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# Increasing Accessibility of a Children's Summer Camp

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The Americans with Disabilities Act was initially passed in 1990 with an aim of creating accessible public spaces for all individuals with disabilities and impairments. Since that time, research on accessibility for children with physical impairments has largely been focused on access to homes and schools. It is clear that a lack of accessibility impacts children with physical impairments in other environments by reducing social participation and interaction with peers. There is minimal research on accessibility of children's extracurricular spaces, such as summer camps, despite studies showing the importance of children with physical impairments participating in social extracurricular activities. This project assessed the ADA compliance and accessibility of a children's summer camp with a focus on determining where accessibility could be improved to facilitate participation for all children.

## **Literature Review**

Children with physical impairments- such as medical conditions or needs like utilizing mobility aides such as a wheelchair - often report experiencing accessibility barriers that prevent them from participating in desired activities (Stephens et al., 2017; United States Department of Criminal Justice, Civil Rights Division, n.d.; Wright et al., 2019). There are many different physical impairments that may influence a child's ability to participate, and this paper specifically focuses on impairments that cause challenges in navigating the physical environment, regardless of the use of mobility aides. These barriers to accessibility can range from physical inaccessibility of spaces to the personal fear of social perception because of their impairment, but all negatively impact this population's ability to fully participate in meaningful occupations (Willis et al., 2017). The benefits of participation and play in social activities for children of all ages and spectrums has been heavily researched and documented, and both are especially important for children who experience physical difficulties and impairments (Sterman

et al., 2019). Participation is crucial for children's physical, mental, and social development, whether they experience physical impairment or not, but it is especially influential on the development of social skills and the creation of friendships for children with physical impairments, as well as creating a positive impact of social inclusion- all areas that have been shown to often be lacking for children with physical impairments (Willis et al., 2017). Since participation is so beneficial for children with physical impairments, it is vital to identify and rectify potential barriers to increase their participation in meaningful and desired activities (Edwards et al., 2021; Wright et al., 2019).

# **Factors that Impact Participation**

There has been an abundance of research about barriers that prevent children with physical impairments from fully participating or even attempting to participate in meaningful activities and occupations (Horton, 2017). Whether physical, societal, or economical, these barriers cause negative impacts when children with physical impairments are unable to participate in chosen activities at the level that they desire (Stephens et al., 2017). Children with physical impairments often feel socially isolated or excluded because of their disability, and the inability to participate in activities can compound upon these feelings and make the social isolation worse (Willis et al., 2017). Four main barriers are discussed in the following sections: physical barriers that limit accessibility, social perception and stereotypes of those with physical impairments, supports for children with physical impairments and their family members, and parental influence.

### **Physical Barriers Preventing Participation**

The type of barrier that is often focused on for children with physical impairments is a physical barrier. Physical barriers can include a multitude of inaccessible structures and buildings, from the presence of architecture that physically prevents entrance for children with physical impairments (even with the use of adaptive and assistive equipment) to the absence of ADA accessible modifications that allow true access for all children (Stephens et al., 2017). Even when ADA accessibility recommendations and requirements are technically met for a setting to qualify as accessible for those who experience physical impairments, renovations and structures often still limit movement and participation in activities (Church & Marston, 2003). This also includes physical barriers such as transportation systems that prevent children with physical impairments from traveling to the space where the activity is being held; public transportation may not have accessible entrances or seating or be easily available for a child to access and use. In addition, transportation from parents or caregivers may be inaccessible due to employment scheduling or lack of time to transport the child to extracurricular activities that they would otherwise be interested in (Burns & Graefe, 2007).

## Social Perception and Stigma

Social perception and stereotyping also often contribute to lack of participation in occupations for children who experience physical impairments (Burns & Graefe, 2007). Many children with impairments and their families are hesitant to participate in social activities, especially activities that are integrated with typically developing children, because of a fear of stigma or misunderstanding surrounding disabilities and impairments from the general public (Horton, 2017). This fear can be that the child will be excluded by typically developing peers, which is especially devastating if the child already experiences exclusion or a feeling of "otherness" at school or in everyday life. Parents and children might also worry about potential

reactions, such as staring, gasps, or intrusive questions, that a child with physical impairments would have to face during participation or play (Horton, 2017). Additionally, experiencing accessibility barriers also creates barriers toward social inclusion and the creation of friendships for children with physical impairments, as it can be difficult to focus on the development of lasting friendships while also navigating problematic activities and settings (Stephens et al., 2017). Another issue that may arise is when an activity may be physically accessible but not socially inclusive; if the child is able to be physically present but is not socially integrated due to the actions of leaders or other peers, their participation experience is still limited (Dawson et al., 2018). There is also a stereotype that surrounds participation particularly for outdoor activities, that those who experience physical impairments do not or cannot enjoy outdoor activities, which can become another barrier to the child if program directors believe it is not important for the program to be accessible because of this reason (Burns & Graefe, 2007).

### Supports for Children and their Families

A topic that is often overlooked but is crucial to include when discussing accessibility and inclusivity barriers for children with physical impairments is the amount and accessibility of resources available to these children and their families. Parents and caregivers for children with physical impairments often struggle with having the availability of resources, such as financial, temporal, or emotional resources, that allow them to assist their children in full participation in social and extracurricular activities (Burns & Graefe, 2007).

