



Research

CLOWNS IN HOSPITALS

- International -



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Clown in Hospitals – International – 2005.

Methodology.

After the completion of the Clowns in Hospital/Brazil survey in 2003, and the analysis of its results and revision of methods, in July, 2003, the Doutores da Alegria Study Centre initiated the development of the international phase of the study. Some alterations were made in the basic survey material, such as in the questionnaire and the way the organizations were sought out so that it might incorporate the reality outside the Brazilian context and respond to all the interrogations in the research. Initially, the questionnaire was translated to English with the objective of reaching a larger number of readers. A letter presenting the project and its objectives was sent out together with the questionnaire. Spanish speaking countries received the questionnaires in English and Portuguese. The material was later translated to French, with the intention of reaching the French, Swiss and Belgian publics. The Italian translation was completed and made available in 2004.

The organizations that became part of the data bank were encountered via search mechanisms or sites (*Google, Uol, MSN*, etc), links and indications. The information from each site that was consulted was printed and a file was created containing information such as objective, methods and addresses in a table in *Excel* and *Word* format. Publications, presentation folders and articles were filed in folders. This material is available for consultation at the Doutores da Alegria Study Center.

In addition to these archives, the questionnaires were sent out to each organization by e-mail or mail. We had 124 sites for organizations around the world and 120 e-mail addresses. For another 10 organizations we had only street addresses and for two, we had only a telephone number. 18 references are rather intriguing for this survey, being related to clowns who announce their services for animating parties and events via the internet, but also always referring to some form of philanthropic activity in hospitals. These notes



contain very little information and always show an image. For these we have no information beyond the contact addresses, from which we obtained no return. There were 7 of these cases in the USA, 3 in Germany, 3 in Italy, 2 in France, and 1 each in Porto Rico, Sweden and Canada.

A total of 120 e-mails were dispatched. From these, there were 52¹ returns, and from the resulting correspondence, 10 were returned due to an error in addresses or lack of information. Curiously enough, this same information was obtained from official sites. Another part of the correspondence and e-mail was never answered. On the other hand, some organizations answered e-mails promptly, frequently informing us that there had been an error in the association of their activity with that of clowns in hospitals, but praising our initiative; one or other indicated organizations known to be active in this area. One example was a reply received from Moshe Cohen of São Francisco, who declared interest in the survey but could not answer the questionnaire because *Clowns Without Border* was not working with clowns in hospitals at that specific moment, although the intention existed to do so in the future. Clown One, from Italy, explained that it was not working in hospitals and that it was currently involved in projects involving peace missions. The Italian program Clown One, from Italy had undertaken what it referred to as a clown tour in 2002-2003 in Bosnia Herzegovina, in 2002 in Afghanistan, and in 2004 in China and Tibet (www.clowns.it). The organization Sparadrap declared that it could not answer our questionnaire but sent our message on to le Rire Médecin, under the supposition that we did not have this contact. Another interesting e-mail answer was from a representative of Bataclown in France. This is a theater and clown school which also carries out “clown analysis”, where clowns attend conferences or business meetings to present their viewpoints. Bataclown also informed us that they had read the Brazilian version of the survey and had been interested in the training and clown activities here in Brazil. They publish the *Culture Clown* magazine, dedicated to disseminating the clown culture, twice a year.

¹ 19 e-mail addresses were corrected and sent again.



The COOPi-Ragazzi from Bucharest informed us that although it does this kind of work sporadically it preferred not to answer the questionnaire. ClinicClowns Voralberg also justified not filling out the questionnaire, forwarding it to the headquarters of Clinicclowns in Austria, which replied for all the different centers. Some others answered the e-mails justifying the delay in filling out and sending in the questionnaires. From others we never got the questionnaires back.. There were also some e-mails from which we received an automatic reply indicating the absence of the person responsible.

Through these communications, we established diverse links with each organization. In Spain, we received support from Alex Navarro, producer of ClownPlanet who published a small note (in Portuguese and English) about the survey on the site www.clownplanet.com.es. In Italy, we became friendly with Adriana Patelli, a member of Onlus, who in addition to giving us many invitations to visit Italy, kindly took on the task of translating the questionnaire to Italian, also reviewing the translation together with other unknown partners. She also helped us to disseminate the research throughout the country, indicating a number of organizations. Furthermore, she presented the questionnaire to the director of Onlus and made herself available as an intermediary in contacts with other organizations. In the United States no one was more patient and helpful than Shobi Dobi, editor of the Clowns News Letter. She does not exactly work as a doctor-clown in hospitals, but has one of the biggest clown mailing lists, comprehending almost all of the continents. It is our belief that Shobi Dobi has one of the largest known clown contact lists. However, she would appear to have limited control over it and is unable to distinguish her contacts with clown-doctors from personal addresses and other organizations with different aims. With the thousand other tasks she has taken on for herself and her single-handed publication of the *Clowns Newsletter*, Shobi Dobi always found the time to answer our e-mails and to clarify doubts. In Peru, we established a friendly contact with Dr. Palomina, a Brazilian from Rio de Janeiro who is on the Bolaroja team. She was instrumental in filling out and returning the questionnaire and ended up becoming a long distance colleague through numerous online conversations.



The survey of foreign organizations had already been done in 2002. We were however awaiting the conclusion of the Brazilian phase to use it through the application of the questionnaire. Initially we translated the questionnaire into English; we translated the report on the previous phase and divulged this report over the internet, to make it available for consultation and in order to establish credibility among the different groups in activity.

