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13 Care Farms: A Health-Promoting Context for a Wide Range of Client Groups

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13.1 Introduction

13.1.1 What is a Care Farm?

This chapter synthesizes the knowledge that has been generated in recent years on care farming.

Care farming is a form of intervention for promoting human health and wellbeing through the use of a farm environment as the central element (Hassink, Elings et al., 2010; Hassink, Hulsink & Grin, 2014). Care farms serve a wide range of client groups, including people with learning disabilities, people with mental health problems, youngsters with social problems, people who are long-term unemployed, and people with dementia (Hassink et al., 2007; Prestvik, Nebell & Pettersen, 2013). In care farming, a series of activities and interactions with nature take place with the aim to provide health, social, or educational care services, employment skills, and support through the provision of a supervised, structured program in a supportive social community, rather than occasional one-off visits (Garcia-Llorente et al., 2018; Murray et al., 2019). Many farmers and staff members have an education in agriculture, health care and/or social care (e.g. social workers, registered nurses, nurse assistants, nurse aides, occupational therapists, and educational staff). There are often volunteers assisting in the services. Care farms often collaborate with and/or hire staff of regular care institutions (de Boer et al., 2019; Hassink et al., 2019; Ibsen, Eriksen & Patil, 2018).

Care farming has different representations and varies both between and within countries. They generally have some degree of commercial farming (i.e. crops, livestock, and woodland) combined with health, social, and/or educational care services. There is great variation among care farms regarding the ratio between farming and these services and the types of farming activities (e.g. dairy farm, industrial livestock farm, mixed farm, and forestry). Many farms have conventional agricultural production, while others are primarily care providers (Hassink et al., 2012; Ibsen, Eriksen & Patil, 2018; Murray et al., 2019). The majority of the care farms

offer day services, meaning that the client groups live in their own homes and come to the farm one day or several days a week, depending on their needs and home situations. Other farms offer 24-hour services, such as care farms providing 24-hour nursing home care to people with dementia or care farms offering living and working programs for youngsters with severe social and mental health problems. Additionally, there are a small number of care farms providing evening or weekend services as respite services to family caregivers (de Boer et al., 2015; de Bruin, Oosting, van der Zijpp et al., 2010; Ibsen, Eriksen & Patil, 2018).

13.1.2 How Many Care Farms are There Around the World?

Care farming is a growing field in Europe and other parts of the world. It remains, however, difficult to estimate the exact number of care farms for each country. Outcomes of national surveys, national registries (e.g. registries with the number of care farms signed up for a national quality approval scheme), and funding schemes (e.g. number of care farms financially supported by the national government) provide some insight. The Netherlands and Norway are often seen as frontrunners in providing care at care farms with 1250 in the Netherlands and 400 registered and an unknown number of unregistered care farms in Norway. Gradually, the concept of care farming is being implemented in other countries, including Austria (n = 600), Belgium (n = 670), France (n = 900), Ireland (n = 100), Italy (n = 675), Japan (*no estimations available*), Poland (*no estimations available*), South Korea (n = 30), Switzerland (n = 1000), United Kingdom (n = 230), and the USA (*no estimations available*) (de Bruin et al., 2020; Garcia-Llorente et al., 2018; Hassink et al., 2020; Haubenhofner, 2015; Murray et al., 2019; Yewon Cho, 2020).

13.1.3 What will You Find in This Chapter?

Over the last couple of years, several research projects have been carried out addressing the potential of care farms to promote health and wellbeing. In this chapter, we will specifically focus on what the care farm environment looks like, the programs and activities that are offered to different types of client groups, and the benefits of care farms in terms of health and wellbeing of different types of client groups. We additionally propose recommendations for policy and practice to further advance the field.

