

The Impact of Therapeutic Recreation Practices on the Quality of Life, Mental Well-Being and Self-Esteem of Young Adults

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Abstract

Therapeutic recreation refers to participation in individual or group-specific recreational activities to ensure the sustainability of the functions of individuals and the improvement of the functionality of these functions. The objective of this study is to examine the impact of therapeutic recreation practices on the quality of life, mental well-being and self-esteem of young adults, as well as to evaluate the efficacy of recreational activities in coping with stress. In this in-depth analysis, a sequential explanatory mixed methods design was employed. The implementation of Quality of Life, Mental Well-Being and Self-Esteem scales, needs assessment, interview forms, and unique recreational interventions occurred through a quasi-experimental process. The interventions were designed around a number of different themes, including music and poetry therapy, drama, creative writing, painting, nature, play, social skills, mindfulness, insight and empathy. The results demonstrate that therapeutic recreation interventi-

ons enhance quality of life, mental well-being and self-esteem; mitigate stress, engender happiness, foster a positive outlook, enhance awareness and are efficacious in developing insight and motivation. The results of the study indicate that planned therapeutic recreation activities can play a significant role in the development of public health services based on mental well-being, social development of the community, increased happiness and a better quality of life for women by reducing the gender gap. Furthermore, when analysed holistically, this original study combining health and entertainment provides a wealth of data, including the relationships between dependent variables, and various ideas for further research.

Keywords: Therapeutic Recreation, Leisure and Social Activity, Mental Health, Quality of Life, Well-being.

JEL Codes: L83, I10, D91, C90, D83

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Introduction

The use of artistic activities for therapeutic purposes can provide a safe and non-judgmental environment for the individual to reveal their aesthetic point of view. These activities are essentially about endeavour, risk-taking and self-expression. Individuals who engage in artistic activities can develop their aesthetic awareness and acquire many skills while developing their communication skills and revealing their emotions (Karaküçük, 2012:29). Recreational activities that support mental health, especially themes with mindfulness content, can be used effectively with students. Especially for post-secondary students, it is important that these activities are easily accessible and cost-effective in terms of mental health philosophy. In this sense, recreation providers can play an effective role in protecting students' mental health and raising awareness of mental health (Litwiller et al., 2022).

Therapeutic Recreation (TR) is a holistic process that consciously uses recreation and experiential interventions to create a social, emotional, intellectual, physical or spiritual change in order to maintain and improve health status, functional capacity and quality of life (Carter & Van Andel, 2019:5-6). In other words, recreation activities can increase positive mood (Bielinis et al., 2019). Participation in leisure activities creates a favourable environment for social relationships and enables individuals to obtain social benefits (Sevil, 2015). There is a need for the applied field of therapeutic recreation to be directed towards all individuals, issues and institutions. It can be applied in the field of sports activities and educational games to protect mental health, reduce stress and increase the happiness of all citizens (Çakırlar & Yaman, 2022). The participants are not individuals from groups such as disabled, sick, elderly, etc. that are often studied in the literature. In this sense, the fact that the implementation of therapeutic recreation was carried out with students who are trying to cope with the stress, future anxiety, academic anxiety, social anxiety, etc. that everyday life brings, measuring the effect of TR on the quality of life, self-esteem and mental well-being levels of these students, and examining the relationships between these variables, expresses the contribution of the research to the literature. As peer groups have a high value in terms of therapeutic potential (Wheeler et al., 2020), the study was conducted with second year pre-school students in the same or similar age group and with similar characteristics. A comparative analysis of the quantitative and qualitative findings of the study with the existing literature is discussed in the discussion section.

Therapeutic recreation

Health refers not only to the absence of disease and

disability in individuals, but also to a state of complete physical, mental and social well-being (WHO, 1946). There is an association between reduced physical activity and the occurrence of mental health problems. Participation in physical activity is associated with life satisfaction, cognitive function and psychological well-being (Carek et al., 2011). Living with low levels of physical activity can have a negative impact on health and quality of life. Recreational activities can overcome this disadvantage and provide physiological and social benefits as well as psychological improvements in quality of life (Güzel et al., 2020:123,130).

The concept of therapeutic recreation is multifaceted and has been defined in a variety of ways. According to Peterson and Stumbo, the term "therapeutic recreation" refers to the process of engaging in recreational activities that are instrumental in realizing desirable changes in the physical, emotional, and social aspects of individuals (Peterson & Stumbo, 2000: 56; cited in Öztürk Karataş & Karataş, 2022:103). TR is carried out for the purpose of integration and adaptation to society for individuals who are characterised as sick, elderly and with special needs, who have been in prison and who have been released from prison. It also plays a preventive role for substance abusers and individuals who are prone to crime (Austin & Crawford, 2001; cited in Karaküçük, 2012:22). As a tool for psychological and physical health, recovery and well-being, TR is a systematic process that uses recreation and other activity-based interventions to meet the needs of people with illnesses and/or disabilities (NCTRC, n.d.). Recreational therapy aims to restore, improve and rehabilitate a person's level of functionality and independence in life activities, promote health and well-being (ATRA, n.d.).

TR can be defined as a specific process that leaves a positive impact or acts as a shield in an area of life, health, functional ability and overall quality of life, covering every individual who can benefit in this sense and using recreation as a method (Carter & Van Andel, 2019:6). TR is the maximisation of overall health, well-being and quality of life by using and increasing leisure (Austin, 2013; cited in Kural, 2022:24). Improving mental health, getting rid of the monotonous flow of life, busy days in business life, providing physical, mental, social and psychological renewal are some factors that direct individuals to leisure activities (Çetiner, 2019). In the light of these definitions, it can be said that TR is tailor-made leisure practices that provide individuals with a state of well-being or functionality in a holistic sense, serve the purpose of reducing negativity and protecting/improving quality of life, provide a more positive outlook on life and increase spirituality. In the context of the relevant literature, individuals within the therapeutic recreation domain are shown in Figure 1.

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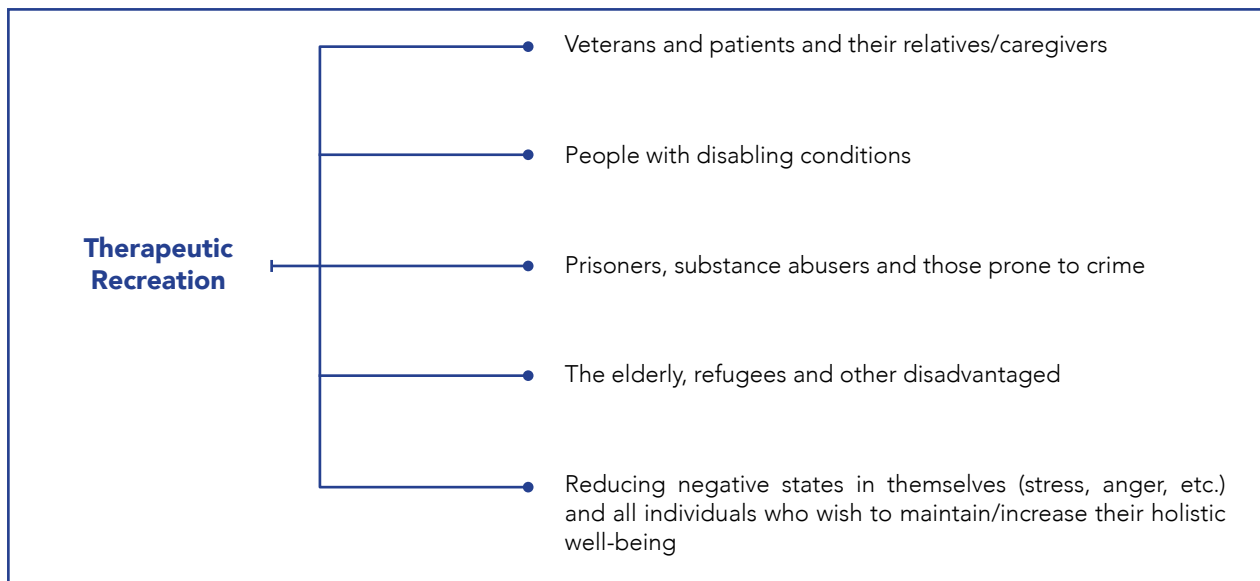


Figure 1. People for Whom Therapeutic Recreation Can Be Used

The figure was developed by the authors in accordance with the pertinent literature.

The participants of this study, the students, fall into the group at the bottom of the list in Figure 1. According to Carter & Van Andel, recreational experiences strengthen self-image and support development by helping individuals achieve their goals (Carter & Van Andel, 2019). These activities increase participants' attention, calmness, confidence, and cheerfulness, and reduce fear and sadness (Vella et al., 2013). TR also increases the capacity of individuals to generate positive emotions and behaviors. In addition to encouraging individuals in the opportunities and struggles they face in their lives, it also has a positive effect on individual well-being (Çakırlar & Yaman, 2022). The research addresses the following problems and sub-problems in the following manner:

1. Does participation in TR interventions result in an improvement in the quality of life of the individuals concerned? (Including sub-dimensions).
2. Does participation in TR practices affect participants in terms of mental well-being?
3. Does participation in TR practices affect self-esteem? (Including sub-dimensions).
4. To what extent are the dependent variables and their sub-dimensions related to each other?

Method

This section outlines the methodology employed in the research project, which was conducted to assess the impact of therapeutic recreation practices on second-year students enrolled in the Department of Preschool Teaching. The study aimed to evaluate the effect of these practices on the quality of life, mental well-being, and self-esteem of the participants. Additionally, it sought to examine the relationships between the variables utilized and to assess the influence of these practices on individuals experiencing stress. During these processes, the support

of an associate professor in the field of educational sciences was obtained, and sensitivity was shown in carrying out the study within the framework of ethical values. The model, study group, data collection tools, design and implementation of the practices, data collection process, and analysis of this research are presented in this section.

Study design

This research was conducted in accordance with a sequential explanatory mixed-methods design. Creswell & Creswell posits that in a sequential explanatory mixed method design, quantitative data are initially collected and analysed. The data obtained provide insight into the questions that should be posed to participants in the subsequent qualitative phase. In this design, qualitative data serve to elucidate the nuances of quantitative data, and thus it is crucial to establish a coherent link between the two. The research must consider which quantitative data will be followed and from which participants qualitative data will be obtained. Furthermore, it is essential to collect quantitative and qualitative data from the same people and analyse the results in depth. The most significant aspect of this design is the detailed explanation of the interaction between variables through the utilisation of qualitative data. Qualitative questions are typically posed in the form of general and open-ended prompts. The results of the quantitative and qualitative follow-up are presented and interpreted in the discussion section. This section will examine the ways in which qualitative data contributes to the expansion and elucidation of quantitative data. It is not advisable to make a direct comparison with the overall results from the quantitative and qualitative databases (Creswell & Creswell, 2018).

The quantitative data pertaining to the second-year preschool students, who had been previously divided into two groups, were subjected to analysis. The results demonstrated that there was no significant difference in the quality of life, mental well-being and self-esteem scales and their sub-dimensions between the two groups, as determined by the unrelated samples t-test. Additionally, the data on age, gender and income levels of the participants showed a highly similar distribution between the groups. Accordingly, the groups were deemed to be equivalent for the purposes of the study, eliminating the need for further group matching. In other words, the groups were found to be suitable for the equivalent groups required for the quasi-experimental design. As defined by Büyüköztürk et al., group matching entails the formation of two groups whose group means are equivalent in terms of the relevant variables. This matching method may be employed when it is necessary to work with pre-existing groups (Büyüköztürk et al., 2022). In light of these findings, it was concluded that the experimental phase of the study was appropriate for a quasi-experimental group matching design with a pretest-posttest control group. Subsequently, one of the groups was selected, and the implementation of therapeutic recreation activities, which constituted the independent variable in the research, commenced.

Once the quantitative data had been collected and analysed, an examination of the data was conducted in order to ascertain its qualitative dimension. Prior to the initiation of the interventions, a comprehensive needs analysis was conducted among the participants. The subsequent sections provide a comprehensive exposition of the aforementioned needs analysis. The aforementioned needs analysis, which was developed by various experts, was used to collect data on the leisure time utilization patterns of the participants and the stressors they experienced. In the needs analysis, qualitative data were collected from the entire experimental group due to the presence of stress indicators among the participants and the limited number of individuals involved. In preparing the interview form, the item averages derived from the analysis of the scales were subjected to examination. The statements with the lowest and highest item averages in the scales were subjected to further analysis, and the interview questions were prepared with the assistance of experts. According to Akman Dömbekci and Erişen, unstructured interviews are interviews that involve the collection of in-depth information and a high level of flexibility in the interview process (Akman Dömbekci & Erişen, 2022). As posited by Büyüköztürk and colleagues, unstructured interviews are interviews that provide freedom in the items to be asked about the subject. The questions and their order can change in the process when desired, offering a rich data collection opportunity with open-ended questions. The in-

terview questions were designed to ensure that no single question comprised more than one element, that no two opposing questions were combined within a single question, that no leading questions were posed, and that no questions were formulated in a way that made judgments from the outset (Büyüköztürk et al., 2022).

Design and implementation of applications

In total, 13 interventions were implemented over a period of 3 months, usually 1 day a week for 30-90 minutes. By analyzing the data obtained from the participants in the needs analysis, the most appropriate practices were designed for the experimental group. In this sense, it was also studied which intervention would be TR for the participants of the study. The applications were developed and implemented with careful consideration of their alignment with the established definition and characteristics of therapeutic recreation. Data from the needs analysis and the opinions of experts in the fields of educational sciences, tourism and recreation were taken into account to design the most appropriate applications. The interventions were designed with a focus on the following themes: music and poetry therapy, drama, creative writing, painting, nature, play, social skills, mindfulness, insight and empathy. In his study, Dr. Yokuş investigated the cinematographic experiences of participants. One of the participants in the study compared cinematographic experience to a therapist's chair. The reason for this is that this chair leads us to a new world of meaning, allows us to leave the obstacles that we limit ourselves to outside of our dreams (Yokuş, 2020). In addition to the previously emphasized therapeutic recreation activities, this study also included a short cinematographic experience with the objective of fostering a more meaningful outlook on life among the participants. According to Avşaroğlu and Okutan, optimism appears to be a factor associated with meaningful connect in life. It can be posited that optimism plays a role in the development of psychological resilience (Avşaroğlu & Okutan, 2018). In this context, it was thought that cinematographic experiences aiming to develop the skill of looking at life more meaningfully would create optimism in individuals, and through this optimism, their mental well-being would improve.

Dataset

In the study, one of the purposive sampling approaches, namely criterion sampling, was employed. As defined by Büyüköztürk et al., purposive sampling refers to the selection of situations that contain rich information, with the objective of advancing the research in question. This approach permits an exhaustive examination of the subject matter. This approach may be employed in the investigation of

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participants who meet specific criteria or possess particular characteristics (Büyüköztürk, 2022). In criterion sampling, individuals who meet the specified criteria are subjected to examination. This sampling method has the potential to enhance the quality of monitoring ongoing programmes (Patton, 2002). For the participant groups, it was taken as a criterion that they did not show a scientifically significant difference in terms of the dependent variables of the research and that the individuals showed high similarity in terms of demographic data. In the individual sense, the criterion was that the participants experienced stress or used their free time for limited activities. Given the multifaceted nature of the teaching profession, it was hypothesized that students enrolled in

the teaching department might encounter anxiety in this field. To address this, a needs analysis was conducted on preschool 2nd grade students. The reason for choosing 2nd graders is the assumption that their limited knowledge about their field may cause stress. Since TR practices should be aimed at all individuals, it may be more possible to reach groups that meet the criteria, and since it was determined in the needs analysis that they experience academic anxiety, communication problems, exam stress, etc., pre-school teaching department 2nd grade students were selected as the participant group. Figure 2 presents a research model and provides a comprehensive account of the research process.

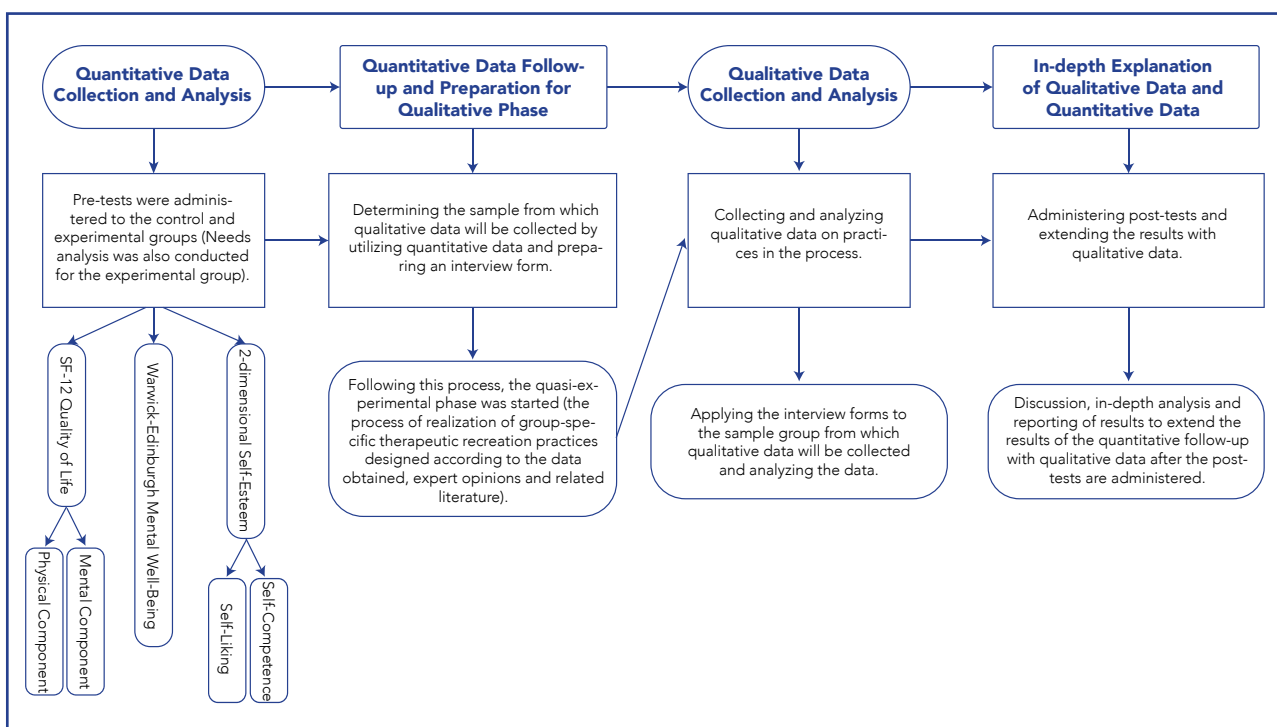


Figure 2. Research Model

Source: The authors developed the design in accordance with Creswell & Creswell's sequential explanatory mixed design.

Data collection process and analysis

The data were collected over a period of four months (between February and May 2024). The data obtained from the needs analysis developed by an academic from the field of psychological counseling and guidance and completed with the contributions of academics from the fields of recreation and educational sciences, and the interview forms applied simultaneously with the practices were analyzed using MAXQDA software. Also a notebook was used for content analysis of qualitative data. Mental well-being, self-esteem and quality of life scales were administered twice, at the beginning and at the end of the process, and analyzed using SPSS statistical analysis software.

Data collection tools

The SF-12 Quality of Life Scale, the 2-Dimensional Self-Esteem Scale and the Warwick-Edinburgh Mental Well-Being Scale were administered at the pretest and posttest stages of the study. The rationale for selecting these variables for investigation is that the scales encompass attributes that are likely to be relevant to the majority of individuals. Upon analysis of the reliability of the three scales, it was determined that the Cronbach alpha internal consistency coefficient exhibited a value above 0.81 in all three, and that all three demonstrated a normal distribution. Furthermore, a needs assessment form was employed. As the study progressed, data were collected on two occasions from the participants via a form containing the interview questions identified following the pre-tests.