We thought that the size of the questionnaire would also have considerable influence. Everyone knows what it is like to receive a long questionnaire, full of questions and empty spaces to be filled in, either by mail or by e-mail. It consisted of 50 questions divided into eight parts: I. The organization, II. About the organization, III. About the clowns, IV. About the visits, V. About the organization and the hospital, VI. The financing of the organizations and their activities, VII. Media and VIII. About Dissemination. It is not a small survey, but it is easy to answer. Since the questionnaire is not applied personally, we were counting on the good nature and willingness of each person/organization to fill it out. Frequently we received messages informing us that we would shortly be receiving the questionnaire filled out.

Analysis.

Embarking on a survey that intended to get information on institutions outside of Brazil at the beginning seemed utopian, even crazy. How would we find each group? We knew some of them, but how would we get in touch with most of them? The internet helped a little and provided some relief in the beginning. But this was only the beginning. We also knew of a number of other organizations that could not be reached via the internet, since they did not have websites or because nothing had been published about them or we could discover no links to them. Some other organizations or colleagues would inform us of the existence of a group here or there. In order to carry out searches, the following key words were selected: *clowns*, *clown*, *doctor-clown*, *docteur-clown*, *payasos*, *payaso*, *pagliaso*, among others. This kind of research led us to many different kinds of contacts, from party



animators and promoters to texts containing the selected words and even to clowns in hospitals. We did not always get what we wanted. Adding words to a research field only gives small leads. In addition to national search mechanisms, such as *Google*, *Uol*, *MSN*, *Yahoo*, we used local Italian and French search engines, etc. This kind of research led to sites with biographies of famous clowns, virtual circus museums, personal sites, theater sites, some of which occasionally had links to clown organizations, providing some kind of lead. This was how we managed to reach the small number of organizations that are actually on our files. We believe that there are many more than we were in fact able to locate. For some organizations, we noted the name, for others the complete address and for others just the e-mail address. Some of them provide a history, objectives, etc. We had to make do with this information, sometimes using the e-mail address, sometimes the postal address and, very occasionally, using the telephone, since this involves language differences, not to mention the high cost, etc. The same was true for e-mail, which also involved additional research to see whether the e-mail was spelled correctly or whether there was any mistake in the information given on the site (very rare) or whether the in box was full, etc. These attempts were made with the objective of covering all the possibilities. Perhaps some other organizations have attempted or are attempting to perform a similar kind of mapping operation. It would be useful to exchange information about this.

Whilst searching for organizations, we noted that many other aspects, besides the application and analysis of questionnaires, could be pursued in a survey such as this. We would be able, for example, to assess the illustration or characterization of each organization, since the majority of the sites contain photographs and most of the correspondence received was accompanied by folders, photographs and other documents. However the focus of the present text is not on featuring photographs and citing characteristics. Instead, we have focused on the organization, its way of working, objective, activity and institutional characteristics. Noting how the professional uses the mask is indicative of the clown concept and the hospital work that each clown or organization undertakes. There is a great deal to be studied in this respect. We could also perform an analysis of the information provided by each organization or its publications, which are part



of their production. Most of these sites have a very similar structure. Many of them contain flash animation, photographs, an introduction with the name of the institution and thematic search bars (objective, history, links, contacts, etc). Evidently, they also present their sponsors and collaborators. Other institutions were located since they were mentioned in articles from private and philanthropic organizations or in the media. These texts generally present the organization and a little about its objective and way of working. The characteristics of these sites provide a whole new area for analysis.

An important reference for any person, organization or researcher interested in the subject of 'hospital clowns', is the printed publication: *Hospital Clown Newsletter*. Published since 1998 by Shobi Dobi in Emeryville, California, this publication is dedicated to amplifying humoristic health care. It recognizes the diversity of the clown community and the many possibilities for clown care and clown characterization, be it in hospitals, homes for the elderly or mentally ill, hospices, prisons or any other place where humor, or as Dobi herself says, unconditional love is required. In recent editions, the publication has been placing greater emphasis on the work done by clowns in places suffering the effects of war, such as Iran, Malaysia, Afghanistan, etc. It is published in English, printed on A 3 paper in newspaper format and is distributed by mail to addresses all over the world².

We received questionnaire returns from the following European countries: France, Germany, Spain, Italy, Austria, Belgium and Portugal. In the Americas, questionnaires were returned from Canada, the USA, Mexico, Peru, Uruguay and Colombia³. There was just one reference to an Australian NGO, *The Humour Foundation* (www.humourfoundation.com.au). It was founded in 1997 by J.P. Bell and Dr. Peter Spitzer, to promote the benefits of laughter for health. The essence of the project is doctor clowns. As the founders themselves say, the institution emphasizes interaction over entertainment, benefiting patients, families and health professionals. This was the only organization mapped in Australia. It attends 6 hospitals, as well as hostels in Adelaide and

² The first numbers of this publication were entitled: *Hospital Clown newsletter: the gentle art of the caring clown*. But from the fourth edition the title was changed to: *Hospital Clown Newsletter: a publication for clowns in community and world service*. www.HospitalClown.com, P.O. Box 8957, Emeryville, California 94662.



Sidney. The organization visited East Timor in 2000 and participated in a campaign in Afghanistan in 2002. It was possible to note this concern with war experiences in many groups outside Brazil. We also heard of a group in Hong Kong, which we were unable to locate, and another in Israel, which by the end of the survey had not returned the questionnaire. We are aware that we have no references for clowns in hospitals in Africa and Asia. Perhaps, at another moment, we will have to dedicate ourselves to mapping activities in these places, using different strategies. Or maybe we should start thinking about why the clown is a reference for the West and not for the East?

