

Clowns, Don't Forget to Debrief!

From Neal C. Goldberg, Ph.D. & Debbie Nupp, L.P.N.

As clowns we spend years warming up with stretching and breathing in preparation for our clowning missions. We've built our characters and even have our costumes and our props. Some of us work as individual clowns in healthcare facilities while others work with a clown partner to journey with us on our day's adventure to the different worlds of our imagination.

Our kind of clown - the hospital/caring clown - doesn't know where our adventure will lead, as each day is filled with an endless variety of medical and emotional unknowns. Will we visit the room of a sick child who wants to blast off for Mars? Will we meet a youngster who is full of life, but has taken a turn for the worse, growing ever weaker? Or will this day include an unresponsive elderly gentleman lying in bed connected to various medical apparatuses?

As Caring Clowns we enter each situation with a seemingly relaxed and comfortable persona-curious, openhearted, and ready to play. Each patient, family, room, piece of art, smell, sound, and sight are absorbed into our body and soul like a sponge. What impact does all of this have on us, and what do we do with it so that it doesn't leave us emotionally worn out?

Clowning typically evokes thoughts of colorful clothing, red noses, spontaneous humor, big goofy shoes, and lots of laughter. These images are right on target for birthday parties, circuses, and street fairs. When our Caring Clown thinks about clowning, however, there are also images of patients with intravenous drips, dialysis machines, bedpans, syringes, and all sorts of other medical equipment. How do we reconcile the trappings of such serious problems with our silly clothing and funny props?

Why Debrief?

"Should the cabin lose pressure, oxygen masks will drop from the overhead area. Please place the bag over your own mouth and nose before assisting children or other adults behaving like children," said the flight attendant before take off.

The wisdom of the flight attendant resonates in our heads each time we leave the hospital with a troupe of clowns - we must first take care of ourselves before taking care of others. Just as the warm-up prepares us for the transformation into clown, debriefing is essential to the transformation from clown back to civilian. As clowns, we have the luxury of portraying ourselves as magical characters. It is at the end of our clowns rotations that the magic ceases and the obligation to our own psychological well-being begins.

Debriefing is an opportunity to process experiences and put them into perspective. It is not a therapy session. It includes confidential discussions in which participation is voluntary. It can occur in group or one-on-one meetings. The goals of debriefing are:

1. To help us realize that our reactions and experiences are unique, but that we are not alone in our feelings and may need to process these experiences.
2. To provide a safe and nonjudgmental environment where we can talk openly and personally, as peers, about our feelings and experiences.

3. To reduce and cope with the impact of normal stress reactions. Psychologists have their own analysis and group and individual supervision in which tedious notes on their sessions are prepared to review with clinical supervisors. Nurses utilize their hand-off sessions for the discussion of events, the hospital's chaplain and/or other hospital personnel specially trained in stress debriefings. Many clowns who provide service in health care facilities seek out ways to cope with their work. They use the healthcare facility debriefing support system or seek outside counseling through their own support group, places of worship, etc. There is a reason why arrangements are made for debriefing in every discipline: there is a universal need for people to make sense of whatever it is they have witnessed and for them to integrate the resulting emotions into their view of themselves and the world.

As a clinical psychologist and director of Lev Leytzan, I facilitate the group's debriefing sessions. Each session is introduced with a chat about the funny moments and clowning techniques that worked or didn't work. Through this easy exchange the group becomes actively engaged and is ready for a more serious discussion of how the clowning made them feel, what the experience was like, and what impact they think their work had on others.

There are multiple ways of debriefing and one needs to find a style that works for the culture of his or her program. Our process is somewhat informal and allows the clowns to move about their psychological space on their own terms. Attempts at journaling or leading a formal debriefing process are usually less effective with teen clowns. Our experience shows that adolescents do better in informal settings where they are free to speak their minds and don't have to worry about pleasing the facilitator.

General Debriefing Guidelines

The facilitator should be knowledgeable in stress management, and group process.

- Provide a safe, private, and relaxing atmosphere (food helps!).
- Reiterate the confidentiality policy: What's said at a debriefing stays there.
- Avoid a critique or blaming during sessions:

Clowning - this is NOT a place to criticize clowning interactions of the day or to make fun of someone's work

Feelings - Each individual's feelings, experiences and mental health are important. Feelings should be accepted, embraced and explored. Group members should not judge or negate someone's feelings as feelings are subjective and belong to the clown.

