

Making Connections

Camilla Gryski “Flora” of Toronto Canada

Camilla Gryski has worked and played with children for over thirty years, as a teacher, librarian, storyteller and writer, and therapeutic clown. She holds masters degrees in library science and holistic and aesthetic education. Her particular area of expertise is the therapeutic value of play and humour. For nine years, she worked as Posy, the therapeutic clown for the Haematology/Oncology program, at Toronto’s Hospital for Sick Children. Camilla is currently building a private therapeutic clown practice, Therapeutic Clown Services, primarily in the area of pediatric hospice palliative care. Her clown, Flora, comes straight from her heart.

In one of her columns for the Toronto Star, journalist Michele Landsberg talked about a child in a book by child psychoanalyst D.W. Winnicott. Winnicott once described a 5-year-old boy who was anxious about losing his central place in his mother’s life when he started school. He “developed a passion for joining things together with string. He was always tying the cushions to the mantelpiece and the chairs to the tables . . .”

This child made me think about another child, a four-year-old girl I met on the eighth floor at The Hospital for Sick Children in Toronto. Jennifer, a cancer patient, had suffered a relapse. When my therapeutic clown Posy came to play, Jennifer was engaged in stirring little scraps of shredded Kleenex in a kidney dish. She instructed Posy on the correct way to stir: “Stir in circles,” she commanded. We peacefully stirred the little pieces of Kleenex for a while, then she showed me how to squeeze out all the water and make Kleenex sausages with the soggy bits. The sausages were then returned to the water, where they were once again stirred into pieces – only to be made into sausages again.

I can’t help but wonder whether, for Jennifer, there was some satisfaction beyond the pure delight of water and soggy Kleenex. The action of taking apart and putting back together, of making whole what had been fragmented, might have had some symbolic meaning related to the way she was feeling about her life at this stage in her journey with illness. Were things flying apart that needed to be reconnected?

Another insight came from an article I read for a pediatric hospice palliative care course. In an article, “Home Care of the Dying Child,” Ann Goldman references another article by Cribb, Bignold and Ball: “He talks of the contrast between hospital, the world of medicine, and home, the world of biography...” The child comes from the world of biography. Lives are lived in the world of family story. The child and the family are visitors, if you will, to the world of medicine. The professional, continues Cribb, must be able to speak both languages and to translate between them.^{1/}

These stories of string and Kleenex fragments, and the powerful contrasting images of the hospital, the world of medicine, and the home, the world of biography, made me start thinking about connections and disconnections and the role of the hospital clown.



The child who is facing illness becomes separated from school, friends, neighbourhood – all the activities that make up his or her everyday life. As Irma D’Antonio says, the hospitalized child has to cope with “strangeness of the environment outside and inside the body”^{2/} The child struggles with loss of identity, loss of control and even, on some level, loss of childhood. There is a real disconnection here, not only with everything that represents the child’s normal life, but also with the self.

The hospital itself is also disconnected from everyday life. It is a microcosm that is set apart from the rest of the world. We can think of it as a liminal space, an in-between place. It is not the world of biography or family story, where lives are normally lived and meaning is created. It is the world of medicine, a foreign country where the rules are different, the language is different, the smells, sounds and experiences are unfamiliar and unsettling.

This world of medicine not only pulls the child and family out of the world of biography, it has the power to alter the child’s self-image on an essential level. Barbara Sourkes, in her book, *Armfuls of Time: The Psychological Experience of the Child with a Life-Threatening Illness* quotes an eleven-year-old child who comments: “Once you’re sick, you don’t even feel like a human being anymore. They just do things to you as if you’re some kind of robot.”^{3/}

So the child in the health care setting is experiencing disconnection on a variety of levels: from the places and activities of everyday life, from family, friends, school, from childhood, from that unthinking place we call “health,” and even from what he or she has come to understand as the self.

2/ Irma J. Antonio. “Use of Humor in Hospital Settings” in Paul McGhee (Ed.) *Humor and Children’s Development*. The Haworth Press, 1989. p.157.

3/ Barbara Sourkes. *Armfuls of Time: The Psychological Experience of the Child with a Life-Threatening Illness*. University of Pittsburgh Press, 1995. p. 57.