Financial resources may be strained or unavailable for the families of children who experience physical impairments, since caring for a child with a physical condition or impairment is typically accompanied by high medical costs, as well as appointments and procedures that may not always be covered by insurance, leading to high financial burden for the child's caregiver(s) (Wright et al., 2019). Because of this financial responsibility, the caregiver may not be able to afford the cost of participatory fees, activity supplies, or adaptive equipment for the child to be involved in a particular activity (Sterman et al., 2019). In addition, transportation fees- whether gas or needing handicapped transportation- may also be too high for the caregiver to cover, so the child often does not even have a way to make it to desired activities (Wright et al., 2019). Caregiving for a child with physical impairments may also require one parent or caregiver to give up employment for caregiving, thereby further limiting financial resources by taking away that source of income for the family (Gilson et al., 2018).

Additionally, the routines and needs of children with physical impairments often take up a large portion of the day or week, which in turn impacts the availability of time the child and their caregiver may have to engage in participation in other activities. Caregivers often believe that there is not enough time for the child to participate in other extracurricular or social activities after required or scheduled activities, such as doctor's appointments and school, regardless of whether this is a perceived or real unavailability (von Benzon, 2010). Often, medical appointments and procedures take priority in the child's day to day life, and extra activities may take place over the same time frame, making them inaccessible; the amount of time necessary for the child to participate in therapy and other medical interventions may also impact the child's energy level, making participation even increasingly difficult if they are able to fit in the opportunity (Sterman et al., 2019).

A resource that is low in visibility but incredibly important is emotional availability, both for the caregiver and the child. For children who experience physical impairments, their days may consist of a range of emotional situations, from navigating difficult social situations to trying to participate in settings that are inaccessible; this emotional drain often causes children to not want to use any more emotional energy to attempt to participate in extracurricular activities, especially if they anticipate encountering inaccessibility difficulties (Gilson et al., 2018). In addition, caregivers of children with physical impairments also experience a rollercoaster of emotions while caring for their children, including sadness, anger, and guilt that surround acknowledging that their child's participation experience may differ greatly from other children around them (Gilson et al., 2018). Caregivers who are already emotionally exhausted from caregiving often choose to avoid extra emotional burden such as stress, which can come from assisting or encouraging their child(ren) to participate in additional activities outside of school (Horton, 2017).

Another resource that is important for children with physical impairments and their families is the availability of support and assistance outside of the family. Taking care of a child with physical impairments can be an exhausting role for caregivers, especially since there is never a true 'break' from caregiving for their child (Schleien et al., 2014). Support groups can be incredibly helpful in assisting families in navigating their child's impairment and finding resources to aid the family in respite care and funding; they can also provide emotional and psychosocial support to family members regarding emotions about their child and their impairment (Tetreault et al., 2012). Community support and organizations for families of children with physical impairments should strive to make themselves as accessible as possible for families, including flexible timing and low to no cost for resources (Gilson et al., 2018).

## Parental and Caregiver Influence

Parents can also purposefully or unintentionally limit participation efforts for children who experience physical difficulties and impairments. It is often a much larger ordeal to prepare, transport, and assist children with physical impairments in activities such as after-school curriculars or even just everyday excursions, which can be a difficult amount of responsibility for parents and caregivers (Horton, 2017). Occasionally, parents and caregivers of children with physical impairments admit to avoiding or limiting the number of participatory activities their children are a part of so that it does not overwhelm the parent(s) with the responsibilities of such activities (Sterman et al., 2019). This may also occur if the activity or program is resistant or hesitant to the child joining and/or participating, as the caregiver may decide it is not worth advocating for their child to be included in an environment that is not receptive of them (Schleien et al., 2014). In addition, parents may shy away from encouraging their children to participate in activities if parents anticipate their children being negatively impacted by stigma or social reactions to their children's presenting impairment or symptoms (Willis et al., 2017). Parents may aim to limit participation in order to protect their child(ren) from the heartache of being excluded, stereotyped, or judged because of their impairment; however, this preventative action coming from a place of care from the parent can cause children with physical impairments to feel even more of a separation between them and their peers who do not experience physical impairments (Sterman et al., 2019). Parents of children with physical impairments or divergent development may also fear that their children could be physically hurt if they are unable to keep up with peers who are typically developing, and as a result may limit participation to prevent potential injuries (Schleien et al., 2014). In conclusion, there are a variety of factors that interact to influence the ability of children with physical impairments to engage in participation of meaningful activities, which is an important and beneficial experience for children's development and sense of identity.

# **Benefits of Participation**

Participation in social and physical activities is a common and shared experience between children in a variety of settings. Children with physical impairments have reported that participation in meaningful activities is especially important to them because it gives them a sense of belonging (Willis et al., 2017). Feeling included and welcome in their social settings and communities has a large positive impact on children with physical impairments, whether or not the peers in this setting share diagnoses or experiences with these children (Devine et al., 2015). Inclusion can also assist children in developing a sense of identity and in determining who they are and who they want to be, both in the present and looking forward (Clark & Nwokah, 2010). Living with a physical impairment can be socially isolating for children, as physical participation and accessibility for social and extracurricular activities is often limited, leading children with impairments to not have as many opportunities for social development or to feel as if they belong to a community (Edwards et al., 2021). Conversely, children who experience physical impairments often express receiving satisfaction and meaning from participating in activities with their peers and friends, which emphasizes the social and emotional impact that social participation can have on this population (Wright et al., 2019). Children with physical impairments can have a positive social impact on their peers without physical impairments, as they provide a learning experience for children without impairments that their peers are important parts of social circles and can impact these children to continue to include those with impairments in activities and social communities as they grow up (Schleien et al., 2014).