13.2 Activities at a Care Farm

Care farms have a wide range of health-promoting environmental characteristics, including the presence of outdoor spaces (e.g. farmyard, vegetable garden, and paddocks), farm and companion animals, plants, daily life stimuli, and a familiar, homelike and social supportive environment

(de Boer et al., 2018; de Bruin et al., 2017; Garcia-Llorente et al., 2018; Ibsen, Eriksen & Patil, 2018; Myren et al., 2017; Pedersen & Patil, 2018). The different health-promoting characteristics are naturally present in the farm environment and are therefore extensively used in the wide range of activities care farms offer to their clients (Ellingsen-Dalskau, Pedersen & de Boer, 2019; Ibsen & Eriksen, 2020; Pedersen & Patil, 2018). These activities, which are regarded as stimulating and meaningful, include walking outside, indoor horticulture activities, meal preparation, feeding and viewing the animals, picking eggs, gardening, sweeping the yard, crafts, wood-working, and playing games (de Bruin et al., 2009; Ibsen, Eriksen & Patil, 2018; Myren, Enmarker & Hellzen, 2013; Myren et al., 2017; Pedersen & Patil, 2018; Strandli et al., 2016). Activities can be adjusted to fit the needs of individuals with functional disabilities.

In this section, we more specifically focus on care farms for three types of client groups that are frequent users of care farming services. To demonstrate the variety of care farms and illustrate their activities, some case descriptions are provided below.

13.2.1 Care Farms for People with Dementia

Care farms for people with dementia generally have a small-scale and homelike character. The majority of care farms for people with dementia provide adult day care services, aimed at providing clients with a structured and meaningful day program and providing relief and support to family caregivers (de Bruin et al., 2015). In the Netherlands, in particular, care farms providing 24-hour nursing home care have recently been established as an alternative to regular nursing homes (de Boer et al., 2015).

Care farms provide people with a wide range of stimuli and daily activities such as domestic, work-related, social, nutritional, and leisure/recreational activities, which are incorporated into standard daily life. Examples include folding laundry, preparing meals, weeding the soil, sweeping the lawn, fixing broken furniture/tools, taking care of the animals, and getting wood for the fireplace.

Care farm environments are radically different from those of regular care institutions for people with dementia. The physical environment contains elements which invite people with dementia to perform common daily tasks such as watering the plants, walking the dog, feeding the animals, woodwork, raking, or shoveling snow (also see Figures 13.1, 13.2 and 13.3). Furthermore, people have more freedom of movement, go outside more often, and can choose themselves how and where they want to spend their days (de Boer et al., 2018; de Bruin et al., 2009; Ellingsen-Dalskau, Pedersen & de Boer, 2019; Ibsen, Eriksen & Patil, 2018). This can facilitate feelings of autonomy and meaning in life, as people with dementia still have the opportunity to contribute to the life at the farm (de Bruin et al., 2017; Ibsen & Eriksen, 2020). The social context resembles a family-like structure

Case 1: Buiten Gewoon – People with Dementia

“And here I am, in my boots, doing outdoor work, like a kind of farmer, or well, whatever...With a shovel and a spade. And at the end of the day, when I am going home, I’m feeling really great” (client).

Arjo and Marinel Buijs are managers of two care farms in the western part of the Netherlands. Before they started to work on a care farm, both of them worked in other types of care institutions (e.g. nursing home, home care organization, and mental health institution). At one of the farms, they provide adult day services to 10–12 people with dementia or acquired brain injury. These participants still live in their own homes, but attend adult day services one to five days a week, depending on their needs and their home situations. The other farm provides 24-hour nursing home care to fourteen people with dementia. This farm additionally provides respite services to family caregivers. The daily program starts at 10:00 h with a cup of coffee, during which tasks for the day are assigned. People participate in familiar daily activities such as preparing meals, caring for the animals, and gardening. Other activities include going for a walk and cycling at the “duo bike”. At lunchtime, participants together share a hot meal which is prepared by themselves. After lunch, participants either take a nap or participate in activities. The day ends at 16:00 h. In total, care farm Buiten Gewoon is taking care of 50 people attending adult day services, 14 residents, and 1 carer that uses the respite service. They are cared for by 60 qualified staff members and volunteers.



Figure 13.1 Photo by Arjo Buijs, the Netherlands.



Figure 13.2 Photo by Anita Janssen, the Netherlands.



Figure 13.3 Photo by Martin Lundsvoll, Norway.

and stimulates social participation of people with dementia (de Boer et al., 2017; de Bruin et al., 2015), which is important for their social health (Dröes et al., 2016). Finally, there is strong leadership by the farmer who has a clear vision on care delivery, training of staff, and recruitment of staff on specific competencies (e.g. creativity, person-centered approach, flexibility, and progressive mindset) (de Bruin et al., 2017; de Bruin et al., 2020).

