

Michael M Stevens AM, FRACP
Senior Staff Specialist
Oncology Unit
Provider No. 0117211F
Tel: (02) 9845 0000
Fax: (02) 9845 2171

Corner Hawkesbury Road
and Hainsworth Street

Locked Bag 4001
Westmead NSW 2145
Sydney Australia

DX 8213 Parramatta

Tel +61 2 9845 0000

Fax +61 2 9845 3489

www.chw.edu.au

ABN 53 188 579 090

Part of The Sydney Children's Hospitals Network

11 April 2012

To whom it may concern: Labyrinths in hospitals

Having recently established a labyrinth for The Children's Hospital at Westmead, I have been invited by Lorraine and Geoff Rodda to provide a letter of support for their proposal to have a community labyrinth included in the planned Return to Royal Park project in Parkville, to benefit the community at large, but particularly patients, families and staff of the Royal Children's Hospital, Parkville.

The Children's Hospital at Westmead is a 305-bed tertiary paediatric teaching hospital affiliated with the University of Sydney and the University of Western Sydney, and is located at Westmead in the western suburbs of Sydney. It is the largest of three public children's hospitals in New South Wales and has a staff of 2690 full-time equivalents.

I am a senior staff specialist in paediatric oncology, and have worked full-time at the hospital since 1979. In 2000 I became interested in labyrinths, including their construction and uses. My wife and I underwent facilitator training with Lauren Artress in Portland, Oregon in March 2004. We have visited Grace Cathedral in San Francisco and Chartres Cathedral in France several times. Both cathedrals are renowned for their labyrinths. In 2005 I assisted master labyrinth builder Robert Ferré in the installation of a permanent labyrinth at First Presbyterian Church, Livermore, California. In 2008, I designed and installed a permanent labyrinth in the grounds of Kerever Park, a spirituality centre in Burradoo, Bowral NSW.

In 2001, soon after I became interested in labyrinths, I recognised the potential value of a labyrinth in a hospital setting, and made a formal proposal to the hospital's then-chief executive, Professor Kim Oates, to fund and lead the establishment of a permanent labyrinth in the grounds of the hospital. This proposal was accepted without hesitation.

Despite sufficient funding, identification of a suitable site, and continuing acceptance of the proposal by the hospital's two subsequent chief executives and administration, construction of the labyrinth did not begin until more than 10 years later, in February 2012, because more important capital works were continually given priority in the hospital's yearly capital cap (NSW Ministry of Health). A full-size medieval 11-circuit (Chartres) concrete labyrinth has recently been installed in the hospital's gardens, with the pattern applied under Robert Ferré's direction using a masking technique and pigmented concrete polymer. This work began in February 2012 and was completed on 3 April 2012. Landscaping of the site is nearing completion, and a dedication ceremony is planned for June 2012. This is understood to be the first permanent labyrinth to be installed in a public hospital in Australia.

.../2.



Over the years between my initial proposal and the present, my wife and I have conducted occasional facilitated walks for staff at the hospital and at the University of Sydney, using a portable canvas labyrinth. I have also spoken about labyrinths at the hospital's grand rounds, contributed an invited article to the newsletter of the Royal Australasian College of Physicians, and arranged for lectures by visiting labyrinth authorities.

These measures have steadily increased the staff's awareness and interest, so that there are now a considerable number of staff members looking forward to availing themselves of this freely accessible amenity. Measures to inform patients, families, and visitors, are in planning.

Despite limited awareness in Australia of the potential value of labyrinths, there are now several hundred hospitals in the United States that have a labyrinth in their grounds, with many more in planning. It is now well-recognised that walking a labyrinth fosters a state of mindful attentiveness which is relaxing, refreshing, and potentially insightful. The potential benefits to patients, families, staff, and local community members include provision of psychological and emotional support, relaxation, relief of stress, and support for grieving and commemoration.

I commend Lorraine and Geoff's proposal and wish them every success with this important project.

Yours sincerely,

A handwritten signature in cursive script that reads "Michael M Stevens". The signature is written in dark ink and is positioned above the printed name.

Michael M Stevens AM, FRACP