

Laura op de Beke

The Kids are Not Alright



THE KIDS
ARE NOT
ALRIGHT

A LIVE ACTION ROLE PLAYING GAME



THE KIDS ARE NOT ALRIGHT

This is a LARP about troubled children and the monsters under their bed. It draws inspiration from the horror trope of the haunted child who makes creepy drawings of ghosts and monsters, disturbing the adults around him.

The little boy from The Sixth Sense who 'sees dead people' is the prime example. But there are a ton of other references: the Babadook, Donnie Darko, Mama, Hide and Seek etc.

In this larp, half the group will play such a child, while the other half will play a child psychologist called in to assess their mental condition.



PLAYERS

Even numbers. 2-14 players (or however many fit the space), and 1 facilitator, who will be quite present during the game.

PROPS

- Sheets of paper to draw on, crayons (recommended), markers, pencils, a sharpener.
- For the psychologists: hand puppets or finger puppets (recommended, though you can do without).
- Electric tea lights with remote control (recommended).
- A pair of bedsheets, or blanket per player.



Bobbie



RUNTIME 2:50h.

1:10h workshop.

1:20h play.

20 mins debrief.

CONTENT WARNINGS

This larp plays with horror tropes like possession, hauntings, ghosts and monsters. In addition, the larp is likely to touch on subjects of mental illness, child abuse, sexual abuse, bullying, and death. Use safety tools and an open door policy.





STAGING

A large space that can be fully darkened, and where everybody can comfortably lie on the floor. A space that will function as the psychologist's office where all players can sit in duos without crowding each other. One large space can serve both functions, but ideally the spaces are distinct and dressed up as playroom and office respectively.

SOUND

Bring speakers to play the following soundtracks (or any that are appropriately atmospheric):

- [Soundtrack 1](#): kids playground (available on Youtube)
- [Soundtrack 2](#): poltergeist on mynoise.net
- [Soundtrack 3](#): dark noise on mynoise.net



THE KIDS ARE NOT ALRIGHT

INTRODUCTIONS

10 minutes

Introduce yourselves, explain why you are here, and whether something creepy and unexplainable has ever happened to you.

EXERCISE: HOW TO TALK TO CHILDREN?

10 minutes

How do we greet adults we don't know, for instance a new colleague? Ask two players to demonstrate. Encourage the other players to help out by suggesting questions or topics for small talk. Next, how do we greet children? Ask a player to pretend to be a child, (6-10 years old).

Ask another player to practice greeting them and to start a conversation. What kinds of questions do you ask kids? If the child is shy and talking to them is hard, encourage other players to give it a go. Try different strategies: playing along, strict teacher, cool uncle etc.



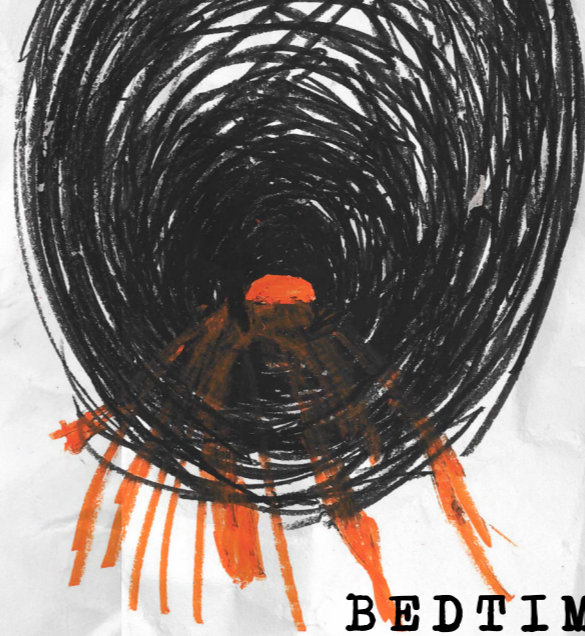
PSYCHOLOGIST OR CHILD?

