

Cultivating Well-Being

Therapeutic Farming in Australia



**with West Winds Community Centre and
Neighbourhood House and Five Bob Farm**

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Executive Summary

Therapeutic farming (more commonly referred to as care farming) is the therapeutic use of farming practices to provide health, social or educational care services for a range of vulnerable people including those with mental health conditions. Care is bespoke and provides purposeful and meaningful work, social connection and interaction alongside the benefits of being outdoors and experiencing nature. Care farming is well established across Europe, the UK and the US. It has been slower to develop in Australia.

This report documents the findings from an exploration of therapeutic/care farming in Australia conducted in September and October 2024. It was undertaken to support the award of a grant by the Tasmanian Department of Health to a partnership between West Winds Community Centre and Neighbourhood House and Five Bob Farm in Southern Tasmania. The partnership aims to establish a feasibility study and implementation plan for a therapeutic farming pilot program(s) for people with mental health challenges at Five Bob Farm. Against a backdrop of the international experience of care farming and the evidence base, this report draws on an investigation of 24 Australia care farming initiatives to determine what lessons can be learnt to inform developments in Tasmania. It profiles 15 initiatives and describes their origin stories, the history of their development, current operations and funding, the challenges faced along the way and any vision initiatives offer for their future sustainability.

The research found that:

- **Care farming is a growing social movement** adopted by many countries which can reduce pressures on health and social care systems. Each country – across Europe, UK, Ireland, US, Japan, South Korea, Canada - has adopted its own model. However, the Netherlands with over 1300 care farms, is recognised as the home of modern care farming and the gold standard in terms of successful implementation and research into its benefits and outcomes. Typically farms partner with care organisations to provide structured programs for a range of vulnerable people commonly financed by the growth of personal budgets¹¹. Many countries have been able to garner political support and acceptance and a supportive infrastructure of government funding, peak bodies, registration and accreditation systems.
- **Internationally care farming is a well-recognised adjunct to overloaded mental health care systems.** Farms can offer a non-clinical environment reflecting normal life and providing opportunities for social interaction, skills development and meaningful work. They provide an alternative to the standard mental health options which are often struggling to meet demand and they can operate across the mental health care spectrum from primary care to tertiary settings. They improve the lives of people with low level depression and anxiety through to acute mental health service delivery in a natural environment and can operate alongside a variety of treatment plans.
- **There is a growing evidence base which supports the efficacy and positive outcomes of nature-based interventions** and the practical aspects of designing and implementing

¹¹ Personal or individual budgets for purchasing health and social care are increasingly common in high income countries. They are intended to offer more choice, control and flexibility to service users in meeting their needs when compared with agency-directed care.

programs. Research studies have demonstrated how care farms can improve mental health outcomes and wellbeing across all population groups and including those with mental health conditions. However, it is difficult to identify underlying theories, processes and causal mechanisms to understand why programs work or how best to replicate them. This limited understanding is constraining the ability to safely implement and integrate programs in Australia into a tiered mental health service system as part of the tool kit of interventions available. Potential funders face challenges in identifying evidence of effectiveness to inform investment decisions. More research is required to explore the key characteristics of care farming and nature-based interventions and causal links.

- Despite a handful of well-established and resourced therapeutic farming initiatives, **Australian care farms currently have a low profile**. However, a number of factors have recently increased interest in establishing nature-based interventions, including care farming, for a variety of health and social care needs. These factors include post-Covid demand on mental health and other services, a growing interest in the role of the natural environment in healing and happiness, an expansion in the evidence base and an increase in self-managed personal care budgets in the NDIS and aged care sector promoting choice and control about the way resources are managed.
- The research combined information from the evidence base for green care initiatives and international experience in operating care farms with Australian profiles of care farm initiatives to identify what can be learnt about **the key ingredients of a working care farm and how to overcome challenges along the way**. In summary:
 - Care farms operate in a variety of environments from urban market gardens and city farms to hobby farms, residential therapeutic communities on rural properties and commercial farms. They do not have to be fully fledged farms but they do need to support some horticultural activity and possibly animal husbandry, farm activities and land management accessed through structured day programs.
 - Although there are a handful of well-established farms with secure funding, it is a sector which is dominated by passionate individuals, working in silos with a pattern of emergence, development, activity and in some cases cessation when the founder exits or resources dry up. While a number often begin as sole traders, many upscale to not-for-profit charitable organisations. There are also those who operate as for-profit limited companies.
 - Participants may be segregated according to care needs or represent a mix of vulnerable groups. These might include adults and children with intellectual disability, substance use, neurodiversity, anxiety, depression and complex mental illness and dementia. Farms may be working with young people at risk, offenders, refugees and veterans. Some care farms promote diversity so that a wide range of people can connect and learn from each other.
 - A key ingredient is meaningful and purposeful work which develops a sense of ownership and responsibility amongst participants and is promoted through structured routines and schedules. Programs promote consistency in participation, skill development and the benefits of social connection. There is a need to carefully manage the delicate balance between working on a farm and exploitation where participants are providing free labour.
 - Getting the size right and the number of participants is crucial to operations with smaller being equated with being able to promote the relational and accessibility

aspects of programs. This can be especially important for those with mental health conditions.

- Care farms are often dependent on partnerships between the farmer, local community, health, social care and education providers. The farm provides work and a natural environment whilst the care agencies recruit participants and provide care and support. As complex multifunctional organisations care farms require coordination and good leadership, preferably via a paid coordinator to manage what can be a range of projects and programs.
- A key challenge is getting the right staff. Although the input of passionate volunteers is welcomed, trained professional staff are required to promote the therapeutic aspect of the work. This is especially true in the animal-assisted therapy sector.
- Entrepreneurial farmers are seen as key to expansion in this sector and resident farmers identify rewards in terms of job satisfaction and connection with and contribution to the local community. This can also counter the high rates of mental ill health commonly found in the farming community.
- In the absence of any substantial government funding for care farming, farms need and aim to diversity their resourcing using a variety of funding sources. These include federal health care budgets for specific programs, local government for infrastructure projects, philanthropic organisations, NDIS and personal budgets, farming activities and profits from the sale of produce and social enterprises, membership fees and donations, bequests and fundraising.
- There has been minimal evaluative work in this area to measure impact and outcomes. This gap needs to be addressed in order to fuel investment decisions from potential funders.
- Care farms vision for the future is to continue to improve outcomes for participants and to achieve self-sufficiency. This was to be achieved in a variety of ways: by becoming more commercial, adding additional grant funded programs, expanding memberships and fee for service operations and developing a broader range of partnerships.

Care farming in Australia currently operates in an organisational and structural void. In order to grow it needs to legitimise, establish professional credibility and better define where it sits in the health and community service systems. As international experience suggests, what is required is networks of practitioners, a peak body, best practice standards, accreditation and training. This is a push which is currently happening across Green Care and nature-based interventions with the establishment of Outdoor Health Australia. Initiatives from the Tasmanian Government are contributing to this push by both funding the establishment of pilot programs as well as their evaluation.

1. Introduction

West Winds Community Centre and Neighbourhood House in Southern Tasmania has been awarded funding by The Tasmanian Department of Health (Mental Health, Alcohol and Drug Directorate) to support Cultivating Well-Being: A Therapeutic Farming Pilot. The project entails conducting a feasibility study and developing an implementation plan for a therapeutic farming pilot program(s). The program(s) will provide mental health support in a rural community which is integrated into the Tasmanian mental health service system.

The work is being conducted in partnership with Five Bob Farm in Southern Tasmania. The Farm is currently both a commercial enterprise and a hub for social engagement. This includes hosting musical, artistic and educational initiatives and events, mentorship in horticultural skills and sponsoring a community garden. The project will utilise existing synergies and the resources of a working farm and natural environment to cultivate a holistic model for mental health therapy rooted in nature, community and sustainable agriculture.

To inform the work and as a backdrop to the feasibility study Cultivating Well-Being undertook an exploration of therapeutic farming initiatives across Australia. This involved:

- Investigating the therapeutic farming field in the mental health sector in Australia and globally;
- Identifying therapeutic farming initiatives across Australia and particularly those working with people with mental health issues;
- Examining the origins, development, structure and sustainability of current therapeutic farming models and the risks and obstacles they face;
- Determining the lessons which can be learnt to inform the development of a pilot program(s) in Southern Tasmania.

The exploration was carried out during September, October 2024. It proceeded via an internet search to synthesise existing published research, policy, practice and evaluative literature and to locate and profile Australian care farms. Subsequently, therapeutic farms were contacted and key informants invited to partake in a telephone interview detailing their history, model and vision for the future.

This report relates the untold story of Australian therapeutic/care farming and contextualises it within the international experience. It summarises the evidence from both research and the lived experience of operating therapeutic/care farms and identifies lessons for new initiatives in this field.

2. What is Therapeutic Farming

Therapeutic Farming, also known as Care Farming or Social Farming, has been defined as ‘the therapeutic use of farming practices to provide health, social or educational care services for one or a range of vulnerable groups of people’ (Care Farming UK). Commercial farms and agricultural landscapes are used as a base for promoting mental and physical health (Welsh Government Report) where the whole farm or part of the farm is used to provide supervised, structured programs of farming-related activities for people with a defined need to improve the health and wellbeing of a range of disadvantaged groups (Else et al 2014).

The terms care/therapeutic farming and social farms are often used interchangeably. However, in care/therapeutic farms the focus is on healing and is goal orientated. In social farms the goal is still there but less structured with a focus on the more social aspects, making connections and avoiding social isolation. For the purposes of this report the terms care and therapeutic will be used interchangeably.

Therapeutic farming stands at the crossroads between agricultural activity, healthcare and social care working with a range of vulnerable and marginalised groups. Participants, often referred to as co-farmers, might include people with dementia, and adults and children with intellectual disability, substance use, neurodiversity, depression, anxiety and complex mental illness. Farms may also be working with disaffected young people, offenders, those with long term health conditions and work-related stress, refugees and veterans. It is very diverse and can operate in a wide range of environments ranging from urban market gardens to rural hobby farms and commercial agricultural units. At its most comprehensive a care farm can be a large, residential multimillion dollar business where farm life is part of individually managed residential therapeutic programs for people with intellectual disability, drug and alcohol addiction or psychiatric patients.

Care is bespoke and person-centred. What makes it unique is meaningful occupation that has real purpose and makes a valuable contribution to the running of the farm. Brewer (2022) has summarised the three key elements of therapeutic farming as:

- Purposeful and meaningful work
- Social interaction
- Being outdoors

Involvement in farm activities has a therapeutic purpose and provides opportunities to be largely outdoors. Among other activities it can include horticultural therapy² and therapeutic horticulture³, gardening, livestock farming and animal care, conservation and land management, wood and metal work and construction.

Care farming is a growing movement which is well established in the US, UK and across Europe but which has been slower to develop in Australia. It is seen as one manifestation of Green Care or Outdoor Health which promotes both passive and interactive connection with natural environments led by accredited practitioners (Else et al 2014). It includes all evidence-informed nature-based health interventions; Therapeutic Horticulture, Horticulture Therapy, Forest Therapy, Bush Adventure Therapy, Ecotherapy, animal-assisted therapies and Aboriginal On-Country Programs.

3. Therapeutic Farming and Mental Health

The healing power of nature has been exploited since medieval times when monasteries took in people in need to work in the fields and gardens and promote their recovery both mentally and physically. From the 1800s, asylum and TB patients benefited from hospital gardens offering physical and mental rehabilitation. 'Breathing the air' or 'going to the countryside' have long provided a

² Horticultural Therapy is goal focused and used by trained therapists in health settings with a defined treatment plan – horticultural therapists, social workers, occupational therapists, nurses.

³ Therapeutic Horticulture is less structured and about relating to plants and gardening activity to improve wellbeing and quality of life. Settings might include supported residential units, day centre programs, schools, prisons, vocational training and aged care.

platform for healing activities and programs providing structured experiences with nature which have demonstrated a beneficial impact on a diverse range of communities (Marsh et al 2023). More recent decades however have seen mental health services moving indoors into clinical environments and drifting away from nature-based interventions.

Approaching half (43%) of the Australia adult population report a mental health disorder in their lifetime and one in five in the previous 12 months. Over 60% of these disorders emerge by 25 years with 16-24 years reporting the highest incidence of mental health challenges. These often remain unaddressed with current service delivery often not acceptable to younger cohorts (Flies et al 2024). During and post Covid there has been a marked increase in the prevalence of mental health problems and reports of services being overwhelmed by demand. This is leading to a search for alternatives to the standard mental health options; GPs, psychologists, psychiatrists, telehealth, crisis support lines, social workers and medication (Files et al 2024). There are concerns that people with complex mental illness are being failed by services. This has resulted in a situation where they are commonly dependent on a range of medications and are struggling to access the support they need. This is leading to increased rates of unscheduled care and a lower life expectancy and quality of life (Coventry et al 2021).

Internationally, care farming has been a well-recognised adjunct to overloaded mental health care systems alongside increasing interest in the use of social prescribing, psychological therapies and a variety of nature based and mind body interventions to improve health (Pretty & Barton 2020). Care farms have proven especially beneficial for people living with mental health challenges (Elsey et al 2014). They can be widely accessible to people in their own communities and can be implemented alongside a variety of treatment plans as additions to current traditional health and social care models which are struggling to meet demand (Masterton et al 2020).

