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# Living Well with Dementia Workshops

## Exploring the benefits of hosting dementia therapy workshops within community greenspaces

PREPARED BY:  
DR KATE NEALE  
2021

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**Southern Cross  
University**



**The 5 Senses Garden is on the land of the Wangal people of the Eora nation.**

**We acknowledge the Traditional Owners of country throughout Australia and recognise their continuing connection to land, waters and culture.**

**We pay our respects to their Elders past, present and emerging.**

**We embrace and value diversity and inclusion by recognising the unique choices of all individuals.**



# FOREWORD

We recognise that the past 18 months has not been an easy time for many people both personally and professionally. It was a fitting time to deliver and report on how therapies taking place in the 5 Senses Garden at Rhodes Park might provide people living with dementia and their carers the opportunity to enhance their sense of wellness and connection within the community.

The Living Well with Dementia Workshops were funded by the NSW Government through the My Community Project and delivered by Inner West Neighbour Aid.

The initial funding application was developed by then staff members Roman Deguchi and Natalie Ciccio. We thank Anne Tunks from Sydney Local Health District who was instrumental in supporting our funding application and the project.

Credit to Maja Sorensen for her seamless transition and taking over the project from former staff members. Maja's hard work and dedication to the purpose of the workshops and relationship building with participants and facilitators played a large part in the success of the workshops. Thank you to Stuart Blundell for his support throughout the project.

We commend Kate Neale and acknowledge the relevant and informative literature searches as well as the development of the final report.

Feedback from carers who attended the workshops speak volumes about the impact of tailored programs, in particular one carer commented "the days that we were able to join you for a morning of activities at the 5 Senses Garden hold special memories for me and I just wanted to take this opportunity of thanking you for inspiring workshops."

Inner West Neighbour Aid is extremely proud to be involved with this project. We know the importance of listening, being connected to the community, delivering innovative and stimulating programs and respecting our elders for their lived experiences.

Allison Yee-Brogan  
General Manager, Inner West Neighbour Aid  
October 2021

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# EXECUTIVE SUMMARY

People living with dementia face many challenges including safe access to, and inclusion in, public outdoor spaces. And whilst many dementia therapy programs are often conducted indoors for a number of reasons including minimising risk and providing a more controlled environment of stimulus, an increasing body of literature is exploring the benefits of nature and greenspaces for people living with dementia (Marsh, 2020).

Gardens are not just beautiful spaces in which to sit and watch the world go by. They can offer so much more including opportunities for exercising, socialising, cooking, reminiscing, maintaining intergenerational connections, and sensory stimulation (Therapeutic Horticulture Australia, 2021). Many people enjoy gardens for their therapeutic benefits, including people living with dementia and their carers.

This project explores the benefits and barriers of hosting dementia-therapies in public greenspaces to understand the impact it has on the wellbeing and belonging of people living with dementia and their carers in attendance.

The dementia therapy workshops were held at 5 Senses Garden at Rhodes Park in Concord West in early 2020, and resumed again after COVID-19 restrictions eased between February and May 2021.

Participants were invited to attend through Inner West Neighbour Aid's networks and with the support of Anne Tunks from Sydney Local Health District.

The focus of the ten workshops (2 held in 2020 and 8 held in 2021) differed on rotation and included: art therapy; therapeutic horticulture; music therapy; and mindfulness and meditation.

Research was conducted to explore the experiences of those participating in the workshops, as facilitated by a specialised therapist with expertise in each area at 5 Senses Garden.

Data was collected in a number of ways. A survey was developed and distributed in paper form, via email and through a QR code to all participants after attending each of the workshops. Fieldwork observation notes were taken during and immediately after each workshop, either by the researcher or project co-ordinator. Informal conversations with participants also illuminated their experiences of participating in the workshops. Photos were taken with permission of all participants.

The study used mixed methods analysis. Statistical analysis including descriptive and frequency statistics was used to examine survey responses. Responses to open items of the survey were content analysed. Fieldwork notes were thematically coded and analysed.

The findings demonstrate that hosting dementia therapies within public greenspaces brings about a number of benefits for people living with dementia and the support person who attended the session with them. The benefits could be described as both individual benefits for either the carer or person living with dementia and benefits for their relationship together. The chance to attend the garden enabled opportunities to socialise, congregate and converse with others in the workshop. It was re-assuring for carers in particular to be able to share experiences with others going through similar experiences. Many also spoke about the increased visibility and connection to the community that came from hosting workshops within the public 5 Senses Garden.

