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ABSTRACT

According to the World Health Organization health is a state of complete mental, physical, and social wellbeing or we can say the absence of disease. It is the situation to which an individual or group is able, on the one hand, to realize aspirations and satisfy needs and, on the other hand to change or cope with the environment." (Health Promotion Glossary, p. 1).

Keywords: leisure acts; mental health; environment; well-being; individual etc.

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Role of Leisure Acts and Mental Health

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ABSTRACT

According to the World Health Organization health is a state of complete mental, physical, and social wellbeing or we can say the absence of disease. It is the situation to which an individual or group is able, on the one hand, to realize aspirations and satisfy needs and, on the other hand to change or cope with the environment." (Health Promotion Glossary, p. 1).

Health and Welfare Canada in 1986, mentioned that health must be viewed in terms of resource which gives ability to manage and change our surroundings. (Achieving Health for All, p. 3). Health is something not only experienced individually, but also collectively. In other words, health shows importance, more on the nature of their interaction with the wider environment. "Environment" here includes not only our physical surroundings, but also the social, cultural, regulatory and economic conditions and influences that impinge on our everyday lives.

Through this theoretical paper I am presenting a view that healthy and constructive leisure acts perform an important role in maintaining mental health. Mental health and leisure acts related with each other; we can't achieve mental health without doing leisure acts.

Keywords: leisure acts; mental health; environment; well-being; individual etc.

I. INTRODUCTION

A mentally healthy person recognises his or her own abilities, which helps a person to know how to cope with the ordinary stresses of life and enhance the productivity of work. It forms the bases not only for individual well-being but also the good functioning of a community. It is not an individual trait, but it is regarded as a resource consisting of the energy, strengths and abilities of

the individual interacting effectively with those of the group and with opportunities and influences in the environment. Mental or emotional health reflects our overall psychological well-being. Good mental health isn't just the absence of mental health problems. Being mentally or emotionally healthy is much more than being free of depression, anxiety, or other psychological issues. Mental and emotional health refers to the presence of positive characteristics of our behaviour. Sometimes people may not have negative feelings, they still need to do things that make them feel positive in order to achieve mental and emotional health.

Similar to quality of life, leisure is a term that for most people is ambiguous and difficult to define. The concept of leisure is complex and more challenging to comprehend than one might first believe. Leisure refers to participation in certain activities that are diversion and bring happiness or relaxation either on a personal or interpersonal level, it is a state of mind, a mental or possibly even spiritual place where one escapes from the stresses of life. Researchers and practitioners need to appreciate the dynamics and role of leisure in order to fully understand quality of life. (Roehrer Institute, 1989). One of the key factors in resilience is the ability to balance stress and our emotions. The ability to recognize our feelings and express them appropriately helps us avoid getting stuck in depression, anxiety, or other negative mood states. Another important factor is a strong support network. Trusting people, you can turn to for encouragement and support will promote resilience in difficult times. Individuals with disabilities, regardless of the type or nature of their condition, are likely to face certain challenges as they seek a higher quality of life. Participation in healthy and creative leisure should be an important and meaningful part of every person's life. Whether perceived as free time away from work, a set of activities chosen for

relaxation, entertainment or enjoyment, or simply a 'state of mind' to which one is saved for peace or reflection, leisure is defined as a valued as an important feature of life. Leisure and leisure activities also serve as the primary means by which people come into contact with each other and form relationships that support good mental health.

II. CONCEPTUAL FRAMEWORK AND HISTORICAL PERSPECTIVES OF LEISURE

Most meaningful relationships result from spending significant time with others in settings of leisure or free time activity (Godbey, 1999). If a person is unable to participate satisfactorily in leisure, especially with others or in the presence of others, he or she is probably not going to develop the skills, confidence, or opportunities necessary to forge interpersonal relationships. Professionals within the fields of recreation and leisure studies have gathered a large body of knowledge about leisure. It includes a historical perspective on leisure as well as an analysis of its role in contemporary society (Kelly and Freysinger, 2000). Scholars have dedicated themselves to examining the role of leisure within developing societies and cultures throughout time (Huizinga, 1950; Pieper, 1963). Leisure is a primary vehicle through which people come in contact with one another, relationships are formed, and mental health takes place.

