



**A Nuffield Farming Scholarships Trust  
Report**

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**The role UK agriculture can play  
in delivering social care**

**Robin Asquith**

**July 2017**

NUFFIELD UK

## **NUFFIELD FARMING SCHOLARSHIPS TRUST (UK)**

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# A Nuffield (UK) Farming Scholarships Trust Report



*"Leading positive change in agriculture.  
Inspiring passion and potential in people."*

Date of report: **July 2017**

Title	The role UK agriculture can play in delivering social care
Scholar	Robin Asquith
Sponsor	The Elizabeth Creak Charitable Trust
Objectives of Study Tour	Investigate the role UK agriculture can play in the delivery of social care and mental health provision through the use of Care Farms and social prescriptions.
Countries Visited	Canada, Italy, Ireland, Netherlands, Norway, Finland, Belgium and UK.
Messages	<ul style="list-style-type: none"><li>• UK agriculture <u>can</u> help deliver social care</li><li>• Awareness of the Green Care Sector needs increasing in order for more people to benefit</li><li>• Principles of Social Farming can be applied to other sectors</li><li>• There needs to be greater evidence of the socio-economic benefits social farms bring to communities</li><li>• Social farms don't have all the answers but do have a role to play</li><li>• Recognition and support from Central Government and the NHS are key to the large-scale support of the sector and individuals</li><li>• Social farms are good connecting agents – enabling people to reintegrate in society</li><li>• Quality assurance and accreditation of social farms and other green care providers by a single national body could increase the number and quality of social farms in the UK.</li></ul>

## EXECUTIVE SUMMARY

Social care provision in the UK has undergone radical reform and cuts in recent years. At the same time people in general are increasingly removed from food production and access to the natural environment. Social farms and social prescriptions are used on a small scale in the UK but can be perceived as 'niche' or 'unknown'.

Seeing first-hand how the funding and support mechanisms have been cut for individuals, and the subsequent deterioration of that person, challenged me to look at alternatives. Coupled with increased mechanisation and reduction in farmers' mental health led me to assess whether agriculture has a role to play in filling the UK's social care void.

Research has shown social prescriptions and accessing care farms are beneficial. But how can this be delivered on a larger scale in the UK? All the countries I visited had care farms, some in early stages and others more advanced. The Netherlands has a very developed care farming sector which is supported by central government. Within Scandinavia the closeness of nature is obvious to all; access to land and nature is commonplace. Agriculture can be a great connector: a connector of people, places and ideas; places where meaningful work opportunities abound. Farms are places which can meet the needs of people that no other social care provision can meet. Social farming works because there are real farmers, real problems and real visitors – no day service or intervention can replicate the diversity and opportunities a farm can offer someone. Learning from my visit to Italy, even greater benefits could arise from linking agriculture to other sectors - such as retail and food processing - to provide social care provision in these areas.

I set out expecting people would say this is a solution to enable small-scale agriculture to become viable. It is a way, but has far wider reaching implications for the whole of society. Social farmers use agriculture and horticulture as a vehicle to help deliver solutions to society's problems. They help with social inclusion and cohesion, confidence, and skills building. Farms offer places to develop individuals who don't want to be stuck inside, who need that little bit of help and support to get back on track with life; or in the case of dementia, provide safe meaningful care in the latter stages of life.

Importantly, I must emphasise that this isn't a 'cure-all' solution to social care, nor is it applicable to all farms. But, it does emphasise that we all have a moral obligation to 'build on a desire to do the right thing'. I am a person who loves to be outside, working the land. I would hate to think that in the latter stages of my life, I was imprisoned in a mid-town care home sitting doing a jigsaw because of an age-related disease. How wonderful it must be for people to be able to access a farm or garden, socialise with others in a relaxed person-centred environment. This is an opportunity I aim to allow every citizen in the UK to have.

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## **DISCLAIMER**

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*“Social Farming aims to reunify needs, identities, safeguards and instances of freedom for all citizens, regardless of their abilities. In this the value of work not only as personal income, but also as a fundamental element of an inclusive society...”*

Card of Principles of National Forum of Social Farming<sup>1</sup>



**Figure 1 : Breanne Mathers at Fiddlehead Care Farm,  
Canada's only Care Farm, with the author**



## Chapter 1: Introduction

A Nuffield Farming Scholarship was not something I had ever heard of, never mind envisaged undertaking, three years ago. Having grown up in North Yorkshire, spending much of my spare time on the family's soft fruit farm, I always imagined my career would lead me to soft fruit. How wrong I was. After graduating from the University of Hull in 2011 with a degree in geography, I worked in commercial horticulture as a grower. Whilst working, alongside my now wife, we started and developed our own agricultural business, Asquith's, in the heart of the North York Moors National Park. Rearing poultry for Christmas and breeding pigs gave me my real taste and excitement of working with livestock. In 2012 I was appointed Farm Manager on an upland hill farm in North Yorkshire. This was no ordinary farm though. Whilst having a beef herd and sheep flock, the farm also supported 22 adults with disabilities and mental health issues each week. Working with these people changed the way I viewed life, and what I wanted to achieve.



Figure 2 Robin Asquith

After becoming a finalist in the Farmer's Weekly 'Farm Manager of the Year' awards in 2015 I discovered what I did was known as Care Farming. Like a large selection of the UK population this was something I had not heard of before. The sense of purposefulness, achievement and fulfilment I get from working with the individuals I do is indescribable. By giving people an opportunity to work on the farm, an opportunity many of them had never had before is hugely rewarding; not only for myself, but for them too. It gives purpose, direction and structure to people's lives, an

opportunity to do something and move on in life.

Later, through my role as a trustee of Care Farming UK, and role of Care Farm Manager for the Camphill Village Trust, I wanted to explore how we can grow this industry in the UK. How could we generate more opportunities to help those who need it? Wider issues were also apparent; with cuts to social care budgets but an increase in mental health issues, could UK agriculture provide a solution to this huge problem we are facing? And could it be a more financially sustainable option for both social care and some small businesses within agriculture?

I felt a responsibility to the people I support, and to the ones who are struggling now, to look at this issue. A Nuffield Farming Scholarship gave me the opportunity to travel around the world, and see if agriculture did have a role to play in helping to deliver social care. And through the Nuffield Farming experience, I too experienced first-hand the pressure our NHS is under in dealing with mental health illness.



I am most grateful to the Nuffield Farming Scholarships Trust, my employers The Camphill Village Trust, and my sponsor, the Elizabeth Creek Charitable Trust, for giving me the opportunity to improve my knowledge and understanding in this area. In doing so I hope this raises the profile of an important sector which could play a huge role in the future of delivering social care in the UK.

