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Proem 00:53

Do you ever feel like you are part of someone else's play? Especially when you go to the doctor's office as a caregiver or caree (also known as the patient). You and your caregiver or caree feel like crap; you're exhausted, you're cranky. What are we doing here? The staff is unfamiliar (really, they're strange). What were we going to accomplish with these strange people? I'm a nurse, a patient expert, and a caregiver expert. Yet most of what I know and teach goes right out the window when it's me in the doctor's office, whether I'm there for myself as a patient or there for someone else like my mom or son as a caregiver. It's 50/50 whether it's a good appointment or a shit show. I need different skills, an attitude adjustment, something when I go to the doctor's office. Being a nurse is no help.

I used to work at Boston Children's Hospital, where I led the Patient Family Experience Initiative. I took a class there from the clowns - they were known as the Big Apple Circus then and the Laughter League now. I wondered if we could learn some of what the clowns can teach us as patients and caregivers about relaxing, reading the room, figuring out what you're there to do, and not ending up more stressed than you went in. Maybe even having a bit of fun. In this episode, some of which first aired in November 2018, we will speak with Jason Stewart, a clown at Boston Children's.

I share this interview again for several reasons. First, my attention the past few months focuses on COVID-19. I'm having trouble catching my breath. No, not from lung infection, from apocalyptic thinking – the world coming to an end. To know me is to know that as a child of holocaust survivors, my pathological optimism competes with apocalyptic thinking. I told my son (in his 40's) yesterday about trying to shake the apocalyptic self. He reminded me that when he was nine, we were sewing quilts



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against AIDS and nuclear disaster. He reminded me that this <u>is</u> the end of the world as we know it – and has been since he can remember. OK, sober thought. Second, I'm preparing an episode about COVID-19 testing. Surprise, surprise, testing is complicated. The interview I recorded wasn't sufficiently clear for my taste. I need another week to prepare. So, I went back to 2018 when I first started podcasting and found this uplifting gem of an interview with a clown. Re-listening, re-editing feeds my pathological optimism. I'm laughing and crying and breathing deeply and freely. Please join me to re-meet Jason Stewart.

Introducing Jason Stewart 04:26

Health Hats: I met Jay in 2010 when I took the course he taught called, *Reading the Room.* I never forgot that day. Going into the class, I thought that I was an empathetic, sensitive person. The course upped my game. I became a better listener. It was my first introduction to mindfulness, even though I don't think Jay used the word mindfulness in the class. I learned new tools to manage stressful situations. So, welcome, Jay. Please tell us a about your journey to becoming a clown at Boston Children's Hospital.

From Theater to Ringling Brothers Circus 05:27

Jason Stewart: Okay. Sure. My story is kind of long. I'll try to give you the condensed version. I was in theater in college and kept getting cast as the comedy relief in all the shows. Every time I would ask to expand my roles, the directors would say, 'Jay, go with your strengths. Then one of the directors that I respected a lot said, 'Jay you fall down well. You should look into physical comedy, clowning, and physical theatre. I thought, 'well, okay, if he says that, then I'm going to check it out.' About that time, the Ringling Brothers Barnum & Bailey Circus came to a town near where I was going to school, and there was an audition for the clown college. And I thought, 'what is that?' Because I'd never even seen a circus. And clowns, to me, meant the guy that shows up at your kid's birthday party. I didn't know anything more about that. But I got talked into it and went to the audition. It was the best thing that ever happened to me. It was a two-hour workshop of all kinds of improvisation and comedy, and slapstick techniques. 'Get up and show us what you got, kid,' was the attitude, and I loved it—elephants in one ring and people flying on the trapeze the other ring. Right in the middle, there we were with the clown alley. And so, I just said, you know, what if they'll take me? I'm doing this because it was too great. So, I auditioned for the clown college, and I got accepted. I was one of the lucky ones. It was a ton of people. They would put it down to just 60 students at the time. It was more like a boot camp than a college. We were there for ten weeks, was seven-days-a-week, knocking yourself out all day long. Great training though, always carried me well. Graduation was an audition to get onto the show. I ended up back out on the road with those guys, the same group that had auditioned me.

I joined that group, and so in some ways, I knew who they were. In some ways, they were these unapproachable heroes of mine. And then I began to realize that no, we're like sort of the same tribe here, and I spent two years out on the road, and I knocked around 500 shows a year. About that time, I realized I needed to go back to school because I left grad school to go on the circuit, and I was going to lose that degree if I didn't go back to get the thesis written. So, I did that. I left the road, and then I was asked to teach at the clown college when I was traveling all over the place. I took every gig to get to use



my newfound love of clown and then went overseas. I was in Japan with a circus. I came back to Ringling. I was the boss clown on The Greatest Show on Earth and writing gags and casting people and supervising the whole crew and blah blah it went on and on.

