"...there's been some change in the pediatric wards where Le Rire Médecin works. Of course, there are still seriously ill children, but now they're taken care of by doctors in white coats who have found the time to laugh and dream with the clowns and the children. Thanks to these clowns, the parents too, are somewhat more at ease, more able to deal with the burden of their children's illness."

Olivier Hartmann, M.D.  Head of Pediatric Oncology,  
Gustave Roussy Hospital

Caroline Simonds . . .

A.k.a. Dr. Giraffe is the founder and Artistic Director of Le Rire Médecin centered in Paris France.

Caroline was born in the United States but has spent most of her adult life in France. In March of 1999, Shobi had the opportunity to meet Caroline in Paris. Coming down le rue Geoffrery l'Asnier from her office to meet me for lunch, she looked more like a high fashion model, than a clown. With this height and stature you can understand why her clown name is Dr. Giraffe. It didn’t take long in a Paris Café for her passion about the art of hospital clowning to burst into the play of her conversation. Most of the quotes by Caroline were taken from that meeting at that Paris Café.

In Caroline’s words, “There is a strict regimen on the cancer wards. Kids get their medicine on time. They get their chemo on time and their meals on time. But when you send in the clowns, we throw it all off. That is what we are for. We need to remind people that they are human beings and to show children that they can go on being children despite the nasty detail that they have cancer. We stay in their realm of fantasy; we try to transport them to another world and give them tools for the hospital voyage. We are really there to accompany every second that we can with joy, with happiness, with generosity.”

She is an amazing woman with the heart of a clown, and a deep passion about hospital clowning. She travels globally to spread her wisdom, experience and knowledge of hospital clowning, and has been the inspiration for many groups in Europe.

Periodically she travels back to New York to collaborate and exchange ideas with The Big Apple Circus Clown Care Unit where she had her original training. "We give it back where we can. To help serious professional clown groups to do hospital clowning well. The only way we will be acknowledged as professionals is to inspire, train and support creative, professionals for the hospital clown work."

(Continued on Page 8)
Madame Simonds administers Le Rire Médecin from an office not far from Notre Dame Cathedral in Paris, but when she is in the hospital, she is . . . . . .

Caroline Simonds "Dr. Giraffe" with Kim Winslow "Dr. Loon" Big Apple Circus Clown Care Unit in New York City - 1989.

Caroline Simonds came to Paris in the 70's. Right after graduating from Bennington College in Vermont, she immediately moved to Paris. For ten years she clowned in France, mainly in street theater and festivals.

After 1980 she was back in the States and "falling in love" with hospital clowning. "I had passion for my clown work, but I hadn't felt that passionate about it until discovering the hospital work. It was about necessity and being needed, but also it was about the poetry. It was the degree of sparkle that a clown could put into a life that was so important and that wasn't so easy with very sick children in a hospital."

Caroline started hospital clowning with the Big Apple Circus Clown Care Unit in 1988 in New York City at Columbia Presbyterian Babies Hospital. "There were 7 or 8 of us back then. We didn't get much in the way of training then. In the early days we started to educate ourselves. It was more like -- throw the puppies in the water and see if they will swim. Fortunately we were all a good bunch of clowns, and we were a devoted group of clown doctors.

"After a few months in New York City, Kim Winslow, Dr. Loon and I were sent up to open a new Clown Care Unit Program at Montefiore Medical Center in the Bronx, New York.

"I owe most of what I learned from Kim Winslow-- 'Dr. Loon', my first 'Clown-husband' and of course the medical staff. Some of the psychiatrists included us in what they called the emotional rounds. Once a week they would ask us to attend a meeting where we were asked our point of view on different children.

"Dr. Singer in the ICU who 'right from the giddy-up' said to us, 'This child is in a coma, I want you to sing to him. I want you to talk to him. He hears you.' It inspired and stimulated us and we... did it. In the beginning we didn't know if we believed it would help or not, but then we got such great feedback. Some children would wake up two or three months later and say 'Hurrah, you're back! It was so nice when you sang for my birthday. I kept trying to open my eyes, but I could not.' This really motivated us to learn and make progress."

