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CENTRE FOR APPLIED RESEARCH
IN HEALTH, WELFARE AND POLICY

A Qualitative Evaluation of the 'Green & Growing' Project

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July 2018

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The Sustainable Housing & Urban Studies Unit (SHUSU) is a dedicated multi-disciplinary research and consultancy unit providing a range of services relating to housing and urban management to public and private sector clients. The Unit brings together researchers drawn from a range of disciplines including: social policy, housing management, urban geography, environmental management, psychology, social care and social work.



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Executive Summary

Background

Global demographic trends report a rising ageing population worldwide with the projected growth being described as 'unprecedented', 'pervasive' and 'enduring'. Significantly, the levels of physical inactivity in Salford are currently higher than in England and, similar to those with learning disabilities and long term conditions, older people are less likely to be active. Moreover, older people often present with comorbid conditions which can be complex and challenging both to the individual and health & social care services, often requiring multiple services that cross a range of disciplines, organisations and professional groups. To compensate, there is a move to integrate services between health and social care to support the complex health and social care needs of older people. Significant asset based approaches are now being implemented; one example is social prescribing which uses person centered approaches to support integration through the coordination of non-medical interventions for people with diverse needs. It is reported that social prescribing can offer a lifeline for older people in need. Moreover, nature based approaches, such as Therapeutic Horticulture are often socially prescribed to support people with a range of needs. Ambition for Ageing (AfA) is a £10 million programme of work which will develop a Greater Manchester approach to building age friendly communities. The programme presents an approach to social isolation that places older people at its centre, ensuring their contribution to civic, cultural and economic life is maximised and fully recognised across Greater Manchester. The programme is delivered by a cross-sector partnership, led by GMCVO alongside local authorities, voluntary sector organisations and academics and funded by the Big Lottery Fund (BLF).

AfA in Salford is delivered through a partnership of Age UK Salford (lead partner), Inspiring Communities Together who also lead on the Salford Community Asset programme and Salford CVS. The programme uses a neighbourhood targeted approach allocating funding through small scale investments which help to reduce the impact of isolation and meet the Salford visions for an Age Friendly City.

The green and growing network model was developed as a test and learn project funded through the AfA funding following a number of project proposals from older people to develop green and growing projects. Incredible Education were commissioned to deliver the project and Salford University were funded to carry out the evaluation of the project.

A team of researchers from the University of Salford School of Health & Society undertook a qualitative evaluation of the Green & Growing Project.

Methodology

The aim of the project was to qualitatively evaluate the impact of the Green & Growing project on participants' (aged 65 and over) self-reported health, wellbeing and social inclusion. A qualitative evaluation was undertaken between March – May 2018. A total of four focus groups were conducted which included 26 participants over the age of 65.

Findings

The qualitative thematic analysis identified three key themes from the focus group data, which included: 'Meaning & Purpose', 'Levels of Nature' and 'Social Connections'. The three themes illustrate the way in which the Green & Growing project supported older people both as individuals participating in gardening and as smaller communities connecting through exposure to gardening. A core category of 'Empowerment' emerged through the analysis as a concept that was common across all the themes. The overall findings are very positive and suggest that the older participants are influenced by nature and engaged with both gardening activities and the more social aspects of the G&G project.

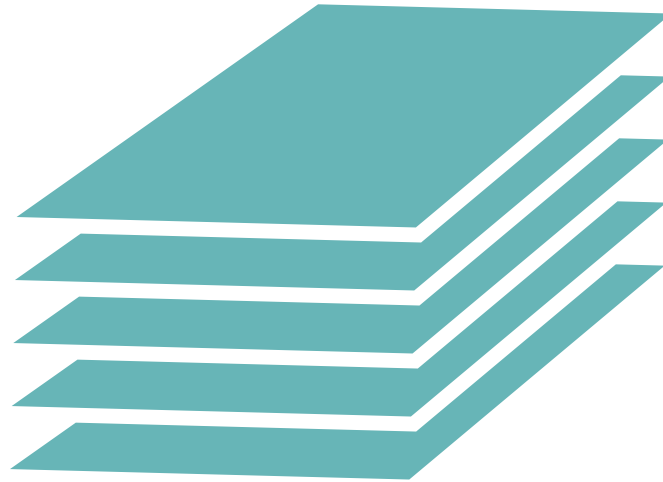
Discussion

Social isolation can result in damaging health consequences equivalent to smoking 15 cigarettes per day. There is a need to develop alternative methods to support people as they become older to stay fit and active. The G&G project provides one such approach to engaging with older people, enhancing both mental wellbeing and promoting physical activity. The G&G project also reduces social isolation, whilst increasing social connectivity.