13.2.2 Care Farms for People with Mental Health Problems

Care farming services/vocational rehabilitation on farms for people with mental health problems commonly include a diverse range of meaningful activities and work tasks. These vary from taking care of the animals (cleaning stable, feeding, and petting), working on the field and growing vegetables, herbs and flowers, green maintenance, and creative activities like painting, pottery, wood carving, writing, or music. Some care farms run a restaurant, café, or tea garden in which the people with mental problems can participate (Ellingsen-Dalskau, Berget et al., 2016; Granerud & Eriksson, 2014; Pedersen et al., 2012; Pedersen, Ihlebæk & Kirkevold, 2012). Since there is such a wide range of possibilities, activities can be easily tailored to the users' aspirations and interests (Pedersen et al., 2016), an adaptation that is highly important at the individual user level (Kogstad, Agdal & Hopfenbeck, 2014; Pedersen, Ihlebæk & Kirkevold, 2012). Participating in farm activities is considered meaningful by users. They feel valued as an employee and feel they have a meaningful contribution (Granerud & Eriksson, 2014; Hassink, Zweekhorst et al., 2010). This leads to feelings of mastery and competence. Moreover, people gain self-confidence, become more independent and learn new skills (Berget, Ekeberg & Braastad, 2008; Elings & Hassink, 2008; Ellingsen-Dalskau, Morken et al., 2016; Kogstad, Agdal & Hopfenbeck, 2014; Pedersen, et al., 2012).

People with mental health problems appreciate the safe environment of the farm, the possibilities to participate in society, being part of a community (Iancu et al., 2014). They perceive the care farm as an informal setting between illness, labor market, and society. It is a place where they can develop new contacts and practice working skills by performing useful activities with sufficient attention for their health problems (Elings & Hassink, 2008).

Case 2: Hoeve Klein Mariendaal – Diversity of Client Groups, Including People with Mental Health Problems and People with Dementia

“I really appreciate the work in the flower garden. In this beautiful and peaceful and calm environment, I feel safe and relaxed.” (client).

Care farm Hoeve Klein Mariendaal is located in Arnhem. The farm provides adult day care services for a diversity of clients and integrates them in society by establishing a close connection with citizens from the nearby city and

surrounding villages. The 12 employees of the care farm have diverse backgrounds like agriculture, arts, and hospitality. They are all educated in social care. They are supported by more than 30 volunteers. More than 100 clients make use of the care farm for day activities. The care farm offers services to a range of client groups: adults with severe mental health problems and intellectual disabilities, youngsters that drop out from school temporarily and people with dementia living at home. On Saturdays, the care farm offers a program for children with autism spectrum disorder or ADHD to unburden the parents. The participants can choose from a range of activities like working in the field and growing vegetables, herbs, and flowers, taking care of the animals, working in the tea garden, green maintenance in the city of Arnhem and creative activities. The care farm has a contract with the municipality of Arnhem and surrounding municipalities for the provision of care services. Other sources of income are the selling of boxes with vegetables grown at the farm to families in the neighborhood, the rent of a meeting room for organizations and companies, lunches and drinks of the tea garden, and selling of firewood. The participants appreciate the practical, useful, and diverse activities in the green environment. A daily activity that is valued by a range of participants is the daily walk with the donkeys after lunch time in the beautiful estate where the care farm is located.

13.2.3 Care Farms for Youngsters with Behavioral and Social Problems

Care farms for youngsters with severe behavioral and social problems are offering programs in which youngsters are individually placed on a farm for a period of six months. The farms are private productive dairy and pig farms run by a farmers' family. The youngsters have their own living unit on the farm. They have lunch and dinner with the farmers' family and participate in all farming activities. Activities include feeding the animals and cleaning the stables. Most youngsters live in a city and have never experienced farm life. The farm environment and participating in a farming family life is a completely new experience for them (Hassink et al., 2011; Schreuder et al., 2014).

