Residential Camping for the Child with An "Invisible" Disability

An Honors Thesis (ID 499)

by

Michelle Linn Shaffer

Jan Holmes

Thesis Director

Ball State University
Muncie, Indiana
May 1, 1985

Spring 1985
Table of Contents

I. Introduction ........................................ 1
II. Who is the Invisibly Disabled Child? ............ 1
III. A History of Therapeutic Recreation ............ 2
IV. A Historic View of Residential Camping for Special Populations .................... 3
V. A Description of "Invisible" Disabilities as They Relate to Residential Camping ... 12
VI. Benefits of Residential Camping for "Invisibly" Disabled Children .................. 15
VII. What Types of Programs Does Residential Camping Have To Offer the "Invisibly" Disabled Child Today ................................................................. 19
VIII. Camp Nuhop-One of Today's Finest Programs for "Invisibly" Disabled Children . 21
IX. The Camp Staff and its Crucial Role in the Success of Residential Camping for "Invisibly" Disabled Child .......................................................... 21
X. Possible Roles for Those in the Residential Camping Helping Profession .............. 35
XI. Summary .................................................. 37
XII. Conclusion .............................................. 39
INTRODUCTION

The purpose of this paper is to examine the importance of residential camping as a form of therapeutic recreation for the child with an "invisible" disability, and the role that social workers can play in residential camping for this population. In order to accomplish this purpose, I will provide the following information: First, a definition of the population of "invisibly" disabled children will be given. Secondly, a history of therapeutic recreation for the disabled will be provided. Thirdly, a brief history of residential camping for the disabled will follow to give the reader background information on the development of today's programs specifically for the child with "invisible" disabilities. The possible benefits of camping for the child will be discussed, along with a detailed description of one of the finest camping programs available for "invisibly" disabled children today. The final section of the paper will explore the unique role that the helping professionals can play in the future of residential camping for children who have "invisible" disabilities.

Who is the "Invisibly" Disabled Child?

There are a wide variety of "invisible" disabilities including blindness, deafness, and mild mental retardation. However, for the purposes of this paper, those with "invisible" disabilities will be defined in the following manner:
They are children who appear normal to the casual observer, but are handicapped in situations demanding specific behaviors such as paying attention in the classroom or being physically coordinated on the playground. For example, children who are emotionally handicapped, the healthy hyperresilient, the learning disabled, and the socially or experiementally deprived child.1

This focus eliminates handicap such as, the blind, the deaf, the mentally handicapped, and the physically handicapped. Before looking at programs for this population, however, it is important to look closely at therapeutic recreation and its history as a profession specifically designed to address the social, emotional, and recreational needs of those with disabilities or other special concerns. This history is relevant because growth in this field has often paralleled the improved status of those who have disabilities in society.

A History of Therapeutic Recreation

Therapeutic recreation can be defined in the following manner:

a field that's purpose is to facilitate the development, maintenance, and expression of an appropriate leisure lifestyle for individuals with physical, mental, social, or emotional limitations; through the process of selection, development, implementation, and evaluation of treatment, leisure education, and recreation participation services based on individual assessment and program referral procedures. Their processes must take place within treatment, residential and community-based health and human service
centers and recreation agencies.2

Though they were not labeled as such, very specific forms of therapeutic recreation were evident even in ancient societies. For example, an ancient Chinese surgeon is reported to have used a variety of recreational techniques in his practice, including encouraging a general, on whose arm he had just operated, to play table games with his unafflicted arm in order to build strength and compensate for the weakness in his other limb. The following quote also allows one to see that leisure and outdoor activities used to promote rehabilitation are not unique to this century, nor this society.

As early as 2000 B.C., Egyptian temples were established to treat the mentally ill by providing games and other pastimes. Priests were said to have been aware that healing was promoted by the beauty of the temple and surrounding gardens and the songs and dances of the temple maidens.3

Such activities were not always provided, however, as can be seen by looking at societies in the Middle Ages when the mentally and physically disabled were placed in institutions centered around uproar, confusions, harsh treatment, and sometimes cruel staff members. Equipment such as whirling cages were not uncommon tools for treatment. As late as 1815, the "lunatics" were placed on exhibit every Sunday, netting a revenue of several hundred pounds.

Like strange animals...the mad entertained performing dance and acrobatics...in the popular mind, (they) were creatures apart. They lived outside the human social order,
and thus belonged truly to nature. A mad-house like a zoo afforded the public a bizarre diversion.4

Persons with mental and/or physical disabilities were seen as providers of sport and recreation, rather than as persons who might benefit from it.

In the nineteenth century due to the exhaustive efforts of such persons as Dorothea Dix, hospitals began to provide real care rather than serving only as retention centers for the disabled. Until the mid 1800's, those judged "insane" were frequently housed in jails and treated as criminals. Dix visited jails throughout the nation and abroad proclaiming the injustice of current treatment of the mentally ill and claiming rights in their behalf by demanding the following: That hospitals be established specifically for those with mental illnesses, that these hospitals provide both care and comfort, and that these hospitals and care be provided at the expense of the state.

From thirteen institutions for the mentally ill in 1843, the number rose to one-hundred and twenty-three by 1880, all of which were owned and operated by federal, state, under private auspices. Dorothea Dix was most successful in her mission and the mental health movement gained momentum as the twentieth century approached.5

In the United States, institutions for the deaf began in 1817, the blind in 1832, the mentally handicapped in 1850, the physically handicapped in 1867, and the epileptic in 1870. Occupational and physical therapies have their roots in the mid
1800s. Therapeutic techniques in America's institutions centered around board and group games, outdoor sports and musical programs.

After the United States entered World War I, the Red Cross began to provide recreational programs aimed specifically at the injured veteran, and recreational leaders were trained and hired in growing numbers. Federal laws such as the Federal Vocational Act of 1920 and the Social Security Act of 1935 began to emphasize the entrance of disabled persons into society by providing programs to meet vocational and educational needs. With new laws and programs, which focused on integration, came the fertilization of new attitudes.