Participation also benefits children with physical impairments because it often increases their time spent partaking in physical exercise. Children with physical impairments frequently experience less participation in physical exercise for a variety of reasons, which include physical accessibility issues and barriers, as well as the presentation of symptoms that may limit complete physical participation in many activities (Wright et al., 2019). In addition, physical activity levels for children often fluctuate depending on the setting involved (i.e., home, school, camp) and the time of year, with a decrease often experienced in the summer months when children are not attending school (Beets et al., 2013). Participation in physical activity is crucial in maintaining health and promoting physical development and increased motor and social skills for children with physical impairments, so it is important to heavily emphasize and encourage participation in physical activity for these children (Wright et al., 2019). When participation in many available activities can be modified and adapted, it encourages increased physical exercise to complete the activity and doubly benefits children with physical impairments by positively impacting participation levels and time spent in physical activity (Wright et al., 2019).

## **Benefit of Camp Participation**

Summer camp is an incredibly unique setting where children from all areas and backgrounds come together for periods of time during the summer to interact and engage in enjoyable experiences. Attending summer camp can be an impactful experience that provides ample opportunities for all children to participate in multiple types of activities that strengthen developmental and social skills and increase physical activity (Beets et al., 2013); these activities can include physical activities like hiking or swimming, group games, and arts and crafts (Beets et al., 2013). Research on summer camps and their evolution in American society has explored the positive impact that both day and overnight camps can have on socialization and self-esteem building for children (Browne et al., 2019); in addition, camps aimed at children who experience specific diagnoses often help these children build a positive disability identity and community (Browne et al., 2019). In addition to providing the opportunity to develop identity and friendships, summer camp can also be an educational experience that allows children to learn about the environment and develop concern and care for being environmentally responsible at a young age, which can stay with them as they grow up and continue to advocate for environmentally friendly products and solutions (Collado et al., 2013). There are many types of summer camp programs that are offered for children in the United States each summer, and each offers a unique take on camp activities, programs, and styles. Some camps are residential in nature, where the children live at the camp in community with other campers for a specific length of time, such as a week or a month (American Camp Association, 2022). Other camps are day camps where campers get to go home every night after participating in the camp's program that day. Camps can also group campers based on gender and age. Types of camps can range from general summer camps with outdoors activities such as swimming and archery, to camps that focus specifically on certain topics, like sports, music, or theater (American Camp Association, 2022). Two additional types of camps, discussed below, focus on children's medical needs while determining camper attendance.

## **Diagnosis-Specific Summer Camps**

One popular style is diagnosis-specific programs, where camps are run explicitly for youth who experience specific impairments or disorders (Devine et al., 2015); diagnoses range from including youth with hearing impairments to those who have been diagnosed with Type 1 diabetes (Devine et al., 2015; Hill et al., 2015). These camps allow children with physical impairments or disorders to experience traditional summer camp activities while also having access to necessary medical care or precautions (Hill et al., 2015). Diagnosis- specific camps are incredibly important for children with impairments to find others who share their experience and perspective on life (Clark & Nwokah, 2010). They also are able to participate in activities without being afraid of what others will think of them, since their peers have some understanding of what they are experiencing. Some children find this experience freeing, as they realize that they are not alone in their impairments and that others understand their experiences (Goodwin & Staples, 2005). Camp experiences also allow children with physical impairments to experiment with new levels of independence in a way that they may not have at home or school. It also provides a safe space for children to test their abilities, try new experiences, and succeed, or fail, without fear of judgment or further separation from their peers who do not experience physical impairments (Goodwin & Staples, 2005). While many aspects of diagnosis-specific summer camps focus on participating in physical activities, camp is also a great opportunity for campers to build confidence in their social skills through their interactions with other campers who share similarities, and a space to build a sense of community and identity that lasts after camp is over (Devine et al., 2015).

## **Inclusive Summer Camps**

Another common type of camp is an inclusive-style camp, which integrates children with and without physical impairments without excluding certain impairments. These camps can be impactful on all children involved as they help them to develop social skills and friendships with children who do not look or act like them (Clark & Nwokah, 2010). Meeting and interacting with children different from themselves can provide situations and knowledge that are important for continuing psychosocial development and improving social skills (American Camp Association, 2013). Experiencing summer camp with peers can assist in the quick creation of friendships between children with physical impairments and those without, providing an opportunity for the child to widen their social circle and add to their social interaction skills, both at camp and if the children continue to communicate after they return home (Dawson et al., 2018). Another benefit of participation in summer camp, especially inclusive summer camps where campers have different ability levels, is that children encounter new and unfamiliar activities and experiences, which allows them to develop and strengthen their problem-solving skills (Olympia et al., 2015). While there is not much available regarding the accessibility and inclusivity of summer camps specifically for children with physical impairments, there are many strategies that are recommended for camps to address and improve these areas.

## Solutions to Improve Accessibility and Inclusivity

There are various actions that organizations such as summer camps can take in order to improve accessibility for those who experience physical impairments. These solutions may include making physical modifications to the camp to remove barriers and increase access, as well as training staff on necessary medical care for campers. Staff training can also focus on facilitating interactions between campers with physical impairments and those without. Another method that summer camps can utilize is to assess their compliance with ADA standards, and create a transition plan to continue to increase accessibility and inclusivity into and around their camp.

## **Physical Renovations**

The solution that is typically suggested to improve accessibility for children with physical impairments is the removal of physical barriers or the construction of modifications to increase accessibility (Sterman et al., 2019). Whether by altering a previous space (such as removing lips of doorframes between rooms, or by lowering tables and making space for adaptive equipment) or by creating new accessible spaces, physical alterations can greatly impact the accessibility of a building or site, thereby creating a positive impact for participation for children with physical impairments. (Stephens et al., 2017). In addition, provision of modifications that allow access, or

creation of inclusive structures can lessen stress about participation in activities and allow children with physical impairments to engage in occupations freely (Willis et al., 2017). Diagnosis-specific camps, as well camps that aim to improve accessibility, also need to have staff that are trained in medical care and assistance; knowledgeable staff will allow more inclusivity for children who require medical care, as well as being available in case of medical emergencies (Olympia et al., 2015).

