A Community Needs Assessment for a Camp Activity Center for People with Disabilities

Jackie L. Main  
*Grand Valley State University*, mainj@mail.gvsu.edu

Melissa A. Klenk  
*Grand Valley State University*, ostrowme@mail.gvsu.edu

Samantha N. VanDriel  
*Grand Valley State University*, vandrisa@mail.gvsu.edu

Follow this and additional works at: https://scholarworks.gvsu.edu/ot_community_based

Part of the Occupational Therapy Commons

Recommended Citation
https://scholarworks.gvsu.edu/ot_community_based/3

This Open Access is brought to you for free and open access by the Occupational Therapy Graduate Research at ScholarWorks@GVSU. It has been accepted for inclusion in Community Based by an authorized administrator of ScholarWorks@GVSU. For more information, please contact scholarworks@gvsu.edu.
A Community Needs Assessment for a Camp Activity Center for People with Disabilities

Jackie Main, Melissa Klenk, & Samantha VanDriel

Grand Valley State University
Abstract

This paper describes a needs assessment of a camp for individuals with disabilities. Utilizing a combination of focus groups and interviews, the needs assessment explores the benefits of additional space and services of an activity center and sensory room, the desire for additional equipment, the value of occupational therapy services, and the potential benefit these additions may have for the surrounding populations within the community. The participants include administrative staff, counselors, campers, and other key informants who maintain knowledge of the topics pertaining to the camp. The results revealed three major themes including marketing, staffing, and indoor space. It was determined through the focus groups and interviews that additional space is needed for indoor activities at Indian Trails Camp. An activity center would be beneficial for multiple reasons; including an improvement to the overall facility and the programs it can offer to the current population, as well as the surrounding community. The implications of the findings for building the activity and sensory room, adding equipment, and hiring an occupational therapist are discussed.
A Community Needs Assessment for a Camp Activity Center for People with Disabilities

Research has demonstrated that camps for individuals with disabilities provide opportunities for interacting with other people, learning new independent living skills, discovering recreational activities, and increasing self-esteem (Goodwin & Staples, 2005; Michalski, Mishna, Worthington, & Cummings 2003). A facility in West Michigan that strives to obtain these benefits is Indian Trails Camp (ITC). ITC is committed to offering recreational camping and year-round skill building programs for children and adults with physical and developmental disabilities (Indian Trails Camp, 2014). The camp’s mission is to “provide individuals with disabilities an enriched life experience through recreation, advocacy and meaningful relationships” (Indian Trails Camp, 2014). ITC plans to build an activity center, which will include a sensory room, life skills center, and a gymnasium to help expand and improve the services currently provided to individuals with disabilities within the West Michigan community (K. Host, personal communication).

Review of Literature

Benefits of Recreation

Individuals with disabilities are often excluded from participating in leisure and recreational activities within their communities (Solish, Perry, & Minnes, 2010). There is a need to increase the accessibility of recreational activities for individuals with disabilities (Bedini, 2000; Rimmer, 2005). One way to achieve increased recreational accessibility is by attending summer camp. Summer camp programs for children and adolescents with disabilities create an environment where campers can have fun, participate in outdoor leisure activities, interact with other youth who have disabilities, be a respected member of a community, discover recreational activities that are available to them, and gain independence (Dawson & Liddicoat, 2009;

In addition to the benefits of summer camp programs for children and adolescents, research has shown that leisure and physical activities are also important for adults with disabilities (Lante, Walkley, Gamble, & Vassos, 2011; Specht, King, Brown, & Foris, 2002). Involvement in leisure activity has been found to provide individuals with congenital disabilities benefits such as pleasure, improved self-concept, and enhanced social relationships (Specht, King, Brown, & Foris, 2002). Outdoor sporting activities have also been shown to have behavioral and psychosocial benefits for individuals with various disabilities (Kishore and Nagar, 2008; Taylor & McGruder, 1996).