In Algeria, the newspaper *Le Souke* from the students' club of the Algiers Medical Faculty provides information about some sporadic activities involving volunteer clowns. This however is an organization dedicated to events for sick children carried out by the newspaper team. These events are called "Sourie aux enfants malades", and involve diverse activities and recreation, sometimes with clowns and sometimes without them. Since 2002, this program has been run 17 times in different hospitals.⁴ It is not necessarily a clown visit program.

The following organizations responded to the questionnaire: Federazione VIIP (ViviamiInPositivo Onlus); Dr. Clown; Association Théodora; Asociación payasospital; Associação de Apoio à Criança Nariz Vermelho; Cliniclowns Oberösterreich; La Sonrisa Médica; Big Apple Circus Clown Care Unit; Asociacion SER (Salud, entretenimiento e recreación); Clown Interactive; UTMB Volunteer Caring Clowns; Lê Treffle à 4 Clowns; Doc Willikers Therapeutic Clown programme; Lê Regard du Clown; Child Life Clown Program, Children's Hospital; Klinikclowns Heilbronn; Clowns in Diest; Lauchmuskel-Klinikclowns; Flotta und Company; Les Clowns de L'Espoir; Socorso Clown PSC Sociale Onlus; Hôpi-Clown; Vivre aux Éclats; Asociación Bolaroja; The Humour Foundation; Risaterapia A.C.; Medicloun-Payasos Hospitalarios; Fundacion Doctora Clown; Le Rire Medecin; The Therapeutic Clown Program and Fools for Health.

⁴ Cf. www.lesouk.org



Table 1.

| Values | Qty. mentioned |
|---------------|-----------------------|
| France | 18.8% |
| Canada | 15.6% |
| Germany | 12.5% |
| Spain | 9.4% |
| Colombia | 6.3% |
| Italy | 6.3% |
| USA | 6.3% |
| Australia | 3.1% |
| Austria | 3.1% |
| Belgium | 3.1% |
| Mexico | 3.1% |
| Peru | 3.1% |
| Portugal | 3.1% |
| United States | 3.1% |
| Uruguay | 3.1% |
| Total | 100% |

Source: Clowns in Hospitals research, 2004.

Generally speaking, the activities of the hospital clowns researched are for children and teenagers (22.5%) who are interned or undergoing outpatient treatment in the hospitals, their relatives and those accompanying them, as well as hospital workers. None of the organizations attend only children without covering teenagers or professionals. In reality, all of the characters that cross paths in the hospitals and cross paths with the clowns are involved in the interaction inherent to this encounter. None of the groups answered this question (II.7) in the questionnaire, isolating just one alternative, given that multiple answers were permitted. All of the organizations chose work with children and teenagers. It is significant that a considerable number of organizations (11.3%) had activities for disabled people⁵.

⁵ At least 8 clown organizations or teams are linked with sectors of university hospitals, including in their activities students from the health area, employees or volunteers, the initiative having come from university sectors or hospital departments. In Canada these are: Hospital for Sick Children, M.I.R.T.H. Unit, University of Windsor-Fools for Health Program; and in the USA: Children’s Hospital, Gesundheit Institute, Rochester General Hospital Foundation, Student Clown Doctors Program and the UTMB Clown Program.



Table 2.

| Target public | Qty mentioned | Frequency |
|--|----------------------|------------------|
| children/adolescents | 32 | 22.5% |
| adults | 12 | 8.5% |
| the elderly | 10 | 7.0% |
| mentally or physically disabled people | 16 | 11.3% |
| health professionals | 19 | 13.4% |
| relatives / companions | 27 | 19.0% |
| hospital workers in general | 26 | 18.3% |
| Total mentioned | 142 | 100% |

Source: Clowns in Hospitals research, 2004.

One of the standards we established for the survey from the Brazil phase was the distinction between professional and amateur groups, which involved two important variables: the specialization of the clown and remuneration for the work done. The requirements of each organization for contracting clowns are also good indicators. Among all the groups, we found only six organizations that did not demand any kind of artistic preparation or qualification for the use of the clown mask and language. We believe that the meaning of the mask for those organizations not demanding any kind of qualification is completely different from those that, for example, require some kind of academic qualification from the clowns. But we are unable able to affirm that this variation is visible in the results of the work, since the questions in the questionnaire do not reveal the quality of the work done by each organization. At least 56% of the organizations require some formal specialization in scenic arts or clowning. By formal we mean a drama course, a specific clown course or an academic course in dramatic art. It should be noted that 29 % of the organizations required some circus experience and self-learning, experiences which are quite traditional in Europe, for example. We opted to use the word profession: *1. the act or effect of professing. 2. public declaration or confession of a belief, feeling, opinion or way of being. 3. specialized activity or occupation, presupposing specific preparation. 4. oficio. 5. profession that confers certain prestige through its social or intellectual character. 7. remunerated means of existence resulting from the exercise of work, of office. 8. religious*



office. We opted to use this word in its designation of specialized and remunerated occupation or activity. This was the way we distinguished among the organizations, but if we consider the organizations requiring clowns to be self-taught and to have circus experience to be professional, they are considered to be specialized in another more informal way. Overall, 75% of the organizations remunerate the clowns working in hospitals and only 25% of the organizations surveyed do not pay their professionals for this work.

Table 3.

| Prerequisite | Qty mentioned | Frequency |
|-------------------------------|----------------------|------------------|
| no artistic training | 6 | 6.0% |
| theater course | 18 | 18.0% |
| specific clown course | 24 | 24% |
| academic dramatic arts course | 14 | 14.0% |
| circus | 9 | 9.0% |
| self-taught | 14 | 14.0% |
| others | 15 | 15.0% |
| Total mentioned | 100 | 100% |

Source: Clowns in Hospitals research, 2004.