- Treat each participant respectfully.
- Encourage participation. Facilitators should try to draw everyone into the conversation to the extent that they are comfortable. This is accomplished by asking each participant, "What stands out for you from today's rounds?" Thereafter we guide the conversation so that everyone feels included.

Phases of Debriefing:

Phase 1: Warm-up:

The beginning phase of the discussion introduces the idea of "unpacking the day." Typically, this means asking for the day's memorable moments. "What stands out about your time at the hospital?" "Which routines did you use, how were they received, and how could they be improved?"

Phase 2: Feeling Phase:

Group facilitators need to be mindful of their comfort and skill level when dealing with another person's feelings. For those that are comfortable and have the skills, this phase is recommended. Having primed the clowns through the warm-up discussions, we're now able to retrace their emotional journeys throughout the day. We don't direct which events they share with the group; they've already been trained to recall those that were the most stressful, painful or memorable. The discussion, led by a trained facilitator, might touch upon associations to the clowns' past or current realities.

Phase 3: Re-entry Phase

With the aim of helping the clowns reenter the civilian world in mind, we discuss the power of clowning and plan the goals for their next hospital visit. The clowns know that someone is always available if they need to process something from rounds. And they do take advantage of it! We both carry beepers and are available to the clowns around the clock, for while the group debriefing is sufficient for many, it serves to "stir the pot" for others who then reach out when they are ready.

Transforming from Clown Back to Civilian

Examples of Debriefing Session

From Neal Goldberg *Leader of Lev Leytzan Clown Group*

The clowns had a typical day on the hospital ward. They encountered a couple of kids who had their tonsils removed, a beautiful young lady on dialysis, a kind elderly gentleman who had a hip replacement, and lots of stressed out nurses. The day seemed quite ordinary. Later that night, however, I received a phone call from a seasoned clown letting me know that she was pretty upset after visiting one of the tonsillectomy patients. We talked for an hour and came to realize that she had some flashbacks of her own tonsillectomy some 15 years before. The flashbacks were triggered when she noticed the girl was having a hard time swallowing and saw blood in her tissue.

We all laughed when we met the next day to review our rounds. The tonsillectomy patient, who had undergone one of the more benign medical procedures, had a direct impact on *ZoomZoom*, the Clown. *ZoomZoom* was unfazed, however, by the patients whose lives were at stake and who showed much more visible signs of pain and suffering. After we discussed *ZoomZoom's* experience, a flood of associations followed from the other clowns. One young man explained that seeing the artwork in one room triggered a reaction because it made him recall his grandmother's hospital room walls which were vacant except for his single gift of art. Another recalled the smell of tuna fish when he visited his sick

uncle 20 years earlier and how the smell caused him stress every time he clowned in a nursing home. Yes, even the benign, non-dramatic, non-traumatic stimuli can have a deep impact! We haven't even mentioned the sounds of beeping monitors, the sight of someone being hurried down a hallway on a stretcher, the tubes that outnumber those under your car hood attached to one person, and all the other frightening sensory experiences that come to mind.

Notes from Debbie Nupp, *Coordinator of Rochester General Hospital Caring Clown Unit*

A pair of our seasoned caring clowns was out rounding with a new Trainee Clown. These particular partners were well known for being out visiting patients much beyond their schedule time. They had come upon a private room where a man laid in bed. Prior to entering the room the nurse had told them that he had not responded in weeks. When assessing the situation one of the clowns said, "You have such beautiful blue eyes." The patient eyes blinked. They all began singing, "You are My Sunshine." He started to move his mouth, one of his hands, and his feet. They then saw tears rolling down his cheeks. One of the clowns looked toward the door and there stood a group of nurses with tears in their eyes. They could not believe the connection that they had witnessed between the clowns and the patient. The staff thanked the clowns several times.

This round continued to be an event for the trainee clown as they proceeded to another room. There was a family was awaiting their love one to come out of surgery. The trainee clown knew this family, but was unaware of the family member's hospitalization or of the severity of his condition. The family did not recognize her in clown. The trainee clown never broke her clown character despite her internal emotions. The clown team left this room and proceeded back to the office where I was able to provide them with an informal debriefing session.

There was much emotion between the two events that took place - one of euphoria of being able to make that connection and then that of sadness, shock, and a feeling of hopelessness both for the unresponsive patient and then for a family. Allowing the clowns to have this time to describe, discuss, and share their feelings on what had occurred help deflate the emotions that had been kept internally. As the discussion continue the direction change to what they wanted to do next. Each one of them took it upon themselves to journal this occurrence. Two of them even sent a letter to me and administration to using this round as a documentation of how they make a difference for patients.

