



THERAPEUTIC GARDEN DESIGN

AN ASLA PROFESSIONAL INTEREST GROUP



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THERAPEUTIC GARDEN DESIGN

Jack Carman, ASLA, Co-Chair
Mark Epstein, ASLA, Co-Chair

LETTER FROM THE CHAIRS

Dear Therapeutic Garden Members:

Landscape architecture is at its best when it either tells a story or enables stories to be told within the created environment. Therapeutic garden design is an area where we can do both in a profound way. This Professional Interest Group started out several years ago helping to define what a therapeutic environment is or is not. Our focus now turns to the *benefits* of therapeutic gardens, both to their users and to the facilities that build them. Benefits are realized through research, and through the stories that are told in the garden design and in their use. A large step in legitimizing the value of therapeutic gardens in health care settings occurred when the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) gave two (of four total) commendations to the gardens created at Legacy Health System hospitals in Portland, Oregon. An explanation of JCAHO review and what it means is in this issue.

Another emerging interest is quantifying the benefits of therapeutic gardens in order to make the case that they are financially advantageous for an organization. The research of Roger Ulrich, Rachel Kaplan, Steven Kaplan, and several others indicates that viewing nature may reduce the amount of time and pain medications a patient uses to recover from certain medical treatments. Other studies are looking at the effect of gardens on aggressive behavior in Alzheimer's patients, troubled children, and

prison populations. Quicker recoveries and improved behavior in institutional settings lead to financial benefits for those institutions.

We need to find ways to get the messages of benefits to clients, and financial efficiencies, to the people with the vision and authority to build new therapeutic gardens. Your thoughts and suggestions are encouraged. Have you been successful in promoting the creation of therapeutic gardens? How can we better articulate the financial and marketing advantages, and equally important, health benefits for creating therapeutic gardens? Please share a particular success where a particular strategy has been effective. We would like to list these benefits and share them with the members of this group through future

newsletters and by e-mail to the Professional Interest Group Listserve. Enough response may allow us to put together a brochure or pamphlet that can be used to bolster the acceptance of this known therapeutic activity.

Let's help spread the word!

Sincerely,
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How can we better articulate... the health benefits of therapeutic gardens?

MEMORY GARDENS UPDATE:

PORTLAND MEMORY GARDEN UPDATE

After a festive groundbreaking celebration at the end of June, the work to build the Portland Memory Garden began in earnest in mid-July. Sequencing of the various tasks has gone smoothly with very few days lost between activities. After grading the site and installation of the stormwater drainage system were complete, it was exciting to see the garden laid out on the ground for the first time and then slowly come up out of the ground and take shape. Portland is known for its rainy weather, so we enjoyed the drought weather conditions that allowed us to place the concrete for the raised planters, light poles, column footings, and walkways without any delay from rain. Unfortunately, the drought came to an end with a new record of 34 continuous days of rain, stopping the soil preparation in early December. Only the brave stonemasons with plastic tents continued to work. Our goal is to complete the planting, including trees, shrubs, and perennials, by late spring.

The tragic events of September negatively affected cash donations to the garden but increased the number of people volunteering to work in the garden as a way to give to others while nurturing themselves. Financial contributions to the garden renewed at the year's end with a record of \$20,000 in one month, mostly from individuals but some from corporations. In-kind donations for the plant materials and construction of the trellis have been pledged. There are pending in-kind donations for the entry structure and restroom building, which will complete the garden. We are planning the dedication of the Portland Memory Garden for late spring 2002.

The garden has brought together people of all ages from a variety of entities, including businesses from the private sector, foundations, public agencies, not-for-profit organizations, higher education, schoolchildren, garden clubs, the Master Gardeners, and the Scouts. A very special aspect of building the garden is the involvement of the students from the alternative high school located two blocks away. They

AIM Students: Moving Gravel. (Courtesy of the Center of Design for an Aging Society, Portland, Oregon.)



were looking for a project at about the time that we were looking for volunteers. It is great to see these young people's confidence grow as they learn to master new tasks and express their pride in knowing that they had a part in creating a garden for older people.

The Development Partners that are collaborating to create the Portland Memory Garden are the American Society of Landscape Architects, Alzheimer's Association Oregon Trail Chapter, Center of Design for an Aging Society, Portland Parks & Recreation, Legacy Health System, and the Institute on Aging—School of Urban Studies at Portland State University. ❏



Pavers: The "Garden Grubs" volunteer team from Legacy Health Systems installs pavers, instructed by ASLA representative Brian Bainnson and Rod Reed, Green Earth Landscape. (Courtesy of the Center of Design for an Aging Society, Portland, Oregon.)