Generally, for the most part it is the organization itself (65.6%) that is responsible for remunerating the clowns. The budget for such may come from various sources, but mainly from company donations, of which 37.5% benefit from federal incentive laws – individual donations. Frequently, funds come from the organization itself, which creates different products to augment its budget, including: the performance of shows (21.7%), promotion of events (15.%) and the sale of products (14.5%). For 9.4% of the organizations the hospital is responsible for the clowns’ remuneration and, in just one case, a government is responsible for their remuneration.



Table 4.

a)

| Origin of Funding | Qty mentioned | Frequency |
|--------------------------|----------------------|------------------|
| companies | 24 | 19.0% |
| banks | 8 | 6.3% |
| foundations | 17 | 13.5% |
| government | 10 | 7.9% |
| unions | 1 | 0.8% |
| individual donations | 27 | 21.4% |
| hospitals | 11 | 8.7% |
| other NGO's | 2 | 1.6% |
| international funds | 2 | 1.6% |
| team's own investment | 13 | 10.3% |
| others | 11 | 8.7% |
| Total mentioned | 126 | 100% |

b)

| Organization's Own Funding | Qty mentioned | Frequency |
|-----------------------------------|----------------------|------------------|
| no response | 9 | 13.0% |
| giving courses | 13 | 18.8% |
| promoting events | 11 | 15.9% |
| giving shows | 15 | 21.7% |
| sale of products | 10 | 14.5% |
| consulting | 7 | 10.1% |
| others | 4 | 5.8% |
| Total mentioned | 69 | 100% |



c)

| are clowns remunerated? | Yes | No | Total |
|-------------------------------|------------------|------------------|-------------------|
| prerequisite | | | |
| no artistic training | 4.2% (1) | 62.5% (5) | 18.8% (6) |
| theater course | 75.0% (18) | 0.0% (0) | 56.3% (18) |
| specific clown course | 83.3% (20) | 50.0% (4) | 75.0% (24) |
| academic dramatic arts course | 58.3% (14) | 0.0% (0) | 43.8% (14) |
| circus | 37.5% (9) | 0.0% (0) | 28.1% (9) |
| self-taught | 50.0% (12) | 25% (2) | 43.8% (14) |
| others | 50.0% (12) | 37.5% (3) | 46.9% (15) |
| Total | 100% (86) | 100% (14) | 100% (100) |

Source: Clowns in Hospitals research, 2004.

Even though most of the organizations work with specialized professionals, 93.8% also train the clowns in order to adapt the mask language to the needs of hospital work. In general, the hospitals (93.8%) provide special orientation about the work, the patients and how to deal with this specific space.

The characterization of the clowns is a fundamental element. In general, each clown is responsible for his or her characterization (22.8%), which was created by the clown and has been developed in the course of the clown's career, with refinement of the "character". In 11.8% of the teams, medical equipment, together with other accessories: toys, puppets and musical instruments (21.3%) is used in the characterization of the clown and his or her work. The uniform use of accessories for all clowns is only required in 7.4% of the organizations. In general (92.6%), the clowns are free to add the accessories they want for their appearance and repertoire. After the interaction, 56.3% of the organizations state that they give out candies or stickers or some other kind of gift.



Table 5.

| Type of Characterization | Qty mentioned | Frequency |
|---|----------------------|------------------|
| traditional clown costume (red nose, wig and big shoes) | 7 | 5.1% |
| each clown has own characterization | 31 | 22.8% |
| hospital overalls / uniform | 9 | 6.6% |
| organization's uniform | 10 | 7.4% |
| medical equipment | 16 | 11.8% |
| nose | 27 | 19.9% |
| varied accessories (toys, puppets musical instruments) | 29 | 21.3% |
| others | 6 | 4.4% |
| Total mentioned | 136 | 100% |

Source: Clowns in Hospitals research, 2004.

In addition to clown language, the artists also use musical techniques (17.4%), puppets and marionettes (17.4%), magic (16.3%), mime (14.5%), juggling (15.7%) and story telling (12.8%). And mostly these techniques are part of the repertoire (93.8%). They are part of training and are part of an investment in recycling undertaken by all the organizations researched. They use these techniques as a support for performing (81.3%) and in 9.4% of the cases, they master the technique, making it indispensable for the performance.

In general, 81.3% of the clown teams interact with their target public in pairs, visiting each intern on a bed-by-bed basis. A considerable number of organizations also present their work in hospital corridors (30.3%) and in wards and clinics (15.7%), reaching larger numbers of children, teenagers or adults at one time. But all of them characterize these interactions, irrespective of the space in which they occur, as being in accordance with the circumstances of each bed, ward or clinic. For 90.6% of the organizations, it is very clear that the clown must await the permission from each patient before initiating the interaction. There is only one case of an organization stating that the clowns present



themselves irrespective of the patient’s wishes and one case in which the hospital posts the time of a presentation for the wider public. The number of visits made per day varies greatly, but in 71.9% of the cases, over 20 visits per day are carried out; also 71.9% of the organizations work from 3 to 5 hours per visiting day. For 34.4% of the organizations, visiting days occur weekly; for 12.5% of them there are up to 3 visits per week and for 12.5%, visits occur more than 4 times a week.

In 34.5% of cases the organizations institute a partnership with the hospital. In addition to criteria of number of beds occupied (18.8%) or pediatric beds (9.4%), they present other criteria (34.4%), that are not defined in the questionnaire. These criteria are either established in isolation by the organization or jointly with the hospitals, in 96.9% of the cases. In general, it is the organizations that look for the hospital and present the project (71.9%), but sometimes the hospitals seek out the clowns (18.8%) to develop some form of activity, either out of curiosity or because they are familiar with the project and its effects. The most recent partnership are less than six months old and the oldest ones are over six years old.