One might argue that debriefing is unnecessary. However, the benefits of being able to normalize ourselves, assimilate, accommodate, and integrate our experiences allows for richer and more meaningful opportunities for our own growth and the clown's growth. Debriefing allows us to improve upon the therapeutic powers of our interactions with the patients, those for whom we open our hearts and souls.

In the bestseller, [The Five People You Meet in Heaven](#), by Mitch Albom, we are shown that each person we encounter has a direct impact on our life. As a clown we provide a two-way mirror that provides a reflection of impact one for the patient and one for us. That fact doesn't change just because we are wearing our red noses.

We are still humans who are vulnerable, emotional, and affected by all that surrounds us. For those of us who are fortunate to have been touched by a patient, debriefing gives us the opportunity to try to find meaning in the experience and understand its impact on us as a clown and as a person. As we all know, as clowns we may never have the gift of knowing just how much impact we have on those we clown with and for. Sometimes the impact is known later, especially for those who work in healthcare facilities on a regular basis. In other instances, we may only have the thought that we've touched someone without ever having the privilege of knowing.

Debriefing addresses both the ordinary and the extraordinary, allowing people to give voice to their experiences. Some clowns feel that it is a waste of time and unnecessary while others eagerly look forward to those moments of personal reflection. At a minimum, we have the opportunity to honor our experiences, create a deeper bond among troupe members, and discuss the effectiveness of various techniques. We may even come up with new ideas together. The most important goal, however, is to prevent a post-traumatic reaction in our clowns from repeated exposure to illness and all its attendant sounds, smells, and sights. It is well documented in the psychological literature that untreated trauma can lead to impaired functioning and, in extreme cases, post-traumatic stress disorder.

"Debriefing allows for discharge of emotion and capturing the learning," Faith Stafford writes in Guidelines for Debriefing. Debriefing is the act of purposefully reflecting on our experiences. While it is not counseling or therapy, it can be both therapeutic and educational.



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Neal lives in Woodmere, New York where he has his own child, adolescent and adult psychology practice. Neal holds a doctorate in psychology from Fordham University and two post doctorates from the Advanced Institute of Analytic Psychotherapy.

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She has been a licensed practical nurse for 26 years, and is the mother of two and grandmother of three.



But what if I clown solo in a hospital?

From Shobi

Shobi clowned solo at Kaiser Hospital for 15 years. I can tell you from experience that it is sooooo much more fun to have a partner. This year I have a new hospital clown Partner. She is learning on the job, but she is also a pediatrician who decided she wanted to have more fun in her life. I met her at Adult Camp Winnarainbow on the last day at lunch. Fate put her down at my table! Joanie Macaroni is just fabulous! And I'm sure she will share with you all sometime in the future about her transition from MD modality to seeing with the eyes of a clown.



But for years, I clowned at Kaiser "solo." Coming home every time, my thoughts would go to my mistakes. I have since learned to call them "mis-takes." (A take is a theater term for a little stage scene, i.e., Take 1 Take 2 etc.) But all these Mis-takes make me a better clown.

Focusing on the Journaling of Joy

Being a solo hospital clown, it is very important to journal. We absolutely cannot ignore all the pain, suffering, and stressors in a hospital. We have to keep our 3rd and 4th and 5th eye on them when we "read" our audience -- being the staff, family and the patients.

At first I tried to debrief by talking to friends, but somehow it didn't quite work. They would listen and just say "Oh Wow! How can you do that work?" So I began to journal. My writing began to focus on the joy it brought me and others; and, on the uncanny ability of the hospital clown has (not just me) to be in the right place at exactly the right time and response correctly.

My journaling turned into The Hospital Clown Newsletter and chapters in a couple of books. Now I just email the joyous moment and any problems to the Director of Volunteers. She loves getting them and I keep a copy.

I still have Mis-takes, and I do think about them, but only to understand them. They don't put me down or weigh heavy on my clown soul. I file them away in my mind for reference and very often I will write about them in the newsletter.

It occurs to me as I write this that there are many clowns out in the world who clown alone in hospitals. Would you like to have an Internet Buddy to debrief and share with? Please email Shobidobi@aol.com. Maybe I can connect a few of you. You don't even have to live in the same country! Wow! What a wonderful world of communication we live in.