Warwick-Edinburgh Mental Well-Being Scale

The scale developed by Tennant et al. in 2007 was adapted into Turkish by Keldal. The scale consists of 14 items with 5-point Likert-type options and high scores indicate high mental well-being. Cronbach’s Alpha internal consistency coefficient is 0.92. (Keldal, 2015).

SF-12 Quality of Life Scale

SF-12 was developed by Ware et al. in 1995. Its Turkish adaptation was conducted by Soylu and Kütük in 2022. SF-12 consists of two subcomponents, physical (FIM-12) and mental (MBS-12), and 12 items. Higher scores represent better health. Cronbach’s alpha coefficients for the physical and mental components of the scale are satisfactory at 0.73 and 0.72, respectively (Soylu & Kütük, 2022).

2 Dimensional Self-Esteem Scale

The Self-Esteem Scale, which consists of two subscales, Self-Liking and Self-Competence, was developed by Tafarodi and Swan in 2001. The Turkish version was adapted by Doğan in 2011. There are 16 Likert-type items in total. Cronbach’s Alpha internal consistency coefficient was 0.83 for the Self-Liking sub-dimension and 0.74 for the Self-Competence sub-dimension. Higher scores indicate better self-

esteem (Doğan, 2011).

Needs assessment analysis and questions prepared for qualitative data

Three associate professors, specialising in the fields of counselling and guidance, recreation and educational sciences, were instrumental in the formulation of the seven-item questionnaire designed to ascertain the needs of individuals. The questions were designed to ascertain whether the participants had experienced anxiety recently, the activities they engage in during their leisure time and in situations of stress, their concerns about their field of study and the factors that cause them stress. The data pertaining to the responses received were then subjected to coding. The codes with a minimum of two occurrences are presented below.

Upon examination of Figure 3, the sub-codes pertaining to the activities pursued by the experimental group members during their leisure time, including those engaged in for relaxation, were collated and regrouped under the heading of leisure time evaluation forms. The analysis of the codes revealed that physical activities were the most frequently performed activities. Subsequent to physical activities, social, visual, artistic, and mental activities were observed to occur with lesser frequency.

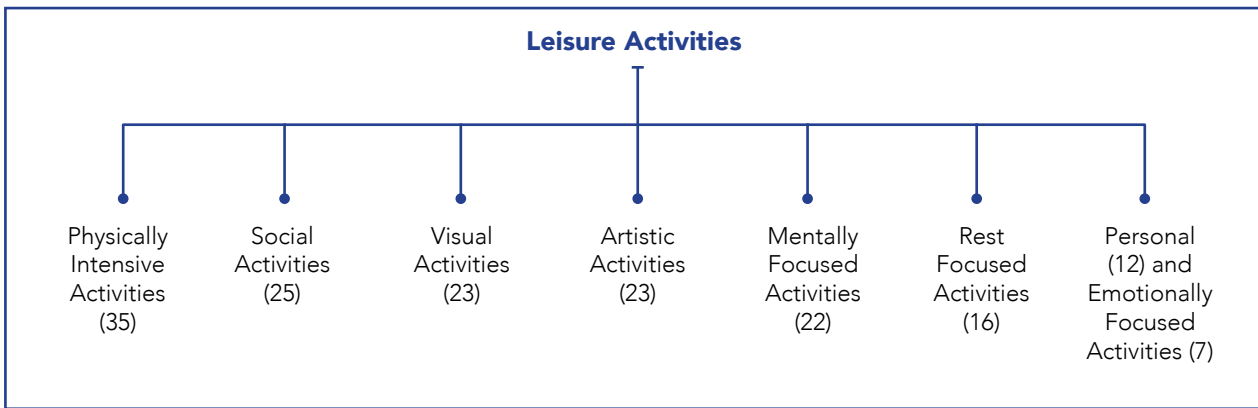


Figure 3. Leisure Time Utilization Patterns of the Experimental Group

As illustrated in Figure 4, the codes for the three factors that have recently been identified as the most stressful for the experimental group are academic

success, relationships and communication, and future anxiety.

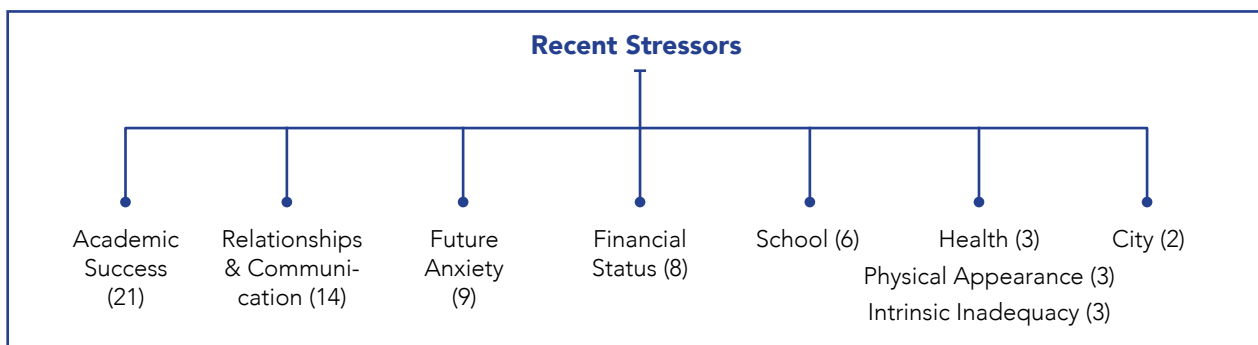


Figure 4. Recent Stressors in the Experimental Group

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When Figure 5 is analyzed, the factors that caused the most anxiety among the individuals in the experimental group about the teaching profession they intend to do in the future were collected in

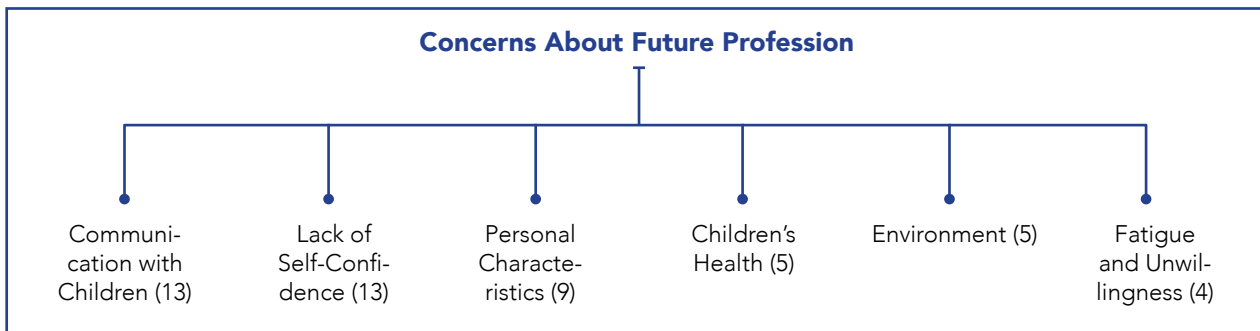


Figure 5. Their Concerns about the Teaching Profession They Want to Do in the Future

the codes of communication with children, lack of self-confidence and personal characteristics. An interview form was prepared to measure the effects of the practices during the process. The prepared questions were applied 2 times in total. The questions were designed to reveal their interest in the practices, the effect of the practices on reducing stress and struggling with difficulties, how they reflected on motivation in their daily work, which emotional and mental states emerged, which practice they liked the most, and how they felt more valuable after the practices. The content analysis of the data obtained is explained in the findings of the study.

