

PRESCRIBING HUMOUR IN HEALTHCARE - PART I

by Joseph Agius

With regards to the effects of humour and laughter on immunity, research is not so conclusive. While some studies have reported that IgA, T-Cells and Natural Killer Cells increase with laughter, methodical problems question these conclusions. According to Sultanoff, it is also not yet clarified whether laughter reduces blood pressure. One study found no overall correlation when scores were separated by gender. In women, high humour scores were correlated with lower blood pressure and for men high humour scores were correlated with higher blood pressure. Sultanoff also notes that 'diabetic patients, on a day when watching a humour video, had lower glucose levels (after eating) compared to a day when they attended a bland lecture'. While the first wave of research data in the 1980's focused mainly on the relation of humour and laughter with pain reduction and the immune system, there is exciting new research, mainly in Japan, examining the impact of humour on specific disease conditions (McGhee2). During the course, current research evidence on the potential health benefits of humour and laughter was reviewed.

Therapeutic Use of Humour

According to the Association for Applied and Therapeutic Humour, Therapeutic Humour is 'any intervention that promotes health and wellness by stimulating a playful discovery, expression, or appreciation of the absurdity or incongruity of life's situations. This intervention may enhance health or be used as a complementary treatment of illness to facilitate healing or coping, whether physical, emotional, cognitive, social or spiritual'. Thus, humour therapy is a therapeutic process claiming beneficial effects from the use of positive emotions associated with laughter. The benefits of humour makes an appearance in the Bible itself. The Book of Proverbs 17.22 states 'A merry heart doeth good like a medicine: but a broken spirit make one sick'.

The earliest historical reference to humour therapy comes from the fourteenth century, when French surgeon Henri de Mondeville used humour therapy to aid recovery from surgery. He wrote 'Let the surgeon take care to regulate the whole regimen of the patient's life for joy and happiness, allowing his relatives and special friends to cheer him and by having someone tell him jokes'. In the sixteenth century, Robert Burton, an English parson and scholar used humour as a cure for melancholy. Also in the sixteenth century, Martin Luther used a form of humour therapy as part of his pastoral

counselling of depressed people. He advised them not to isolate themselves but to surround themselves with friends who could joke and make them laugh. In the seventeenth century Herbert Spencer, sociologist, used humour as a way to release excess tension while educator Richard Mulcaer recommended laughter for those suffering from head colds.

Modern humour therapy dates from the 1930's when clowns were brought into hospitals to cheer up children hospitalised with polio. However it was author Norman Cousins who brought humour therapy to the attention of the medical community in 1979 with the book 'Anatomy of an illness'. Cousins detailed his experiences in overcoming ankylosing spondylitis by laughing at favourite comedy shows such as 'Candid Camera' and 'Marx Brothers' films. He claimed that ten minutes of laughing gave him two hours of drug-free pain relief. In 1998 there was renewed interest in the uses of therapy thanks to the release of the film 'Patch Adams' starring Robin Williams. The movie is based on the real Hunter 'Patch' Adams treating the poor in rural West Virginia while bringing 'fun, friendship, and the joy of service back into health care'.³



More than a hundred American hospitals now have either humour rooms or a smaller version which is called a comedy cart - funny books, DVDs and cartoons. A software package has also been developed in order to help hospitals provide personalised humour prescription to patients. Although humour therapy has been widely accepted, not everyone will appreciate it. Some people may consider humour in these situations as inappropriate. Therefore, it is very important to know and be able to identify risks of humour in therapy.

The Course

The purpose of this course was to help participants understand how to use humour in the health setting in order to enhance communication, as well as diagnostic and treatment skills. It also activates one of the most powerful means available to us for dealing with daily life stress - our sense of humour! ... quoting Oscar Wilde, he used to say 'Life is too important to take seriously - so laugh!'

Dr Patch Adams argues that caring is not a business transaction but a loving, creative, positive human interchange. The course was merely the first step. It did not make participants a comedy writer or a stand-up comedian - but it did show how to build up

the basic skills needed to use one's sense of humour with clients. During the course, current research about humour and laughter was presented and the use of humour as a clinical tool was explored and the theory and rationale for its application in health care discussed. The course focused on how humour can be used as a mechanism to enhance communication and build a healthy therapeutic relationship.

The aims of the course were to enhance the participant's ability to:

- Understand the experience of humour and the experience of laughter;
 - Identify the core therapeutic impacts of humour;
 - Distinguish between the physical, emotional, and cognitive benefits of humour;
 - Understand the different types of laughter;
 - Attempt using the Humour Training Program;
 - Understand what triggers a humorous experience and discuss humour styles and theories on humour;
 - Outline the philosophical literature on humour throughout history;
 - Understand the development of humour in children;
 - Understand humour and gender;
 - Describe linguistic humour and language play: Irony, Paradox, Parody and, Satire;
 - Identify risks of humour in therapy;
 - Develop a sense of humour and increase one's 'humour quotient';
 - Identify how humour can be used as a treatment tool;
 - Understand how to develop and expand one's humour interventions;
- Integrate a model of therapeutic humour at work.

The Humour Training Programme

During the course, participants were also introduced and went through the humour training programme developed by Dr Paul McGhee 'The 7 Humour Habits (7HH) Programme'. The effectiveness of this programme is documented on three continents and is presented in the book 'Humor as Survival Training for a Stressed-Out World - The 7 Humor Habits Program'.⁴

Participant feedback

Following the delivery of the course, in-depth participant

References

1. Sultanoff SM. Humor Matters: Clinical Applications of Humor in Psychotherapy. HumorMatters™. CD ROM. 2004-2009. The Steve Frankle Group, LLC.
2. McGee P. Humor: The Lighter Path to Resilience and Health 2010.
3. Adams P, Mylander M. Gesundheit! Bringing Good Health To You, The Medical System, And Society Through Physician Service, Complementary Therapies, Humor And Joy 1998; Rochester: Healing Arts Press.
4. McGee P. Humor as Survival Training for a Stressed-Out World. 2010.

Bibliography

Agius, J. (2010) 'Wit' or Without: Facilitating a Positive Attitude towards Communication using Humour in Stuttering Therapy. 2nd European Symposium on Fluency Disorders, Antwerp, 2009.

evaluations were employed to fine-tune future course organization and course content. All scores averaged 'very good' to 'excellent'. 'As a family doctor I feel I that the course has improved my communication skills and has enriched me personally as well'

'I am in a better position to use humour as a communication tool in practice'

'Good course because it made a difference of how I tackle stress and look at problems'

'Got more knowledge and skills to use them in my personal life and in my medical career. Well done and keep it up'

'I feel more confident that a humuristic approach does not mean being unprofessional as long as it is applied adequately. Humor takes away the rough edges of reality, creates positive stimulation; if adequately applied provides a common platform for individuals to communicate and makes life worthwhile'.

'It opened new opportunities to understand myself and where to look for research.'

'It met my objectives fully ... and much more.'

'Would like to see a laughter club set up. Please contact me if available as I am going to miss these lectures terribly.'

'I believe that this course will be beneficial to me at present and in everyday life situations, especially when working with patients and meeting others socially.'

Conclusion

This course was merely the first step. It did not turn participants into a comedy writer or a stand-up comedian – but it did show them how to build up the basic skills needed to use their sense of humour with their clients. Hopefully, they will take many more steps that will lead to confidence in themselves as positive and fun people. Confidence comes with experience, and experience comes with time and effort. Participants must have the proper attitude, motivation, and desire to be the best at what they do. I strongly believe that passion and determination are the keys to their success.