1/ Ann Goldman. “Home Care of the Dying Child.” *Journal of Palliative Care*. 12:3/1996; p.19

Hospital clowns also exist in a multi-layered state of disconnection. Our appearance and behaviour immediately set us apart. In the health care setting, we are even more out of place. And yet we are immediately recognized by the child and family as coming from that other world, the world they know and live in, the world of biography, the world of story. In a recent film about hospital clowning, “Je clowne pour toâ ~ I clown for youhoo!” clown Johannes Galli comments, “That’s why [children] love the clown, because he’s the concentrate of all fairy tales.”^{4/}

The place where the child and the clown meet, the space they create together is the magic circle of play. In the play space, the world of imagination and story, anything is possible.

Bessie Jones and Bess Lomax Hawes, in their book *Step It Down: Games, Plays, Songs and Stories from the Afro-American Heritage* talk about the play circle: “Inside a ring, within its bounds, you are safe from what is ‘outside’; you are in a special world in which you may be either king or prisoner.”^{5/}

Not only is the play space a place of possibility, it is also a safe space which can be a haven for the hospitalized child.

As a parent recently wrote, “Together Posy and [my son] seemed to be in a different world for the time that they spent playing.”

Many connections can be made in the play space. Through the natural activity of play, the hospitalized child is reconnected with childhood. The experience of living for a little while in the world of story offers respite from the world of medicine for both the child and the family. It connects them with each other, and with the world they left when they became travelers in the strange land of illness and hospitalization.

For the child, play is empowering. Play engages the whole person and offers opportunities for creative self-expression. It may be that the child who plays while journeying with illness is imaginatively exploring possibilities for his or her future, an activity that might be connected to hope and healing.

The clown connects with the child in the world of play where they tell each other stories. The play space they create together is open and generous. Sometimes, family, friends, and staff are invited in, or tumble in willy-nilly. Such is the nature of play.

The play space is so encompassing that the world of medicine is transformed. Through play, the child and family connect with the staff in a different way. Even the taps, the IV poles, the paper towels and isolation gowns take on new personalities in the world of story. As clowns, we see and allow all these connections to happen.

What are our challenges as professionals and clowns who travel in these two very different worlds? We need to be able to speak both languages: the language of medicine and the language of biography or story. If we are to build bridges and encourage connections, we must work on some connections of our own.

Our clowns and the techniques of our clown work should inform all our actions – as spontaneous and in-the-moment as they are. We

4/ Available from www.redletterfilms.com

5/ Bessie Jones and Bess Lomax Hawes. *Step It Down: Games, Plays, Songs and Stories from the Afro-American Heritage*. University of Georgia Press, 1972/1987.

need to be clear about our intention, about our understanding of the work of the hospital clown, so that everything we do is connected to everything we believe. And we must ourselves stay connected: to our breath, to the moment, to our unknowing and our vulnerability

I have a vision of a clown wandering through the hospital, looking a little lost but ever hopeful, leaving behind a trail of smiles and connections. As we go from place to place, seeing one child after another, interacting with patients, family and staff, taps, towels, gowns and masks, we bring the world of medicine a little closer to the world of biography. Like the boy and his string, the clown ties things together, not least of all, hearts.

The Dance

Blinds transform the glass room
Into a secret, private place.
Inside the darkened room,
A child and a clown dance.

The child wears pink hair.
She makes the music:
Fills the silence with random notes.

Held in the spell of the moment,
A child and a clown dance.

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“In *Doing the Dance*, the focus is not on what am I doing, but what is happening. That is movement out of self. Out of our self and into the experience. In *the dance* when people are spontaneous they are ready for change, for the opportunity to move forward and the possibility of a new way to deal with whatever their problem is. They are focused on what is happening, not on themselves, but on the present moment. . . .”

“. . . When we are in a playful state, this *dance* is the joining of hearts which is an experience greater than each of us individually. When you are asking someone to join with you, you are making a heart connection. With a heart connection you are making something larger than the two of you individually. That is life enhancing. This is what we live for -- this enhancing of the heart.”

from Doing the Dance
by Jim Ellis, Social Worker
at Children's Hospital of Wisconsin
The Hospital Clown Newsletter, Vol. 5 No 1