***Too often we underestimate the power of a touch, a smile, a kind word, a listening ear, an honest compliment, or the smallest act of caring, all of which have the potential to turn a life around. ~ Leo Buscaglia (1924-1998)<sup>i</sup>***



**Figure 3: Vegetable production on a Dutch Care Farm**



## Chapter 2: Background to my study

Social care in the UK has undergone some radical changes and cuts to funding in recent years. Agriculture too is facing an uncertain future, with queries around what will happen when the UK leaves the European Union. What will replace the Common Agriculture Policy here in the UK post 2022? This leads to the question: what role can UK agriculture play in delivering social care? Is there a role agriculture can play and if so what does this look like? What many people are probably unaware of is that social care has been delivered by the agricultural sector for some years now in the form of Care Farming and nature-based health interventions. Care Farming comes under the broader umbrella sector of Green Care. Figure 4 (below) demonstrates where Care Farming fits in and where other nature-based interventions roles lie.

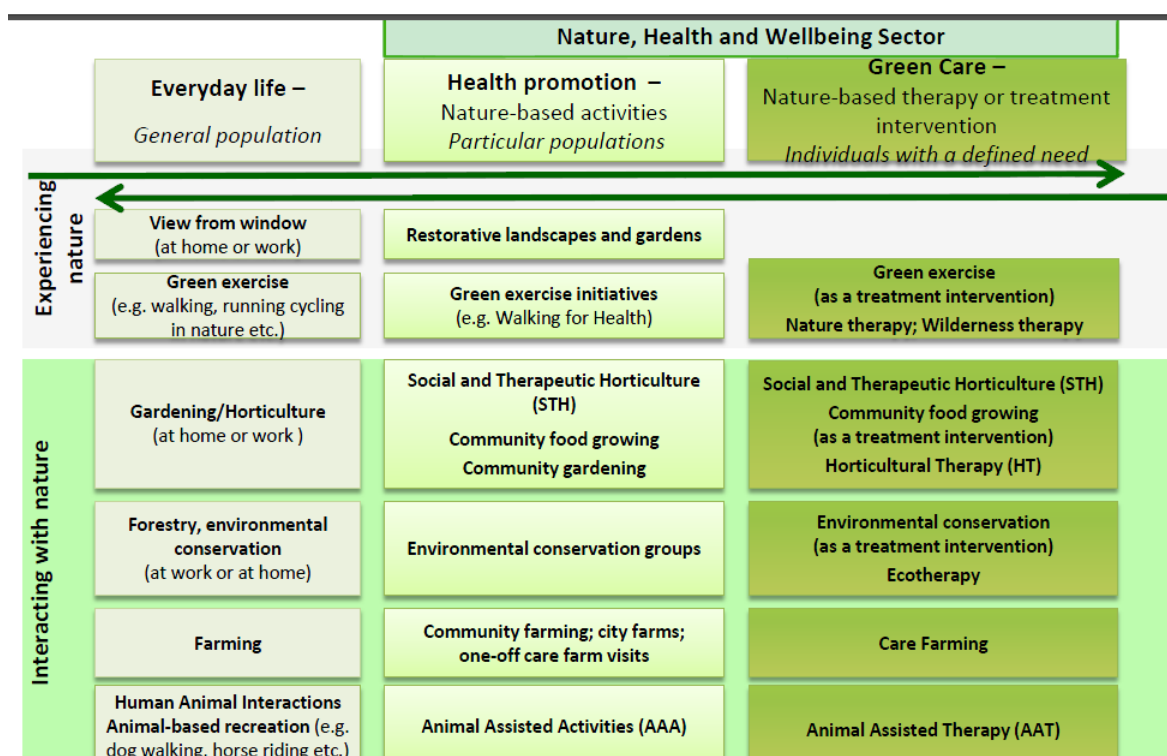


Figure 4: Highlighting different types of Green Care (8)

Care Farming established in the UK in the early 2000s. (Please note: The terms “Care Farming and Social Farming” are to all intents and purposes interchangeable and mean the same thing.) Emerging from the foot and mouth crisis as a way of diversification, care farming has developed into a wide-ranging sector. The UK currently has around 240 care farming businesses that provide opportunities, both therapeutically and work-based, for adults with mental health issues, physical and acquired brain injuries.





In the early stages, care farming was labelled as ‘niche’ and something ‘hippies’ did. Slowly, with time and greater understanding, this stereotype is changing. However there is still a large section of the population which is unaware of what nature-based interventions are and, in particular, care farming.

**The concept of a care farm is quite simple: to combine agricultural production with health and social services provided to people with different types of disabilities.**

Interest in the relationship between nature and its positive benefits for humans has grown over the last 20 years<sup>ii</sup>; investment in green infrastructure is at an all-time high, with specific planning policies and other tools existing to enable the concept to flourish<sup>iii</sup>. In the UK, there has been an increased recognition about the effectiveness of green therapies such as Social Farming for people with mental health problems and other long-term conditions. Social farms essentially ‘*provide health, social or educational care services for individuals from one or a range of vulnerable groups*’<sup>iv</sup>. It is understood that Social Farms represent an approach to social prescribing and are being increasingly used to support a range of people in the community. Social Farms are typically commissioned to provide social farming services by referral agencies (such as social services, health care trusts, community mental health teams, education authorities and probation services).

Mental health issues in the UK are on the increase. GPs are facing a huge challenge in accessing effective treatment options for clients with depression and anxiety<sup>v</sup>. Social prescribing has been identified by Simon Stevens, CEO of NHS England, as a key way in which the NHS can move from a ‘factory model of care’ to one which incorporates wider community engagements<sup>vi</sup>. The government scheme of improving access to psychological therapies (IAPT) has long waiting lists and there are several differences between Clinical Commissioning Groups (CCGs). On completion of the (conventional) therapy some people do not fully recover<sup>vii</sup>. What people need is a follow-on service, something they can engage with and where they can get continued support. A Social Farm or nature-based intervention could be part of the answer to this, helping to reduce the burden on an overstretched NHS.

## **2.1. Some facts about Social (or Care) Farms in the UK**

The general public is understandably a little hazy as to what a social farm in the UK is, so some explanation is in order.

There are long established Trusts, such as Camphill Village and Home Farm, which offer wonderful long term and/or permanent homes in a farm-like environment to persons with permanent or semi-permanent disabilities, both mental and physical. The public is generally quite well informed about these. A social farm, by and large, is concerned with two groups of clients: firstly those with learning disabilities, depression and similar mental disorders – hopefully of a temporary nature – and, secondly, with dementia sufferers, whose needs are a little different. The expectation is that clients in the first group will get better and move back into general society after a period spent working on a social farm.

The typical social farm has clients referred to it by the social services, NHS and medical profession. It generally (but not always) operates on a day care basis, normally on a 5-day week, and clients would be transported to it daily from external sources. The owner of a social farm is responsible for the



welfare, comfort and safety of clients while on his/her premises. He/she provides suitable accommodation and meals for the patients while under their care. A social farm should operate like a commercial farm, albeit with sufficient trained staff to take care of the needs/deployment of the clients. Its enterprises should preferably include livestock and horticulture and, because of the special needs of the clients, are unlikely to be viable *per se*.

The sector is mostly regulated and each care farm is “licensed” to provide a certain number of “places”.

The owner is remunerated directly by an individual or their family, in some cases directly by the council of health authority, normally at a daily rate. It goes without saying that the owners and paid employees on a care farm need to be properly trained and have the right kind of mindset and attitude for this demanding work.