# Staff Training

Another way to improve accessibility and inclusivity for children who experience physical differences and impairments is to provide effective and informative staff training for all staff members who run or work at a camp program (Edwards et al., 2021). Training can include educating staff on helpful and encouraging interactions with children with physical impairments, as well as giving strategies for staff to include those with impairments with typically developing children in activities (Schleien et al., 2017). This training can assist children in feeling safe and accepted, and trained staff can be a strong factor in influencing and reminding typically developing children to include their peers with physical impairments, creating a space where the opinions and abilities of these children are just as valued as those of their peers (Edwards et al., 2021). Staff who are well-educated in ability levels for children with physical impairments and in encouraging direct interactions between children with and without physical impairments can also have a direct impact on children with physical impairments experiencing inclusion and feeling "normal" among any type of children, as well as normalizing interaction with children who experience differences in physical conditions for typically developed children (Edwards et al., 2021).

## Accessibility Requirements and Recommendations

Since summer camp programs are included under the Americans with Disabilities Act of 1990, they are obligated to comply with accessibility requirements and standards for their buildings and activities. This can be a confusing and difficult process to determine what standards apply where, since every camp program is slightly different than the next (Hansen-Stamp, 2002). While each camp will require different modifications and accommodations, it is important for program directors to listen to input from children with physical impairments (and their parents) who will be attending the camp program in order to create an accessible and inclusive environment that truly works for these children to attend (American Camp Association, 2013). Transition into accessibility modifications and programs can also be eased by planning accommodations on a schedule so that the program can adapt and learn accessibility strategies and have time to incorporate physical modifications (American Camp Association, 2013). In addition, appointing an inclusion director for camp programs can organize accessibility efforts and signal a true effort to make the camp inclusive for all (Schleien et al., 2017).

## **Current and Future Research**

While there has been much research on accessibility for children with physical impairments, the research that has been done has been broad and focused on specific child settings such as home, school, and the playground. This research is incredibly important in the development of accessible and supportive areas of occupation for all children, despite their ability level and developmental stage, but there is also a further need for research in other areas of children's occupational interests (Clark & Nwokah, 2010). Specifically, research concerning physical accessibility and inclusivity in summer camp programs is limited. The research that does exist surrounding these topics is most often concentrated on summer camps that exist as a space for one certain medical diagnosis or disability (Clark & Nwokah, 2010). However, there is

not adequate research on summer camp programs that integrate children with and without physical impairments in the same settings and activities (Goodwin & Staples, 2005).

While the ADA and the American Camp Association are good starting points for summer camp programs to improve accessibility and inclusivity for children with physical impairments, there are still many questions and concerns regarding accessibility of summer camp programs, which emphasizes the need for research on specific impacts of summer camp accessibility and strategies to improve it (Clark & Nwokah, 2010). Research can have a great impact on summer camp programs by enabling them to diversify the camp experience from one that was founded on typical able-bodied children into a standard of a range of children with and without all types of impairments (Browne et al., 2019).

Further investigation into accessibility needs for summer camps can also assist camp program administrators in expanding their knowledge of ADA requirements and methods to make camps truly accessible for children with physical impairments. Camp programs often have trouble dissecting the complex regulations of the ADA, and struggle to distinguish which requirements apply to their camp (Hansen-Stamp, 2002). In addition, many camps have difficulty establishing what accessibility in the camp program will look like, as many camp activities are physical in nature and seem to require actions that some impairments may prevent (American Camp Association, 2013). Specific guidance and suggestions are an option to improve the understanding of accessibility at camp programs, as well as to make positive changes in physical accessibility.

## Methodology

In this project, an assessment of a children's summer camp was conducted with a focus on compliance with ADA regulations as well as general accessibility of the buildings and grounds. This focus was concentrated on how the accessibility of the camp may impact potential campers with physical impairments, as well as on recommending improvements that could increase accessibility.

After conducting the literature review, I traveled to a summer camp to observe the layout and accessibility of buildings and spaces in the camp. This camp was a residential overnight summer camp, and campers stay at this camp for one to six weeks over the summer. The layout of the camp includes 15 camper cabins that specifically house campers during the summer, bathroom facilities, a dining hall, and a guest house for the offseason. Outdoor spaces include pavilions, grassy areas, and a pool. To determine accessibility, I took pictures and measurements of doors, handles, spaces, and ramps, as well as floor surfaces and bathrooms, and other information pertinent to the ADA. I then cross-referenced these measurements with the ADA minimum requirements. I also utilized two checklists that were based on ADA standards to concisely determine what requirements applied to the camp spaces. The ADA Checklist for *Existing Facilities* (2016) was a checklist that I used to determine specific measurement requirements for doorways, spaces, ramps, and other areas. This checklist was very specific and detailed, and included many measurements and spaces for items that I did not consider vital to the project, so I also utilized a shorter checklist, the ADA Readily Achievable Barrier Removal *Checklist for Existing Facilities* (1995), to guide what areas of the camp were most applicable to my project. While I did not formally complete these checklists, they assisted in guiding what measurements should be taken and what steps could be taken to improve accessibility.