Caroline moved back to Paris in 1991. "My daughter was born there and it felt natural to return." After making a half dozen presentations and receiving two important grants from the French Ministry of Culture, she started The Rire Médecin at Institut Gustave Roussy in Paris and Hopital Louis Mourier. It took interviewing 50 performers to find the first four clowns that she would start to train. As of 2001, Le Rire Médecin has grown to a company of 33 paid professional clown-doctors.

It takes a tremendous amount of energy to commit to such a project. This just begins to show you the kind of energy and passion Caroline has for hospital clowning. With a family and a large organization, she still manages to apply her art and bring her joyful self into the hospitals. She works two days a week in the office and two days clowning in the hospital and one day in training with the company.

"The clown for me is my medium. It is a 'Here and now' state of being - it is not a 'yesterday or tomorrow' one. I will never give up the clowning. It is my true form of expression, my art."

"For me the clown is separate from my person even though I am the one checking the clown -- Dr. Giraffe. The clown is wide open and vulnerable and naive. If the clown wasn't naive, you wouldn't be able to express many important emotions. Only the clown can go so far with an anger that will never hurt anyone, or a sadness that will never bring anyone down.

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The more serious the clown is the more people will laugh in general. But it is only with a certain innocence that you can do that -- pure on the inside--professional techniques on the outside. Your clown is the marionette, and you the actor are pulling the strings. You know you are safe, you know you are separate -- who is the clown and who is the actress.

"The performer has a responsibility toward his clown to keep himself safe. And towards the children to keep the clown appropriate in his actions and not to do anything psychologically or physically to threaten a child's well being or his/her parents. So much of our work is being able to sense what to do and what not to do. If you are just trying to make someone laugh, you may risk being disrespectful of their space."

**Le Rire Médecin Clowns ~ The Laugh Doctors**

The Rire Médecin clown doctors have gained the respect of the medical profession in France and in Europe. Line Petit, of General Pediatric Service Psychologist University Hospital, Nantes France describes the clowns:

"Hospitals as society in miniature, with their strict ranks of professions and occupations, have also been home to some unusual people in the last five years: medical clowns, who usurp the tools and titles of medical personnel. Their titles are followed by outrageous and obviously mocking names: Professor Lioness, Doctor Mosquito, etc. They transform medical instruments into props and use them for the most unusual and unexpected purposes. A doctor keeps a stethoscope hidden under his coat. The clown pulls it out and turns it into a bubble blower. By serving as a fun house mirror held up in front of the doctor, these clowns allow children to relive a previous painful experience, this time on an imaginary level, and take some of the pain out of very anxious situations such as being wheeled into the operating room. . . . Unlike doctors, clowns address children's healthy parts. Clowns sustain children's ability to believe, dream and laugh."

In 1994 Le Rire Médecin was honored to receive the Hospitalia Trophy (with a special distinction from the greater Paris award panel), given by the Fondation de France and the Quotidien Santé group and in 1995 the Social Innovation Prize was bestowed by the Paris municipal government.

**Le Rire Médecin Goals**

- To form a company of professional clowns who are trained to work in hospitals alongside medical personnel as an adjunct to traditional treatment.
- To hold regular performances in key sites in children’s wards (such as children’s rooms, intensive care units, waiting rooms and out-patient clinics) so as to help children better withstand hospitalization.
- To contribute to reducing the stress associated with hospitals by showing young people, from babies through teenagers, their families and the medical staff, how humor, dreams and fantasy can be a part of their lives even inside a hospital.
- To offer families and medical staff moments of comic relief and realization, while helping them see the needs of hospitalized children in a new light.
- To train new teams of professional clowns so as to meet the rising demand at pediatric wards in Paris and around France.

"Each clown has an easily identifiable personality and name, such as Dr Giraffe, Dr Babyface, and High Class Max. They have their own styles, sets of skills, music, and clown vocabulary. They wear a personalized and decorated white medical coat. Some clowns do not use a spoken language and some use a highly stylized vernacular of onomatopoeia. They carry props in their doctor's bags: fart whistles made from syringes, telephones made from stethoscopes, traditional musical instruments, bubbles, puppets, red noses, juggling balls, and a Polaroid camera. The clowns' performances are based upon improvisation adapted to each child and the child's environment. They dance, squirt water, play music, tell stories, play tricks on the doctors, and make all sorts of noises."