These new attitudes are evident in this statement from the White House Conference on Child Health and Protection in 1932. The report called for,

a life on which his handicap casts no shadow, which is full day by day with those things which make it worthwhile, with comradeship, love, work, play, laughter, and tears—a life in which these things bring continually increasing growth, richness, a release of energies and joy of achievement.

One of the first professionally run programs during this time was the Goodwill Industries of Dayton, Ohio, which began in 1945 in cooperation with the American Red Cross, YWCA, Lions, and Kiwanis. The program focused on training all disabled veterans for some type of employment. Veterans were provided with vocational skills and encouraged to practice them at Goodwill Centers. These centers housed small scale industries which were
useful in providing on-the-job training in hopes of making
disabled individuals better prepared to re-enter society.

Administrators of Goodwill programs soon discovered that
vocational skills were often not enough to ensure successful
functioning within society. Because they realized that most
disabilities also involve social impairment to some degree, they
began to prepare veterans for successful social interaction as
well. In order to do this, they began recreation activities for
veterans including basketball, euchre tournaments, and bowling.
It was found that by helping disabled veterans to become reha-
bilitated socially and emotionally, as well as vocationally, they
become more capable of being active members of society. Since
1947, Goodwill Industries have expanded the above mentioned
programs to provide services not only to veterans, but to all
disabled individuals.7

The term "therapeutic recreation" had its birth during the
early 1900's as did a determination to provide an opportunity for
all disabled persons to play a part in society's functioning.
Because of this determination, such research and emphasis on
experimental programs in the area of recreation used to meet the
needs of the "whole" person were evident in the time span from
1950 until 1970. Programs such as the National Wheelchair
Athletic Association, The National Association for Blind Ath-
letes, and a variety of experimental camping programs began to
thrive during this period.8
The Special Olympics is a prime example of the programs developed between 1950 and 1970, which have been refined and expanded to a point of excellence. This experimental program for those who are mentally handicapped was begun under the leadership of Eunice Kennedy Shriver and Sergeant Shriver in the late 1960's.

The program was funded by the Joseph P. Kennedy, Jr. Foundation and began with the following goals: 1) To provide the mentally handicapped with the opportunity to compete in various sports activities. 2) To provide a means for altering community attitudes toward the mentally handicapped. 3) To provide an avenue for the development and implementation of additional programs, and 4) To improve existing programs for the mentally handicapped.

The first Special Olympics meet was held in 1968 in Chicago, attracting 1,000 athletes. Since that date, the program has spread to all fifty states and twenty foreign countries. Today over one million athletes now participate in fourteen official sports including: basketball, floor hockey, skiing, ice hockey, swimming, and track and field.

With continued civil rights advances, advocacy efforts, consumer demand, supportive legislation, and an increasing attitude of respect and acceptance of the person who is disabled as an equal and active member of society, there will be a dramatic growth in the area of therapeutic recreation in the future and a need for specialists who can provide direction for this growth. Funding reductions under the Reagan Administration have, however, inhibited this growth and forced programs to have an exaggerated dependence upon volunteers. If the progress of
therapeutic recreation is to continue, increased funding for programs, advocates, and professional staffs are a must.

A Historic View of Residential Camping for Special Population

Residential camping has been and will be a key component of the above mentioned growth because camping provides a "total environment" therapeutic experience. Camping could be called the grandfather of many recreation programs for special populations because it provided a safe atmosphere in which to test pioneer attempts to allow disabled children to participate in "normal" activities. While the history of camping for special populations very much parallels that of therapeutic recreation, the camping movement has suffered some very specific and unique growing pains.

Early camping programs for the disabled often did not distinguish between the mentally and physically disabled, but rather served both populations through the same program. Because of the lack of specific information on camping with the mentally disabled, I will be focusing upon the history of camping programs primarily for those with physical disabilities.

In 1888, Burnett Cottages was opened by the Children's Aid Society of New York. This was the first residential summer program, though its purpose was to provide physical care rather than a therapeutic camping experience. It was the first residential program aimed at improving the quality of life for the
disabled child and his family. Like Hartan Cottage, most facilities at this time were located in the eastern United States, and served as homes for the child with a severe disability who could not be cared for at home during the summer months when residential schools were not in session. Due to the untiring efforts of two Chicago school teachers, Emma S. Haskell and Florence E. Robinson, the Chicago Board of Education supported the first actual camp for disabled children in 1899. The camp consisted of only a two week program in Ravina, Illinois; but because of its tremendous success, the board extended sponsorship to a two month camp in Michigan the following summer. In 1901, the camp was relocated to Browns Lake, Wisconsin, where the Outing Association for Crippled Children was founded. Camping for disabled persons then had its first permanent site. As can be seen, educators took the lead in the development of camps for the physically disabled, a trend which is still true today.10

Around 1919, community service organizations also began to play a prominent role in camping. In that year alone, Rotary Clubs sponsored and helped to administer camps for the disabled in Rochester, Port Huron, Cincinnati, Newark, and Akron. Other organizations soon followed this precedent, with the National Society for Crippled Children taking the foremost position, as the following statistics indicate; in 1930, the National Society for Crippled Children had twenty camps serving one thousand children; in 1940, thirty-five camps serving four thousand-two
hundred; in 1944, fifty-six camps serving five thousand-five hundred and eighteen children.