When assessing the camp, I evaluated several important camp buildings, such as the camp's dining hall and guest house, as well as two camper cabins, and an independent bathroom facility. The dining hall is a central location to any summer camp, as it is an important daily gathering spot for both camper socialization and physical nourishment. This dining hall also has bathrooms for campers, as well as a small indoor activity space that is used for crafts and other times for campers to gather and interact. While the guest house does not normally house campers, it is the location for the nurse and director's offices during the summer, so campers often access this space. The cabins are the main location where campers sleep, store belongings, and bond with their small group of cabinmates for their stay. These cabins each have an attached bathroom, but there is also an independently standing bathroom facility that campers utilize to get ready for the day and for bed (e.g., brushing their teeth) so many campers interact with each other when they use this building. I also evaluated the camp's pool, as well as outdoor spaces underneath and near a pavilion, and generally assessed the available routes to these locations. The pool and outdoor spaces are incredibly popular locations within the camp for campers to enjoy activities and interacting with friends and other campers, especially during unstructured free time.

All measurements of entrances, ramps, doorways, and other applicable structures were compared to the current ADA standard recommendations for appropriate widths, heights, and spaces. The last revision of the ADA in 2013 recommends that doorways should be at least 32" and hallways should be 36" wide, with thresholds into doorways being 1/4" or less; ramps should have 12 inches of slope to 1 inch of height, and spaces for wheelchair turnaround should be 5'x5'. Additionally, surfaces should be flat and paved or made to be firm and slip resistant (United States Department of Justice, n.d.)

#### **Results**

Measurements and assessment of the camp's buildings and spaces showed that there was a mixture of accessible and inaccessible structures and spaces. The guest house and the dining hall were both renovated after the most recent ADA revision, so they measured highest on accessibility. One cabin, which the camp organization had also specifically renovated to be handicap accessible, also proved accessible for those with physical impairments. The cabins that most campers stay in did not meet accessibility standards, as well as the bathroom facility, pool, and outdoor spaces and routes.

### **Dining Hall and Guest House**

The camp's dining hall and guest house have both undergone multiple renovations in the last decade, which allowed the camp to update these buildings to accommodate ADA accessibility standards. All doors into and within the dining hall met the ADA's recommendations of 32" wide, and the entrance had a completely level threshold. Inside the dining hall, there were several 5'x5' spaces that allowed for wheelchair users to move around easily. Tables were 30" off the ground, and spaces between the tables were at least 3' wide.

While all of these accommodations are great examples of meeting the ADA standards, the dining hall does require guests to either use a flight of stairs or exit the building and walk to the lower entrance to reach the bathrooms on the lower level. The lower entrance is accessible via a paved sidewalk which has a 1" threshold that leads to a 36" wide door, but this lack of an elevator means that campers with physical impairments would not be able to easily access the bathrooms from the upper level of the dining hall. The bathrooms do meet ADA requirements including a handicap stall and appropriate height sinks with space underneath for a wheelchair or mobility aids, as well as accessible soap and paper towel dispensers.

The craft/activity room located in the basement of the dining hall has two entrances- one outer door and one connected to the bathroom area. The outdoor door measured 43" wide, and the threshold was flat, while the second entrance requires campers to step down into this space. Once inside, there is 36" of space between the tables and benches and the walls, and there is a 5'x5' space at the end of the tables for a wheelchair to turn around in.

The guest house had an entrance that had a ramp to accommodate for wheelchair users and those with physical impairments who cannot use stairs. This ramp did not fully meet ADA standards, as the slope was greater than 1:12 (23" in height to 16'9" in length). However, it was at least 36" wide and met all railing requirements. All doors and entrances into this building were ADA compliant and at least 32" wide. Inside, a fully compliant ADA bathroom and two ADA compliant bedrooms were located on the ground floor, allowing guests with physical impairments to stay comfortable on the ground floor.

## **Cabins and Bathrooms**

Out of the roughly 15 cabins that the camp utilizes to house campers, only one cabin successfully met most ADA accessibility standards. This cabin had an accessible entrance, including a ramp and door that is 36" wide. Like the other ramp on campus, this ramp does not meet ADA standards of slope, as it is 24" high but only 19' feet long; however, it does allow accessible entrance into the building. The inside is spacious and contained a handicap accessible bathroom, including a roll-in shower with a shower bench and a handle that is 38" from the ground. It was specifically renovated to meet accessibility standards and is the dedicated cabin for campers with accessibility needs to stay in. All light switches and wall features are 45" from the ground.

Aside from this designated handicap accessible cabin, all of the other cabins in the camp were all built with similar dimensions and layout. These cabins require multiple steps to enter, and the entrance is 36" wide; inside of the cabin, there is a wide space over 5'x5' between bunkbeds on each wall that could be turnaround space for those with mobility aides if they were able to enter the cabin. The bathroom is also not spacious enough to even fit mobility aids or a wheelchair, as the door is 30" wide with a threshold of 2.5", and there is not more than 52" of width across the whole bathroom. Campers who use mobility aides such as wheelchairs or crutches would not be able to navigate into or around the bathroom or access the toilet or shower; the shower is 30"x30" and does not include a bench, and has a 1" threshold.

The independent bathroom facility was also not truly accessible for those with physical impairments. The entrance to this facility requires users to step up onto a large concrete block which is 3" in height before entering the building. The door is 31" wide and the opening leading to the stalls (between the stalls and the wall) is only 28" wide, which does not meet ADA standards, even if a wheelchair user was able to make their way into the building. In addition, the bathroom stalls are 32" wide, and there is no handicap stall available. There is a space over 5'x5' wide that would allow turnaround space for wheelchair users, but they would be unable to access stalls or that space.