Farms offer a non-clinical home-like environment that reflects normal life and provides opportunities for social interaction, skills-development and meaningful work. Work provides a sense of purpose and structure. Physical work promotes wellness and gives the feeling of real accomplishment. On a farm people with mental health challenges are given choices and develop a sense of ownership and responsibility for the tasks they do. There is a recognition that everyone's contribution matters to the wider care farm community. (Everard 2020). This allows them to learn about themselves, their capabilities and to develop self-confidence. Working together requires collaboration, prioritisation and organisation and fosters social relationships. They are safe places where people can practice being part of a community, in a space where they are not judged, but are accepted and respected. Participants are made to feel they belong, that what they do is valued and that they are accepted for themselves (Brewer 2022).

Farms can operate across the mental health spectrum from primary care to tertiary settings. They can improve the wellbeing of people with low levels of depression and anxiety through to acute mental health service delivery in a non-clinical farm environment. Internationally, working with people with complex mental health usually involves a partnership with a mental health support provider(s) and with the farming business separated from the care component.

4. The Evidence Base

This review did not conduct a thorough analysis of the evidence base for therapeutic farming. Rather, it summarises key evidence about the efficacy and outcomes of nature-based interventions together with the limitations of the current evidence base. It pays particular attention to any

information about the practical aspects of designing and implementing interventions which might be of use to those involved in establishing new initiatives and programs.

The therapeutic benefits of natural settings and nature-based therapies are increasingly the subject of research and evaluation. The past three decades have seen a burgeoning interest internationally in the association between nature, health and wellbeing of both individuals and communities (Briggs et al 2022). This research base has grown exponentially during and post Covid (Knowles et al 2024) and includes more rigorous scientific evidence of the benefits of outdoor therapies accompanied by a growing practice literature for practitioners who want to take their work outdoors. This runs parallel to a search for investment in community and place-based solutions to address the post-pandemic surge in demand for mental health support (Coventry et al 2021).

What is the existing evidence base for outdoor therapies and research protocols to determine the acceptability, efficacy and efficiency of therapies and programs? Studies often demonstrate positive outcomes but rarely identify underlying theories, processes and causal mechanisms to understand why programs work or how best to replicate them (Flies et al 2024, Masterton et al 2020). It requires an examination of causal factors like the duration of programs, type of activities, the characteristics of the farm and farmer, the number and diversity of participants and any other interventions which may be running in parallel. There are likely to be complex and multiple pathways connecting nature-based interventions to good mental health and wellbeing which makes it hard to unpick mechanistic drivers of clinical outcomes. Causal factors and dosage are becoming an area of active action research (Briggs 2023).

This limited understanding of the efficacy of interventions is constraining the ability to safely implement and integrate them into a tiered mental health service system as part of the tool kit of interventions available (Elsey et al 2014) or as the target of social prescribing schemes (Briggs et al 2023). Numerous initiatives by not-for-profits require evaluation to understand how environmental therapies can be better integrated into mental health services. Approaches remain under-publicised among health care professionals and service users (Catissi et al 2024) and potential funders face challenges in identifying evidence of effectiveness to inform investment decisions (Elsey et al 2014).

Internationally, outcomes for care farms have been well researched and accepted by governments and health providers (Brewer 2022). Much of this evidence base originates in the Netherlands and is comprised of qualitative, observational, cross-sectional before and after studies across a range of client groups (Elsey 2014). Generally, studies to date have used a variety of methodologies - observational studies, surveys and focus groups in quasi-experimental designs or mixed method approaches. Some have used objective physiological and wellbeing assessments and examined the longitudinal impacts of different therapies. But observed outcomes are weakened by study design and biases (Harper et al 2021) and studies have been criticised for the poor quality of evidence and risk of bias, small sample sizes and unsuited comparison groups. Randomised Controlled Trials (RCTs), considered to be the gold standard of evaluation, could help remove existing barriers to the greater integration of outdoor therapies across the continuum of mental health. However, RCTs can prove challenging with vulnerable groups due to the ethical and practical obstacles involved in designing studies (Flies 2024). The complexity and multifaceted nature of care farms means they do not lend themselves easily to RCT study design (Elsey 2014).

A review of published and grey literature in 2020 synthesised international evidence for greenspace interventions for mental health in both clinical and non-clinical settings (Masterton et al 2020). The review examined the contexts and mechanisms of greenspace programs which lead to outcomes in mental health and produced data useful to third sector organisations developing and delivering

interventions. It allowed the development of program theories to better understand the intervention process itself by exploring what works for who in what circumstances. It assessed the practical implications for designing mental health interventions and how to optimise, tailor and implement existing interventions. The data synthesis demonstrated that the key elements of any program which produce the best outcomes are:

- the interaction of nature (the ability to escape, having space to reflect) 10
- individual changes (physical activity, self-efficacy and having a purpose)
- social changes (relationships with the facilitator and shared experiences)

The review concluded that any effective intervention requires voluntary participation, adequate opportunities for development in both individual and social skills and a multi-disciplinary team with professionals working collaboratively in the delivery of an integrated approach. What does not work is any coercion around participation and under-qualified staffing.

The review matched the findings from other studies suggesting people benefit from being part of a community, the relationship with the farmer, meaningful activity, work opportunities and being in a non-care context which normalises everyday life (Elsey et al 2014). Other quality of life benefits listed by numerous studies include promoting wellbeing in personal growth, autonomy, purpose, self-confidence, self-acceptance, self-esteem and resilience (Flies 2024). Improvements in physical health, reduced symptomology for depression, anxiety, stress as well as increasing employability and social skills are also noted (Symes et al 2023 and Elsey et al 2014). In addition, the impact on life satisfaction has been demonstrated to lead to reduced public service use and reduced costs to health systems.

A 2008 study described the experiences of 42 participants with a psychiatric or addiction history working on care farms in the Netherlands (Elings & Hassink 2008). It demonstrated that they had gained mentally and physically through an appreciation of the social aspects, belonging to a group, feeling at ease, the informality, the space and involvement in a useful activity. Although they got involved in order to have a way of spending the day and without having concrete expectations, the atmosphere of mutual respect and acceptance where they could be themselves, rather than judged on their problems, and be part of a social group had promoted their self-esteem. They gained in confidence and self-respect and a sense of responsibility. This was creating the foundations for new activities including volunteering elsewhere or a working life.

Attentional restoration theory (or ART), first proposed in 1989, explores the restorative quality of natural environments by claiming that urban environments suffer from an excess of bottom-up stimulation which captures our attention and induces cognitive fatigue. Green environments, on the other hand, simultaneously elicit feelings of pleasure while reducing demands on executive-based cognition, providing a sense of escaping the demands of daily life. The same effects can be achieved by watching films or photographs of natural scenes or in man-made structures like monasteries, museums and art galleries which all promote psychological restoration. A critical review of the evidence found that mental health benefits are associated with the restorative properties of natural environments (Pearson & Craig 2014). Even just passive perception of natural scenes, for example viewing gardens, elicits mental health benefits (Symes et al 2023). However, these restorative properties are poorly represented by the existing evidence base.

A systematic review and meta-analysis carried out in 2021 addressed the need for funders to have information about the optimal way to deliver programs, their format and the dosage (Coventry et al 2021). The review showed that nature-based interventions improved mental health outcomes and

wellbeing across all population groups including those with mental health conditions as well as healthy adults. It concluded that nature-based interventions were efficacious both as a therapeutic response to manage pre-existing mental health problems and as a preventative approach to keeping people well. Although there was less evidence about impact on physical health, the review also identified that interventions delivered in groups rather than individually were associated with the most consistent effect across all forms of intervention.

An evidence map ⁴ was compiled in 2024 targeting elderly people (Catissi et al 2024). It aimed to showcase nature-based interventions to improve health and wellbeing via a critical analysis of systematic reviews and clinical trials over the past decade. The interventions explored included forest bathing, hiking, therapeutic gardens, virtual reality and forest sounds. The mapping concluded that there were physical benefits, for example reducing blood pressure, improvements in the immune system and management of chronic pain. There were also improvements in mental health through reducing stress, anxiety and depression, improvements in interpersonal relationships and restoration of attention and memory. The evidence map provided some costings and demonstrated the positive impact on public finances of nature-based interventions.

A 2023 narrative review of evidence to date to identify and evaluate the benefits of nature-based interventions conducted a systematic literature search of studies examining therapeutic horticulture, care farming, and green exercise (Harrison et al 2023). The review identified clear benefits for economic, environmental, health and social outcomes including cost savings, nutrition and diet diversity, food security, mental health improvements, physical activity and health. These benefits are stronger when they are embedded in community and neighbourhood.

The benefits of care farming are not just limited to program participants; care farming has been linked to benefits for host farmers (Brewer 2022). These have been well-researched internationally as:

- Promoting a sense of purpose and pride in the farm
- Enjoyment in hosting, improved social connection and reduced loneliness
- Exploring new income streams
- Diversifying farming practice and changing existing farming methods to more ecologically sustainable and ethical practice
- Promoting new ideas
- Forging supportive links with the local community, support agencies and establishing effective collaborative partnerships
- Building additional infrastructure
- Encouraging conversation about succession planning

Having people on the farm to experience farm life can promote a move to 'slow farming' or moving away from technology, machines and chemicals to more organic, carbon friendly farming with participants having time to weed by hand, churn compost, grow plants and recycle stones and building materials. An important factor in the success of small care farms is the attitude of the farmer and entrepreneurial farms and passionate farming families are seen as key to continued innovation in this area (Hassink 2016).

⁴ An evidence map is a systematic search of a field to identify what is known about the topic, its nature and characteristics, gaps in knowledge and future research needs

In order to support the development of care farming in the mental health sector more research is required to explore the active ingredients of nature-based interventions so we know which interventions are responsible for which observed results (Harrison et al 2023).

What are the properties of environments that make them more or less restorative and what form of interaction with them is most likely to lead to mental health and wellbeing benefits (Pearson & Craig 2014)? This requires evaluation of experimental controlled studies and the dosage (structure, duration, length and frequency of programs and the contact with nature that they facilitate). Research should also measure the longer-term impacts of programs, as well as short-term benefits during and immediately post participating in a program.

The process characteristics of any intervention have practical implications in terms of scaling up delivery so that it fits with existing mental health service provider delivery models (Coventry et al 2021). This will help stakeholders (policy makers, funders and health organisations) guide discussions about investment and decision making about treatment (Catissi et al 2024).

There is also a need to promote a consensus among researchers about appropriate instruments in order to get higher quality evidence in the future. Future studies should use validated psychometric assessment tools and physiological measures as well as self-reported questionnaires and observational data to capture the full picture.

Standardised measures of outcomes should be developed to support comparisons of intervention effectiveness (Harrison et al 2023). More studies with clinical samples and an increase in the involvement of participants in the design and delivery of interventions would be a valuable addition to the evidence base. Studies should also take into account and describe any side effects or harm including reasons for withdrawal from programs as well as cost effectiveness (Flies et al 2024)

5. International Experience

Care farming is a growing social movement adopted by many countries and providing benefits for a wide range of people. It represents a system with shared beliefs, identity and boundaries which can provide community-based initiatives and options for those with defined needs and reduce pressures on health and social care systems (Pretty & Barton 2020). This has led to legitimising care farming and reinforcing political support for its development across the world (Hassink et al 2014)

Care farming is now present in Japan, South Korea, Canada, the UK, US and across Europe with numbers continuing to grow. Each country has adopted its own model. For example, in the Netherlands (with over 1,300 farms) a care farm is often a farmer and his family partnering with a care organisation(s). In Germany (with 160 farms) and Belgium (with 300 farms) care farming is closely linked to health care provision and operated by care organisations, not necessarily by a farmer. France has over 900 farms and Italy 675. Care farming is also prevalent in Norway. England is similar to the Dutch model and has 230 care farms. In the US care farms are known as therapeutic farm communities. They combine the care farm model with the therapeutic communities approach offering recovery-orientated programs for people with complex mental illness like schizophrenia, bipolar disorder and depression.

In 2019 a Churchill Fellowship explored the origins and development of care farming in the Netherlands, the UK and in Ireland (Brewer 2022). Much of this section is taken from the subsequent Churchill Fellowship report.

5.1 The Netherlands

The Netherlands is seen as the home of modern care farming and the gold standard in terms of successful implementation and of research into the benefits and outcomes. Here pioneers in the 1980s recognised the benefits of combining agriculture and care inspired by the teaching of Steiner and anthroposophy (Elings & Hassink 2008). Fostered by government support it has evolved into a self-sustaining industry.

A study in 2014 looked at the evolution of care farming in the Netherlands and the key turning points in the emergence and early growth of this new sector (Hassink et al 2014). The background was the increase in size and efficiency of European farming during the 1970s and 1980s combined with a contraction in the labour required alongside increasing environmental problems. This resulted in a poor image for agricultural practices and growing pressure to focus on the environment, organic farming and multi-functional agriculture including farming which also offered health and social services to a variety of different populations. Health professionals and organisations began to approach farmers asking them to offer services to people with mental illness and intellectual disability, to children and the elderly, to drug users and the long term unemployed. Farms began to offer day care programs, assisted workplaces and residential and respite facilities.

The numbers of care farms began to increase, slowly and erratically at first but with a period of more rapid growth during the 1990s. By 2010 there were over 1,000 catering for 10,000 people. There was a growth in independent or private family care farms making subcontracting arrangements with care institutions and using the personal budgets of clients as a major income stream. The majority offered day care to people with learning difficulties. Smaller numbers worked with people with mental health issues.