Skill Building

There is evidence to support the wide array of skill building activities for individuals with a variety of disabilities (Bazzano et al., 2009; Cotugno, 2009; Fox, Holtz, & Moist, 2009; Lante, Walkley, Gamble, & Vassos, 2011; Stickley, Crosbie, & Hui, 2012). These activities can be recreational and involve gardening (Park & VanLeit, 2012), acting (Stickley, Crosbie, & Hui, 2012), and exercising (Bazzano et al., 2009; Lante, Walkley, Gamble, & Vassos, 2011); they can be more clinically focused and involve group therapy to improve social skills and behavioral development (Cotugno, 2009; Fox, Holtz, & Moist, 2009) or they can be directed toward vocational skill building (Hendricks, 2010). Skill building can result in improved confidence and self-esteem, social interaction, skill development, enjoyment in activities, higher levels of productive engagement, positive affect and lower levels of non-engagement (Stickley, Crosbie, & Hui, 2012).
Currently, skill building programs are being administered at ITC with minimal resources including limited indoor space, equipment, and staff training (K. Host, personal communication, October 29, 2013). Due to the large amount of skill building activities available and the diverse population of individuals utilizing the services, a needs assessment will determine the types of activities that will be beneficial for ITC and what resources/staff will be needed to help these programs succeed in order to be effective.

**Sensory Integration**

Sensory integration is the neurological process that organizes sensations from one’s own body and the environment and makes effective use of the body within the environment possible (Ayres, 1989). Sensory integration (SI) techniques implemented by occupational therapists (OTs) have resulted in improved fine motor skills, motor planning, sequencing abilities, mastery play, and engagement for children with autism spectrum disorder (ASD) (Case-Smith & Bryan, 1999; Humphries et al., 1992; Wuang, Wang, Huang, & Su, 2009). Sensorimotor activities include the use of equipment such as slides, beanbag chairs, rocking equipment, and a sensory table to provide vestibular, tactile, and proprioceptive input (Case-Smith & Bryan, 1999). Licensed OTs are uniquely qualified to use sensory integration interventions (Case-Smith & Bryan, 1999). OTs provide appropriate assessments to determine the proper needs of a child, evaluate the attainment of family developed goals, and determine the interventions that will most likely result in significant improvement (Candler, 2003).

**Sensory Rooms**

There are three types of sensory rooms: sensory integration, sensory modulation, and Snoezelen (Champagne & Stromberg, 2004). OTs using specific sensory integration techniques use sensory integration rooms. Sensory modulation rooms are used for the purposes of
NEEDS ASSESSMENT FOR ITC

prevention and de-escalation of crises (Champagne & Stromberg, 2004). Snoezelen is employed to promote relaxation and enjoyment, while inhibiting problematic and maladaptive behaviors (Kaplan, Clopton, Khazanova, & Kitaichik, 2007; McKee, Harris, Rice & Silk, 2006). Positive outcomes reported from use of a Snoezelen room include: extinction of challenging behaviors, initiation of actions, spontaneous movements around the room without being directed, interaction with increased purpose, increased tolerance of proprioceptive input applied by an OT, and selection of objects to touch or explore (Kaplan, Clopton, Khazanova, & Kitaichik, 2007).

Purpose

The proposed activity center at ITC is being designed to include amenities such as a gymnasium, stage, life skills center, and a sensory room (Indian Trails Camp, 2014). There are many recreational programs available for those with disabilities in West Michigan, including Mary Free Bed (MFB) Wheelchair and Adaptive Sports, YMCA fitness classes and respite weekends, No More Sidelines sporting events, Special Olympics sports programs, and Hope Network support groups (Hope Network, n.d.; Mary Free Bed Rehabilitation Hospital, 2012; No More Sidelines, n.d.; Special Olympics, 2014.; The YMCA, n.d.). However, adequate indoor space is limited for these programs. The activity center at ITC may provide the appropriate amount of space and accommodations for these programs (M. Vespa, personal communication, October 9, 2014; T. Beck, personal communication, May 23, 2014).