The research findings also illuminate ways in which dementia therapies can be better enhanced by situating them in greenspaces. These included incorporating nature and utilising the amenities on offer. It was however important that the garden did offer safety and security by way of fencing, level and safe walking paths, nearby bathrooms and ample convenient parking and reliable nearby public transport.

It is hoped that by having a more thorough understanding of the impact of gardening and greenspaces, within the context of dementia therapies that are illuminated in this study, will inspire others to implement similar initiatives.



# PROJECT DETAILS

## Workshop + research funding

Living Well with Dementia Workshops were funded through a competitive funding opportunity as part of the NSW Government's 2019 'My Community Project' competitive grant round.

My Community Project was an initiative by the NSW Government to improve the wellbeing of people and communities in NSW.

Inner West Neighbour Aid was awarded funding for the workshops through the scheme. The project submission was supported by Anne Tunks, Dementia Advisor at Sydney Local Health District.

The funding was to conduct ten dementia therapy workshops at 5 Senses Garden, Rhodes Park, Concord West and explore the benefit of doing so for participants. It was originally hoped that the workshops would be conducted monthly in 2020. As explained in more detail below, the workshops were relaunched and held between February and May 2021.

A portion of the funding awarded enabled the research component to be completed.

## Project team

Dr Kate Neale – Researcher (Southern Cross University + Digability)

Maja Sorensen - Project Co-ordinator + Garden Aid and Community Development Team Leader (Inner West Neighbour Aid)

The project team wish to formally acknowledge and thank the participants of the workshops who made the workshops such a success and provided such rich insights during the fieldwork and data collection. Your warmth, enthusiasm and continued engagement in the project made coming to the garden every fortnight such fun.

A big thank you to Roman Deguchi and Anne Tunks for helping to conceptualise the project and successfully seek funding for it. Thank you to Natalie Ciccio for working on the project with us during her time at Inner West Neighbour Aid and Stuart Blundell for his continued support of the project through 2021.



# BACKGROUND

In 2020, it was estimated that 472,00 people in Australia live with dementia and are supported by over 1.6 million carers (Dementia Australia, 2021).

Dementia is described as a "collection of symptoms that are caused by disorders affecting the brain" (Dementia Australia, 2021) that affects one's behaviour, thinking and ability to perform a range of tasks. It is not one specific disease.

Dementia affects not just the individual diagnosed, but also their family, and especially their partner, spouse or loved one (Alzheimer's Research UK, 2021). Caring for someone with dementia can be detrimental to a carer's physical and mental health. In the role of caring for someone else, the carer can run the risk of not caring for themselves.

## **Staying well when living with dementia**

It is therefore imperative that people living with dementia and their carers stay well, in order to foster and maintain their wellbeing and social connections. There are many therapies and programs available to people with dementia<sup>^</sup> to help maintain their mental and physical wellbeing, and ensure they stay socially connected to their communities.

<sup>^</sup> Acknowledging that not everyone receives the support needed to live their best life with dementia.

The consensus within the literature, and in practice is to provide opportunities for people living with dementia to stay as engaged in life as much as possible through the provision of activities that prioritise comfort, attachment, inclusion, occupation, and identity (Kitwood, 1997). This has led to the proliferation of non-pharmacological programs and activities designed specifically to help people living with dementia stay actively involved in life. Dementia programs and activities may have any number of objectives including: social connection, continued brain function, and encouraging physical activity.

Dementia Australia, (2021) recommend activities for people living with dementia that:

- align with a person's interests
- maintain existing skills
- are safe
- allow for an emotional outlet
- are relaxing and do not overstimulate or induce stress
- feel unhurried
- compensate for activities that can no longer be done
- promote self-esteem
- dignify
- empower
- stimulate and encourage new learning
- are enjoyable
- foster and encourage social contact
- acknowledge and celebrate cultural backgrounds.



Creative arts-based dementia friendly therapies have been particularly popular in meeting such objectives for people living with dementia.

Creative therapies positively impact people living with dementia as a strategy to support wellbeing and social connections (Kenning and Visser, 2021) as well as providing a sense of mindfulness and other benefits that arise from combining nature within arts-based therapies (Olson, 2021).

### **Benefits of nature for people living with dementia**

Experiences of nature are said to have various physical, mental and social benefits for older people (Orr, Wagstaffe, Briscoe, and Garside, R., 2016) and incorporating nature into dementia therapies have said to increase sensory stimulation which is believed to benefit people living with dementia (Jakob and Collier, 2017)..

Kasap, Ağzitemiz and Ünal (2021, p16), argue contact with nature "replenishes attention, memory, executive functioning, and learning capacities", whilst "bolstering creative potential". They describe the ways nature has an uplifting effect on positive mood, well-being and relaxation by mitigating stress and anxiety levels.