As the numbers of care farms increased so did the challenges in bridging the gap between agriculture, health and social care sectors to create sustainable financial structures and develop legitimacy, standards and a professional workforce whilst routing out unethical practice. Collaboration between individual farms began informally and developed gradually. A coalition between the National Farmers Organisation and a Christian organisation (the Steiner movement) to advocate for political support resulted in three-year funding from the Ministry for Agriculture and Health, Welfare and Sports to establish the National Support Centre for Agriculture and Care in 1999. The Centre aimed to promote and support care farms, develop a quality system and act as an information exchange about existing initiatives. The Centre maintained a registration system and an accreditation process for care farms, developed a website and national database, a handbook and tax exemptions for individual farmers. When, after three years, the funding ceased the Centre took on financial responsibility for a new national organisation through a membership structure and established the Federation of Agriculture and Care. Increasingly, individual membership evolved into regional geographic groupings or local co-operatives paying membership fees and performing administrative tasks for its local membership. By 2020, 920 of the 1,300 registered care farms belonged to the Federation.

It is a diverse sector where primary motivations have either come from a background in farming or the health care sector or are a hybrid of both. Increasing numbers of former care sector professionals are buying and starting care farms. All are based on a relationship with the health and social care sector which levers skills, assets and goodwill from the agricultural sector. Much of the growth and which population groups are involved has been determined by changes in the care regime and the

expansion of personal budgets. But although some farms specialise, most cater for a number of different cohorts. Half the population in the Netherlands now have links to this sector through agrotourism, farm shops, farm camping, animal assisted therapy, nature and landscape management. There is high demand and long waiting lists for many care farms.

Brewer (2022) gave two examples:

- **Stichting Zorgboerderij Klein Essen** works with a diverse range of groups. With a daily attendance of 20-30 they work with people with intellectual disability, physical disability and chronic illness, psychological disability, ABI, visual impairment, dementia, those on probation, and those with addiction issues. Through a number of permanent supervisors, volunteers and interns the Farm caters for those looking for more meaningful day time activity, working with others, developing social skills and more structure in their lives. Activities include caring for animals, working in the gardens and greenhouse, wood and metal working, light production and packing work, processing fire wood and planks as well as the maintenance of buildings and grounds and working in the kitchen. Participants are also involved in conducting tours for visiting groups. The farm community are all involved in a daily morning tea and shared lunch. The farm is funded through service fees and personal budgets as well as contracts with local care organisations.
- **Farms Care Farm** started in 2002 as a care farm working with animals. In 2012 there was an opportunity to refurbish the living areas and create space for overnight care for boys from age 12 with autism, ADHD and intellectual disability. The care farm now supervises 10 'auxiliary farmers' and a number of volunteers per day through structured programs and in partnership with care organisations. Programs focus on caring for animals, maintenance of a flower and vegetable garden, carpentry and maintenance work, a bicycle workshop and a canteen. Funding is from personal budgets and contracts with care organisations. They also provide training for special education students to become auxiliary farmers.

5.2 United Kingdom

Care farming has developed differently in the United Kingdom (Brewer 2022). Being in the countryside is an intrinsic part of English cultural history and, with the right to roam and a high level of access to rural land, there has been a proliferation of green care initiatives. As part of this growth there are now 200 city and school farms, over 1,000 community gardens and growing farm gate businesses. In addition, in 2021 the peak body for care farms – Social Farms and Gardens (SFG) - estimated that there were over 230 care farms and sites in various stages of development. They are largely geared to a specific cohort, most commonly people with learning difficulties or people with mental health conditions. But they also provide services for people with dementia, addictions, children excluded from school, and veterans with PTSD.

Over ninety percent provide non-residential services with an average of 11 users per day attending once or twice a week. They deliver structured therapeutic rehabilitation, care or specialist educational programs on a regular basis. The average farm will be working with up to four different referral agencies from the health, social care or education sectors but they also take direct referrals from families.

Most commonly farms are either charities or companies limited by guarantee. Up to half are owner occupiers and a further third rent the land. Payment for places comes from a variety of sources. Funding is mainly fee for service through personal budgets with charging depending on session length, user need and whether it's an individual or group program. Two-thirds of care farms also

access grant or charity funding, donations and forty five percent are involved in fund-raising activities.

The growth of care farms has faced challenges to its sustainability. Without consistent government support and policy many initiatives have come and gone. To address this the Growing Care Farming project funded by the Department of Education and managed by Natural England was established and ran from 2019 to 2022. It aimed to transform the scale of the care farming sector across England and to create more opportunities for those with a defined need to benefit from the programs being delivered. Together with SFG, Growing Care provided centralised support and resources and regional engagement programs. SFG now manages a range of resources and training for current and potential farms and manages the Green Care Quality Mark program of quality assurance. This is a minimum standard or set of guidelines to meet the requirements of commissioners, referral agencies and those using the services. A number of initiatives are now working to better secure the future of care farming in the UK by ensuring care farming is integrated into relevant government policies in agriculture, health and social sectors.

The UK has also made considerable investment in social prescribing – linking those with mental health issues to specifically designed, structured and facilitated nature-based interventions delivered in the community (Coventry et al 2021). Recent research (Hayward et al 2024) demonstrates how prescribing activities in nature to tackle mental ill health has benefited thousands. Seven green prescribing pilots were established in 2020 with over £5 million of government funding, 8,000 participants and a comprehensive evaluation. GPs, mental health teams and social workers refer into the programs which provide a range of nature-based interventions including walking, gardening, tree planting and wild swimming. Evaluation has demonstrated significant increases in happiness and feeling life is worthwhile alongside falls in anxiety and depression. It has also demonstrated cost savings with a green prescription costing £500 as compared with 10 sessions of CBT costing at £1,000.

5.3 Ireland

In Ireland the term social rather than care farming is used and aligned to the social culture of farming in Ireland through small community-based family farms. A surge of interest in social farming alongside access to personal budgets and significant funding from the Department of Agriculture, Food and the Marine led to the establishment of Social Farming Ireland (SFI). SFI is now supporting the development of care farming on existing farms, a national network and social farming development officer posts providing ongoing support and mentoring. SFI also provides administrative support, recruits, vets and trains staff and conducts health and safety training. A National Coordination Committee links all the key players, which include the academic and research community.

There are now over 150 regional social farms delivering support with about 5,000 placement days and over 2000 participants. Common practice is similar to elsewhere with visits by small groups of co-farmers one or two days per week for programs lasting at least 10 weeks. The key beneficial elements, beyond contact with nature, are considered to be relational alongside a recognition of the importance of the qualities of the farmer. These are considered to be kindness, empathy, an interest in people, a willingness to open up and change and a calm, relaxing presence driven by a strong community orientation and wanting to contribute (Brewer 2022).

One example given by Brewer (2022) is Sli Eile in County Cork (which translates from Irish meaning ‘another way’). This social farm was founded in 2004 by a parent frustrated by a lack of alternative recovery services to a psychiatric hospital bed for an adult child. Sli Eile has been operating for

twenty years from a manor house on a 50-acre organic farm. It offers residential care with an 18-month stay linked to a personal recovery program, vocational training, social housing and a pathway back to community life. Two social enterprises – a traditional bakery and organic farm – ease participants or ‘tenants’ into the demands of a working life and the satisfactions of meaningful occupation. There are counsellors, social workers and a psychologist on site but tenants keep in contact with their own off-site psychiatrists or mental health team while in residence. Sli Eile assists with access to mainstream housing and allows tenants to maintain an ongoing connection to the farm once they have left.

6. The Australian Experience

In spite of the proliferation of care farms internationally, therapeutic farming has been slower to develop in Australia and currently has a low profile. As Brewer (2022) identified, Australia, despite some outstanding individual programs, has few proponents or success stories and it is not often currently seen as a viable diversification of agriculture. Growth in this sector has faced a number of challenges:

- The nature of agriculture and large-scale commercial farming - whereas the target group for the development of care farms is small scale farmers looking beyond production to multifunctional agriculture 16
- Biosecurity issues, hygiene and disease prevention discouraging farm visitors
- Animal activists leading to a culture of locking down farms and controlling access
- A big divide between urban and rural lifestyles and cultures
- Concerns about risk and issues about securing insurance
- Tensions between therapeutic farms and government about increasing access to rivers and forests
- Little quantitative evidence in Australian medical research and practice of the benefits of a reduction in the use of medical-model-based therapeutic approaches
- A lack of funding to establish initiatives and coordinate supportive networks.

There are also concerns that the word farming may be misleading in the Australian context and this has led to preconceived ideas and missed opportunities. It is assumed that farms are big and involve cows, sheep and other animals. This is despite the fact that much of the activity on existing care farms is horticultural and sited on hobby farms or reclaimed land.

Nevertheless, although the sector is embryonic, the attached profiles identify examples of well-established and sustainable therapeutic farming initiatives in Australia ranging from large scale residential projects to smaller family-run businesses diversifying into social farming alongside primary production. Indeed, there are now a number of factors currently present in Australia which have underpinned the growth of successful therapeutic farming elsewhere (Brewer 2022). These include:

- growing interest from consumers in the benefits of nature, in food production and in regenerative agricultural practices, environmental protection and rewilding in the face of climate change. Farmers markets, farm shops and farm produce cafes have expanded.

- tree changers with the ability to now work from remote regions with access to the internet have moved to regional areas to invest in small acreages suitable for social farming.
- post pandemic re-evaluation of lifestyles and an improved understanding of the role of nature, social connection and the environment in healing and happiness. 17
- a mental health crisis overwhelming health care systems which is changing the way we think about recovery.
- the introduction of self-managed personal care budgets through the NDIS and aged care promoting choice and control and changing the way resources are managed. Personal budgets have been key in underpinning the financial sustainability of care farming in Europe.
- an increasing interest in nature, social or green prescribing linking those with mental health issues to specifically designed, structured and facilitated nature-based non-clinical interventions delivered in the community (Coventry et al 2021).

A major limiting factor to expansion in Australia is the absence of a peak body; an entity which has been crucial to the growth of care farming internationally. There is a lack of a common definitions which means the language is not necessarily consistent with international practice and knowledge. There is no manual about how to establish a care farm and few connections to other practitioners. Some of the activity is seen as recreational rather than therapeutic. It is a sector dominated by passionate individuals working in silos with a pattern of emergence, development, activity and cessation when the founder exits or the money runs out (Reed 2015).

6.1 Current therapeutic farming models

The starting point for this exploration was a database of 34 initiatives collated from the internet. Further investigation revealed that out of the 34 projects identified, 9 no longer existed and/or had no web presence and an additional farm working with Aboriginal at-risk youth was taking a break and not currently delivering a service. This left 24 initiatives who were contacted during September and October 2024.

Although the aim was to focus on those working specifically with people with mental health issues, it was not necessarily possible to clearly identify them from the information available. In many cases this was because farms were working with diverse groups of vulnerable people where those with both anxiety and depression as well as complex mental illness formed part of their participant cohort. Eight initiatives identified as having a particular focus on those with mental health issues. A number of other farms said they were working with people experiencing social isolation, neurodiversity or generalised trauma but where there were underlying mental health conditions. An additional obstacle was terminology. Many of those contacted did not call themselves a care or therapeutic farm and as they said 'it is not a term we use to promote ourselves'.

Given this picture of difficult to classify multifunctional care farming and diverse cohorts the reviewer made a decision to approach all of the 24 initiatives remaining on the list in order to fill the gaps in the information available from websites. This led to identifying key informants (usually a founder or farmer coordinator) and telephone conversations with ten initiatives, email exchanges with a further two in response to specific questions and otherwise lifting more detailed information from what are often comprehensive websites, particularly from the larger scale care farms. This resulted in the 15 profiles attached. In addition, the work of Thera Farms has also been profiled. Thera Farms put forward a proposal for the delivery of a full mental health service in a non-clinical farm environment in Tasmania, matching the models of mental health care which exist internationally.

Eight remaining farms, although invited to participate in the review, did not respond and/or declined the invitation. The majority of these appeared to be smaller scale initiatives registered as NDIS providers and providing almost exclusively for NDIS participants. They were offering a variety of programs; farm animals, holiday and school programs, workshops and work experience as well as volunteer programs. Some were in the process of expanding to incorporate respite and supported accommodation facilities. and ran volunteer programs. Many, but not all, had been established in the past five years.

6.2 Lessons from the experiences of care farms

The 15 profiles highlight the varied origin stories of care farms, the history of their development, their current operations and funding, the challenges they have faced along the way and any vision they might nurture for their future sustainability. This data has been combined with information about the evidence-base and international experience to pinpoint what others intending to establish a care farm might learn from their history and the key ingredients of a working care farm.

Lessons from the review are:

- **The environment.** Care farms are situated in a variety of environments from urban market gardens, city farms or a converted bowling green or parkland to large residential therapeutic communities working and living together on rural properties and commercial farms. The land does not necessarily have to be a fully-fledged farm but it needs to support horticultural activity at a minimum. The majority described themselves as based on the principles of permaculture, organic and regenerative farming principles. As well as farm activity, land was being optimised for additional therapeutic and recreational opportunities; for example, walking tracks, camping, biking, bird hides, collecting fire wood to name a few. Two of those profiled are still in the development phase of moving services onto a farm and building the infrastructure required.
- **Establishment.** With histories ranging from the last five years to several decades, origin stories proliferate. A number are dominated by charismatic and entrepreneurial individuals with a key individual or a founder who may be an ex-care sector employee, trained therapist or social worker with ambitions to employ nature-based interventions on the family farm or a more recently purchased hobby farm. Or farmers seeking to diversify their business and explore what contribution they might make to the health and social care sector and their local community. A key motivator for many was having a family member or a child who required services which were currently not available or were in short supply. Overall, what is evident is the passion and commitment of founders to the care farming model and their determination to make it work.
- **Participant population.** Care farms serve a range of vulnerable groups. It is common in the European model to encourage a diversity of participation and rich interactions between different people from the community rather than segregation according to care needs. This can mean school children working alongside older people, people with disability and mental health conditions, veterans and the neurodiverse. This diversity has been echoed and proactively promoted in a number of Australian examples where a wide range of people connect and learn from each other, including those in touch with clinical mental health services.
- **Meaningful and purposeful work** is seen as the key ingredient. In the Netherlands interventions are commonly 70% work and 30% therapy with horticultural often being the main ingredient but

also animal husbandry, farm maintenance, produce sale, food preparation and cooking, training and education. The work must be real work and have an authenticity overseen by the farmer which develops a sense of ownership and responsibility among participants or co-farmers. This provides a socially valued role and often a vocational role which for many vulnerable people, and particularly those with experience of the mental health service system, has been lost. Participants come to the farm with a purpose and engage in a range of activities which contribute to farm operations. They belong to the community and develop working and social relationships with others including the farmer, other participants and volunteers.