Case 3: Care Farm Topaze – Youngsters with Behavioral and Social Problems

“Taking good care of the cows motivated me to continue the work and do it properly.” (client)

The “living and working programme” is developed for youngsters aged between 16 and 23 with severe social and mental health problems, varying

from externalizing (acting out, e.g. aggression) to more internalizing problems (inward, e.g. anxiety and mood disorders, and social withdrawal). The young people concerned face problems in the following domains: a) family (they cannot stay at home due to aggression and running away), b) school or work (they do not attend school or have no job) and c) friends and free time (they do not spend their free time in a constructive way). The youngsters live and work on the farm for 6 months on an individual base. 15 farms in the province of Noord Brabant, the southern part of the Netherlands, participate in this program. They are all productive dairy or pig farms where the youngsters can participate in all farming activities like milking the cows and feeding the pigs. The first period focusses on adjusting to living and working on the farm. Objectives focus on learning to listen to the farmer and maintaining their own living unit. Contacts with family and friends are restricted. In the second period, youngsters compare their actual situation with past experiences. Weekly telephone contact with parents is allowed. In the third period, the focus is on reflection of changes in behavior over this time. More contact with parents is allowed. In the last period, the focus is on making plans for the future. Youngsters stay with their parents during two weekends. Parents are required to participate in classes to enhance parenting skills. Both the individual living and working on the farm and the training for clients and parents are the basis for the aftercare program. In most cases, clients return to live with their parents. A counselor of the youth care organization visits the youngster and the family on a weekly basis. Learning goals related to improved functioning in school, work, and free-time are discussed and agreed between youngster, parents, and counsellor. The farmers and youngsters indicate that the physical demanding work with the animals is an important element of the program on the farm. The youngsters are generally not used to working hard. Their physical condition improves considerably, they learn to appreciate to work with their hands, to take care of the animals, and it gives them structure and meaningfulness in their lives. (Schreuder et al., 2014)

13.3 Evidence for Impact of Care Farms on Health and Wellbeing

13.3.1 People with Dementia

In several Dutch and Norwegian studies, the potential benefits of care farms for people with dementia in terms of health and wellbeing have been evaluated. These studies show that care farms support contact with nature and animals, time spent outdoors, activity engagement, physical activity, structure, social interactions, healthy eating, and a sense of meaning in life

(de Boer et al., 2017; de Bruin et al., 2009; de Bruin et al., 2019; de Bruin, Oosting, Tobi, et al., 2010; Ellingsen-Dalskau, Pedersen & de Boer, 2019; Finnanger Garshol, Ellingsen-Dalskau & Pedersen, 2019; Ibsen & Eriksen, submitted; Strandli et al., 2016; Sudmann & Borsheim, 2017). Activity engagement and required physical effort to partake in activities at care farms are usually higher than in activities in regular care institutions (de Boer et al., 2017; de Bruin et al., 2009; de Bruin, Oosting, van der Zijpp, et al., 2010; Ellingsen-Dalskau, Pedersen & de Boer, 2019). Furthermore, participants and their family caregivers experience less stigmatizing because of dementia since the care farm environment is a homelike noninstitutional kind of place. Instead, people with dementia feel and are treated as a volunteer or employee rather than a patient with cognitive and functional impairments. People with dementia additionally feel recognized, understood, and seen as people who can deliver a meaningful contribution. The studies further reveal that care farms can also promote respite, more personal time, and fewer feelings of guilt among family caregivers. Family caregivers additionally indicate that care farms provide care tailored to the individual needs of people with dementia (de Boer et al., 2017; de Boer et al., 2019; de Bruin et al., 2015; Sudmann & Borsheim, 2017). Based on these studies, it can be concluded that care farms have a wide range of benefits that might affect health and wellbeing of people with dementia and their family caregivers.

