Summaries
New dynamics in mental health recovery and rehabilitation
The case of care farms

Research in the field of mental health has long stressed the high burden of mental disorders, which were found to be among the most disabling health conditions. Furthermore, many countries encounter difficulties in maintaining access to mental health care services due to economic stress and governmental priorities which do not include (mental) health. Therefore, new interventions in mental health increasingly engage other sectors of society, making use of local resources and aiming for a better link with local communities. In line with these approaches, the current thesis proposes a closer look at the contribution the agricultural sector can make to facilitate the recovery of people with mental disorders, using the case of care farms.

Care farming consists of the use of farms as “a base for promoting mental and physical health, through normal farming activity”. Practiced in countries throughout Europe (for example France, Germany, Ireland, Italy, the Netherlands, Norway, Poland, Slovenia) and the USA, care farming represents a link between agriculture and aspects of traditional health care. Despite the increased use of farm-based care, research on the relevance of these services for people with mental disorders, in the broader context of current mental health services, is still missing. This knowledge gap has been denounced by practitioners, researchers, health care professionals and policy makers alike.

Responding calls for more clarity regarding the relevance of care farms, and taking into account the complex challenges in the field of mental health, the current thesis was guided by the following research question:

“In what way, and to what extent, can care farms play a role in mental health recovery and rehabilitation?”

The concept of recovery – the notion that the majority of people can overcome the consequences of mental disorders and live meaningful lives in community – is increasingly integrated into the field of psychiatric rehabilitation. Several perspectives co-exist: the outcomes research perspective on recovery (problem-oriented, focusing on the limitations of people with mental disorders, as imposed by symptoms or are associated with impaired functioning); the personal narratives perspective on recovery (person-oriented, focusing on the process or the personal journey of recovery, as experienced by people with mental disorders); the system reform / transformation perspective on rehabilitation (focusing on the integration of the recovery concept into mental health care systems, and on finding the most effective
ways to organize and deliver services, respectively); and the service provision perspective on rehabilitation (focusing on the operationalization of the recovery concept, for example in relation to the roles and responsibilities of mental health care professionals).

The current thesis incorporates the four perspectives on recovery and rehabilitation and attempts to further their understanding, based on the study of care farms. Since mental health recovery is most frequently discussed in relation to severe mental disorders, its relevance for the study of common mental disorders (such as depressive and anxiety disorders) is still a matter of debate. In light of these developments, and taking into account the current status of research on care farms, the following objectives were formulated:

I. To contribute to a better understanding of recovery in common mental disorders;
II. To provide insights into experiences of mental health recovery on care farms;
III. To analyse care farm services and practices from a psychiatric rehabilitation approach.

The thesis is structured into three parts, reflecting the three objectives described above. Given the different perspectives on mental health recovery and rehabilitation, which require different research approaches, the studies conducted for this thesis used a combination of quantitative and qualitative research methods, an approach also known as “mixed-methods research”.

Part 1 of the thesis focuses on recovery in people with common mental disorders (such as anxiety disorders), and sets the scene for further research on care farms. Using data of the Netherlands Study of Depression and Anxiety (NESDA), the study presented in Chapter 4 examines the 2-year trajectories of functioning in participants with chronic anxiety disorders (n=586), remitting anxiety disorders (n=385) and healthy controls (n=585). At baseline, participants with remitting anxiety disorders functioned significantly better than those with chronic anxiety disorders, but significantly worse than controls. In both anxiety disorder groups, most impairment was reported in social functioning, occupational functioning and cognition. During the follow-up, functioning improved in both groups, probably due to the treatments received. Participants who achieved symptom remission experienced moderate improvements in social functioning and cognition, but not in occupational functioning. Of those who remitted, 45.8% reported functioning scores similar to healthy controls while 28.5% still functioned at the level of those with chronic anxiety disorders. Worse functioning was predicted by severe anxiety disorders, use of psychological treatment, co-morbid depressive disorders and maladaptive personality traits. These findings suggest that daily functioning may be significantly impaired in anxiety disorders, especially when associated with mental and
somatic co-morbidity, and that impairments may persist despite symptom remission. Therefore, psychosocial interventions aiming to improve social and occupational functioning, and to increase social participation, can be relevant for at least a proportion of people with current and past anxiety disorders.