Table 6.

a)

| Duration of Longest Partnership | Qty mentioned | Frequency |
|--|----------------------|------------------|
| No response | 2 | 6.3% |
| from 1 to 3 years | 2 | 6.3% |
| from 3 to 6 years | 19 | 59.4% |
| more than 6 years | 9 | 28.1% |
| Total mentioned | 32 | 100% |

b)

| Duration of Most Recent Partnership | Qty mentioned | Frequency |
|--|----------------------|------------------|
| No response | 2 | 6.3% |
| less than 6 months | 7 | 21.9% |
| from 6 months to 1 year | 3 | 9.4% |
| from to 1 to 3 years | 9 | 28.1% |



| | | |
|------------------------|-----------|-------------|
| from 3 to 6 years | 9 | 28.1% |
| more than 6 years | 2 | 6.3% |
| Total mentioned | 32 | 100% |

Source: Clowns in Hospitals research, 200

From July 1, 2002 to July 31, 2003, the organizations carried out, on average, less than 100 visits (12.5%), from 101 to 5000 (62.6%) and more than 5000 (34.4%). Even though we have calculated the number of visits carried out since the organizations were founded, any average established refers to different times.

Table 7.

| Number of Visits From 2002 to 2003 | Qty mentioned | Frequency |
|---|----------------------|------------------|
| No response | 1 | 3.1% |
| fewer than 100 | 4 | 12.5% |
| from 101 to 500 | 6 | 18.8% |
| from 501 to 1000 | 2 | 6.3% |
| from 1001 to 5000 | 8 | 25.0% |
| More than 5000 | 11 | 34.4% |
| Total mentioned | 32 | 100% |

Source: Clowns in Hospitals research, 2004.

The great majority of the organizations (96,9%) are interested in the results of their activities and assess these results in diverse ways, using tools such as: reports from the hospital, council or employees responsible (17.3%), interviewing the doctors / employees and directors (22.1%), consulting patients (11.5%), consulting relatives and visitors (12.5%), periodic meetings with the hospital professionals responsible for the assessment (15.4%), applying surveys and questionnaires to the general public, consulting complaints to the hospital ombudsmen (1.0%) and other undefined methods (10.6%). The following tools are used, taking into account the clowns' background and artistic ability (96.9%): periodic reports from the clowns (20.5%), assessment of assiduousness at work (12.9%), individual interviews (12.9%), collective interviews (15.9%), periodic observation of hospital performances (18.2%), skills assessment (12.9%) and others (3.8%). The following



are also used in assessment: reports on activities, attendance, results, hours worked provided to the hospitals by the organizations, in 78.1% of the cases.

The materials used to disseminate the projects or the actual organizations include: internet sites (31.5%), written projects (26%) and folders (20.5%); only two organizations have published books⁶. Periodic publications include printed newsletters (27.3%) and electronic newsletters (9.1%). 48.5% of the respondents do not have any form of periodic publication.

Organizations.

Paysos sin Fronteras: The Clowns without Frontiers is a not-for-profit organization whose objective is to improve the psychological situation of populations, especially children, living in refugee camps, zones of conflict and territories in a state of emergency or crisis or suffering from development problems, with no discrimination based on race, sex, religion or political ideology.. It was founded in Spain in 1993, after the artist Tortell Poltrona's experience in Croatia in the "Education for Peace" project.

www.clowns.org; psfa@clowns.org

Clowns In Dienst: This is a not-for-profit organization aimed at cooperating with institutions such as hospitals bringing joy to children and the elderly. It was founded in Rottenburg, Germany in 1999, and provides constant qualification, training and supervision for its clowns.

info@clowns-im-dienst.de

⁶ There is a publication about the work of Le Rire Médecin, published in 2001 in conjunction with Caroline Simonds and Bernie Warren. *Le Rire Médecin: journal du docteur Girafe*. Paris, Albin Michel, 2001. In response to the questionnaire, Bolaroja from Peru, mentioned having a publication about the organization. Upon consulting group members, we discovered that there had been an error in filling out the question referring to the publication. There is also a publication from Gesundheit : Mareen Mylander. *Gesundheit! Institute: Patch Adams*. Canada, Healing Arts Press, 1998.



The Therapeutic Clown Program: This is a not-for-profit organization that works in partnership with the Hospital for Sick Children in Winnipeg, Canada, seeking to minimize stress for patients and families during internment and treatment through games and humor. It was founded in 1993 in the Child Life Department.

www.sickkids.ca/therapeuticclownprogram ; joanbarrington@sickkids.ca

Klinikclowns Heilbronn: This is a not-for-profit organization and cooperative for dramatic arts professionals aimed at promoting health through clown visits to hospitalized children. It was founded in 2001 in Heilbronn, Germany. klinikclowns.hn@slk-kliniken.de

Child Life Clown Program: This is a government organization subordinated to the Child Life Department. It maintains the Health Sciences Centre dedicated to interdisciplinary health care with particular emphasis on the psycho-social needs caused by illness, on the patients and their families. It was founded in 1989. The clowns are employees of the Winnipeg Children's Hospital.

alangdon@hsc.mb.ca

“Doc Willikers” Therapeutic Clown Program: This is a not-for-profit private initiative aimed at stimulating positive results in the attitudes of hospitalized children and their families. It was founded in 1994 by Paul Hooson after he came into contact with the work of the Clown Care Unit from New York. He applied the same concept to the regional hospital in Bowen Island Canada.

docdodo@hotmail.com

Fundacion Doctora Clown: This is a not-for-profit foundation whose objective is to improve the emotional health of hospitalized children in Colombia, prioritizing children's rights and building a space where exercise creativity and their professional skills,



integrating the clown with the magical world of children. Since its creation in 1998, the organization has attended more than 39,500 children in the country.