From Circus to Boston Children's Hospital 08:36

I met my wife in the circus. Our kids were born on the road. We traveled for several years, and then when the kids got to be about school age, we decided to get off the road. By hook or by crook, I heard about this team of performers and various artists and clowns who were performing in hospitals. And I thought, wow. Okay. Well, it's a gig for a clown, right? So, I'm going to audition for it, and I did. And it was here in Boston Children's Hospital, and just by absolute fluke, I fell into this wonderful thing. And I said, okay, I'm a clown for 20 years. I've been all over the place, done a ton of things. But this is the hospital, and I'm looking wow, what am I going to do in there? You can't throw pies. You can't do a bunch of falling down slapstick, you know, blowing things up as we did in the circus. And I thought I need to shut my mouth and learn something about what this is. I can't come in with these guys who have been here for about 15 years, but I can't walk in here and act like I know more than they do because I may know a lot about wowing, but I don't know the venue. I don't know the style. I don't know what's required in that in that environment. So, that was another one of the very smart decisions I made to realize you don't know anything. Come in as a newbie. Come in as the new guy and just learn. And so that's what I had to do. I had this impression that the kids in the hospital were somehow some kind of different creature. They were some alien species. Oh, it's a sick kid. And I was tiptoeing around and worrying that I was going to do something wrong. And then I realized you know, Jay, it's just a kid who happens to be sick. The kid doesn't want you to come in and walk on eggshells and pat them on the hand and tell him he'll be okay. He wants you to be a clown for him. There's an expectation that comes with that nose and those big shoes. And the kid wants you. He doesn't want to be there. He doesn't want to be in the hospital. Nobody does, right. And so, I'd learned quickly to not walk on eggshells and not to treat them as if they were some special case beyond what is required for the environment, but just to be a clown for him and to bust the joint up a little bit. Because that's I think what every kid deep down kind of wants. This is now my I'm into my 12th year performing at Boston Children's and down in Providence at the Hasbro Children's Hospital in Rhode Island. I work two, sometimes three days a week in the hospital. It's an intense experience, but it's wonderful, and I do value it very much.

Embracing failure. It's what clowns do. 11:40

Health Hats: So, I came out of that experience with you when I was at Children's a lot less afraid to fail, actually embracing failure. I think that was something that you talked about in the course. Can you talk more about that embracing failure in your work?

Jason Stewart: Sure. Yes. I always say that I have honed my craft of being a failure because it's what generally an audience wants from comedy. So, failing is taking a chance to make a big choice. It's going beyond your comfort zone and then not hitting the target. For me, the idea of the clown is, in many ways, a reflection of all of us. It's every man. There have been clowns in every culture because there's a



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basic human need for that person. That's that entity in their world. The clown reflects us all, and the clown can allow us to fail vicariously and enjoy or feel good about ourselves vicariously. Because here's somebody that we perceive as even a bigger failure than ourselves. It's a way to laugh at ourselves. And by the clown making themselves vulnerable and making themselves the butt of the joke. The clown opens that door to our own insecurities, in our own foibles, and our own fear that we are losers—any good comedian as a loser. And because the audience, the people that you're encountering, they want that. They want to see it subliminally that they are not alone as a loser. And they can commiserate, and they can at a subconscious level kind of feel a bit superior and empowered by going, "well, at least I'm not this guy." In the hospital, I feel like that's very pointed. Indeed, anybody who's in the hospital can probably use a laugh. And anybody who's in the hospital probably feels a bit like a failure. And when I say that, I mean subconsciously the kid of any age, you know, not a baby but you know kids who have gotten to a certain point probably feel like they've done something wrong down deep because they're in the hospital. They aren't, you know. Their normal world has altered, and it's everyone's paying all this attention to them and trying to do all the stuff. They probably feel like they're not succeeding in being a kid. The mom and the dad probably feel like failures because they couldn't keep their kid out of the hospital. They probably feel like, "oh my gosh, did I do something wrong? Did I pass a gene on to this kid?" Am I a failure? And so, in this stew of bad emotion and fear and anxiety and feeling like a failure. In comes the clown, and I find that there is a level of, I want to say, desperation, but just a very welcoming. Please come in here and do something for my kid.

