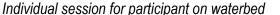
## **Exploring Snoezelen environments**

I am extremely grateful for the opportunity provided by the Margaret M Blackwell Travel Fellowship to travel overseas this year to explore Snoezelen environments. My main focus was to identify ways in which controlled multisensory sessions could be utilised to support transitions that hospitalised children face, such as coming from home to hospital, and moving from one area of the hospital to another. While I had already observed benefits that our regular sensory sessions provided to patients and families on the Neuroservices ward (such as reduced stress and anxiety), I was keen to explore in greater depth how other professionals utilised Snoezelen sessions to support potentially difficult transitions faced by individuals.

My journey started in Korea at the Seoul Rehabilitation centre, which housed two Snoezelen rooms as well as a portable Snoezelen wagon. Over two weeks I attended a comprehensive training course about the Snoezelen approach and participated in practical sessions that focussed on planning, implementing and evaluating Snoezelen sessions for different participant groups (such as children with ADHD, young people with cognitive and physical disabilities, and adults with Alzheimer's).







Preparing the environment for a group session

One of my highlights at the centre was observing a Snoezelen session provided for two young siblings. The use of the children's favourite story (The Rainbow fish) was incorporated into the session to provide a sense of familiarity and comfort, thus supporting the children's transition from home to the centre. An underwater atmosphere was created for this session, with the focus on motivating the children to actively explore the Snoezelen environment. Soft blue and green lighting was provided to represent the sea, a fibre optic curtain was used to create an underwater cave, and a multi-coloured rainbow fish constructed from balloons, scarves, and fibre optics featured in the room along with strategically placed shiny coloured 'fish scales'.



Rainbow fish



Underwater cave

The children's interest and curiosity was clearly evident during this session, providing them with the motivation to explore each area of the Snoezelen room in order to locate as many of the fish scales as they could. Before the session ended, the children chose their favourite area to relax in and drew rainbow fish to take home.

Following Korea I travelled to Japan, visiting a wide range of Snoezelen environments including those provided by hospitals, hospices, residential care facilities, day care facilities and community run organisations. One small facility I visited was housed in a bedroom within a suburban apartment block. This centre was set up to enhance secure attachments as well as to support development by encouraging sensitive, responsive parent-child interactions. Many of those attending were parents who had babies or infants with undiagnosed developmental delays, and had been referred by their paediatricians.





Snoezelen environments, Japan

A number of the Snoezelen facilities I visited in Japan were accommodated in institutions for people with profound cognitive and physical disabilities. These sessions were more often based on the philosophy of free Snoezelen (where people are encouraged to explore the environment at their own pace and in their own way), rather than guided Snoezelen (where sessions are more structured and generally include initial exploration of the environment followed by a planned activity and a period of relaxation such as guided imagery or massage). As with all countries I visited, Snoezelen sessions were largely influenced by the training and philosophy of companions, teachers and session facilitators. For example, some provided sessions that were focussed primarily on relaxation and wellbeing, while others incorporated therapy or educational goals in their sessions.

The use of recycled materials in Japan was evident in many Snoezelen centres and facilities. In one hospital setting, cardboard box cars were used to slide young children down cardboard ramps that had been adorned with chopsticks and foam packing strips to provide sensory stimulation. In the same hospital I observed a Snoezelen session being undertaken for a child (who was ventilator dependent) in her tiny room. Resources for this Snoezelen session included nothing more than one piece of black material (held over the child's head to reduce stimulation), two simple colour-changing lights, and a small water column.

Two play specialists provided this session assisting the child to move her hands to explore the properties of each resource. Due to the nature of this child's condition, physical and emotional responses to stimuli were difficult to observe - however careful planning in regard to the level of stimulation and pace of activity for this child helped to ensure that she remained settled and relaxed throughout the session, with stable heart and blood pressure rates.



Sensory session in hospital, Japan

In Germany I visited a hospital where Snoezelen sessions were incorporated as an important part of patient care. Facilitators of these sessions undertook Snoezelen training, and provided sessions to settle and relax patients before and after transitions, as well as to encourage communication, and to develop self-esteem and trust. As with many Snoezelen programmes I observed, sessions focussed on the provision of pleasurable relaxing experiences – the activities offered during sessions tended to be familiar and therefore comforting to participants.







Changing moods in a hospital Snoezelen room, Germany

In Germany, Snoezelen rooms in special needs schools were very popular with both teachers and students. One school I visited used their sensory room frequently throughout the day with groups of 2-15 children. Teachers reported that due to the ability to control the sensory environment, children were less distracted and more focussed during Snoezelen sessions than they were in the classroom. The sessions were utilised to reinforce learning in a practical way, as well as to settle and relax children at the beginning at end of the school day in order to ease transitions between school and home.