www.doctoraclown.org; doctoraclown@hotmail.com

Mediclaun – Payasos Hospitalarios : This is a not-for-profit organization dedicated to hospitalized children. Based on games, laughter and imagination, it seeks to get the children to express their internal world and help them develop autonomy through improved relations with the hospital and the patients’ families. Consisting of theater, music and art professionals, it was formed in 2001 and is the only such organization in Antioquia in Colombia.

mediclaun@latinmail.com

Risaterapia: This is a not-for-profit civil association aimed at the dedramatization of health institutions. It consists of volunteers who entertain hospitalized children, their families and medical teams. It was founded in 1999 by Andrés Aguilar who worked in an American circus as a clown and who, after a publicity visit to a hospital realized the innumerable benefits clowns could bring to hospitals. The first “Laughter Doctors” were university students, studying different subjects, who visited the hospital Federico Gómez;. The organization’s entertainment center was inaugurated in 2003.

www.risaterapia.com; risaterapia@risaterapia.com

The Humour Foundation: This is a not-for-profit foundation dedicated to promoting the benefits of humor for health. The Humour Foundation’s main project is the Clown Doctor, doctors who work in partnership with health professionals. Founded in 1997, its main focus has been children in hospitals, hostels and peace programs, with visits to East Timor and Afghanistan.

www.humourfoundation.com.au; info@humourfoundation.com.au



Fools for Health: This is a not-for-profit organization whose main mission is promoting health and well being in hospitals through music, games involving improvisation and humor, developing and valuing clown practices and researching best practice models. Founded in 2001, it was modeled on the Big Apple Circus/Clown Care Unit, having begun work with adults in a rehabilitation unit at the Western Campus of Windsor Regional Hospital in Canada.

www.foolsforhealth.com; clowndr@mnsi.net

Hôpi-Clown: This is a not-for-profit association aimed at making pediatric hospital stays more comfortable for children through games, music and interactions with clowns. The clowns may also accompany children before or after surgery, trying to help the child to forget that it is in hospital for a few moments. The association was created in 1995, inspired by the “Mecredi des Enfants”. It has a scientific council consisting of doctors, nurses and psychologists, who have written a code of ethics for the volunteers, as well as developing a specific training program for them.

www.hopiclown.be; info@hopiclown.be

Flotta und Company: This is a not-for-profit association that defines its mission as rupturing hospital routine through laughter. Founded in 1999 by Betina, it is active in two hospitals in Fürth, Germany.

info@clown-projekt.com

UTMB Volunteer Caring Clowns: This is a project from the University Hospital of Texas. It has been in existence since 2001 and consists of hospital employees, who created the program after a clown’s visit to interned children in 2000.

basaenz@utmb.edu



Asociación PayaSOSpital: This is a not-for-profit organization that aims to improve quality of life for hospitalized children, dedramatizing the space and offering moments of distraction and entertainment through humor. It was founded in 1999 inspired by the experience of the Clown Care Unit. It provides constant training for the clowns in art, medicine, the hospital environment and psychology to prepare them to work in such a specific environment as the pediatric service of a hospital.

www.paysospital.org; payasos@teleline.es

Clown Interactive: This is a not-for-profit foundation aimed at promoting clown activities in education and health services. It was founded in 2000 and aims at promoting the benefits of clown activities in community education. It is active in Washington in the USA. cip4@msn.com

Asociacion SER (Salu- Entretenimento e Recreação): This is a not-for-profit association whose worked is based on the principle that positive emotions produce endomorphines, a hormone that helps provide immunity for the body. The clowns have been working at the Pereira Rossell hospital in Montevideo, Uruguay, since 1998. correo@gruposer.org

Association Théodora: This is a not-for-profit association whose clowns pay weekly visits to children in hospitals in Paris. It was founded in Switzerland by André and Jan Poulie in 1993 in memory of their mother Theodora. Its activities have expanded to 8 countries. In France, the Theodora Association was created in 2000. It consists of 21 clowns who visit 28,000 children per year in six hospitals.

www.theodora.org; contact.france@theodora.org

Associação de Apoio à Criança – Nariz Vermelho: This is a not-for-profit association whose mission is to provide support for hospitalized children and young people. It has been in existence since 1993, when Beatriz Quintella began to work as a volunteer in various hospitals in the Lisbon region. In 2001, the project received support from Glaxo



Smithkline, since then the organization has become professional, with the entry of two more clowns, who currently undertake the coordination of activities. It was constituted as the Associação de Apoio à Criança – Nariz Vermelho, whose main project is the Operation Red Nose (Operação Nariz Vermelho).

www.narizvermelho.pt; narizvermelho@sapo.pt

CliniClowns Oberösterreich: This is a not-for-profit organization created in 1991, inspired by the work of Patch Adams. It has been active in Vienna, Brussels and other cities.

www.ciniclowns.info; claniclowns@pga.at

La Sonrisa Médica: This is a not-for-profit association that undertakes regular professional clown activities in hospitals designed to transform the space and the children's experience of it. It was founded in 1994 by Miguel Borrás, inspired by the work of the Le Rire Médécin. It is currently active in Palma, Majorca in Spain.

www.sonrisamedica.org; sonmed@sonrisamedica.org

Big Apple Circus Clown Care: This organization was created in 1986 by Michael Christensen in partnership with the team from the Columbia-Presbyterian Medical Center Children's Hospital. Using mime, music, magic and humor, the specially trained clowns bring classical circus clowning to hospitalized children. Today it is composed of 90 professionals who are active in 17 hospitals.