Access to nature however doesn't just have a positive impact on one's individual state of mind, but also socially, by fostering contact with others within natural spaces, it facilitates a cohesive appreciation and value for nature and improves social connectedness (Kasap et al, 2021).

Barton and Rogerson (2017) describe how, "engaging with greenspaces can positively influence eating and sleeping patterns, fitness and mobility, sense of wellbeing, self-esteem and control associated with improved

social interaction and a sense of belonging". They also argue for the impact access to greenspaces has for reducing stress, agitation, anger, apathy and depression for people living with dementia.

### **Appropriate greenspaces for people living with dementia**

Palmer (2020), argues that appropriate greenspaces for people living with dementia should enable a carer to support a person properly, spatially be orientating and understandable, provide the opportunity for personal expression and identity, be welcoming and inclusive and provide a sensory experience but also control of unwanted stimuli.

Safe access to natural areas such as parks and walkways encourage people living with dementia to access nature and enjoy fresh air, sunshine, flora and fauna and sounds associated with the environment such as birdsongs and leaves rustling (Sturge, Nordin, Patil, Jones, Légaré, Elf, and Meijering, 2021). Amenities, accessibility via public transport, access to services, clear signage, safe paths, opportunities for positive social interactions and opportunities to witness "normal" community life improve participation for a person living with dementia within their community (Courtney-Pratt, Mathison, and Doherty, 2018).

### **Dementia-therapies involving gardening and greenspaces**

Research shows that engagement in greenspaces positively impacts an individual's wellbeing. A growing body of evidence suggests that access to and time spent within public greenspaces does positively impact on a person with dementia's quality of life and provide opportunities to stay connected socially to others and the community more broadly (Kasap et al., 2021). MMako, Courtney-Pratt and Marsh (2020) discusses this very



specifically in terms of “Engaging in meaningful activities; Empowerment; Positive risk taking; and Reinforcing Identity”. They conclude that for people living with dementia, access and participation within community green settings enables an active and meaningful community-life, despite cognitive decline and time spent within public greenspaces does positively impact on a person with dementia's quality of life and provide opportunities to stay connected socially to others and the community more broadly (Kasap et al., 2021). MMako, Courtney-Pratt and Marsh (2020) discusses this very specifically in terms of “Engaging in meaningful activities; Empowerment; Positive risk taking; and Reinforcing Identity”.

### **Caring for a person with dementia**

As we conclude this section we must remember that in order to provide for a person living with dementia, it is critical to also cater for their carers too. It is critical to find effective ways of providing support to carers of people living with dementia. It is understood that carers face an increased risk of stress, depression and other illnesses and so programs, therapies and activities should also be provided that focus on providing support for carers in a number of ways (Dementia Australia, 2021).

Dementia Australia (2021) acknowledges that provision of care to a person living with dementia is enhanced when carers:

- are educated about the disease and involved in the person's care,
- understand the disease and learn how to communicate and interact with the person in appropriate ways

- are provided psychosocial support, including counselling, training in techniques for behavioural management and participation in support groups.

Research demonstrates that therapies offered in a nature-based setting that invite both people living with dementia and their carers "support contact with nature and animals, activity engagement, physical activity, structure, social interactions, healthy eating, a sense of meaning in life and a focus on normal daily life" (de Bruin, Buist, Hassink, and Vaandrager, 2021, p1). For carers specifically it offers respite and reassurance, whilst maintaining carer's own interests, involvement in activities and social connection.



# RESEARCH AIM

The aim of the research was to explore what impact hosting dementia therapies in public greenspaces had on the wellbeing and belonging of people living with dementia and their carers in attendance.

In January 2020, Inner West Neighbour Aid staff, workshop facilitators and the researcher met at 5 Senses Garden to see the space and get more information around the aims of the Living Well with Dementia Workshops, planned data collection and the scope of the research component of the project. Ideas were also shared about how the natural setting of the garden can complement, enhance and support each of the therapies on offer, that being art, music, horticulture, meditation and exercise.

It was agreed that the purpose of the research was not to:

- Conduct a client satisfaction survey of the workshops
- Explore the benefits of each therapy type offered (art, music, horticulture or mindfulness and meditation) for people living with dementia and/or their carers, although some are reported in the findings of this report.
- Evaluate the facilitation of the workshops either in terms of how they delivered each individual focus (art, music, horticulture or mindfulness and meditation) or how well they did or didn't utilise the garden. The report however does make general recommendations for ways the garden and its location could be further enjoyed in the context of the workshops.