So, how people perceive what's going on in the hospital - there are tests, blood draws, and all these medical discussions going on. All very high stakes and high anxiety. Everybody gets their shoulders up under their earlobes, and they can't breathe, right? And then we come sailing in. We take that on, and we redirect, and we give them a good laugh, and hopefully, when we're leaving, they take that breath. And they can realize and say 'hey, they're still good out there. There are still laughs and idiots who are willing to walk face-first into a door and do all these ridiculous things. For nothing other than to give you a break so you can breathe again and just kind of go, Okay, what's next? Okay, now I feel a little more rested and balanced. A lot of that comes from these guys' idea are failures, and they empower the kid. The kid is always smarter. The kid is always funnier, stronger, the better example. We need the kids help. We need Mom and Dad's support. We need them. They can feel like they are helping us even if it's just to accomplish the silly goals that we have set in us being a failure, needing their help subconsciously that lifts them hopefully through a good laugh at the end. You set up something, you build it up, and you blow it off with a good laugh. We can leave them in a better place.

I consider a failure if I go into that room and I don't have an effect. If I go in and it's kind of not a positive reaction or not enough, I can't get through. If I can't bring them up; if I can't leave them a little better off. I mean, nobody bats a thousand. There's going to be room to go in, and it's just ice cold, and they're not going to engage, and they're in a hospital. You can't blame them for that, right. In some ways, it empowers them to be able to say no to us. Okay, they cannot say no to anything else in that environment. We've got to do a blood draw. No parent wants to hear that. But you got to stick a needle in my kid's arm. It doesn't matter, but they can't say no, they not in control of their experience right



then, and they probably feel like a failure because of it when we can come in and let them say no to us they can you know in some ways feel like even the rejection of, not today, clowns. We're not up for it today. In a way, that's empowerment, and if I see that as my failure, it's their win. And that's why I'm there.

Embracing failure. Caregivers can do it. 18:25

Health Hats: I hear a couple of things here. One of them is that in my professional life as a patientcaregiver expert or as a nurse, I always thought that if I succeeded at everything, I didn't set my sights high enough. Failing means I tried something, and it didn't work, and I need to adjust. I need to learn from it, and I need to try something different. I feel like managing your health is like that. You take medicine, and you get exercise, you change a habit. And sometimes it helps, and sometimes it doesn't. It's accepting that it's such a shitshow being sick. Finding the humor in the insanity, in the tragedy, in the disappointment, in the pain. Yeah, just helps you know deal with it.

Jason Stewart: I agree a hundred percent. I always say that when I talked to the team, I always say, look, we work in the toughest environment there is -the hospital. I mean when I've done shows. I've worked in big circuses. I've done festivals. I've done stage work. I've done a lot of different things. But the audience is always kind of at a distance and they're anonymous. I'm coming out to present my routines and myself. The hospital is different. There's no room for any of that. There's no time for any of that. It's a lot more about who you are and not what you do. I would say to the guys, 'we're working in an environment where there's illness and anxiety and all these negative emotions and things and even death sometimes. You have to say it, that's what happens. And yet there's laughter. That's a miracle in my mind. How can there still be that? My brain boggles at the idea of the courage of these kids and families in the indomitable human spirit that is there.

The best human we can be 20:52

In the middle of all of that, they can still want us to come in and break up the room and to laugh and to enjoy and be what I consider your best human. I feel like laughter is when you're at your best. To me it's when you are the most human. Because laughter is like an autonomic response, it's not applause, and it's not, "gosh, wow, that was great." It's a real authentic reaction to something that delights you. So, when we shoot our sights up to hitting that laughter, as opposed to just, "Oh, that was a nice song or wow, cool trick." But when we can get to what I consider the autonomic response like breathing or swallowing. You don't think, once you've swallowed something everything else happens by itself. When laughter happens by itself, then you know, you've done something. So I always say when we can be in that environment and face what it is a little bit, we faced it with them. Not like they're facing it, but we know where we're going. We know what floor we're on. We know what diagnosis this is going to be. We know a little bit about what's happening and what we can go shoulder to shoulder and stand-in there with them and say you're not alone. They're still good. We're still laughing. We're still you know, we're human.

Now a word about our sponsor, ABRIDGE.



Use Abridge to record your doctor visit. Push the big pink button and record the conversation. Read the transcript or listen to clips when you get home. Check out the app at <u>abridge.com</u> or download it on the Apple App Store or Google Play Store. Record your health care conversations. Let me know how it went!"

Sometimes shit show at doctor's office 23:11

Health Hats: When people go to a doctor's office, sometimes it works well, and sometimes it's a shit show. You're stressed. The doctor is crazy busy. And sometimes when I go. I feel like I'm on stage, and I have stage fright. And even though I'm a nurse and I'm an experienced person, all that goes out the window. I think that I wish that I was better at improv. Things are just happening so fast, so I'm wondering how we as lay people can use some of the skills you have as a clown and improv to help make that doctor visit less stressful and more satisfying. So not so much like the technical: what are my questions, and what's my plan, but helping to change the dynamic of those five minutes that you have with such high expectations.