Conclusion

Using therapeutic horticulture within the G&G project illustrates that nature is still a force to be reckoned with and can be used as a positive ally to support the wellbeing of an increasing older person population in order to age well with nature.

1. Background



Global demographic trends report a growing ageing population worldwide with the projected growth being described as '*unprecedented*', '*pervasive*' and '*enduring*' (United Nations, 2002). Significantly, within the UK it is estimated that by 2040 nearly one in four people will be aged 65 or over and the number of people 85 or over is predicted to more than double to over 3.4 million (Office for National Statistics, 2015). An outcome of the ageing population is that the '*Old Age Dependency Ratio*' (OADR) is increasing (Office for National Statistics, 2017). The OADR is the number of people aged 65 years or older for every 1,000 people aged between 16 and 64 years old and is a useful measure to understand how the balance in the population will change, particularly when planning for the needs of the different age groups. For example, in 2016 the UK's OADR was 285 and similar to the proportions of older people in population figures, the OADR has been increasing since 1996 and is anticipated to rise (Office for National Statistics, 2017). In 2016 only 11 local authorities reported an OADR above 500; critically, this is projected to increase to 62 by 2026 and 157 by 2036 (Office for National Statistics, 2017). These unremitting trends will have considerable economic, political, cultural and social implications (HM Government, 2013). They will present current and future challenges which will require the Government's prioritisation for policy, resource allocation and service provision. Consequently, there will also need to be more localised responses to the growing demands resulting from an increasing older population.

One reason for these demographic increases is due to improved healthcare and lifestyles, especially for those aged 65 and over (Office for National Statistics, 2017). However, the evidence-base that exists in relation to health and wellbeing suggests that there are many aspects of daily living for older people that require additional support; for instance, statistics show that 21% of men and 30% of women aged 65 and over need help with at least one Activity of Daily Living (ADL), such as, washing, dressing or mobility and 22% and 33% respectively need help with at least one Instrumental Activity of Daily Living (IADL) (NHS Digital, 2016). ADLs and IADLs are key life tasks that people need to manage in order to live at home and be fully independent.

It is acknowledged that many older people live with long-term conditions, and hence need to use primary and secondary care services more regularly (Newcastle Social Prescribing Project, 2013). To compensate for this, there are a range of policy frameworks to promote integration of health and social care that attempt to tackle the key issues associated with the health and social care need of an increasing older population. Hence, there is increasing evidence of the blurring of the boundary between health and social care as services move towards more integrated provision to support the complex health and social care needs of older people. Social prescribing supports integration through the coordination of non-medical interventions that encourage person centred approaches for people with diverse needs. Typically, social prescribing services are asset based and are designed to promote the skills and attributes of the

community and individuals through influencing people to work together through activities such as walking, hobbies and gardening. This is significant as older people are more at risk of becoming socially isolated, which carries associated health risks. It is reported that social prescribing can offer a lifeline for older people in need, moreover, nature-based approaches, such as Therapeutic Horticulture are often socially prescribed to support people with a range of needs.

'*Therapeutic horticulture*' (TH) is an intervention which typifies social prescribing as a non-medical, integrated intervention. Therapeutic Horticulture is recognised to be a nature-based approach that promotes green therapies which can have a positive influence on an individual's social activation (Gonzalez et al, 2010). Berget et al (2012) report that there are a range of activities that constitute '*green therapy*'; the most common understanding is that it can be used to promote health and well-being for people who may be vulnerable or who are socially excluded. Indeed, it has been widely accepted that green and blue spaces – green infrastructure - can directly and indirectly influence health and wellbeing (Morris, 2003). Subsequently, there has been a notable increase in the number of green spaces and gardening projects in urban areas. What is known about the positive impacts of TH, and being in and around nature more generally, is gathering momentum and there is a growing evidence base for TH and other green therapies. For example, Howarth et al's (2018) evaluation of therapeutic horticulture on people with mild to moderate mental ill-health and Maxwell & Lovell's (2017) review both reported a direct link between exposure to, and involvement with nature and improved health and wellbeing for communities and individuals. However, little is known about the benefits that these bring to older people and what if any benefits are noted by other members of the local community. In addition, access to health and wellbeing benefits is not shared equally amongst the population, particularly in urban areas. People aged 65 and over are most likely to suffer from poor health, but this group may be the least likely to benefit from green infrastructure. Yet being physically active helps to prevent or manage over 20 conditions and diseases (Department of Health, 2011). It can also help improve people's mental health and wellbeing. Of significance, the levels of physical inactivity in Salford is currently higher than in England and older people are identified along with people with long term conditions and people with a disability as being less likely to be active as reported in Greater Manchester population health plan and local public health sustainable, transformational plans.