# RESEARCH QUESTIONS

The project was guided by the following research questions:

1. What impact did garden-based dementia therapy workshops have on participants' own sense of wellbeing?
2. What impact did garden-based dementia therapy workshops have on the relationship between people living with dementia and their carers?
2. What impact did garden-based dementia therapy workshops have on fostering social connections between participants?
3. Does hosting garden-based dementia therapy workshops in public greenspaces encourage broader community inclusion?
4. In what ways can dementia therapies be adapted to maximise the wellbeing benefits associated with greenspace contexts?

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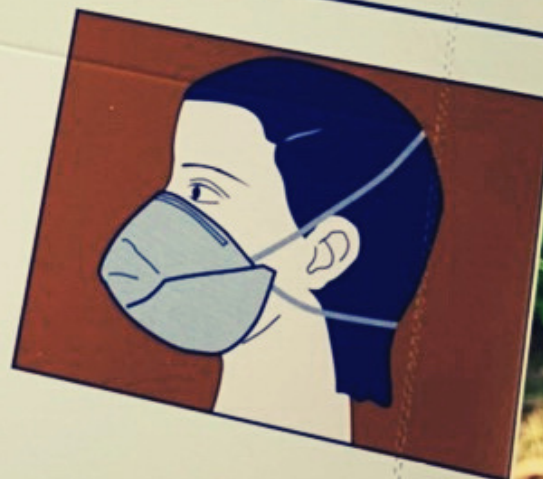
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# BUSHFIRES AND THEN COVID-19

The program began in Summer 2020 as Australia was being ravaged by bushfires. Much of Sydney was being engulfed by smoke to a worrying level on a daily basis. Face masks were being distributed to participants out of concern for the poor air quality. Continued concerns for the air quality and its impacts on participants of the program threatened the continuation of the program. Despite this, two workshops were able to proceed. In early February 2020, participants gathered for a meditation and mindfulness workshop and many returned in early March 2020 for an art therapy workshop.

Then in late March 2020, attention turned to a new threat as COVID-19 hit Australia's shores and all of Australia went into a snap lockdown. The program was put on hold immediately and indefinitely in the uncertainty of how Australia would be affected by the virus and the worrying reality that many participants who has signed up for the program were also the most vulnerable against the disease. The program stayed suspended for the remainder of 2020.

In late 2020, as Australia began opening up, the team reconvened and planned for a 2021 relaunch accepting the reality that snap lockdowns could continue to threaten the delivery of the workshops and importantly, the facilitation of the workshops would need to consider public health COVID-19 safety guidelines.

# COVID-19 PROTOCOLS

A COVID-19 project protocol was put in place at the beginning of the fieldwork in response to the ever-changing landscape and possible impacts this could bring to the fieldwork. The researcher ensured a careful and cautious response to ensuring policies, government advice and health guidelines were always followed in completing the research. This included complying with site protocols, travel restrictions, testing recommendations and self-isolation or quarantine measures if unwell or awaiting COVID-19 test results.

Inner West Neighbour Aid established and followed similar protocols and visiting therapists were asked to provide their own COVID-19 Safety Plans.


Workshops started with 10 participants in accordance with NSW Health guidelines but extended to 20 participants as COVID-19 restrictions eased. Safe social distancing was maintained by strategic seating arrangements.


At the time the workshops were held, there were no mask wearing or social distancing mandates in place. Physical contact such as hand-shaking or embraces between participants (not including between a person living with dementia and their carer) was not encouraged.

In 2020, people were able to serve themselves during the lunch service. In 2021, the researcher and project co-ordinator assumed the role as servers to limit the sharing of utensils between participants.

The plants in the vegepods® are for the  
Community + Volun<sup>ty</sup> workshops. Please ha<sup>ve</sup>  
Springly.



Inner West  
NeighbourAid 

 5 senses garden

### Living Well Dementia Workshops

Free for people living with dementia & their carers

Learn techniques for well-being & enjoy a day in the garden

The first and third Wednesday of the month from February-May 2021

**Horticulture: 3 February, 5 May**

**Music: 17 February, 21 April**

**Meditation: 3 March, 7 April**

**Art: 17 March, 19 May**

Workshop 10am

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# REVISED SCHEDULE

With concerns that new outbreaks could close the program at any time, the decision was made to move the workshops from a monthly schedule to fortnightly incorporating 2 sessions each of four types of therapies.