The number of camps in each state and the degree of professionalism among staffs across the country continues to increase dramatically. More importantly, camps provide an instrument through which public attitudes toward the disabled person can slowly be altered—a vital function they continue to perform today. In the 50's and early 60's camps for persons with disabilities became a great source of pride for the American public. Not only were disabled persons no longer institutionalized, but now they were provided with educational and recreational opportunities. The general public saw this as the gift to the disabled from a generous society, rather than a right of those who have a contribution to make to that society. This attitude was and is very frustrating to professionals in the areas of education and recreation who have experienced the potential of disabled persons firsthand and strive to develop that potential. One must realize, however, that an attitude of benevolence from the majority is an inevitable stage of attitudinal awareness of a special population. It is more important to focus on the fact that as a result of the widespread popularity of camping the public began to see children with disabilities doing the very same things that "normal" children do, on a consistent basis and in a natural way.

During the late 50's and early 60's, the idea of integration of the disabled and non-disabled had its birth, however, segrega-
tion of the disabled and able-bodied was still very much the
implicit, if not the explicitly stated rule. The following quote
is an example of the wariness of integration which prevailed
according to Mary Crawford, "The camper who is handicapped had
the same basic needs as the non-handicapped but his needs may be
quite different in degree."12
A study by Drs. Myer and Houk in 1968, also points out as an
element of increased awareness of the disabled child, yet a
certain reluctance to place him in a non-specialized environ-
ment. Their survey questioned two hundred and twelve Virginia
camp directors concerning their acceptance of disabled campers.
Two-thirds of the directors said they would accept children with
some degree of handicap, but half of that two-thirds said they
accepted only those with "minor" handicaps, such as, arthritis,
scoliosis, and diabetes. Reasons for not accepting a disabled
child were as follows: (1) Surroundings are too dangerous. (2)
Directors feel parents would prefer their children to be with
other handicapped children. (3) Such children are an embarrass-
ment to other children and (4) Excessive demands would be made
upon staff.13

Integration and mainstreaming of the disabled child became
increasingly popular in the late sixties, and have steadily grown
into one of the most controversial issues in camping for children
with disabilities in the eighties. Thus, no history would be
complete without discussing this issue. Currently each state
provides camps exclusively for children with disabilities, and
most offer an opportunity for integration. According to John Tringo and Edwin Martin,

stereotypes are a major barrier to successful integrated camping. These images whether positive, such as "handicapped people have such patience and courage"; or negative such as "handicapped people are sickly" are harmful because they produce unrealistic expectations and treat all handicapped persons as a class with a different set of attributes. These stereotypes are frequently reinforced as both the handicapped and non-handicapped populations react to them rather than to persons.14

Frequent contact during all daily living activities such as working, playing, sleeping, showering, and sharing is the most successful method of removing stereotypes. Camps provide the ideal environment in which to dispel stereotypes and promote cohesiveness.

A Further Description of "Invisible" Disabilities
as They Relate to Residential Camping

As is evident from the previously stated history, residential camping for special populations is not a new concept. Programs for those who have "visible" disabilities have become particularly prominent in today's leisure oriented society. But what is being done for the child with an "invisible" disability? As previously stated, the "invisibly" disabled child appears normal, but is handicapped in situations which require behaviors which he or she is not capable of performing. Before expanding further upon each "invisible" disability as it relates to the camping environment, it is important to point out that disabled
children cannot be neatly fit into diagnostic categories like pieces into a puzzle. Each child is an individual who presents a variety of handicapping conditions in varying degrees of severity, and in a variety of combinations. In the past "invisible" conditions were recognized only when a "visible" handicap was also present. Such children were then placed in programs such as those already discussed. Children with no presenting disability were often viewed as spoiled, stupid, poorly behaved, or odd. Within the past twenty years specific programs have been designed and refined to meet needs which are unique to the child with a disability which is not readily detected. In order to provide a more clear understanding of these children and the camping programs available, definitions and descriptions of the various disabilities will be given as they relate to the camp environment. According to Woody, the emotionally disturbed child is one "who cannot or will not adjust to the socially acceptable norms of behavior and consequently disrupts his own academic progress, the learning efforts of his classmates, and interpersonal relations."15 Because of intrapsychic conflict or social learning difficulty, these children are often unable to:

1. accept themselves as individuals deserving of respect,
2. interact with peers in a consistently acceptable manner,
3. interact with authority figures such as counselors, teachers, or parents in a productive fashion, and
4. engage in "normal" affective, psychomotor, and cognitive activities without inordinate frustration and conflict.
When placed in the camping environment, the emotionally handicapped child may exhibit any of the following behaviors as well as many others: emotional instability, attention seeking, negativism, verbal aggression, physical aggression, chronic disobedience, disruptive group behavior, sexual deviation, psycho-somatic complaints, poor self-concept, impulsiveness, hyperactivity, withdrawal, passive-suggestable reactions, and age inappropriate reactions, and age inappropriate behavior.16

Children with specific learning disabilities exhibit a disorder in one or more of the basic psychological processes involved in understanding or using the spoken or written language. These disorders may be manifested in difficulty in thinking, talking, reading, and writing. The child may also manifest various motor, sensory, and cognitive handicaps. Problems with running, jumping, skipping, throwing and catching are not uncommon. Difficulty in working with small objects requiring fine motor skills may lead to frustration. Lack of fine and gross motor skills, other basic skills, and a positive self image may be brought by the child to the camping environment.17

The socially, economically, and/or experientially deprived child is one who because of the inadequacy, starkness, and harshness of his environment (in comparison with an environment generally assumed to be favorable) is unable to learn the skills anticipated among children of a similar age and development stage.18
These children come to camp lacking basic skills and a positive sense of self and exhibiting problem behaviors.

Thomas Shea lists the healthy hyperresilient child as the fourth example of those who have an "invisible" disability and can benefit from camping experiences. According to Redl,

They are youngsters who are perfectly healthy— as normal, clinically speaking, as anyone might wish a child to be. In fact, being healthy, they have a sharp nose for situations which are putrid, for life experiences which are sickening, for teacher or parent behavior which is downright impossible on any count. In short, these children smell situations which are bound to make them either nasty or sick. Their behavior is a means of preventing them from becoming either. They defend themselves against damage and against threats to their inner balance.10

Behavior problems and a lack of skills are again brought to camp, as well as a strong need for consistent and positive role models.