The main body of the thesis explores the potential of care farms in the recovery and rehabilitation of people with mental disorders, based on 125 qualitative interviews and a database of 214 care farms. Part 2 focuses on services users and approaches mental health recovery on care farms from two perspectives: outcomes research and personal narratives. Chapter 5 provides important background for our further study of care farms by systematically reviewing the literature on farm-based interventions for adults with mental disorders, based on the Preferred Reporting Items for Systematic Reviews and Meta-Analyses standard (PRISMA). A search for English language literature published before May 2012, conducted on three electronic databases, generated 753 articles, of which 11 met the eligibility criteria. The 11 articles reported the results of five studies conducted in three countries, and approached farm-based care from different theoretical perspectives. Favourable effects were identified in terms of clinical status variables in patients with treatment-resistant depressive disorder and in patients with schizophrenia. Assessment of functional outcomes was limited and yielded conflicting results. However, participants experienced improvements in social contact and in social and occupational skills. Qualitative accounts also revealed that, on care farms, users found new personal meaning, developed a positive sense of identity, learned to deal with disability and discovered new ways to view themselves and their life.

The qualitative study presented in Chapter 6 explores the experiences of recovery processes on care farms and day centres in the Netherlands, based on semi-structured interviews with 26 service users. Care farms, work projects and creative projects were found to empower users to leave behind inactive, isolated or disorganized living. Users of the different services provided different accounts. On work projects, users focused on occupational functioning, and regarded their activities as regular jobs. However, some struggled with the patient culture of a closed peer community, and missed closer links to society. On creative projects, users seemed to be engaged in a more inward journey. They lacked goals related to the outside world (such as, for example, community integration or successful occupational performance), experienced high need for emotional support, and focused on self-reflection and personal development. In contrast, users of care farms aimed for daytime occupations and closer contact with society. They experienced care farms as open, real-life work settings where they connected with people with and without disability, felt personally responsible for the work done, and were motivated to continue attending care farms despite the challenges posed by disability.
The studies presented in Part 3 of the thesis focus on service providers (professionals and/or organizations) and are conducted at the interface between mental health care organizations and care farms. The mixed-methods study presented in Chapter 7 analyses the characteristics of the services provided on care farms for people with mental disorders in the Netherlands, and explores their organization, the rehabilitation process, and the link with family members and local communities. Analysis of 214 care farms revealed that institutional care farms (comprising 88.8% of all care farms) were significantly larger and older than private care farms (comprising 11.2% of all care farms). Furthermore, the five case descriptions (selected from 34 interviews) suggested that, from a psychiatric rehabilitation approach, contracted care farms represent a promising model because they appear to combine the advantages of older institutional care farms (where professional supervision is available to help users develop work and social skills and transition towards the labour market) with opportunities for small-scale services in close contact with local communities. Moreover, since they make use of resources already present on farms, contracting private care farms might also help mental health care organizations reduce costs.

The qualitative study presented in Chapter 8 explores the benefits and challenges arising from the collaboration between professionals and non-professionals in rehabilitation. Analysis of the 28 semi-structured interviews conducted with rehabilitation professionals and care farmers depicted two essential developments that had paved the way for their collaboration: an increased focus on work and social integration of people with mental disorders (for the former), and the economic developments in the agricultural sector (for the latter). For rehabilitation professionals, the collaboration with care farmers broadened the range of services they could offer, and provided low-entry work opportunities in green spaces where stigma and discrimination seemed a lesser issue than in other settings. For care farmers, the collaboration formalized referrals to their farms, and helped them establish themselves in a new field. Challenges in collaboration arose as a result of different perspectives on how care farm services should be provided, and differences of opinion regarding financial arrangements.

The integrative, mixed-methods research approach used in this thesis revealed that the services provided on private care farms can bring an added value to the current rehabilitation services in the Netherlands. The studies conducted at user level suggested that, in the open, real-life settings care farms, care farm participants with common and severe mental disorders can become inspired, motivated and responsible for their work. Furthermore, the studies conducted at service level revealed that private care farms that collaborate with mental health care organizations can provide small-scale, community integrated services, where the availability of professional support and the presence of authentic farmers can help people with mental disorders acquire basic social and work skills, and transition towards other vocational
rehabilitation interventions, or directly into the labour market. Still, many questions remain. Especially the degree to which functioning improves, and to which the transition towards the labour market is influenced by use of farm-based services, remain unclear. In light of the positive conclusions on the potential of care farms presented in this thesis, it is recommended that alternative, community-based solutions continue to be further developed, studied, better understood and integrated into current research agendas.