The Challenge

A hospital experience can be overwhelming for an adult. Imagine what it is like for a sick or injured child.

The child enters a strange environment of bright lights, strange noises, uncomfortable furniture, and lots of strangers. Someone takes away clothes and starts poking and prodding. The child has no sense of control. Through this all, the child hurts.

The Opportunity

Kiwanis clubs in the Australia and Norden districts found a way to help these children. They provide dolls that are made of plain, beige material and filled with pillow stuffing. Each doll is about 15 inches tall, with a round head, two legs, and two arms, but no features.

A Kiwanis hospital doll can be used in a variety of ways.

It provides a diversion and a comfort—The doll is soft and squeezable when the child is anxious. The child can draw on it with markers, distracting him from discomfort and boredom.

It allows a child to express feelings—The child can express his fear or unhappiness by drawing a face on the doll. Also, the child can mark on the doll the injury or pain she feels. This allows adults to discuss concerns or pains more objectively with the child.

It helps a child prepare for a procedure—The nurse or doctor can demonstrate the procedure the child must undergo. Sometimes, the child can even help with the process on the doll. This converts the activity into something the child understands and has control over. Often, this allows a child as young as two or three to undergo the procedure much more calmly, whether it’s putting on an oxygen mask or having a cut sutured.

Demonstrating a procedure on a doll can actually save medical personnel time because children are so much more cooperative, according to Gerry Silk, clinical nurse educator at Royal Children’s Hospital, Melbourne, Australia.

Each child keeps his doll when leaving the hospital, a positive reminder of the hospital visit.

Making Dolls

Contact the Service Programs Department at Kiwanis International for a copy of the Kiwanis Hospital Doll pattern. Take this pattern to the people who will make the dolls for the club project. This may be club members and spouses. Often, clubs identify a sewing group in a church or retirement community, disabled persons, or school classes that agree to make dolls. Discuss with them how many dolls they can comfortably produce on a monthly basis.

The sewing experts can work with the club to identify the proper cotton material, stuffing material (usually polyester fiberfill), and thread to purchase. The material should be cotton, so children can mark on it with water-based markers. The material should be light enough in color so markers will show. Beige and white are the usual choices, but a light brown may appeal to children with darker skin. Most children will be happy with blue, pink, orange, or violet cloth dolls.

The club may arrange for a discount for a quantity purchase of material and stuffing—and the promise of regular business.
Some clubs have found companies that will donate materials for the project or can provide materials left over from a manufacturing process.

The pattern includes a Kiwanis label, but this is optional. One of the sewing experts may be able to create labels using a sewing machine with an embroidery attachment. Or, labels can be printed using a silkscreen process. Most simply, someone with neat printing can create them with a laundry marker or fabric paint. Labels are also available through the Kiwanis Family Store.

Sometimes, the sewing group asks that the Kiwanians deliver the material already cut in the pattern and ready for sewing. The sewing experts may have special instructions on the best way to cut the material.

Of course, before large-scale sewing begins, the local hospital must agree to use the dolls. So, start out by having several sample dolls made.

### Introducing the Doll Project

Introduce the doll project to the hospital by contacting the emergency department or the pediatrics department. Explain that you have a program that can help children adjust to being at a hospital that won’t cost the hospital any funds. Make an appointment to present the program.

At the meeting, show the doll, outline its uses, and explain that your Kiwanis club would like to supply dolls to the hospital.

The hospital may need some time to make a decision. So, make sure you know who will be the contact at the hospital for follow-up—and make sure that person knows you will be calling.

Once the hospital agrees to use the Kiwanis hospital dolls, discuss the quantity needed, which children will receive them, and what recognition Kiwanis will receive. An example of a short brochure that can be distributed at the hospital appears on the back cover of the bulletin. Also discuss providing washable markers to the hospital for coloring the dolls.

### Sample Information Card

This is an example of a short, simple information card that can be given to parents, posted on a bulletin board, or left on a counter to explain the Kiwanis hospital doll project.

**Kiwanis Hospital Doll**

Dear Parent,

Your child may receive a blank doll upon arrival. The doll is for your child to keep.

This doll can help your child feel more comfortable. Help your child color a face on the doll so it looks like him or her. Encourage your child to draw an expression on the face that reflects how he feels. Then, have your child draw the injury or pain that she feels.

When the nurses and doctors examine your child, they may use the doll to discuss the injury or illness. And they may use the doll to demonstrate any medical procedures your child needs, so your child will understand what will happen next.