- **Structured routines, schedules and programs** with clarity about the ingredients and what needs to be delivered rather than just turning up on the farm. This builds in the key ingredients of meaning and purpose, relationship building, a sense of belonging and community and being outdoors in nature. There are nutritional elements through preparing and sharing food as well as physical tiredness at the end of the day and a sense of real accomplishment. This can encourage consistent participation, provide clarity about its nature and moves it from being just a day program to seeking real mental health benefits outside a clinical environment. For some, the community aspect might be more important than other activities and programs should seek to maximise opportunities within practical limitations. Fluctuations in the numbers attending programs have been a challenge for some care farms and can be driven by transport, funding and access issues including care organisations unwilling to travel to support their clients.
- **Size.** For many current care farms small is seen as a positive. It enables building trust with participants in a program which might otherwise be overwhelming for those struggling with mental health conditions and trauma. A farm can provide both space whilst maintaining the relational aspects when people become comfortable to join a group. Care farms start small as they build their participant group and reputation. They may then limit any scaling up and expansion in order to keep relational and accessible.
- **Partnerships** with health and social care agencies, education providers and the local community is key to maximising the benefits. The farmer runs the farm and provides programmed meaningful activity. Care organisations provide the care and support. This is a common model in the Netherlands where the business is separated from the care component. Forming a partnership with an existing mental health community service provider who can escort their clients if required, assist with participant recruitment and provide any necessary supports is a common model. A number of care farms have also developed close connections with the local agricultural community to draw on their expertise and in some cases elicit in-kind support. They have fostered relationships with the local community and the council to embed themselves in the neighbourhood.
- **Working with clinical mental health services.** People with mental health issues differ to other target groups due to the clinical component where the medical model is risk adverse and reliant on medication and brief indoor interventions. Care farms are operating outside the medical model in a relaxed and accessible environment with support coming from meaningful activity, immersion in nature, the farm community and its staff and volunteers. A number of the care farms profiled were performing a more preventative and earlier intervention role by addressing underlying issues rather than just providing treatment. They described how those with mental health conditions are accessing both their therapeutic and volunteer programs. As the evidence base and evaluations of specific models suggests, this is beneficial in reducing the requirement

for expensive medical and clinical therapies and potentially can fill a huge gap in the mental health sector – in adult day care, supported workplaces and residential services (Hassink et al 2020). However, it also suggests the need to establish a new mental health outcomes framework with holistic outcome measures of social progress and behavioural success rather than clinical outcomes.

- **Exploitation.** Care farming is young in Australia and in the current absence of an accreditation and good practice framework presents a risk of exploitation of vulnerable people if they are to be involved in working the land and growing and selling crops. Care farms reported volunteer schemes springing up locally where people are paying to be on the farm and are being overworked whilst the farm acquires free labour. The recent review of NDIS service providers to eliminate rogue providers illustrates the risk. The boundaries need to be very clear if care farms are to be seen as a community service and to operate ethically. 20
- **Staffing.** The care farms profiled reported increasing professionalisation through their history as they met the challenges of working with staff ‘who had skills and no passion or passion and no skills or qualifications’. Getting the right staff was a key challenge and, particularly those using animal-assisted therapies, were keen to state that staff should be therapists first and animal-assisted therapists second. They also valued training in mental health awareness and trauma-informed interventions. In the absence of manualised programs, two of the care farms profiled, were developing their own training modules particularly in the equine and animal-assisted therapy sector. Volunteers are often an important part of any care farm both as Board members and helping with administrative tasks as well as contributing to farm operations. Once participants have completed a specific program, they may have the option of becoming a volunteer and continuing to bring their carers with them. Some informants viewed engagement in this informal network as more successful in fostering longer-term engagement and its benefits than specific formal programs.
- **The role of the farmer.** Entrepreneurial farmers are seen as key to expansion with a number of care farms initiated by second generation farmers on the family farm. Resident farmers commented on the way in which operating a care farm had provided rewards and job satisfaction in terms of increasing their sense of connection with the local community and ability to contribute to meeting local social and health needs. This is significant given the high rates of mental ill health which have long been recognised in the farming community.
- **Co-ordination and Governance.** Care farms are complex multifunctional organisations which require coordination. Several described how their development had been determined by the availability of different pots of money and grant funding to run particular programs and projects rather than a strategic plan and business model. This had been accompanied by a slow move from being volunteer-run to having a management committee and paid staff. This had led to a lot of blue sky thinking about activities, programs leading staff in different directions and unstable staff teams only employed for the duration of particular programs. This lack of coordination had led to a chaotic picture reinforced by the difficulties in attracting funding to cover core processes like administration, bookkeeping or recruiting volunteers. Those profiled had learnt from experience that a complex care farm requires organisational sustainability, good leadership and paid coordination from the farmer or a coordinator to push developments and to manage change.

- **Legal status.** Many of those profiled were operating as not for profit charitable organisations.
- **Funding and sustainability.** The care farms profiled wanted to ensure their work was self-sustainable. The reliance on one source of funding and were keen to establish a revenue model using proceeds from the farm and diversification programs. Setting up programs, however, all described their financial sustainability as an ongoing concern. In the operation of food care programs, funding and requiring a careful balance between the programs to offer and the ability to sustain them. 2.1 Funding sources in Australia include:
 - **Insurance:** Those profiled described initial complications in setting up appropriate insurance and required good relationships with insurers. This was especially prevalent in the equine therapy sector. Professionals working on site have professional indemnity insurance. If farms upscale and green prescribing would soon become a reality allowing GPs to refer into care farm programs through medicalising contact with nature. This is now a big source of funding for care farms in the UK.
 - **Evaluation:** Beyond participant feedback, few care farms had any independent evaluation of their programs to tailor interventions, empirically measure change, attract funders and enable the replication of successful models elsewhere. Community care partners in the mental health field already have evaluative methods to have been the specific in its available to fund. These few farms that had received a comprehensive positive evaluation had been able to push for additional resourcing to expand funding for direct applications were welcome. Although with had experienced partnership, despite the additional grant funding in key situations where the program was well and it became difficult to operate more systematically or strategically to look specifically at how any program might become a part of a recovery package alongside the care received from psychologists and psychiatrists. How sessions delivered in clinic might compare with those delivered on the farm would be especially valuable. Informants considered that a key part of any evaluative process must take into account the lived experience of participants in order to impact on service design and outcomes.

- Philanthropic organisations. The review identified some long-term partnerships between care farms and philanthropic organisations which had allowed the establishment and development of particular models.
- NDIS and personal budgets is the main funding pipeline for many care farms supporting farm operations and a range of placement options to meet individual needs, interests and aspirations. The availability of personal budgets has provided the financial backbone for the development of care farming in Europe. NDIS funded participants will often require significant and supervised care which may open up options for alternative care strategies. However, moving to the NDIS model and becoming a registered provider, is also time-consuming and bureaucratic in terms of paperwork and may reduce the funding available to create sustainable community-driven infrastructure as required by a care farm or to allow wider access to the community seeking therapeutic interventions but without a diagnosis. A number of farms in the review, although unregistered, had been working with NDIS participants. Some had contemplated becoming registered providers but held back because of concerns about the way in which registration then constrained the way in which the farm might operate. This is particularly the case as the NDIS landscape shifts; for example, with the recent exclusion of wilderness and some animal-assisted therapies from the provider list. Reliance on NDIS funding is also becoming harder as costs increase but NDIS fees do not.
- Farming activities and social enterprises. Care farms may be selling produce and distributing vegetable boxes, operating cafes, farm shops and farmers markets with profits ploughed back into the operations of the farm. 22
- Fee for service. Membership fees (for example for leasing a plot), and fee for service for educational options and workshops are a strong income stream for many care farms and may include entry fees for recreational visits and family fun days. Some farms were running sponsorship programs for individual participants and/or for animals or for local corporate partners. Income was also raised through venue hire, professional development programs and corporate team away-day facilitation
- Donations, bequests and fundraising.

Key informants were asked how they envisaged the future of their care farm. Some were considering possibilities for retirement and succession but did not see that as likely in the near future. For the majority it was about hoping to break even, removing reliance on grant funding and becoming self-sufficient. They saw this as achievable by becoming more commercial, adding additional programs as funding became available, expanding membership and fee for service operations and developing partnerships with schools, health organisations and corporate groups. It could also entail changing their legal status from sole trader or incorporated for profit to not-for-profit status and the possibilities of philanthropic funding and fundraising. Two hoped to acquire a long-term partnership with a philanthropic organisation.

However, although some had considered growing larger or opening up to the public as a way forward, the majority hoped to stay small, relational and for those with a positive comprehensive evaluation of their model, making themselves replicable in other communities rather than expanding their current operation. This was fostering investment in developing tool kits, manuals and training modules to promote the model.

6.3 The Future of Care Farming in Australia

Care farming currently operates in an organisational and structural void with a disputed terminology. Anyone can set up a care farm with no stipulations as to qualifications or safe working practices. In order to grow, the sector needs to legitimise and establish professional credibility. Programs require goals, treatment plans and measurable outcomes to gain legitimacy and acceptance about where care farming sits in the health and community service systems.

As international experience demonstrates, in order to expand and increase their profile some kind of network of practitioners is essential. Brewer (2022) suggested that a network could be established under the auspices of a farming organisation or university to create a national forum. This would require an initial government supported and coordinated program acting as a catalyst to bring all the main parties together. Following the Netherlands model, it has been suggested that an Office for Care Farming be established in the Federal Department of Agriculture, Fisheries and Forestry for a minimum of three years to kickstart the adoption of care farming and transition to a membership model. The Office would assist in raising awareness and legitimising the sector as well as supporting best practice governance and compliance procedures, accreditation, training and recruitment. It would clarify what activities can take place to meet NDIS and aged care package requirements and create a template for meeting Australian laws and conditions.

These are issues faced by nature-based interventions across the board. Outdoor Health Australia (OHA) has recently been established as a peak national body for those with an interest in supporting, developing and expanding the outdoor health sector. It marks a move towards professional recognition for nature-based therapies providing support in the areas of research and evidence, practice and quality, policy and advocacy for nature-based therapies (Knowles et al 2024). OHA have recently run a national consultation on a draft set of ethical principles and standards which will be tested cross culturally at two international roundtables. These will be applicable across the diversity of initiatives whether they are a farm, converted urban land or community plots. They are also developing an accreditation framework for what is a diverse array of green care initiatives across the sector, but including care farming. Currently volunteer-run, OHA has received a small grant from the Victorian Government to help transition to a company limited by guarantee.

Tasmania's Centre for Mental Health Innovation is currently undertaking a Green Care review which includes a systematic analysis of five Green Care modalities, including therapeutic farming. Together with the work of OHA, and this current Department of Health grants program, it is hoped this will lead to the development of policy and practice recommendations for the Tasmanian Government in the green care and especially the therapeutic farming sector.

Profiles



1. A Taste of Paradise Organic Farm, New South Wales

The farm of 100 acres was purchased 26 years ago by the founder and his wife to make a difference in the lives of young people in out-of-home care. With a background in farm management, permaculture, horticulture and working with challenging children, the founders' goal was to mentor at risk young people in a farm environment. At the time of purchase, it was barren ground and they have since planted over 15,000 trees on the property. There is now a rain forest and a timber forest on site. For the first ten years it was all volunteer run by the farmer and free for young people. When their savings ran out, a fee for service was introduced. In 2011 the Taste of Paradise charity was formed with a Board of Directors and is run from the farm paying a small rental to the farm owners. The charity operates a mentoring program and work experience for disadvantaged youth using the platform of organic production and animal management to learn about trust and responsibility.

Most participants now are NDIS funded and looking for a program where they can connect with others. They are also referred in by child welfare agencies and individual families. Participants include children and young people aged 5 to 18 years with ADHD, ABIs, learning difficulties, physical disability, behavioural issues and mental health issues, including schizophrenia. Ten part time staff or 'mentors' operate a day program for three hours once a week. An average week would see up to 13 participants engaged in activities which are individually tailored in terms of activities and length. Some participants have been involved for up to nine years. The program incorporates assisted animal therapy, one-on-one mentoring and horticultural training and aims to improve social skills, foster trusting relationships, self-esteem and confidence, a sense of achievement and pride as well as practical workplace experience for future employment. As the informant pointed out, there is no judgement involved in participation. This is significant for young people who are constantly being judged at home, at school and in their community. Forming trusting relationships with the animals – chickens, horses, dogs, goats – assists in this process.

