



KEY POINT SUMMARY

OBJECTIVES

This paper discusses how the New Zealand children's camps continue to offer children and their families a "therapeutic landscape" to address their health and social needs, despite the precarious conditions that threaten the existence and financial viability of the camps.

DESIGN IMPLICATIONS

Incorporating the outdoors in children's health programs plays an important role in the healing process.

New Zealand Children's Health Camps: Therapeutic Landscapes Meet the Contract State

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2000 / Social Science & Media
Volume 51, Issue 7, Pages 1047-1059

Key Concepts/Context

New Zealand started to offer children health camps in 1919, responding to the government's increased interest in the well-being of children. Gesler recognized that the modern healthcare system failed to offer therapeutic landscapes where children could experience both physical and mental healing. It is believed that if children engage more with nature—fresh air, clean water, and beautiful scenery—this can have great healing power. Gesler went on to discover the first children's health camps, and what started as small, localized projects became a national network of permanent camps supported by the government.

Camps started with a focus on issues of 'race' and 'national fitness,' but later emerged to include more urgent health needs such as tuberculosis and malnutrition. Eventually, the camps became all-inclusive with a series of 'wrap-around' residential and off-site programs for families and children. After the 1950s, the camps extended to helping children from dysfunctional families, acknowledging children as "psychological beings" after the end of WWII. Now, the camps continue to provide free medical treatment, regular meals and schooling, 'self-care routines' (hygiene, dressing, etc.), and programs that deal with emotional and behavioral disorders.

With the camps historically supported by private and public funding, New Zealand's changing ideals around the welfare state strained the camp's future financial viability and public acceptability. With domestic pressure to deinstitutionalize the healthcare system, this paper makes a case for the purpose and impact of the children's camps over the years.

This paper has two main objectives: (1) explore the changing functions and perceptions of the health camps with regard to the changing ideologies around



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health and children, and (2) discuss the role of the outdoors and space in the treatment of “at-risk” children.

Methods

This review of the children’s health camps has three parts:

1. a review of how “therapeutic landscapes” have developed and been used to address health needs,
2. a survey of the managers at seven children’s health camps,
3. a telephone interview with the executive director of the New Zealand Children’s Health Camp Board.

Findings

No measurements were taken to determine statistically significant or insignificant outcomes.

Limitations

This article mentions its methodology (three parts) but does not go into each of those parts in more detail.