5 minutes

Divide the group in equal halves (if uneven, maybe there are cursed twins). Players choose roles. The children will do a lot of brooding and drawing. They are lonely kids so they don't really talk amongst themselves, whereas the psychologists do. The kids will play in the genre space of horror. For the children monsters are undeniably real. Evil exists.

Psychologists will play in the genre space of social realism; this means for them things are rarely black and white, and there are often logical causes for things that seem like they cannot be explained.

The psychologists have the best intentions. They want to help, but they are also under pressure because budget cuts in healthcare have cut down on the time and money that is available to them per case. The list of children in need is endless, and it is up to the psychologists themselves to make sure that their time is well spent helping those who need it the most. Over the course of the larp these worlds will clash with one another, and that is exactly the point.



EVIL
EXISTS

BEDTIME

15 minutes



Once the roles are established, it's time for the facilitator to adopt their own. The facilitator acts as a kindergarten teacher and medical secretary. They will be giving instructions throughout the game. For starters, invite everybody to play (yes everybody, the psychologists were kids once too). Propose challenges: first one to hop across the room on one foot wins! Call a game of tag etc. Play soundtrack 1: kid's playground to set the mood.

Give it a couple of minutes before you call bedtime. Fade out soundtrack 1 and layer sounds 2 and 3. It will take a while for the kids to settle down so promise them a story and gradually dim the lights. Tell them to gather in a circle, or sit next to each other in a line (whatever the space permits). Hand out electric tea lights. Emphasize that as long as these night-lights are lit, the kids are safe. Throw the bedsheets or blankets over them so that each kid is cloaked within their own little tipi. Tell the kids to focus on the light.

Make sure there is room for you to walk around. Now make sure the room lights are entirely off and wait for it to become quiet. Tell the bedtime story (slowly, take your time). When it becomes appropriate to do so (it'll be obvious) turn off all the electric tea lights with the remote.



BEDTIME STORY: THE HOUSE THAT YOU GREW UP IN.

5 minutes

This is the house that you grew up in. The house that you are growing up in. Its hallways are long and dark. The attic creaks and moans when the wind blows through it, and the basement is damp and cold. Mom says not to go down there. It's full of everything that was left here when you moved in. Mom says she'll eventually get a skip to throw it all out. But she's been working a lot lately. And you're big now so sometimes you have to take care of yourself.

One time you did go down there. The only light that lit up the space was coming from the open door. The recesses of the cellar were all cloaked in darkness, cluttered with abandoned furniture. Softly you moved down the rickety wooden stairs. The shadows darkened.

To turn on the light you have to pull a string suspended from the ceiling, but it is up too high. You grab a wobbly chair and climb on top of it. The string is now within reach but you misjudged your balance, and your hand is sweaty. The string, when you grab it, slips and you fall, hard, on the concrete floor. Things go dark. The darkness lingers.

When you regain consciousness, you open your eyes only to peer into the pitch black cellar. It occurs to you that the smack you heard was not your own face meeting the floor, but the cellar-door flinging shut behind you.

THE
DARKNESS
LINGERS

There is a soft creak that sounds to your left. Ears pricked, you now hear it, again, noticeably closer. There is something else down here. You think you can feel its corpse-like breath on your cheek. What does it want from you? Will it follow if you scramble up the stairs, to safety? Will it try to hold you back, and trap you in the darkness? Does it want anything else? Does it want to get out?

Now that it knows you, you can feel it everywhere you go in the house. In the living room at night, under the couch, in the pantry, or behind the vent in your bedroom, making strange noises when you're alone. In fact these days it no longer hides. There it is right there, breathing, gurgling, watching you, wanting to play, wanting what you have, wanting to be you, wanting to be warm, and alive, wanting to be tucked in by mom, wanting to eliminate you from the picture. Wanting what it wants.

CREATING CHARACTERS

(+BREAK). 20 minutes



After the bedtime story gradually turn up the lights. Explain that everyone wakes up in character. The adults wake up, fold the sheet, and move into their office. The children stay behind, curled up in their blankets, and start writing and drawing. Hand out the profile sheets to all players.

