

**Study on the effects and elements of
“care farm treatment” on depressive and anxiety disorders**

**Studie naar de effecten en elementen van
de “zorgboerderij-behandeling”
op depressie en angststoornissen**

Report

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1 Introduction

The agricultural sector in the Netherlands has undergone significant changes over the past decades, in a continuous search for its added value and increased acceptance. In this context, one practice in particular has enabled farmers to link up to other societal sectors and to add new meanings to their work - namely, the farm-based provision of care for people with various mental and / or physical disabilities, additional to (or in place of) agricultural production. The number of farms providing care services, or “care farms” (in Dutch: “zorgboerderijen”), has increased rapidly during the past decade, both in absolute numbers¹ and relative to the entire agricultural sector².

In itself, this development could indicate that care activities on farms are popular among farmers and clients alike. For the former, the interest for care farming could be explained through its potential (Hassink, 2007); for the later, however, the significance of farm-based care was, at the time the project started, unclear. In this context, the current research project set out to explore the relevance of care farms for the care of adults with mental disorders, the largest client group on farms, and in particular for adults with depression and/or anxiety disorders.

¹ From 75 care farms in 1998 to 1088 in 2009 (Verenigde Zorgboeren, 2010)

² From 7 to 149 care farms per 10,000 agricultural enterprises in 1998 and 2009 respectively



2 Overview of the project

With the aforementioned aim in mind, we set out to explore care farms in the context of “day spending” services, setting up four different studies. We structured the analysis on several levels, from a reflection on the impact of care farms for society at large, then focused on the organizational level and finally narrowed it down to the individual level. The corresponding studies are presented below, in a logical, rather than chronological order. Whenever available, the results are summarized.

2.1 Study 1

Provisional title: Societal reflections on care farms

Research question: How does the Dutch society reflect on the care farm sector, and to what extent does membership to various societal actor groups influence the discourse on this development?

Methodology: This study consisted in a review of academic, professional and general media articles published on the topics of care farms, from which we identified the societal actors interested in care farms and the themes which they found relevant. This can further stimulate the communication between stakeholders in the field of care farming, giving them the opportunity to mutually acknowledge specific interest and common grounds, thus facilitating the communication, interaction and collaboration in the context of the care farming practice.

Current status: The data collection is completed, and the analysis is ongoing.



2.2 Study 2

Title: Multifunctional farming: the role of the external environment in the development of Dutch care farming practice

Authors: M. Zweekhorst, S. Iancu, J Broerse, J. Bunders

Abstract:

The structure of the agricultural sector in the Netherlands has undergone significant changes over the past decade. A remarkable development is the increase in multifunctional farms, and more recently – care farms offering services to vulnerable people. In this study, we aim to clarify how and why care farms have developed in the Netherlands. Based on literature research, analysis of on-line databases and interviews with care farmers, we assess the increasing trend and the contribution of external environmental factors in the sharp increase of the care farm sector in the Netherlands. The number of care farms increases although the number of farms decreases, most strongly dairy farms. Various factors favoured this decrease (regulations on the EU level, reduction of milk prices and reduction of agricultural subsidies). The development of care farms was also supported by the adaptation by the Dutch government of a financial source for long term care. We conclude that diversification towards a care farm seems to be an attractive strategy especially for Dutch dairy farmers.



2.3 Study 3

Title: Opportunities for and challenges of integrating the care farming practice in the provision of psychiatric rehabilitation services

Authors: S. Iancu, M. Zweekhorst, T. van Balkom, D. Veltman, J. Bunders

Abstract

This mixed-methods study explores the experiences of rehabilitation professionals and practitioners on farms with the development of farm-based care services in the Netherlands, in order to understand their potential for psychosocial rehabilitation. We conducted semi-structured interviews with 30 rehabilitation professionals and practitioners on farms and performed national trend analysis on collaboration indicators. Rehabilitation professionals and practitioners on farms shared positive views on the provision of farm-based care for people with mental disorders, mentioning its small-scale, output-focused, community-based approach as its main strengths. For the first, additional impetus to become involved was provided by recent policy developments, namely the shift *away* from the provision of creative, recreational, educational activities and *towards* vocational rehabilitation and integration of psychiatric patients into society. In this context, care farms were seen by as a mean to fulfill these requirements for care, similar to other social firms; in addition, care farms provided clients with flexible work schedules, making them suitable for non-participants in vocational rehabilitation. For care farming practitioners, involvement in this practice was triggered by economic, professional and ideological rationale, additionally supported by legal frameworks allowing the involvement and self-determination of psychiatric patients in their long-term care. However, incongruences between rehabilitation professionals and practitioners did occur, in the context of the fear of the possible revival of the mental asylum, for the first, and of a sense of competing for resources and patients, for the latter. At least in the Dutch context, farm-based services are likely to play an increasingly important role in psychosocial rehabilitation. However, potential tensions between the professionals and practitioners need to be timely addressed, in order to ensure optimal provision of on-farms rehabilitation services for people with mental disorders.