The program re-launched in February 2021 with the following schedule:

3rd February: Therapeutic horticulture

17th February: Music therapy

3rd March: Meditation and Mindfulness

17th March: Art therapy

7th April: Meditation and Mindfulness

21st April: Music therapy

5th May: Therapeutic horticulture

19th May: Art therapy

Fortunately the workshops were able to run in 2021 without further interruptions to the schedule.



# WORKSHOP ATTENDANCE

Workshops were promoted to people living with dementia and their carers through Inner West Neighbour Aid's stakeholder networks, clients, local dementia support organisations and referrals systems at the neighbouring Concord Repatriation General Hospital. Interested participants could call or email to register their interest in attending each, any or all upcoming workshops.

Final workshop attendance breakdown included:

DATE	THERAPY	FACILITATOR	NUMBER OF PARTICIPANTS
5 Feb 2020	Meditation	Leanne McLean	12
4 Mar 2020	Art	Kerryn Coombs-Valeontis	16
3 Feb 2021	Horticulture	Kerryn Coombs-Valeontis	10
17 Feb 2021	Music	Jeannette Harvey	17
3 Mar 2021	Meditation	Leanne McLean	15
17 Mar 2021	Art	Kerryn Coombs-Valeontis	18
7 Apr 2021	Meditation	Leanne McLean	11
21 Apr 2021	Music	Jeannette Harvey	15
5 May 2021	Horticulture	Kerryn Coombs-Valeontis	17
19 May 2021	Art	Kerryn Coombs-Valeontis	12

Many participants attended multiple workshops. People living with dementia attended the workshops with either a family member, typically a spouse (17 pairs across all the workshops), child (5 pairs across all the workshops) or paid carer (2 pairs across all the workshops). Eight carers attended workshops on their own (across the entire program). One participant (neither a person living with dementia or a carer) came on her own. Her motivation for coming to the workshops was to have the chance to connect with people living with dementia and their carers. Her parents (who were both living with dementia) resided overseas and it was her opportunity to see and understand dementia first hand so she could relate better to the care roles of her siblings in caring for their parents.

Participants lived within the following local government areas (LGAs):

LGAS	NUMBER OF PARTICIPANTS
Hunters Hill	3
Inner West	12
City of Canada Bay	12
City of Sydney	7
Burwood	3
City of Ryde	4
City of Canterbury-Bankstown	5
Georges River	2
Bayside	2
Parramatta	1
Northern Beaches	1
Unknown	1

Participants typically began to arrive to the garden on the morning of a workshop around 9:45am. Workshops got underway at 10am. Late arrivals were welcome to join at any time. All workshops went for 2 hours and participants and therapists were invited to stay for a catered lunch in the garden afterwards. All participants typically left by 1pm.



# RESEARCH METHODS

Surveys, observations and informal conversations during the workshops were used to collect data in order to better understand the experiences of people living with dementia and their carers within the workshops.

Participants for the research were recruited during the promotion of, and during the workshops. Upon signing up for the workshops, people living with dementia and their carers were given details of the research and told that a researcher will be present at some workshops to solicit survey responses and observe the activities to gain a better understanding of the impact of the therapies being held in greenspaces. Participants were reminded that attendance at the workshop wasn't contingent on participating in the research.

At the beginning of each workshop, the researcher or project co-ordinator again explained the research component within the program. Participants were reminded that observation notes were being taken to gain a better understanding of workshops being situated in a garden, but that no identifying information was being recorded and should they wish not to be observed, to let the researcher know. As previously mentioned, permissions to have photographs were also sought with an explanation that photographs would be used in the final report but care would be taken not to capture participants' faces.

Participants were invited to discuss any aspects of the data collection with the researcher at any time and reminded that participation in the research

was completely voluntary and not a requisite of their participation in the workshops. All attendees indicated they were okay with the research observations taking place.

A survey was also developed and distributed in paper form, via email and through a QR code to all participants after attending each of the workshops.

Paper versions of the survey were made available at the workshops for anyone to complete or take home to complete at a more convenient time. Survey respondents were encouraged to return the surveys to the researcher or project co-ordinator at subsequent workshops or return by mail to the address provided in the information sheet that accompanied the survey. QR codes were made available onsite for participants who preferred to answer the survey online at a later stage. Participants also received an electronic version of the form via email to fill out if preferred over using the online survey form provided to them via a website link.

Some workshop participants indicated they would prefer to talk to the researcher about their experiences over the phone instead of completing the online survey. Where this occurred, the project co-ordinator forwarded contact details to the researcher with the permission of the respondents. Phone interviews were then conducted following the questioning of the survey. The researcher filled out the online survey on behalf of the respondents as the phone interview took place at a mutually convenient time. No identifying information was collected during the phone conversation or written on the survey responses. Once the phone survey was complete, the respondents contact details were deleted ensuring anonymity within the data set.