Findings

Quantitative findings of the study

Upon analysis of the demographic data of the study group, it was observed that 87% of the experimental group was female, with 91.3% of them falling within the age range of 19-23. In addition, 100% of the experimental group were single and 95.7% had a monthly income of less than 10,000. In comparison, the control group exhibited similar characteristics, with 91.3% of them being female, 95.7% within the age range of 19-23, and 100% single with a monthly income below 10,000. Additionally, the mean age of the control group was determined to be 20.7 years, while that of the experimental group was found to be 21.3 years. The data indicate that the two groups are similar in terms of their demographic characteristics. Table 1 details the data.

Table 1. Demographic Characteristics of the Study Group

		Experimental G.		Control G.		Total	
		n	%	n	%	n	%
Gender	Female	20	87	21	91,3	41	89,1
	Male	3	13	2	8,7	5	10,9
Age	18-23	21	91,3	22	95,7	43	93,5
	24-26	2	8,7	1	4,3	3	6,5
Marital Status	Single	23	100	23	100	46	100
	Married	0	0	0	0	0	0
Monthly Income	10.000 & below	22	95,7	23	100	45	97,8
	Turkish Lira (TL)	1	4,3	0	0	1	2,2

G.; Group.

The pre-test data pertaining to the scales and sub-dimensions employed in the experimental and control groups were subjected to an independent samples t-test for analysis. In his study, Callak expressed the p values as ($p < 0.05$), ($p < 0.01$) and ($p < 0.001$), which indicate whether the difference between the group means is statistically significant. The smaller the number on the right side of the comma, the smaller the unit error number (Callak, 2020:152). Given

that the p-values derived from the t-test for unrelated samples exceed 0.05, it can be concluded that no statistically significant difference exists between the pre-test averages of the groups. Furthermore, all observed differences are less than 1.91, indicating that the groups are equivalent in terms of the dependent variables at the pre-test stage. Table 2 details the data.

Table 2. Independent Samples T Test Results (Pre-Test)

	Levene's Test for Equality of Variances		t-test for Equality of Means			
	F	Sig.	t	df	Sig.(2)	Mean Diff.
Life Quality Physical Comp.	,311	,580	-,443	44	,660	-,96
Life Quality Mental Comp.	,023	,880	,506	43,3	,615	1,49
Mental Well-Being	,209	,650	-,264	44	,793	-,73
Self Esteem	,785	,381	-,646	44	,521	-1,91
Self-Liking	,400	,530	-,812	44	,421	-1,47
Self-Competence	,994	,324	-,294	44	,770	-,43

N1= 23, N2=23, Comp.; Componen.

The dependent samples t-test for the pre-test and post-test of the scales applied to the groups revealed no significant difference, as the significance value for the data belonging to the control group was greater than 0.05. Upon examination of the pre-test and post-test averages of the experimental group, it becomes evident that a statistically significant difference exists. This is evidenced by the significance values for the mental component of quality of life, mental well-being, self-esteem, self-liking and

self-competence, which are sub-dimensions of self-esteem, falling below the $p < 0.01$ threshold. No significant difference was identified in the physical component of quality of life. The effect sizes pertaining to the significance of the observed characteristics are calculated and presented in the table. The highest level of statistical significance was observed in the domain of mental well-being, with a p-value of 0.000 and a d-value of -1.130. Table 3 details the data. Independent samples t-test was used to analy-

Table 3. Paired Samples T Test Result (Pre-Test & Post-Test)

Groups		Mean	S	df	t	d	Sig.(2)
Life Quality Physical Comp.	Experimental Group	-2,11	6,34	22	-1,601	-,333	,124
	Control Group	-,23	9,29	22	-,121	-,025	,905
Life Quality Mental Comp.	Experimental Group	-7,44	11,69	22	-3,055	-,636	,006**
	Control Group	-3,03	10,33	22	-1,407	-,293	,173
Mental Well-Being	Experimental Group	-8,60	7,61	22	-5,422	-1,130	,000**
	Control Group	-1,65	9,78	22	-,810	-,168	,427
Self Esteem	Experimental Group	-5,04	6,93	22	-3,490	-,727	,002**
	Control Group	-,17	4,91	22	-,170	-,035	,867

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Self-Liking	Experimental Group	-2,60	4,38	22	-2,852	-,594	,009**
	Control Group	,17	4,01	22	,208	,043	,837
Self-Competence	Experimental Group	-2,43	3,35	22	-3,480	-,725	,002**
	Control Group	-,34	2,80	22	-,594	-,123	,558

N1= 23, N2=23, ** p<0,01, S; Standart Deviation.

se the post-test data relating to the scales and sub-dimensions of the scales used in the study. The relevant values created by considering the p values of Levene's Test are shown in Table 4. Given that the p-value derived from the independent samples t-test was less than 0.05 for the mental component of quality of life and less than 0.01 for mental well-being, a statistically significant difference was identified. An effect size (d) of 0 indicates that the means are

equal. Values such as $d = 0.2$, $d = 0.5$, and $d = 0.8$ are considered to be small, medium, and large effects, respectively (Green & Salking, 2005:169; cited in Can, 2013:121). The effect sizes pertaining to the discrepancies were calculated and presented in Table 4. The effect size of the significant differences was $d=0.609$ (medium level) for the mental component of quality of life and $d=0.899$ (high level) for mental well-being. Table 4 details the data. The results of

Table 4. Independent Samples T Test Results (Post-Test)

	Levene's Test for Equality of Variances		t-test for Equality of Means				Mean Diff.
	F	Sig.	t	d	df	Sig.(2)	
Life Quality Physical Comp.	,613	,438	,402	,118	44	,690	,92
Life Quality Mental Comp.	2,058	,158	2,067	,609	44	,045*	5,90
Mental Well-Being	2,591	,115	3,049	,899	44	,004**	6,21
Self Esteem	,001	,982	1,057	,311	43,9	,296	2,95
Self-Liking	,381	,540	,793	,233	44	,432	1,30
Self-Competence	,024	,877	1,129	,332	43,9	,265	1,65