The purpose of this study was to a) conduct a needs assessment for an activity center and sensory room at ITC to meet the needs of current campers and consumers, b) determine whether or not there are benefits of having an OT to provide services at the camp, and c) determine other groups and organizations that may benefit from utilizing the activity center and sensory room.
Methods

A needs assessment was performed to discover what space accommodations, equipment, and staff will most likely benefit the campers at ITC. Student investigators utilized focus groups and interviews to determine the need for a sensory room and activity center at ITC, and the potential benefit these facilities may have for the surrounding community. The student investigators chose to use focus groups and interviews because they provide a variety of advantages over other qualitative measures. The interviews were used for those who had conflicting schedules and were unable to attend the focus groups. Focus groups and interviews provide a structure that allows people to discuss their views in a conversational manner. Specifically, focus groups offer a wide variety of perspectives from many individuals that can be gathered in a short period of time. Also, special equipment is not required, and conducting the focus group is fairly easy (Maguire, 2003). These methods of gleaning data are ideal for the early stages of program design (Bruseberg & McDonagh, 2003). For topics that are more general or ambiguous, focus groups can be an appropriate means to promote an individual’s awareness of their own ideas or preferences pertaining to such topics (Bruseberg & McDonagh, 2003).

Theoretical Model

The needs assessment study questions were developed in consideration of the person, the environment, and the occupations. The Person, Environment, Occupation (PEO) Model offers a base to develop the needs assessment study questions (Law et al., 1996). Law et al. (1996) comments on a shift in the “focus of [occupational therapy] practice to consider the interest and needs of the client as paramount, and with recognizing the environment as an under-used resource for interventions.”
Participant Recruitment and Administration

For purposes of this project, three individual interviews and three focus groups were conducted. The student investigators followed the recommended guidelines of Krueger and Casey (2000) for implementation of the focus groups. Each of the focus groups followed the time allotment of 45-90 minutes, included 5 to 8 participants, and followed a multiple category design that allowed student investigators to make comparisons between different groups of people. Student investigators used purposive sampling to collect information from four categories of participants including administrative staff, camp counselors, campers, and key informants. The focus groups included a total of 18 participants; five participants were in the administrative staff focus group, six were in the group of counselors, and seven were in the group of campers. Involvement was voluntary and participants had the opportunity to withdraw at any time. Participants were given an assigned letter to identify themselves during the focus group conversation. All data was kept confidential and participants' comments were not attached to any personal identifiers. Data collection occurred at ITC, during the summer of 2014, when camp and programs were in session.

The student investigators had three distinct roles during each focus group, alternating roles for subsequent focus groups. These roles included greeter, moderator, and assistant moderator. The moderators followed a script for specific focus group questions, and utilized probing questions as deemed necessary (Moffitt, 2011). Interviews and focus groups were recorded by audiotape, which allowed student investigators to return to the data for transcription.

Data Analysis

Student investigators performed a tape-based transcript (Krueger & Casey, 2000). The data from each focus group and interview were coded separately by each investigator, using note
cards to sort the key words/phrases into categorical piles. Once a set list of categories were chosen, all the data belonging to each category were grouped together and analyzed to find common themes (Creswell, 2014; Tesch, 1990). The student investigators utilized multiple triangulation including both data and investigator triangulation (Polit & Beck, 2004). Inclusion of a variety of participants in the focus groups and interviews demonstrates data triangulation.

For investigator triangulation, each student investigator individually coded each transcript by underlining key words/phrases, summarizing key points of each section, and copying the key words/phrases on notecards to be sorted and combined to find themes. Together, student investigators then discussed their individual findings and agreed on over-arching themes.

