook? We ended up in that room with no props because he was on precautions. I pulled out cooking pots, and he got the chicken, and he was cooking the chicken. And his parents were perking up. And what else do you add? And he was adding these things to cook with the chicken. And Frizzle was talking to him and getting the recipes. And I am handing out plates and his dishing! He is dishing out this recipe he had cooked. This teenager who is in a gang, this is what he was doing. And they were eating. When it was time to go we said goodbye, and we walked out the door and we looked in and they're still eating. That's the type of thing you want to happen. They were no longer in a hospital, they were no longer dealing with gang warfare, they were eating chicken from his recipe. It doesn't happen that way all the time, but that's the offer. That's the offer, I am here for you. The thing of it is, why a clown? Why not just a nice person?

The reason for the clown is, it's the best tool that we have. There are nice people all over the hospital. And I think anyone who has to work with a child ought to be trained on how to deal with a child. And that would be great, but with a nice person there is a little wall of "get to you know." When you're a clown character that "get to know you" is really quick. It's a tool we used. So, it's not just a person, I am nothing like this when I am a clown. I not only look different, I speak different, I move different, my facial expressions are different. If you're going to get clowns where you are you can't just have nice sweet people dressing up. They need to be trained. They need to have the theater piece, but much more, they need that heart. There is a sensitivity. They need to know if they're in a room and something is not working for a kid, you need to know that.

Funny things happen with that sensitivity thing. I once was in a hospital, one of those rectangular hospitals and we're coming in and out of rooms and there is a room down there and we get there and we see a little girl who began to frown when we were present. So we continued our rounds, and we get back there, and we are tired, and we are actually a little sweaty, it's been a long night. The little girl comes out of her room and she's got her IV pole and now she wants clowns! I had three tiles of the hallway that was ok with her for me to be clown. If got one tile closer she became uneasy and if I started to leave she would call me back. So it takes a certain sensitivity for the person, it's very important. It's child centered, it's not theater.

Thank you so much!