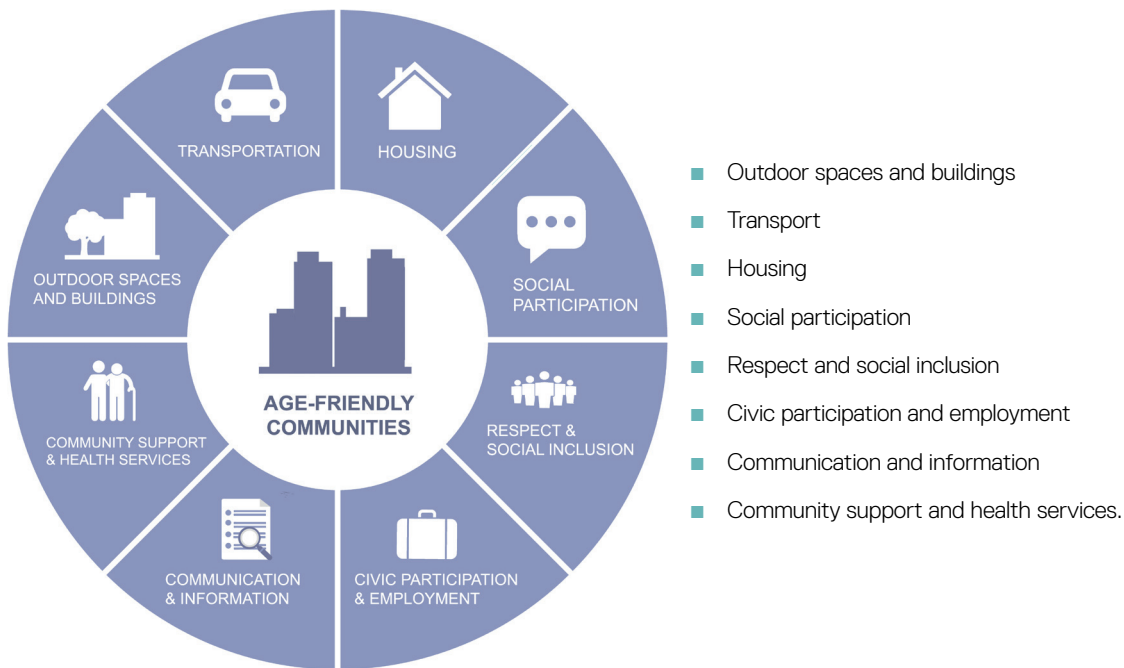
To-date, the literature relating to the impact of green spaces has been dominated by Ulrich (1979-2002) and Kaplan (1973-1989). Whilst their theories and assertions have been developed, the focus of their research has concentrated on the benefits of viewing green spaces as opposed to participating in activities that are considered

to be green, such as horticulture and growing. However, Maheswaren's (2010) review of the health benefits of urban green spaces, noted the limitations of many studies about the impact of green spaces on health and wellbeing, suggesting that much of the evidence-base was not robust and relied on observation, anecdote or subjective data. Maheswaren's (2010) review in particular highlights the complexities associated with identifying the impact of green spaces on individuals and a community's perceived wellbeing. However, there is some evidence, for example, Morris' (2003) review of green spaces in urban environments identified five key ways in which exposure to green spaces can enhance wellbeing: enhanced person and social communication skills, increased physical health, enhanced mental and spiritual health, enhanced spiritual, sensory and aesthetic awareness and the ability to assert personal control and increased sensitivity to one's own wellbeing. As Hunt et al. (2000) suggest, measuring the impact of the environment and green spaces on health is complex and difficult because of the complexities associated with the holistic nature of wellbeing. This report contributes to the evidence-base in this regard.

Salford is a city which celebrates the role of older people. It provides support when needed to enable older people to live healthy, independent lives for as long as possible, and ensures that quality care and support is available when needed. Currently in Salford there are more than 35,000 people aged 65 or older and this number is set to rise. Whilst many live active lives and bring a valuable resource to the city others have complex health and wellbeing needs. Salford now wishes to work with the older population to ensure they have the support needed to lead independent healthy lives and that Salford can provide them right support at the right time. The first step towards this approach was working with older population to achieve Age Friendly Cities status from the World Health Organisation which was granted in 2016.