HEALING LANDSCAPES

PSYCHOSOCIAL BENEFITS OF NATURE TO CHILDREN

By April Bruning

"Shhh, be very quiet," I whispered to the four young boys around me. We crept through the meadow glancing towards the dark woods beyond. A creature emerged, silent and calm. Just as we had hoped to see, a beautiful and harmless deer. Gracefully she pranced to a grazing spot for her evening meal.

At this moment one child turned to me with fear in his eyes, quivering, "If we get any closer will it attack us?" I realized that these boys, each coming from disturbed homes, were genuinely frightened by this docile creature, perhaps because brutality was all they knew.

While working as a horticulture therapist at a residential treatment center in New York, I became intrigued by the influence of the environment on human psychology. Watching the often depressed, frustrated, and angry faces of the boys transform into awestruck expressions of excitement at the first signs of life emerging from a seed they planted, or at the thrill of discovering the first ripe tomato in their vegetable garden,

exemplifies how the environment can have a beneficial effect on individuals. The boys, struggling to gain a sense of stability in the world around them, were able to gain a sense of purpose as they learned to nurture life and create beauty in the landscape.

The after-school work therapy program at the treatment center consisted of five different job sites, one of which was the greenhouse. The goals of the program were to instill in the residents a sense of responsibility, attention to detail, ability to follow directions, concentration on specific tasks, and group cooperation. The greenhouse site met and surpassed these goals. Through direct involvement with nature, the boys benefited psychologically.

Within the protective greenhouse bubble, we grew plants from seeds, bulbs, cuttings, clippings, and other propagation techniques. We then used these plants for a variety of projects. One project was planting a vegetable garden outside the greenhouse, so that the boys could nurture, observe, and then harvest their own crops. One crop of particular interest was the corn. The boys were amazed at how tall the stalks could grow, and they were anxious to taste the produce. However, when a hungry raccoon discovered the corn, the boys eagerly worked together to protect their garden. Throughout the gardening process, the boys also learned about other invaders and inhabitants, the insects. Initially the boys assumed that all bugs were detrimental and should be destroyed. After learning about the crucial roles each member of the garden played in the ecosystem, they gained a greater respect for all levels of life. They quickly realized that these important lessons about protecting and preserving life around them related to their own lives.

At the greenhouse we also grew flowering plants that we used to both enhance the residential grounds and create items to sell. The boys loaded the wheelbarrows with plants, tools, and equipment and went out into the residential grounds to add a

little color to existing flower beds, or build new ones. Or, the boys would fill their carts with springtime gift baskets that they planted with hyacinths or daffodils to sell to each cottage. Through these activities the boys contributed to their community and developed a sense of accomplishment, pride in their work, and greater self-esteem.

Once a week we left the greenhouse and ventured down to the pond or into the woods to explore nature. Most of the

boys, being from the inner city, had little if any previous opportunity to investigate the natural world. These adventures into nature sometimes turned into treasure hunts—a quest to gather materials such as rocks or branches—to use in our garden projects. It amazed me to see how much calmer the boys became when I took them for one of these walks, away from the confines of any walls. Some of the boys were fascinated with the tadpoles and the unfurling of the fiddlehead ferns, while others took turns skipping rocks across the water surface. The boys became attentive and full of life while observing their surroundings.

“They gained a greater respect for all levels of life.”

The greenhouse and nearby natural environment became sanctuaries for the boys, places to create, nurture, and watch the beauty of life grow and change. It is clear that the environment has a great impact on human beings and their understanding of the delicate web of life. Not only did the boys acquire job skills and an appreciation for their environment, they also found an outlet to relieve stress from their turbulent lives and a means to cope with their own psychological issues. The exposure to nature can be instrumental in healing the weakened mind, body, and soul. Through these mentally, physically, and spiritually damaged boys, I witnessed the powerful healing benefits of our natural environment. ❧

April Bruning is a landscape designer with Copley Wolff Design Group, Landscape Architects and Planners in Boston, Massachusetts.

ASLA's Online Desktop Seminars are archived and available for you to view and listen to 24 hours a day, seven days a week.

THERAPEUTIC GARDENS IN VARIOUS COMMUNITIES — SESSIONS 1 AND 2

ASLA archived online and live online sessions may be submitted to state landscape architecture licensing boards for continuing education credit or licensing requirements in landscape architecture where mandated.