Mentors come from diverse backgrounds and experience including youth work, social work and counsellors. Volunteers run administrative functions, marketing and training as well as grant writing. They also contribute to working bees, open mornings and fundraising efforts.

Fee for service has been complimented by grants for specific farm infrastructure projects and equipment. They have also received donations and any income from the sale of produce is channelled back into the farm and the charity.

Although mentors produce quarterly reports, there has been no evaluation of the program beyond NDIS requirements.

When asked about the challenges the farm and charity faced, the informant identified fluctuations in the participant group numbers due to not being able to access funding or moving interstate. This meant that the program varied from having a waiting list to having trained mentors and vacancies but few participants. They also commented on the difficulties in being able to do more preventative work given that the majority of participants were aged 14 or 15. Mentors would prefer referrals at a younger age when earlier intervention would be more productive.

When asked about the vision for the future, the founding farmer is looking towards retirement. They are exploring the potential for mentors to assume responsibility for the operations of the farm and the charity.

2. Barefoot Therapists, Victoria

Barefoot Therapists offers a multidisciplinary team of qualified and registered therapists to children, teenagers and their families on the Mornington Peninsula. It represents the vision of the founder, Sarah, who grew up in England with horses and trained as an OT to work with adults and children with mental health, developmental and learning disabilities. With an interest in sustainable land management and horticulture she purchased a small boutique five-acre farm in Boneo and trained to include animals in her healthcare practice.

She has two children, one with Downs Syndrome and both with autism and ADHD. Initially, in 2012, she set up in private practice to give her the flexibility to attend her children's appointments. As time went on and she acquired a pony she realised the extent to which her clients were benefiting from being outside with animals and working on the land. It also provided job satisfaction for the therapists which she employed helping with the challenges of recruitment and retention. The farm located to a bigger 20-acre site three years ago and is still in the process of development.

Barefoot Therapists aims to offer effective clinical therapy with a non-clinical feel through indoor, outdoor and vocational style programs delivered on the farm and at a bricks and mortar clinic in Rosebud, three minutes' drive away. The farm is eco and animal friendly with buildings and working spaces designed to utilise sun, wind and rain. It uses permaculture, mixed crop companion planting and low-tech farming practices like composting, lunar farming and water harvesting. There is an orchard, vegetable and herb gardens and animals. These include a donkey and Shetland pony, guinea pigs, cows, sheep, pigs, goats and chickens. Close to wetlands, a walking path and bird hide have been constructed.

The farm offers a range of bespoke individual and small group programs (with a ratio of one to three and the largest group being 6 participants) utilising evidence-based practices to reach personal goals. Currently they employ 25 people including OTs, speech pathologists, psychologists, a dietitian, a teacher and animal and equine assisted therapists. There is a dedicated mental health team, parent and teen coaching, an eating service working with eating disorders and a home modifications and equipment service. The site offers opportunities for bike riding, walking and sport. Termly packages are offered for a number of programs which include:

- Farmers in Practice – supporting people to work and learn on the farm as well as offering an individual experience. This includes working with and caring for farm animals, learning how to grow produce and nurturing the land
- Work experience for older teens alongside capacity building
- SHEEP Program (Supportive, Helpful, Educational and Engagement Program) for secondary school children to improve engagement and attendance. Working in small groups the program helps to build a sense of mastery and practical opportunities to build confidence
- Animal and equine assisted therapy programs together with professional development for allied health professionals and teachers, coaching and clinical supervision
- Parent and carer programs offering individual sessions and courses on managing emotional regulation, meditation, developing strategies, equine assisted program and increasing school attendance

- Well Vet Therapy Initiative. Established to respond to the high suicide rate amongst vets, this supports improvements in emotional wellbeing and staying healthy among local vets.
- Art therapy including therapeutic nature play 27
- Ad hoc workshops for the local community. This is in response to the explosion of hobby farming locally and perceived widespread poor husbandry. For example, workshops might address how to trim goat hoofs or what species can be kept together.

The farm shop is run by children who are accessing the farm and includes harvesting and preserving farm produce. Any profits are ploughed back into activities the children are keen to see made available on site.

They do not use volunteers on a regular basis and have concerns about exploitation. If they do work with volunteers, it is about upskilling them rather than assistance with running the farm.

Currently Barefoot Therapists operates as a for-profit limited company with the clinical practice outsourcing to the farm and renting a space there. Although they have explored becoming a not for profit they currently break even and are working towards being fully self-sufficient. They operate on a fee for service basis and are registered for NDIS, Medicare and Better Access to Mental Health with referrals from GPs, paediatricians, allied health, schools, the NDIS coordinator, community referrals and self-referral. Charities and not for profits have provided funding packages for eligible clients but as a for profit they are unable to engage in fundraising. The farm itself is supported by 'a huge mortgage'.

Sarah pointed to a number of challenges during the development of Barefoot Therapists. As well as finance and coordinating activities amongst a diverse group of practitioners, these included:

- ***The need to agree terminology*** particularly around the term 'therapist'. The lack of agreement about what a therapist is is currently letting down the animal-assisted therapy, horticultural and farming sectors. The term care farming might conjure up 'rows of people with mental health problems putting seeds in the ground'. Barefoot Therapists has always maintained that you need to be a qualified therapist first and an animal-assisted or horticultural therapist second. So, although the word therapeutic can apply to farms populated by beautiful, skilled and well-meaning people, if the aim is to run something the NDIS can access, therapists require formal qualifications and to be using manualised programs which can be replicated by others with similar qualifications.
- ***Evaluation***. Barefoot Therapists has not had any independent evaluation of its programs although it has been exhorted by the academic community to research comparisons between sessions in the clinic with sessions on the farm. However, if in the animal and farming sector there is no agreement about who is a therapist, who is a supporter and what a wellbeing program is and how it operates, then any research or evaluation will not be robust. Funding for research through universities and tertiary level services would allow for comprehensive independent evaluation.

Currently there is no regulatory body to join everyone together or a website providing information to those operating care farms. Everyone is working in silos with little consistency making it hard to call it care farming or therapeutic farming. Advances have been made in some areas with the establishment of Animal Therapies Ltd, a not for profit, tackling issues about standardisation, how to recruit participants and best practice.

In terms of a vision for the future Sarah commented that although she would like to retire that is not looking likely in the near future. She hopes they continue to break even and keep going but this is becoming harder as costs increase whilst NDIS funding remains the same. So, although they could open up the farm with holiday makers wandering through and make a fortune, that is not how they vision the future. It is about maintaining the high standards and avoiding unethical and unsafe practice, working more efficiently, keeping staff happy and maintaining the good reputation they have acquired in the community, including sustaining positive outcomes for participants. Expansion is not part of the plan but rather adding additional programs to maintain revenue.

3. Careship Coorong, South Australia

Careship Coorong was established in 2011 by a Dutch woman, Claudia, with experience of care farming in the Netherlands. It is sited 160 kilometres south east of Adelaide or a two-hour drive. The catalyst was her father who developed dementia. Searching for a form of support or care for him which was outdoors, Claudia travelled to the Netherlands in 2009 to find a care facility with gardens. Here she discovered care farms. On her return to Australia, she noted the absence of care farming and purchased a block of land on 20 acres to explore business models and options. In 2011 Careship Coorong was established by Claudia and her partner as a not-for-profit social care farm targeting adults with mental health issues, dementia (via day care programs), disability (via NDIS) and those who are socially isolated from the local community. Because they were self-funding it took some years to establish the infrastructure and they began operating social farming activities in 2015 with a grant from the Ian Potter Foundation.

They aimed to promote mental and physical health by giving people an opportunity to spend time working on the land through supervised, structured programs of farming related activity. This was seen as allowing people to regain a socially valued role in the community which they may have lost through mental health conditions or dementia whilst receiving social support in a safe and caring environment. The role played by staff is largely supervisory, monitoring safety and inclusion and the experience begins passively by allowing participants to engage with activities when it suits them.

In 2017, and alongside other farm-related activities, they set up the Escargo project. This was a working snail farm producing snails for the high-end restaurant market. It provided day support for people living with dementia and other mental health conditions. The snail farm required simple tasks and a range of hands-on activities like planting seedlings, watering, removing dead plant matter and weeding, preparing beds and working with equipment. Participants interested in cooking assisted with the purging or cleaning and processing of snails as well as the preparation of lunches for all participants. Others helped with small maintenance jobs or caring for the snails and harvesting them, preparing the pens and snail feed or just wandering around the farm.

Escargot has been providing 50 people with meaningful occupation with a daily attendance of 8-17 participants. Programming can depend on funding. They are recruited via day support programs offered by community service organisations, in particular Community Living Australia and Dementia Australia as well as community centres, GPs, community nurses and self-referrals. Groups of people also visited from the local community, coming in for the day and/or booking regular weekly group sessions depending on the funding situation. Although initially it was set up for people with

dementia, over time, they have been more successful in working with those with disability or developmental disability.

Careship Caroong has been funded and run by the founders and board of management although they would welcome being able to employ staff to look after the farm. Funding was accessed in 2021 to employ a coordinator but they found it difficult to recruit to the post in a small rural community. Much of the farm costs are covered by another business, a Waffle Stall, run by the founders but which has proved time consuming and demanding. Other funding has been received through grants from government, philanthropic trusts and corporate sponsors as well as donations. There has also been some NDIS funding from participants. They hope that a rise in green prescribing will expand the income stream and that eventually the snails will cover the costs of operating the farm.

Although there has been no formal evaluation, Careship Caroong has been written up as an anecdote-based case study with the help of Flinders University. Behavioural changes and the impact of programs have been assessed through observation by staff, volunteers and feedback from care organisations and participants. Many reported enjoying the variety of tasks, improving their skills and increasing their confidence, overall wellbeing, independence and self-respect. Both participants and referrers valued the personal involvement with the farmer, being part of a community and contributing to the environment. Careship Caroong would like to invite researchers to participate in future programs and offer a more definitive evaluation of outcomes.

Challenges with farming snails led to the recent purchase of a shipping container which is being converted into a fully controlled indoor snail farm. It is hoped this will put the farm on a more commercial basis and generate enough income to employ someone to help with the workload. The farm is now having a one-year break to consider rebranding options and revamping the business with the intention of restarting in mid-2025 in the same or different form.

Careship Caroong has built a good reputation for a form of social support new to Australia and its benefits in providing a choice about care and support. During development they identified a number of challenges and lessons:

- To ensure that the work is credible and real it must be run from a working farm by the farmer as instigator, not by a care organisation. This ensures authenticity and trust in the experience. A farmer must remember that it is not about production or the work but what the participant gets out of it.
- It is essential to have a consistent group attending in order to maximise the benefits of care farming. This has proved challenging due to transport issues and reliance on care organisations willing to travel the distance to support their clients.
- They have also battled the stigma associated with dementia and mental health issues in rural areas. This can mean that rural residents are diagnosed at a later stage than in urban areas partly due to the support available to them in the community. It means their condition is more advanced on referral and by the time of diagnosis they may be only a couple of months away from entering aged care facilities.
- Being located in a rural area has created problems with recruiting volunteers, particularly Board members. It means their involvement is often short-lived.
- It is important to plan at the outset to explore business models, operations and funding, establish a Board and get policies and procedures in place. Setting up as a charity is costly and these are tasks volunteers do not necessarily want to do.

- Stay small with one-on-one or small groups so that trust builds with participants. Larger groups can be overwhelming for those struggling with anxiety, depression and trauma. On a farm there are spaces where you can hide but still remain safe until you feel comfortable enough to join the group. This makes a care farm accessible for a diversity of participants.

In terms of a vision for the future for Careship Caroong, this will depend on the rebranding process. The key factors were identified as better networking, self-sufficiency and the employment of a coordinator to remove some of the workload from the founders.

4. Ceres City Farm, Victoria

Ceres City Farm was founded over 40 years ago on an unwanted tip site and has grown into Melbourne's largest environmental education provider with an environmental centre, community garden, urban farm and social enterprise hub spread across four locations in inner north Melbourne. There is a community environment park located on 4.5 hectares. Amongst a range of social enterprises there are two farms; a 2-acre organic farm and market garden in Coburg and a 1-acre organic farm at East Brunswick. The farms are linked by creeks and a range of opportunities to learn about and participate in regenerative urban farming practices. It is a family owned and operated not for profit company run by second generation farmers with the land leased from the city council. With over 200 employees it is 95% self-funded through various social enterprises and fee for service together with some government contracts.

The social enterprises include a range of workshops and courses offering education programs to all ages and skill levels including nature playgroups for 2-5 years, school excursions and programs, professional learning and accredited courses. There is a fortnightly Growing Together youth project promoting involvement in a community food system, a nursery and bookstore, a bike shed repairing donated bikes, a cafe and farmgate providing organic produce, fair food vegetable boxes and volunteering and membership opportunities for the community. A series of events include live music, a bird count picnic and a festival of broad beans. Fair Wood supplies farm forested and salvaged timbers to the community and manufactures decking, timber cladding, landscape and fencing, planter boxes and furniture. There is also a weed dating program for those in their 20s and 30s. They organise working bees which include organic morning teas and seasonal lunches. There is venue hire and corporate volunteering and team building.

As a Registered Training Organisation (RTO) Ceres deliver a skill set for adults as a transition between non accredited courses and entering TAFE with a focus on horticulture and permaculture and offering a range of pre-accredited courses of between 8 and 14 sessions. This includes eco system management and land restoration and aims to transition people back into employment or further training while also directing participants into volunteering opportunities.

