

# Doc Willikers . . . . . The Funny Bone Doctor

a.k.a. Paul Hooson of Bowen Island, British Columbia, Canada

**Doc Willikers** (Paul Hooson) is a "Funny-bone Doctor" and "D.O.D.O." (Doctor of Dis-Order) at British Columbia's Children's Hospital, and Sunnyhill Hospital, in Vancouver, Canada. He is the creation of professional clown, **Paul Hooson**, and has been making regular, weekly visits to the bedsides of sick children for the past four years.

Paul has been a professional clown for 23 years working as *Cirque Alexander* in Canada, Europe, and the United States. He interned for a short period with the Big Apple Circus Clown Care Unit in New York City. Paul shared his experiences with us at the Humor and Health Conference in Winnipeg, Canada in October.



In 1976, I worked as a clown partner with a puppeteer who used puppets to educate the children about hospital procedures. One day he said, "You know we ought to develop a clown doctor program. So in 1993, I developed a goofy, old-time country doctor with a bulbous nose and big feet. Old Doc Willikers gets a lot of mileage out of those big feet. I made them myself out of foam rubber and felt. One even has a natural squeak.

The cornerstones of my work include the essential ingredient of love, and respect for others, coupled with sensitivity to the many complex emotions, and consideration inherent in a hospital environment. These include: a thorough grounding in hygiene, both mental and physical; a good working relationship with staff so they trust you and your program; healthy listening skills; and respect of a child's space.

## ***We succeed as much through comforting, as through comedy.***

I believe a route to the soul is through the eyes (unless the child is visually impaired, in which case it may be through touch, or sound). When in the company of extreme grief, pain, disfigurement, disturbing medical necessities, apparatus, or wounds, I look the child in the eyes, gauge their desire or ability to play, their fear, or fatigue, and proceed accordingly. We succeed as much through comforting, as through comedy -- caring and kindness are critical.

You always have to put the child's needs above your own needs to perform. It's not a show you're putting on, it's a relationship - you become a friend.

You're always modulating the broadness of your character. Sometimes you are way out there and sometimes you are small -- quiet. But even when you are very small, you can get a smile in your eyes and your presence. You have to be able to modify your character in the time it takes to turn around, because there may be a different situation right next to you.

Knowing how to enter a room and when to leave is very important. Get permission from the child to come into the room. When going in, pause and become completely aware of everything in the room.

Give the child a chance to absorb you. Then make a personal connection as soon as possible. This usually involves cheerful, gracious banter. "I've just come to give you a bubble bath," or "Have you had your funny-bone checked lately?" Use something to pique curiosity that will lead into a routine. For example, giving a bubble bath then producing a solid bubble from the air. Bubbles are truly magic, and are a mainstay in dispelling fear with children.

Improvising with what is already going on in the room is often the best direction to take. You can comment on and do light-hearted banter with anything in the room. Doc Willikers always relates to everyone in the room, especially if the child is shy. This takes the focus off the shy one, but is still inclusive of them. Using as simple a question as, "Is this your sister?", referring to someone who is obviously Mom. This sets up a relationship where the clown has a lower status than the child, because the child is "smarter" . . . confidence and trust can grow.

Doc Willikers trades heavily on being less than smart, but he's still convinced he is the expert. "Well, I know everything except that," and then he'll make up something absurd. There is nothing like low status to build confidence in others.

In his ridiculous self delusion, Doc becomes at once lovable, and vulnerable, allowing others to find their spotlight, cheering them on through his own ineptness. They come to his aid, becoming the caretakers in a reversal of the traditional hospital role.

Allowing the kid to care for you is an interesting situation -- the clown doctor doesn't know anything. He doesn't know how to close a door without hitting himself in the nose, or put on his jacket without getting his arm in the wrong sleeve. The kids take over. It's such a reversal. In the hospital, everyone is doing things to them and here they get to take care of the clown. The clown lets everything get askew and absurd, so that everyone gets into the spirit of play. This is a powerful position in building self-esteem and confidence, in a child.

Empowering the child is so important -- even walking into the room and leaving, if the child doesn't want to see you, is a way of empowering the child. How many times does a child get a chance to say "no thanks" in a hospital situation?

### ***Be prepared to be in wonder of anything.***

Find something that the child can do and be enthusiastic about it, even if it is only a blink or smile. Focus on the living - the light that is there, not the dying or fading light. Be prepared to be in wonder of anything. "Wow! What a bigggg bubble!" See with the eyes of a playful child.

Doc Willikers loves to use toilet paper. Toilet paper is great, sanitary and fun. I decorate the room with toilet paper. I use it for magic or start pulling out sheet after sheet and wrap a parent in it to the amusement of a child. "Oh, she's your *Mommy*? I thought you said she was your *'mummy*."

You have to have your antennae way out, sensing everything. You have to be able to judge in a split second whether a situation can take humor or whether it is too serious for humor. Most of the time staff will offer a signal, but you get so that you can just feel it.

You learn to "develop eyes in the back of your head." You never know what will happen and sometimes you have to just get out of the way, right in the middle of a little routine. There might not even be time for "Excuse me." You may just be shoved out of the way. And that is just the way it is. The medical necessity is paramount and you must respect that.

Grief takes many forms and there is a lot of grief in the hospital. Sometimes the grief comes out in a need for attention and sometimes it comes out in anger and depression. Children very often express their anger with the people they feel the safest -- usually the parents. I try to work with the anger by being aware of it and turning it into play. There was this one kid that started stamping on my feet. (Fortunately I have those big padded clown shoes.) I just held his arm so he wouldn't fall down, and he let it all out. Afterwards he was just so relaxed.

Children often speak very freely to a clown; however, you are not there to be a therapist. You want to avoid giving truly serious advice or going beyond your role as a comforting soul and a figure of play.

Sometimes a child will tell you something that is important to tell the social worker. You need to communicate with hospital staff and you need to exercise discretion. I work very closely with the Child Life Worker. They are already embracing humor and play in their work, so you really work hand in hand with them, as a team.

We need to exercise caution when playing with the adults in a room. They may not be the parents of the child. There may be circumstances that you don't know about - divorce, abusive parents etc. Don't assume anything in the hospital. Don't assume that the person sitting next to the child is their parent.

In oncology it is sometimes very difficult to tell whether the child is a boy or girl. There are ways to find this out. Ask silly questions. "Is this your cousin? Oh, is this your twin?" pointing to a young sibling or someone obviously not a twin. Asking names can be another way. If in doubt, stay away from gender.

Develop a good listening feed back relationship with the staff. It is really important that they feel comfortable and are able to tell you anything at anytime. It's a good idea to have one person who everyone knows is your feedback person, so that there is a line of communication to you, whether it is a Director of Volunteers or a member of the medical staff.

You have to be in your clown character all the time, except when you're getting information from medical staff. I relate to everyone as a clown - everywhere I walk in the hospital --to the house-keeping staff, parents, medical staff. I'm always in character. It's not that I have to be funny all the time, but I have to be fully present. That means in character. At the end of the day I'm really exhausted. It requires a lot more patience and stamina than regular clowning. I work many more hours than I do on the street. So I work two hours in the morning and two or three hours after a lunch break. You need to take care of yourself. Because I work alone, I feel two days a week is as much as I manage.



This article was written in 1998. Paul continues to clown at British Columbia Children's hospital. Above he is with his present clown partner Fizzie. Paul has influenced all of the hospital clowning in Canada and is one of the founders of their Hospital Clown Association.