Leisure is conceptually different from "recreation" or "play" though the terms are often used interchangeably. Recreation is thought of as activity that is structured, typically done with others and physical in nature such as organized sports. Playing or being playful, on the other hand, is used to describe activities or an attitude which is usually more carefree, spontaneous, or childlike. It is important to note that the same activity experienced by different people can be recreation for some, leisure for others, and play for yet others. Also, an activity for one individual, on different occasions or within different settings, can be viewed as leisure at one point in time and recreation at another (Godbey, 1999) for example

if a person chooses to spend part of a lazy afternoon shooting baskets at home without any real purpose in mind, he might consider that leisure. Later in the day he may invite friends over to play basketball and enjoy an hour of exercise, laughter, and spontaneous fun. That weekend he goes to the community centre that is hosting a recreational league where his basketball team is in the championship game. In this setting, competition is keen, teamwork is stressed, and winners and losers emerge. A similar analysis can be made of most, if not all, leisure activities in determining the times and places where characteristics of recreation, leisure and play emerge or shift as the nature of the activity changes.

Leisure and recreation have a place in the history of civilizations. Changes in social institutions, as well as technological advancements, have impacted the way leisure has been perceived and experienced. Leisure has, however, always existed though its form, nature, and purpose have been fluid (Goodale and Godbey, 1988). Notably, ancient Romans were famous for their pools and public baths, as were the Greeks, who also instituted the Olympic Games. Secular and religious advancement in the Middle Ages defined the parameters of leisure within the lifestyles of that era. Martin Luther led the Protestant reformation that saw idleness as a sin (Linder, 1970) thereby impacting what people did in their free time. In later years as European civilization spread to the Americas, the Puritan influence placed utmost importance on work and productivity and taught that leisure existed primarily for religious contemplation (Goodale and Godbey, 1988).

III. ROLE OF LEISURE IN THE LIVES OF INDIVIDUALS FOR MENTAL HEALTH

Leisure plays different role in the lives of individuals. For all children, leisure exists as play, and play constitutes a large part of child development (Seefeldt, 2001). Human beings at a young age learn to walk, talk, move about, relate to people, and express individuality mostly through the context of play (Ellis, 1973; Jenkinson, 2001). Eisert and Lamorey (1996)

studied children and reported that assessment of children's play is an effective method to ascertain the strengths and weaknesses of important mental developmental domains.

As children become adolescents and then young adults, with or without disability, experiences of entertainment and leisure impact self-identity and esteem. (Shaw, Kleiber and Caldwell 1995). Widmer, Ellis and Trunnell (1996) state that special leave choices may put adolescents at increased risk for engaging in delinquent behavior. Wisely chosen entertainment, however, is more likely to result in positive outcomes. Adolescents' participation in sports programs for both mental and physical development: (a) provided an overall sense of competence in skills (transferable to other settings), (b) served as an outlet for expression of emotion, (C) allowed interaction with others in a social context not readily available in schools or other environments, and (D) provided a sense of independence and decreased awareness of disability. McKenney & Dattilo (2001) demonstrated that interventions associated with sports had some effect on the pro-social behaviour of adolescents with disruptive behaviour disorder although already existing antisocial behaviours did not appear to be diminished. These authors earlier studied leisure's role in the development of values, and stress the importance of choices made and behaviours formed during and within the context of leisure (Dattilo and McKenney, 2000). Similarly, a person who lacks self-esteem or identity, or seems to avoid relationships, may possibly be one for whom healthy recreation and leisure in social settings has been noticeably absent or problematic.

Mature young males and females realize at some point that their bodies are capable of reproduction, that they have a reproductive identity (Marsiglio, 1998). It is of great importance for overall identity formation and the vibrancies of one's self-concept. Sex often changes within a marriage or cohabitation relationship as most partners are committed to a monogamous relationship and sex falls within the day-to-day routine of two people's lives. Sex is certainly

recognized as the mechanism through which children are conceived, but sex for physical and emotional bonding and sex for fun and pleasure is still the primary reason many people have sex. However, single adults who are sexually active are more likely to view sex as entertaining, compared to married men and women. (Michael, Gagnon, Laumann and Kolata, 1994). As people grow older, it is also likely they will have more and more discretionary time and more opportunities to participate in leisure. Through adulthood and into retirement years, although the type of activities may change, the importance of healthy leisure does not diminish. While the likelihood of obtaining a disability increases with age (Soldo and Freedman, 1994), interest in leisure activities remains strong. In fact, a recent survey commissioned by the American Association of Retired People reported that older Americans (aged 50+) place a high priority on activities such as spending time with family, socializing with friends, reading, and spending time on hobbies and exercise for mental or emotional health.