2.4 Study 4

Title: Users' experiences with and perceptions of day care services on care farms and day activity centres: an explorative study

Authors: S. Iancu, M. Zweekhorst, T. van Balkom, D. Veltman, J. Bunders

Abstract:

Psychiatric rehabilitation aims to enable persons with serious mental disorders to develop the skills needed to live a normal life in the community. In the Netherlands, day care activities are provided at day activity centres (DAC), and, more recently, on private care farms (CF). In this mixed-method study, we set out to explore the goals and daily routines of 26 CF- and DAC-users, their subjective perceptions thereof, and the extent to which goals were met on these services. We found that both CF and DAC seemed to accommodate two distinctive types of services: for the former, we made the distinction between care- and production-oriented care farms (CCF and PCF respectively) and for the latter, between sheltered workshops and sheltered education (SW and SE respectively). All users expected that having a day-time occupation, the most prevalent goal expressed during the interviews, would help them deal with problems across three domains: management of disorder, building social relationships and accessing work opportunities. SW-users were additionally motivated by the availability of vocational rehabilitation programmes, and CCF-users, by contact with nature. SW and CF shared many similar features: daily routines focused on work, naturally-facilitated communication based on common tasks, and the important role played by coaches (including care farming practitioners fulfilling this role). By contrast, SE fostered more individually-focused experiences, with SE-users involved in personally-relevant projects, and with peer interactions focused on sharing personal experiences of mental problems. In addition, CF-users referred to several aspects not mentioned by their counterparts, such as the explicit understanding of the social role they fulfilled on the farm, the feeling of belonging to a real community, and the diversity of work available on farms. To conclude, this study suggested that SE, SW and CF services could be viewed as a continuum of services, rather than alternatives to each other. SE fulfilled needs related to the management of mental disorders, SW and CF addressed mainly needs related to social interaction in a regular work environment. In addition, CF seemed to promote reflection on social roles and responsibilities, thus acting as a bridge back to a "normal" life.



2.5 Study 5

Title: Day care services for people with depression / anxiety disorders

Authors: M. Zweekhorst, S. Iancu, J Broerse, J. Bunders

Research question: *What is the relevance of day care services for the care of people with depression and / or anxiety?*

Methodology: This study compares changes in measures of depression and anxiety, as well as other health-related assessments, in users of care farms and in users of regular day activity centres, and compare it to patients with no day care (already evaluated in the NESDA study). Methodologically, it combines validated psychiatric questionnaires with qualitative interviews applied at four assessment times (at intake, after 3, 6 and 12 months).

Current status: The research protocol was evaluated by the Scientific Committee of EMGO Institute at VUmc; the Medical Ethics Committee of VUmc; Landzijde Management Board and Clients' Committee; REAKT Management Board and REAKT Clients' Committee. Furthermore, five researchers working at Athena Institute were trained for the data collection through two two-day workshops organized by the Department of Psychiatry of the University of Groningen and by the staff of the NESDA study at VUmc respectively. These sessions were then completed with additional workshops on qualitative data collection at Athena Institute. The intake phase was started, and the recruitment of study participants is ongoing.



3 Deliverables

3.1 *Scientific publications*

The five studies described before yielded materials for the following scientific articles:

1. “Dynamic learning processes as key features of rehabilitation practices on Dutch Care Farms” (provisional title; status: in preparation)
2. “A case study on multifunctional agriculture: the role of the external environment in the increase in the number of Dutch care farms” (status: in preparation)
3. “Opportunities and challenges in the development of public-private partnerships for the rehabilitation of people with mental disorders” (status: in preparation)
4. “Clients’ experiences of and satisfaction with day care – a qualitative analysis” (provisional title; status: data collection is ongoing)
5. “Short- and medium term effects of day care on the psychosocial functioning of people with mental disorders” (provisional title; status: data collection is ongoing)

It is foreseen that in 2012 the PhD thesis on this subject will be finished and defended. The provisional title for thesis is “New dynamics in psychiatric rehabilitation services: the case of the Dutch care farms”.