## Chapter 3: My study tour

Country	When	Reason
Ireland	May 2016  10 days	It is well documented that the Irish have undertaken a cross border social farming pilot scheme – SoFab. Social farming was in the early stages here and I wanted to see how social care and agriculture were being linked together.
Netherlands	May 2016 & February 2017  2 weeks	The Netherlands is regarded as the leader in Care Farming, with 1200 care farms established. I wanted to look at their model, see how it had developed over time, and understand how dementia care provision worked on a farm.
Belgium	June 2016  3 days	There were differences between different parts of Belgium, with high numbers of Care Farms in the northern regions, and very low numbers everywhere else. Why was this? I wanted to see how Government policy affected the establishment of social farms.
Canada	July 2016  2 weeks	Canada had very few care farms. I wanted to see whether and how they proposed to develop.
Norway	September 2016  1 week	Norway is classed as the leader in giving access to farms and nature for people living with dementia. I wanted to establish what the links were, and how they had been so successful
Finland	September 2016  4 days	Finland is in the early stages of developing green care. I wanted to see how a country with no care farms was developing policy, how their healthcare system worked and what, if any, links to agriculture there were.
Italy	February 2017  10 days	Italy had two different models of social farming. They also had Government legislation backing the provision of green care. The use of farms in prisons was also common here and I wanted to explore the links agriculture could play in reducing reoffending rates.
UK	Throughout	I visited many different types of nature-based interventions, some on farms, others not. I met with MPs, attended health conferences and spoke with industry leaders in the green care sector.



## Chapter 4: Understanding Care Farming

Among all the people and places I visited there was one main recurring theme: a desire to help people. In each and every country there were farms, care homes, gardens and businesses all of which were geared to people, and helping people either to progress, develop or enjoy a higher quality of life. The other reoccurring theme was that agriculture was being used as a vehicle to deliver solutions to the problems society posed. But not everyone understands what care farms are, or what they do:

*'What is a care farm, don't all farmers care for their farms?'* North Yorkshire farm worker

*'They aren't a real farm any more; you can't farm on a large scale with lots of people hanging around.'* Dutch farmer

*'I farm people now, it's much more rewarding, and pays better than dairy cows'.* Dutch care farmer

*'I am a farmer and I look after my animals and the land, but equally, I care for the people who come to my farm, I educate them, listen to them and encourage them.'* Irish social farmer

Comments such as these summarise the broad range of views held about how and why farmers open their farms to deliver social care. One of the biggest challenges to the green care sector is making the public and farmers understand what green care is and what role farming can play.

The Netherlands has over 1200 care farms, yet the concept is not widely known amongst its general public. Within farming networks it is known about, but perceived as a diversification maybe for the older farmer. In Scandinavian countries and Ireland the concept is more widely accepted: possibly because demographically farms are smaller here and care farms are suited to smaller family-based farms. Care farming, or social farming as it is also called, defines short or long-term activities that use agricultural resources such as animals and plants to promote and generate social activity for individuals. With a wide range of definitions for social farming found in differing countries, for the purpose of my research I defined social farming as:

**"The multifunctional use of the natural environment and its produce to benefit people with a disability or mental health concern".**

### 4.1. Social or Care Farming?

Within the UK there has been a long debate surrounding the term care farming. Some argue this isn't a fair representation, others argue it is the best descriptive terminology. Around the world the overwhelming popular name choice included 'Social farming and horticulture'. Reasons for avoiding the label 'care farming' include:

*'The word 'care' alienates people who don't regard themselves as needing care.'* Norwegian farmer





*'We use the term social farming as it encapsulates what we do best. We don't just farm the land; we are the social hub of the village.'* Italian social farmer

*'We care for people the same as we care for our livestock and the environment.'* Finnish farmer

Aside from differences in name, most farms offering social care services ran along similar lines. Throughout my entire studies I saw social periods playing a large role in the establishments I visited. Break and lunchtimes offered opportunities for conversation, song, and in some cases rehabilitation workshops. Working in small teams on specific projects was also commonplace.

One difference I encountered during my visit was the client groups farms worked with. Some farms focused on working with just one client group, others focused on multiple groups. Reasoning behind this ranged from individuals feeling they weren't trained enough to work with certain client groups, to not feeling they had the right facilities or skills set required, or simply that they enjoyed working with the group they had.

The following sub chapters detail how farms working with different client groups operated.

## **4.2. Learning disabilities**

The most popular client group to work with appeared to be adults with learning disabilities. The benefits working outdoors can have on such individuals is long documented and established. These individuals ranged from high functioning to low functioning adults. The average working ratio was 1:4 staff to service user. This ensured safety standards were maintained and that individuals were getting adequate support.

Farms in Holland, Norway and Italy were looking for high functioning individuals (patients) to progress, developing greater independence. This development of individuals is key to demonstrating the positive benefits social farms can have on people. It is no longer socially acceptable for a considerable percentage of young adults with a learning disability to stay put in a low-grade job, carrying out the same limited activity for a number of years. Given the correct structure and support, some of these people are able to develop new skills, learn new jobs or move to gain greater independence.

Social farms are now looking at how people can progress. In Holland farms are partnering with other farms so individuals can move toward working on a different farm with less support and more independence. Likewise in Ireland there are some great examples of individuals being given ownership over an allotment, or small flocks of hens.

Whilst this is a really important development, unfortunately no place visited had developed a comprehensive outcome measurement to show and track development.

*See case study overleaf.*



## Case Study

### Hoeve Kein Mariendaal Care Farm, Holland

Hoeve Kein is a diverse care farm on the outskirts of Arnhem in Western Holland. The farm had a café, shop, classrooms, kitchens, dementia project, animals and large market gardens and a successful firewood-selling business. The farm was hugely successful, due to two main reasons. The farm worked with several client groups, meaning their income wasn't from one local authority budget, it was from several; thus giving the business greater financial resilience. The second reason was the farm had made links with the local community and was developing stepped progression for individuals. The goal was to help people build skills and confidence to allow them to work more independently, and move on into working on their own projects, or delivering vegetables for example.

Hoeve Kein has plans to develop this further. They were looking towards voluntary organisations in the surrounding area of Arnhem to link with, where they could move clients forward for work opportunities, whilst still maintaining links of support. Discussions are happening around the idea of tendering for local council contracts for items such as maintaining public areas and gardens. This would generate money which could be used to pay the clients a wage and help them further develop more independent lives. It would also allow the main farm base to cater for more clients and focus on the more complex cases, such as people living with dementia.



Figure 5: Hoeve Kein Care Farm, Holland

### 4.3. Mental health issues

Many farms combined working with clients with learning disabilities and those with mental health issues. In many situations an individual can be affected by both. Mental health issues are broad



ranging, but for the purposes of this report mental health is referred to as people living with psychotic episodes, depression, anxiety, addictions, substance misuse, and psychological conditions such as schizophrenia. Some individuals I met, living with some of these conditions, felt instantly more relaxed on the farm. Many have led a life of being judged and looked down upon. But on the farm, the cows don't do that, and neither does the farmer. Everything is done to the pace nature sets: a natural rhythm, something that one Northern Irish social farm client told me was missing in 'town' life.