IV. BARRIERS TO PARTICIPATION & CRITICAL ISSUES OF LEISURE

Barriers, often referred to as "barriers" in leisure literature, are important to this discussion of leisure and people with disabilities. Constraints are things that interfere with a person's ability to learn about, use, or participate fully in leisure. Jackson and Scott (1999) described there are three categories of constraints: intrapersonal, interpersonal, and structural. Intrapersonal constraints are defined as individual psychological attributes, such as poor self-confidence or recollection of past negative socialization, which interfere with the development of leisure preferences or the type of activities one finds enjoyable. Interpersonal constraints are barriers that emerge as social interaction takes place between family, friends, or others. Barriers of this nature can include negative interactions with same age peers, communication difficulties, or patterns of social isolation. Structural constraints refer to things such as lack of transportation, limited financial resources, stigmas against people with disabilities

or inaccessibility of community programs that diminish the level of participation in leisure desired by the individual.

While everyone occasionally has a problem or situation that limits or prevents what they do during free time, persistent barriers to leisure eventually lead to a lower quality of life. Another example of a structural constraint may be the harmful effects of drugs that may act to disrupt normal physical, psychological or emotional function at leisure and physical activity for mental or emotional health. On the other hand, properly prescribed and administered medications can improve function and reduce symptoms of illness and promote positive leisure and healthy mental experiences. This approach to barriers to leisure participation can help to understand and reduce the barriers that people with disabilities may face (Jackson and Scott, 1999). As an area of scholarly exploration leisure has been dissected and studied from many angles. Numerous issues have been identified and examined for their potential constraints on healthy leisure. Some of these include alcohol and drug use, personality and attitude, social class and race, sexual orientation, religion, gender-based roles and dynamics involved with masculinity and femininity. Understanding the phenomenon of alcohol and drug use as it relates to leisure is important. While alcohol and drugs are a potential problem for people of all ages, they are commonly found in the leisure environments of young people (Duffy, 2001).

If abused, alcohol or drugs can pose serious physical, emotional, Gender roles and masculine/feminine traits also heavily impact the opportunities offered in leisure activities and in recreational settings (Aitchison, 1999). Many believe there are actual physiological differences between the brain and its chemistry for men and women (Blum, 1997; Moir and Jessel, 1991). Regardless of whether such structural differences in the brain exist, males and females, conditioned by cultural mores and societal values affecting thought and behaviour, often choose to participate in different activities. If participating in the same activities, males and females often seek and experience different outcomes i.e., social

and legal problems (Parker, 1998). Carruthers (1993) explored the ways in which individuals expect that alcohol consumption will affect their leisure experiences as being dependent on the leisure context. Media and advertisers promote an image of health and beauty to influence consumers. Thus, the physical and emotional benefits of leisure activity sometimes is forced to take a backseat to fashion, accessories or high-priced equipment which is more about promoting social status than recreation participation (Wynne, 1990).

V. PHYSICAL HEALTH IS CONNECTED TO MENTAL AND EMOTIONAL HEALTH

Taking care of your body is a powerful first step towards mental and emotional health. The mind and the body are linked. By improving physical health, automatically experience greater mental and emotional well-being. For example, exercise not only strengthens our heart and lungs, but also releases endorphins, powerful chemicals that energize us and lift our mood. The activities engage in and the daily choices make affect the way feel physically and emotionally.

- *Adequate Rest:* For good mental and emotional health, it is important to take care of your body. This includes getting enough sleep. Most people need seven to eight hours of sleep each night to function optimally.
- *Good Nutrition:* The topic of nutrition is complex and not always easy to put into practice. But the more you learn about what you eat and how it affects your energy and mood, the better you can feel.
- *Exercise daily:* Exercise is a powerful antidote to stress, anxiety, and depression. Look for small ways to add activity to your day, such as taking the stairs instead of the elevator or going for a short walk. To get the most mental health benefits, aim for 30 minutes or more of exercise per day.
- *Avoid alcohol, cigarettes and other drugs:* these are stimulants that can unnaturally make you feel good in the short term, but have long-term negative consequences for mood and emotional health.

