THE AMERICAN OCCUPATIONAL THERAPY FOUNDATION

Wilma L. West Library Resource Notes

The Gift of Gardens and Gardening

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Spring and the War with Iraq are in the air. I am not a gardener, but I do have one gardening success, and that is a spectacular display of daffodils in the front of my home. This is my one time of the year to shine or perhaps to bring a smile to someone's lips.

In the Health Section of the April 1, 2003 Washington Post, Karen-Lee Ryan had a tiny piece, titled "A Separate Peace. Growing Calm." In it she exhorted us to "take the time to notice the beauty of spring - or better add to it." Along with advice on what to plant now, Ms. Ryan mentioned the "growing field of horticultural therapy [that] recognizes the physical and mental health benefits of plants: reducing blood pressure, creating calm, helping improve motivation and morale."

A BBC television program I enjoy is called Ground Force, which is about gardening, not waging war. At this moment in time, it is an unfortunate title for a program that creates an oasis for the lucky people whose garden or abandoned lot is given a new life. On the Lifestyle gardening for the UK region web site, **http://www.bbc.co.uk/gardening/**, you can learn more about this program and view clips from it. Here is a brief description of the program, copied from the BBC web site on April 3, 2003.

"Alan Titchmarsh, presents the ever popular British television series in which a group of professional landscapers/hardscapers create or transform a garden in two days (with a budget of 1000 pounds [$1,570.67 USD]) as a surprise for one of the owners. Charlie Dimmock and Tommy Walsh help Alan to create the surprise gardens and have now become well known celebs themselves."

There were two garden transformations I particularly enjoyed. One involved actress Bette Midler and the other young teenager with spina bifida and who used a wheelchair to enhance his mobility.

Not surprisingly, information and pictures of the episode with Bette Midler are available on the World Wide Web. Look for Ground Force meets the NYRP at **http://www.beaubritain.freeuk.com/htm/charliedimmock/gf_meets_nyrp.htm** to see the pictures of before, during and after the two-day transformation described below

"The Ground Force Team cross "the pond" and develop a wasteland plot in Manhattan as part of Bette Midler's New York Restoration Project. Bette has been buying up land in New York for some time and already has five acres divided into sixty small sites. Charlie also visits the

Ground Zero site, just 20 blocks away, and reflects on the fact that casualties of the 11th September 2001 atrocity were from many nations, including England and the rest of the UK."

With help from AmeriCorps volunteers, the New York Restoration Project's (NYRP) aim is to put green areas back into residential parts of the city. **http://www.nyrp.org**. This is a terrific community program.

The parents of the teenager requested the Ground Force team to come to their home to make the garden more accessible to their son. Also, the teenager had verbalized a wish to have a racetrack in the garden for him and his mates to race their radio-controlled cars. The result was a re paved patio, a racetrack with obstacles, and all new plantings. More significant to me, was the reaching out of a commercial project to a social need. As you all know, play or leisure is an important occupation for individuals of all ages and abilities.

Here are a few sites to obtain tools and information on gardening for people with physical limitations.

ABLEDATA, http://www.abledate.com
"is the premier source for information on assistive technology, sponsored by the National Institute on Disability and Rehabilitation Research, U.S. Department of Education."

Life Solutions Plus
http://www.lifesolutionsplus.com/main.asp
Easi-Gripâ garden tools

Thrive http://www.thrive.org.uk
is the national horticultural charity that exists to enable disadvantaged, disabled and older people to participate fully in the social and economic life of the community.

Carry on Gardening http://www.carryongardening.org.uk/page06.asp
was initiated by the horticultural charity Thrive. "Gardening is an important part of many people's lives. You don't have to give up gardening because of accident or illness, the onset of disability or the problems associated with growing older. The information in these pages is designed to provide you with the information to Carry on Gardening. "

Arthritis & Gardening by Master Garden Products
http://www.mastergardenproducts.com/gardenerscorner/arthritis.htm

When you are gardening, pay attention to the pesticides you use and to some of the critters you meet.

National Ag Database (NASD)
Choosing pesticides wisely
http://www.cdc.gov/nasd/docs/d001201-d001300/d001276/d001276.html

Stinging Insects in the Garden, by Virginia Relf, from Virginia Cooperative Extension
http://www.cdc.gov/nasd/docs/d001201-d001300/d001290/d001290.html

Horticultural Therapy

Horticultural therapy does seem to be gaining a place in rehabilitation. And its national organization will provide information on the profession.