Jason Stewart: I think you're onto something there. It's human nature to assume that someone who's an expert in their field is somehow unapproachable and somehow should be treated differently. And so that raises the anxiety level. You're going to see a doctor. You're going to see someone who does things that you can't do, someone who you have to turn to in this time of need. So, of course, you naturally are going to assume they're some kind of superhuman. That adds a level of stress to the encounter when you go to the doctor if there's any way to tell yourself and make it feel real. That this is just a guy, or a woman, its just another human being. I do think that we often skew things in our minds to make, "Oh, I'm not worthy of taking up this doctor's time." And it the improvisation side of that, the clown side of that, would be to, of course, always come back to the equalizing power of laughter. I don't think that in everyone's wheelhouse. Not everyone feels comfortable shooting for comedy. But if they can at least take the mind, this is just another person that's there. The reverse side of that would understand that if you're going to see the doctor when he goes home, he's going to sit on the couch and watch TV just like you do probably. He's not some carved in marble, Greek gods room in the Parthenon or whatever. He is a guy, and you need to approach it in that way. I think not to feel so at sea but not to feel so lost because we're all regular people down deep.

Humanizing the doctor. Check body language 26:15

Health Hats: I think that humanizing is good. Sometimes when I work with caregivers and patients, they try to put a smile on their face, even if they do not necessarily feel that because they find that the other person, the professional, will mimic them. It helps to diffuse some of the tension. A lot of this is so tense.

Jason Stewart: We are all human beings. With our subconscious mind we're all reading nonverbal communication. And that's part of what that Workshop was we did back in the day. That idea of how



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can you read that to know how to respond in any given situation? What is the person telling you without saying it? What is their body language say? What are their expressions? What are the emotions that they're giving off? What does all that say? And it's all sort of subconscious and not something that that they're choosing to communicate. But it is probably closer to the truth than whatever words they're choosing to express themselves. Part of our work as clowns in the hospital is to read those nonverbal communication opportunities. That's the skill that hospital clown develops because of the focus of our work. We aren't trying to cure anything. We're not there to see the charts and understand what this medication has done and what this procedure may have helped with. We don't know any of that. We do know the spirit in the room. We do know the emotional values that are present in this unique setting because each room is different. Every room has different people in it and different people responding in different ways. It's an exhausting mental process for the clown. Everybody who does this work will tell you about the end of the day. You're probably shot. You've been at that heightened level of awareness to read every little expression and every little body language and movement to see what you can do that's going to contribute instead of detracting. The last thing you want is to make it worse for those folks. Yeah, it's that's the old medical value. First, Do no harm. And that's us.

Laughter is the best pain management 28:57

Health Hats: So, I want to ask you one more question, and then I'll let you go. One of the things that I saw you guys doing that was impressive to me was that you didn't just go into people's rooms, sometimes you went with people to procedures, and the kids ended up needing either no or less pain medicine to get them through the procedure. So, what's that about?

Jason Stewart: We don't go in there thinking that we can cure anything or that we're going to be able to affect stuff medically. However, there is truth that the patients' and families' emotional states will affect how things proceed. There's been a lot of evidence and a lot of attention shown to the idea that human emotions are important, and laughter and the release of the stress release and the patient's comfort level will dictate some of that. There's a group in Israel that you get assigned when it's a pediatric thing. That kid gets assigned a clown that works with the kid before anything happens. And goes along through the stages of the procedure that they can be there for. It's a whole different focus than what I think we are about. But there is evidence that that is of benefit. Now we go into areas where it might surprise people because we will be asked, 'hey, we're trying to get this kid to hold still a minute to put an IV in. Can you guys help us with the distraction by creating an experience where the kids will focus on something else while making these things happen? Now, we're not scrubbing in and going into an emergency room, operating room, or anything like that.

Part of the circle of care 31:15

But I do feel like we're part of The Circle of Care in our way and how we can use our strengths. We can contribute and often with stress reduction and distraction and raise emotional positivity that can contribute to things like needing less sedation or needing less painkillers later on. There's truth in the fact that laughter releases endorphins, leading to healing and just lower blood pressure and that kind of



stuff. And so in that way, I'll take you that I'm sort of a medical person. Not really seeing myself as a doctor other than the fake name that I use when I'm clowning there at the hospital.

Health Hats: Hey Jay, thank you so much. I really appreciate you taking the time. This has been valuable.

Reflection 32:15

See what I mean? Uplifting, laughter, tears, deep breathing, feeding optimism. In the November 2018 episode I included a recording from a Caregivers Conference I hosted on *Reading the Room, Lessons from the Clowns for the Doctor's Office.* We talked about taking control, managing failure, making connections for support, finding the humor in the shit show, taking care of ourselves. Lessons from the clowns never get old. You are not alone. Honor the caregivers, help the helpers. Onward.