Snoezelen room in special school, Germany

Changing the kindergarten environment

Small Snoezelen sessions with an education focus were also available at some kindergartens in Germany. The predetermined theme of one session I observed was focussed around basic spatial concepts relating to location (eg, up, down, in and out). This session was provided by a visiting teacher who had training in the Snoezelen approach, and who facilitated guided sessions by temporarily transforming kindergarten rooms into a magical Snoezelen spaces (using material to cover up

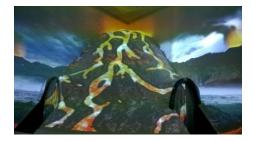
superfluous furniture and resources). The hour-long session I observed involved seven children aged from 18 months to 3 years, and centred on a ride in a hot air balloon (that had been created in the centre of the room using an air filled paddling pool filled with beanbags and covered with a colourful parachute). At various times during the session, activities such as singing, imaginative play, storytelling and sensory exploration were introduced, with children contributing their own ideas while completely immersed in their balloon ride experience.

In Denmark I visited Golden Horn, a world class Snoezelen centre in Solund. Golden Horn had nine different sensory rooms, each connected by a corridor which could be transformed via a computer system, to resemble different environments such as a rainforest or an ocean. Most of the people who attended this centre lived in Solund, a village created for people with significant physical and cognitive disabilities.











Golden Horn, Solund, Denmark

Links with home were recognised as important for supporting people's positive experiences – thus individual preferences within each sensory room were recorded on a computerised card and stored for future visits. This facility, like others I visited in Denmark, supported transitions in a number of ways, for example, by encouraging family participation, by timing sessions immediately before stressful events so

as to reduce anticipatory anxiety, and by incorporating familiar resources (such as a participants favourite toy) in their environments.

The Snoezelen environments I visited in Switzerland were similar to those I had seen in Korea, Japan and Germany – carefully designed 'white' rooms which allowed for creative environmental change. In contrast to this were the brightly coloured Snoezelen environments I observed in special schools and an orphanage in Ostrava and Brno, Czech Republic. These facilities had a much higher level of visual stimulation to arouse interest, with a variety of colourful furniture and equipment displayed in the rooms.





White room in Germany



White room in Switzerland





Snoezelen rooms, Czech republic

Spain was my final Snoezelen destination. Based in Bilbao, I enjoyed the opportunity of attending a small centre for children with learning difficulties for one week. Environmental challenges (such as lack of curtains or blinds for darkening the room) were met with creative solutions such as transforming a large bathroom into a small exciting sensory room, much to the delight of the children. Snoezelen sessions were provided at the end of the day to revisit the day's experiences and to relax children in preparation for their journey home.



Exploring fibre optics, Bilbao

Throughout this experience I documented my observations, conversations, thoughts, and discoveries about strategies that were used by Snoezelen teachers and facilitators to support different transitions that participants faced. Strategies were similar in many places, with some variation due to the training and philosophical beliefs of those providing the sessions. In general, these strategies included:

- overall focus on relaxation and participant wellbeing
- involvement of family members or caregivers
- development of clear goals focussed on individual interests, capabilities, culture and identity
- provision of trained, compassionate, attentive and reflective companions, facilitators and teachers
- regular planning and evaluation of sensory sessions in regard to individual (client/patient) goals (including consideration about appropriate timing and duration of sessions)
- provision of flexible creative environments that promoted curiosity, provided choice (such as
  active or passive engagement), supported communication and encouraged relaxation
- provision of adequate time for individuals to develop trust (in others and the environment), to explore and to respond to the sensory environment
- the incorporation of familiar objects (eg photographs, dolls, books, shells) and activities (eg hut making, tea parties, treasure hunts)
- the use of transitional objects (such as toys, pictures, communication books, art) that individuals could bring to sessions or take home
- seeking regular feedback from participants in relation to their sensory experiences

Benefits of Snoezelen sessions to support transitions were readily observed, and highlighted in the many anecdotal stories that people shared. I now look forward to developing our regular Snoezelen sessions with more of an emphasis on supporting transitions for children, parents and whanau in hospital. With gratitude and appreciation, I thank the Margaret Blackwell Travel fellowship and NZCER for this amazing opportunity. I would also like to acknowledge the kindness and generosity of the Snoezelen professionals, training providers, companions, teachers, play specialists and Snoezelen participants who gave freely of their time, energy, knowledge and wisdom.

Sarah Moore Hospital Play Specialist Starship Children's Hospital







Transitional resources used in a hospice in Japan - handmade paper light covers that children can choose for their rooms and take home



Battery operated candles by Philips – used in Korea either to transition people from one area of the Snoezelen environment to another, or to attract people to a particular area/focus