The Lancet, the prestigious medical journal based in London also reported on the Laugh Doctors (Lancet 1997:350:1838-40):

"The clowns work as duos, twice a week, and see about 30 patients a day. A confidential journal is maintained, and each team is responsible for entering information about the children. They first meet with a medical health-care worker, then see the children and their families. They are trained to assess the medical history, social situation, and emotional needs of each patient. Clowns may be present during a medical examination and accompany a child to the operating room. They are aware of children's and parents' tendency to perceive that "good doctors" make you laugh and "bad doctors" hurt you, and are careful not to reinforce this schism.

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Currently, Le Rire Médecin has two-day a week programs up and running year round in nine hospitals. These programs cannot rely on funding only from the hospitals. Their funding also comes from the government, nonprofit organizations, individual and corporate gifts. The French government still gives them a yearly grant. Two days a week Caroline works as the Director of Le Rire Médecin in an office not far from the famous Notre Dame Cathedral which consists of an administrator, two secretaries and a fund raiser. The Administrator does public fund raising and handles all the budgets. The fund-raiser does all the private fund raising as well as handling all public relations.
A big factor in the success of Le Rire Médecin is their collaboration with the medical staff. "The clowns never go onto the wards unprepared, in that they are briefed by the medical staff beforehand so we have a sense of what to do. This briefing helps us avoid errors. We are told such things as what child is in the terminal phase of cancer, what this emotional state is like or what the family situation is. This kind of information also prepares the clowns emotionally for the job they have to do.

"If a doctor can't get anywhere with a kid they often will ask us to go in and see the kids and ask us what we think. It is a non-medical point of view. Children speak about their illness through play. And it is a part of the teamwork we do with staff.

"Very early on an anesthesiologist asked us to help relax certain children when they were having invasive and painful procedures. More and more we are asked to participate with medical staff members -- not as healers, but as a calming, distracting presence.

"When I left the New York Clown Care Unit, I wanted to intensify staff relationship and parent involvement with the Clowns in Paris. Clowning was not just for the children, but for siblings, for their parents. It is also a way of helping the staff to have some relief from their stressful day. We try to make our work as interactive as possible. The staff learns to see a problem in a different way through the clowning. The children learn to see the staff in a different way when they are involved in our clowning. So often the children take the weight of their parents on themselves. As a clown you begin to see the parent through the child's eyes. A child will say, 'Please go make my mommy laugh, too.'"

Part of the Laugh Doctors training consists of adapting their artistic skills to the hospital atmosphere. All the Laugh Doctors have talents in music, juggling, magic and improvisational comedy. They also receive training in respect to the psychological needs of the children. "Clowns are taught to respect a child's privacy and nature of a patient's illness. They have to know how to approach parents. Even walking into a child's room, particularly when death is imminent, takes special sensitivity. Our work is 99% improvisation. Underneath it all it is not what you do, but who you are."

Le Rire Médecin stresses the need for clarity in the role of the hospital clown. "Clarity as to why you are there is essential. We are not medical technicians or doctors. We don't present ourselves as healers. Nothing prevents a clown from holding a child's hand when they are getting a blood test, but clarity of why you are there and who you are to the child is essential. There is a difference between clown therapy and therapeutic clowning. This is controversial. It could confuse a child if you were to be a clown at one moment and a medical practitioner or therapist at another moment."

Two days a month are dedicated to medical, psychological, and artistic training. "We meet with different health care specialists to learn about procedures and medical problems including pain assessment, anorexia, teen suicide, and the after effects of chemotherapy and radiation on children. We once met with an African psychiatrist who instructed us about working with African children. He taught us about their beliefs about death, dying and illness. We also invited an Algerian psychologist for a training session, because we have a big Arabic population in France.

"We also work with a psychiatrist on clown burnout -- how to recognize it and how to prevent it. There are no formulas. One of the secrets is to be really healthy about the work and know how to contain it at the hospital. We write in our journals about the things that happen to us for a half an hour at the end of every day. If a child has died, we write it down. It helps you leave it at the hospital and not take it home."