Although they do not deliver specific programs for people with mental health issues, about 20% of course participants would be identified as having mental health challenges, predominantly anxiety and depression but also in some cases psychosis and various behavioural issues. The courses are considered to be a very positive way to reengage with the community and to make connections with tutors who are all trained in mental health awareness. The programs aim to provide industry training

but also allow participants to develop networks, build confidence, and expose them to any opportunities they might be able to take. Beyond referral there are no formal partnership with mental health support organisations and many participants are self-referred. They also work with special needs schools where learning difficulties can be mixed with mental health issues. At any one time they may have three courses running and up to 40 people participating.

In addition, many of the volunteering programs would include people with mental health challenges. They may enter a course because they have been volunteering and are guided into the adult programs. Equally they may volunteer after they have completed a course and wish to retain contact with Ceres. The farm did run a NDIS program but that ceased in 2023 because it was making a huge loss. Overall, it has been difficult to continue to run the education programs in the absence of major funders. This has meant fewer subsidised places are available on current courses.

5. Collingwood Children's Farm, Victoria

The Children's Farm was founded in 1979 on the banks of the Yarra River, five kilometres from the central Melbourne. With support from the City Council land was leased from an abandoned convent to create a working farm with the help of the local community. It is a registered not for profit aiming to offer a welcoming space where people of all ages and backgrounds, particularly those experiencing adversity, can connect with nature, animals and each other. Its primary purpose is to improve the lives of children and people who are disadvantaged, disabled, unemployed and marginalised. Here they can experience country life and get involved in animal husbandry, horticulture and farm experiences to foster connection, skill development and social inclusion. Participants can engage in a number of community programs:

- Young farmers program runs 3 weekends a month during term time and provides hands on experience for 8-16s in horticulture, land care and maintenance, animal husbandry, art projects, woodwork and assisting farmers with daily chores. This is funded by Yarra City Council and free to those meeting program requirements.
- School holiday programs including a structured and guided 'farmer for a day program', a behind the scenes tour and farm tools workshop. There is also a self-guided group option.
- Education programs which include school excursions like paddock to plate, meet and greet, and farm a better future, the market garden and compost station.
- Seeding Skills program providing hands on farm experiences for NDIS participants, their support workers and specialist schools. This included caring for animals, cleaning pens, creating bird houses to sell to the public and gardening. Staff met with support workers and organisations to understand the needs and aims of participants and ensure appropriate staff supervision.
- Volunteer program with involvement in seasonal farming activities and exposure to animals. Busy bee activities are run weekly and many volunteers are long term over a period of years.

- Corporate volunteering with day programs to build teams, develop skills, assist with fundraising activities and gardening.

The Farm is largely self-funded through hosting events and venue hire, via entry and program fees, a farm cafe and wedding bookings. Visitors total approximately 15,000 per month. These, and the work of volunteers, cover most of the operational costs. Other revenue streams include memberships, donations and sales of produce. The farm receives a small grant from the Department of Education for early years programs and through service clubs and philanthropic trusts. There is also a program for children with vision loss.

Covid and lockdowns threatened the financial stability of the farm and small fees were introduced for some of the community programs. This led to the cessation of the Seeding Skills program. To increase its financial sustainability the farm is now trying to reduce the time spent in applications for grants and increase the money raised from donations and memberships.

6. Farm It Forward, New South Wales

Farm It Forward is described as a not-for-profit social farming enterprise which connects landowners to local young people who are passionate about growing food in an urban community. Located in the Blue Mountains it was co-founded five years ago by Manu, who was working in the local food coop. She identified young people enthusiastic about growing food but not having access to any land and predominately older people or young families who had land but not the time or mobility to make it productive. Among this cohort were those who had lost their jobs during Covid, students and many diverse backgrounds including people with mental health issues. Farm It Forward was established to bring the two together, to address both social and environmental issues, to put into action the principles of regenerative agriculture and social enterprise in an urban community and to counter the social isolation which many residents were experiencing. Initially using a youth opportunity grant of \$50,000 they were able to employ young people to work the land paying them a living wage until sales of produce were able to cover costs.

Farm It Forward welcomes everyone and among the residents, growers and volunteers there are a large contingent of people with mental health problems. Many of the volunteers have chronic illness and associated mental health issues or they struggle with depression and generalised anxiety. Farm It Forward is providing support rather than treating those with more complex mental illness and staff are fully trained in mental health awareness and able to refer people to services. They have found that those participating tend to be consistent and regularly attend for long periods of time suggesting that as well as developing new skills they find their participation valuable in other ways.

Today there are five young 'growers' working 10-20 hours a week on 6 plots on privately owned land including backyards and over former lawns. All plots are initially assessed as having very low soil health. There are 6 market garden plots and two further acres under production. Growers are developing skills, training and experience in sustainable and regenerative land management. They are using non-disturbance methods for growing food with companion plantings and matured compost. They are planting perennial native and beneficial non-native flowering plants along the perimeter of each plot to provide shelter, food and habitat for birds, insects and reptiles.

In exchange for donating land for 12 months residents receive free weekly vegetable boxes, contact with the community through growers, food production activities and a range of community events and activities. All excess produce is sold locally via a farm gate system online and in person with the profits supporting growers' wages and community outreach sessions. Food production is complemented by weekly volunteer sessions where the community can come in and help with the plots and with community working bees. There are also a number of high school programs.

Auspiced by the local food coop they have just become a charity. There are three part time staff – an administrator, a bookkeeper and promotions – and a management committee who help with charity status applications. They have received some public funding to facilitate youth programs with two currently running at the local high school. They also, during the winter, offer services like designing gardens and consultations. They apply for small grants for particular projects but find that can get in the way of doing real work. They also fundraise once a year. They did consider NDIS funding but abandoned it because of the amount of paperwork involved as well as a wish to remain small and relational.

In terms of evaluation the co-founder, Manu, is undertaking a PhD investigating this model of farming and initiating action research in this area.

When asked what the challenges had been in setting up Farm It Forward, Manu identified communication. Once roles and responsibilities were clear, and a strong team with a culture of communication had developed, many problems vanished. The community had also been enormously supportive. Improving communication also applied to relationships with bureaucrats and funders in conveying messages about holistic health and raising awareness and recognition of the physical and mental health impacts of involvement with Farm it Forward.

Growing larger is not part of their vision for the future. The current scale is ideal in being able to provide meaningful, relational services. However, they have attracted much interest from elsewhere where other communities have reached out to learn how they could establish a similar model in their area. There are plans to develop a tool kit to support people to start a branch locally and they have held a number of webinars to support similar initiatives. There is now interest from Landcare Australia to develop the model further.

7. Flash Farm, Victoria

Flash Farm is a 14-acre hobby farm based on the principles of permaculture and located a 15-minute drive from Bendigo city centre. The founder, a social worker, began work on her family's farm six years ago using the family savings. She always had an ambition to start a therapy farm after her own son's experience with Aspergers and how valuable and therapeutic his relationship with the family dog had been to him. The farm was named after a pony, Flash, that the founder had ridden as a child as part of a riding school for children with cerebral palsy. As she said 'what Flash did for others, we wanted to reproduce today'. In 2023 she purchased the farm from her parents.

The Farm offers therapeutic programs to a diverse range of participants, many presenting with multiple diagnoses. Although one key focus is those with autism and ADHD there is no wrong door approach and they also work with those with mental health conditions, children and at-risk teens,

veterans, first responders and those with eating disorders. This includes working with participant families, schools and carers.

Starting with a handful of participants there are now 40 and the farm operates a waiting list for appointments outside school hours. A number of structured individual and group programs are offered which integrate traditional evidence-based therapeutic models with nature, animals and art to optimise participant engagement and improve outcomes. These include:

- Individual therapeutic support on a weekly or fortnightly basis. This is also offered as a monthly check-in to those who have completed programs
- Life and Social Skills Group for 7-17 years running over a 10-week term one day per week. This offers a hands-on experiential learning environment to develop functional life skills – cooking, hygiene, social, emotional and communication skills - using a range of animal assisted therapy and nature-based interventions. It aims to improve physical and mental health, literacy and speech
- Cultivating Skills running one day per week for 10 weeks. This is an immersive program for 16-21 years to develop transferable skills for entry into the workforce through integrating hands-on animal care, sustainable farming and agricultural practices as well as construction; for example, building fences. They work with providers and contractors on site and other industry providers like vets, the jockey club, and groundskeepers to promote potential employment opportunities. The program provides a sense of accomplishment and achievement
- Healthy Herds – a group psychoeducational program for 7-12 years with a focus on building skills to help identify and form healthy relationships and friendships. The group runs for five hours
- PAWS (psychoeducational awareness and wellbeing skills) – offering structured group therapy programs for 7-12 years to help build social and emotional skills, emotional regulation and intelligence building through animal assisted therapy. The group runs for up to one and a half hours depending on the age of the children
- Lego Mates. This aims to build social and communication skills via an evidence-based approach developed by a neuropsychologist and supported by qualified therapists working together to build lego creations. This program is valuable on a hot day or when it's raining.

Sharing food is often an important part of the programs, where sitting and eating at a table provides an opportunity to talk as well as improving nutrition.

Participants are referred through a network of community sector agencies, some mental health providers, child protection and family services, work cover and victims of crime who are able to pay for therapeutic interventions. They have had referrals from out-of-state for holiday programs. Working with children, they have learnt over the years to start with conversations with parents, carers and the child before putting anyone into a group. They have also worked with veterans through the RSL who have funded groups to access the farm to meet therapeutic needs and engage in activities which meet their interests. Many veterans are not comfortable with a group-based model and the Farm offers individually tailored programs. As the founder reported:

One guy said "I can't sit still, I need that movement and I'm not someone to sit down and talk". But if we're out there preparing a fence or working with a horse or a cow....it gave him

that barrier between the therapist and him and he felt he could talk to the dog if I asked a question rather than me. You might be digging or planting things or just sitting in the paddock watching the eagles....

In terms of staffing there is currently an OT, two casual vet nurses, three social workers (including the founder), two farm hands and a support worker with assistance from the occasional volunteer.

Financing Flash Farm can be challenging with all costs – insurance, power, animal feed – increasing. It is based on fee for service and they have increasingly been working with NDIS clients. They are currently looking to register with Medicare to do accredited mental health sessions. As the founder said:

We did work in Victoria about commissioning mental health and then NDIS came about. What we saw happening in the community in Bendigo was a lot of people having coffee. That's great but you might want to do something more meaningful and this is where nature-based and animal therapy is a nice, soft, gentle way of working with people and getting them outside. Those with complex mental illness have been so room based and as in-patients. They need to work through their story in a different environment.

The farm aims to avoid being solely reliant on one funding stream and wants to ensure diversification, particularly as the NDIS landscape shifts, and to allow access for the wider community without specific diagnoses who are seeking therapeutic interventions. In terms of farm work and infrastructure they have a lot of close connections with the local agricultural community who have assisted with veterinary issues, regeneration of paddocks, rotational strip grazing and track systems for the equines.

Flash Farm is currently operating as a sole trader but now they have a stable income source they are doing the paperwork to register as a not for profit. This will enable them to expand and open up other income streams including grants, fundraising and donations.

There has been no formal evaluation of Flash Farm. They do pre and post evaluations for participants based on feedback surveys and of course with NDIS clients they have to justify what they are doing with clients and why. Evaluation is something they are currently exploring to bring more robustness to the programs. They currently do not have the resourcing to fund an independent evaluation.

When asked what the challenges had been during their history and what lessons had been learnt, the founder noted:

- The importance of fostering community partnerships and networks to promote good working relationships, including getting the local council on board;
- Insurance and being mindful about what you are covered for, particularly working with equines.
- The weather
- Avoiding reliance on grants which come and go
- Staffing. Making sure you have competent staff who are strong therapists first and animal therapists second. As the founder said 'it is easier to teach someone to work with animals than teach an animal person to be a therapist'.

When asked what vision the founder had for the future, as well as achieving not for profit registration, it was developing training modules which work with their own values and ethics. They currently have three training modules ready for release.

8. Good Life Farm, Victoria

Good Life Farm (GLF) was established on a 6.5-acre hobby farm about an hour's drive from Melbourne. The farm is the home of the founder, Lesley, who in the early 2000s offered support to a family struggling with a young man's behaviour by engaging him in farm work and looking after the pigs and sheep. It had a big impact on his behaviour and as others heard about the farm they approached her for help. She started to take in young people with challenges for a few hours a day during term time.

In 2013 Lesley was approached by Leadership Victoria about forming a charitable not for profit and establishing a Board of Directors and constitution. Board members were predominantly appointed through the leadership network and from there GLF grew into its current form.

GLF offers an intensive one day per week life and social skill 10-week program to 7-17 years during term times and based on the principles of animal-assisted learning. It works with young people with trauma, depression and anxiety, on the autism spectrum and with attachment, engagement and social connection issues. It encompasses those with antisocial behaviour, drug and alcohol issues or experiencing grief and loss. It also works with those who might benefit from an alternative educational setting or need a break from traditional education. Eighty percent are identified as having serious mental health issues.

The staff ratio is 1:2 young people and can be tailored to individual need with one-on-one support provided, if required, due to behavioural issues. Group size is no larger than 6 to 8 participants and selected on the basis of age and individual challenges. There is one group operating per day, four days a week. The farm also runs after school sessions, respite camps, holiday programs and monthly Saturday sessions together with a 'fearless riders' program.

