

THE EFFECT OF HORTICULTURAL THERAPY IN MAINTAINING  
THE LIFE SATISFACTION OF GERIATRICS

by

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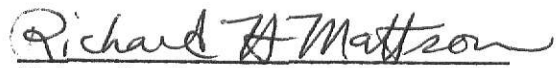
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## INTRODUCTION

Horticultural therapy has been used for centuries. In form it has varied from farm labor to its present status as an activity therapy to aid in a person's rehabilitation or therapy program.

Horticulture has proven to be therapeutic to many people, and has the advantage of bringing people closer to the soil, the beauty of plants, and the process of growth and development. Horticultural therapy is utilizing plants as "tools" for an activity therapy to improve or expand a person's physical and/or mental well-being.

Horticultural therapy has been used in many types of institutions, including psychiatric, penal, geriatric, and rehabilitation centers for the mentally retarded or physically handicapped. However, limited research has been conducted to ascertain that change does indeed take place when an individual is involved in horticultural therapy.

Thus, the purpose of this research was to attempt to measure change in an individual's life satisfaction level. When it is known what changes can occur through participation in an activity therapy, the therapist will be better able to tailor the program to the needs of the individual and gauge the effectiveness of a program.

The results of this research are being submitted for publication to HortScience, a publication of the American Society for Horticultural Science, and in non-technical form to Plants Alive, an indoor plant and greenhouse journal.

HORTICULTURAL THERAPY MAINTAINS  
LIFE SATISFACTION OF GERIATRICS<sup>1</sup>

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ABSTRACT

Involvement in either horticultural therapy or a discussion group was shown to maintain the level of life satisfaction of test groups of residents in a geriatric home. Geriatrics that were not involved in these activities showed a significant decline in their level of life satisfaction over an eight-week period. Employment of activity therapy for geriatrics was shown to be necessary for maintenance of the psychological, and to some degree, the physical well-being of the older citizen in an institutional setting.

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## INTRODUCTION

Horticultural therapy is the utilization of horticulture and related activities to bring about a desired change in an individual. Usually this change is associated with a person's physical and/or mental health. In the case of geriatrics, or older citizens, the goal may not be so much to change existing patterns developed over a lifetime, but rather to maintain those that the individual brings with him to an institution and expand them in a desirable manner. The possibility of maintaining desirable characteristics in geriatrics through involvement in a horticultural therapy activity was explored in this research.

The purpose of this research was to attempt to measure change in an individual's life satisfaction level. When it is known what changes can occur through participation in an activity therapy, the therapist will be better able to tailor the program to individual needs and gauge the effectiveness of a program.

## LITERATURE REVIEW

Horticulture has been used as an activity therapy for centuries in many institutional settings, including psychiatric, penal, geriatric, and rehabilitation centers for the mentally retarded or physically handicapped (1,2,3,7,10,12). Hefley (2) observed that the mentally retarded developed an improved self-concept, a greater degree of social interaction, an increased level of physical activity, and a deeper understanding of the interdependency between plants, man, and animals through involvement in a horticultural therapy program. Floyd (1) reported that horticultural therapy generated interest in learning plant taxonomy in blind students at the South Carolina School for the Deaf and Blind. However, no research has been reported that measured specific changes in individuals through involvement in horticultural therapy.

Watson and Burlingame (12) stated that establishing a successful horticultural therapy program requires a thorough understanding of the individuals involved in the program, and tailoring the program to their needs. In relation to the aged in today's society, Rynerson(8) noted that Social Security and pension programs have insured a greater degree of financial security, Medicare has increased the availability of services to meet health needs, and the upgrading of homes for the aged has assisted in adequately providing living accommodations. However, meeting the higher level needs of the aged--those being the need for attention, social recognition, and a role in society in which they can maintain dignity, a sense of self-worth and self-satisfaction--is many times neglected.