



Tops, Tales and Granny's False Teeth: 20 Years On

IN MEMORY OF DOROTHY RICKARDS

Judy McKinty

This year marks the 20th anniversary of a remarkable experiment to introduce children's own culture into one of Australia's leading paediatric hospitals. 'Tops, Tales and Granny's False Teeth' was an interactive exhibition of children's traditional play, based at the Royal Children's Hospital, Melbourne. The project was supported by a number of organisations, including the Royal Children's Hospital Foundation, the Australian Centre at the University of Melbourne and the Children's Museum at the then Museum of Victoria. The planning and operation were carried out by an innovative group of people led by Dr June Factor, and volunteers from the Storytelling Guild of Victoria, the Country Women's Association, tertiary colleges and other places came to read stories and play games. Dame Elisabeth Murdoch officially launched 'Tops, Tales and Granny's False Teeth' on 10 April 1990, and it was open during weekdays for a month.

DESIGN OF THE EXHIBITION

The exhibition was located in a disused lecture theatre on the ground floor of the hospital, in an area undergoing renovation. The ceiling had been removed, revealing concrete and brick walls, plumbing, wiring and metal framework.

Designer Mary Featherston transformed the ugly room into a pleasant, informal space – comfortable, welcoming and non-medical – where patients, visitors and hospital staff could play games, read books, listen to stories or just rest and relax away from the clinical environment of the wards. It was

a place where people could forget, for a while, the reasons why they were in the hospital.

There's something positive about getting out of the ward.

(teacher at the hospital)

Bright red and yellow balloons covered the ceiling. The walls were hung with calico panels, which muted the sounds in the room in contrast to the echoing corridors outside the door. The furnishings were flexible and easily moved to accommodate wheelchairs and trolleys, and adaptable for visitors with different physical capabilities – tables and trolleys with raised edges allowed children in wheelchairs to play with spinning tops, jacks and marbles at a raised level, rather than on the floor. Along one side of the room stood a display cabinet full of traditional toys and games on loan from the Australian Children's Folklore Collection or donated by embassies.

In the centre of the exhibition was a red carpet, with long cushions at the sides, inviting people to sit on the floor. In this soft space, full of interesting things to explore, a two year-old boy crawled for the first time since the accident which sent him to the hospital, interrupting the development of his motor skills. He returned several times and continued to improve in his movement and the use of his limbs. A video of his achievements was borrowed by the hospital and shown to physiotherapists.

TRADITIONAL GAMES

One of the purposes of the exhibition was to introduce children's traditional games and storytelling as a way of bridging the lives of the children inside and outside the hospital. Children in hospital miss out on the day-to-day happenings in the school playground – the latest craze or 'in' joke, the games, lively banter and shared secrets that are part of the culture of childhood. They are isolated from their friends in a clinical environment designed for adult use.

The games available in the exhibition – traditional games like marbles, jacks, string games, paper and pencil games, and spinning tops – were particularly

suitable for the purpose. They adapt to different ages and abilities, and patients who visited learned a new game or gained some new skills, which raised their self-esteem and, instead of returning to school feeling they had missed out, they could bring something from hospital to share with their friends. The play activities also allowed children to exercise control and freedom of choice in an environment where these are often taken away from them.

The exhibition was popular with adult visitors too, as traditional games remain in the memory and can often bring back pleasant memories of childhood.

I'm surprised I still know how to do it – it's been 30 years! To child: Bet you didn't know I could do that, did you!

(parent playing string games)

Hospital staff from different countries shared their childhood versions of the games and loaned toys for display, and a Vietnamese mother demonstrated how she played a game of Jacks with chopsticks and a ball.

The hospital Play Specialists were given specially-developed 'games baskets' filled with traditional games and activities for children who were restricted to the wards. The baskets were donated by Melbourne retailer David Wang. Each day exhibition volunteers and staff visited the wards to share the games with children who were bedridden or otherwise unable to visit the exhibition. The baskets also allowed parents to play with their children and provided interesting and enjoyable activities to help pass the long hours spent in each other's company. Many children do not bring anything from home to do while they are in hospital, or they get bored doing the same thing all the time. Some children told us they were lonely during the day.