## **Pools, Outdoor Spaces and Routes**

Under the 2013 ADA revisions, the camp's pool- which is an inground pool- should have a lift and/or a ramp to allow campers with physical impairments that do not allow them to use stairs to enter the pool, but the pool does not have either of these accommodations. However, because it is not readily achievable for the camp to pay for a lift, the pool does meet ADA standards, since the camp would put one of these accommodations in if the organization could afford it. While the pool gate is 47" wide and would allow wheelchair users access, entrance to the pool requires campers to walk across uneven and hilly terrain or across a sandy volleyball court, which are both difficult surfaces that would impede wheelchairs and mobility aides.

All outdoor spaces where campers gather during free time and structured activities were mostly accessible. Picnic tables had 32" of space in between for wheelchairs and mobility aides, and provided accessible seating for all. There is also plenty of spaces over 5'x5' to turn around in wheelchairs. However, routes to and within these spaces provide many barriers to true accessibility. The vast majority of the camp paths are gravel and are uneven and bumpy. The path that leads to the cabins and some outdoor activities is up a steep hill with uneven terrain, with wooden steps sunken into the hill to aid those walking up. The camp does have the ability to transport campers who cannot physically make their way up the hill by using an all-terrain vehicle to drive up the hill; however, this requires planning on the camp's part and takes away the camper's ability to walk up to their cabin or activity with other campers.

### **Camp Program Perspective**

During discussion with camp administration, the camp director stated that they were aware that many camps struggled to meet ADA accessibility, but that they believed this camp was one of the more successful camps at offering ADA accessible buildings and spaces. The director also reported that while they understand that accessibility is important for campers to come to their camp, many suggested renovations that could improve accessibility- such as replacing gravel paths with asphalt- is and will most likely never be financially feasible for the camp. This provides a perspective from the organization's standpoint- and shows that for this camp, the director and staff are aware of accessibility issues and do not want to prevent access and inclusion for campers, but believe that the camp is doing all it can possibly do to improve accessibility for campers and guests under current time, staff, activity, and financial restraints.

### Discussion

There were many opportunities in the camp for improvement of accessibility, and there are levels of recommendations that can be made for the camp to increase the amount of accessibility in and around camp for campers and guests. However, the camp also shone in some areas on the campus that did mainly comply with ADA accessibility standards; for example, the dining hall, guest house, and ADA specific cabin all met several ADA requirements and aimed to be as accessible as possible. These are helpful spaces to allow campers with physical impairments to fully participate in eating, socializing, and completing camp activities with other campers. The initiative from the camp organization to provide these spaces also shows that the camp prioritizes meeting ADA standards and including campers of all abilities to the best of the organization's abilities.

There were still plenty of places for improvement of accessibility around the camp. One general suggestion that would improve accessibility throughout the camp is to flatten and pave pathways leading to buildings and outdoor spaces. This would provide ease of access for campers with physical impairments who may use wheelchairs or other mobility aids to access cabins, general gathering areas, activity areas, and the pool. The current gravel is not an ADA approved surface material that would promote accessibility and traveling from space to space, and the current pathways have bumps, potholes, and steep slopes that would be difficult to traverse for campers with physical impairments. However, paving the entire camp would be an

immense financial cost to the camp; recommendations aside from paving the camp would be to mechanically flatten and smooth out pathways around the camp to make it less uneven.

Another suggestion to improve the accessibility of the path to the cabins would be to replace the current wooden block steps with a wooden staircase with wide, shallow steps and a railing. The current steps are worn and uneven, and there is no railing to assist those who may be having trouble to make it up the steep hill. While this does not make the hill accessible to those who utilize wheelchairs, this could make traveling up the hill more achievable for those who may have lesser physical impairments or use mobility aids, or to anyone who may have a hard time with the steep uneven terrain. This is important because this hill leads to cabins and activities where many campers gather; making these improvements could greatly increase accessibility to destinations up the hill.

A major recommendation that would align with ADA standards would be to install a handicap accessible lift in the pool. This would allow wheelchair users or campers who are not physically able to use the stairs or jump into the pool to have an accessible entrance to swim and play with their peers. Although the camp is not required to install a lift because the financial cost is not readily achievable for the camp, installing a lift to make entry to the pool equal for all campers would greatly improve the accessibility of the camp, especially since the pool is an extremely popular place at summer camps. A recommendation that may be less expensive for the camp would be to install a sloped ramp leading into the pool. Another recommendation would be to create a smooth and flat path to the pool to improve accessibility to just get to the pool, since the current pathways are not easy to traverse to reach the pool gate.

The benefits of participation are extremely important and beneficial for children with physical impairments, and the camp director expressed a desire for improvements to allow more children with physical impairments to attend the camp and participate. Based on the literature and my assessment of this summer camp, there are many areas of camp that would be difficult to access for children with physical impairments, and would bar them from fully participating in camp activities, thereby decreasing their ability to gain important benefits from the camp experience. For example, the routes throughout the camp would be incredibly challenging for those who may utilize mobility aides to travel, which could prevent campers with physical impairments from participating in camp activities because they are unable to access the spaces in which they are held. When simply accessing activities and areas becomes so troublesome for children with physical impairments, they may not consider participation in activities worth the effort demanded from inaccessible spaces. This could prevent many children from getting to experience full engagement at summer camp, and impede the development of the various benefits of this important social opportunity. In addition, participation at summer camp allows children with physical impairments to feel included, and could be a particularly important experience for these children if they have friends or relatives that attend summer camp and want the child to go to camp with them. Increasing accessibility in summer camps would allow these children to access and attend summer camp with their peers, and to feel welcomed in this environment. For this summer camp, pursuing purposeful modifications such as adding railings to stairs, installing a sloped ramp into the pool, and smoothing and flattening gravel routes would heighten accessibility and maximize participation for campers with physical impairments while adhering to the camp's financial limitations.