"An age friendly city encourages active ageing by optimising opportunities for health, participation and security in order to enhance quality of life as people age. In practical terms an age friendly city adapts its structures and services to be accessible to and inclusive of older people with varying needs and capacities" (World Health Organisation, 2007).

The World Health Organisation (WHO) sets out some steps that a city needs to take, if it is to achieve its age friendly objectives. One of the most important is to do a baseline assessment of the age-friendliness of the city in eight key areas:



Working with older people, and using the WHO domains, a set of four visions for an Age Friendly Salford have been created.

<i>The Vision: Older people are able to feel safe and travel to places which help keep them healthy and engaged:</i>			
WHO Domains	Physical environment and outdoor space	Transport	Buildings and housing
<i>The vision: Older people are able to access information and services to keep them healthy and engaged in activity:</i>			
WHO Domains	Communication	Access to health and community services	
<i>The vision: Older people feel respected and included in neighbourhood activity :</i>			
WHO Domains	Taking part in social activity, learning and culture	Ensuring the views of older people are listened to and valued	
<i>The vision: Older people are able to access opportunities for paid and unpaid work as well as ensure their voice is heard:</i>			
WHO Domains	Participating in neighbourhood life		

Figure 1 - Diagram 1 WHO Age Friendly City steps and Salfords Visions

3. Incredible Education, Salford



Figure 2 - Planter made by G&G group.

The Salford Sustainable Community Strategy (2009 – 2024) aims to transform Salford into a healthy city. The challenge is to find means to meet the community's needs in the context of shrinking funding to public and third sector organisations. Key to this is that residents - regardless of their age, capability, mobility or health problems - are well connected. Incredible Education delivered the test and learn the Green & Growing (G&G) project to work with six older generation groups from across Salford and serves to ensure that participants are well connected irrespective of their older age, mobility and ability. The groups have diverse needs with regards to both their gardening knowledge/skills and their physical capabilities.

All the G&G groups have learnt how to sow seeds in trays, how to prick out seedlings and how to pot on plants into their final positions (example figure 2). Some have also learnt how to propagate plants through a variety of methods including stem and root cutting. In the main, the group sessions are guided by the environment of the individual setting which varies from

residential homes to community space. In most cases, there is a dedicated facilitator who provides information and guidance for the participants. The tasks are also dependent on the season and weather; in the springtime, the team prepared ground and sow seeds, in the summer the group weeded and watered, maintained beds and borders, in the Autumn the group worked with the harvest, cutting back plants and composting.

3.1 Project Overview

A team of researchers from the University of Salford's School of Health & Society undertook a qualitative evaluation of the G&G project delivered by Incredible Education Green & Growing Project. The G&G evaluation aimed to better understand the benefits and values of urban gardening projects for older people and how these can be best used to support healthy ageing in urban areas. This includes consideration of how therapeutic horticulture can be best designed, enhanced, managed and promoted to support its use as part of preventative

and restorative therapies and other health and wellbeing related activities. The evaluation was undertaken between March – May 2018. A total of four focus groups were conducted which included 26 participants over the age of 65. Key findings from the focus group data included the themes of: '*Meaning & Purpose*', '*Levels of Nature*' and '*Social Connections*' with a core category of '*Empowerment*' highlighted through the Grounded Theory analysis. The overall findings are very positive and suggest that the older people were influenced by nature and both engaged with gardening and with others.

3.2 Evaluation Aim

The aim of the project was to qualitatively evaluate the impact of the Green & Growing project on participants (aged 65 and over) self-reported health, wellbeing and social inclusion. In particular, the research included 4 key objectives which were:

- 1 To explore impact of the Green and Growing on self-reported health and wellbeing;
- 2 To explore impact on self-reported physical activity;
- 3 To explore the impact of the project on social isolation and sense of purpose;
- 4 To understand the impact of the Green and Growing project on dietary changes during the course or and following the project.

3.3 Methodology

A qualitative approach was used to explore the experience of participating in the G&G programme from the perspectives of those older people involved. Qualitative research seeks meaning and an understanding of subjective experiences; it does not attempt to quantify or measure outcomes. This approach enabled the team to fully explicate meaning and understanding about the G&G programme and the potential benefits experienced by participants. This project aimed to fully engage with the participants through qualitative focus groups. These were used to capture the participants' experiences of the Green & Growing programme which provided rich data to fully understand the experience.

3.3.1 Data Collection

In keeping with a qualitative design, semi-structured focus groups with older people who had participated in the G&G project were undertaken. The semi-structured questions allowed for some digression within the conversation to enable the researchers to capture and record the authentic experience of the participants. Kruger & Casey (2006) approach to focus group management influenced the design of the semi-structured questions and enabled the research team to use key opening questions, followed by more focussed questions to elicit pertinent detail. All the focus groups were digitally recorded and transcribed verbatim.