Fourteen participants (representing 27 workshop participants) participated as survey respondents, either completing the survey online, in paper form or over the telephone. All survey respondents identified themselves as a carer (either spouse, family or in a paid support role) to a person living with dementia. All but one answered the questions on behalf of themselves and the person living with dementia. One person responded from their perspective as an adult child of someone living with dementia only.

The researcher also attended seven workshops to take photographs, observational notes and converse informally with the participants to learn more of their experiences within the garden.

It became apparent that some participants preferred to discuss their experiences with the researcher instead of completing the survey. In these instances, participants were invited to provide insights on their experiences to the researcher, which the researcher wrote as fieldnotes for inclusion in the data set.

During conversations within the workshops between the researcher or project co-ordinator and participants, participants were expressly asked if their recollections of experiences in the garden could be used as data within the research of the programs. Where consent was given, information was included. Both people living with dementia and their carers participated in the conversations together. In many ways the carer supported the participation of the person living with dementia within the conversations in order to help the researcher hear their perspectives. The researcher didn't engage in conversations with a person living with dementia alone.

Participants were not identifiable in any fieldwork notes, which were later transferred from the researcher's phone and safely secured on University hardware. Likewise, emails were electronically copied and saved as project data files and deleted from online email systems.

For workshops where the researcher was absent, the project co-ordinator sent summary notes of how the workshop went, who was in attendance and anything of importance that occurred. Mentions of participants by name were de-identified and then safely secured on University hardware. Emails were electronically copied and saved as project data files and deleted from online email systems.

Photos and videos were also taken throughout the time spent in the garden by the researcher and project co-ordinator. The photos were used primarily to assist the researcher recall the activities with the garden or particular moments of significance. Photos were also sent to further illustrate the workshops, which likewise were saved securely and then deleted off researcher emails and computer servers. The photos throughout this report are those taken within the fieldwork phase of the project. Participants were made aware of the photos being taken and their permission sought for the photos to be taken and used in the report.

The resulting data from each visit, survey results and any correspondence following provided valuable insight into whether and how situating dementia therapies within public greenspaces provided additional benefits to people living with dementia and their carers; any identified barriers or limitations and the ways in which dementia therapies can be enhanced through a greenspace context.



# FINDINGS

## **The location of the workshops within the garden**

Workshops predominantly took place under the manmade gazebo where ground is even, there is adequate seating and protection was offered from the elements. The lack of walls on all sides of the gazebo offered unobstructed views of the garden regardless of where participants sat and the abundant nearby planting made tactile engagement with foliage easy.

Hard-wearing man-made surfaces, namely the concrete floor and stainless-steel benches were the only distraction to feeling fully immersed in nature. Depending on where a person sat under the gazebo, they could bask in the warm autumnal sunshine or be shaded on the warmer summer days.

Nearby seating under the shade of the mature trees of the garden also offered alternative spaces for workshops. This was discussed with some of the facilitators who commented on the need to consider adding more temporary seating to accommodate group sizes and potential difficulties in projecting voices in such a large open spaces within the garden.

The garden remained open to the general public during the workshop sessions and as such the space was often shared between workshop participants and others. The general public were often observed watching the workshops and enjoying the sight of the participants singing or dancing (in the music workshops).

The garden is fully enclosed by a fence, with two gates at either end of the garden, connected by an accessible meandering path lined with overflowing









































# IDEAS FOR FURTHERING THE USE OF THE GARDEN

All facilitators utilised the natural surroundings of 5 Senses Garden within their workshops. Most focused on the ways natural elements could be incorporated in activities or how the garden could facilitate benefit to the participants and focused on activities that gave the participants an artefact or intangible experience from the event.

The following are ideas of alternative activities that could be pursued in future workshops. The ideas aim to provide the opportunity for participants to contribute to the garden itself in the hope this contributes to a greater feeling of belonging and esteem.

Future horticulture and art therapy workshops could be tailored to steer efforts further into the kitchen garden onsite. Many of the beds could have been replenished and planted out by workshop participants, not only providing them with the wonderful benefits of working with plants that the workshop was aiming to do, but also contributing something meaningful to the garden and in doing so, making a significant statement to the broader community of the value people living with dementia (and their carers) can still make within the community.

Another potential outcome of an initiative like this could be that participants are further motivated to return to the garden to see how their planting has grown. They may also wish to get involved in additional non-dementia







# CONCLUSIONS

The benefits of hosting dementia-based therapy workshops in a garden setting include the physical benefits that come from being outdoors and sensory experiences that promote health and wellbeing.