The American Horticultural Therapy Association **http://www.ahta.org**
is a nonprofit organization whose mission is to promote and advance the profession of Horticultural Therapy as a therapeutic intervention and rehabilitative medium. AHTA is the only US national organization that promotes and advances the profession of Horticultural Therapy.

The Research Networking Group **http://www.oznet.ksu.edu/horttherapy/ahtaresearch/**
is a strategic working group of the American Horticultural Therapy Association (AHTA). Its objective is to promote collaborative research in horticultural therapy among researchers, practitioners, and allied health professionals.

This on-line article and two published articles may provide you with some thoughts.

Why is Horticulture a Good Medium for Work with People with Special Needs?
Horticulture offers many advantages for structuring training, leisure pursuits, remedial treatments and even therapy.

Brown D.J., Powell, H.M., Battersby, S., Lewis, J., Shopland, N. & Yazdanparast, M. (2002). Design guidelines for interactive multimedia learning environments to promote social inclusion. Disability and Rehabilitation, 24, 587-97.

PURPOSE: There is a continuing need for guidelines to aid in the design of Interactive Multimedia Learning Environments (IMLE) to promote effective learning. The project introduced in this paper looks at an important subset of this problem, the design of interactive learning environments to promote social inclusion. METHOD: A consortium of six partners contributed toward defining learning material to develop a range of work based skills, including horticulture, IT and catering. These were then developed into IMLE prototypes. Formative evaluation of these prototypes then revealed a range of usability problems, which were grouped into generic types and frequency of occurrence.
RESULTS: The most important and frequently occurring problems were used to distil a set of design guidelines for the development of effective IMLE. The results from this usability content analysis were also used to refine the initial prototypes to improve their usability and effectiveness. CONCLUSIONS: These guidelines, termed the Greenhat Design Guidelines, can be adopted for use by all multimedia developers aiming to promote the social inclusion of vulnerable or socially disadvantaged groups of people. The refined IMLE can be accessed via the Greenhat Server to improve the employment-related skills of socially excluded people.

Smith D.J. (1998). Horticultural therapy: the garden benefits everyone. Journal of psychosocial nursing and mental health services, 36, 14-21.

Horticulture therapy (HT) is an applied adjuctive therapy, using plants and gardening materials, to help the client with mental illness to improve social skills, self-esteem, and use of leisure time. HT provides a nonthreatening context for the development of a therapeutic alliance between client and nursing student. HT provides a group experience for the student nurse, allowing the promotion of therapeutic community, assessment of patient status, and management of a therapy session from start to finish via the nursing process.

In yesterday's mail, I found the premier issue of a new regional magazine, Washington Home & Garden. One of the articles was "Crisis management: spend time in a garden," by Janet G. Walker. A few of her comments are apt for this Resource Note.

"In a green space, we tend to feel safe; we can calm down and start to relax. In short, we can retreat." (p. 32)

"Gardens tell us in the earth's own tongue everything we need to know about rising up." (p. 32)

Of course, horticulture therapy is one of the many modalities that occupational therapy practitioners use, and I offer this list of references selected from OT SEARCH.

Bryant, W. (1991). Creative group work with confused elderly people: a development of sensory integration therapy. The British Journal of Occupational Therapy, 54, 187-192.

This article discusses the problems experienced by an occupational therapist in working with elderly confused residents in continuing care wards in a psychiatric hospital. An approach based on sensory integration therapy and object relations theory, developed by the author is described. Case examples from group work are used to illustrate this approach and evaluation shows the problem areas and successful features.

DeHart-Bennett, M.E. & Relf, D. (1990). Horticulture occupations for persons with intellectual disabilities. Australian Occupational Therapy Journal, 37, 143-146.

Horticultural occupations provide therapeutic, rewarding employment for persons with intellectual disabilities. There are jobs available in this growing industry for reliable employees, especially if they are trained. Persons with intellectual disabilities have proven themselves capable of skills sufficient for employment in the industry. Employers' ignorance of the abilities of the disabled in this field must be overcome so that persons with intellectual disabilities may fill an important need in the horticultural industry while gaining the benefits of occupational and horticultural therapy for themselves.

Hazen, T.M. (1997). Horticultural therapy in the skilled nursing facility. Activities, Adaptation & Aging, 22(1/2), 39-60.

