

## Briefing 601

# Care Farming in the UK

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## Summary

There are at least 76 care farms in the UK providing a range of health, social rehabilitation or educational benefits to over five thousand people a week. Increasing support for and access to care farming for vulnerable groups should produce substantial economic and public health benefits. Key issues for success include policy support, funding structures, recognition of legitimacy and a recognised referral procedure.

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This briefing is taken from '*Care farming in the UK: Evidence and Opportunities*' by Rachel Hine, Jo Peacock and Jules Pretty, Department of Biological Sciences, University of Essex. The full report can be downloaded from:

<http://www.ncfi.org.uk/documents/Care%20farming%20in%20the%20UK%20FINAL%20Report%20Jan%202008.pdf>

## Introduction

Care farming is defined as the use of commercial farms and agricultural landscapes for promoting mental and physical health through normal farming activity. It is a growing movement and may be provided for psychiatric patients, those suffering from mild to moderate depression, people with learning disabilities or with a drug history, disaffected youth or elderly people as well as those suffering from the effects of work-related stress or ill-health arising from obesity. Care farming is a partnership between farmers, health and social care providers and participants.

Evidence is growing of the positive relationship between exposure to nature and an individual's health. The successful combination of natural landscapes, contact with animals and a meaningful workplace means that care farms can offer variety to participants, depending on the context, motivations and need. Successes from Europe and examples from the UK demonstrate that care farming works.

Care farming is a growing movement and there are now over two thousand care farms in Europe. They are often formally tied to local social services and hospitals. Farmers are usually paid for providing care.

## UK Care farms survey

The survey covers 19 city farms, 16 independent farms and 41 farms linked to external institutions or charities. The size of care farms varies between 0.3 ha and 650 ha and the majority have a mix of field enterprises and livestock.

Nearly half of the care farms surveyed receive some funding from charitable trusts and 33% receive client fees from the local authority. 38% receive other funding from sources including Learning and Skills Council, Health Care Trusts, Social Services, Big Lottery Fund and public donations.

A total of 355 full-time staff and 302 part-time staff are employed by the 76 care farms in the survey together with 741 volunteers. Care farms in the UK offer many different services including the development of basic skills (87% of farms), of work skills (70%), of social skills (65%) and some form of accredited training or education (63%).

The fees charged vary widely, both in terms of amount and by how they are charged (i.e. per person, per day, per group, for farm facilities etc.). Some care farms are providing services for no charge at all, whilst fees on other farms range from £25–£100 per day (most frequently around £30 per day).

The total number of care farm users in the UK is around 6000 per week. However, there is variation between the levels of usage at different types of care farm. More people (230) attend city farms per week, an average of 46 clients per week are seen at farms linked to external institutions or charities and an average of 29 users per week attend privately-run farms. Most care farms provide services for a mix of client groups rather than for just one. Most (83%) cater for people with learning difficulties, over half (51% of farms) provide a service for disaffected young people and 49% cater for people with mental health needs.

The majority of care farms have clients referred to them by a range of different sources including from social services, self-referral or from 'other' sources such as Connexions, private care providers, the prison service, Youth Offending Teams, PCTs, community drug teams, individuals on Direct Payments and the voluntary sector. Nearly a half of farms receive clients through education authorities or Further Education colleges, Pupil Referral Units, Behavioural Support Units etc).

Care farmers report that the physical benefits experienced by clients include improvements to physical health, self-esteem, improved well-being and improvement of mood, an increase in self-confidence, enhanced trust in other people and calmness. Examples of social benefits reported are independence, formation of a work habit, the development of social skills and personal responsibility.

## **Health benefit analysis**

Seventy two participants from 7 care farms around the country took part in a snapshot health benefit survey. Participants included people with mental health needs, those who were unemployed, homeless or vulnerably housed, disaffected young people, those recovering from drug and alcohol misuse, older people, offenders, ex-offenders and people recovering from accident or illness.

Results showed that there was a 64% improvement in participants' self-esteem after spending time on the care farm and 88% of participants experienced improvements in their overall mood. Care farm activities reduce feelings of anger, confusion, depression, tension and fatigue, whilst also enabling participants to feel more active and energetic.

## **Recommendations**

Care farming has important policy implications for a wide range of sectors:

### **Agriculture**

1. Farmers need a scientific basis for green care services, and they need the development of health policies and economical systems that make such services provide a predictable income.
2. Agencies with responsibility for supporting farming such as DEFRA, Natural England and farmers' organisations such as the NFU and CLA should promote care farming.

### **Health and Social Care**

3. Policy makers, healthcare professionals, local authorities and other agencies responsible for providing social care should recognise the benefits of a UK wide network of care farms delivering health and social care options and referral to care farming projects should be incorporated into health and social care referral systems.

4. Allocation of health and social care budgets should be informed by cost-benefit analysis of care farming initiatives.

### **Education, Training and Employment**

5. Education policy-makers should support and promote the work of care farms and investigate funding for participants referred by the education sector.
6. The benefits of care farms should be supported and actively promoted by all those involved in the education and employment sectors.

### **Police, Probation and Offender Management Services**

7. The Home Office, the Ministry of Justice, Police, offender management services and Probation Services should support care farming.
8. Crime and social service agencies of all types should consider the therapeutic value of care farming as part of strategies to address anti-social behaviour amongst adolescents.

### **Rural Development and Social Inclusion**

9. Agencies responsible for economies and communities in rural areas should actively promote care farming.
10. RDAs should take a lead role in the promotion of care farming.
11. All agencies with responsibility for the reduction of social exclusion should support the growth of care farming in the UK.

### **Partnership working**

12. Engagement of all stakeholders will be of crucial importance in the development of care farming initiatives across the UK.
13. Care farming in the UK needs a lead department charged with promotion and support for farmers, referral agencies and clients.

### **Funding**

14. Funding is the biggest challenge facing the existence and spread of care farming in the UK.

### **Future research needs**

There is a need for more robust, scientific evidence of the benefits of care farming for policy makers and service providers to validate care farms and to secure future funding so that such services can earn a predictable income. A cross-sectoral approach to research is desirable. A universal, standardised tool could be developed to improve monitoring and evaluation methods for a range of care farming activities.

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Alan Spedding, 25 February 2008

RuSource briefings provide concise information on current farming and rural issues for rural professionals. They are circulated weekly by email and produced by Alan Spedding in association with the Arthur Rank Centre, the national focus for the rural church. Previous briefings can be accessed on the Arthur Rank Centre website at [http://www.arthurrankcentre.org.uk/projects/rusource\\_briefings/index.html](http://www.arthurrankcentre.org.uk/projects/rusource_briefings/index.html)

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