N1= 23, N2=23, **p<0,01, *p<0,05, Comp.; Compent, Mean Diff.; Mean Difference.

the simple linear correlation analysis, which was conducted to ascertain the relationships between the scales and sub-dimensions in the study group, are presented in Table 5. The results of the correlation analysis indicate that there is a moderate, positive, and statistically significant relationship between the mental component of quality of life (QoL) and mental well-being (MWB) ($r = .516$, $p < 0.01$). The coefficient of determination (COD) is 0.26. A moderate, positive, and significant relationship is observed between LQM and self-esteem (SR) ($r=,347$, $p<0.05$, $cod=0.12$). A moderate, positive, and significant relationship is observed between LQM and self-liking (SL) ($r=,357$, $p<0.05$, $cod=0.12$). A moderate, positi-

ve, and significant relationship is evident between MWB and SR ($r=,648$, $p<0.01$, $cod=0.41$). A moderate, positive, and significant relationship is evident between MWB and SL ($r=,609$, $p<0.01$, $cod=0.37$). A moderate, positive, and significant relationship is evident between MWB and self-competence (SC) ($r=,556$, $p<0.01$, $cod=0.30$). A strong, positive, and significant relationship is evident between SR and SL ($r=,912$, $p<0.01$, $cod=0.83$). A strong, positive, and significant relationship is evident between SR and SC ($r=,889$, $p<0.01$, $cod=0.79$). A moderate, positive, and significant relationship was observed between SL and SC ($r = 0.623$, $p < 0.01$, $cod = 0.38$). Qualitative findings of the study

Table 5. Correlation Analysis of Scales and Sub-Dimensions

Scales	Mean	S	1	2	3	4	5	6
1. Life Quality – Physical Comp.	50,9	7,7	-					
2. Life Quality – Mental Comp.	40,8	10	,153	-				
3. Mental Well-Being	51,3	7,5	,274	,516**	-			
4. Self Esteem	54,1	9,4	,193	,347*	,648**	-		
5. Self-Liking	28,5	5,5	,185	,357*	,609**	,912**	-	
6. Self-Competence	25,6	4,9	,162	,264	,556**	,889**	,623**	-

N=46, ** p<0,01, * p<0,05. Comp.; Components, S; Standart Deviation.

Qualitative findings of the study

In the process, the interview form was applied to the experimental group twice. There were 5 questions in the first form and 9 questions in the second form, and the first 5 questions consisted of the same questions. When the codes created are examined; it is

seen that the group’s level of interest in the practices is mostly high (a=23), the contribution of the practices to the struggle of the individuals in the group with life is mostly good (b=23) and the effect of the practices on reducing the stress of the individuals in the group is mostly good (b=20). Figure 6 details the data.

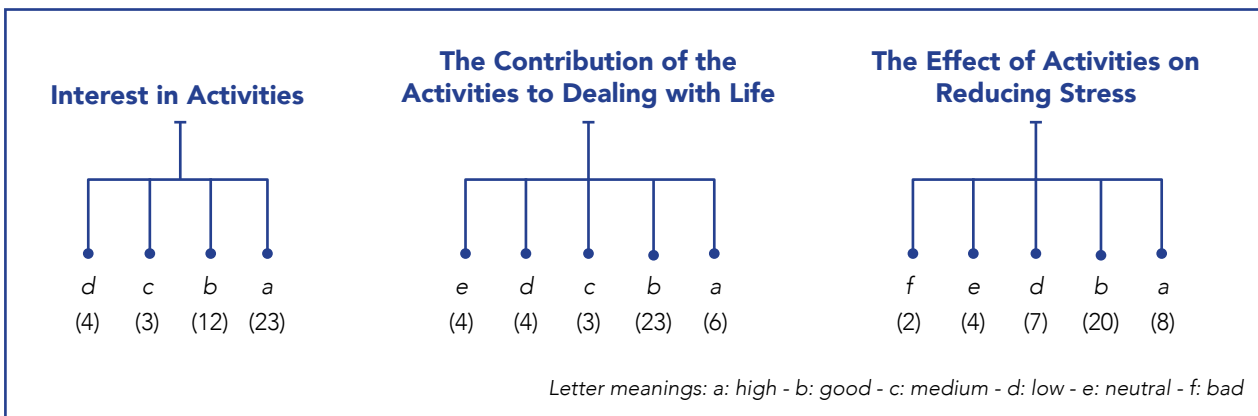


Figure 6. Interest in Activities, Contribution of Activities to Struggle with Life and Effect of Activities on Stress Reduction

Upon analysis of the codes created for the effect of the applications on the emotional state, as illustrated in Figure 7, it becomes evident that the

highest code values pertain to the enhancement of happiness (30), entertainment (7), and awareness (5). Upon examination of the codes created for the

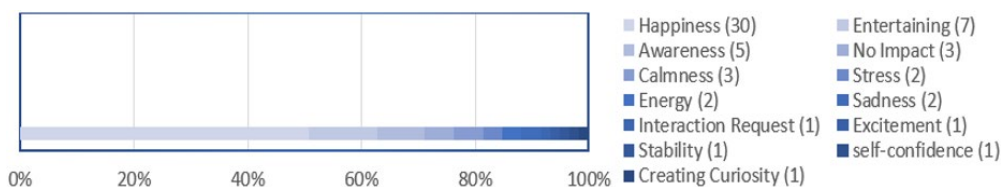


Figure 7. Emotional and Mental States that the Practices Elicit

mental, spiritual and social effects of the practices, it becomes evident that the highest code values are general positive effects (12), resting and relaxing (6),

developing insight (5) and increasing awareness (5). Figure 8 details the data.

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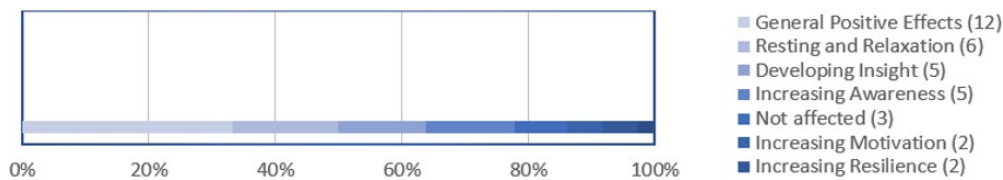


Figure 8. Mental, Spiritual and Social Effects of Practices

Upon analysis of the remaining data, it was determined that the most popular application was one that pertained to the themes of poetry, old age, and awareness. The highest-ranking codes in the set of codes created for the other questions are as follows: 1) The applications provide motivation for me in my daily work. 2) The aforementioned practices engendered a sense of value. 3) It would be beneficial to implement these practices on an annual basis, as it would positively impact my morale.

