

From Brazil to Norway
From São Paulo to Fredrikstad
From one hospital to another ...

Hello Sykehuset Østfold's people,

This letter was written by Zuzu and Emily, clowns from the NGO Doctors of Joy, working in hospitals in São Paulo, Brazil, and who were with you in Sykehuset Østfold last June.

To write this letter we chose to do so through another letter, one that we received from Norway. A letter from "B..." , "V..."s mother, who was a patient who we accompanied during the week we were in the hospital clowning with Italian clowns Cecilia and Sara from 'Clown in Corsia Brucaliffo'. During this time the Italian clown and our master, Leris Colombaioni, also accompanied us. The letter we received reads:

"Memories of "V..." to the best clowns in the world.

Hi ZuZu,

I want to say thank you to you and your friends for making our time at the hospital in Fredrikstad such a positive experience.

It was a nightmare when "V..." fell off a trampoline. Never in my life had I seen a wound as open as that one. I was so scared and hurt me so much to see my daughter in this way. She still has to change the bandage on her leg and still cannot go into the water at the beach or at the pool. But she is now playing, running about and is very happy. Thank God everything has turned out fine. Next week I hope she will be able to take a shower.

We have been in hospital many times to change the band-aid and we are always talking about you. She cried a lot and was in so much pain, but when we spoke of you, she started to look better.

She always asks if Zuzu is her own clown and I say yes. I say she is lucky to have a clown all to herself. We have a memory forever.

My princess cried a lot in hospital, with so much pain and I could not do anything to help her and relieve her pain. You gave me joy in my heart when you were in the hospital during those days. And "V..." was so pleased and happy even though she was in pain and in a wheelchair. Thank you.

You are wonderful, and we will never forget you. "V..." speaks highly of you and the other clowns and I will put a picture of you in her room.

You are doing very significant work in hospitals.

You are great and it is great that you are bringing a little happiness when people are often sad in the hospitals. You are doing a really great job.

I wish you much luck and I hope we will see you again next year. Let me know if you come back to Fredrikstad and we will see you again.

A big hug from "V..." and her mother "B..." ."

We wanted to share this letter with you because it only came to us - the mother only thought to write to us. We had only developed this relationship with the child because of one nurse's confidence in our work. Explain:

It was our first day of work and we were still finding our way around the hospital and meeting the staff when we met a beautiful girl in a wheelchair together with her mother. The nurse who was taking care of her asked us to follow them to another floor to replace the huge bandage on her leg. For us, it was a privilege because here was a nurse who is not accustomed to having clowns in her hospital, but who did not hesitate to ask the clowns to come along. It was a privilege because she wanted the clowns with her, and, as a consequence, next to the child and her mother, during what she had

to do: take care of the child during a painful procedure. We therefore went to the other floor and waited for the doctor; we stayed together during the whole process of changing the bandage and then all went back to the room together

As standard procedure during our work we do not go into a child's room while the child is being treated, we wait until afterwards. The nurses, when it is possible, wait until we leave the room before they perform any treatment. But these are not hard and fast rules, they are ways of working that have been constructed in accordance with the needs; they are 'living' policies, and therefore, do not have to be followed if a better path can be followed at the time. If a child, companion, nurse or doctor asks for the presence of the clown at a difficult moment, he could be there.

And that request by the nurse determined the building of our relationship with that child and her mother.

And it only one makes sense for a clown to work in a hospital, to present herself as a clown doctor and say, as a clown doctor, that he belongs to the hospital staff, only if it is. I mean, basically, if he is being used by the hospital. If there exists an infrastructure in the hospital which allows the clown to get inside it to build a relationship with the hospital. As we received from you every morning the message that someone was available to give us all the information for our daily work, such as when the doctors gave their time to hear about our work, and when the nurses gave us two hours of their day so that we could sit down together and talk about our work.

Furthermore, we wanted to share this correspondence with you because it says something about a part of our practice as doctor-clowns: a report on our experiences. Every month we send a report on our work to our partners in the hospitals, to the administrative and artistic team and to our sponsors. For us, the report is a dialogue from the artist and his art, which shows his point of view, brings in

our discoveries and teaches us to review our assumptions and expand our dialogue.