Benefits of Residential Camping for "Invisibly" Disabled Children

Camps specifically for "invisibly" disabled children can benefit campers in a variety of ways. They, like all children, seek fun, acceptance, challenge, learning, and change. Camping is a vehicle for the child to meet these universal needs as well as those needs which are special and unique to each camper.

The benefits of residential camping vary according to each camp's purpose. However, regardless of special purposes, each child will obtain some degree of personal, social, emotional, cognitive, and psychomotor benefits. Before examining specific
camping programs, the benefits of camping which give purpose to each program’s existence will be discussed.

Accurate diagnosis of a child’s disability as well as his/her abilities is one benefit of residential camping. It is difficult to carry out a comprehensive multidisciplinary diagnostic evaluation without an extensive expenditure of time, funds, and professional effort. An intensive, comprehensive evaluation can also be very time consuming for the child, the parents, the teachers and mental health professionals. The camp environment can add precision and decrease the duration of the diagnostic process. The child is available at the convenience of the evaluator, structured and unstructured situations are available in which to observe the child, and the camp staff can provide additional diagnostic data.20

Placement decisions for residential treatment can also be made more accurately as a result of time spent in the camp setting. Camp is an especially positive alternative when short term placement becomes desirable due to the severity of the child’s disability. Because camp has a very positive public image of health, fun, adventure, and "normalcy;" the stigma of hospitals, centers, and mental health facilities is non-existent. Camp can also test the child’s response to living away from home and the parents’ ability to deal with issues involved in placing a disabled child into residential care for an extended period of time.21
The child receives educational benefits as a direct result of the camping experience. Individualized education programs can be more accurately developed as a result of observing the child in a wide variety of circumstances at camp. Camp experiences can also serve as a bridge for mainstreaming a child from special classrooms into regular classrooms by building the child's self-confidence and social skills. Skills related to excellence in school can be discovered through nature and athletic programs, while reinforcing appropriate behaviors at the same time. Most importantly, however, the academic, social, and emotional regression, which frequently occurs in children over the summer, can be inhibited or eliminated.

Social benefits also occur as a result of living in a camping environment. Social skills are especially significant because they will later determine how effectively the child is able to participate in society. Because camping requires that the child function as a member of a small group as well as a larger community, the child will be exposed to the following social concepts: how to get along in a group setting; why personal wishes must sometimes be subordinated to the wishes and needs of the group; that sometimes one must engage in undesirable tasks in order to participate in group activities; how one's behavior affects others, and the behavior of others in turn affects one's own; and how to be responsible for others as well as for oneself.22
Learning skills which require group effort are often very difficult for children with an emotional component to their disability. Residential camping provides an ideal setting for the child to develop and practice these skills. For example, if an overnight camping excursion is to succeed, someone must build the fire, etc. No one person can perform all of these tasks; and time spent fighting or doing something other than one's assigned task, will detract from the pleasure of camping. Initial attempts at this type of cooperation will be frustrating to the child, but camp provides an environment which is paced and structured to reduce these frustrations through continued success oriented experiences.

The child also receives emotional benefits from camping as he/she is encouraged to release and express emotions without concern for embarrassment or reprisal. Whether real or imagined, positive or negative, the child can release energies under the guidance of a counselor who can help him or her to channel them into meaningful actions. The child is also given the opportunity to experiment with alternative behaviors which are more acceptable. Campers can also learn about behavior oriented discipline which is focused upon his/her behavior rather than on himself/herself. He/She also leaves of the limitations which must sometimes be placed upon his/her behavior if his/her emotional expression interferes with the safety or well being of another individual. For example, if a child strikes another child because he/she is angry about not winning a race, he/she can be
removed from the situation until his/her anger is under control. The counselor can then discuss feelings about losing with the child and encourage him/her to return to the situation and act responsibly toward the child he/she hit.

Residential camping for the "invisibly" disabled child can also benefit families, teachers, and counselors. For parents and siblings, living with a child with a disability twenty-four hours a day, 365 days a year can require great patience, sacrifice, persistence, and intense involvement. Time at camp can provide respite from constant anxiety and concern which can sometimes occur in families. For counselors and teachers, camp provides an opportunity to see the child as an individual with many facets, rather than seeing him only as a child with problems in their area of professional focus. More positive interaction can occur as authority figures observe the child functioning in a total environment. This can reduce the occurrence of negative discipline, which frequently results when parents and teachers deal daily with a child who consistently displays inappropriate behavior. All of the previously mentioned benefits can result from well run residential camping programs.

What Types of Programs Does Residential Camping Have to Offer the "Invisibly" Disabled Child Today?

There are a variety of methods, programs, and places in which these benefits can be brought about in the "invisibly" handicapped child. According to the 1984 Parents' Guide to
Accredited Camps, there are over three-hundred-twenty-five camps in the United States which strive to meet the needs of the learning disabled and/or emotionally handicapped/behaviorally disordered child. Many of these camps are residential in nature—attempting to make sure of total environment oriented therapies. A portion of these camps are also mainstreamed in order to give the child with some form of disability an opportunity to interact with those who have no disabilities in an environment which encourages uniqueness, tolerates difference, is structured to allow for expression, and a positive experience of both success and failure, and is much less competitive an environment than that which is encountered in the school setting. It is also evident in looking at a survey of accredited camps in the United States that camping is expanding rapidly from a mere summertime tradition to a professional industry which has become a tool to meet needs and provide skills to many groups in our society. For example, many camps now run year-round, comprehensive programs and employ fulltime professional staff teams. Often camps today offer several different types of camping which are off-shoots from their base programs.

