Debate & Analysis

Green fingers and clear minds:

prescribing 'care farming' for mental illness

INTRODUCTION

GPs face considerable challenges in accessing effective treatment options for patients with depression and anxiety.^{1,2} Antidepressant use has been rising steadily since the early 1990s and GPs have been accused of over-prescribing, with approximately 70% of depressed patients in primary care being prescribed antidepressants.³ National Institute for Health and Care Excellence (NICE) guidance recommends reductions in prescription of antidepressants and increased access to talking therapies.⁴ However, the flagship government programme Improving Access to Psychological Therapies (IAPT) currently has long waiting lists and inconsistencies across clinical commissioning groups (CCGs). Furthermore, even when patients do receive their therapy, approximately 50% of anxious and depressed patients do not recover.⁵

GPs clearly need an increased array of timely options for these patients. There are several options being tried by CCGs to provide alternatives to medication and to reduce long waiting lists for psychological therapies. Although using nature as an aid to mental health recovery is not new, the concept has evolved from what was once an adjunct to institutional psychiatric care to community-based multifunctional 'green care' services. Here, working in nature is the primary intervention and is supported by skilled horticulturists and farmers. These interventions are gaining in popularity and have received high-profile support.⁶

WHAT IS CARE FARMING?

Care farming (or 'social farming') is a type of green care intervention and has been defined as the use of commercial farming and agricultural landscapes to promote mental and physical health through normal farming activity.⁷ Essentially, these are farms where different client groups can participate in a variety of farming activities under the supervision and support of the skilled farmer and their team. There are currently around 230 care farms in the UK providing health, social, and educational care services for a wide range of client groups including people with mental ill health, learning disabilities, autism, and dementia.⁸ Care farming is active across much of Western Europe.

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WHY MIGHT IT WORK?

Although care farming is an overtly practical approach, various theories suggest a sophisticated and subtle web of social, mental, and physical interactions providing a potentially potent complex intervention. One theory with particular resonance for care farms that has also been applied to horticulture therapy⁹ is the concept of recovery.¹⁰ Here, recovery concepts are combined with those from other social and ecological theories to help explain the potential effectiveness of care farms for those with mental ill health.

- *Being socially connected.* Working on the farm provides a non-threatening opportunity for social interaction. The focus on the work of the farm means that connections with others are not the focus of the activity, but rather a by-product. For those suffering from mental ill health this can take the pressure off social interactions. The attention is no longer solely on the individual but instead on working together on the task at hand. Where these tasks involve giving attention to the needs of animals and plants there is the opportunity to regain the ability to care and consider others, a vital function for healthy human relationships. Furthermore, interaction with animals is already established as a mechanism for reducing stress and anxiety.
- *Personal growth.* It allows the opportunity to build skills and, importantly, gain the self-efficacy that comes from learning and implementing these skills. Gaining such skills can bring a sense

of hopefulness so vital to mental health recovery. Some care farms provide opportunities for taking these skills a step further to qualifications that can provide a vital stepping stone to employment and recovery.

- *Physical activity.* The links with physical activity and mental health are well established. Working on a care farm provides ample opportunity for physical activity. It has the advantage that it is not undertaken purely for the purpose of doing something physical, but instead is performed, almost unconsciously, as part of ordinary farm activities. Feeling physically tired at the end of the day is frequently highlighted by those attending care farms as a positive aspect, helping them to sleep and providing a sense of achievement.
- *Restorative effects of nature.* The fact that this physical activity can be done in nature adds to its effectiveness, reducing feelings of stress and leading to a sense of calm.¹¹ Although care farms offer this opportunity to be in nature, they go further, as those on the farm have to get their hands dirty and work with nature. Theories of mental health and recovery frequently identify the concept of being able to rest and restore attention. Care farms provide this opportunity to engage in an activity, whether it is planting vegetables or tending to livestock, which requires concentration and attention but does not require intense thought. This process of non-taxing engagement allows the mind to relax, reducing the

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constant bombardment of worries and concerns that are such a feature of mental ill health. Working with nature in this way provides the mental space needed to regain the ability to focus attention on more taxing tasks.

Care farming sits within the third sector, supporting multiple client groups. Perhaps as a consequence the research on effectiveness has lacked the robustness required to secure its place as a recognised healthcare intervention. For example, the few quantitative studies that have been conducted are characterised by small sample sizes and limitations in design, thus providing unreliable evidence of effect. A similar picture emerges for other green care interventions including, for example, therapeutic horticulture where there have been more attempts to conduct randomised trials with some tentatively promising results.¹² Within care farming, qualitative studies have shed light on the experiences of those attending care farms, highlighting the reasons why care farms can potentially improve mental health.¹³ Care farmers themselves are often a key ingredient in the success of the care farm in supporting those with mental ill health. Qualitative studies frequently identify this relationship as key to positive experiences on the farm. Care farmers act as non-judgemental mentors, supporting clients to develop skills to undertake the routine farming tasks.

HOW CAN THEY BE USED BY GPs?

The theory and qualitative evidence highlight how care farms offer great potential as an intervention for those with mental ill health. Currently there are several examples of systems whereby GPs can refer patients with mental ill health to care farms. These are small schemes and utilise different approaches to linking patients with care farms, with direct referrals or via community mental health teams. For some examples, see <https://www.growingwell.co.uk/> and <http://www.clinkscarefarm.org.uk/farming-on-prescription>.

A simple one-stop referral process from

GPs to these non-medical interventions will ensure an integrated approach. For example, some CCGs are now implementing a 'social prescribing' model whereby one referral form is dealt with by a 'hub' organisation that links the patient to appropriate community interventions. In Leeds this model includes nature-based interventions, as part of a suite of 'treatment' options. There is great potential to link care farms into these social prescribing networks to facilitate access for those with mental ill health, providing an alternative or adjunct to existing overprescribed interventions.

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