As artists, we present ourselves as clown doctors and we look for new people to meet. Our companion in this work, Beatriz Sayad, in her research on the language of the Doctors of Joy explains: "The clown comes to the hospital with a repertoire of skills, with an imagination, with music, with objects he chooses to put in his' medical bag '(which is sometimes his pocket) with a quality of relationship with his partner that provides a basis for his actions, that can provide anything that he wants it to. What he finds is not always a child ready to 'play' with him and create a game of make-believe. He finds disturbed babies, children who are frightened and suffering; others who are anxious, a child ready to build a path to him and another prepared to destroy it as he may only have to see a guitar and scream at the top of his voice 'hey cloooown, play a soooooong! " The hospital is a box of surprises. And we prepared for them. We do not create something that is more thrilling or spectacular, that shuts the 'world out' so that we, the artists from 'this world' can offer a minute of show time. No. We want to build together. We invite our unprepared viewers to begin a brief journey through time with us – one that is full of imagination. For this, we must have patience, modesty, the ability to listen and welcome the generosity of accepting the 'yes' and the 'no'."

We were five clowns when we arrived in Sykehuset Østfold to visit the pediatrics and other departments. We experimented with splitting up: two Brazilians and three Italians, one Brazilian and two Italians and two Italian, two Brazilian and two Italians, a Brazilian and an Italian and a Brazilian and two Italians, two Brazilian and one Norwegian... All in all, we tried everything that was possible in one week of work. All this because we had an idea about the work according to our experiences, but we needed to try it in this new world we were discovering. And bingo! Our experience, precedents

and the experiences we had there lead us to the same diagnosis. One clown is not enough. Two clowns is best. A partnership where dialogue is the polished floor allowing the meetings to take place. It was when we worked in pairs that the hospital could also enjoy the work of the clown doctors as it usually is. It was also in the feedback we had from Marian, in one of our conversations before the makeup. She told us that she had asked the nurses about the clown doctor's work and they had replied: "sometimes we don't know where they are and then we hear a laugh, sometimes we see a bit through an open door, sometimes we stand with them in the corridor and to reach the other side we have to duck under a huge red scarf ...

This is because our interventions are built with the hospital, its layout, health professionals, patients and family. It isn't because we are clowns that our work has a spectacular nature; our work is done with those who allow the meeting, and is built with delicacy, with listening.

In order to show how important a partner is to a clown, we want to tell you about a typical clown doctor's working day: with a journalist and a photographer accompanying us.

The situation was this: Italian clowns and Brazilian clown creating meetings with Norwegian children who speak little English, surrounded by nurses and led by Tor and Ellen, answering questions from a journalist who speaks 'un poquito de' Spanish. And a photographer who wanted to be in the best place all the time. And this situation lasted a little time until Tor opened the door of a room and, calling Zuzu, positioned her in the door (already open) of a room with a baby who was in the lap of her mother. And it happened this way because Tor himself was very curious to see how we work with babies with because he does not visit babies. And there was more, the photographer put Zip (other clown) with his 'concertina' (a musical instrument that looks like a mini-accordion) next to Zuzu for the "best" photo with the baby. Zip and Zuzu took a while to calm

the excitement of those trying to organize the scene and began to move so that the baby followed them around, positioning themselves behind the photographer with his huge camera while a toy baby worm appears and sits on Zuzu's shoulder, then together, very slooooooowly they move towards the little, 6-month old, blond baby. The worm found that the more that what the baby wanted most was to do was to squeeze it and shake her legs while screaming. And so, several times the baby repeated this cycle until, very tired, the worm fell asleep in Zuzu's lap. We took two deep breaths and sent the worm to sleep wrapped up in a soothing lullaby. And now it seemed that everyone, including Tor and photographer, was quieter.

Considering the geography of the hospital and the number of beds in Sykehuset Østfold we have time for relationships to come about. You can stay for quite a long time at each meeting, which in hospitals with an average of 65 children at any one time, as is the case at some hospitals we visited in Brazil - becomes impossible. For this reason and many other socio-cultural reasons, in Brazil, tranquility and individuality are not values. No companion is uncomfortable with a pair of clowns visiting the child next to her son in a room where three children are hospitalized. Sykehuset Østfold had a complaint from a father who was trying to sleep next to his son but was not able to because of our visit to the child in the next bed. And, just as when a child does not want to meet a clown and we do not go into her room, we left that room. Because in a hospital, in the vast majority of cases, we are the only things which one can say no to.

The differences between the work of doctor clowns in Brazil, Italy and Norway, reside, basically, in the socio-cultural differences, but children and clown are the same anywhere in the world. And every child, even sick, wants to play and clown about, and, by nature, live in a world where diversity is his food.

"V..." left the hospital before the week ended, but on our last day at the hospital she returned. Always accompanied by her mother "B..." , she brought her brother and now it was she who was accompanying us during an important moment for us. She had just returned to the hospital to watch the presentation that we gave in the hall of the hospital.

We have kept up our correspondence with "V..." and "B..." , and we hope that we can keep this correspondence up so that one day we can be reunited.

See you soon,

Zuzu and Emily (Claudia Zucheratto and Vera Abbud)

August 2009.