According to the Exceptional Parent magazine, there are ten important questions a parent or concerned professional should ask before selecting a camp for a child with special needs. They are as follows:

1. What is the ratio of campers to staff? How old are staff members? What are their backgrounds and training?
2. Are personnel oriented to special needs of individual
campers? What is included in staff orientation? Have the staff worked previously with individuals with disabilities?

3) What are the major objectives of the program? Have generalities been broken down into specifics such as, participates in at least three cook-outs or chooses appropriate clothing and materials for activities?

4) Are activities adapted to facilitate all skill levels? Do campers have a wide choice of activities? Is there a range of activity options, including some which are not new to the child?

5) Have well developed safety and emergency procedures been well defined? Are facilities clean and in good repair?

6) Is there adequate parental involvement in the program?

7) Are medical personnel on staff or on call throughout the program?

8) What is the cost of the program to parents? Are campervips available? Is transportation provided? Is insurance included in the cost? Are there any additional fees or supplies?

9) Does the camp employ any staff members with disabilities? Are possible vocational skills a component of the program?

10) Is a post-camp evaluation used to improve the program and better meet participants needs?

Camp Nuhop, One of Today’s Finest Programs for “Invisibly” Disabled Children

I have chosen to focus attention on Camp Nuhop, an Ohio-based camp for all learning and behaviorally disabled children because of the availability of information, the progressive and professional nature of Camp Nuhop, and its reputation for excellence within current publications in the area of residential camping. Camp Nuhop is impressive because it represents a professionally run camp with clearly defined goals and very concrete definitions of success. In fact, Camp Nuhop received national recognition when it was given Honorable Mention from the
Exceptional Parent magazine for the best summer program involving children with disabilities. All of the following information was obtained from Mr. Jerry Dunlap, current director of Camp Nuhop.

Mr. Dunlap founded this camp as a private, non-profit corporation in 1974. The idea for this program came about as a result of Director Jerry Dunlap's experiences in environmental education as Director of Ashland City Schools' Environmental Education Program. He found that students were more eager to learn within the boundaries of nature, and also came to believe that this type of education could significantly contribute to the building of a positive self-concept in the classroom, and society in general. Jerry Dunlap and his wife, Torrie, founded Camp Nuhop in hopes of helping learning disabled and other "invisibly" handicapped children to reach their fullest potential. The camp is now also by a Board of Advisors and Board of Trustees who meet monthly in order to further develop goals and objectives of the program.26

As previously stated, Camp Nuhop is based upon the principle that children thrive upon success. The remainder of the camp philosophy, as obtained from the camp manual, is obviously derived from that basic principle. The philosophy is as follows: "We feel a child must think highly of himself and believe in his own self-worth before productive learning can take place. So at camp, children are not only "trying to learn" they are "learning to try." 27 It is also part of the camp philosophy that learning is by doing. Daily activities combine basic
academic skills, problem solving, and socialization skills. Activities include: a trip to the cemetery to learn pioneer history and exercise math skills by calculating ages; building a bridge to practice following directions and develop coordination and balance, and swimming and painting to build motor skills. It is also a part of the Camp Nuhop philosophy to base programs on a hierarchy of development of children. Difficulty and intensity of activities increases as the child progresses from one year to the next.

Principles of transactional analysis and behavior modification are applied throughout activities at Camp Nuhop in hopes of carrying over successes into the school and home environment. Many "invisibly" handicapped children have experienced a high degree of frustration and failure, and transactional analysis techniques can help to negate the weak self-concept which may result. At Camp Nuhop, Warm Fuzzy sessions are held daily using TA for Tots or TA for Kids depending upon the child's age. During this time campers learn to recognize and cope with feelings both positive and negative that one experiences when interacting with others. Concepts presented in group sessions are carried into other daily activities by the following methods: "1) In dealing with transactions, a camper will give a "warm fuzzy" (a cotton ball) to communicate a positive feeling to another individual. In contrast, a "cold prickly" (a dried bean) denotes a negative feeling, and 3) Campers are encouraged to identify the three ego stages (Parent, bossy me: adult, thinking
may and child, feeling well in their daily life to guide them in interpreting interactions with others." 28

In addition to transactional analysis, behavior management techniques are employed in order to control and deal with behavior disorders. A point system, privileges, and group recognition are used to reinforce acceptable behaviors. A family picnic is held at the end of each session where each child is given a unique and personal award to recognize his special improvements and accomplishments. As a part of behavior management, each staff member keeps a detailed record of all activities and successes for each child. This then takes the form of a behavioral checklist and narrative evaluation which is given to the parents. Suggestions and methods of dealing with the child are then offered to the parents by professional staff members in order to inspire carryover of treatments into the home environment.

Beyond summer camp, Camp Nuhop’s emphasis upon a total program is carried out in the following manner. Initially, a questionnaire application is completed by the family that includes questions concerning abilities, social adjustment, and desired outcomes of the camping experience. Included with this application is a teacher’s evaluation in order to obtain a clear picture of the child’s school performance in regard to the same criteria. The staff member assigned to work with the child then arranges a conference at the camp in order to get acquainted and make general observations and informal assessments concerning
social interaction skills and motor development in order to
secure compatible grouping. During the conference the child is
able to meet with other members of his group and interact
with them briefly. The conference helps to ensure that there are
no blatant conflicts among staff and children which would disrupt
the camp setting so significantly that a child’s needs might not
be met as effectively as possible. The conference is mandatory
unless distance or other environmental factors make the family’s
presence unfeasible in which case a telephone conference is
substituted.27

Once basic program requirements have been fulfilled, there
are eight possible camping programs offered at Camp Nuhop from
which parents and children may choose. All first year campers
are asked to attend Exploration Camp unless they have had
extensive camping experience. It is important to remember at
this point that although there are specifically designed pro-
grames, each child has an individualized program developed by
staff members to meet his particular needs. No child is expected
to fit into a pre-determined program because very often it is
these types of expectations which have hindered the child from
reaching his/her potential in the past. Because of this struc-
ture, Camp Nuhop can become for each camper whatever he or she
needs it to be.