**Trustworthiness**

The implementation of this research design is supported in the literature, thus enhancing credibility. The credibility of the needs assessment analysis was enhanced by using inter-coder agreement to cross-check codes, and coders felt they were in agreement 80% or more of the time for the same passage of text (Gibbs, 2007). As mentioned, the student investigators used multiple triangulation to increase credibility of findings. For confirmability, the researchers maintained an audit trail including raw data, data reduction and analysis products, and data reconstruction and synthesis products (Lincoln & Guba, 1985). By using a flexible approach throughout the focus groups and interviews and selecting a purposive sample of participants in the camp, the researchers achieved dependability. Use of interviewing techniques allowed for redirection in the case of misinterpretations of questions by participants and limited the potential for distortions in information (Seidman, 2006). This research is limited in its transferability due to the specificity of the needs assessment to the population at Indian Trails Camp.
Findings

Staffing

One of the themes determined by the data analysis was staffing. Several participants described specific qualifications for an appropriate staff member and raised concerns related to budgeting for additional staff.

**Qualifications.** The data analysis revealed that many participants thought hiring a full-time OT would be a valuable resource and a good candidate to run the activity center and/or sensory room. Various participants, in support of this idea, made statements such as, “[an OT] could make it very therapeutic without the campers knowing;” “ideally they would hire an OT for it,” and “[it would be] beneficial to have someone who has OT experience.” One participant spoke to the importance of collaboration with resource/contract OTs reporting,

> The OTs that come up with the plans work for [Community Mental Health], so they are not here on site. And they are very helpful, but […] it would be helpful to have an OT here in case we had questions […] if the plan is not working out very well, if they had any suggestions to change it.

Eight out of nine (89%) individuals throughout the focus groups and interviews who answered the question “how valuable would it be to have an OT on staff on a scale from 1 to 10” said a “10.” However, there was also mention of other qualified professionals and specific characteristics of staff members that would be appropriate to fill the position.

Other appropriate personnel included a recreational therapist, physical therapist (PT), and maintenance staff. Several preferable characteristics of staff included compassion, a kind disposition, background in working with individuals with disabilities, knowledge about gymnasiums, and self-directedness. When talking about staff, one participant stated, “as far as
characteristics, someone who would want to and have that personality to serve children and adults, so all ages, and no matter what their abilities are.” Despite the common consensus to hire new staff concerns were raised related to the affordability of additional staff.

**Budget concerns.** A few participants voiced concerns regarding the availability of sufficient funding in the current budget to support new staff, while other individuals recognized a definite need. One participant stated, “I think we could definitely support an OT.” A possible budget solution was mentioned by another participant who reported, “I think [for] the summer [only] they could certainly hire an OT.” However, one participant stated, “A fulltime OT at ITC, I don’t think is necessary or even budget feasible.” Similarly, another participant mentioned, “[it is] not going to be cost-effective to hire someone to run just the sensory room.” It was also mentioned that ITC currently does not bill insurance companies and that this would be an issue for hiring a fulltime OT. One participant stated, “[the] financial administrator does not like working with private insurance.”

**Indoor Space**

The need for indoor space was another main theme identified among participants in the study. This included the importance and need for sensory space. Participants from focus groups and individual interviews identified the need for indoor space to improve the facility, resolve capacity issues and provide accommodations during inclement weather.

**Improvement to the facility.** Many participants emphasized that the addition of indoor space would be an improvement to ITC for several reasons, including greater accessibility, individualized programming, and additional activities. Twelve out of 12 (100%) individuals rated the value of having an activity center at ITC as between eight and ten out of ten.
Accessibility. Many areas at the camp are difficult to access by consumers as they must traverse challenging terrain to participate in certain camp activities. One participant made this clear by stating, “I think it really has to be accessible because I know there is a lot of spots here that still are a little hard to maneuver into.” Another participant stated, “[the] laundry house right now is literally awful […] it’s not convenient and campers can’t go in there and use it. It’s not accessible what-so-ever.” Other participants referred to the need for a more accessible indoor stage stating, “There are spaces [for performing arts] but the stage isn’t quite so high. So participants who are using wheelchairs cannot see all the time.”