www.bigapplecircus.org; ewngate@bigapplecircus.org

Lê Treffle à 4 Clowns: This is a not-for-profit association whose clowns visit hospitalized children, performing games and playing with them. It was founded in 1998 based on a course offered by the founder Marie H elene Valdant, where people were trained



and selected for the team of clowns that would work in hospitals. Currently the association is working in one hospital in Dijon, France. (no website)

Federazione VIIP (ViviamoINPositivo ONLUS): This is a not-for-profit association, which in addition to clown activities for children and adults in hospitals, sends its clowns on peace missions, gives courses to train volunteer clowns and also maintains the House of Hope, a children's shelter. The association was created in 1997. The team of volunteers performing clown activities in the Martini Hospital came into being 2000. The association currently attends around 100 hospitals all over Italy.

www.clownterapia.it; presidenzavipitalia@ibero.it

DR. Clown: This is a non-profit association whose mission is to improve the quality of life of hospitalized people and reduce levels of stress through therapeutic clowning. The association was formed in 2004. It trains its therapists/artists, collects documents about the practice of therapeutic art, researches the therapeutic elements of laughter and clowning and seeks to exchange information and experiences with doctor clown associations in Canada and the rest of the world. It is active in Quebec, Canada.

www.drclown.ca; info@drclown.ca

Vivre aux éclats: This is a not-for-profit association that provides regular professional clowning activities for children and adolescents in hospitals. It has been active at Centre Medical Pédiatrique de la Maisonnée and at the Hospital Fougeraie à St. Didier and Mont dor since 2002.

vivre.aux.eclats.free.fr; vivre.aux.eclatsanadoo.fr

Le Rire Medecin: This is a not-for-profit association which, in addition to seeking to improve the quality of life of children in hospitals, has, through its observations of the



medical world, developed a new vision of the patient, which it seeks to promote among the health professionals with which it works. The association was inspired by the Big Apple Circus-Clown Care Unit, where Caroline Simonds worked as a clown-doctor for three years using the nom-de-guerre Dr. Georgette Girafalaff. With financing from the Florence Gould Foundation, in March 1991 Caroline Simonds, together with Anne Vissuzaine (Dra. Chou – Fleur), presented the Rire Médecin project to the Hospital de Paris. The association currently has important partnerships with the Fondation Crédit Lyonnais, Ministère de la Cultura and Fondation de France.

www.leriremedecin.asso.fr; rirmed@club-internet.fr

Asociación Bolaroja: This is a not-for-profit organization whose main objective is collaborating with health professionals to ensure the recovery of patients in the pediatric wings of hospitals through the use of humor, or what they refer to as laughter therapy. Before founding Bolaroja, Wendy Ramos worked with the group Pataclown. After meeting Eric Bont (clown course), and the Cliniclowns of Holland and Pupaclown from Spain, she reviewed her professional activities. However, Bolaroja only initiated its activities in 2002, after a great deal of negotiation and correspondence with the European groups.

www.doctoresbolaroja.com; doctoresbolaroja@doctoresbolaroja.com

Soccorso Clown : This is a cooperative of professional artists. It originated from the Clown Aid Association, from the Clown project promoted in Corsia, Italy to provide professional training for clowns. The Soccorso Clown represented the continuation of this project and today has its own exclusive training methodology employing the knowledge and experience of the artistic director Vlad Olshansky. Based on the understanding that laughter and entertainment are a natural part of daily life, they employ the therapeutic power of humor among hospitalized children.

www.soccorsoclown.it; info@soccorsoclown.it



Lê Regard du Clown: This is a not-for-profit association which prepares its clowns to work in hospitals. It was created in 1996 and operates in Paris.

legardduclown@libertysurf.fr

Les Clowns de L'Espoir: This is a not-for-profit association whose mission is to improve the quality of the time spent by children in different hospitals through regular interventions by clowns. It was created in France in 1996.

lesclownsdelespoir@nordnet.fr

Conclusion

We will restrict ourselves here to some brief comparisons between the two phases (domestic - international) of the survey. The results for the two phases are completely different. The organizations active in Brazil have characteristics and way of working which are very different from those surveyed abroad, ranging from the variety of objectives, to their missions and the techniques employed. We are aware that a major influence for the most recent groups were the experiences of groups such as the Clown Care Unit (New York), Le Rire Medecin and the dissemination of the work of Patch Adams, which achieved great repercussion from the publication of his books and the release of the film "Patch Adams: Laughter is Contagious" directed by Tom Shadiac. But it should be noted that Patch Adams is cited as a reference mainly among Latin-American groups and those that were formed recently. As such, it is a reference for a good part of the organizations in Brazil, whilst in Europe and Canada, the references most cited are the Clown Care Unit/ Big Apple Circus and Lê Rire Médecin. Practically all the clown organizations' sites have links to the site of the Big Apple Circus or Le Rire Medecin, as well as other established and disseminated organizations, such as the Doutores da Alegria.



In all, the survey revealed approximately 1110 clowns active in hospitals up to July 31, 2003 (592 men and 518 women), distributed among the 32 organizations that participated in the survey. In total, 300 hospitals had clown visit programs for patients up until July 2003. In addition to the clowns, there was a total of 1,172 people working in these organizations in either the administrative area or involved in other projects. Among the 57 organizations surveyed in Brazil, the number of clowns active was around 613 in 2002. Each survey of organizations in Brazil and around the world revealed respectively 180 (up to December 2002) and 136 (up to July, 2003) organizations. From Brazil, 57 questionnaires were filled out and returned, from the rest of the world, 32.