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202-216-2362; sackett@asla.org; or visit www.asla.org/desktop.htm



THERAPEUTIC GARDENS

THE THERAPEUTIC GARDEN: A COLLABORATION OF PROFESSIONS

by Nancy Gerlach-Spriggs and Anne Wiesen

Attempts to introduce nature into modern health care settings take different forms as their names imply: contemplative gardens, healing gardens, restorative gardens, therapeutic gardens. Each of these garden forms may have an important role in the medical environment. While imprecise, the first three terms suggest an environment supportive of generalized healing: to make healthful, well, and whole again. They imply comfortable, safe, and perhaps beautiful, spaces. In some cases, these garden benefits alone may serve the intended population effectively.

The term “therapeutic,” however, suggests more than comfort. It suggests a treatment, a remedy, a positive outcome. “Therapeutic” implies an assessment and an understanding of a medical condition with its usual course and prognosis. The term “therapeutic garden,” therefore, implies an intent to improve the medical environment, not simply in the designer’s view or preference, but to improve it in pursuit of the medical endeavor and in the treatment of a medical condition.

A therapeutic garden is, first and foremost, a medical concern. When landscape architects enter the realm of health care, they do so to assist the medical profession as it strives to meet its goals. When designing therapeutic gardens, landscape architects assume the standards of the medical profession as well as their own. On the prosaic level, just as one can ask if the medication has relieved the pain or cured the infection, one should be able to ask if walking in the garden has improved strength, balance, or mood or if group activities in the garden have helped decrease social isolation. Successful therapeutic gardens thus will require that designers work closely with health care professionals to set goals and standards. The collaboration required to achieve such results is based on similar foundations.

Medical and landscape architecture practitioners are equally committed to upholding the ethical standards of their respective professions. Within the heart of each value system lies a place where they converge. For physicians the foundation of their professionalism, their social contract, is the Hippocratic Oath. It is the ancient oath attributed to Hippocrates, born in Greece in 460BC. And although the oath is no longer taken by those entering the medical profession, it embodies the duties and obligations of physicians as they bear witness to their moral beliefs (Collier, *The New Century Dictionary*, vol. 1, 1936). The Hippocratic Oath is short. The English translation is less than 150 words. (It implies, but does not state the often attributed “First, do no harm.”) The oath speaks of using the best of one’s knowledge and judgment to benefit patients, refraining from all wrongdoing and keeping patients’ privacy (*Encyclopedia Britannica*, vol. 15, 1951).

The Hippocratic oath has parallels in the ASLA’s Code of Professional Ethics, easily obtainable on the organization’s web site (www.asla.org). In its most distilled form, the ASLA Code speaks of dedication to the “public health, safety and welfare and recognition of the land and its resources.” It speaks to “honesty, dignity, integrity” and privacy except in matters that “create harm” or pose “significant risk to the public health, safety, and welfare.” (ASLA web site, Code of Ethics)

Just as MDs may not at the outset understand nature’s role in healing, or know the principles of design and construction, so landscape architects need more knowledge of medical concerns and the health care world. Each profession is a keeper of special knowledge, and both have much to offer one another. The therapeutic garden is a unique opportunity for professionals of different fields, both committed to serving the public, to collaborate in the development of a new and sustainable health care system.

The landscape architect’s contribution to the medical endeavor will ultimately be measured by medical standards. Successful therapeutic gardens will assist recovery from disease and can be evaluated by using clinical data to obtain measurable outcomes. The value of the design profession’s contribution in health care settings will be judged, not by standard landscape architectural measures such as post occupancy evaluations, but by clinical data.

Once landscape architects develop a collaborative relationship with health care professionals, they can begin to define the role of the garden in health care today. Together these professionals can question: Will a view to a garden encourage post-operative patients to walk more, thus decreasing the risk of thrombophlebitis and its complications? Can time spent in gardens improve attentional fatigue or help with low-level pain control? How do the different cancer-fatigue patterns of radiation and chemotherapy patients affect garden design? Which patients need to be protected from potential infectious risks associated with gardens?

There may not be answers to these and other questions at this time, but it is possible, with collaboration, to design in a way that will begin the process. And once landscape architects are accepted collaborators, they can discuss clean air and water, habitat preservation and creation, and other environmental and public health agendas. They can then begin assisting health care institutions to model healthy lifestyles, living what they practice, living their oath, their code of ethics. ■

Anne Wiesen and Nancy Gerlach-Spriggs are Executive Co-Directors of Meristem, Inc., a nonprofit organization promoting the role of nature in health and well-being through the development of restorative gardens.

JCAHO COMMENDS THERAPEUTIC GARDENS

By Mark Epstein

In July 2001, the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) spent two and one-half weeks surveying Legacy Health System (LHS) in Portland, Oregon. Legacy's therapeutic gardens were noted in the exit interview as one of LHS's special achievements, demonstrating their commitment to the psychosocial well-being of their patients through such aspects of care as the patient gardens.