Typically, the focus group duration ranged from 25 – 40 minutes allowing for full range of expression and conversation.



Figure 3 - Planter of Edibles Created by the G&G Group

3.3.2 Sample

A total of four semi-structured Focus Groups (total participants $n = 26$) were held across a range of sites. These included sheltered housing, supported living and independent accommodation. The ages of the participants ranged from 65 – 90 there was an unequal split between males ($n = 10$) and female ($n = 16$) participants. Each Focus Group is described below:

- Focus Group 1: a total of 3 participants took part. All the participants were female and their ages ranged from 70 – 90
- Focus Group 2: a total of 11 participants took part. There was a mix of male and female with 8 males and 3 females. The age range was between 65 – 86.
- Focus Group 3: a total of 4 older people took part. There was 1 male and 3 females and the age range was between 72 – 88.
- Focus Group 4: A total of 8 participants 1 male and 7 females, 72-88,

The Focus Groups provided a representative sample of older people who had participated in the G&G project.

3.4 Data Analysis

Data were analysed using a thematic analysis based on the principles of Corbin & Strauss (2008) Grounded Theory approach (see figure 4). Each Focus Group was digitally sound recorded and transcribed verbatim. The research team read the Focus Group transcriptions and made notes about the core commonalities across the groups. A line by line analysis was then undertaken to identify key words, which were then discussed within the team to explicate further detail and notes were made to record the process. The Focus Group notes were then collapsed into the common areas which helped to reveal three key themes: '*Meaning & Purpose*', '*Levels of Nature*' and '*Social Connections*'. Using a constant comparative analysis, the team then explored the data for a core category that connected all the themes together. '*Empowerment*' was a core finding that emerged and indicated that the G&G project helped participants to develop new skills and understanding, be confident with participating with nature and others and helped to support those external to the project.

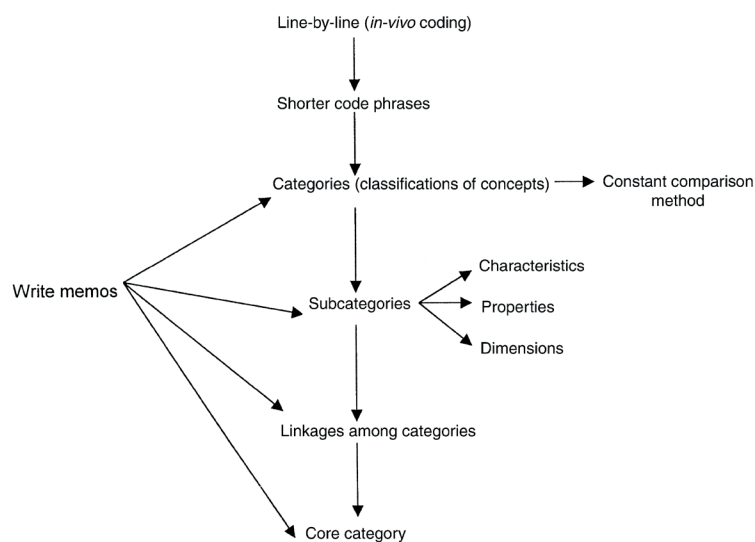


Figure 4 - Grounded Theory Analysis Process (Taken from Eaves 2001)

4. Findings



The qualitative thematic analysis identified three key themes from the Focus Group data which illustrate the way in which the Green & Growing project supported older people both as individuals participating in the gardening and as smaller communities connecting through exposure to gardening (see figure 5). Each theme is discussed in more detail and quotes from the data have been used to illustrate the key points and analysis. The analytic process illustrated the core category of 'Empowerment' which connected the themes and concepts. The G&G project empowered the older people to develop meaning and purpose and engage with others through the medium of therapeutic horticulture.

4.1 Meaning and Purpose

The analytic process highlighted how the G&G project provided the participants with a sense of meaning and purpose. The Focus Groups revealed that the older adults, who were susceptible to feeling a sense of loss or lack of purpose following retirement, were enabled by the G&G project to feel value and pride in the activities. This included the development of knowledge about gardens and gardening and having a common goal. The G&G project enabled the participants to have the confidence to take ownership of the growing and thus provide meaning and purpose. The conversation below was taken from the Focus Groups and this illustrates the sense of pride an individual expressed at the newly discovered knowledge;

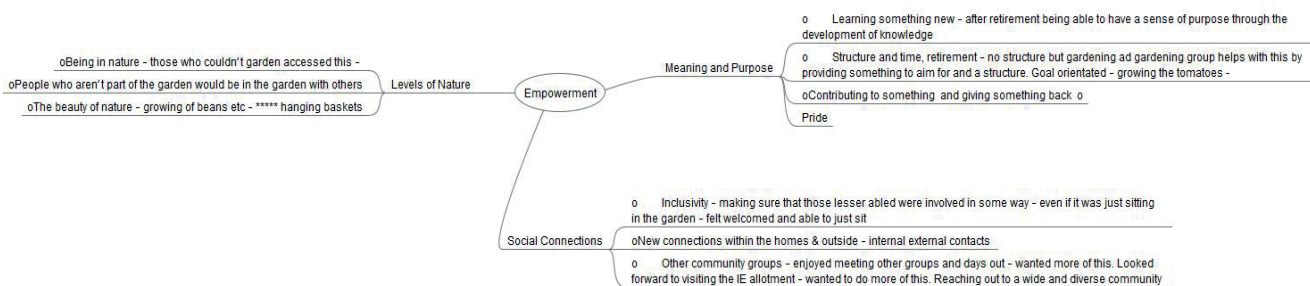


Figure 5 - Mind Map of the Thematic Analysis

"She actually looked at why the peas ... the tomatoes weren't growing, didn't you? So, she said they needed feeding, so she went and found that knowledge and information herself, so that was good, that was really, really good." (FG4)

"I was quite pleased with my little self." (FG4)

"I've always been interested in gardening, but I was never confident enough to grow vegetables, so I thought I might actually learn something." (FG2)

The way in which G&G provided the participants with a sense of meaning and purpose, permeated throughout the focus groups and included those who were less able to physically participate in the gardening due to mobility. The following excerpt, highlights how the new-found knowledge enabled the participants to contribute to the gardening:

"So I've just been very, very nervous and apprehensive about flower beds and digging. So, I can't really contribute to this part of the ..." (FG4)

... no, but you can give us your knowledge, can't you?" (FG4)

As well filling their spare time, participants appeared to be influenced by the motivation to garden with others – thus providing a purposeful activity and structure to their day. The following quote from Focus Group 4 highlights this:

"it stops you rotting away at home, more or less like a cabbage" (FG4)

Equally, the sense of pride in their achievements was evident across all groups and illustrated through the way in which the participants enthusiastically described what they had grown and the resultant sense of achievement felt by the individual;

"It's the sense of achievement of how you do something, you see growing." (FG2)

Participants in Focus Group 4 discussed how they valued being able to 'give back' to their local communities by sharing their growing as well as their passion with other members of the community

"Plus we're giving something back"
 "Yeah, we are, yeah"
 "And we are being ... you feel as though you are being of some value"
 "To the community"
 "Yeah" (FG4)

This sentiment was echoed in other Focus Groups and was described as being a satisfying feeling that they would likely not have achieved otherwise.

"And it's very satisfying when you actually get to pick a vegetable that you've grown from seed".
 "It is being it, yeah".
 "And pass it on to the kitchen, it feels good don't it *****"
 (FG2)

The Focus Groups provided rich detail about how participants felt motivated and confident which engendered a sense of meaning and purpose. The motivation was also reflected in the participants' eagerness to continue the gardening group once the G&G programme had formally completed.

4.2 Levels of Nature: Getting Outside

The way in which the participants were exposed to and engaged with the levels of nature varied. For example, most participants helped to sow seeds, pot out plants and take an active and purposive activity within the group. Others, such as, those who may not have wanted to join the G&G group, observed from a distance and simply enjoyed viewing the garden and being in nature. Hence a key theme to emerge from the analysis suggested that the G&G programme enabled a range of people to engage with nature through gardening. For example, those residents who typically do not access the garden were influenced by the G&G group to go outside and experience the garden. This meant that the people external to the G&G group experienced the beauty of nature, equally, those in the G&G group appreciated nurturing the plants and, importantly, valued being able to 'get outside'. 'Getting Outside' appeared to attract some health benefits. The following extract from Focus Group 2 illustrate this point:

"Nice getting outside in the fresh air" (FG2)

"Yes because we're outside. And I think if you can sit outside you can build up you know, I can forget me pain type of thing you know?" (FG2)

For others, being part of the G&G programme influenced the participants to take part in gardening both as part of the programme but also once at home, which suggests that the skills learned through the G&G project were being transferred to other settings and contexts. The following conversation taken from Focus Group 2 demonstrates how the G&G project influenced the ongoing gardening:

"It encourages you to do gardening at home, if you've got a garden, and that keeps you more active.... Well that's great that you can actually, if you've got an hour or two at home, you can actually do some gardening."
 "Gardening now, as I wouldn't have done it before."
 "An hour spent in the garden is better than any other activity for your physique."
 "It keeps you mentally active as well." (FG2)

Experiencing the beauty of the garden and the range of colours displayed through the flowers and plants inspired some of the participants – and some were surprised by the colours produced by beans and other plants such as tomatoes:

“Colours when we go us in our garden and, ‘cause it’s a beautiful garden we have, we have lovely tables and chairs out and everything. Umbrellas, and they want to see flowers now. They like their tomatoes, you know what I mean, up the wall and things like that, but in the boxes, they want lovely flowers, that’s what they want to see down there”. (FG3)

“Lots of beans and tomatoes the walls were full of tomatoes, the small one’s cherry tomatoes, they were beautiful yeah and the potatoes, we had three bags of potatoes and all”. (FG3)

Generally, the participants felt a sense of satisfaction through gardening which also equated with a sense of achievement having participated in the growth and support and nurturing of plants.

“Satisfying to pick a vegetable that you have grown from seed. It’s the sense of achievement of how you do something, you see growing. Cause even those who couldn’t take part, couldn’t do it physically”. (FG2)

The findings indicate that participants accessed nature as part of the G&G through being *‘in nature’* as well as *‘active participation’*. This active rather than passive approach resulted in benefits such as improved social activity and influenced others to *‘get outside’* to experience the garden in more passive approaches.

4.3 Social Connections

The ways in which participants positively communicated and connected with each other through their membership of the G&G Project was evident across the data. The community-based groups (n=2) had enabled people to enjoy new connections outside of the home whilst the residentially-based groups (n=2) enabled those connections with others to be made inside of the home. In the words of one participant, the G&G activities:

“Can bring you together”. (FG 1)

The importance of social connection is that it helps to ameliorate loneliness and isolation (Pettigrew and Roberts, 2008). This was clearly articulated as a benefit of the G&G project by one participant who said *‘[its] getting you out meeting new people’*(FG4) and another participant took this point further by illuminating the value of friendship:

“It’s just nice, it’s just to be able to be with friends”. (FG 3)

There was a strong sense of camaraderie and fun:

“It’s really lovely and we never stop, we never stop laughing here, it’s the truth.” (FG 3)

“Here we go, we can start laughing now over nothing you know. We enjoy it here; it’s beautiful where we live”. (FG3)

This camaraderie involved core members of each group, but it was also extended to others. For example, in a residential setting, the ways in which residents who were lesser able were still included even if it was just sitting in the garden. The data also illustrated the benefit of the G&G project in terms of enabling participants to meet people who attended similar TH projects across Salford.

“You know just like what we’re going to be doing next week and like we had the trip to Harlow Carr and things like that. So, to communicate with other groups doing the same things.” (FG 2)

Therefore, the connectivity with other people was not limited to the participants’ own G&G group, and participants were keen to have more days out and visit the Incredible Education allotment. Another sub-theme that illuminated the importance of social connections centred on the benefits of embedding activities which are intergenerational as participants enjoyed events where school children visited their G&G projects.

4.4 Empowerment

Empowerment emerged as the core category across the three themes. The way in which the G&G project helped facilitate both learning and application of new skills, influenced the way in which the participants were then able to adjust their own daily habits. Equally, the importance of the facilitator/leader in both the initial set up but also of the continued support and direction encouraged the development of cohesion and over a period of time, the groups have started to develop their own sense of belonging, with many groups now taking on the facilitator role. The sense of achievement encouraged the empowered older people to engage with others using both their knowledge of gardening and also being able to illustrate this through the garden and vegetation grown within it. Empowering older people through a facilitated programme such as G&G provided a conduit for people to meet, listen, learn, exchange ideas and then transfer the knowledge to others. The sense of achievement and satisfaction as a result was reflected in all the Focus Group conversations. Subsequently, the newly empowered participants became cognisant of new purpose to their daily lives which provided some meaning to activities. The transference of knowledge was evident across all the focus groups and extended to external community groups which they met up with to visit the RHS gardens and converse further about gardening.