According to the camp manual, Exploration Camp is the first
program option offered to campers at Camp Nuhop. "This camp
includes indoor pool instructional swimming, free swimming at the
lake, boating, crafts, hiking in the out-of-doors, nature study, field trips, games, cookouts, and an overnight campout. All of these areas informally incorporate basic academic concepts. Transactional analysis sessions are held daily in which campers develop a positive self-concept through the exploration of feelings, actions, and their consequences. All campers participate in the Muhop Olympic Games. Campers are grouped on the basis of strengths and weaknesses as well as social skills. The groups are as unique as the campers, with camper and staff ratios ranging from 1:1 to 3:1, in order to achieve a flexibility that ensures a positive camping experience."

A second option at Camp Muhop is Wilderness Camp. The basics remain the same; however, emphasis is placed on acquiring specific skills such as canoeing, firebuilding, nature lore, and outdoor living. Academic and self-concept development skills are reinforced by nature oriented activities. Frequent overnight trips are involved and activities are designed to encourage communication and group relationships through cooperative tasks. Socialization skills and environmental awareness are key components for those returning campers who are prepared to learn to cope with nature and each other on a most basic level.

Junior Leader Camp is another option for returning campers over the age of sixteen who would like to continue to benefit from the Muhop environment. Junior Leader Camp is intended to ease youth from the role of camper to that of helper. Junior leaders come together as a separate group in order that a bond
might form among them in the first few days. The following areas are discussed and role-played to help them better understand their jobs: how to handle authority and its limits, how to deal with problem behaviors, and how to handle responsibility. Once it is evident that the young person has grasped these skills and concepts, he or she is placed in his or her own group, only meeting with other junior leaders once a day to discuss mutual concerns and encourage one another. Junior leaders also are frequently in charge of all-camp events in order to build group unity and cohesiveness. Successfully fulfilling a leadership role can immensely increase the confidence of a youth with an "invisible" disability. If he or she can begin to build an image of himself or herself as a leader, he/she will become less hesitant to project himself or herself in that role in the classroom, social situations, and the working world of later years.

Backpack Camp is the fourth program offered at Camp Nuhop. This program is recommended for the oldest and most mature campers, because it demands a combination of the skills acquired in each of the other Camp Nuhop experiences. A ten day adventure trip in the Ohio area serves as preliminary preparation for the actual backpack trip. During these ten days, outdoor cooking and living skills are refined, trust in self and other group members is tested and developed, and self endurance needed for the actual backpack trip is built. When these tasks are accomplished and
can be demonstrated, campers board a bus for New York or West Virginia where they will spend seven days exploring the area living solely from their backpacks. Throughout this time, not only are endurance and skills tested, but special emphasis is given to expression of feelings and listening skills which are needed for growth producing interaction with others. For those who own ten-speed bikes and are in good physical condition, Camp Nuhop offers a bike camp similar to the backpack camp as a fifth program option.

Branching-off in the opposite direction, Camp Nuhop offers a Motor Development Camp for parents and their children. A parent must attend with the child as it is an attempt to teach the parent specific skills to meet the special needs of his child. Because many "invisibly" disabled children experience great difficulty in developing motor skills, this camp focuses on meeting needs in the areas of: gross motor, fine motor, perceptual motor, games, swimming, and family activities. Parents learn the art of educational play and leave with the knowledge and thorough understanding of a variety of activities to help their child. Teaching these skills is an attempt to increase playground activity and neighborhood participation, thus building upon self-worth. This camp is designed for returning campers who have been recognized as needing additional work on motor coordination.

By offering ADC camp, Camp Nuhop offers yet another unique and different experience to "invisibly" handicapped children.
ACE camp focuses and capitalizes on the endless capacity of the human senses. This program provides many experiences from Van Meter's book *Acclimatizing*. Campers are exposed to the most sensory experiences possible such as, mud baths, bog crawls, and marsh wading. Blindfolds, earplugs, and other tools are often used to encourage the child to emphasize one sense over another.

It is hoped that by this experience the child will learn to know, understand, and like himself in a very intimate way. He/she will also understand that his/her perception of the world is highly influence by his/her senses and the sights, sounds, and smells he or she takes in. The child will benefit by knowing that perceptions are uniquely his/hers, and it is good that they are not necessarily the same as those of others around him/her.

As the final two program options, Camp Nuhop offers Crusoe Camp and Canoe Camp. Both are final programs which represent a culmination of all other programs combined. In Crusoe Camp, the focus is on simplicity and isolation from society. Independence and inter-dependence among group members is stressed and tested to the limit. These words from a Crusoe camper best describe the impact of the program. "It's calm there. You can go there and sit and think. To get yourself together, about things you'd like to do. About things you'd like to try. Also about the past and the future. All life and civilization leaves you alone. Just sit there and think. Away from people." Canoe Camp is very similar to the backpack and bike camps with the exception that it takes place on the waters of the Mohican River and requires an
even greater level of physical and emotional strength and endurance.

It is obvious that Camp Nuhop is a fine, broad-based, professional program which strives to meet the needs of children with "invisible" handicaps in a way so as to make a permanent impact. Before moving on to more general concerns, I feel it is important to look at more concrete areas of Camp Nuhop such as facilities, and costs. These are crucial factors in the development and future of camping for special populations which are often neglected as secondary in current literature. Again I will use Camp Nuhop as an example because it is fairly representative of campings' best and also gives the reader a more concrete picture.