Discussion

The objective of this study is to evaluate the impact of three-month-long TR practices on second-year students enrolled in the Department of Preschool Teaching in terms of quality of life, mental well-being, and self-esteem. Additionally, the study aims to examine the relationships between the variables employed and to assess the effects of these practices on individuals experiencing stress. By comparing relevant literature and quantitative-qualitative data, the findings from the applications were discussed through the research questions.

1. Does participation in TR interventions result in an improvement in the quality of life of the individuals concerned?

Following the implementation of therapeutic recreation practices among the student cohort, no notable enhancement was discerned in the physical domain of quality of life across both groups. The only area in which the experimental group did not exhibit a statistically significant difference in the dependent relations t-test was the physical component of quality of life. This may be indicative of an increase in the accuracy of the characteristics measured in the study. As no focus was placed on physical development in the study, With regard to the mental component of quality of life, the dependent relations t-test revealed no significant difference between the control and experimental groups. Furthermore, the independent samples t-test of the post-tests revealed a significant difference in the mental component of quality of life between the experimental and control groups, with the former exhibiting a higher score. The content analysis results indicate that the mental, spiritual and social effects of the practices are predominantly positive, restorative and relaxing. In accordance with the aforementioned evidence, it can be concluded that TR practices enhance the qu-

ality of life. In addition, the following examples from the literature demonstrate similar outcomes:

Cerit et al. conducted a 1-week TR program that included various practices for mothers with children with autism. As a result of the research, it was determined that the depression symptoms of the mothers decreased and their quality of life increased (Cerit et al., 2022). Community-based TR and an adapted sports program applied to individuals with disabilities positively affect quality of life and general health. It also improves the quality of social life (Zabriskie, 2005). TR practices can be beneficial for self-esteem and quality of life in elderly patients (Kordi et al., 2019). Especially after secondary education, students can be supported in mental health with awareness-themed recreational activities (Litwiller et al., 2022).

In the course of the interview, the student articulated a series of statements that serve to substantiate the assertion that there has been a notable enhancement in the mental dimension of quality of life. The following list provides an overview of the aforementioned sentences:

C054: Mentally, my mood has improved in a positive way, as if I was immersed in a deep thought. I have a more positive and smiling face whereas before I had a sullen face. The speeches and motivating words we have made in the activities come to my mind during the day and motivate me and make me feel positive emotions. My stress level has improved and I have become aware of some things and realized that I shouldn't worry and stress so much.

2. Does participation in TR practices affect participants in terms of mental well-being?

The results of the dependent relationships t-test for the mental well-being scale applied in the study show no statistically significant difference in the control group, while it shows a significant difference in the experimental group. The effect size, calculated as a result of the test ($d = -1.130$), indicates that this difference is at a very large level. The independent samples t-test for the post-tests revealed a statistically significant difference in mental well-being between the experimental and control groups, with the former exhibiting higher levels of well-being. The content analysis revealed that the practices in question possess characteristics conducive to fostering positive states, relaxation, awareness, and enhanced insight. In accordance with the aforementioned evidence, it can be concluded that TR practices

enhance mental well-being. In addition, the results of this study are consistent with the results of another study using similar applications and obtaining similar results:

Music therapy practices for university students and their parents can bring a calm mind and relaxation (Yücesan & Şendurur, 2018). Participation of disabled individuals' trainers in activities to evaluate their free time positively affects their mental well-being levels (Yüksel, 2023). There is a moderate, positive and significant relationship between recreation experience and psychological well-being (Akova et al., 2019). Mindfulness and self-competence-based interventions for undergraduate students can increase psychological well-being (Klainin-Yobas et al., 2016).

In the course of the interview, a number of students articulated their support for the increase in the level of mental well-being, citing the significant difference it would make to their lives. Their statements are as follows:

Y005: I think we would be happier if activities that provide psychological support in addition to the lessons continued. I used to fall psychologically in every difficult situation, but now I have a more positive approach.

N062: My mind was relaxed. It was like I was very tired and I was resting.

C054: I have come to the conclusion that no matter how negative situations are, there is always a way out and that I can be motivated even in a difficult situation where the spirit of struggle is closest to us.

S047: I think my mind rested a little bit. I can say that I affected it in a good way.

3. Does participation in TR practices affect self-esteem?

The results of the dependent relations t-test for the self-esteem scale and its sub-dimensions applied in the study demonstrate no statistically significant difference in the control group. However, they indicate a significant difference in the experimental group. In light of these findings, it can be posited that TR practices exert a beneficial influence on self-esteem, self-liking and self-competence, as evidenced by the significant discrepancy between the pre-test and post-test averages of the experimental group. In addition, the literature provides several examples of similar applications and outcomes, as follows:

Group recreation therapy practices are effective in increasing life satisfaction and decreasing depression in elderly individuals and can increase self-esteem (Kim, 1999). There is a relationship between the increase in self-esteem and the decrease in depression level. TR practices can help to increase self-esteem and reduce depression in elderly individuals (Huycke, 2014). The practices can be beneficial for self-esteem in elderly patients (Kordi et al., 2019). Outdoor nature-based TR practices that improve ps-

ychological well-being help individuals with mental illness to improve their intrinsic motivation, purposeful outlook on life, and self-esteem, as well as to cope with difficulties (Picton et al., 2020). Poetry writing and creative drama activities can reveal individuals' sense of accomplishment. Poetry therapy, music therapy and creative drama practices are effective methods to increase self-esteem (Yücesan & Şendurur, 2018).

N019: The activities gave me self-confidence, determination and a positive outlook. It made me look at life more positively. It increased my belief that I can do better. We should do what we want while it is not too late and we are still young to do things.

R010: I think more about things now, I don't just run away and isolate myself.

E037: I definitely felt that I was a conscious individual and it made me feel valuable.

E059: Valuing and listening to my ideas made me feel valuable

In the results of the post-tests applied to the groups, it was observed that the average of the experimental group was higher in self-esteem and its sub-dimensions for the independent samples t-test, but no significant difference was found. Given that the initial needs analysis indicated low self-esteem and high future anxiety, it is possible that a three-month programme may have been insufficient to facilitate improvements in these areas.

Some of the participants indicated that they experienced stress during the initial stages of the practices and asserted that they were not affected by the practices themselves. Upon analysis of the qualitative data, it became evident that the stress experienced by individuals was a consequence of the emergence of new emotions and heightened self-awareness. Two participants provided the following statements:

M048: I can say that it increased my stress. Because it made me realize myself. This situation caused me to get a little tense.

G048: I don't think there has been any change.