Dolans Social Farm, on the border of Southern and Northern Ireland, was a great example of how this worked so well. Irish social farms are based around the family nucleus: the clients were invited into the farm house as if it was their own. The clients here had a range of mental health issues, but during the time I was there you wouldn't know. The individuals respected the family, and respected the farm; they knew the farmer was taking time out of his day to help them. They were being invited into the farmer's life - with access to all aspects. Working on the farm meant they were involved in something meaningful, they weren't just moving cows to give them something to do. The cows were being moved because they needed to be moved. But the clients respected this, and could see why they were doing it and how their help directly assisted the farmer and his family.

#### 4.4. Dementia

Provision of dementia care on farms was commonplace in the Netherlands and in Norway. A considerable number of farms had specific dementia projects operating. Hoeve Kein Mariendaal in Arnhem, Holland, had 15-20 adults who lived with dementia attending the farm each day, and operated with a staff ratio of 1:7. It wasn't just early-stage dementia cases either; more advanced cases of people living with dementia also attended the farm. The criteria for termination of their placement was when they walked around too much or had behavioural problems which affected other people. Health professionals qualified in dementia care had been employed on all the farms I visited.

This was the case at Hoeve Kein and Paradijs farm, also in Holland. Skjerven Farm in Norway differed slightly in that it didn't directly employ a health professional, but a support worker assisted people at the farm. The farm's owner had also undertaken some basic healthcare qualifications. All the above-mentioned farms had people living with dementia "working" separately to other clients, due to safety. However, Hoog Broek Care Farm in Holland operated very differently. A small farm on 10 acres, it mixed dementia clients with learning-disabled and brain trauma clients. The Hoog Broek opinion was that people with autism, for example, can help people living with dementia, and vice versa. Therefore each client group helped the other out. The dementia client may lack the memory of the job task but be able to carry it out, but the Autistic Spectrum Disorder (ASD) client can remember the task, but may lack the strength or skills. Therefore both client groups helped each other out.

In all the countries visited many farms were starting to explore working with a dementia client group. The desire for this arose not from the financial income it would bring, but the thought that this condition could happen to any of us. As natural outdoor people, farmers dread the thought of being stuck in an urban care home. The extra sense of purpose and quality of life someone living with dementia can get from being on a farm is untold. This seemed to be the main motivator for working with this client group. The added benefit of increased financial viability of the farm came secondary in





most cases. As a Northern Irish farmer explained, *'social farming only works if you put the people first, if you start social farming to make the farm pay better, you won't get the same results, it just won't work'*.



Figure 6: People living with dementia on a walk at Skjerven Farm, Norway



Figure 7: Hoog Broek Care Farm in Holland providing safe and warm jobs for adults living with dementia



#### 4.5. Offenders

There are many examples of ex-offenders working on farms and gardens to build up their confidence and skills, and prove to employers they have changed their habits. However, in Italy I witnessed agricultural work being carried out in prisons.

Casa Circondariale di Vicenza prison had three large greenhouses, an area of fruit trees and a vegetable growing area within the prison walls. The facility also included Padua Prison Bakery, which is a working bakery producing artisan products that are sold in the surrounding districts of the prison. These social initiatives inside the prison keep the inmates busy: it gives them something to get out of their cells for and work towards. The prisoners gained great satisfaction from turning vegetables into products to sell, and it taught them skills which will help them get jobs upon release. The prison focuses on re-educating the prisoner, and by undertaking farm and bakery work, it gives people meaning to their life. Although no exact figures could be obtained, it was emphasised that re-offending rates of prisoners who had worked in these social activities were considerably lower than prisoners attending more traditionally run institutes.

#### 4.6. Social prescriptions

Social prescriptions, although not a “client group” as such, can refer any type of client to a farm or other nature-based intervention. Social prescriptions are an alternative to a medical drug prescription and can be prescribed by a GP. They aim to help treat the cause of a problem rather than its symptoms. NHS England state that 20% of GP consultations relate back to a socially derived issue. Social prescriptions can help the development of communities which can contribute to making people feel better. Prevention of the illness is better than the treatment of the illness, both in terms of cost and patient wellbeing. Dr Michael Dixon, a practising GP and keen prescriber of social prescriptions, has stated: “Social prescription is now providing some desperately needed solutions to everyone...in particular general practice which is bending under the strain of limited resources...”<sup>viii</sup>

#### 4.7. Personalised healthcare

It is argued that social prescriptions make the NHS a more efficient, better run service, with the ability to offer a more personalised service. Social prescriptions can help us down the path to a sustainable NHS and our ability to create communities that help make us better and well, rather than alienated and isolated. Agriculture can play a role in this, through social farms and other green care interventions. But what role do social prescriptions play and what will it take to roll out this concept more widely?



#### 4.8. Prescribing social prescriptions

There are different ways of prescribing a social prescription depending on the individual and the condition. Direct referrals from general practitioners are still low, but are increasing rapidly in Holland and England. Within Norway and Holland it is recognised that an individual diagnosed with early stage dementia is entitled to access a social farm. Funding will follow this individual to allow them to access such farms. In Holland residential opportunities for dementia sufferers are now available on 25 social farms: living on the farm and working at jobs on the farm instead of being accommodated in a more traditional nursing home in a town.

However, even in Holland, funding for access to social farms was not as easy for individuals with mental health issues. In Italy people with psychological issues were funded to attend social farms, but case workers had to fight for the funding.

In the UK, though, funding doesn't yet exist for the widespread rollout of social prescriptions. Currently social prescribing services exist, but they rely on the "third sector". The third sector consists of charity and voluntary organisations, and relies on voluntary workers to make services work. GPs are prescribing services, but funding doesn't always follow the individual.

#### 4.9. Stumbling block to engagement

The failure for social prescribing to really become widespread up to now is down to three key issues: lack of funding; too many interventions (i.e. choices of social prescription) for GPs to understand them all; and the public perception of being prescribed time rather than medicine. If funding isn't easily accessible then GPs don't have the time to seek and argue for funding. The large range of alternative healthcare settings ranging from social farms to painting classes and fitness, for example, means it is impossible for a GP to be aware of all the different interventions available. Taking the third issue, in western society we are now so used to a medical solution to our problems that "time" is a different concept. A tablet or new drug can cure so much, but there are limitations.

But some patients see the idea of being prescribed time on a farm as being ignored by the GP. As one Finish person told me; *'How does a farm help me with my depression, I need some medicine not a walk in a field'*.

**This comes to the wider issue: society has major issues.**

**We are an increasingly digitalised society: connected to people, buildings and gadgets, but removed further and further than ever before from nature, food production and being outdoors.**

The Scandinavians in many respects are bucking this trend. Their culture is very much still based around nature, outdoor activities and the daily hike. From early childhood it is ingrained in them to be outdoors, whether that's skiing, walking or chopping timber. A lesson we can take from Scandinavia is that we are under-utilising a massive free and untapped resource to help reduce the burden on our healthcare systems: the natural environment.