Camp Nuhop is non-denominational, but is housed at Camp Wesley in the eastern part of Ohio near Perrysville. Facilities include: a large dining hall, large lodge, small lodge used as a classroom, ten cabins, three shower areas, and a staff house. The camp is surrounded by the 3,000 acre Mohican Forest and Pleasant Hill Lake Park. Any boy or girl, ages six to sixteen, who manifests a learning disability and/or behavior disorder is eligible to take part in programs at this facility. The cost for the 1984 camp season was three-hundred dollars for a seven day session and three-hundred and seventy-five dollars for the backpack camp. Fees include: pre-camp session, cabins, modern facilities, prepared meals, medical insurance, general supplies, use of equipment, a professional staff, a T-shirt, a transac-
tional analysis book, boat and canoe rental, entertainment for songfest, and final evaluation. While this may seem overly-expensive, it is important to note that campers are accepted on a first come basis, and no child is turned away due to insufficient funds. Camperships are available for those children whose parents cannot afford camp fees.

The Camp Staff and its Crucial Role in the Success of Residential Camping for "Invisibly" Disabled Children

One crucial component of camping purposely neglected until now in order to give more complete discussion and emphasis is the camp staff. Having been involved in camping for many years and having done a great deal of reading in the area of camping for special populations, it is my conclusion that even the most excellent of facilities and programs can fail to produce results if not staffed by a dedicated group of persons who are able to work well together as a team. Knowledge, professionalism, and skilled delivery techniques are very much a top priority for all camp staff. Even these, however, may fail if not backed by dedication, desire, mutual respect for campers and other staff members, and an unshakable belief in the endless potential of the campers they serve, without regard to disability or other handicapping factors. Some camps, such as Camp Nuhop, are staffed entirely by professionals and will hire only certified educators and psychologists. While others such as Camp Roy-el in
Traverse City, Michigan depend entirely upon a volunteer staff. With appropriate training and supervision both types of staff can fulfill the purposes of a camping effectively. It is most important, however, that each staff member be authentic.

Authenticity is not easily measured in employment applications and personal interviews. However, there are several characteristics the interviewer should seek in those applying for counselor or instructor positions. According to Thomas Shea, the first is self-insight. The person must have a clear understanding of his/her motives for wanting to work with children who have special needs, and he/she must have insight into why he/she engages in the activities which take priority in his/her life.34

Self-acceptance and realistic self-confidence are also qualities to search for when forming a camp staff. The counselor must accept himself or herself as he/she is but also have a continuing desire to grow. Confidence in the ability to be an effective counselor is a must; but the prospective counselor must not be so overly confident that he/she is not open to constructive criticism or instruction. Over confidence can result in an exaggerated sense of responsibility which can lead to "burnout" or foolish risks in order to prove himself/herself. Camp staff must be able to state honestly their strengths and weaknesses.

Love and acceptance of children and a sound understanding of their behavior must also be demonstrated by those desiring to be counselors. The counselor must be consistently demonstrative in his/her love for the children under his/her care; yet realize
that love and compliance are not always synonymous. Love is sometimes demonstrated through discipline, and particularly if the child has a behavioral disability, the counselor must reject deviant behaviors while maintaining acceptance of the child as a valuable and capable human being. The counselor must also be aware of and deal with any prejudices he/she may have including those based on race, physical appearance or deformities, intelligence level, or deviant behaviors.

The counselor must also possess curiosity and a willingness to learn as well as flexibility. Like the child, the staff member must be curious about the world and have a desire to explore it enthusiastically. The counselor must be flexible because he/she will frequently be confronted with boredom and resistance from campers. For the sake of the children, he/she must know when to change or alter activities in order to meet a stated objective.

Patience with self and children and a sense of humor are also necessary characteristics of effective camp counselors. The counselor must recognize that he/she is imperfect, and also be able to recognize that learning is a slow and complex process for counselors and campers. However, in the counselor’s patience he/she must also be continually moving in order to obtain their goals and support and assist the campers in reaching theirs. A counselor without a highly developed sense of humor will never survive at camp for children with special problems. Stress and energy levels are constantly high, and the counselor who cannot
laugh at the mistakes and incidents which are a daily fact of life will surely cry.

A balance of these characteristics indicates the potential to be an excellent staff member. However, those desiring to be counselors must have or be equipped by the director with specific skills. The counselor must:

1) Establish routines in the daily life of his group.
2) Set and enforce behavior limits. The counselor must accomplish this task without becoming emotionally involved.
3) Not permit emotionally charged situations to get out of control. The counselor must intrude himself into the conflict and cause it to stop.
4) Be consistent. Children are confused by counselors who condone a particular deviation today but will not condone it tomorrow.
5) Personally investigate a situation before acting rather than acting on second or third-person information and rumors. The counselor must confer with all persons involved in an incident.
6) Ignore certain behaviors. Many behaviors manifested by "invisibly" handicapped children are normal and age-appropriate. Other are simply not important enough to respond to. The counselor must be selective in responding to and ignoring behaviors.
7) Communicate verbally and nonverbally with children. The counselor must talk with children not to children. He must learn that many of the things in this world he considers to be universal knowledge are mysteries to his campers.
8) Learn to avoid confrontation when it is therapeutically appropriate. Yet the counselor must confront situations when necessary for the benefit of the child or group.
9) Learn to change program activities for the therapeutic purposes. Some counselors are so personally committed to "this thing" that they fail to realize campers needs.
10) Work independently and as a team member but communicate with peers and supervisors.
11) Make a direct appeal to a camper or a group when their actions are confusing or discomforting. Many times a direct appeal to the humaness and common sense of a child will solve a problem as quickly and effectively as a lengthy discussion.
12) Provide each camper with security. The counselor must communicate to the child who is in a new and strange
environment at camp, that he will be protected by the
counselor from any physical or psychological harm. 37
The counselor seldom arrives at camp with all of these character-
istics and skills. They learn through experiences with the help
of a competent supervisor, fellow counselors, and preservice and
in service training sessions.

