



Nurturing Inclusion A Good Practice Case Study from

Stirling Health and Care Village

In Partnership with





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NURTURING INCLUSION

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A Good Practice Case Study from Stirling Health and Care Village

For readers who may not know me, I'm registered blind, and I adore outdoor activities, such as forest bathing and woodland walks.

I usually access these activities with a sighted guide. Recently I was reading Sarah Bell and Rowan Foley's 2021 article, *A(nother) time for nature?* situating nonhuman nature experiences within the emotional transitions of sight loss. Their exploration of inclusion, or exclusion of people with sight loss from outdoor spaces captured my imagination. Bell & Foley (2021) highlight the importance of the more-than-human relationship in supporting wellbeing, arguing that a factor in supporting the human/more-than-human entanglement is through design that is focussed on



Figure 1: Image of Dianne Theakstone

inclusivity and is considered and managed in its approach, particularly when it comes to challenging life changes.

This coincided with an invitation for the Intersectional Stigma of Place-Based Ageing (ISPA) Project (led by the University of Stirling and funded by the ESRC) to visit the grounds of Stirling Health and Care Village. On the 15th May, three ISPA Community Peer Researchers Alex, Kim, and Sam (pseudonyms) and I met with Elaine Cochrane, Senior Health Improvement Officer, Clackmannanshire and Stirling Health and Social Care Partnership and Krissy Stevenson, Senior Project Officer for The Conservation Volunteers, at Stirling Health and Care Village. Elaine and Krissy introduced the group to two accessible planters and the *Blether¹ Bench*. This reflective piece focuses upon insights from lived experience of disablement provided by the ISPA group, as well as pictures kindly produced by Sam and ISPA Team member, Carol. We examine: why is it so important to ensure inclusion for disabled people within outdoor as well as indoor spaces?

¹ A 'blether' is a Scottish dialect term meaning a 'chat'. A 'Blether Bench' is therefore outdoor seating on which to enjoy a chat.

Benefits which can be found from engaging with nature

There are many benefits which can be found from engaging with nature. For example:

Sensory engagement - Bell & Foley (2021) suggest that nature can support the emotional aspects and transition of sight loss through a sensory engagement of the natural environment. Such interactions initiate the wider senses such as sound, touch, smell and even imagination.

Therapeutic Benefits - nature has long been known to provide wider therapeutic benefits for individuals, such as promoting general wellbeing and reducing stress (Kaplan & Kaplan 1989).

Supporting recovery - positive interplay between nature and hospital patients' wellbeing has been recognized by research dating back to the 1980s. For example, Roger S. Ulrich's (1984) study compared the recovery rates of post-surgery hospital patients who had either a window with a view of nature or a view with no nature. The findings indicated that patients observing a natural scene, such as plants, received less negative evaluator comments by nurses in their notes and were less likely to use potent analgesics, as compared to counterparts who observed a brick wall.

Social connectedness - Bell & Foley (2021 p.3) note 'positive emotional transformations amongst walkers as shared sensory experiences evoked infectious affective atmospheres characterised by laughter and companionship.' However, they also argue that many outdoor spaces pose inclusionary challenges. During interviews with 31 adults experiencing sight loss, interviewee experiences were characterised by 'an enhanced sense of embodied vulnerability and fear of injury' (Bell and Foley, 2021, p.3).

The physical, mental and sensory benefits of nature highlight the importance of environmental design and accessibility to nature as key factors of good engagement for individuals with sight loss (Bell and Foley (2021). The project at the Stirling Health and Care Village aims to reflect these aspects to ensure inclusivity and accessibility, as well as raising awareness of the benefits and importance of nature for the wider population.

The Stirling Health and Care Village

The Stirling Health and Care Village, as Elaine described to the group, has a fascinating history where nature plays a central role. In ancient times, for example, the area was a promontory overlooking the sea. Fossilized oyster shells, whale and dolphin bones have been unearthed in the Stirling area. In fact, the relocation of the Stirling Community Hospital in 1928 was praised for its access and close proximity to views of nature (NHS, N.D.).





Figure 2: Extract from the 2nd-edition OS map, revised in 1942. Reproduced by permission of the National Library of Scotland cited in Historic Hospitals (2015).

Since 2011, Acute Services have been based in the NHS Forth Valley Hospital in Larbert, and the Stirling Health and Care Village started to take shape from around 2018. Elaine outlined the many services and resources that can be found nowadays at the Stirling Health and Care Village: "It's got various clinics: Vaccinations, Psychology Services, Mental Health Services for older people, CAMHS, Audiology, it's all in here".

Where the accessible planters and *Blether Bench* now stand, there used to be empty outdoor space. Elaine explained that originally the plan had been to locate an outdoor space at Stirling Health and Care Village, to enable the delivery of the Natural Health Award, a programme developed by NHS Forth Valley Health Promotion Team in partnership with the Scottish Childminding Association. The programme is now run by the Health Improvements Team of the Clackmannanshire and Stirling Health and Social Care Partnership. The Natural Health Award comprises of fifteen activities, based on the Five Ways to Wellbeing (NHS Forth Valley, 2019, pp 31-33):

- Being active;
- Being connected;
- Keep learning;
- Take notice;
- Giving.

The work on improving the outdoor space, including accessibility, has involved the Clackmannanshire and Stirling Health and Social Care Partnership team and around forty local partners. The partnership agreed to develop the grounds to enable patients, staff,



visitors and the local community to utilize the estate, in order to improve health and wellbeing. Funding was secured from the Green Exercise Partnership, and it was agreed that a key principle of any work carried out would take into account accessibility issues. A team of volunteers have designed, implemented and maintained two accessible planters and a *Blether Bench*, which enhances the value of volunteering and gives back to the wider society. Another example of co-creation, Krissy formed a green gym centred around the natural environment, which is open to everyone to support physical and mental wellbeing. Not only does this provide opportunities for physical exercise, but it also helps tackle feelings of loneliness, isolation and anxiety.



Meet The New Accessible Planters

Figure 3: Image of Accessible Planter on Wheels

There are two accessible planters on the site. The first is located outside the out-patient building, to the left is the Minor Injuries new building and to the right, the older property of Stirling Royal Infirmary. The planter is wheelchair accessible and wide enough that users need to move around to access all sides without stretching or straining. It reaches waistheight, is on wheels, and is made from a light natural wood, filled with peat-free compost. In partnership with the Royal Horticultural Society, planting guidance and seeds were provided. For example, selected vegetables and flowers are all edible. Krissie outlined that these include: "lettuce and salad leaves radishes, spring onions and calendula". Each row has a name-sign.





Figure 4: Image of Second Accessible Planter and Pergola

The second accessible planter can be found facing the Bellfield Centre. It has a covered pergola to protect visitors from the elements, with seating built-in to one side. Being much smaller than the first accessible planter, people can reach all its sides at a stretch, while wheelchair access is predominantly focused on the side nearest the buildings. Krissy provided a tour of the plants, all having different textures and distinctive scents - mint, lemon verbena, apple-mint, sage, chives, lavender, rosemary, thyme and chamomile - giving a multi-sensory experience.

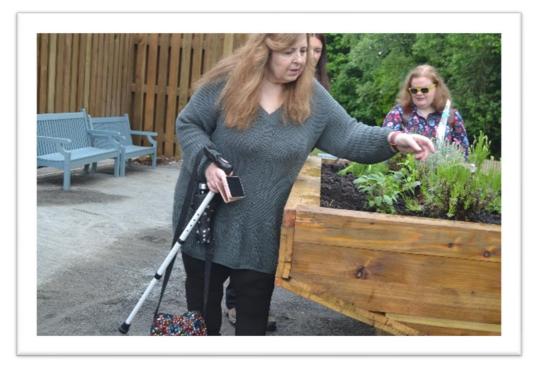


Figure 5: Image of Visitors Engaging with Accessible Planters filled with Herbs



Accessible Planter Reflections

Alex and Kim suggested situating a bench near the planter, so that individuals who are standing can sit down for periods if they need to, making it more convenient to use. Also, Alex commented that for blind or partially sighted individuals: 'It would really nice if at the first planter, there's something on the ground that a long-cane user could find to go over to the *Blether Bench*.' As a wheelchair user, Kim highlighted that the second accessible planter: '...feels a bit close when trying to get your legs all the way under – if I take my feet off my chair-plate, it's okay.'