The traditional play activities also provided a way of reaching patients who were withdrawn or traumatised. A patient from the Psychiatric ward who had very low self-esteem was reluctant to participate, and needed a lot of encouragement to help make a paper fortune-teller, or 'chatterbox'.

After watching the others for a while she began to join in, and soon took over the writing of playfully rebellious messages under the numbered flaps. She made her own fortune-teller and later learned how to make some string figures, which also helped to build her confidence.

Making friendship bands was a good way to involve some of the adolescent patients who felt they were too old to play the games. It seemed that while their hands were busy they were less self-conscious, and they enjoyed talking while they worked. Several of the older patients made friendship bands for friends, family and other people in the hospital.

Christine Bowen, one of the Play Specialists, when asked what our visit had meant to her, said that it had broadened the scope of activities she would be using with patients, but, more than that, she found it had made her realise that 'these games mean something special to children. They come from within the child. They're not just games, but something basic that children understand. They're simple, and it's this simplicity that makes them so important'. She said that in the hospital they try to keep up with the latest toys so the children won't feel as if they're missing out, but 'the traditional games seem to connect with the children in a way that the others don't'.

READING AND STORYTELLING

Reading and stories were considered to be very important for the patients because they could be temporarily freed from the reality of their illnesses. There was a lot going on in the wards and very little privacy. Reading allowed the children to withdraw into a private world when they needed to. Storytelling was also a good way to involve younger children and those who couldn't play the games. Children's books were donated by publishers and were read eagerly by all ages. In the exhibition, a listening post with headphones and a selection of story tapes was available for complete absorption in a story, and in the wards volunteers read stories to individual children in bed, in intensive care or, in one case, to a girl in a coma.

Puppets were used to tell stories. Finger puppets

enabled a volunteer to reach one girl who was quite withdrawn. *The Very Hungry Caterpillar* was a special favourite, particularly when Dorothy Rickards and June Epstein presented the story to an audience of patients, family members and visitors, illustrating the transformation from caterpillar to butterfly with Dorothy's specially-made puppet. The puppet was also a great favourite among the volunteer storytellers, who used it to tell the story several times. Children also made simple puppets from materials available in the exhibition space.

SURPRISE VISITOR

One of the fourth-year Primary Teaching students from Victoria College, Toorak Campus, brought her pet bantam, Penny, to the hospital. There was great excitement! Everyone took turns at feeding Penny with millet, and Penny obligingly pecked from each little (and big) hand. One boy, about 10, didn't believe there was a chicken in the hospital and thought it was going to be a puppet or someone dressed up. He wheeled his chair up close to the chicken to listen to the story of *Henny Penny*. Penny also visited the wards, and everywhere she went she left little grains of millet on the beds. She left a special gift on one bed – a tiny feather, which was pasted into a little girl's diary.

PERSONAL INTERACTIONS

People heard about the exhibition from radio, television and by word-of-mouth. The transformed lecture theatre became a sort of information exchange with the sharing of games, ideas and childhood memories, the collection of games descriptions and the borrowing of books. The exhibition coordinators also gave short talks to hospital staff on traditional games, storytelling and the importance of play for children's wellbeing.

The hospital Play Specialists were vital to the success of the program, and they were involved from the outset. They brought patients down to the exhibition and used the baskets of games in the wards. Other hospital staff called in to talk about the display, the games and their own childhoods – medical staff and students, administration, catering, domestic services, teachers and workmen involved in the hospital renovations. One painter sneaked



TOP OF ARTICLE (previous page) Amy Saunders and friend making 'Cat's Whiskers' with string
Photographer Judy McKinty

ABOVE A patient tries his skills with the diabolo, watched by exhibition volunteer Sean McKinty and a young visitor
Photographer Judy McKinty

in every day to try and master the diabolo, and an impromptu marbles tournament took place between a group of fifth year medical students, painters and builders.

It was important to keep faith with the children, to follow up requests and keep promises. In hospital things are always changing – staff rosters, patients being admitted and others leaving – so there was a need for something in the children's lives that was constant and continuing. A boy had one chapter of a serial read to him each day, and we also had 'regular' children who visited often, picking up where they had left off the day before.