A description of the skilled nursing facility (SNF) and the impacts and demands of managed care on therapies are included. The horticultural therapy contribution in rehabilitation therapies is outlined. Two case studies describe the patient base. Two SNF programs are departments in the hospital setting where horticultural therapy is delivered as a co-treatment with occupational therapy, physical therapy and speech and language pathology staff or by the horticultural therapist alone. A variety of horticultural therapy services are provided as part of recreation therapy programming. Indoor, year-round programming is outlined along with outdoor activities. Success oriented projects for the short stay rehabilitation patient are noted. The treatment session format provides a consistent structure to optimize rehabilitation progress.

Heath, Y. & Gifford, R. (2001). Post-occupancy evaluation of therapeutic gardens in a multi-Level care facility for the aged. Activities, Adaptation & Aging, 25(2), 21-43.
A post-occupancy evaluation of eight therapeutic gardens at a multi-level care facility was conducted. Staff, volunteers, and families of residents were surveyed, and residents were

interviewed. Of the 190 participants, 96.5% either strongly liked or liked the gardens. More than 80% believed that four of the five overall design goals of the gardens were achieved. However, participants' evaluations of specific garden features varied, and staff members were more critical than others. About 75% said the money to build the gardens was well-spent. About 20% of users offered extra comments. Implications for the planning of therapeutic gardens are discussed.

Heliker, D., Chadwick, A. & O'Connell, T. (2000). The meaning of gardening and the effects on perceived well being of a gardening project in diverse populations of elders. Activities, Adaptation & Aging, 24(3), 35-56.

This pilot pre- and post-test study sought to demonstrate the feasibility and effectiveness of horticulture therapy and the perceived meaning and outcome on well being of a structured gardening intervention on two groups of elders in two culturally diverse settings. The total sample of 24 volunteers (age range 63-90) participated in a three-month gardening project. The personal meaning framework and the instrumentation developed based on that framework was utilized (Reker, Peacock, & Wong, 1987; Reker & Wong, 1988, 1984). Paired t-tests demonstrated a significant improvement in psychological well being ($p<.000$). Content analysis of a semi-structured interview elicited the meaning of gardening. Themes that emerged included Legacy of Gardening, Gardening as Spiritual Healing and Therapy, and remembering a Favorite Tree. The results of this study suggest that the psychological and spiritual benefits of gardening for older adults transcend socioeconomic, educational and cultural boundaries and are a cost effective therapeutic option.

Hughes, E.F. & Bryden, M.C. (1983). The development of an occupational therapy program in a solarium area. The Canadian Journal of Occupational Therapy, 50, 15-19.

This paper introduces the use of a solarium area, with primary emphasis on horticultural activities, as a medium within which a comprehensive Occupational Therapy program can be developed. The specific treatment goals of training in the use of energy conservation principles are outlined for the inpatient population of a rheumatology unit in an active treatment hospital. Other goals can be incorporated into this protocol. The unusually wide range of physical demands available and the opportunity to modify the patient's work style make the solarium area particularly relevant to physical Occupational Therapy.

Kramer, C. (1995). Denver's special garden. OT Week, 9(12), 22-23.

The Morrison Horticultural Demonstration Center touches children, senior citizens, people with physical and mental disabilities and everyone in between.

Lange-Golubski, D. (1996). The therapeutic value of horticultural therapy. The Journal of Occupational Therapy Students, 10-12. (Oct.)

Horticultural therapy is one of the oldest forms of activity therapy. Various rehabilitation professions use horticultural therapy in their programs. Activities can be graded and adapted for use with numerous patient populations. Although descriptive accounts exist showing the therapeutic benefits of horticultural therapy, there is a lack of research to support outcomes. Extensive research is needed to further understand and document the effectiveness of horticultural therapy in rehabilitation.

McGuire, D.L. (1997). Implementing horticultural therapy into a geriatric long-term Care facility. Activities, Adaptation & Aging, 22(1/2), 61-80.

This paper presents a personal account of how horticultural activities were implemented on a contractual basis in several nursing homes and later implemented through an activities therapy department. Individual examples are cited demonstrating the benefits of horticulture as treatment modality offering an opportunity to assess functional levels and establish measurable goals and objectives. This paper shows how horticulture as an activity becomes respected as a therapy among disciplines of the care planning team at one long-term care facility.

Myers, M.S. (1998). BRIEF REPORTS: empowerment and community building through a gardening project. Psychiatric Rehabilitation Journal, 22, 181-183.