Flexible renovations are a great step towards improving compliance with ADA standards, and would improve accessibility for many children with physical impairments, including those who use mobility aides such as crutches or walkers. Additional discussion may be necessary for the camp to determine what situations it may be appropriate in to recommend that a camper not attend this summer camp, even with improved accessibility. For example, a child who uses a motorized wheelchair and experiences quadriplegia may not be able to participate in summer camp activities such as horseback riding, swimming, or crafts, even if they can physically access the areas in which these activities occur, and the camp may not have resources to have a staff member assist campers one-on-one. Therefore, even with improvements to accessibility, thoughtful consideration is a key strategy for the camp administration and parents to determine if this camp is still the most beneficial place for participation for some children with physical impairments, or if there is another better option available.

The camp administration perspective also provided a new perspective into ADA accessibility at summer camps. It is an encouraging representation to their commitment to making their camp space as accessible as possible to campers, guests, and staff who may stay at the camp. It may also be enlightening to gather more information from other summer camps about their level of ADA accessibility, as well as the programs' perspectives about the necessity and achievability of ADA accessibility. This could provide further insight on areas of improvement that summer camps can work on to strive to meet ADA standards of accessibility. Broader camp perspectives could also provide the opportunity to create strategies to educate camp programs about why accessibility is so important and influential for their campers who may have physical impairments and can provide vital information to structure educational programming for camps to refer to for renovations and other resources.

These results suggest the continued need for accessibility improvements to summer camps for children with physical impairments. These improvements can greatly impact the participation and inclusion of children with physical impairments into the summer camp setting, benefiting their social, emotional, and physical development. By continuing to strive to meet and exceed ADA standards for accessibility, summer camps can become an inclusive and exciting environment for children with physical impairments to experience true accessibility and participation with their peers.

# Conclusion

Accessibility for children with physical impairments into social and extracurricular activities promotes full participation which is incredibly influential for their development and sense of identity and belonging. Summer camps are an overlooked place where participation for children with physical impairments can be impactful when true participation is achieved, but many camps are not physically accessible and do not meet ADA standards. Completing this case study gains information on where summer camps can improve their accessibility to allow campers with physical impairments to fully participate and enjoy the summer camp experience.

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### References

Adaptive Environments Center, Inc. (1995). ADA Readily Achievable Barrier Removal Checklist for Existing Facilities. ADA.gov. <u>https://www.ada.gov/racheck.pdf</u>

American Camp Association. (2013). Utilizing the civil rights law to better include people with

*disabilities*. <u>https://www.acacamps.org/resource-library/campline/utilizing-civil-rights-l</u> aw-better-include-participants-disabilities

American Camp Association. (2022). *A camp for every child - the right camp.* <u>https://www.acacamps.org/campers-families/planning-camp/preparing-camp/camp-every-child-right-camp</u>

- Beets, M. W., Weaver, R. G., Beighle, A., Webster, C., & Pate, R. R. (2013). How physically active are children attending summer day camps?. *Journal of Physical Activity & Health*, 10(6), 850–855. <<u>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7255438/</u>
- Browne, L.P., Gillard, A., & Garst, B.A. (2019). Camp as an institution of socialization: Past, present, and future. *Journal of Experiential Education*, *42*(1), 51-64. https://journals.sagepub.com/doi/pdf/10.1177/1053825918820369
- Burns, R., & Graefe, A. (2007). Constraints to outdoor recreation: Exploring the effects of disabilities on perceptions and participation. *Journal of Leisure Research*, *39*, 156-181.
  10.1080/00222216.2007.11950102.

Church, R. L., & Marston, J. R. (2003). Measuring accessibility for people with a

disability. *Geographical Analysis*, *35*(1), 83. <u>https://doi.org/10.1111/j.1538-</u> <u>4632.2003.tb01102.x</u>

- Clark, M.K., & Nwokah, E.E. (2010). Play and learning in summer camps for children with special needs. *American Journal of Play*, *3*(2), 238-261. <u>https://files.eric.ed.gov/</u>fulltext/EJ1070239.pdf
- Collado, S., Staats, H., & Corraliza, J.A. (2013). Experiencing nature in children's summer camps: Affective, cognitive, and behavioural consequences. *Journal of Environmental Psychology, 33*(2013), 37-44. <u>https://www.academia.edu/21363767/Experiencing\_na</u> <u>ture in childrens\_summer\_camps\_Affective\_cognitive\_and\_behavioural\_consequences?</u> <u>auto=citations&from=cover\_page</u>
- Dawson, S., McCormick, B., & Jing Li. (2018). A Network analysis of youth with physical disabilities attending a therapeutic camp. *Therapeutic Recreation Journal*, 52(2), 154–169. <u>https://doi.org/10.18666/TRJ-2018-V52-I2-8344</u>
- Devine, M. A., Piatt, J., & Dawson, S. L. (2015). The role of a disability-specific camp in promoting social acceptance and quality of life for youth with hearing impairments. *Therapeutic Recreation Journal*, 49(4), 293–309.
   <a href="https://doi.org/10.18666/TRJ-2015-V49-I4-6240">https://doi.org/10.18666/TRJ-2015-V49-I4-6240</a>

Edwards, B. M., Cameron, C., King, G., & McPherson, A. C. (2021). Contextual strategies to support social inclusion for children with and without disabilities in recreation. *Disability and Rehabilitation, 43*(11), 1615-1625. <u>https://doi.org/10.1080/0963828</u>
8.2019.166897