The farm provides a place of safety and a refuge and there are a wide range of activities for experimental learning. They include animal-based activity and education on animal husbandry, feeding, grooming and training, as well as riding. Nature and farm-based activity includes gardening, growing food, composting, worm farms, education in permaculture and sustainability as well as nutrition and preparing and cooking produce. Farm maintenance includes fencing, land management and building. In addition, the land is used recreationally for bush walking, discovering the environment, camping, collecting wood and building fires and arts and crafts using recycled and natural materials as well as practising mindfulness and positive thinking. There is a strong focus on relationships and community building and engagement. The program aims for a reconnection with the five senses, shifting attention to external surroundings and connectedness to work, strengthening a sense of belonging and self-regulation, appreciating the present whilst reducing stress.

Participants are referred in from the residential care system and child protection, from youth justice, through schools and privately through parents and not-for-profits. Partnerships with referring

agencies have developed organically through the work of the farm and many are able to cover the cost of the programs, including schools.

Funding is predominantly fee for service with the cost per term per child of \$3,180. The Board put efforts into applying for grants which are then used to support young people unable to afford the program. GLF is not a registered NDIS provider but there has been a growth in those presenting with NDIS packages. As a charity GLF also receives donations and operates a sponsorship program for both participants and animals.

The past ten years have seen big changes in staff and their qualifications. Initially everything was established on a shoe-string budget and people working on the farm were more likely to have life skills rather than formal qualifications. Today the farm has been professionalised and among the 15 staff there is a broad skill set with the programs run by a psychologist, counsellors, a mental health nurse, youth workers and community services. They bring experience in community services, in CBT, residential care, childcare, in the disability and mental health field and in working with at risk youth. The psychologist runs her own practice from the site – Day to Dream – as well as being involved four days a week in the program, inputting experience in working with dual diagnosis and operating the equine arena two days a week. The staff group also have experience in organic farm management, carpentry, horses, graphic design, zoology as well as social justice and administrative roles.

Training new staff to work in a niche area has been an issue. They arrive with qualifications but require training around the ethos of the farm, the program, working in the presence of nature and animals. Staff are also educated in trauma-informed practices and provide targeted treatment to optimise healing and develop quality relationships.

A grant acquired by a Board member has funded the installation and construction of an equine arena and enabled a formal evaluation of the Flash Farm model - integrated therapeutic care operating through animal assisted learning and spending time in the natural environment. The evaluation was conducted in 2022 over a 12-month period and is one of very few animal assisted programs to have had an independent evaluation (Faircloth & McNair 2022). It aimed to empirically measure positive change across a range of domains and overall wellbeing over an extended period and to articulate the foundational elements of the model, the program logic and program inputs as well as costs. The key findings from an examination of 55 client profiles living with a range of health, mental health and other factors found:

- Positive outcomes across multiple domains – improved mental and emotional health, improved sense of self, peer functioning, engagement with education, sensory functions, reductions in negative and damaging behaviours and developing lasting and positive attachments
- Positive change confirmed by psychometric and observational measurement tools and most marked in the first two terms of engagement with the program. This allowed many to graduate while those who continued typically had more complex needs and were more likely to be funded by NDIS. Nevertheless, they continued to experience positive change.
- Outcomes were achieved by a positive connection to a trusted adult, positive connection to animals and a positive connection and appreciation of the natural environment.

The evaluation concluded that the GLF program through early intervention and a proactive approach presents opportunities to identify and address underlying causes. It also concluded that more clarity is required about recommended participation time frames to provide greater job security for staff.

When asked about a vision for the future of Good Life Farm, the farm manager pointed to increasing the numbers of young people they were working with. They also identified establishing GLFs in other communities and replicating the model across Australia. One way of resourcing this growth would be a partnership with a philanthropic organisation.

9. Mansfield Autism Statewide Services, Victoria

Mansfield is an independent not-for-profit organisation which has been supporting young people and their families living with autism for over 50 years. They offer a wraparound model providing educational therapy services, short term intensive residential therapy and a day school. There is an in-home service and opportunities for family camps, respite care and outreach services. There are also training and employment options for adult clients. With many families emerging in crisis from Covid, they have faced an intense demand for services and up to a two-year waiting list for some of their programs.

In 2019 they transitioned to NDIS and purchased a 40-hectare farm on the outskirts of Mansfield. Here they are establishing a therapeutic care farm, a bespoke best practice centre of excellence for autistic children. Most would be in the clinical range of anxiety where this needs to be tackled and reduced before any strategies can be put in place for promoting living and academic skills and independence. This is fulfilling a dream to be able to offer time in nature and space, both of which make a big difference to people on the autism spectrum. The farm provides mountain views, undulating farm land and serenity.

The farm is currently under development. Operation Gamechanger was launched two years ago to raise \$24 million to realise developments and target funds through grants, donations and Mansfield Autism equity to undertake the capital works. The aim is to transform the land and accompanying house, barns, tennis court and paddocks to create a tranquil escape for children and teenagers with autism. When completed the farm will include:

- A day school with state-of-the-art facilities and professional development options
- School holiday programs
- Accommodation for therapeutic placements, respite and crisis care
- Twelve 3-bed disability friendly self-contained family cabins with a conference and training centre for activities supported by a commercial kitchen. This will enable families to take a holiday while being supported by staff.
- Equine facilitated learning arena, swimming pool, hard court play area, walking paths and sensory garden.

Partial funding has been granted from state and federal programs, philanthropic trusts and donations from business and community as well as bequests. It is intended that developments will be completed during 2025.

10. North Freemantle Social Farm, Western Australia

NFSF was set up with philanthropic funding in 2015 by social entrepreneur Rennee Gardiner. It aimed to be a community space to connect people, particularly those who are socially isolated, through growing and distributing locally grown, organic food and regenerative farming principles. Situated on a former bowling green leased from the City of Freemantle, it operates a market garden and community facility for events, workshops and social programs. Unlike a community garden, it provides access to farm-style infrastructure and growing methods for an urban population with undercover community spaces, two sheds, a green house, water tank and compost station. The Social Farm is operated as a social enterprise by Growing Change Pty Ltd, a registered charity and company.

The business model is based on a membership subscription system and there are three ways to get involved:

- Picking Memberships where members have a code to the gate and can pick vegetables at any time as well as having discounted and free access to workshops and the annual olive oil pick n press. There are currently 200 picking members paying from \$125-\$440 for a family per annum. There are six market garden zones each divided into 14 irrigated flat growing beds. There is currently a two-year waitlist for access to growing beds.
- Social Memberships paying \$65 per year. They have all the benefits of picking members, apart from picking vegetables, and including exclusive invitations to events and workshops.
- Volunteering opportunities requiring no previous knowledge or membership take place three days a week from 8.30-12 with inductions run on a regular basis covering site orientation, and safety. Tools and sun screen are provided. Volunteers are involved in reviving garden beds, nurturing soil, planting, tending to compost, mulching, watering and feeding worms. They also participate in morning tea and conversation and can pick vegetables to take home.

At least six workshops a year cover issues like minimizing food waste, cooking on a budget, tool maintenance, weed foraging, how to make kimchi or pesto and harvesting tips. On the first Saturday of each month a pantry store is open for chutneys, pickles, relishes, jams, honey and dried teas made with farm produce. There is also a fruit stall and organic olive oil depending on the season. There is a welcome walkthrough where visitors can wander through the farm with a guide and learn about what is available to harvest as well as cooking tips.

NFSF is run by the farmer on a permanent part-time contract working 22.5 hours three days a week to manage volunteers, to grow vegetables and coordinate workshops. It is fully self-funded through membership fees, some sponsorship money and also fundraising.

Since the early days mental health has been a big focus by making the Farm welcoming and safe for all but especially those living with a mental health condition. Staff and participants learn about mental health awareness, how to recognise the early signs of mental health problems and how to refer for additional supports. In the past, when funding was available, the Farm hosted specific wellbeing programs and horticultural workshops for those living with mental health conditions. Today the ongoing social farm programs assist in building support networks and social capital for vulnerable groups more informally by providing a place to meet and to do something meaningful. Occasionally mental health support agencies reach out to the farm with the intention of running

more formal programs for their clients. But to date nothing has got off the ground due to lack of staffing resources and/or clients willing to engage.

11. Northey Street City Farm, Queensland

The farm is located in the Northern suburbs of Brisbane, minutes from the city centre on a flood plain alongside a creek. It was established in 1994 by local residents interested in gardening and growing their own food. Its purpose was to be an inspirational working model of a community-based urban permaculture farm promoting and educating for an ecologically and socially sustainable society. One resident expressed an interest in his daughter having somewhere to interact with animals and the idea of establishing a City Farm was proposed. The local council leased some two hectares of underutilised parkland and they set up an incorporated community association.

Programs for vulnerable people at Northey have come and gone depending on grants available from both federal and state government. Initially they received state funding to undertake regeneration work along the creek and to run a green fair. This was followed by their first ongoing funding from the Federal Work for the Dole program. The funding covered the employment of two supervisors four days a week working with 12-16 participants. The program ran for a number of years and allowed the farm to build much of the current infrastructure.

When the Work for the Dole program was abolished, the farm hosted a state funded Community Jobs Program which supported the employment of a coordinator, administrative costs, materials and resources. The program engaged 14 participants for a six-month period which included working four days a week with one day undertaking training. It paid participants a higher wage than the benefit system and was run in partnership with the local TAFE offering accredited training in horticulture. The farm ran six of these programs which enabled it to build the nursery and market garden. The community jobs program ceased two years ago.

Other programs have included gardening activities for people with intellectual disability run one morning a week and funded by the local council over a seven-year period. One member of staff was allocated to the program which included cooking and eating the food produced. About eight years ago the farm also ran a group for people with mental health issues in partnership with a local care provider. Again, it was a horticultural program for about six people who arrived with one or two carers. Since the mid-2000s Northey has worked with Indigenous groups and ran a federally funded program focusing on bush foods and a Cert 2 in horticulture culminating in a bush foods festival.

Many of those from the funded programs including those with mental health issues and autism subsequently remain involved as volunteers, often with their carers. As the farmer said, the fact that the farm is a happening place with a free lunch means that a lot of vulnerable people engage informally in a program which includes all abilities and for some over a long period of time. They become an embedded presence on the farm and are 'just there'. One view is that the informal network has been more successful than the more formal programs in promoting longer term engagement.

Today Northey operates as a charity welcoming thousands of visitors every year. It is open access, unfenced and attracts a diversity of participants through:

- Membership for an annual fee of \$12-50 depending on income and offering discounted fees to events, workshops and education programs and the nursery. Allotment gardens are also available to members for a sliding scale of annual fees from \$208-416.
- Volunteer programs where volunteer teams maintain the gardens, nursery production, market garden, cooking and food processing as well as green waste recycling, animal care, construction and tool maintenance. Volunteers assist with nursery sales, events and promotions and a youth education program. Two volunteer induction sessions are held per month and there is a volunteers' handbook. 41
- Youth education via the Earth Kids Holiday Program running 9-3 for a week and a homeschool program operating during term time. There are a series of school activities as well as informal playgroups three mornings a week. Farm tutors include classroom teachers, advanced permaculture students and practitioners and experienced workshop facilitators
- Adult workshops covering practical skills – how to live sustainably, bee keeping, mushroom growing, basket weaving, seasonal vegetable gardening, constructing wicking beds and permaculture design. Professional development workshops for teachers cover school gardening and the benefits of outdoor learning. Every Saturday will see 1-3 workshops running. Fees for workshops cover the costs and make a small profit.
- Farm tours on Tuesday, free for groups of 4-8
- Social gatherings on Tuesday, Wednesday and Thursday when there are 40 to 50 people on the farm involved in various activities. There is a morning tea and shared lunch and often an educational talk after lunch on a Wednesday.
- Social enterprises. The organic farmers market every Sunday morning provides a quarter to a third of the farm's funding and covers operating costs like administration and public relations. The nursery also makes a small profit.

Currently the farm employs 12 staff (or 8 FTEs) including a full-time farmer coordinator. It is self-sufficient through membership and workshop fees while taking government funding for short term programs and infrastructure projects. They did explore registering for NDIS but decided not to go down that path.

When the farmer was asked about the obstacles Northey has encountered in their history the key challenge identified was governance as they moved from being volunteer-run to having a management committee and paid staff. As the farm developed using different pots of money and employing staff for the duration of different programs, there were few resources for covering operating and coordination costs. Applying for grants as they were announced led to involvement in a broad range of activities but with little coordination or plan and was described as 'a bit chaotic'. Fifteen years ago, they initiated a restructure and established a management structure, policies and procedures and reviewed the constitution. They now have a two-manager model – for social enterprises/events and for farming/education – which is working well. There have also been issues with staffing. As the informant said:

It's been hard to get staff and volunteers with both the skills and also the passion. You tend to get people who have the skills but no passion or volunteers without skills but lots of passion. That has been tricky and I've always thought we could be doing more, but it's hard to do.

Northey runs a three-year planning cycle but there has been no external stand-alone evaluation of the Farm. When asked about a vision for the future they wish to remain a model of living sustainably in the city with financing which does not have to rely on grant funding. The adult and youth education is now well established and there is more interfacing with Indigenous groups and joint training programs. However, there have been struggles to be commercial and to establish an income from produce sales. The nursery has only recently begun making a small profit and there are now attempts to do some urban greens growing for local restaurants. Part of the battle is dealing with contaminated soil and being on a flood plain with significant damage from flooding over the 30-year history of the farm.