The kids compose their profile and they name and draw their monster using the crayons and paper provided.

The psychologists fill out their profiles, and they prepare a 15 minute timer on their phone. They will have to time their own sessions. When they are done, the players can take a break.

When the children are done with their first drawing, they can take a break as well. At this point the psychologists should be ready to resume play.

Get them settled in the office. Allow them to choose a patient based on the drawing the kids made. Hand them their patient's profile to read once the choice is made.



PLAY-TIME

4x(15 + 5) minutes



At this point the workshop is over, all players should have had a break and are ready to get started.

They will play 3 counseling session. Between sessions the groups will receive separate instructions.

The sessions are 15 minutes each, with five minutes in between. The psychologists will have to time their own session.

When the alarm goes, they will say "that is all the time we have for today" and send the kid home. Practice saying the phrase.

Between counseling sessions the psychologists talk among themselves about their patients and discuss possible approaches.

The children draw. Below are the instructions that need to be communicated before each session.



Before session One

No further instructions. The psychologists have received their patient's first drawing, as well as their profile and will now get to assess the patient in person, asking about their family, school, etc.

Before Session Two

Tell the kids that something really bad has happened at school. They have to make a drawing of it. Also inform the psychologists, but don't tell them any details. They have to find out through conversation what happened.

Before Session Three

Tell the psychologists that the office's budget has been cut. Inform them that there is only enough money to continue treatment with two of the patients. The others will have to be cut loose. It is up to them to decide who. Tell the kids that they have had a premonition. Something absolutely horrible will happen. They need to draw what will happen..

Two minutes before the start of the final session inform the children that they will no longer be playing children, but that they will play their legal guardian. The third and final counseling session is between the psychologist and the guardian. The guardians have found the drawing illustrating the premonition and want answers.

The psychologists have to break the difficult news that for some children (those who haven't been deemed a danger to themselves and others) there will be no follow-up treatment. They need the guardian to sign the Interim Assessment form. Sessions end with. Well that's all the time we have for today.

DEBRIEF

20 minutes



After the game wraps up, players may be left with a lot of feelings. Gather in a circle and give everybody the chance to say one word, describing how they feel. After that, go around the circle again, asking players to elaborate (if they want), and to raise concerns or questions. You can also ask more targeted questions:

- Were you afraid at any point in the larp?
- Who were you afraid of?
- Who were you afraid for?
- Did the interactions feel authentic to you?
- Did the therapy sessions feel realistic?
- How do you think the kids who have been denied further counseling will fare?

To the kids

- Did you feel like you could talk openly with your counselors?

To the counselors

- Did you at any point consider that the stories the children were telling you could be real?
- Would you play this game again?
- How would you play it the second time?



PSYCHOLOGIST'S PROFILE



Name

Age

Years of Practice

Profile

(three adjectives that describe your personality)

Former Experience

Statement of Practice

(describe what kind of approach you take in your job,
and what your 'philosophy' is concerning children's mental health)

PATIENT'S PROFILE



Name

Age

Legal guardian (name+relation)

Complaints

(reasons for assessment)

CONTEXT

Family situation

School performance

Medical History

Known Triggers

Brief Psychological Profile

PSYCHOLOGICAL EVALUATION FORM

Interim Assessment

PATIENT INFORMATION

Name

Age

Gender

Date of birth

Guardian/Caregiver

Presenting Concerns

(Briefly describe the reasons for seeking psychological evaluation)

RECOMMENDATIONS

No follow up

The child's psychological evaluation indicates no significant concerns that warrant further treatment at this time. It is recommended to monitor the child's progress and reassess if new concerns arise.

Further treatment required

The child's psychological evaluation reveals significant concerns that indicate the need for further treatment. It is recommended to continue medical treatment by the appropriate mental health professionals for ongoing assessment and intervention.



THANK YOU
FOR PLAYING