The Joint Commission evaluates and accredits nearly 18,000 health care organizations and programs in the United States. An independent, not-for-profit organization, JCAHO is the nation's predominant standards-setting and accrediting body in health care. JCAHO accreditation is recognized nationwide as a symbol of quality that reflects an organization's commitment to meeting certain performance standards. To earn and maintain accreditation, an organization must undergo a thorough on-site survey every three years.

JCAHO's standards address the organization's level of performance in key functional areas such as patient rights, patient

treatment, and infection control. The standards set forth performance expectations for activities that affect the safety and quality of patient care. If the organization does the right things and does them well, there is strong likelihood that its patients will experience good outcomes. JCAHO accreditation is considered essential in the health care delivery industry.

"This is the first time JCAHO has recognized therapeutic gardens as exemplary, and as a best practice benchmark for health care organizations."

As far as we know, this is the first time JCAHO has recognized therapeutic gardens as exemplary, and as a best practice benchmark for health care organizations. It is an important step in linking therapeutic gardens with positive patient outcomes in health care settings. We can, and should, use the Legacy experience as evidence that therapeutic gardens benefit health care organizations by helping

establish positive outcomes for their patients, an important consideration in the organization maintaining accreditation. ■

Note: The Legacy Health System Horticultural Therapy Program will present its 6th Annual Therapeutic Gardens and Horticultural Therapy Conference on May 2-3. This year's theme is "Children in the Garden: Rehabilitation, Education, Play, and Restoration," and features Roger Ulrich as keynote speaker.

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PROFESSIONAL INTEREST GROUP FORUM

WE INVITE YOU TO A WORKSHOP WITH A DIFFERENCE!

The American Society of Landscape Architects Therapeutic Garden Design Professional Interest Group meets each year to discuss and present new ideas and share our stories. This year we invite health care practitioners, horticultural therapists, occupational therapists, researchers, and landscape architects to join us in San Jose, October 18, 2002.

IMAGINE A WORKSHOP THAT

- *Allows you to create your own agenda*
- *Acknowledges your expertise*
- *Creates the conditions for meaningful dialogue*
- *Enables you to meet others who share your interests*

OUR THEME:

“Beyond Theory: Issues and Opportunities for Advancing Therapeutic Garden Design and Enhancing the Profile of Therapeutic Gardens across North America.”

What are some innovative and outrageous ideas and approaches to therapeutic garden design? Do you have questions about the benefits of therapeutic gardens? Would you like an opportunity to network with people who share your passion and interest? If so, the Therapeutic Garden Design Professional Interest Group invites you to join us for a day with a difference!

Our two previous events were designed to provide expert content and background knowledge about therapeutic garden design. We recognize that our members have amassed a wealth of knowledge and experience in the past few years. We also have questions as we deepen our learning. As a result, we are taking a different approach to our conference this year to enable all attendees/members to tap into this wisdom.



The purpose of the conference is to:

- **Share questions, ideas and expertise;**
- **Provide an opportunity for networking;**
- **Build a community of therapeutic garden design practitioners;**
- **Introduce members to a different way of conducting meetings; and**
- **To have fun!**

The conference will enable participants to have meaningful dialogue about anything that they feel passionate about related to therapeutic garden design. The session will be facilitated using a process called Open Space Technology, the name given to a meeting without a predetermined agenda. Developed in the late 1980s by Harrison Owen, this meeting methodology is now used around the world as an effective process to create inspired meetings and events for both organizations and communities.

Participants will create and manage their own agenda of parallel working sessions around the central theme, “Beyond Theory: Issues and Opportunities for Advancing Therapeutic Garden Design and Enhancing the Profile of Therapeutic Gardens across North America.” Any issue or opportunity that is important to those attending can be added to the agenda. Some of the questions that can be considered include:

- **How do we raise the profile of therapeutic gardens within the health care sector?**
- **What are the issues facing those “working in the trenches”?**
- **How have you made a difference with your therapeutic garden designs?**
- **What are the emerging trends in therapeutic garden design?**
- **How do we measure and evaluate therapeutic gardens that have been built?**
- **What can we do to attract funding for both capital and operating budgets for the gardens?**
- **How do we link therapeutic gardens to therapeutic care?**

Every topic that is posted will have an opportunity to be discussed to the degree that people are interested. Reports of all breakout sessions will be recorded by participants and collated into a book of proceedings, which will be available to participants by e-mail shortly after the conference. The content will include what each of us brings. The outcomes will be what we create together.

We look forward to seeing you in San Jose, CA, October 18–22, 2002. 📧

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