Figure 8: Overview of social prescribing. (Source: College of Medicine)





## Chapter 5: What is agriculture's actual role?

Two recurring models appeared during the research trip:

There were farms that were delivering social care because they wanted to: it helped diversify their business. In a lot of cases, particularly in Norway and Holland, these farms had the direct experience of a family member already working in the field of social care.

Then there was the farmer who was providing social care on a much larger scale, and his basic farming operation had lost the element of agricultural production. In some cases though, such as dementia provision, I can understand why this is so. The following sub chapters discuss this issue in more detail.

### 5.1. Farmers farming “Care”

Some farms in the countries visited were focused more heavily on the “care” than the general aspect of the farm. The main farming enterprise had maybe been sold off or contracted out. In other situations a care farm may have been deliberately established by a non-farmer and operated on a small scale. I am not criticising this type of farm or the manner in which they operate. But I aim to challenge the theory behind this concept and assess what works in care farming. Some care farms have now developed so that the actual farming is not a paying operation, particularly in Italy and Holland.

However, everyone agreed that it was an important factor to maintain close links to agriculture even when the business had generated other opportunities and income streams. During the initial early stages of the care farming movement care farms were still heavily focused on production, and how to integrate care into the production. However, as was highlighted to me in Holland, care farming is diverging into two sectors: one whose focus is not on production but care; and one which still focuses on production but incorporates health and wellbeing services into the production.

Farms which no longer had a production element but maybe had a few chickens and a small vegetable garden for example, weren't offering a true experience of care farming. The most successful care farms visited were in Holland, Ireland and Italy and the focus was on the farmer being central to the farm. The interaction between client and farmer was based on the farmer's obvious care and passion for his land and animals. One concern over this model of farm is that people were simply trying to farm 'care' as a paying sector of the business.

### 5.2. Funding-driven ‘farms’

Examples of large service providers setting up ‘care farms’ were seen in several countries. These ‘farms’ consisted in some cases of a few chickens and two raised beds in the garden of a large care home in the centre of a town. They had been established because it meant funding was secured from local authorities. They didn't offer clients that meaningful opportunity to be involved in something





which contributed to the wider society. For me, these are seen as ‘a day service in the field’ and offer no progression and little opportunity to adults wanting to develop and progress with their lives. They are simply chasing the funding, appearing to look as they are offering clients choice and meaningful activity. In reality they offer very little compared with genuine social farms.

### 5.3. Farmers who both farm *and* provide meaningful opportunities

A model of care farming which is used predominantly in Ireland, Italy and the USA, and to a smaller extent in Holland, is where the farm’s primary aim and income is from agricultural production. Social care is incorporated around the production element to provide meaningful and purposeful opportunities for people.

Many farmers and clients emphasised that it is very important to have a production element integrated into the care aspect. This not only provides job opportunities, but makes individuals feel important because they are involved in real jobs and projects – they were contributing. This doesn’t



Figure 9: Norwegian Care Farm,  
Social times just as important as work times

mean that the farm is only focused on production at all costs. Not all clients thrive in a production-focused environment. Most farms operating like this made sure there were opportunities for all types of personality they worked with. For some clients the opportunity to be away from their usual environment was the most important aspect of the placement on a farm.

It must be highlighted that, if farms have greater production focus, it doesn’t detract from the social element of attending those farms. If anything, I saw many examples where the social element was increased due to the camaraderie generated when working on a job together. Historically farms were the centre of rural communities. There would be a lot of full time land workers and the whole community rallied around to work on the farm to bring in the harvests. This has been lost in today’s age of mechanisation, even on fruit picking farms which used to be heavily labour-focused.



## 5.4. Progression off the farm

For many of the individuals who attend a social farm, progression away from the farm can be a long way off, for others far more achievable. It is really important that people with a disability or mental health concern have the same opportunities to live an ordinary life, fully involved as equal citizens in the community alongside everyone else, as is set out in the Children and Families Act (2014) as well as the Care Act (2014). The Care Act carries on to state that individuals need to be treated equally with the right to progress without discrimination due to disability. Some care settings I visited during my travels appeared to disregard this, others were now starting to think about progression. The majority, thankfully, were now actively seeking to develop pathways for individuals to progress off the farm. For certain client groups - dementia and severe disability - progression off the farm is not important. Attendance at a social farm is for therapeutic purposes and development and progression is not the main aim.

Farms in Italy and Holland were developing opportunities for progressing. This is hugely important. It demonstrates to funding agencies that the individual is progressing and developing and that money is well spent. To the individual it gives them confidence, belief and a sense of achievement, and for the farm business it highlights the great work they are doing. Importantly for me, it demonstrates the reason why social farming works: people are developing and moving on because they have learnt real skills, gained knowledge, confidence and expertise. This can only come from being involved in a working farm; replicating farm tasks doesn't work the same. As has already been touched upon, clients attending the farm respect the farmer for letting them into their lives and treating them on a par. This was highlighted best in Ireland where social farms can still be very much centred on the farming family. Some clients respected the opportunity they were being given.

## 5.5. Alternative work opportunities

In Holland, and now increasingly in the UK, care farms are looking for external work opportunities. In Holland, green maintenance contracts in towns and villages were being sought. These could be managed by individuals who attended the farm as a next step to help them make the progression to greater independence and, in some cases, employment.

Italy had a slightly different take on this approach: they applied the principles of learning skills on a farm to help offenders upon release from prison. Filippo Del Papa prison in Vicenza in Northern Italy had this very approach. With a market garden and catering kitchen incorporated in the prison it gave the inmates real-life skills to learn while serving their sentence. It focused their minds and gave them skills they could use for life outside prison. Tommaso, from Forum Nazionale, explained that this focused work on the garden and kitchen dramatically reduced reoffending rates. It was the focus on progression and moving on which was key. Rather than just focusing on a work task to occupy people, the Italians focused on jobs that were meaningful, had purpose, and so the prisoners had skills they could put to good use outside prison.

It is crucial there is the option of progression off the farm for individuals who require it, otherwise a social farm simply becomes a day service in the field. Farms need to develop links into society. This



helps reduce social exclusion and, crucially for agriculture, allows people to better understand how food is produced, helping consumers build up relationships with food producers.

## 5.6. Measuring outcomes

Public bodies increasingly want to show how taxpayers' money is being spent and how it is benefiting the people on farms. There are several issues with developing universally relevant outcome measures.

This first, and biggest issue, is that social farms work with such varied and wide-ranging conditions, and the variations within those conditions are large. Two individuals might have autism, but it may affect each of them in very different ways. Secondly, it is hard to compare a social farm working with adults living with dementia to a farm working with people living with mental health issues.

In Holland work is being developed for farms working with dementia patients. Here questionnaires are completed both by the carer and the person living with dementia. This is to find out what is beneficial to the person, how far can they walk, and their interests. The Federation of Care Farmers in Holland is working on adopting the same outcome measures across all care farms affiliated to it. They hope this will allow farms to benchmark against each other, raising the standards across the sector.

## 5.7. Marketing a social farm



Figure 10 : Social farm shop in the centre of Vicenza, Italy

In all the countries visited, social farming had a major common problem: marketing and raising awareness of what social farming is.