The Kiwanis Club of Melbourne provides hospital dolls as a service to the community. The St. Margaret Church sewing circle and Melbourne High School home economics classes sew the dolls.

If you would like to learn more about this project or the Kiwanis Club of Melbourne, contact Robert Hughes, 876-5244.
Stories from Nurses

Melanie was a five-year-old girl brought to the emergency department with obstructed breathing caused by severe tonsillitis. The doctor said she would require an intravenous line for administering antibiotics.

Melanie’s father asked her, “Are you scared?” She said, “Yes” and started crying. I thought she would benefit from having a doll to play with. When she was given the doll, along with some felt-tipped pens, she began to draw lines on the doll to act as clothes.

I asked her, “Could I put a drip into the doll, like the one that you will have to have?” She said, “Yes,” so we put an intravenous cannula into the doll and then gave some medicine (water) to the doll, which Melanie helped with.

When it was time for Melanie to go into the treatment room, I asked if she wanted to take the doll with her, and she replied, “There are some things dolly does not need to see!” Once her own intravenous cannula was in situ, with no fuss at all from Melanie, the drip was connected, and, with supervision from me, she gave a flush of saline.

The doll was really useful to help Melanie understand what was to happen to her and also how a drip works. She loved the doll and cuddled it all the way to the ward.

--Robyn Corser

Six-year-old Olive fell on a fence and sustained a laceration to her upper right thigh. The wound was near the groin and was gaping about three centimeters. Olive appeared to be scared. The doctor wanted to suture the wound.

I explained the whole procedure to her using the doll in the suture kit and then gave her another doll and some markers to draw on the doll with. Local anesthetic was applied to the cut, and then I left her with her mother.

When I went back, she had completely colored the doll and drawn a sad face on one side with blood on the doll’s leg from a cut. The other side had a happy face and a sewn-up cut.

It was about 30 minutes before we were able to start suturing the wound. I thought the local anesthetic might have worn off by then. At first, Olive flinched a bit but didn’t appear to be in pain.

She wasn’t interested in watching, so she closed her eyes or looked away. Because the wound edges needed to be trimmed before the stitches, the whole procedure took about an hour. The doctor and Louise’s mother were very impressed with how successful the preparation had been.

--Louise Collins

Tom was a six-year-old boy who had cut his scalp at school. He told me in a loud voice what had happened. I asked if I could have a look at his cut, and he let me willingly. I said, “I think that the doctor will want to sew that up. Otherwise, it will not get better.” I explained to the school nurses that sedation would take an hour. They felt that Tom would not go to sleep due to his hyperactivity and it would take too long. They felt it would be better if we just got it over with.

I then got the suture kit and said to Tom, “I’ll show you how we are going to make you better.” I showed him the doll with the cut and how we would clean it first, demonstrating as I went. He then took the forceps from me and cleaned his own cut on his own head!

I then explained about Adrenaline and Cocaine (AC), using water and a syringe and putting it into the doll’s cut. He loved that part. I explained this was the medicine that would make his skin go numb so he wouldn’t feel the stitches.

I then showed him the suture material, saying how small and soft it was and that the needle was very tiny. He took it from me and attempted to sew up the cut on the doll. He asked, “Did the dolly cry?” I said, “Yes, a little bit, but it was OK and he kept very still and it was all over quickly.”

The doctor started cleaning and pulling at his hair. He started to cry and say, “That hurts. I want to see.” We explained everything that was going on. He wriggled a bit but didn’t need to be restrained. All the way through, he kept up a running commentary, “What are you doing now? That’s cold. That hurts

--Rebecca Burden
Kiwanis Hospital Doll Pattern

On behalf of the children in our hospitals who use these dolls, Kiwanis thanks you most sincerely for participating in this project.

Pattern and instructions provided by the Kiwanis Club of Burnside, South Australia.

Sewing Instructions

- Use the width of your sewing machine foot (presser foot) as the width for the seam. (1/4 inch)
- Leave a gap of approximately 6.5 centimeters or 2.5 inches in one leg for stuffing.
- Sew the label in the seam on the opposite leg. (Labels can be purchased through the Kiwanis Family Store.)
- Snip into corners, where indicated.
- Leave 6.5 cm (2.5 inch) gap for stuffing.
- Turn the doll inside out and stuff.
- Hand-sew the stuffing gap in the leg.

Stuffing Instructions

- Dolls are stuffed through the gap in the leg.
- Chopsticks are good tools to push in stuffing.
- Start with the head, then arms, then legs, and, lastly, the chest.
- The dolls should be firm, but not too firm. If legs or arms flop, more stuffing is needed.