3.2 *Conference presentations*

1. Iancu, S, Zweekhorst, M., Van Balkom, T., Veltman, D., Bunders, J. 2010. Opportunities and challenges in the development of public-private partnerships for the rehabilitation of people with mental disorders. Presented at the 20th World Congress of Social Psychiatry, 23-27 October 2010, Marrakech, Morocco

2. Iancu, S, Zweekhorst, M., Van Balkom, T., Veltman, D., Bunders, J. 2010. Dynamic learning processes as key features of rehabilitation practices on Dutch Care Farms. Presented at the 20th World Congress of Social Psychiatry, 23-27 October 2010, Marrakech, Morocco



3.3 Protocols

The current research project entails two studies conducted at individual level (namely, 2.4 Study 4 and Study 5). The protocol for these studies was reviewed by the Scientific Committee of the EMGO Institute at VUmc and by the Medical Ethics Committee of VUmc. A summary of this protocol is presented below.

Rationale: *During the last decade, care farms (CFs) - enterprises that combine agricultural activities with the provision of care mainly for psychiatric clients - have become increasingly visible in the Netherlands. Preliminary studies carried out on small and heterogenic populations seem to indicate that the care farm setting can benefit the mental health of clients. However, the knowledge of how these day services can be integrated with other third-line care services (the day activities centres, DACs) is still fragmented, and further developments are hindered by the lack of scientific evidence related to the effects of day spending at care farms for adults with psychiatric disorders.* **Objectives:** *The objectives of this study are to understand the clients' perspectives and experiences at CFs and DACs, to investigate if care at CFs and DACs is associated with improvements in functioning, quality of life and symptoms of depression and anxiety; and finally, to clarify the role of client characteristics in the response to care at CFs and DACs.* **Study design:** *The qualitative part is designed as a phenomenographic investigation based on interviews; the mixed methods part consists in a longitudinal observational study with two cohorts (day care at CFs and at DACs) in which measurements are carried out at intake, 3, 6 and 12 months. Baseline and follow-up characteristics will be compared to data in an out-patient cohort.* **Study population:** *The two cohorts will be formed by adults aged between 18 and 65 years of age, who suffer from depressive and/or anxiety disorders.* **Intervention:** *The condition under investigation is represented by day care at CF and DAC, for a period of minimum 3 months, with a frequency that can vary from half a day to ten half days of care per week.* **Main study parameters:** *The main parameters used in this study are the qualitative insights into the content of day care, expectations, experiences and satisfaction of clients at CFs and DACs; disability levels; health-related quality of life; severity of depressive symptoms; severity of anxiety symptoms; response and remission of depressive symptomatology.*



4 Lessons learned

The current project aimed to explore the relevance of the care farming practice in the context of psychiatric rehabilitation in general, and in the recovery from depression / anxiety disorders in particular. In undertaking such an initiative, Transforum and the Athena Institute set out to connect two sectors that share few if any common denominators, namely agriculture and mental health care. The intention was to bridge the two different worlds, in order to facilitate communication and to allow for the best practices on farms to be established. In this endeavor, we came across several challenges, which we would like to summarize here and to reflect on the lessons we learned so far.

Conceptually, this research has shown that the care farming practice is in fact an umbrella term; what we initially denoted as “care farms” seems to represent a heterogeneous sector accommodating several organizational formats (see Study 4), involving stakeholders with different discourses (see Study 1) and fostering a diversity of links with the formal psychiatric rehabilitation services (see Study 3).

From a process perspective, we learned that linking actors in agriculture and in mental healthcare is more of a challenge than expected. The two sectors are two worlds apart, with rules and processes established on different assumptions. The former presumes that care farms are a good option for people with mental disorders, and not always see the need in exploring links with the day spending services available within psychiatric rehabilitation. Furthermore, it perceives medical research as focusing on particular aspects, and, arguing that care farms act through a combination of aspects for the benefit of their clients, fears that such an approach would fail to convey the benefits care farms bring to their clients. By contrast, the medical community evaluates interventions on the bases of conceptually and methodologically valid research protocols, which are to be reviewed and approved by scientific and ethics committees, and the study on care farms was no exception. In preparing for the proposal submission, we discovered that within the field of psychiatric rehabilitation, the fundamentals for day care are not established. Since care on a farm seems to qualify as such an intervention (see Study 4), we identified this as



an opportunity to reflect on a large societal problem and enlarged the study to explore the relevance of day care in general for people with depression and/or anxiety disorders, while still giving special attention to the care farm group. Subsequent experiences (i.e., at the world congress of social psychiatry) confirmed that such an approach is needed, not only in the Netherlands but in other countries as well.

To conclude, we advise researchers interested in the effectiveness of green care for people with psychiatric disorders to identify and link up to research opportunities in the related fields, to screen all actor groups and incorporate their visions in the study protocol, and to design such protocols by making use of mixed methods research. While we still believe this is the most appropriate way to proceed with this kind of research, at least at the current stage, we are also aware of the difficulties of such a journey, and therefore we recommend that research teams undertaking it ensure that they can make use of professionals in all the areas touched by their research.



5 Project team: contact details

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