Individualized programs. Several different types of individualized programs were suggested as being possible with the addition of an indoor space. A larger indoor area for the consumers to utilize would allow for greater access to various skill building activities. One participant stated, “Laundry is a huge activity for an individual who is not able to do those things such as practicing folding towels […]” Another participant stated, “[I think it is valuable] in regards to life skills having a mock kitchen […] having clients doing skill building stuff and things in an industrial kitchen isn’t really real-world.”

Activities to offer. In addition to creating opportunities for supplemental programming, participants suggested activities that could be implemented within the activity center would include indoor basketball, table games, and weight lifting. One participant stated,  

We have one camper that likes to go out and pick weeds for hours […] if we had some weights […] or resistive type things he could do […], he would love being able to burn off energy without having to run around.

Capacity Issues. The current indoor space at ITC is limited. Many of the current programs take place outside with no over-head shelter, or in a covered pavilion. When it is
necessary for programming to take place indoors campers are typically confined to their cabins, must utilize the small recreational area, or conduct programming in the dining hall. The limited space in each of these indoor areas makes gathering as a large group significantly more challenging. The dining hall is the largest indoor area but, as one participant stated, “[they are] forced to use the dining room and turn it into a multi-use facility and that just gets crazy when you are trying to do programming and meals are coming in at the same time.”

**Weather.** Camp activities continue through rain or shine. Since ITC is located in west Michigan, this poses some difficulties when the weather is not ideal. Indoor space would allow ITC to offer year-round programming that could be utilized by consumers in extremes of weather, such as rain, snow, heat and humidity. One participant stated, “[with] the amount of rain, indoor space is needed and pretty key.” Many of the programs suffer when the weather is bad and this does not allow for as much participation, which may limit the consumer’s experience at camp. One participant stated, “We have a lot of individuals that have electric wheelchairs and can’t just be outside with those, and wouldn’t want to be anyways.”

**Sensory room.** Within the space, it was identified that incorporation of an area for a sensory room would be beneficial for a large proportion of the population at ITC. Many participants reported that individuals need a space to deescalate and integrate their senses via exposure to different sensory elements, to allow more full participation in camp and skill building activities. One participant stated, “[the campers] want to explore and have fun, and because of different sensory issues or elements that makes it hard” and “the sensory room would help them break down some of those barriers to allow them to explore camp and to be a kid.”

Participants provided a series of statements in regards to facilitation of a sensory room, including who should supervise the space. Suggested individuals included an OT, PT, current
staff, or counselors following basic training in sensory integration. Participants also provided several suggestions for equipment recommendations to be included in the sensory room such as, adjustable lighting, therapy balls, swings, scents, and sand and water tables.

**Marketing**

There were three main concerns regarding the theme of marketing: populations, awareness, and collaboration. Although the three subthemes are separately identified here, they were clearly interconnected during the focus group dialogue.

**Populations.** Throughout this needs assessment, many groups of individuals were identified as currently benefitting from the programs ITC offers. It was reported that many of the current programs could also benefit a variety of additional participants within the community, who are currently unaware of the services being offered at ITC. One focus group participant stated, “It will be good for people on the outside to know that there is space for them to come and participate.”

**Awareness.** The need for increasing awareness of services currently offered at ITC, and what the new additions will bring, was also identified. Several individuals mentioned some of the unique qualities and opportunities that ITC offers for individuals with disabilities that are not typically offered elsewhere. One participant stated, “In a lot of ways, it is unique even just given the environment it is, it’s just kind of naturally therapeutic because of the wooded and nature setting.” The ability for consumers to fully engage in activities was clearly expressed by many participants. One individual stated, “We have a camper this week who is in a chair, but can get into the pool and be by himself and not have to worry about anyone pushing him […].”

The social component of camp was clearly expressed by individuals at every level of involvement. One participant mentioned, “It’s a place they can come and see their friends again
from past summers.” It was also mentioned that the activity center being marketed to the public would open opportunities for gaining awareness regarding individuals with disabilities. One participant presented the idea that the consumers in the skill building program could run the activity center on open house days for the community.