The major distinction between the Brazilian and the foreign organizations is the number of professional clowns and the predominance of professional qualifications (theater course, specific clown course and academic course) as a pre-requisite for being hired as a member of the team of clowns. 56% of the foreign organizations have such a prerequisite and 75% pay their teams a salary, whilst in Brazil we located 19 teams (from 57 questionnaires), which at the time we characterized as actor clowns. In that survey, at least 45.65% of the organizations had clowns who has done a specific clown course and, out of these, 24.6% had done some academic theater course or another type of technical course. In the revision of the questionnaire applied to the last phase of the survey, we included a question about remuneration of the work. A similar question had not been included in the first questionnaire used with the groups in Brazil. For this reason, we first used the definition of actor clowns in accordance with their formation and we now use the characterization professional clowns, without wishing to designate that they are professional clowns specifically for hospitals. A clown is a clown, wherever he or she is. This distinction is only valid to designate that this actor has a professional formation and is remunerated for his or her work, as happens for example with the actors from the Doutores da Alegria in Brazil.

Another interesting distinction between the domestic and international organizations is the kind of targets they have planned for the coming years. The foreign organizations place greater emphasis on increasing fund raising capacity (19.4%), expanding the clowns



artistic activities to other hospitals (18.5%) and consolidating themselves (17.6%). Refining artistic formation appears in fourth place, with 11.1% of mentions. In Brazil, the results are different: in first place is interest in administrative improvement and consolidation of the organizations (23.5%), then expansion (22.4%) and development of fund raising activities. Improvement of artistic formation also only appears in fourth place, with 18.8% of mentions. A large number of organizations have resources for fund raising, such as the performance of shows and the holding of events, giving courses and doing consulting work, something which is still not very common here in Brazil. Organizations in Brazil are more focused on giving shows, holding events and selling products, rather than giving courses or doing consulting work. Other comparisons could be made, but here we will restrict ourselves to this one, reserving the others for another article to be published. Although the characterization of the clowns, the images, origins and inspirations appear to be similar, we noted that we were dealing with organizations that were very different, both in their way of working, their methods and requirements, as well as in terms of make up and expansion. But the figure is the same, the clown. All the activity stems from the clown.

As was mentioned previously, perhaps at some time in the future we will have to search for references in the Asian and African countries. Perhaps the strategies will have to be different ones. Perhaps this proposal would be more successful with a series of organizations working together. It is by publishing the results of the two stages of the survey that we intend to show other organizations the importance of knowing about the work being done by different teams of clowns around the world, the results and the transformations they are bringing about. In the same way that we have insisted on the possibility of building a network of clown organizations, a proposal which has been taken up by some teams, but which is still greatly limited by the daily difficulties of lack of contact and lack of information about the work being done by clowns in hospitals.

There is a vast amount of study and research, both psychic and physiological, being done into what is imagined to be the therapeutic effects of laughter. As far back as the 11th century, Galean had observed that happy women healed more rapidly than unhappy ones.



Different from the whole of the Middle Ages, and laughter taunts the devil.⁷ Today, medical research is betting on the benefits of laughter to the extent that it alters the behavior of the organism. This is just one aspect of laughter upon which researchers insisted a great deal in the 20th century. And it is upon this aspect that many clown organizations worldwide are founded, linking the objective of the work with the therapeutic modifications from which the hospital and the patient may benefit. In Brazil alone, most of the organizations speak of minimizing the consequences of illness and of the conditions surrounding patients in hospitals through the clowns' activities. Evidently, mention must be made of the objective of bringing joy and happiness, because happiness is the means, the tool, the instrument. For the Brazilian groups, the key point is the humanization of the hospital, in line with the impulse this movement gained with the promulgation of the National Hospital Humanization Program by the Ministry of Health and a certain popularization of the theme. Entertainment in hospitals and the work in dramatic arts is only relevant in some cases. This concern for humanization is not mentioned by any of the foreign organizations, or at least not directly. For a large part of these organizations, mention is made of a concern for altering the quality of life of those interned in hospitals. It should be noted that both the theme of quality of life and the theme of hospital humanization are not unrelated to human development rates and standards, where the reasonableness of a situation is indicated by its measurability. There are also other organizations that, like the Brazilian groups, select among their objectives the promotion of health, the benefits of humor, relief from the effects of illness and situations pertaining to hospitals (stress, routine, anxiety, etc), bringing joy, making the stay in hospital more comfortable, improving emotional health and the psychological situation of the patient. Only in some cases is an interest in transforming the way the patient is seen in the hospital or an integral concern for the formation of the clown mentioned. It may be seen that the groups are multiplying, popularizing a specific type of therapy. Georges Minois recognizes that "nowadays, centers of laughter therapy are multiplying on all the continents. (...) Therapy using clowns has been used for some time in clinics for children, but this kind of treatment for adults is also multiplying, with associations such as Le Rire Médecin, in

⁷ Cf. Georges Minois. *História do Riso e do Escárnio*. São Paulo, Editora UNESP, 2003.



Paris”⁸. Using this therapeutic attribute would we be able to make all organizations equal? Yes and no. But wouldn’t the differences appear to be erased?

As Gilles Lipovetsky⁹ observed, we are immersed in a humoristic society, and everything encourages this humor, where laughter is omnipresent in the means of communication, sympathy and goodness are a necessity and we extol the merits of laughter, its therapeutic benefits, its power to corrode bigotry and fanaticism. But this humor in Lipovetsky levels everything. However, laughter is still something which we have difficulty in delineating, it fluctuates in the indetermination between the individual and the social and seduces the modern spirit.

⁸ Idem, pp. 616-617.

⁹ Cf. Gilles Lipovetsky. “A sociedade humorística” in *A Era do Vazio*. Lisboa, Antropos, 1990.



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