There are many differing drivers for developing social farming in different countries. In Ireland the movement has come from a rural development viewpoint, whereas in Holland it has developed from a need for care services on farms. But still there is no common appreciation among the general public of what social farms are.

The USA and Canada are in the very early stages of developing social farming, with very few people aware of what it entails. In the case of the US inherent problems within an insurance-based healthcare system do not make for a simple pathway for people to gain placements on farms. (Canada's health service is funded differently, mainly via payroll taxes deducted from the earnings of individuals).



In Holland, where social farming is more widely accepted and common, the key points to success seem to be farmers' willingness and ability to engage with the public. The best examples of social farms have been the ones that have allowed the farm to be seen not just as a farm, but as an extension of the local community which anyone can access.

This view was shared by Jan Van Beethuizen from Rabobank. He went on to explain that social farms are brilliantly placed to change some of the negative perceptions people have about agriculture. Opening up your farm to a wide variety of people (clients) raises the profile and awareness of what people know about agriculture.

### 5.8. Quality marks

A second crucial marketing tool for social farms is to have a quality mark accredited by a national social farming body. A robust and widely accepted quality mark raises people's faith in the service farms provide; it also provides a minimum standard and helps farmers set up their care enterprises correctly. There is no such quality mark in the USA, Canada, Finland or Norway. All these countries desired such a standard, though, and they feel it would raise standards and bring wider acceptance from the public and the healthcare sector. In the UK, where Care Farming UK has an accreditation scheme, there is an upsurge in uptake of this scheme to a point where local authorities are now only commissioning services to farms meeting the CFUK code of practice. For these accreditation schemes to work efficiently strong regional network groups were evident.

In Holland, Italy and Norway strong regional co-operative groups are crucial in the development and marketing of social farms. In the UK, and to a lesser extent North America, regional groups are sporadic and informal. In countries where social farming is more widely accepted there is a strong correlation with strong regional co-operative groups.

### 5.9. Italy – stand out marketing

Italy is the country with the strongest marketing direction. Instead of just focusing on the benefits the social farm can bring to individuals, the Italians have linked in very well with the local community and, importantly, broadened social farming's reach beyond the farm gate. Some social farms visited across Europe were simply examples of farms who were farming 'care'; they offered nothing but a gimmick, a day service in a field. What Italian social farms offered was a truly integrated approach to putting people back into society. Rather than sticking with farms, the Italians have broadened their approach to include shops, cafes and garden maintenance in the community. This makes it easier for people to understand what social farming is because there is a visible presence in the local community.

The strong regional social farming networks in Italy form a key marketing component. These networks bring providers, service users and the public together in an inclusive format. In addition to the regional networks, Italy has a national forum - Nazionale Agricoltura Sociale - which was formed in 2011 and is the driving force in promoting social farming within Italy. In August 2015, Italy implemented the national framework law n. 141, providing a framework of principles and procedures for recognising



social farming practices that respect the social needs of the territory, the local available vocations and agricultural resources <sup>ix</sup>



**Figure 11: Organic wine produced on  
La Costa Social Farm, Italy**





## Chapter 6: The value of nature - a new economy?

### 6.1. Value to our mental health

The UK media has recently led with many stories surrounding our mental health. A lack of service provision, and cuts to existing services, coupled with a national deterioration in our mental health (partly due to 21<sup>st</sup> century lifestyles), is leading to what some people report as a 'mental health time bomb' <sup>x</sup>. Statistics of mental health incidents are alarming, with 1 in 4 adults expected to experience an incident of mental ill health each year<sup>xi</sup>. On average in the UK one farmer commits suicide each week due to a mental health issue.

But mental illness isn't just an illness. In large part it is caused by problems with society: social exclusion, reduced community cohesion and, in some cases, a detachment from our natural surroundings.

### 6.2. Delivering solutions to problems



Figure 12: Blissberry Social Farm, Ireland, opening up the farm for wider community benefit

Reduced community integration and a reduction in people's knowledge of where their food comes from contributes to mental health issues<sup>xii</sup>. But what social farms all over the world are doing is breaking down these barriers by allowing people back onto the farm. Giving people an opportunity to look after an animal or grow some vegetables is hugely rewarding. Jan Van Beetchuizen from Rabobank summarised this well when asked what makes a successful commercial farmer become equally successful as a care farmer. His response was: being open-minded, expect to have the public on your farm, and allow the farm not just to be a space for growing things but be a space that enables people to reconnect with themselves. This viewpoint can be backed up from farmers' views in Ireland which stated that agriculture's role is simply as a vehicle to deliver solutions to society's problems. Equally, agriculture doesn't have all the answers and isn't a 'cure all solution'. But care farmers do have principles and ways of working that can be included in other areas of work to help benefit people.



### 6.3. Economic case for social care on farms

There is a strong economic case for social farms. Not only can they offer alternative income revenue to farm business, they support the rural economy. Additional jobs created include those related to transport, support worker roles and support services. Social farms can help stimulate rural economies which lack job prospects for the younger generation. They bring income direct to the farm, since clients who attend social farms pay to do so. This payment covers staff supervision costs, overheads, any meals, transport and insurance.

Currently, according to Care Farming UK's 2017 annual survey, there are 250 social farms in the UK and Ireland. There is an average take-up of 65% of the places available, and an average day placement charge of £52 per person per day. On average there are 35 people accessing each social farm, meaning in the UK 8750 vulnerable adults are accessing care in agricultural settings. At the £52 per day average charge and current capacity level (usage) standing at over 45 weeks in the year, social farms contribute over £20 000 000 to the UK economy. If these farms were operating at 100% it would be over £31 000 000. Likewise, if the number of social farms increased to 500, all operating to 75% capacity, then over 25 000 vulnerable adults could be helped whilst contributing over £50 000 000 to the gross agricultural economy<sup>xiii</sup>.

#### 6.3.1. How does this compare to standard day service provision?

A placement on a social farm represents very good value compared to traditional adult day service provision. With the average cost of a social farm placement being £52 per day, this is equal to £7.42 per hour for 7 hours' care per day. The average local authority-run adult day service cost is around £13 per hour based on 3.5 hours care<sup>xiv</sup>. Like-for-like cost comparison makes attending a social farm £39 cheaper than standard day service provision. Over 45 weeks in a year this would save the UK taxpayer over £23 000 000 per year (based on current UK care farming capacity) and be offering more meaningful placement opportunities for vulnerable adults whilst simultaneously stimulating the rural economy and bringing additional economic support to farm businesses.

The provision of meaningful activity can have a huge impact on individuals. It stimulates thoughts, physical activity, conversations and memories. But when 54% of people living with dementia no longer take part in social activities this can have a huge detrimental effect on their health, their carers and the cost of their care<sup>xv</sup>. Attending a social farm, as many people living with dementia do in Holland and Norway, keeps individuals active for longer, stimulates memory, and allows them to enjoy life to the best of their ability. Being active for longer can keep individuals out of higher needs care for longer, resulting in a better quality of life for them, and also at cheaper care costs. The average cost of nursing care for a person living with dementia but receiving care from professionals in the home or at day community centres is £39 000 per year, so it must be a benefit for people to stay active and stimulated for longer. The argument for a funded placement on a social farm becomes stronger because of the longer term economic savings to the tax payer.