Collaboration. The provision of opportunities to socialize with each other, as well as community members, seems to be a prominent factor in the creation of the new activity center. One way of promoting this is through collaboration with community partners. Some of the options mentioned by camp staff include “being able to partner with the Special Olympics or other places that are doing wheelchair basketball that don’t have places other than the Y[MCA] to go.” Some other places mentioned by a community member included, “The MS Society […], Parkinson’s programming […], and the immediate surrounding community, including school systems and manufacturing companies.” Several camp counselors mentioned the new activity center as being an opportunity for growth in this area, “I think we are highly regarded in the Midwest region, but also there are so many people in the Grand Rapids area that have no clue about this place. I think that would get our name out there more.”

Discussion

It was determined through the focus groups and interviews that additional space is needed for indoor activities at ITC. An activity center would be beneficial for multiple reasons, such as being an improvement to the overall facility and the programs it can offer. The need for having a year-round place to conduct meaningful, occupation-based activities for campers and consumers, especially during inclement weather was also mentioned. Suggested improvements include adding an accessible stage for viewing performances, a gym space for wheelchair basketball and tabletop games, and a weight room for lifting weights to work on physical fitness while at camp.
Participating in theatre activities has been shown to increase confidence and enjoyment in the activity for individuals with learning disabilities (Stickley, Crosbie, & Hui, 2012). Additionally, exercise and physical activity can decrease the risk of early cognitive decline, improve mood, and increase positive well-being (Landi et al., 2010).

A more conducive environment for training individuals in the skill building program was another area of interest. Currently, the skill building program is being displaced by the summer camp, and they are traveling to a space outside of ITC, which is not an efficient use of time or money. Ma, Trombly, & Robinson-Podolski (1999) supported the ecological theory of using the natural environment rather than simulated tasks for individuals to learn a new skill. Actual kitchen space and/or laundry room for these campers to use would allow them to work on life skills in a more effective manner.

The need for a sensory room for campers with developmental and sensory processing needs was evident. The sensory room would allow for campers and consumers to regulate their sensory systems before activities and programs begin, and provide an opportunity to de-escalate when environmental stimuli becomes overwhelming (Champagne & Stromberg, 2004). In addition to the sensory space, the need for proper equipment was a major concern. The current sensory room was identified as being “unsafe” and in need of updating.

Although many participants provided ideas of what they believe a sensory room was, how it should be used, and who should run it, there were some misconceptions regarding sensory rooms that should be noted. First, the idea that a sensory room should be incorporated throughout the entire activity center was concerning, due to research suggesting the need of a separate space in order for therapeutic use of the equipment (Case-Smith & Bryan, 1999). Second, several participants made statements regarding what a sensory room was, such as “a sauna,”
demonstrating a misunderstanding of the definition. Third, several participants felt that anyone could supervise a sensory room, as long as he or she had “a day of training.” This was a concern due to the literature stating that a sensory room requires a qualified specialist to utilize it in a therapeutic manner (Case-Smith & Bryan, 1999). Case-Smith and Bryan (1999) also stated that an OT would be the best professional to facilitate the use of a sensory room, because of the knowledge he or she has on the sensory system in relation to individuals with disabilities.

Maintaining awareness of the environment that a child with autism is entering is instrumental in ensuring his or her safety and preventing over-stimulation. Research from Schaaf, Toth-Cohen, Johnson, Outten, & Benevides (2011) found that parents of children with autism reported the need for constant monitoring of their child within an environment outside of their home. Researchers found that parents “could rarely divert their attention from the child, because of the child’s intense needs for sensory stimuli, as well as adverse reactions to other sensory stimuli” (p. 383). Therefore, it is necessary to have an understanding of the equipment in the sensory room, as well as how the equipment may be used to influence the child’s sensory system. In order to use a sensory integration approach, Parham et al. (2011) cite the need for a therapist to be certified in the SI/SIPT approach. They also state the need for consideration of the following for the physical environment (p.135):

- Adequate space for flow of vigorous physical activity.
- Flexible arrangement of equipment and materials for rapid change of the intervention environment.
- No less than 3 hooks for hanging suspended equipment, minimal distance between hooks 2.5 to 3 ft.
- One or more rotational devices attached to ceiling support to allow 360 of rotation.
- Quiet space (e.g., tent, adjacent room, or partially enclosed area).
- One or more sets of bungee cords for suspended equipment.
- Mats, cushions, pillows (available to be used to pad floor underneath all suspended equipment during intervention).
- Equipment adjustable to child’s size.
- Therapist monitors accessible equipment for safe use.
- Unused equipment stored or placed so children cannot fall or trip.
- Documentation of routine monitoring of equipment safety (e.g., ropes and bungee cords not frayed).
- Variety of equipment available (e.g., bouncing equipment such as trampoline; rubber strips or ropes for pulling; therapy balls; swings [platform swing, square platform, glider swing, frog swing, flexion disc, bolster swing, tire swing, net swing]; scooter and ramp; weighted objects such as balls or bean bags in a variety of sizes; inner tubes; spandex fabric; crash pillow; ball pit; vibrating toys, massagers, tactile material; visual targets; ramps; climbing equipment; barrel for rolling; props to support engagement in play, e.g., dress-up clothes, stuffed animals, and dolls; materials for practicing daily living skills, e.g., school supplies, clothing, and shoes with laces).

Many individuals identified the need for supplemental staff members. The facilities at ITC were identified by some participants as being “run-down” and therefore, the need for hiring of additional maintenance staff was a priority. There was also an identified need for having supplemental personnel to supervise the activity center and sensory room. Many ideas were put forth regarding how this problem could be solved. Based on current literature and research the student investigators propose the idea of hiring an OT to perform this role, because of his or her
unique knowledge and skill set. The OT could also perform the additional role of marketing to reduce budgetary expenditures.

One chief concern was the current budget and how it would not support the hiring of additional staff. Currently, ITC is not billing insurance companies and is contracting OT services. This is a hindrance for ITC being able to hire full-time healthcare professionals such as OTs, PTs, and recreational therapists since campers may not be able to afford out-of-pocket payments for services. One participant suggested examining the current budget and considering billing insurance companies for therapy services as a solution for hiring full-time therapy staff. If the OT is not comfortable with billing insurance companies, it may also be beneficial to contract a business to perform the billing for therapy services.

The overall sustainability of the new activity center was another concern due to budgetary restraints. An option to increase the current budget was to market the facilities to other populations in the community that may not be aware of what ITC offers, or that the facility even exists. Marketing to these other programs could be a funding source for ITC via rental income to support their program development in the new activity center. Several participants brought up the idea of marketing the camp to other health organizations, programs for individuals with disabilities, companies, schools, and families of individuals with disabilities in the community. The need for collaboration was evident due to the decrease in available gym space for the adaptive sports population noted by Mary Vespa and Theresa Beck (M. Vespa, personal communication, October 9, 2014; T. Beck, personal communication, May 23, 2014).

For MFB wheelchair and adaptive sports, there have been several barriers in accessing gym time. According to Mary Vespa, the MFB adaptive sports director, various Grand Rapids organizations have denied access to the adaptive sports teams. Several reasons were provided
including lack of education on wheelchair tires; the belief that organizations make more money from other programs; the belief that other programs serve more people; and standing contracts with other programs that limit weekend space. Unfortunately, some places just say “no” (M. Vespa, personal communication, October 9, 2014). Although MFB is building its own YMCA, they will still need additional space for their sports teams, especially in the evenings, which works well with ITC campers’ and consumers’ scheduled times during the day (M. Vespa, personal communication, October 9, 2014). “Very rarely do we see programs that are self-contained; there is a lot of collaboration, and a lot of it is due to budget cuts. One program can’t do everything anymore. It is about collaboration and sharing facilities.” (T. Beck, personal communication, May 23, 2014).