These data are included in the interview forms after the second administration of the study. In other words, these are the words expressed at the beginning of the interventions, when individuals' emotions were just emerging. The same question was asked again in the qualitative data collected during the last practices of the research and no negative answer was found. In this sense, although the practices caused some stress in the individuals' confrontation with themselves, this situation is a transitional process and does not express any negativity.

Another interesting data of the study is the improvement of the social skills of the participants. TR practices can play an effective role in improving individuals' self-expression skills. The participants' opinions

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supporting the relevant data are as follows:

Ş003: *I found the opportunity to express myself more easily.*

B045: *This game made me realize how I can express myself.*

Focusing on the qualitative data of the study, it was found that TR practices were very interesting for the majority of the participants. It can be said that the practices played an effective role in increasing the will to struggle with life, increasing motivation for daily tasks and reducing stress. In addition, the majority of the experimental group stated that the practices made them feel valuable and that they wanted to repeat them every year. In all these data, there are also a few negative statements, as shown in Figure 6, Figure 7 and Figure 8. However, the positive statements are clearly in the majority. In this context, it can be said that the need for TR practices in universities has emerged. There are student opinions that support this conclusion. Some of the answers to the question "Should the activities take place every year?"

R010: *Yes, because I feel we are breathing, we are having a fun and different process for ourselves in the chaos of classes and life.*

Ş003: *Yes. I wish there were more of them. I used to like Fridays very much, and thanks to these activities, I liked them even more. The different activities every week and our teachers' interest in us were very good for me. I found the opportunity to express myself more easily.*

S047: *I think it is good to do it this semester because we are in a busy and lecture-filled semester and I think these activities are good to stop and take a breather. I don't know if it can be done every year, but it would be nice to do it in between.*

In the observations made during the research process, there is data to show that therapeutic recreation practices are meaningful and valuable to participants. Some data on the effect of the practices on emotional processes are as follows:

GN01: *Two days ago I had a negative situation in my life and it was very good for me to participate in such an event.*

GN02: *Today was the last one of our weeks-long event. It was very valuable and beautiful for us. Thank you for everything.*

GN03: *It was meaningful for me. I will miss you, teacher.*

It can be seen that the TR practices reveal students' feelings about making sense of life and looking at life with hope. In the creative writing activity about trees, one student's hopeful words, reflecting her own feelings, are as follows:

GN04: *Hello, beautiful tree. I know, you are very tired and they broke your branch. Whether you dry up*

and your leaves wither or you blossom and turn green, whatever happens, you are very special and precious. Sunny days will surely be with you one day, if not today. Just don't lose your life energy and don't be afraid of making mistakes. The pain you feel today will be the strength you feel tomorrow.

The impact of therapeutic recreation practices on individuals is manifold. A review of the literature reveals a broad range of applications for these practices, as evidenced by studies conducted by Buettner et al. (1996), Walker & Pearman (2009), Koçak (2016), Bor (2018), Yozcu et al. (2019), Uzun Dönmez (2019), Carbone et al. (2021), Genoe et al. (2024), Hanlon et al. (2024) and Yousiph et al. (2024).

Conclusion and Recommendations

This study, which examines the effect of therapeutic recreation practices on the quality of life, mental well-being, self-esteem and stress levels of preschool students and analyses the relationship between the variables, contributes to the literature by offering a different perspective to the literature and drawing attention to a number of important pieces of information with the significant differences found. The data obtained from the research shows that therapeutic recreation practices can be used as an effective method to increase the well-being of preschool students and enable them to cope with stress in daily life. In addition, the research also shows the need to implement therapeutic recreation practices that can be used in indoor and outdoor areas with a sustainable programme in universities.

The results of the study show that the TR practices had a positive impact on the students' quality of life. The practices led to an increase in the mental component of quality of life. In addition, TR practices significantly increased students' mental well-being. The effect size of the difference in mental well-being was found to be very large. In this sense, it can be said that TR practices are an effective method in providing mental relaxation and reducing psychological negativity. In addition to the positive effect on students' self-esteem, the practices also had a positive effect on their self-liking and self-competence perceptions in the sub-dimensions. Qualitative data from the study also supports this information. In the light of this information, it can be said that therapeutic recreation practices carried out with 2nd year students in the Department of Preschool Education increase quality of life, psychological well-being and self-esteem.

It can be said that the practices played an effective role in revealing the emotions of individuals and getting to know themselves. The results of the qualitative data analysis show that TR practices reduce stress, provide happiness, create a positive outlook, increase awareness, provide rest and relaxation, are effective in developing insight and motivation, inc-

rease energy by providing a fun environment, and sometimes provide tranquillity. In addition, some people stated that they were able to express themselves better. In this sense, it can be seen that TR practices have positive effects that increase social skills. All these results were found through the implementation of music therapy, poetry therapy, drama, creative writing, painting, nature, play, social skills, awareness, insight and empathy themed practices.

This research shows that it is possible to design many applications that can be an alternative to widely used applications such as meditation. The two practices that were most popular with participants were 'poetry, age and mindfulness' and 'poetry, trees and creative writing'. Throughout the research process, the practices were continually redesigned. In designing the applications, we focused on the definition of TR, expert opinion, the needs analysis conducted and the factors that could positively influence the dependent variables. With the evaluation of all these data, it was seen that the development of original applications was effective in identifying and improving problems. Other researchers can use the steps in this research when developing a practice/activity that aims to promote well-being in the social sciences.

When we look at the results regarding the relationships between the dependent variables of the research, there is a moderate, positive and significant relationship between the mental component of quality of life and mental well-being, self-esteem and self-liking. There is a moderate, positive and significant relationship between mental well-being and self-esteem, self-liking and self-competence. There is a strong, positive and significant relationship between self-esteem and self-liking and self-competence. There is a moderate, positive and significant relationship between self-liking and self-competence.

The involvement of academics in the design of these activities can make students feel more comfortable. Qualitative data supports this information. Implementing these practices not only in universities, but also with all individuals in society who are experiencing stress, who wish to maintain their current well-being or who wish to achieve a better well-being, can help to increase social well-being and cohesion. In addition, planned therapeutic recreation activities can play an important role in the development of public health services and the social improvement of the community. When we talk about different research proposals, planning TR practices for teachers working in existing schools and office workers in companies and integrating these practices into working hours can be a source of different perspectives. It can be reasonably proposed that recreational activities represent an efficacious solution for reducing the gender gap in societies and focusing on women's well-being. An in-depth

exploration of how TR practices can make a destination attractive to young adults in terms of tourism could be of interest. In this sense, the potential of TR practices within the scope of health tourism can be examined. Research focusing on measuring the differences in impact between environments with different atmospheres can be designed. The fact that the activities carried out in the research do not aim at physical well-being can be shown as a limitation of this research. It is recommended that new researchers focus on the other fields of study mentioned, especially universities, and extend TR to new fields of study.

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