Gardening activities undertaken by persons with psychiatric disabilities can provide opportunities for empowerment and increased competence, while building bridges to naturally occurring supports and resources with the broader community. Psychosocial components utilized in the process include focus upon abilities rather than upon disabilities, consumer-staff partnerships, and community integration outcomes. This "healing therapy" was demonstrated by a community support program (CSP) project undertaken by a supported-housing supervisor with 18 consumers in 10 garden sites located within rural Chester County, Pennsylvania.

Oxley, C. (1992). Devising an assessment package for an employment rehabilitation service. The British Journal of Occupational Therapy, 55, 448-452.

The investigations required before selecting appropriate pre-vocational assessment tools for clients, mainly with mental health problems, in a work rehabilitation unit included reviewing available research projects, literature and assessments, and looking at locally available resources. It was necessary to find out why an assessment package was required and what it should assess, then appropriate tools could be chosen for the package. The assessment package selected comprises an application form, a detailed interview and an observation of the client's mental state followed by three standardized assessments. The first assesses temperament (introversion/extroversion and reaction to stress), the second assesses life-style preferences (interests and attitudes) and the third assesses basic work-related skills. The final part of the assessment is an observation of performance in a workshop setting.

Panganiban, S. (1995). How does your garden grow? OT Week, 9(22), 22-23.

An interdisciplinary team approach to Park Tustin Rehabilitation and Healthcare Center increases the therapeutic value of gardening programs for residents.

Shenhav, E. (1994). Horticultural therapy - "plants helping people." The Israel Journal of Occupational Therapy, 3, E65-E70.

Horticultural therapy is a rapidly-developing and valuable adjunct therapeutic modality for a wide range of physical, psychological and social rehabilitative problems. This paper describes the history, applicability and technique of this specialty, in general, and as practiced in the author's own program at the Yad Sarah Rehabilitative Organization in Jerusalem.

Stein, L.K. (1997). Horticultural therapy in residential long-term care: applications from research on health, aging, and institutional life. Activities, Adaptation & Aging, 22(1/2), 107-124.

A sociocultural conceptual framework for the work of horticultural therapists provides a foundation for more effective and compassionate gardening programs for long-term care residents. Contemporary American health care emphasizes technical, biomedical approaches to most problems related to aging, chronic illness and frailty. However, evidence from qualitative research, personal narratives about life in a nursing home and observations from the author's work in a resident-centered nursing home gardening program illustrate the benefits of a sociocultural conceptual framework in therapeutic practice.

Stoneham, J. & Jones, R. (1997). Residential landscapes: their contribution to the quality of older people's lives. Activities, Adaptation & Aging, 22(1/2), 17-26.

Although it is well acknowledged that plants and gardens are often a source of great enjoyment to older people, little is known about how older people want to use the outdoors or about their preferences for different types of landscape. Current work at the Research Institute for the Care of the Elderly, UK, is looking at how well the grounds of purpose-built retirement housing are meeting the needs and preferences of residents. Questionnaire data, collected from approximately 100 sheltered housing residents, provide insights into the following issues: importance of the grounds in retirement housing; use of the grounds and how this differs from what people did in their previous homes; values attached by residents to the landscape; interest in wildlife; and reasons why older people no longer garden.

Unruh, A.M., Smith, N. & Scammell, C. (2000). The occupation of gardening in life-threatening illness: a qualitative pilot project. The Canadian Journal of Occupational Therapy, 67, 70-77.

This qualitative pilot study was completed as an exploratory study of the meaning of gardening using attention restoration theory. Three women with breast cancer who garden for leisure were recruited from a cancer support group. Each participant was interviewed at her home on two occasions. To complement the qualitative data, participants also completed the Perceived Restorativness Scales (PRS) (Hartig, Korpela, Evans, and Garling, 1996). The interviews revealed six major themes, some of which were concerned with the interactions between the gardener and the garden, and others which focused on gardening within the context of having cancer. The qualitative and quantitative outcomes supported the perspective of attention restoration theory. Spirituality was interwoven throughout the comments of two participants but was less important for one participant. The implications of this study for practice and future research are discussed.

For pure delight, visit Monet's Garden, Giverny at this site **http://www.arts.monash.edu.au/visual_culture/projects/diva/giverny.html** or indulge yourself and purchase the book, Monet's garden: through the seasons at Giverny, by Vivian Russell.

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