Some ideas for collaborating included holding community events, as well as using the activity center as an open gym for individuals of all ability levels due to its universal design. Having one facility that is accessible for all individuals is a cost effective way to promote full community participation (Steinfeld & Smith, 2012). Research has found that universal design improves accessibility to buildings for all users and improves individual's quality of life (Meyers & Anderson, 2000). This idea of “mixing” individuals with and without disabilities was brought up by several participants to raise awareness to people in the community that individuals with disabilities should be afforded the same opportunities as everyone else, and be an integral part of society. Although integrating individuals with and without disabilities is beneficial, the overall effects on the campers must be considered. Benefits of having a segregated camp for only individuals with disabilities has been found to increase self-esteem, independence, and learning opportunities (Goodwin & Staples, 2005).
An important consideration for this study was the inclusion of the campers in the needs assessment. Pollard & Sakellariou (2008) found that stakeholders with disabilities often are not included in the decision making process for community development programs. It is important for them to be actively participating in the planning process, because this is highly correlated with empowerment. It is important to not only recognize these opinions, but to make them part of the design and implementation of the new activity center. The local individual’s values, attitudes, and needs should be taken into account and incorporated into the design in order to avoid imposing personal ideas and values of only executives and moneylenders (Pollard & Sakellariou, 2008). Another strength of this study was the use of interviews. Interviewing does have the potential to affect the data gathering process; however, it also allows for a flexible and adaptable strategy for gathering information, and responding to variable situations, with skill and understanding (Seidman, 2006).

**Implications for Occupational Therapy**

These results coincide with the PEO theoretical model. The idea that a space, or environment, can impact the occupational performance of an individual is key to the model. Another implication for occupational therapy is the idea that a sensory integration and/or modulation room, is something that needs to be facilitated by a skilled OT (Case-Smith & Bryan, 1999). OTs are needed to run a sensory room for the safety of participants using the space and equipment (Schaaf et al., 2011). OTs have a clear role in developing the skills of individuals with disabilities in order to enable them to participate more fully in everyday life and in the community. The lack of a full time OT to work with the skill building and community living support population is a concern, and should be considered with the development of a life skills center in the new activity center. An OT will be able to adapt and modify activities, such as
cooking and laundry in order to help the consumers perform these tasks independently. OTs are also experts at grading activities; considering the need to modify activities to promote full participation of each consumer is necessary due to the variability of each individual’s needs.

**Limitations**

There were some limitations to this study that may have hindered its trustworthiness. One limitation was that group polarization occurred in one of the focus groups; when one participant provided an answer, the remainder of participants agreed with that individual and did not provide any additional perspectives. Another limitation was the inclusion of interviews along with focus groups, which may have created a greater bias toward the interviewees’ responses during data analysis. In addition, the student investigators were not proficient in performing needs assessments. The lack of proficiency may have impeded further questioning during focus groups, which could have elicited deeper discussion among participants.

Considerations for future research include incorporating more community members into a focus group who are potential stakeholders in the building of a new facility. Additionally, more research on space requirements and equipment for sensory rooms would be beneficial to community organizations that would like to incorporate these spaces into their programs. An OT was found valuable by a majority of participants in this study, and therefore, an OT's role in camp settings for individuals with disabilities, should be further considered.

**Conclusion**

The overall findings of this study indicate that there is a need for an activity center and sensory room at ITC in West Michigan. The new building would allow increased space for indoor programming and provide facilities that are more accessible. There is a need for additional staffing, and an OT was cited as being a beneficial addition to the current staff by the
participants of the study, as well as supported in research as the best professional to facilitate the use of a sensory room. There is also a need to market the facility in order to increase awareness of ITC and to collaborate with other community partners who are providing services to individuals with disabilities.
References


Mary Freebed Rehabilitation Hospital. (2012). *Mary free bed wheelchair and adaptive sports*. 
Retrieved from http://www.maryfreebed.com/spor