Possible Roles for Those in the Residential Camping
       Helping Profession

Although the counselor is the primary source of day to day
interaction with the children, the administrative staff plays a
very important role in making certain that this interaction, and
the camping experience itself is successful in meeting the
child's needs and having some degree of permanent impact upon the
camper's life. The administrative staff is headed by the
director, who must have the professional skills to deal with a
multitude of tasks. Although the director is usually assisted by
qualified assistants and coordinators, final responsibility for
all decisions affecting staff, campers, and programs ultimately
rest with him/her. The director's duties include: planning for
camp six to eight months prior to pre-camp training, hiring a
qualified and capable staff, managing site and facility, training
staff, and supervising staff. The director is also responsible for
all budget matters including food and supplies, public relations
including fund raising and prent conferences, all emergency and
medical procedures, camper and staff recruitment, and volunteer
recruitment and supervision. Though these responsibilities are
divided differently at every camp, the director of every camp is responsible for establishing, developing, and maintaining an environment which facilitates growth of programs in the future and is in accord with needs of the clientele served and the purposes of the camp. This involves constant evaluation and revision of goals and objectives. This also means that the director must be skilled in staff leadership in order to bring out the full potential of staff.

The program director and staff are also very important to the success of residential camps for the "invisibly" handicapped child. Programming must be done to accommodate each hour of a child's day taking into account at all times the individual needs of campers as well as group goals. Staff members who will be responsible for supervision need to be included in programming, and each activity should have clearly defined goals and objectives as well as detailed instructions for those who will be carrying out the activity. Structure and precise planning reduce the natural potential for boredom, anxiety, and chaos which can result in children unfamiliar with the camping environment and greatly detract from the benefits camping holds for the child. It is important that everyone at camp knows who will be where, for what purpose, for how long, and with whom. This structure, however, should not be interpreted to mean inflexibility. Changes on a daily and sometimes hourly basis due to rain, special events, or special visitors are a fact of life for the program director. Back-up schedules should always be prepared.
The program director is also responsible for: forms and schedules; special events such as field trips; olympics, and overnight camp-outs; parent programs; orientation, staff meetings; and staff evaluations as well as assisting the director whenever necessary. Professional skills are pertinent to the success of residential camps for children with "invisible" disabilities.

The number and types of staff members in addition to those already mentioned vary from one camp to another. However, due to recent funding cuts, most camps now depend upon volunteer help to some degree. Volunteers often assist counselors as the number of children served increases each year. As camping programs for children with "invisible" disabilities grow and expand into more than brief, summertime, fun experiences; the need for experienced professionals to train and supervise counselors and volunteers will increase dramatically.

Given proper preparation, helping professionals could make a major impact upon the future of the camping movement by providing this training and supervision. They could also be instrumental by bringing skills specific to the helping professions to year-round administrative camping positions.

Summary

In this paper I have attempted to expose the reader to the various facets of residential camping as it relates to the child who has an "invisible" disability. In order to do this, I first
defined the population of "invisibly" disabled children who would be discussed within this paper. Secondly, I provided a history of therapeutic recreation and its relationship to the role disabled individuals have played within society in order to help the reader to clearly understand the unique and critical role recreation has played in the integration of disabled persons into mainstream society. A brief history of residential camping for the disabled was then given to give the reader background information concerning the evolution of today's programs specifically for the "invisibly" disabled child, and how that lends direction to the future. I then further defined "invisible" disabilities as they directly relate to the residential camping environment and discussed at some length the various benefits of the residential camping experience for the "invisibly" disabled child. In the following section, I provided the reader with an in depth look at one of the nation's finest and most up-to-date residential camps for "invisibly" disabled children, in order that he/she might fully realize the professionalism, excellence, and potential which is inherent in many of today's programs.

Within the final portion of this paper, I discussed the camp staff and its importance to residential camping as the staff is what will make or break even the finest of camping programs. My hope in doing this was that the reader, particularly those within the helping professions might not be limited in seeking career opportunities in the area of residential camping due to a lack of awareness concerning the professional skills required and
personal qualities desired to be effective on a residential camp staff team.

Conclusion

In writing this paper, I have attempted to demonstrate that residential camping has depth and therapeutic value far beyond that of a mere summertime fun experience, particularly for the "invisibly" disabled child. Frequently, the educational aspects of an invisible disability are addressed to the exclusion or neglect of social, recreational, and familial needs—despite the fact that it is the meeting of these needs that may determine whether the child will become a productive and successfully functioning member of society. Members of the helping profession have a responsibility to become aware of the total environment therapy and knowledgeable of the wealth of resources available within today's broad-based professional, residential camping programs.

To promote the above mentioned awareness of residential camping and the "invisibly" disabled child, I attempted to provide the reader with basic information including: the background of camping, camping today, possible roles for helping professionals and most importantly, the needs and potential of the "invisibly" disabled child. Given this information, those of the helping professions must begin to accept their responsibility for the well being and quality of life for the child with an
"invisible" disability, and take an active role in the future of residential camping—in acknowledgement of its therapeutic potential and potential to be a tremendous asset as the helping profession seeks to improve the quality of life for the clients it serves.


8 Ibid., p. 104.


11 Ibid., p. viii.


16 Shea, p. 6.
17 Shea, p. 7.
18 Ibid.
20 Shea, p. 9.
21 Shea, p. 10.
22 Shea, p. 11.
23 Ibid.
27 Dunlap, p. 4.
28 Dunlap, p. 5.
29 Dunlap, pp 8-9.
30 Ibid.
31 Dunlap, p. 11.
32 Dunlap, p. 16.
33 Dunlap, p. 19
34 Shea, p. 179
35 Ibid.
36 Ibid.
37 Shea, pp 171-172.
Bibliography


