

# Hospital Clown Newsletter

## The Gentle Art of the Caring Clown

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The elevator door slides open, out comes an invisible dog on a leash, dragging *Robo the Clown*. The oversized sized black suit jacket flaps with the grand gestures of apologies to the astonished parent waiting for the elevator. *Robo* stumbles down the hall pulled by the imaginary dog.

"*Robo* is here," an eight-year-old yells as he scampers out of his room pulling his IV stand, his little hospital gown flapping open as he goes after *Robo*. The clown stops turns around, and gives a big gesture of greeting. The hat comes off and the neon blue spiking hair glistens in the light. *Robo* who can't seem to get anything right, tries to pick up the hat, but trips over the dog leash. The ensuing chaos has the little boy squealing with delight.

In appearance, *Robo* is an amalgamation of the three classic types of clowns. *Robo* has the gentle white face of the graceful "Pierrot" clown, the character of the clumsy "Auguste" clown, and the big jacket and rather bedraggled look of the "tramp." *Robo's* crowning glory, however, is utterly unique -- a mop of spiky, neon-blue hair of which *Robo* is inordinately vain.

It is *Robo's* mischievous manner to do the unexpected. As she approaches the nurses' station she spies a left-over bowl of Jell-O cubes, and begins to juggle Jell-O. *Robo* is a silent mime clown, using body language and sounds,

but in her other persona as Karen Ridd, the Child Life Worker, she has a quiet private conversation with a nurse and then walks into an adjacent dimly lit room. The patient is a five-year-old who just had surgery. He is on morphine and is really out of it. He can't even move, but when he sees *Robo* his eyes just sparkle with the recognition of his friend. *Robo* sits down and quietly holds his hand. A private visit with a clown is a very special thing for a child, and to become friends with a clown is very thrilling indeed

A small boy in the next room can be heard fussing with his nurse "I don't want any. No, I don't want to eat!" *Robo* goes to speak with the nurse outside his room. Jamie, who came from Victoria BC for a liver transplant at the age of 10 months, has made regular visits to the Hospital for Sick children, most recently for treatment of digestive complications.

*Robo* walks into his room with a lunch tray just like Jamie's. She sits down next to the small boy to have her lunch, but *Robo* doesn't know how to eat! Does she put the Jell-O on her finger, in her ear? Jamie has to teach *Robo* all the intricacies and manners of eating. Because *Robo* doesn't talk, Jamie has to show her how to eat. In the process of teaching *Robo* to eat, Jamie eats his entire lunch and it stays down! Jamie's mother stands by watching in utter amazement.



# Robo's Legacy

Karen Ridd of Winnipeg, Canada

# Robo's Legacy . . . . .

## THE ROBO PROJECT

In 1986, the Child Life Department of the Children's Hospital of the Health Sciences Center of Winnipeg, Canada received funding from the Winnipeg Foundation and the Children's Hospital Miracle Telethon, which enabled the Department to have Robo the clown on staff.

In 1991, the Robo Project was started in the Hospital for Sick Children in Toronto, Canada.

"Robo" is Karen Ridd, a professional clown and specialist in the field of child life/play therapy

Robo's weekly schedule included two days devoted to clowning and two half days on which Robo co-produced a daily live show at CHTV, the hospital's closed circuit television station. During this initial program at Sick Children's Hospital, Robo's visits with the children were usually 20 minutes, but sometimes her visits could last to 1½ hours. She usually visited about 25 patients a day, two days a week at the Hospital.

The work at CHTV was done out of costume by Robo's "real" persona, Karen Ridd. Most patients and many staff, however, were unaware that the two shared the same skin. Producing the "Good Day Show" necessitated visiting all the wards in the hospital. This helped Robo to know which wards to target and ensured that no "old friends" are left out. The remainder of Robo's time was spent in preparing for and filming a series of short videos dealing with children's emotional responses to medical procedures.

Robo made eleven videos depicting Robo the clown going through various procedures: Robo gets an IV, (Robo tries escape, evasion and diversion before she finally accepts help and relaxation exercises discovering that an IV is really not so bad after all.) Other videos deal with getting a cast on and removed, getting an EKG, having a CAT scan, visiting a respiratory clinic and getting an X-Ray. By Robo doing those clown antics the videos remain amusing, but also instructive.