Meet the Blether Bench



Figure 6: Image of the Blether Bench where visitors can sit and chat

The *Blether Bench* is positioned nearby the accessible planter. The horse-shoe shape accommodates space for a small group of people, including two wheelchair users due to fold-down seating. It was assessed by Stirling Access Panel to ensure a compromise between accessibility and practical use. The perimeter features various textures and plants, such as gravel, succulent plants, insect houses, heather, blue grass, primula, and sunflower seedlings. Young adults from a local college have also helped to paint large pebbles, as part of a bumble-bee hunt.

The Blether Bench Reflections

Kim and Sam tested out the design for their wheelchairs. They reported that space was a touch tight, and that the layout hindered the use of the tabletops, although Sam reflected that it was encouraging to find health services and places considering inclusive outdoor spaces. Often, he remarked, these areas are forgotten and sometimes having a chance to relax and de-stress can help a person's overall wellbeing. Sam pointed out that:

'It was good to see that at last someone has come up with a great idea as I have spent a lot of time going back and forth to hospital's all over the UK and nowhere to sit and chat'.



While discussing varying needs among people in relation to colour-contrasts, the group suggested having bumblebees and ladybirds along the edge of some sections could help distinguish which parts fold or do not fold. Alex pointed out that: 'If you need to know that then people can say but, if somebody is just walking past won't even know. It's about inclusivity without it being in your face or "oh bless, that's for the *Blether Bench*".' A local Men's Shed is producing signs for the *Blether Bench*. This will have translations of '*Blether Bench*' in other languages. Alex and I, being both registered blind, commented that there could be braille labelling using decorative dots, to enhance inclusivity for blind people which is being implemented. Overall, it was an enjoyable day out, allowing the ISPA group members to chat and laugh in a relaxed environment. Outdoor areas often embody exclusion or hazards, whereas the ISPA group were secure, safe and confident to explore their natural surroundings in the outdoor hospital space. The ISPA group discovered that improved/enhanced inclusion can be achieved by organisations through, often, simple actions. For example:

- Organizational partnerships can provide access to resources and valuable expertise;
- A multi-sensory approach increases inclusion and enriches the general experiences of everybody;
- Inclusion and co-production is just as important during the design and development of resources, as well as surrounding the use of outputs or outcomes.

Inclusion needs to be recognized as a long-term goal and be better supported by national and local funding streams and partnerships. Bell and Foley (2021) remind us that 'Critical disability studies encourage us "to start with disability but never end with it".' (Bell and Foley, 2021, p 7) The project at the Stirling Health and Care Village draws upon enhancing the non-human experiences of nature and inclusive design practices to develop its outdoor spaces, encouraging wellbeing and ensuring inclusivity for a wider audience.



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Intersectional Stigma of Place-Based Ageing (ISPA) Project

The ISPA project is an ambitious, 5-year participatory and mixed method study that will explore and understand how the stigma attached to where people live can intersect with experiences of disability and ageing. This will provide nuanced insights into the structures and systems that drive exclusion and allow us to tackle the inequalities experienced by older disabled adults. Do visit https://www.youtube.com/@ispaproject for an audio and visual overview.

We aim to develop interventions related to home and environmental modifications that encourage interventions for inclusive approaches within housing, health and social care delivery. This in turn supports people to age well within homes and communities across England, Scotland, and Wales. The project is funded by the Economic and Social Research Council (Ref: ES/W012677/1) and runs from September 2022 to September 2027.



The Intersectional Stigma of Place-Based Ageing (ISPA) Project is a collaboration between the University of Stirling and the University of St Andrews, Newcastle University and University of Bristol. We are also partnered with the Housing Learning and Improvement Network (Housing LIN) and Scottish Federation of Housing Associations (SFHA).

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