5. Discussion



The UK and global literature reports an alarming increase in the numbers of people who are living longer. The global demographic trends point towards greater numbers of older people with complex long-term health and social care needs and an increase in the numbers of older people suffering from Dementing illnesses requiring full time care and support (UN, 2002). Many older people now find themselves faced with living for longer, but in isolation due to loss of spouse and family mobility. Significantly social isolation can result in damaging health consequences equivalent to smoking 15 cigarettes per day (Holt 2010). These real-world issues faced by UK and global authorities present a significant threat to health and social care service provision. There is a need to develop alternative methods to support people as they become older to stay fit and active. The G&G project provides one such approach to engaging with older people and promoting physical activity whilst reducing social isolation. Moreover, it is acknowledged that therapeutic horticulture and activities such as gardening can improve physical wellbeing (Shanahan et al 2016). For older people, it is reported by Masuya et al. (2014) horticultural activities can help reduce depression and improve life satisfaction. Within the context of the G&G project, a number of influences were noted to have helped empower the older people.

5.1 Value of Nature

The value of nature as a method to help improve health and wellbeing has been recognised more widely. In particular, the recent 25-year environment plan published by DEFRA highlights the need for communities and individuals to engage with nature more frequently. Keeping active through physical exercise such as gardening is attributed as one of the key approaches to supporting individual and community wellbeing with public health strategies now focusing on Start Well, Live Well and Age Well, there is a pressing need to ensure that the older population are supported in being active. Gardening and access to nature therefore play a significant part in this as evidence suggests that open-air recreation in particular has demonstrated positive wellbeing effects. This is because it provides scope for activity, relaxation and the formation of social relationships, and as such is thought to play a significant role in people's lives (Macnaghten and Urry, 2000).

A number of studies have explored the impact of green spaces on specific population groups; for example, a focus has generally been placed on the effects of green space on young people and older adults, women or people in socially deprived areas. Maas et al (2006) undertook a self-administered survey and identified that the amount of green space was positively associated with perceived levels of general health amongst lower socioeconomic groups, younger and older adults, in the Netherlands. Similar findings were reported by Lee et al (2008) whose observational study comparing

the socioeconomic status of 2672 women in the USA revealed that greater access to green spaces benefited women of low income. It is suggested by Payne (2011) that social exclusion has a negative impact on mental wellbeing, and for the G&G group, the opportunity to be involved in a group, actively promoted the inclusion of those and others. This suggests that mental wellbeing could have been enhanced, particularly as those who participated felt a sense of achievement. Moreover, Howarth et al (2016) report that therapeutic horticulture, similar to that used in the G&G programme, can help to combat social isolation.

5.2 Viable Solutions

Nature based interventions, particularly those provided with the Nature, Health and Wellbeing sector are being increasingly recognised as viable solutions to promote health and wellbeing. The salutogenic approach (that is, one which focuses on promoting health and wellbeing rather than that which is concerned with factors that cause disease) promoted through social prescribing provides a realistic opportunity for communities to use an asset-based approach to empower older people to manage their own care and promote independence. Equally, an asset-based community approach can help minimise the effect of social isolation as individuals become more engaged with nature and local activities. Pathways, parks and more structured approaches such as G&G all have a central role in the promotion of health and wellbeing. The G&G project is just one example which illustrates the way in which nature can be used to empower older people to become engaged and active.

The importance of being engaged with one's community cannot be underestimated as '*community togetherness*' offers a great deal in terms of benefits on micro (for the individual) and meso (community) levels. This

togetherness is positively enhanced in green spaces, particularly when situated in urban environments (Morris, 2003). In later life, this togetherness can enhance wellbeing by reducing social isolation, enabling relationships, increased physical, mental and spiritual health, as well as promoting a sense of self-efficacy by being able to contribute to one's community. If older people are considered to be a more vulnerable group, then projects such as G&G, have added value by engaging vulnerable individuals and boosting their resilience by providing the opportunity for individuals to make social connections in their communities (Sempik et al, 2014). In turn, this boosts the cohesive of communities to widening the inclusion of people who still have much to offer. These findings also reflect the results reported by Seebohm et al (2013) on the impact of self-help groups on mental wellbeing, knowledge and confidence. Seebohm (2013) suggests that those participating in self-help groups experience a sense of peer-reciprocity that can help improve social isolation and build self-esteem.

5.3 Conclusion

This evaluation research has highlighted the positive benefits that therapeutic horticulture embedded within a structured G&G programme can have on older person's wellbeing. The G&G programme empowered individuals to connect, thus reducing social isolation. Significantly the G&G participants helped develop areas in nature that influenced other non-participants to '*get outside*'. Arguably, therefore the impact of the G&G project permeated beyond the participants and influenced others to take part in nature. Using therapeutic horticulture within the G&G project illustrates that nature is still a force to be reckoned with and can be used as a positive ally to support the increasing older person population to be empowered and age well with nature.



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