Emotional and psychological benefits were also reported in terms of feeling calmer, happier and more rested after attending a workshop within the garden. The workshops themselves provided an opportunity to connect with previous skills, hobbies and interests and many felt their attendance improved the relationships between the carer and person living with dementia.

Participants also appreciated the opportunity to congregate and socialise with others living similar lives, as well as the opportunity feel connected to the broader community through spontaneous interactions or the workshops proximity to other public spaces. The opportunity could exist to invite more dementia specialists to host workshops within the garden to allow people living with dementia and those who care for them to access services that could assist them in other aspects of their lives.

Not only did the location of the workshops enable a greater connection to nature for the participants, but they also noted that the naturalistic setting of the garden dissipated the feeling that the workshop was clinical in nature and enabled people to simply enjoy their time with others, doing interesting activities outdoors together. A simple pleasure not lost on the participants and demonstrated by the strong repetitive participation of core group of participants.

Ideas for how the workshops could further exploit these clear benefits and appreciated features pivot in the idea of expanding the physical set up of the workshops further into the garden setting and finessing the program to consider more meaningful contributions the participants can make in the space or more deliberate social interactions with others.

With this new insight and understanding into the impact of gardening and greenspaces within the context of dementia therapies, it is hoped the findings within this report will inspire and allow others to consider the ways they can enhance the incorporation of nature or situate dementia therapies in public greenspaces for a greater sense of social connection, wellbeing and belonging.

This isn't suggested without acknowledging that adequate funding and staffing are required to maintain dementia therapy programs of this nature.

Funding is necessary to cover the expenses associated with workshops including staff time, paying workshop facilitators and the cost of refreshments and other resources or equipment.

Ideally workshops of this nature would be funded on a continuing basis to ensure they occur frequently and consistently. Doing so would provide participants with regular support and access to dementia expert advice, a connection to local support services and increased opportunities to meet and build sustained social connections with others living with dementia and their carers.

Funding for additional infrastructure such as safe and accessible garden spaces across more LGAs would allow workshops to occur in more locations, reaching a greater number of participants. Doing so would enable those who attend to participate in a meaningful activity within their own local public greenspaces/ communities where social connections and access to support services can be made more easily both within, and outside of organised workshops.

The findings within this report make a strong case that funding of dementia based therapies within public greenspaces, such as the one within this project would result in real and lasting benefits for people living with dementia and their carers.



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# SURVEY QUESTIONS

## 1. Who is completing this survey?

- ☐ The carer of a person living with dementia
- ☐ A person with dementia
- ☐ We are completing this survey together

## 2. What activities do you generally enjoy together in public greenspaces (such as a park or public garden)? Tick all that apply.

- ☐ Walking
- ☐ Active participation in recreational activities (chess, dancing, exercise, gardening etc.)
- ☐ Bird or nature watching
- ☐ Sitting on a park bench or picnic bench set in a public greenspace
- ☐ Enjoying something to eat or a picnic (takeaway food, at a café set in a public greenspace, a coffee)
- ☐ Meeting friends or family on planned catch ups
- ☐ Meditation or mindfulness
- ☐ Observing and listening to others in the space (children playing, laughter, listening to live music, people watching etc.)
- ☐ Other. Please state...

## 3. What sensory experiences do you enjoy in public greenspaces? (Tick all that apply)

- ☐ Watching people
- ☐ Observing nature
- ☐ Getting some fresh air
- ☐ Enjoy being in a bigger space and seeing the sky or cloud-gazing or bigger horizons
- ☐ The opportunity to bask in sunshine



- I feel happier for being outdoors after visiting a public greenspace

This is true for me

I'm not sure

This isn't true for me at all

It gives me access to nature I don't have a home

This is true for me

I'm not sure

This isn't true for me at all

I'm reminded of other things not in my day-to-day life

This is true for me

I'm not sure

This isn't true for me at all

I'm reminded of the beauty in nature

This is true for me

I'm not sure

This isn't true for me at all

**5. What benefits do you think there are from being in a natural setting such as a public greenspace? Tick all that apply.**

- Physical benefits that come with navigating greenspaces (different terrain and risks)
- Chance to demonstrate capabilities and independence
- Exhibition of previous skills/ hobbies/ passions/ interests
- Visibility within the community that people with dementia access the spaces
- Opportunity to congregate and socialise
- I/we get that "grounded" feeling that comes from spending time in nature
- other. Please state...