NEED FOR SUCH A PROGRAM

Apart from the positive influence on patients' wellbeing, there were a number of common situations where our presence in the hospital was found to be beneficial.

While children are usually sent home from hospital

as soon as possible, we found a great need among the longer-term patients and their families to have a place away from the wards where they could relax and talk about the ordinary things that children talk about. The canteen was being used for this purpose – parents took their children there and bought something to eat and drink to fill in time. They were usually pleased to find there was somewhere else to go, and expressed surprise and delight when they entered the exhibition space.

In hospital, the time spent just sitting around and waiting is an ongoing issue for patients and their families. One family of seven children from country Victoria had spent long hours sitting in a waiting room while their parents were with their baby brother:

*We waited for five hours on Monday.
We got so bored we rearranged the furniture.
(12 year-old visitor)*



These children, too, were sharing a family anxiety and needed to relieve the tension and boredom of long hours spent waiting in the hospital. They became daily visitors to the exhibition, making themselves at home and borrowing books on overnight loan to fill in time in the evenings at their accommodation nearby.

When family members had to go home and leave a child in the hospital, it was reassuring to them to know that there was someone who would visit in their absence. There were numerous requests from children to 'please come back again.'

One of the nursing staff commented that it was beneficial for patients to have the 'one-on-one' time the volunteers were spending with them, as the nurses had no time to do this, despite recognising the need. Nursing staff began requesting visits from the storytellers and Charge Nurses began asking if we could sit with specific patients. We drew up a visiting list each day, and despatched volunteers to the wards to visit children with particular needs, either for a story, a game, someone to talk with or sometimes just to cuddle them.

The need for such a visiting program within the hospital was mentioned by Dame Elisabeth Murdoch in her speech at the exhibition opening. Dame Elisabeth had herself started a program of games and visits to patients many years earlier but, she said, 'it was swept aside by a wave of professionalism'. One of the Charge Nurses commented that the regular hospital volunteers used to visit the children to read and talk, but they did not do this any more, although the need was still there.

CONCLUSION

Apart from the joy of shared play experiences, 'Tops, Tales and Granny's False Teeth' provided a link between patients, their families, hospital staff at all levels, visitors and the exhibition workers. It was a bridge between the lives of the patients inside and outside the hospital and helped to provide a focus for the children and their families, to relieve the tension of the long hours spent waiting. Having opportunities to make choices,

follow their own interests, learn new skills, interact with other people and engage in their own culture positively affected the patients' wellbeing and their experience of being in hospital. The positive benefits were clearly evident in evaluations written by nine of the hospital's Play Specialists at the time.

The exhibition space was informal, non-clinical, child-friendly and child-sized. Apart from being welcoming and uplifting, the soft space was shown to encourage movement and exercise, and the playing of traditional games provided enjoyment, introduced new skills and raised self-esteem. Using the tactile games materials stimulated actions which were beneficial to the patients and exercised muscles, hand-eye coordination, concentration and memory. The materials were suitable for all ages and most physical capabilities.

'Tops, Tales and Granny's False Teeth' was an indirect approach to treating the child, which dealt with the *whole* child and the family, and as such could be considered to have real therapeutic value. Twenty years ago the benefits for children participating in this experience were recognised by a wide range of people, including medical staff. Perhaps the time has come to revisit it. ★

Judy McKinty is an independent children's play researcher and cultural heritage interpreter based in Melbourne. She was a joint co-ordinator of 'Tops, Tales and Granny's False Teeth' with Dorothy Rickards. Together they wrote an earlier article entitled 'Tops, Tales and Granny's False Teeth': Children's Traditional Play in a Paediatric Hospital' (Play and Folklore no.18, July 1990, 4-6).

References

'Tops, Tales and Granny's False Teeth' diary (unpublished) – notes, observations, personal thoughts and information written at the time by exhibition staff and volunteers. Australian Children's Folklore Collection, reg. no. HT 8476.1, Museum Victoria.

Photographs are reproduced with permission of the photographer, Judy McKinty. Diligent attempts have been made to contact the original subjects in the photographs.