"It's also inappropriate to talk about the children's identity or illness outside of the hospital to respect medical privacy and confidentiality. Each month the clowns write a full report on their work at the hospital. It is a way for me to keep a check on them emotionally, and to pick up signs of stress. They will say things in a report that they won't say over the phone."

In addition to the reports, Caroline meets individually with each performer once a year. "There are things that just can't and won't be put down on paper. I can pick up a clown's needs and spot things before they become problems and the clown burns out."

"To ensure integrity for our clowns, a one page code of ethics was developed. We actually worked on the content for around six months. We read the child life codes and studied many other professional codes as well as the hospital procedures and brought a 9-page brain storming down to a one page workable framework. I invite any group of artists working in a hospital setting to use it, with our written permission of course."

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Le Rire Médecin

The Rire Médecin is composed of a team of artists. Working in close collaboration with medical care workers, it creates regular performances for hospitalized children.

CODE OF ETHICS

In order to maintain the quality and the professionalism of their "work" -- without limiting the creativity of the artist, it is necessary to formulate in a code of ethics the principles of Le Rire Médecin. Thus, any participation in the activities of Le Rire Médecin requires knowledge, acceptance and application of the fundamental principles expressed in this code.

* (The word "work" signifies the activities of the clowns in the hospital.)

Article 1
The artist who works in the hospital is a professional who has been hired and paid by Le Rire Médecin. He is trained and skilled in the performing arts and is experienced in this field. Le Rire Médecin provides training for working in a hospital in order for the artist to better understand and respect this environment and to assist him in adapting his skills.

Article 2
Inside the hospital, the artist will perform no function that is outside the boundaries of his artistic activities. The artist is present in the hospital to help children and their families cope with hospitalization. His work reveals that humor and fantasy can become part of hospital life. The artist must be aware that the purpose of his work is to improve the well-being not only of the children, but also their families and the medical care workers. The artist always proceeds with respect for the work of the medical teams and care workers.

Article 3
The artist never works alone at the hospital. He works as part of a duet and is always accompanied by a partner.

Article 4
The artist is responsible for his actions inside the hospital. The artist bases his work on respect for the dignity, the personality and the privacy of the child and his family. The artist maintains the same professional integrity regardless of the patient's gender, nationality, race, religion, sexual orientation, traditions, family situation, social status, education, illness, or any feelings he may have about that person. He will abstain from any and all remarks that could be inappropriate, even if his opinion is solicited. He will take care not to make any allusion to his own background, traditions, religious faith or political beliefs that could be harmful.

Article 5
The artist will respect the privacy of patients and their families and maintain professional discretion and confidentiality notwithstanding appropriate intercommunication with other medical care workers. Confidential information includes anything that has been confided, but also what one has seen, read, heard, or understood concerning the patients' state of health. The artist will also not disclose the patients' identities or their medical records. Discretion is mandatory in all locations: inside as well as outside the hospital (elevators, dressing or locker rooms, and public places).

Article 6
No matter what the request, the artist will not enter into a relationship with the patient or his family outside of the artist's professional activities. He must never become the friend or confidante of the patient or family. In case of repeated solicitations on the part of the family, the artist must speak to a supervisor on the medical care team.

Article 7
To guarantee the quality of his work, the artist will maintain and perfect his artistic skills (clown techniques) as well as his theoretical knowledge (various pathologies, how children cope with pain, medical vocabulary, child development, etc.).

Article 8
The artist is always vigilant concerning the patient's safety. Patients must not be endangered by the artist's activity, his props, or his movements.

Article 9
The artist respects the rules and regulations concerning hygiene and security specific to each ward in the hospital.

Article 10
The artist never takes sides concerning controversies within the hospital, complaints about service, or problems regarding personnel or management.

Article 11
In his capacity as a Rire Médecin worker, the artist will not accept any gratuities for his work and may not participate in any promotional activity or any commercial venture.