- *Manage stress levels:* Stress takes a heavy toll on mental and emotional health, so it is important to keep it under control. Although not all stress can be avoided, stress management strategies can help bring things back into balance.
- *Limit unhealthy mental habits such as anxiety:* try to avoid becoming absorbed by repetitive mental habits - negative thoughts about yourself and the world that suck up time, drain your energy, and cause anxiety, fear and trigger feelings of depression.
- *Appeal to the senses:* Stay calm and energized by appealing to the five senses: sight, sound, touch, smell and taste. Listen to music that lifts our mood, places flowers where we'll see and smell them, massage our hands and feet, or sip a hot beverage.
- *Engage in meaningful, creative work :* do things that challenge our creativity and make us feel productive, whether we are paid for it or not - gardening, drawing, writing, playing an instrument, or something in our workshop things like making.
- *Get a pet :* Yes, pets are a responsibility, but taking care of one makes us feel needed and loved. There is as much unconditional love as love can give a pet. Animals can also take us out of the house for exercise and expose us to new people and places.
- *Make leisure time a priority :* don't do things for any other reason than they enjoy doing. Go to a fun movie, take a walk on the beach, listen to music, read a good book, or talk to a friend. Doing things just because they are fun is not an indulgence. Sport is an emotional and mental health necessity.

Everyone is different as we know; Not all things will be equally beneficial to all people. Some people feel better at rest and slow down while others need more activity and more stimulation or stimulation to feel better. The important thing is to find an activity that we enjoy and that encourages us.

VI. RECREATION'S THERAPEUTIC NATURE: A DISCIPLINE'S FOCUS

The discipline of recreation therapy (also commonly referred to as therapeutic recreation) provides services to people with disabilities related to their need to access and participate in a meaningful leisure lifestyle. With some 40,000 practitioners within the United States, the profession of recreation therapy promotes the right to leisure for people with disabilities (Sylvester, 1992) and has served as the principal nexus between the recreation and leisure sciences and disability studies. Recreation therapy is defined as using "treatment, education and recreation services to help people with illnesses, disabilities and other conditions to develop and use their leisure in ways that enhance their mental health, functional abilities, independence and quality of life" (National Therapeutic Recreation Society, 2000). Recreation therapy has roots in the clinical and medical arenas (Haun, 1966; Davis, 1952), but today practitioners also work in community settings with health protection and health promotion as a popular practice model (Austin, 1998).

Recreation therapists work with people with disabilities to assess their needs related to leisure, help strengthen positive attitudes toward constructive leisure time use and increase skills, knowledge, mental health and use of resources. This education and training is done to empower the individual to participate independently in recreation and leisure activities of his or her choosing. Recreation therapists aim to use leisure or recreation interventions to enhance people's quality of life through mental or emotional health.

Participation in healthy and constructive leisure should be an important and meaningful part of every person's life. Whether considered as free time away from work, a set of activities chosen for relaxation, recreation or enjoyment, or simply a 'state of mind' to which one escapes for peace or reflection, leisure is valued by people as an important feature of life. Leisure and recreation activities also serve as the primary means by which people come into contact with one another and form relationships.

Natural settings meet these conditions and are especially effective for promoting attention restoration. Brief experiences of nature in cities and towns can improve mental function and reduce mental illness. Encounters with nearby nature help alleviate mental fatigue by relaxing and restoring the mind. Within built environments parks and green spaces are settings for cognitive respite, as they encourage social interaction and de-stressing through exercise or conversation, and provide calming settings. Having quality landscaping and vegetation in and around the places where people work and study is a good investment. Both visual access and being within green space helps to restore the mind's ability to focus. This can improve job and school performance, and help alleviate mental stress and illness. Whatever internal or external factors have shaped our mental and emotional health, it's never too late to make changes that will improve your psychological well-being. Risk factors can be counteracted with protective factors in the form of leisure acts, like strong relationships, a healthy lifestyle, and coping strategies for managing stress and negative emotions.

The Challenge

Many people with psychiatric disabilities nonetheless find it difficult to develop physically or social active recreational and leisure pursuits for themselves:

Service providers are hesitant to regulate or dictate a person's free-time activities: the freedom to do what we want in our spare time is central to the very idea of leisure. So, choosing to watch television or simply do nothing is inherent to a person's right to self-determination. However, clients with serious mental illnesses may need help choosing recreational and leisure activities for themselves, especially if they have had these options for them in the past. While self-directed care ultimately involves choices, each choice should be based on informed decisions. It is often believed that it is relatively easy to find opportunities for a pleasant and socially creative pastime. Yet research shows it is not automatic, especially for people with mental illnesses. Just as such individuals can benefit from a job coach, they can also benefit from 'vacation coaching'.