Today, Karen is not clowning. She says clowning can not be done half-way, and right now all her energy is going into her family – her first child, Daniel, born, May 5, 1998.

However, Robo set the path that many clown therapists in Canada are walking. In future issues we will report on the Child Life Clown Therapist of Canada.

Following are excerpts from Karen Ridd's project report:

*"There Ought to Be Clowns. . . Child Life Therapy through the Medium of a Clown."*

As a mime clown, Robo had no trouble with language barriers. She communicates through actions and expression, by stamping her feet or by honking a horn. As a result Robo interacts with children regardless of what language they speak. Often such children are particularly in need of Robo's support and interaction because their relationships with staff may be limited by language difficulties.

This was certainly true in the case of Philip, a 14-year-old boy who was initially considered to be developmentally delayed. However, his response to Robo was enthusiastic, creative and appropriate. This led to a reassessment of his ability and discovering it was his unfamiliarity with the English language which severely limited his development.

Mime is truly a universal language and one which children of all languages and mental abilities can easily interpret. In Children's Hospital of Winnipeg about half of the in-patient population is aboriginal (Native American).

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*Robo doesn't know anything and can't get anything right, so the children help. For once, they are the ones who have it all.*

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Perhaps Robo's most important role as a clown among care givers is as a care receiver. It is crucial to human growth and development to be able to give care as well as to receive it. In a hospital, children are often denied opportunities to fill this important role of care giver. But with Robo they are able to give as well as to receive. They straighten Robo's jacket, right her hats, fix her tie, and lace those enormous shoes.

Children also find that they are more intelligent than Robo. This too places the patients in a position that they do not often hold in a hospital where the medical staff has so much knowledge. Robo finds even the simplest task too complex. She is unable to operate a tap, open a door, or fill a cup and so the children must teach Robo. Moreover, since Robo can't speak, the children must translate for her and often do this more easily than adults can!

Robo uses her inability to speak with particular effect in her relationship with an eight-year-old girl, Alana, who had lost her hearing as a result of meningitis. Robo wrote her a note apologetically explaining this inability to speak. Alana's face lit up as she read it as she explained to her mother "It doesn't matter that Robo can't speak since I can't hear anyway!"<sup>14</sup> By showing Alana that she had a skill that Robo lacked, it promoted Alana's self esteem and a situation in which her infirmity was unimportant.

# There ought to be Clowns!



The children are in control with Robo. They decide whether or not to get their faces painted, and they are in charge of choosing face paint colors. Moreover, when people throw balls into Robo's hat, somehow the children are successful and it's the adults who lose. This is something the hospitalized child needs to be in control of some aspect of his or her life. Robo further adds to this sense of control by his/her consistency. Robo always wears the same clothes, comes on the same days and carries the same basic tools of the trade: face paints, juggling balls and soap bubbles.

Robo provides support for children during medical procedures. Robo also provides support by being an audience for children who need to talk about or display their medical procedures. A 5-year-old child, who never discussed her disease with other medical staff, was able to confide to Robo her fear that she was very sick, and even asked Robo to pray for her. It's safe to tell Robo anything, for since Robo can't talk, Robo can't give away secrets. Children also reinforce the medical play that the Child Life Therapists have led them in, by leading Robo through the same medical play, teaching Robo, for example, about needles or casts.

The opportunity to teach and control Robo, provides hospitalized children with a much-needed breath of freedom. Robo also encourages a patient's sense of humor, as humor in itself has a liberating effect. Additionally, Robo's very presence, chaotic and disordered as it is, further suggests the freedom that is still possible in a hospital. A hospital that can house a clown is a pretty cool place.

Robo's visits serve to encourage imagination and creativity and act as stimulation for the patients, thereby helping to keep them from apathy and withdrawal. Robo's ability to help patients out of withdrawn states was most vividly apparent with Jason, a 3-year-old boy with a severe seizure disorder. Following neurosurgery, Jason had difficulty following objects with his eyes, but he was able to follow the slow movements of the bright face paints and later of the bubbles. Moreover, the familiar vivid face of the clown who'd visited him in the Intensive Care Unit prior to surgery, helped him to turn up one corner of his mouth in a smile, and he even managed to wave a finger.