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“When I was having chemo, I think Madame Giraffe helped me, or anyway she helped me not hurt. And when I thought about Madame Giraffe, or when she sang a song or put on a little show, I laughed so much that when they gave me an injection it didn’t hurt . . . If I ever have a kid who gets sick and has to go to the hospital, I’ll just tell him, ‘Well, go to the Gustave Roussy Institut and you’ll see some clowns.’ Because it’s true, clowns make you laugh. If they don’t make you laugh, that means you need glasses!” -- Julie

“It’s great to hear laughter spreading through a hallway where kids are gathered around the clowns, or at the nurses’ station where everybody was trying hard to be careful and quiet just a few minutes before.

“It’s really nice to hear tired children burst out laughing, to see them smile and then look at the glowing eyes of their parents.

“It’s quite a surprise when a procedure known for being intrusive suddenly gives way to a game that lets children channel their unbearable stress into something else.

“That’s what Le Rire Médecin is about. But don’t worry, they aren’t perfect. We like to tell them that, and they understand, and they like to tell us the same thing so that we understand too.”

Sylvie Gervaise, Nursing Supervisor at the Pediatric Hematology and Oncology Ward, Armand Trousseau Children's Hospital

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**Clowning on Children’s Wards**

The following is in part from an article published in The Lancet, written by Daniel Oppenheim, MD of the Unit of Psychiatry and Psycho-oncology, and Olivier Hartmann, MD of the Pediatric Department of the Institut Gustave Roussy and Caroline Simonds. (Lancet 1997; 350: 1838-40) Printed with permission of THE LANCET Publishing Group, London.

The Lancet is the world's leading independent general medical journal. The journal's coverage is international in focus and extends to all aspects of human health.

**The Purpose of Clowning [on children’s wards]**

**Helping children to find their place within the department**

The child perceives the department as a hierarchy with its own vocabulary and rules. The child may feel detached in this environment. The clowns help children to become integrated into the department. For example, a shy African boy was required to wear a Minerva jacket (plaster cast covering the trunk and head). He was symbolically crowned by the clowns--thus the crown replaced the humiliating brace. He became the clowns' king with powers to order them to play absurd tricks. This ritual continued until he could forgo his brace. This helped him to preserve a proud image of his body and social status, and improved his compliance.

**Helping the child master space**

In a hospital, there are set routes and specific spaces. Each place has its own set of rules for access as well as its own function. Everyone can go from one place to another but must respect the reasons for the journey. Clowns help children to develop a complementary relationship to ward designs without rebelling against the basic structure. The clowns are playfully anarchic all over the hospital, demonstrating to the children the unity of the different parts. For example, they redecorated a dark hallway where parents wait and transformed it into a village square, complete with music and dancing. Cleaners might find a conga line of clowns and red-nosed children, dragging their intravenous trolleys and dancing the samba behind them. The clowns create new places where treatments coexist with fantasy.

**Helping children travel along their own path**

Often children proceed at a pace controlled by their disability or energy level. A prosthesis, wheelchair, intravenous line, crutches, nausea, or emotion will modify their rhythm. The clown proposes a scale of motion that creates an acceptable environment. The clown might hop on one foot, shake his knees, or hobble like a monkey. Children can join in, integrating their way of moving and preserving a positive self-image while acknowledging their physical limitations.

**Helping children cope with sounds and silence**

In a pediatric cancer ward, the sounds can be loud and aggressive as well as mournfully silent. The clowns help the children deal with noise by integrating some of the daily sounds into their antics. They transform daily noise from something aggressive into a playful coping mechanism. The beep-beep of an intravenous drip
becomes a calypso song; a door slamming creates an explosion that blows the clown across the room.

Helping children to preserve intimacy

Children do not have undisturbed intimacy places because they must be available for examinations and treatments. The clowns create an intimate space that is neither hidden nor secretive and where the rules of play are only understood by the clowns and their child partners. For example, a 7-year-old boy in the bone-marrow transplant unit was uncommunicative for several months because of persistent mucositis. He was also afraid of speaking aloud his violent thoughts and developed a dog-barking dialogue with the clowns. The child knew that the clowns would accompany him and be the go-between for the emotions of his inner world and the doctors without betraying him and until he was ready to speak.