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**6. What is the biggest influence on a person living with dementia's access to community greenspaces? Please rate from most important (1) to least (10).**

- Reassurance of personal physical safety
- Having a carer to accompany the person
- Access to support services to facilitate safe participation
- Appropriate access to close transport or proximity of parking.
- Dementia friendly layout, accessible and safe paths and planting.

- Opportunity to participate in something meaningful
- Reception of others (friendliness/ welcome)
- Opportunity to interact meaningfully with nature (passively or actively)
- Specific activity to be involved in (such as a workshop or program)
- Appropriate amenities such as somewhere to sit, bathroom facilities, provision of refreshments, privacy.
- Other. Please state...

## 7. What barriers do you think inhibit your enjoyment or access to public greenspaces?

- Concern for physical safety/ risk of being in nature
- We both don't enjoy being outdoors
- Lack of regular structured activities to do in greenspaces (other than the programming at 5 Senses Garden)
- Lack of access to regular sensory experiences in nature
- Concerns for how interactions with others in a natural setting may go
- Lack of transport or other infrastructure (appropriate seating or shelter)
- Inconsistent weather makes it difficult to plan
- Concerns about moving safely within the community
- Not enough opportunity to access nature independently
- Other reasons. Please state...

## 8. Do you think hosting dementia therapies in public greenspaces results in a more meaningful engagement in the community? If so, please describe how.

**9. Do you think the dementia therapies helped you engage in the garden in a more meaningful way (that you wouldn't have got from visiting in your own time)?**

If so, please describe how.

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**10. Would you have come to the garden if it wasn't for the dementia-therapy programs on offer? Tick all that apply.**

- ☐ Yes, we visit the garden in our own time anyway
- ☐ Yes, but for other workshops held here
- ☐ No, we only came for the dementia-based therapies

**11. What impact do you think the dementia therapy sessions in the garden had on your relationship together?**

- ☐ It brought us closer to each other
- ☐ It made us appreciate each other more
- ☐ It allowed us to enjoy each-other's company.
- ☐ It was a nice escape from our usual activities together
- ☐ It was good to have a change of scenery
- ☐ It allowed us to talk to others who share similar experiences
- ☐ Other. Please share...

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**12. Write a number between 1 (no impact) and 5 (significant impact) next to each item indicating the impact the dementia therapy had on the carers. Leave unmarked if not relevant.**

- ☐ Reduced agitation
- ☐ Improved sense of wellbeing
- ☐ Improved connection with others
- ☐ Feeling refreshed
- ☐ Better quality of sleep
- ☐

- Improved mood
- Improved relationship between carer and person living with dementia
- Reduced aggression
- Other increased opportunities to access community (did you go elsewhere as a result of already being out and about)
- Likelihood to come back to the garden for another visit (outside of program time)
- Increased likelihood to connect with other nature-based therapies
- Increased likelihood to connect with other carers and or person living with dementia

**13. Write a number between 1 (no impact) and 5 (significant impact) next to each item indicating the impact the dementia therapy had on the person living with dementia.**

**Leave unmarked if not relevant.**

- Reduced agitation
- Improved sense of wellbeing
- Improved connection with others
- Feeling refreshed
- Better quality of sleep
- Improved mood
- Improved relationship between carer and person living with dementia
- Reduced aggression
- Other increased opportunities to access community (did you go elsewhere as a result of already being out and about)
- Likelihood to come back to the garden for another visit (outside of program time)
- Increased likelihood to connect with other nature-based therapies
- Increased likelihood to connect with other carers and or person living with dementia

**14. Would you say your experiences in the dementia-therapy sessions were enhanced further by being set in a natural outdoor setting like the garden?**

- Yes. If so, how.

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- No. If you think it detracted from the experience, please describe.

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- Unsure

## 15. How do you think the greenspace and access to nature was utilised in the program?

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## 16. Having experienced these nature-based dementia therapies how likely would you:

Participate in another nature-based dementia-related activity

Very likely                      I'm not sure                      Unlikely

Visit a garden or greenspace in your own time

Very likely                      I'm not sure                      Unlikely

Organise your own gathering or outing in a public greenspace with people living with dementia and their carers.

Very likely                      I'm not sure                      Unlikely

***These dementia-based therapy programs were impacted by public health guidelines relating to congregating and social distancing. Three last questions about the impacts of COVID on your access to greenspaces in 2020 and beyond.***

## 17. Please tell us in what other ways your access to greenspaces were impacted during the lockdown.

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**18. Please tell us the impact this had on your wellbeing and social connections.**

**19. How has the new normal of social distancing or health precautions continued to impact your access to greenspaces and its impact on your wellbeing and social connections?**

**END SURVEY.**