- Eisenberg, Y., Heider, A., Gould, R., & Jones, R. (2020). Are communities in the United States planning for pedestrians with disabilities? Findings from systematic evaluation of local government barrier removal plans. *Cities, 102.* <u>https://doi.org/10.1016/j.cities.2020.1</u> 02720
- Fletcher, T., Anderson, S. J., Wagner, H., Linyard, M., & Nicolette, E. (2019). Caregivers' perceptions of barriers and supports for children with sensory processing disorders. *Australian Occupational Therapy Journal*, 66(5), 617–626. <u>https://doi.org/10.1111/1440-1630.12601</u>
- Gilson, K.-M., Davis, E., Corr, L., Stevenson, S., Williams, K., Reddihough, D., Herrman, H.,
  Fisher, J., & Waters, E. (2018). Enhancing support for the mental wellbeing of parents of children with a disability: Developing a resource based on the perspectives of parents and professionals. *Journal of Intellectual & Developmental Disability*, *43*(4), 463–472.
  https://doi.org/10.3109/13668250.2017.1281386
- Goodwin, D. & Staples, K. (2005). The meaning of summer camp experiences to youths with disabilities. *Adapted Physical Activity Quarterly*, 22(2). 160-178. 10.1123/apaq.22.2.160.
- Hansen-Stamp, C. (2002). *ADA title III: What does it mean for camp programs?* The American Camps Association. <u>https://www.acacamps.org/resource-library/articles/ada-title-iii-</u> what-does-it-mean-camp-programs

Hertzog, D., Cermak, S., & Bar-Shalita, T. (2019). Sensory modulation, physical activity and

participation in daily occupations in young children. *Canadian Journal of Occupational Therapy*, 86 (2), 106-113. <u>https://journals.sagepub.com/doi/pdf/10.1177/0008417419</u> 831403

- Hill, E., Gagnon, R., Ramsing, R., Goff, J., Kennedy, B., & Hooker, T. (2015). Measuring the impact of a medical specialty camp. *Therapeutic Recreation Journal*, 49(4), 310–325. <u>https://doi.org/10.18666/TRJ-2015-V49-I4-6308</u>
- Horton, J. (2017). Disabilities, urban natures and children's outdoor play. *Social & Cultural Geography*, *18*(8), 1152-1174. <u>https://doi.org/10.1080/14649365.2016.1245772</u>
- Institute for Human Centered Design. (2016). ADA Checklist for Existing Facilities. https://www.adachecklist.org/
- Olympia, R. P., Hollern, K., Armstrong, C., Adedayo, P., Dunnick, J., Hartley, J., & Doshi, B.
  (2015). Compliance of camps in the United States with guidelines for health and safety practices. *Pediatric Emergency Care*, *31*(3), 178-185. <u>10.1097/PEC.00000000000379</u>
- Schleien, S. J., Miller, K. D., Walton, G., & Pruett, S. (2014). Parent perspectives of barriers to child participation in recreational activities. *Therapeutic Recreation Journal*, 48(1), 61–73.
- Schleien, S.J., Miller, K.D., Walton, G., Roth, C., & Tobin, L. (2017). Inclusive camp: Making summer camp a joyful place for everyone. *Camping Magazine*. <u>https://www.aca</u> <u>camps.org/resource-library/camping-magazine/inclusive-camp-making-summer-campjoyful-place-everyone</u>

Stephens, L., Spalding, K., Aslam, H., Scott, H., Ruddick, S., Young, N. L., & McKeever, P.

(2017). Inaccessible childhoods: evaluating accessibility in homes, schools and neighbourhoods with disabled children. *Children's Geographies*, *15*(5), 583-599. <u>https://doi.org/10.1080/14733285.2017.1295133</u>

- Sterman, J. J., Naughton, G. A., Bundy, A. C., Froude, E., & Villeneuve, M. A. (2019). Planning for outdoor play: Government and family decision-making. *Scandinavian Journal of Occupational Therapy*, 26 (7), 484-495. <u>https://doi.org/10.1080/11038128.2018.1447010</u>
- Tétreault, S., Blais-Michaud, S., Marier Deschênes, P., Beaupré, P., Gascon, H., Boucher, N., & Carrière, M. (2014). How to support families of children with disabilities? An exploratory study of social support services. *Child & Family Social Work*, *19*(3), 272– 281. https://doi.org/10.1111/j.1365-2206.2012.00898.x

United States Department of Criminal Justice, Civil Rights Division. (n.d.). Information and assistance on the americans with disabilities act. <u>https://www.ada.gov/2010\_regs.htm</u>

- von Benzon, N. (2010) Moving on from ramps? The utility of the social model of disability for facilitating experiences of nature for disabled children. *Disability & Society*, 25(5), 617-626. <u>https://doi.org/10.1080/09687599.2010.489313</u>
- von Benzon, N. (2011). Who's afraid of the big bad woods? Fear and learning disabled children's access to local nature. *Local Environment, 16*(10), 1021-1040. <u>https://doi.org/10.1080/13549839.2011.636419</u>
- Willis, C., Girdler, S., Thompson, M., Rosenberg, M., Reid, S., & Elliott, C. (2017). Elements

contributing to meaningful participation for children and youth with disabilities: A scoping review. *Disability and Rehabilitation*, *39*(17), 1771-1784. <u>https://doi.org/1</u> 0.1080/09638288.2016.1207716

Wright, A., Roberts, R., Bowman, G., & Crettenden, A. (2019). Barriers and facilitators to physical activity participation for children with physical disability: Comparing and contrasting the view of children, young people, and their clinicians. *Disability and Rehabilitation*, 41(13), 1499-1507. <u>https://doi.org/10.1080/09638288.2018.1432702</u>