Helping children to move between medical theories and their own fantasies

Health-care workers have theories about the origins of an illness and its treatment. Children may also have theories but not feel comfortable discussing them. Games allow children to express their thoughts in a safe, non-conflicting manner. For example, Dr Giraffe's tail is attached by Velcro and can be removed and transplanted back. This takes on the form of a sadistic revenge, which can illustrate the desire for an amputated limb to magically reappear. Sometimes the tail is thrown into the rubbish bin which may signal low self-esteem, confused sexual identity, or depressive thoughts of death. The child may put Dr Giraffe's horns on his parent's head and imagine that he had placed a tumor there. The clowns perform red-nose transplants. This can symbolize a successful bone-marrow transplant or raise the question: “does my tumor come from another person?” The clowns use magic to entertain children and to introduce metaphors. Ropes appear, disappear, become knotted, or magically cut and then restored. The clowns take a ball (representing a tumor) and make it disappear and then reappear. Theories and fantasies can be found in this play, such as the idea that an illness can travel within the body or between two bodies, or that the sickness can be magically pulled out of the body. The clowns do not make children believe that their fantasies can become real and they do not incite them to abandon their beliefs. These games can help children stay hopeful even when they are beyond healing.

Helping children cope with their bodies

To entertain patients, the clowns use liquid soap, blown into giant bubbles or manipulated into space saucers. They can symbolize many situations: a tumor can swell and burst at any moment or miraculously disappear. This can be the source of anxiety that something dangerous is growing within the body; like the bubble, the child can disappear. Games of disappearance can provoke anxiety if the child's emotions deviate from play. The child may think about death and resuscitation. The clown stays attentive to the child's reactions, and works to help the child maintain balance. The clowns offer appearances that are varied, unique, and sometimes not human: Giraffe has large horns and oversized ears; Babyface has huge flat feet; Chips has a bald skullcap; Cauliflower has flowers growing on her head; Gus stutters; Cricket is the size of a child. Make-up mimics radiation dermatitis or surgical scars. Clowns show the child that he is not the only one to have a body that is different.

Helping the children to cope with emotions

The clowns may enact situations, emotions, or thoughts that the child is experiencing, to help avoid these emotions being expressed in an uncontrolled manner or being repressed. Children learn that emotions are not something to be ashamed of and that they are not alone in their thoughts and feelings. Emotions can be played out in scenes within the rule that they stay theatrical and playful, and never can become real—even when reality is extremely close to fantasy.

Helping children to transform the department into a scene where imagination has free realm

The hospital is like a play with roles. A doctor will always be a doctor and a patient a patient. Clowns can transform the hospital stage into a play where children choose their roles. One can be the hunter or the rabbit, and princesses can turn into witches. Waiting rooms become places for chases or parades. Playing roles helps children to break away from a rigid self-image and a stiff relationship with the health-care team. It helps to prevent children from seeing the hospital as a place that belongs only to doctors and nurses.

Helping other care givers

The work of care givers is challenging, even when they are experienced and devoted. They run the risk of chronic stress and burn-out when witnessing the sufferings of children. The clowns show that children are not passive, but maintain their capacities to play, to fantasize, to create, and to express themselves. This reassures the care givers and helps them better to understand the child. The clowns also parody the care givers so they can maintain their own capacity for play and imagination and express their own emotions in a safe setting. They also perform for them: a flute serenade for a tired doctor; an operatic duet for stressed nurses.

In what conditions is the clown's work possible?

Clowns can only contribute to a department that is medically competent with excellent nursing techniques, where pain is treated, where families are present, and where the psychological needs of the children are met. Clowns cannot compensate for anything that does not work. Because this work is challenging and potentially emotionally destabilizing for children, clowns must be experienced professionals, trained to work in a hospital setting with a code of ethics and regular meetings with an oncological psychologist. The clowns stay in a magical and imaginary world where anything can happen and is possible, despite awareness of medical realities. Clowns can help children to understand their feelings and thoughts and express them, to preserve and protect the freedom of their imagination and the liberty of their psychic play, and help them confront their cancer without excessive mental suffering or enduring damage.

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