## 6.4. Opportunities for the future

UK agriculture *does* have a role to play in delivering healthcare in the future. It must be clearly stated that this is not something that will work on every farm; and the key is having a farmer who understands people. But in a society which is increasingly detached from food production, social farming and social prescriptions can play a mighty role in reconnecting consumers and producers. The stand-out social farmers in Holland and Italy made sure engaging with the public was core to their business, not only for the benefit of the adults attending the farm, but also for the benefit of the public. For too long, people with disabilities have been shut away from society for no good reason. It would be a strong message for agriculture if the industry was seen to play a key role in helping re-integrate people within society, leading to them becoming more independent.

One of the stand-out opportunities for healthcare and agriculture is opening the farm up for people living with dementia. Of course there are many considerations in doing so. Making sure you have the correct skills, or employ people with the right skills, is vital, as is having a warm seating area for those important break and lunch times. Health and safety of course is important, but standards should be high on farms as it is. Allowing people living with dementia onto the farm, whether that's on day placement or residential, has massive positive impacts on the whole of society.

## 6.5. Concluding thoughts

We need to be developing a social care sector which encourages development and progression. All too often people can be dismissed because of their disability. Society should be encouraging; everyone has a role to play. Yes, some individuals with disabilities won't reach employment level, but we should be encouraging them to achieve greater independence, in order to maximise their potential and feel they are contributing.

Agriculture does have a role to play in delivering social care, but so does every other industry. Businesses are all too quick to dismiss someone with a learning disability, but they could offer a lot if people are prepared to put a bit of time into people. Farming is a great example of this; farmers know sometimes it is worth spending that extra time caring and nurturing a new-born, or a crop. The time they put in reaps rewards as that animal or crop grows and brings a financial return.

The same applies to people. Some people just need a bit of time and support to get back on their feet. Give them this chance and they will repay you with satisfaction, and they will repay society by contributing. Social farms integrate health and social care to provide community-based, non-clinical care, which is exactly what the NHS is working towards providing. Therefore, it is time people were more informed about this pathway for social care.

Nothing in our NHS is perfect; but there are many areas of un-tapped potential such as agriculture. But wider than this, every business and individual has a role to play in delivering social care now and in the future. Prevention of disease and illness is key rather than treatment of a disease. The NHS's work isn't completed just by writing a prescription for a drug. What needs to also be thought about is: can the individual read the prescription; do they have food; do they lack social contact; and can this





patient benefit from alternative treatment such as a social prescription? This thought and option isn't taught in medical school. As Ilan Illicic stated in his book, the greatest single advance in medicine will not be a new drug or procedure but an increased ability of patients to care for themselves – social prescriptions and social farming represent this advance<sup>xvi</sup>.



## Chapter 7: Best examples

### 7.1. Best Example - Boerderij 't Paradijs, Holland

Address:

Boerderij 't Paradijs

Bielderweg 1

3772 VM Barneveld

Owner: IJsbrand Snoeij

Paradijs is a small 25 ha farm-based community in Holland. It was a dairy farm up until 2000. The farm now offers opportunities to 120 clients a week, including children, people living with dementia and adults with disabilities such as autism. 40-45 adults living with dementia attend the farm each week. These people have a dedicated kitchen and rest room and all staff working with these clients are specifically trained to work with this client group. A large proportion of these clients are referred through GPs as part of a social prescription.

IJsbrand Snoeij, the farm's founder, has built a business model based on care services and agricultural direction. IJsbrand aims to link the connections between the consumer and the producer and states that its core value has to be that care is integrated into the farm's production and that everyone has basic equality with each other. Production provides jobs and it makes people feel important to be involved in real projects and products. Although only 30% of the farm's income is from agricultural sales, the farm work provides meaningful opportunities for the people they support.



Figure 13: Paradijs Care Farm, Netherlands, combining agricultural production with care



The philosophy of Boerderij't Paradijs manifested itself in five different forms: Christianity; putting the client first; individuality; teamwork; and innovation. The clients are given time and space to find their own way and were proud to be part of such an inspiring and influential farm. Clients felt their work was more meaningful when it directly assisted with the maintenance or income of the farm business and they took great ownership and satisfaction in working on the farm. At Boerderij't Paradijs there was an overwhelming sense of belonging to a community; this gave people the strength and support to face their own challenges and helped to reinforce the idea of equality and sociability.

IJsbrand established the farm to reflect values close to his Christian faith – he wanted to do his part to make the world a better place. It is everyone's basic right to feel equal and be treated the same regardless of disability. The farm supports 9000 laying hens, a vegetable box scheme, a small livery and a pig fattening enterprise. There is a small onsite farm shop, with established contracts with organic co-operatives to sell surplus produce. IJsbrand has built a business model welding agriculture and care in an efficient sustainable manner which maintains people as the core of the business: promoting people to empower themselves and treating all with equal opportunities.

*Please see a second case study on next page*



## 7.2. Best Example – DVB Foundation, Holland

Address:

DVB Foundation

fl Rietweg 2

5306 HB BRAKEL

Owners: Coby and Marlies van Baalen

*“Anyone can ride. It starts with willpower” – Marringje van Baalen*

The DVB foundation was set up to assist people with disabilities manage to ride horses. There are two pathways in the foundation: therapeutic and coaching. The foundation was founded by the Van Baalen stables. The purpose of the foundation was to give disabled riders the chance to prove themselves and compete at competition level regardless of disability. The whole business including the DVB foundation is focused on being the best, with attention to detail top of the list. The disabled riders are treated no differently to non-disabled riders. Everyone has to meet very high standards. The example given was that a horse may have its head too low: a non-disabled rider would be told to correct this with their hands. But for the disabled rider who may not have hands the instruction would be: the horse has his head too low, correct it.

Regardless of disability, everyone has ability, explained Marringje van Baalen, who took several hours out of a busy schedule to show me around. The foundation helps people by providing clinics, being ambassadors for other stables, and helping coach trainers to be aware that disabled riders can compete to a high level. The principle ethos of the foundation is to help improve peoples’ lives. This isn’t always through money as Marringje van Baalen explained: offering horses for loan or providing lessons can be better for some people than a hand-out of money.



Figure 14: DVB Foundation, giving disabled people an opportunity



### 7.3. Best example - Kwekerij Osdorp

Address:

Nursery Osdorp  
Osdorperweg 937  
1067 SW, Amsterdam

Tomato grower, Amsterdam

Nursery Manager – Jeroen Rijpkema

This nursery in Amsterdam started in 2009 in a former rose nursery. Now the nursery produces 30 000 tonnes of tomatoes, peppers and egg plants each year. The nursery has between 45-70 workers coming in each day, but they aren't ordinary workers. They consist of homeless people, drug and alcohol addicts and ex-offenders. The nursery is paid €45 per person per day from the Amsterdam local authority and €8 of this a day is paid back to the worker. The nursery has a fleet of 11 buses which pick up the workers each day. They are supervised by a team of 35 employees during the working day and have access to hot meals, counselling and training while at the nursery. The workers aren't forced to come to the nursery, they all choose to do so. It was apparent how hard they all worked and everyone was treated with equality and respect.