13.3.2 People with Mental Health Problems

Studies on care farming services for people with mental health problems have found that such services can be beneficial to users' quality of life and health. Studies have shown that participation in such farm offers can increase wellbeing (Leck, Evans & Upton, 2014), quality of life (Hemingway, Iltis-Hill & Norton, 2016; Leck, Evans & Upton, 2014), and increased cognitive capacity (Gonzalez et al., 2010), and have a positive impact on mental health, such as anxiety and depression (Berget et al., 2011; Gonzalez et al., 2009; Pedersen et al., 2012). The care farm services are mostly group-based and joint activities are often a starting point for developing social relations. Experiencing support from other users may create a sense of belonging and of being respected for who you are (Ellingsen-Dalskau, Berget et al., 2016; Ellingsen-Dalskau, Pedersen et al., 2016; Granerud & Eriksson, 2014). The farmer is particularly emphasized as central for initiating social activity and facilitating social relations between the users (Granerud & Eriksson, 2014; Hemingway, Iltis-Hill & Norton, 2016; Kogstad, Agdal & Hopfenbeck, 2014), and for providing social support to the user (Ellingsen-Dalskau, Berget et al., 2016; Ellingsen-Dalskau, Pedersen et al., 2016; Iancu et al., 2014; Pedersen et al., 2012). Increased social contact and the opportunity to be part of a social network is valued by the users (Elings & Hassink, 2008).

The importance of the animals and the nature surroundings of care farms are emphasized in several studies. Contact and work with livestock are seen as meaningful because it is about taking care of living beings (Granerud & Eriksson, 2014; Hassink et al., 2010). Additionally, it is experienced as a break from a stressful everyday life and a source of inner calm (Ellingsen-Dalskau et al., 2016; Pedersen et al., 2012). Nature experiences and green surroundings offer tranquility and opportunity to retreat and give a sense of belonging (Hassink et al., 2010; Iancu et al., 2014). The participants additionally emphasize being outdoors as positive, giving a sense of wellbeing and security (Kogstad, Agdal & Hopfenbeck, 2014). People with mental health problems further report an increase in their self-esteem, self-respect, perseverance, feelings of responsibility and physical condition. They appreciate the green environment, working with animals, being part of a community, the variety in activities, and personal guidance (Hassink et al., 2010).

These findings are in line with the growing recognition that green environments contribute to the wellbeing of people with mental health problems (Ellingsen-Dalskau et al., 2016; Kogstad, Agdal & Hopfenbeck, 2014).

13.3.3 Youngsters with Behavioral and Social Problems

Studies on care farms with youngsters with behavioral and social problems show that many of them were proud of being able to adapt to a new situation and to finish the program. Youngsters indicated that positive experiences, good contact with the farmer and family members, interaction with farm animals, physical and challenging activities, being on oneself away from family and friends and amusement, the green environment and time for reflection were the crucial elements for the success of the farm program. The youngsters learned to obey orders, to calm down, and think before acting and reflect on their lives. Their self-esteem increased and problem behavior decreased. These positive results remained also after a longer period and significant reductions in use of drugs, police contact, and drop-out from school were reported (Hassink et al., 2011; Schreuder et al., 2014).

13.4 Recommendations for Policy and Practice

This chapter illustrates that care farms offer a structure and opportunities for increased time outdoors in a supportive, safe, and enjoyable setting. A diversity of tailored and meaningful everyday activities for different groups are carried out which are characterized by a focus on abilities rather than on limitations of people. Experiences show that it is easy for the service provider to provide the activities and that the activities are easy for the user to join in. This links nicely with the settings approach for health promotion (Poland, Krupa & McCall, 2009), which moves beyond lifestyle-focused activities to promote physical exercise, to creating health-promoting places

in which people live their lives and which allows them to actively use and shape their living environments (Dooris, 2013). An underlying quality of the health-promoting care farm setting is that the environment is predictable for users and it invites them to do everyday activities (“real activities”) such as gardening or taking care of animals intuitively without any explicit emphasis on the health benefits of doing exercise. Also the social interactions and the person-centered approach result in people feeling better and as such also promote physical exercise. Many of the effective elements such as health-promoting physical environment, true involvement, and freedom of choice can be translated to other settings such as other health and social care institutions, workplaces, communities, schools, or hospitals.

As most care farms are located in rural areas, another possible future development is offering more nature-based services in urban areas. A recent study by Hassink et al. (2019) shows that there is a clear untapped potential in this area. Lessons learned from care farms also show the importance of the competencies of staff such as the ability to provide person-centered care and flexibility, which are often not yet part of the existing curricula of health and social care professionals. Those competencies are best acquired by learning by doing, such as working some days a week at a care farm to learn to provide care and promote health in a nonregular care environment.

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