Leisure coaching will help them identify and explore personal values and interests that are associated with physically and socially active recreational and leisure activities, develop or refine the skills needed to pursue personal interests, and community recreation. locate individual and community resources to support their participation in Most importantly, leisure coaching will help remove barriers to participation in community and social life.

- Research has also shown that leisure behaviour is an important aspect of the coping response, yet few individuals consciously recognize the role that recreation and leisure play in helping them cope with stress or in their overall health and well-being. This is true for both individuals with serious mental illnesses and for service providers, such as case managers and peer supporters. This may inadvertently lead to undervaluing this aspect of a person's life.
- Finally, it may be that the health and human services system rarely sends the message that individuals with serious mental illnesses should take time off or have the opportunity to find health and happiness through physically and socially active leisure participation. Other important issues often take priority, and the commitment to creating an entertainment/leisure agenda can get lost in the shuffle.

RECOMMENDATIONS

The following are recommendations for service providers on improving recreational and leisure opportunities for people with mental illnesses:

- Create and evaluate model demonstration programs that use leisure coaching to promote proactive coping, community inclusion, life satisfaction and other positive outcomes for persons with serious mental illnesses;
- Involve peer supporters who can model positive leisure coping strategies;
- Train case managers to more specifically assess leisure coping beliefs and to include recreation and leisure as a focus;
- Develop and evaluate an annualized training

program to promote self-determination and proactive coping for persons with serious mental illnesses through recreation and leisure involvement;

- Develop and evaluate a annualized training program to increase environmental supports for recreation and leisure involvement, including self-advocacy and education for family and friends.

VII. CONCLUSION

People who are emotionally healthy are in control of their emotions and their behaviour. They are able to handle life's challenges, build strong relationships, and recover from setbacks. But just as it requires effort to build or maintain physical health, so it is with mental and emotional health. Improving your emotional health can be a rewarding experience, benefiting all aspects of your life, including boosting your mood, building resilience, and adding to your overall enjoyment of life. The positive characteristics of mental and emotional health allow us to participate in life to the fullest extent possible through productive, meaningful activities and strong relationships and also help us to cope when faced with life's challenges and stresses.

This article has explored the role of leisure and recreation in people's lives. Specifically, for people with disabilities, issues related to leisure have been described based on their impact on mental health. Diminished participation in leisure and recreation severely hampers a person's opportunity to acquire a positive self-concept and important social and interpersonal skills. Further, limited, or negative leisure experiences decrease chances for the formation of meaningful relationships. No matter how much time you devote to improving your mental and emotional health, you will still need the company of others to feel and be your best. Humans are social creatures with an emotional need for relationships and positive connections to others. We're not meant to survive, let alone thrive, in isolation. Our social brains crave companionship— even when experience has made us shy and distrustful of others. Social interaction — specifically talking to someone else about your problems — can also

help to reduce stress. The key is to find a supportive relationship with someone who is a “good listener” — someone you can talk to regularly, preferably face-to-face, who will listen to you without a pre-existing agenda for how you should think or feel.

Leisure and how it interfaces with mental health is a very important part of quality of life. Recreation adds variety, enjoyment, and ample opportunity to make and keep friends. The role of leisure and recreational experience within the lives of people with disabilities is an essential part of a satisfying life and a primary pathway to love and intimacy in the most meaningful way. People who are emotionally and mentally healthy have the tools for coping with difficult situations and maintaining a positive outlook. They remain focused, flexible, and creative in bad times as well as good. Everyone is different; not all things will be equally beneficial to all people. Some people feel better relaxing and slowing down while others need more activity and more excitement or stimulation to feel better. The important thing is to find an activity that we enjoy and that gives us a boost.

Footnotes

- For a detailed discussion of the determinants of health see Statement on Preventive Practices and Health Promotion, CASW, March 1998, pages 2 - 4.
- This section and section 1.3 are taken from Mental Health for Canadians: Striking a Balance, pages 6 & 7.
- The following definitions are taken from Foundations for the Future: A Report of the Working Group on Child and Youth Mental Health Services, March 1990, page 8.

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