The nursery produces 100% organic tomatoes with 95% being sold into local restaurants and the remaining 5% getting flown to the USA to Google restaurants. Google are buying these tomatoes not only for the value they represent but also for the social benefit they have brought to people.

The concept of the idea is to get people off the streets who are committing crime and, by offering work and money, to reduce crime levels within Amsterdam. I expected high levels of crime and drug use in the nursery, but there was no evidence of any. CCTV was all over, everyone was supervised, and there was a zero tolerance approach to violence or drug use. Talking to the workers, they respected the fact they were being given an opportunity to do something with their lives and have a clean start. The nursery put on Dutch language classes, addiction classes, CV writing, and some workers were studying work-based qualifications to help them move on to other employment. Workers were able to operate machinery, learn about irrigation, mechanics and food preparation. With three canteens on site everyone received two warm, healthy meals a day, and a chance to learn how to cook and work in a catering environment.

Osdorp was a truly inspiring place, helping many people aspire to a life of employment and work rather than crime and drug use. Of course, Osdorp wouldn't be able to operate as it does without the backing and support of the local municipality of Amsterdam, but the latter sees this as a better, more cost-effective method of dealing with crime and homelessness within Amsterdam - and it's working.

*See photo on next page*



Figure 15: Tomatoes at Nursery Osdorp, Amsterdam, Netherlands.





#### 7.4. Best example – Dolans Social Farm, Ireland

Address:

50 Glennasheevar road,  
Knockaraven,  
Garrison,  
Co Fermanagh  
BT934AA

Owners: Malachy & Miriam Dolan

Dolans Social Farm on the border of Northern and Southern Ireland is a traditional farmstead, home to a herd of organic beef cattle. Miriam and Malachy were very accommodating hosts, allowing me into their family life during my visit. Begun as part of the cross border Social Farming Across Borders Project (SOFAB) project, Dolans is very much starting out as a social farm. During my visit three individuals, with a mix of backgrounds and issues, attended the farm on a daily basis, and they each respected the farm and the family. They treated the farm as their own, showing pride and passion in what they were doing and how involved there were in it. One individual was using his IT skills to help Malachy get his website up and running; another guy was using the farm work to channel his negative thoughts into positive work on the farm. This was a true example of a working farm integrating individuals onto the farm without losing the true value of farm work. As Malachy explained, the key is the farmer. Individuals respect him as the farmer because it's his farm and his animals. That feeling doesn't exist in a regular (Council run) day service.



Figure 16 : A participant on Dolan's Social Farm, Ireland.

*Another case study is given overleaf*



## 7.5. Best example – Agricoltura Capodarco Grottaferrata, Italy

Address:

Via del Grottino,  
00046 Grottaferrata RM,  
Italy

Owners: Social Co-Operative

Grottaferrata is set 35 minutes' drive to the south of central Rome in open countryside. It is part of the national forum of social farms - Nazionale Agricoltura Sociale. This 500-strong network supports social farmers, lobbies Government and promotes integration of social, health, training and working into an opportunity for adults with disabilities so they can meaningfully contribute to society.



Figure 17: Nazionale Agricoltura Sociale logo

Capodarco is a mixed farm with onsite residential accommodation, a restaurant, shop, winery and fruit growing areas. Individuals lived on site in shared and independent accommodation. They worked on the land growing fruit and vegetables, in the restaurant or in the regular market in the local village.



Figure 18: Helping participants on Capodarco Social Farm, Italy

The aim of Capodarco is to show and demonstrate that social farms can be truly meaningful and worthwhile and, at the same time, economic. To do this there is a need to demonstrate people are contributing to the economy and that social farms aren't simply 'farming care'.





Capodarco is working with Mistica, a 60 hectare growing farm closer to Rome. Here they grow a large range of field-scale organic vegetables all of which goes into social farm shops and the money generated goes towards supporting adults with disabilities. The opportunity for paid employment is there for individuals when the opportunity suits. All the adults here loved their work. They could see the purpose of what they were doing, and enjoyed the interaction with the public coming to buy their products.

The Nazionale Agricoltura Sociale has worked hard and done a super job of integrating farms, work, disabled adults and society, into one. This is a true example of how social farming works best.



## Chapter 8: Conclusions

- UK Agriculture can help deliver social care
- Principles of care farming can be applied to other sectors
- Recognition and support from Central Government and the NHS is key to the large scale support of the sector and individuals
- Social farms are good connecting agents – enabling people to reintegrate into society.

## Chapter 9: Recommendations

- Awareness of the Green Care sector needs increasing in order for more people to benefit
- Benefits and outcomes of attending social farms need highlighting so the general public understand how it can help them
- Greater evidence of the socio-economic benefits that social farms bring to communities should be made known in order to back up positive wider society benefits
- There should be lobbying of Defra, NHS and NFU to help recognise Green Care in legislation and law
- Removal of the word 'Care' from 'Care Farming' is necessary as this isolates the sector, making it appear as though it only provides care
- A stronger UK-wide green care sector organisation providing recognised quality mark and support services will increase the amount of quality care farms in the UK
- There should be re-assessment of dementia care provision in the UK and its broadening to include healthcare in rural environments.



## Chapter 10: After my study tour

The Nuffield Farming experience has benefited me hugely. It has been a challenging 2 years, with ups and downs. But the experience has given me access to a great network of people and, as a result of solo travel and training courses, I have an increased confidence in myself. Thanks to the Nuffield experience I now have a more rounded view of global agriculture as well as having gained valuable experience in public speaking and the sector I work within.

During the Nuffield experience I changed jobs and embarked on establishing new social farms from scratch. This has also resulted in my working as a consultant to others looking to establish social farms. The experience has spurred me on to lobby Government to make positive change in the sector, and resulted in myself carrying out further research in the field and raising the cause with HRH The Prince of Wales.



**Figure 5: Myself meeting HRH The Prince of Wales in May 2017  
to speak about social prescriptions and care farming**

I have been able to feed my findings directly back to Care Farming UK, influencing the sector on a national scale. Work on a European-wide social farming network is being undertaken as are steps to merge CFUK into a larger green care organisation. I have been privileged to be awarded the Farmers Weekly Rising Star 2017 award, recognising my achievements in promoting the care farming sector.

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Through the contacts and people I have met from the Nuffield Farming experience I am in a privileged position to make positive changes in my sector with a clear and structured view of the wider agricultural and healthcare sectors.

## Robin Asquith

July 2017



Figure 20: Farmers Weekly Rising Stars 2017



## Glossary of terms

**Care farming** – “The multifunctional use of the natural environment and its produce to benefit people with a disability or mental health concern”.

**Social prescriptions** – formal means of enabling primary care services to refer patients with social, emotional or practical needs to a range of local non-clinical services and provide a framework for developing alternative responses to meet need

**CCGs** – Clinical Commissioning Group

**SOFAB** – Social Farming Across Borders

**CFUK** – Care Farming UK.



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