12. The Cape Community Farm Victoria

The Farm was trialled in 2016 as a garden to create a productive sustainable, carbon neutral community garden to share, inspire, educate and engage people to grow their own food and to supply food charities. In 2021 a larger farm on about half an acre replaced the trial garden funded by a major investor, Brent Farms, who manufacture garden beds and run a landscaping business and nursery. The farm is more of a multidimensional project with larger scale production than the community garden. Infrastructure is still being constructed to provide a unique state of the art \$2.5 million community farm in the heart of South Gippsland. By 2025 the farm will be fully functional with large growing areas, all weather social and learning spaces, a nursery, compost hubs, beekeeping, an outdoor classroom, a residents building and a farmhouse with a kitchen.

Participation in the Farm is through:

- Memberships of \$150 per annum per household. This provides discounts on renting one of 320 wicking beds, half price produce and seedlings, priority invites to events and workshops, onsite access to farm tools and advice from the resident farmer. Memberships now stand at over 70.
- Volunteering open to all skills and ability levels via daily volunteering slots to contribute to the growth of the farm, foster social connectedness and promote farm skills. This might entail working in the nursery, weeding and mulching, harvesting, showing groups around the farm, a weekly market garden session, farm promotions and marketing.
- Monthly working bees followed by workshops
- Horticultural student placements
- Workshops – for example in natural pest management, propagation, planting, growing tomatoes, seasonal jobs, managing soil fertility, lessons from member plots, pruning fruit trees
- School visits and tours involving guided walks, sustainable land use and conservation and farmer for a day programs. Fees are \$15-\$25 per student or \$250-750 for small groups.

Volunteers also participate in specific projects which currently include greenhouse refurbishment, a produce storage system, concrete and drainage around the composting zone, drip line irrigation for

fruit trees, a potting shed and the farmhouse building. Although Cape Community Farm do not describe themselves as a care farm, they do see it as promoting wellbeing and self-evident that coming to the farm improves mental and physical health. Some volunteers attend with their support worker and there is potential for investigating more of a structured therapeutic approach in the future to engage with vulnerable groups.

The day-to-day operations of the farm and programs are run by a professional farmer/co-ordinator who reports to the Committee and oversees the nursery and landscape maintenance. Some beds are managed by the resident farmer as a commercial garden.

The farm is a not-for-profit incorporated organisation seeking to become financially independent. Funding has included major investments by directors to establish the farm – earthworks, drainage, buildings, watering and food growing systems, landscaping and fencing. Total financial support for the farm is \$3 million. The Office of Living Victoria gave \$400,000 initially for the construction of a rain water tank and associated harvesting infrastructure. Revenue is raised through produce sales, memberships, community garden bed rentals and stalls programs. Cape Community Farm is also pioneering energy efficient homes.

One lesson from operating the farm is the need to promote organisational sustainability. This means having the capacity to undertake the work that no one else wants to do or fund – the administration and bookkeeping, writing of grants and recruiting volunteers. Funders want to resource specific projects and it can be laborious to find volunteers willing to undertake administrative tasks on a regular basis. Having a major investor on board has meant being able to get on with the job without having to worry about applying for grants. This is where the vision lies, in ensuring a strong financial backbone for the work and a solid program which is well supported. In order to achieve this in the next year they are looking to partner with schools, different corporate groups and health organisations. They would like to be able to resource a full-time employee/farmer and expand the therapeutic horticultural programs, community gardening and workshops.

13. Thera Farms, Australia

Thera Farms was founded and incorporated in 2021 in Tasmania to advocate for the establishment of an Australian-first recovery-based model of mental health care offering a full continuum of mental health support options for people living with mental illness. The model combined holistic care with community living and meaningful work in a natural farm setting and including residential and transitional programs.

The founding member of Thera Farms was a Dutch mental health nurse disillusioned by the Australian mental health service system and a highly medicalised approach relying on medication, talking therapies and short-term interventions with few alternatives. In search of a more holistic approach, she moved back to the Netherlands in 2010 to work on a care farm for four years. It was a 17-bed mental health unit providing residential and outpatient programs for people with a mental illness set on a farm. Those participating in the program received all the clinical care expected from a mental health facility, the difference being that the core of day-to-day life at a care farm is meaningful work and community living. Being with animals, being outdoors and having a connection with nature has clearly demonstrated reductions in depression, anxiety stress-related symptoms.

On her return to Australia, she settled in Tasmania having recognised the State as the perfect environment for therapeutic farming. She applied for a SANE Hocking Fellowship in 2019. The Fellowship aims to advance public understanding of complex mental health issues, contribute to stigma reduction and explore innovative approaches to support those affected by complex mental health issues or improve their wellbeing. Her Fellowship aimed to research therapeutic farm communities in the US and Ireland that provide psychiatric treatment and a full continuum of care for adults living with complex mental illness and how this model could be replicated in Australia. Originally, she planned to conduct immersive research by visiting therapeutic farming communities overseas but due to Covid the research was instead conducted online.

Goulds Farm was one US example from the Hocking Fellowship research. The farm is in Massachusetts on a 700-acre farm. Established in 1913 it is the oldest therapeutic farming community supporting up to 38 guests in three residential houses with peer specialists, volunteers, staff and families. Guests participate in work and weekly individual and group therapies. It has a transitional program for guests who would like additional support while re-engaging with the community. The farm has demonstrated improved wellbeing and reduced symptoms of mental ill health, improved social functioning, an increased likelihood of finding secure paid employment alongside high treatment satisfaction rates and reduced rates of re-hospitalisation.

The proposal put forward by Thera Farms in 2021 outlined a bed-based service to provide people with the support they need to stay out of hospital. The number of beds was set at 28-30 for economies of scale and fostering a therapeutic community rather than an institution. These numbers then divide into three smaller groups of around 8 participants for talking therapies. The model requires a farm environment but not necessarily a fully-fledged farm. A hobby farm or piece of land which can support horticultural activities would suffice. It takes a mental health unit together with staff, mental health nurses, medications and psychiatrists, and plants them on a farm which offers meaningful and purposeful work rather than the 'occupation' offered in current day services. Following the Dutch model it is based on 75% work and 25% therapy. Delivering in a different environment requires changes in the philosophy of care, including relationships with participants and a changed outcomes framework.

The proposal generated considerable interest from professionals wanting to work in alternative settings, families seeking support for their members affected by mental health issues, from mental health services in both Victoria and Tasmania and from politicians. A feasibility study was designed to explore service design, need and demand as well as impact and outcomes. The aim of the study was to have the model genuinely considered as an alternative to the medical model that is currently being provided and a way of progressing the mental health reform agenda.

However, despite substantial interest in the proposal and a lot of advocacy work which fed into the mental health service reform agenda, Thera Farms was unable to secure funding to conduct a feasibility study. Thera Farms wound up in 2022.

14. Triple Care Farm, New South Wales

Mission Australia's Triple Care Farm is a youth drug and alcohol program offering withdrawal, rehabilitation and aftercare support to young people aged 16-24. Established over 40 years ago their residential rehabilitation programs operate from two sites in the Southern Highlands and in the South Coast area. The Southern Highlands site on 11 acres is an 18-bed program and supports up to 100 participants every year. About 75% have tried to commit suicide in the 12 months before being admitted. Eighty five percent suffer from some form of mental illness including schizophrenia, bipolar disorder and depression. Triple Care Farm is unique in offering a combination of both drug and alcohol rehabilitation and mental health services and helps young people make long term changes in their lives in a safe place.

The withdrawal program lasts for 2-4 weeks, followed by a holistic psychosocial residential rehabilitation program for 12 weeks based on harm minimisation and health promotion. They are expected to work on the farm, live in shared accommodation and go through several kinds of therapy classes, including art and music. It involves participation in:

- Dialectical behaviour group therapy program
- Individual counselling and case management providing assessment, treatment and intervention planning
- Education and training through an accredited literacy and numeracy program and a Cert 11 in Work Skills and Vocational Pathways. There is also access to accredited forklift licences and a Barista course. Farming and landscape skills are developed including learning to drive the on-site tractor. There are creative arts programs, including music performance and recording, painting and sculpture
- A weekend sport and recreation program with canoeing, hiking, mountain bike riding, surfing and an on-site gym
- Residential living skills, personal care, budgeting, cooking and household maintenance

On graduation from the program participants receive up to six months of aftercare to support them in the community and help them to sustain change. Referrals come from all over Australia and the farm also accepts self-referrals.

With a budget of over \$3 million per year, much of the funding for Triple Care Farm has come from a partnership with a philanthropic organisation, the Sir David Martin Foundation. Nineteen percent has come from government and additional amounts from donations.

A ten-year study by University of Wollongong of the Triple Care Farm model has demonstrated the effectiveness of Dialectical Behavioural Therapy (DBT) for young people with complex needs at the residential rehabilitation centre (Marceau et al 2021). It was also evaluated for the social and economic returns on investment with positive outcomes (Social Ventures Australia 2015).

The success of this evidence-based service model has resulted in the establishment of a further site in 2023 on 17 acres of natural bushland. This facility has been funded by the Commonwealth Department of Health.

15. Tumbelin Farm, South Australia

The Tumbelin Farm program was piloted in 2021-22 by Baptist Care SA supported by a grant from the federal government's Department of Health and a \$1.3 million co-investment from Baptist Care. It is a voluntary trauma-informed, holistic residential alcohol and drug rehabilitation program providing up to 12 months support for young people aged 16-24. Sited on an 80-acre rural property in the Mt Lofty Ranges 45-minutes' drive from Adelaide, it represents the first therapeutic rehabilitation farm for young people in South Australia. It is based on successful models operating internationally which have demonstrated that participating in the life and activity of a working farm delivers tangible results by teaching new skills, building self-esteem and fostering supportive relationships.

Outcomes from the pilot program proved very positive and led to ongoing funding from the Federal health department. Tumbelin Farm is now described as a 4-bed residential adventure therapy program for young people with alcohol or drug related problems. It has the capacity to support up to 20 participants a year and provides a fully supervised 24/7 program where participants live in a community with three other young adults and a supportive staff team. Daily routines include preparing food, doing chores and daily fitness. As a working farm, they are also involved in looking after livestock, feeding chickens, collecting eggs, growing produce, mowing the lawn, mending fences and looking after equipment used for adventure activities. It is based on a restorative practice approach and provides opportunities for young people to step away from their situation and begin a journey of change in a supportive community setting where participants can reconnect with nature and focus on establishing relationships of trust, to foster self-confidence and resilience. The program is built around four distinct but integrated lives:

- Home life - providing an opportunity to step out of their lives into a warm, welcoming and therapeutic environment in the care of House Parents
- Farm life - with opportunities to engage in hands on tasks that require hard work and resilience and with rewards offered in the longer term; for example, growing produce
- Adventure therapy - providing opportunities for developing resilience, positive risk taking, improved self-esteem, problem solving, constructive coping strategies and a sense of competence and achievement. Activities include camping, bushwalking, kayaking, rock climbing and mountain biking
- Learning life - through group and one-on-one settings with case management and counselling.

The program is delivered by an experienced transdisciplinary team with a counsellor, case manager, adventure therapy practitioners and a farm supervisor. Prior to arrival there is an expectation that young people go through a supported withdrawal program and stabilisation. Stays vary from the minimum commitment of four weeks to up to six months. The Alumni Program allows participants to stay connected with the farm and 'give back' to those who are starting their journey on the farm.

Funding is ongoing through the Department of Health, philanthropy, fundraising and social enterprise. There is also a weekly financial contribution from participants of \$150 for food and lodging.

16. Warrah Biodynamic Farm, New South Wales

The Farm was established in 1965 by a small group of founding families who were cultivating a biodynamic vegetable garden. The garden, inspired by the work of Rudolph Steiner, aimed to provide practical life and organic farming skills, meaningful work and volunteering opportunities to young disabled people and adults. The original garden grew into Warrah Farm set on 12 hectares of bushland. Today it is a large, extended, diverse community of people with and without disability spread across Sydney's North West in Dural. The farm and its shop are social enterprises and part of a wider community known as the Warrah Society which supports people with disabilities. Warrah Farm offers:

- 13 supported independent living units in purpose built/modified homes 47
- Specialist disability accommodation for 54 residents
- Short term accommodation offering respite and skill building
- A specialist school from kindergarten to year 12 for children with moderate to severe learning difficulties and offering an outdoor curriculum – camps, daily bushwalks, work experience
- Organic farm shop and artisan bakery with participants contributing to the operations, handling cash, engaging with customers, preparing and delivering seasonal produce boxes and providing work experience and community engagement opportunities
- In home support promoting independent living
- Festivals and events – a spring picnic, fairs and expos, awareness days and fathers' day.

The farm is run by 274 trained and professional staff and 83 volunteers. It also hosts tertiary work placement students. Through a series of programs it offers social therapeutic horticulture facilitated by trained educators to improve physical and mental health and wellbeing, develop skills and confidence and promote social connection and team work. The programs include:

- Nursery skills - responsible for all propagation for the farm and sold via the farm shop
- Farm skills - with hands on engagement in farming activities including planting, weeding, composting, harvesting, pruning, animal husbandry and general farm maintenance
- Collaboration with TAFE to offer career pathways and employability skills. Skills are developed through tangible projects related to gardening and landscaping. These have included garden makeovers, landscape construction, carpentry and fencing. A current project is developing a dedicated horticulture therapy garden.
- Farm volunteering program - for both individual and corporate volunteers
- School tours - \$20 per student for groups of 15-30 students in an immersive experience of biodynamic farming with inspiring ideas for school gardens.

- Art programs

Funding of over \$11.50 million per annum comes from NDIS, government, fee for service and tenancies as well as fundraising and donations.

Recent recommendations of the Royal Commission and the National Disability Insurance Scheme Review will have an impact on the future of Warrah. They are currently working through the implications of the proposed phased elimination of group homes and the integration of students from special schools into mainstream education.

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