Historically, asylums were surrounded by gardens, parks and open landscapes, and patients often participated in horticultural activities. Horticultural therapy (HT) and therapeutic horticulture (TH) are today widely known therapeutic strategies within mental health, despite the fact that formal research in this field is scarce. TH can be defined as ‘a process that uses plant-related activities through which participants strive to improve their well-being through active or passive involvement’ (1, p.4).

We do not know to what extent garden and horticultural activities are used in Green Care programs in Norway. Using the farm as a setting for TH implies that the farm yard, the nearby nature, forest and cultivated land serves as an environment to simply stay in as well as for doing horticultural activities. The aim of TH may range from restoration of mental, physical and social resources, via improvement of self efficacy through meaningful and creative activities, to development of vocational skills or learning of new motivating leisure time activities.

Research on TH within a Green Care context in Norway is limited to the PhD project by Marianne Thorsen Gonzalez (2) on the importance of TH for people diagnosed with depression and the following is a presentation of the project. Depressed individuals suffer from impaired mood, attentional impairment, rumination, reduced interest, inactivity and social withdrawal. Depression is highly co-morbid with anxiety and inversely associated with existential issues. The main aim of the project was to assess changes in depression severity, anxiety, positive affects, perceived stress, perceived attentional capacity and rumination during a TH program on urban farms. We also aimed to identify when during the program the most significant changes took place, and to investigate if the elements of attention restoring therapy, being away, fascination and group cohesiveness, acted as possible active components in a TH program. We further aimed to investigate the persistence of changes at 3-month follow-up. Two single-group design studies with multiple measurement points and convenience samples were used (2008 and 2009). The participants, all meeting the DSM IV criteria for major depressive disorder, completed a group-based TH program in twelve weeks, attending twice a week for three hours each time.

In both studies (3, 4), depression severity declined significantly during the intervention, and the most significant change took place during the first four weeks. The decline compared to baseline was still significant at 3-month follow-up in both studies. Perceived attentional capacity increased in both studies; the most significant change took place after four weeks in Study 1 and after eight weeks in Study 2. However, the increase dissipated by the 3-month follow-up in both studies. Rumination decreased significantly during the intervention in Study 2 (3). The participants reported high and stable values on the restorative qualities being away and fascination during the intervention. Those participants who were most fascinated by the intervention showed a significantly greater decline in depression severity. Decline in depression severity and increase in perceived attentional capacity were mediated by change in the restorative qualities being away and fascination from home to the garden and farm context. Brooding acted as a moderator of decline in depression severity (4).
The improvements in anxiety, positive affects and perceived stress during the intervention were all statistically significant (5). The participants reported high levels of group cohesiveness, and the levels of group cohesiveness correlated positively, but not significantly, with the improvements in depression severity, anxiety, affects and perceived stress. The participants evaluated positively the social aspects of the TH intervention and more than a third of the participants reported increased social activity after having participated in the program (5). There were no significant changes in the two studies in the existential issues life regard and sense of coherence. However, more than two thirds of the participants evaluated that participation in the TH intervention had contributed to change in their view of life. The qualitative data supported these evaluations (6).

This research is limited by a lack of control group, small sample sizes in each study and a complex intervention performed at four different locations. The research is strengthened by double assessments at baseline, multiple measurement points and two data collection periods, enabling replication that increases confidence in the findings. It is also considered a strength that the statistical analysis used allowed for determining when the most substantial changes took place, and for examining possible mediators and moderators. Additional strengths were that the design allowed for investigating changes at 3-month follow-up.

TH is an activity that is easy to facilitate in a farm context. It makes use of both the nature and cultural context represented by the farm for restoring and renewing resources and for developing new skills in a coherent and meaningful setting. There is a need for quantitative studies holding benefits of farm based TH interventions against benefits of relevant control interventions, as well as for qualitative studies exploring the meaning and experiences of participating in TH programs.

References: