



In 1991, Caroline Simonds founded Le Rire Médecin, a non-for-profit organization of clowns who perform neither in circuses nor in theaters but in pediatric wards all over France.

For a child and his or her parents, a short visit or a long stay in a hospital often involves feelings of stress and anxiety. To help them cope with these difficult times, Le Rire Medecin's 78 clowns visit pediatric wards twice a week and all year round. Through humor and play, *Dr Giraffe* (a.k.a. Caroline Simonds) and her colleagues make the hospital setting less dramatic by offering the children a moment to dream, laugh and sing. The clowns create an enchanting and unique atmosphere for the hospitalized children. This provides a break in the day for parents and caregivers who benefit from seeing the children enter into a world of imagination and play. These magical moments are possible thanks to the contributions Le Rire Medecin receives from public funding and private donors. To make a donation or to learn more about us please visit our website: www.leriremedecin.asso.fr

Le Rire Médecin, 18, rue Geoffroy l'Asnier, 75004 Paris,



Photo : Jacques Grison / Rapho – Le Rire Médecin



Clowns and Invisible Illnesses

By Le Rire Médecin's editorial team

From the French article: “*Clowns et Maladies Invisibles*” in the Scoop (Le Rire Médecin's quarterly newsletter).
Reproduced with permission.

Translated from French by Renee Thomas, M.D.

In a society where, like St. Thomas, we believe only what we see, we judge the seriousness of an illness by its visibility. But in the case of illnesses such as arthritis, diabetes, or hemophilia, there are no bumps, scars, or deformities to attract our attention. A child who is ill can appear to be in perfect health.

An invisible illness is insidious because its symptoms are not evident to the naked eye. But invisible does not mean imaginary, and some of these illnesses are painful, chronic, and serious. If a child has sickle-cell anemia, asthma, or epilepsy, it is possible that he suffers only at times of episodic, yet sometimes severe, crises. Nevertheless, his entire way of life is profoundly affected: he can't play like other children, or participate in many sports. He is required, without any reason apparent to others, to avoid risks to his health. He is thus often misunderstood, suffering the cruel stares and wounding remarks of other children.

Before the illness has been diagnosed, how is a child to be believed who complains, but shows no obvious symptoms? How is he to be, be believed if nothing appears abnormal? Even some parents may underestimate the impact of such suffering on their child; the same can be said of siblings, friends, teachers, and in general anyone the child encounters. Ignorance and misunderstanding often lead to rejection. In the hospital, clowns are there to help.

A child who suffers has a tendency to withdraw into himself. If he isn't understood, or worse, if no one listens to him, he will cut himself off from others and retreat into solitude. This self-isolation moreover reinforces a sense of guilt. In the face of any illness, the child has a tendency to believe he is responsible for it; but in the case of an invisible illness, he doubts himself even more, and comes to mistrust his body which he doesn't understand. This may have a destructive effect on the development of his personality.

Few studies have looked closely at the impact of the visibility or invisibility of an illness on identity development in children or adolescents. According to Dr. Chantal Stheneur, pediatrician at the Ambroise Paré Hospital (in Bologne-Billancourt, France), illnesses that are least visible often engender the greatest feelings of worthlessness in a child.

During childhood, an individual goes through the process of socialization. Therefore, having an illness disturbs a child's self-concept. Most adolescents compare themselves to other adolescents in order to evaluate their developmental progress. The greater the difference in appearance between an ill child and a well child, the more any comparison with the norm becomes impossible.

Thus a child with a muscular illness who uses a wheelchair will not compare his performance in a 100-meter race with that of a child in good health. On the other hand, the more an ill child resembles a well child, the more the ill child suffers, because comparison with the norm becomes more relevant in the eyes of all, and competition with "normal" children is more likely to occur. Self-esteem can therefore be injured, especially in ill adolescents. Moreover, the rate of suicide attempts is about 10% in patients stricken with a chronic illness; this is a concern especially in adolescents with "invisible" illnesses such as asthma, diabetes, and epilepsy.

How can we help a child who suffers from an illness that no one can see? Minimizing his pain generally has a contrary effect; dramatizing it risks generating needless anxiety. Suffering has a powerful anxiogenic quality (anxiety generating quality), more so if the sufferer cannot see his illness or understand its cause. This anxiety disrupts his body image, and has a profound impact on this self-confidence and self-esteem. It is here that the clown can be useful. First of all, he brings to the situation a nonjudgmental attitude. He offers to the child the possibility of being heard and understood. It is often through laughter that the clown helps the child to reinvest in his body image. Play is a powerful diversion, and not only in the short term; it reminds the child that his body is more than just a source of suffering. But the clown is not there exclusively to make the child laugh. Play can also allow the child to exercise his pain, to "transfer" it to another, to get rid of it, and to take back the power his illness has taken away from him. This can happen through the release of his anger, and even by

rejection of the hospital clown: throwing a clown across the room is a game many children enjoy.

In the presence of clowns, children do not remain mere spectators, but become directors of the game. And so, a magic wand entrusted to a child confined to his bed becomes an orchestra conductor's baton, capable of making the clown perform all kinds of buffoonery, and the simple blink of an eye can give the child control of the clown's slightest movements. To make fun of the clown, to make him a laughingstock, allows the child to express his frustration and his aggressive impulses in a safe, liberating, and healing way.

This taking back of the child's power can also be expressed with gentleness. The hospital orderly *Broccoli*, alias Patrick Dordoigne, recently saw himself stripped of all his clown characteristics by a 12-year-old boy, who gradually took them on. Once "Broccolified," the boy began to give him a massage, reversing their roles in order to care for the wounds, real or imagined, of the clown. It is a good example of the climate of trust which can be established, which allows the child to regain his self-esteem: beneath his incompetent and bumbling appearance, the clown is benevolent and kind.

"I think that my illness hardened me emotionally. I don't cry easily; I keep my emotions at a distance. I lost friends who found me cold, and who imagined that I was incapable of any deep feeling. The experience of living with my illness has without a doubt changed me, and other young people my age still don't understand this. But I like to joke about my illness: humor has been good for me. "

-- an 18-year-old boy with sickle-cell anemia

Website: <http://www.lerimedecin.asso.fr/>