



KEY POINT SUMMARY

OBJECTIVES

The study sought to determine the effect of garden walking and reflective journaling on adults over 65 with depression.

DESIGN IMPLICATIONS

Garden walking and reflection could be an important aspect of depression therapy that may assist older adults in overcoming this common problem. Self-work in garden walking and reflection may be more acceptable to older adults and fulfill the desire to maintain independence common to this age group. Designers should consider access to gardens as an extension of the therapeutic environment for residents in long-term care/independent living facilities.

Garden Walking for Depression: A Research Report

McCaffrey, R., Hanson, C., McCaffrey, W.
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Key Concepts/Context

Millions of people experience depression every year, including the elderly, where it can be particularly debilitating as it effects physical, mental, and social functioning. Access to the outdoors, and increased sunlight, might help treat depression, as well as improve morale, self-confidence, cooperation, social interaction, and physical functioning for residents of a geriatric facility.

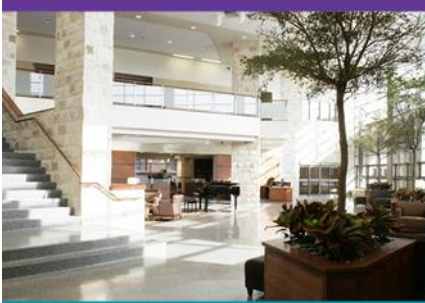
Methods

Researchers used purposive sampling to recruit 40 slots subjects. They collected data from these 40 participants over a 6-month period in 2008.

They used a mixed-methods research design and measured depression using the short-form, 15-question, Geriatric Depression Scale (GDS). Participants completed the GDS before and after garden walks. Researchers also conducted in-depth interviews with the study subjects after their walks.

The research ream provided participants with a walking guide and reflective journal to be used for 12 garden walks. They were asked to spend about 2 hours walking the garden, stopping at six specified spots, reading a descriptive paragraph or two, and reflecting on the words provided and on the garden surroundings, and then writing on journaling pages. Each of the 12 walks had a theme, which was carried out over the six stopping points on the journey through the garden.

After receiving the feedback form, the researchers met with the participants to complete the second GDS and interview them to about their experience. They used hermeneutic phenomenology, a method of understanding the lived experience, to theme the interview data. To ensure the trustworthiness of the thematic analysis, 4 steps proposed by Guba and Lincoln (1981) were applied. Interviews were audio-recorded with participant permission and transcribed by the authors.



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Researchers used a statistical program for the social sciences (SPSS version 16, 2009) to measure changes in depression levels in participants.

Findings

To determine changes in mean depression scores, the researchers used paired t tests to compare GDS pre- and post-intervention scores, and found a significant change in the overall depression scores, with the lower scores indicating less depression after the walks when compared with scores before the garden walking intervention ($t = 12.54, P = .001$).

Four themes emerged from the interview data collected from each participant: (1) being forced to spend time away from pressures of the day, (2) a sense of the beauty of nature, (3) the guide to the gardens provided insight and depth to the experience, and (4) gratitude for the beauty of nature and the life I have led.

Limitations

The authors state that a limitation of the study was the use of a Japanese healing garden rather than a community park or other less formal setting. Further, the findings may not be generalized to all garden settings. The study was also limited by the fact that the participants were from only one location and the sample was not very diverse. Finally, the study was limited by having only 1 interview rather than several interviews during the 12 weeks.