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# Family members' experiences of a "Fairy Garden" healing haven garden for sick children

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#### **KEYWORDS**

Narrative; Storylines; Therapeutic modality; Happiness and quality of life

#### Summary

Background: Hospital facilities that can support the well-being of sick children and their families by providing an environment outside of the paediatric ward can be beneficial to health outcomes. Access to a garden environment that allows young patients and their family to engage with natural and built features has been shown to relieve stress, provide opportunities for educational activities, improve socialisation amongst children and adults and so create a more calming and supportive environment to help the healing process.

Aim: To explore experiences of family members of sick children who have participated in formal and informal activities in a child-centred environment called a "Fairy Garden" (FG) within a hospital in northern Thailand.

Method: Narrative inquiry situated within qualitative research was selected as a methodology to capture the holistic notion of the participant's experience. Eight family members (seven parents and one grandparent) were interviewed in four focus groups. Interviews were carried out over a 5-week period in June 2013.

Findings: Findings show that the Fairy Garden (FG) offers a therapeutic modality of healing that improves the quality of life for sick children and includes storylines of happiness and

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Abbreviations: FG, Fairy Garden; NI, narrative inquiry.

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relaxation, cooperation from the children, social interaction and learning. For family members the FG provided opportunities to relax with their sick child, watch as their child played in the garden and explored the variety of natural and built features and encouraged their child to eat. The FG allowed contacts to occur amongst family members of sick children, share information, prepare meals and spend time sitting and walking around the garden while waiting while their child received treatment.

Conclusion: Through family members stories we were able to capture numerous storylines of the FG creating a space for children and families that counter balances the clinical environment of hospital as an alien place and results in an improved hospital experience for sick children and their families.

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#### 1. Introduction

This paper explores family member's experiences of a ''Fairy Garden'' (FG) healing haven within a children's ward of a tertiary hospital. The purpose of the Fairy Garden (FG) was to provide a healing and holistic environment for sick children in which it was possible to participate in recreational activities, and other activities that would offer children stimulation and ''time out'' from their illness experience. The hospital can cater for up to 80 sick children, often for long periods of time, with limited educational or environmental stimuli to ease stress during their hospital admission. In using the term ''healing haven'' we are referring to an environment that fosters healing through a variety of factors that contribute to the physical, psychosocial, educational and spiritual life of the children and their families.

In 2010 a group of volunteers from Australia and Thailand raised funds and began plans to create the "Fairy Garden" healing haven within a tertiary hospital in northern Thailand using a disused space adjacent to two 40-bed paediatric wards. In July 2012 the "Fairy Garden" healing haven was officially declared open. The FG is located in a rectangular courtyard space within a wing of the hospital, open to the sky and surrounded by walkways that on the long sides lead to wards and on the shorter sides providing access to other parts of the hospital. The space is 6 m wide and approximately 30 m long. Within the space is a gazebo with a wishing well, bridge to a fort, pathways with gardens containing plants and flowers and play areas including swings and sit on toys. A further description can be found in the paper by van der Riet, Jitsacorn, Junlapeeya, Dedkhard, and Thursby (2014).

The name "Fairy Garden" may appear to the reader as existing only within a westernised culture, and perhaps unusual in a Thai culture. However, with globalisation, children from all countries are now exposed to fairy tales that stimulate their imagination. The influence of television, books and DVDs, comics and colouring books are testimony to the presence of fairy tales in the life and world of Thai children. A variety of children's books present stories about fairies and are widely available in Thailand. Furthermore, the Thai hospital community of nursing staff and medical staff were consulted as to the appropriateness of a 'Fairy Garden' and agreed that a FG could be created and children would understand references to fairies.

#### 2. Background

A visit to hospital is a stressful experience for patients and families and it has been reported that this stress is on the increase (Ulrich, 2001). There is sufficient evidence from the literature traced back to the time of Florence Nightingale to suggest that environment contributes to healing (Dijkstra, Pieterse, & Pruyn, 2006). More than one hundred and fifty years ago, Florence Nightingale promoted the importance of colour, natural light, noise control and cleanliness to aid in healing for hospitalised patients (Dijkstra et al., 2006; Kirkham et al., 2012; Zborowsky & Kreitzer, 2009). Zborowsky and Kreitzer (2009) assert that Florence Nightingale was a pioneer in promoting the concept of optimum healing environments.

The current literature examining environmental factors in healthcare, such as improved design, inclusion of gardens, natural areas conducive to contemplation, and activities for sick children, suggests that environmental design promotes a more holistic approach to care and that medical, nursing and allied health staff benefit, as do patients and families, from an environment that reduces stress (Dijkstra et al., 2006; Kirkham et al., 2012; Zborowsky & Kreitzer, 2009). A systematic review of hospital design by Dijkstra et al. (2006) demonstrated the importance of the environment in healing of patients, although it was noted that environmental stimulation was limited and the authors recommended that further research was needed. A quantitative study by Ingulli and Lindbloom (2013) involving 150 individuals suggested that the natural environment could promote resilience and, therefore, protect against psychological stress.

Whitehouse et al. (2001) in a study that investigated utilisation and consumer satisfaction of a specifically designed hospital environment for sick children noted that financial considerations are a continuing issue in hospital construction and evidence is necessary to assess the effect and contribution of hospital gardens to the healing process. Their empirical study, essentially descriptive, used observations of usage of the garden, surveys and interviews to determine how the garden was used and reactions of patients, family and hospital staff to the benefits and possibilities for such a facility. Findings supported the view that a garden facility with seating, a variety of natural plants, flowers, water fountain, walls with colourful murals, play equipment and smaller spaces for children to explore provided a positive experience for patients and their family. A similar

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