It is clear that Robo's role is far more than simply diversionary. Robo is another member of the health care team, and as such has the responsibility when out of costume of reporting on and charting significant aspects of her visits with patients.

“One of the most fascinating uses of humor in healing has never to my knowledge been recorded in medical literature. In fact had I not seen it with my own eyes, and gathered many reports of it, I would be rather hesitant to mention it myself. It is that sometimes, through their antics, clowns can bring people back from severely withdrawn and unresponsive states even after all attempts by their doctors and nurses have failed.”

-- Moody, R.A. Jr.

*Laugh after laugh: The Healing Power of Humor, Jacksonville, Florida, Headwaters Press (1978), p.20*

# Robo's Legacy



*“The importance of play is demonstrated most dramatically by young patients who are near death. Kids have a miraculous spirit. If their pain is controlled, they'll play right up to the end of their lives. If you can make that happen, you can't help but feel a bit of awe.”* Karen “Robo” Ridd

## Carol's Story

The importance of long term and consistent clowning at a facility was evident in Robo's friendship with a 6-year-old patient with immune deficiency syndrome. Carol became Robo's care giver with relish, tying and re-tying Robo's shoes and teaching Robo basic life skills. [Usually the child life workers job!] Learning that Robo was to get an IV she comforted the clown and spent several hours teaching Robo about the procedure.

Robo would visit in the playroom with Carol and other children and then Robo and Carol would eat lunch together, which for Carol was often limited to Jell-O. Eating Jell-O with Robo was fun! They went for walks together and even napped together. Carol would confide in Robo, telling Robo of her fears and reiterating the reasons for her treatment: “I need this central line, Robo to make me get better. It's not so bad really.”

Carol and Robo were cohorts, playing minor practical jokes, riding around the halls on tricycles, juggling food and even pushing each other in a shopping cart. A game Carol enjoyed was “there's a rabbit (or donkey, frog, mule) in your shoe.”

Then Carol would laugh as Robo's foot hopped around evidently unconnected to the rest of her body. Simply saying the words would make the clown dance.

Having control over Robo was especially important for a child who had faced so many invasive procedures and who had even lost control over her bodily functions. Robo's friendship was especially important for Carol who was uprooted from family and friends.

Carol's favorite game was “Squirt the Clown.” Filling syringes with water and squirting Robo, Carol laughed uproariously as the clown leapt with “surprise.” She never translated this squirting to staff, as “clowns” are very different from “normal” people. One time when Carol was waking from anesthesia, there was Robo, syringe in hand and Carol was able to sit up and “squirt the clown.” Life was not totally out of control and hopeless for Carol.

As Carol's condition degenerated, and her treatment changed to palliative care Robo moved slightly into the role of care giver, providing drinks and comfort. However, Robo would leave her hat upside down or her shoes laces untied, giving Carol something to correct. As Carol became sicker and had less and less ability to respond to Robo's humor, Robo and Carol spend the same amount of time together, simply sitting quietly in Carol's dimly lit room holding hands.

Carol's family accepted Robo as much as Carol did. As a result, Robo was welcomed at Carol's funeral. It was a funeral like no other, a funeral where the children sported brilliantly decorated faces and blew bubbles. It was most truly a celebration for a little girl's remarkable life and courage.

Kim O'Leary, Director of the Child Life Department, The Hospital for Sick Children, Toronto, during the initiation of the Robo Project.

### **Play is therapeutic in three ways:**

- 1) It is sometimes aimed at helping children prepare for operations or procedures. Child life specialist or nurses may explain upcoming surgeries to children using specially designed dolls. For instance, an organ transplant doll will open up to show how and where the new organ will be placed.
- 2) Play is also used to help children express themselves. Child life specialists and other care givers find that their patients are more willing to say what they're feeling if they're communicating through another character such as a hand puppet or a clown.
- 3) The third function of play is purely to provide a diversion. Many children who are coping with serious illnesses have been in many ways, robbed of their childhood. They are forced to deal with life and death issues and most of them try to put on a brave front for their families and care givers. Play gives them a reprieve and a chance to laugh and relax