



Food growing for  
health and wellbeing

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# Growing Health

- 4 year project run by Sustain and Garden Organic, funded by the Tudor Trust
- To get food growing to be more routinely used to deliver health outcomes
- Identify barriers and solutions
- Finding ways to make it happen



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# Why isn't food growing commissioned?

## NHS & Public Health

- Lack of awareness
- Unsettled times, structures, funding
- Need measurable outcomes and impact

## Food Growing Groups

- Commissioning is confusing
- Not set up to make it easy, volunteer led, small projects, time poor, lack of measurement



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# Finding ways to make it happen

- Evidence of benefits – literature and practical examples
- Tools to measure outcomes
- Case studies
- Awareness raising with health professionals and health commissioners
- Support for community food growing groups  
online tool kit, events



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# Evidence for health and wellbeing



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## The benefits of gardening and food growing for health and wellbeing

By Garden Organic and Sustain  
Ulrich Schmutz, Margi Lernatsson, Sarah Williams, Maria Devereaux and Gareth Davies  
April 2014

## Gardening and food growing for healthy weight

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Gardening and food growing help to achieve and maintain healthy weights by influencing:  
 • Fruit and vegetable consumption; Nelson *et al.*, 2007; Alaimo *et al.*, 2008; Nelson *et al.*, 2011  
 • Physical activity Hawking *et al.*, 2013; Park *et al.*, 2008  
 • Body mass index Zick *et al.*, 2013

### Background

The Government's obesity strategy 'Healthy Lives, Healthy People' calls for action on obesity in England. It has identified that 'overweight and obesity represent probably the most widespread threat to health and wellbeing' (Department of Health, 2011). 61% of adults are overweight or obese, and 23% of 4-5 year olds and 33% of 10-11 year olds. The level of obesity in England, along with the rest of the UK, ranks as one of the most obese nations in Europe. It is the consequence of overweight and obesity that makes these statistics so serious, as excess weight is a major risk factor for diseases such as type 2 diabetes, cancer and heart disease. Alongside the serious ill-health it provokes, overweight can reduce people's prospects in life affecting self-esteem and mental health (Department of Health, 2011).

Excess weight gain is the result of eating more calories than needed and/or undertaking insufficient levels of physical activity to match the calorie intake. Although this energy imbalance is driven by complex environmental, physiological and behavioural factors, changes in diet to reduce energy intake along with increasing physical activity are key to achieving and maintaining a healthy body weight. The National Institute for Health and Clinical Excellence (NICE) clinical guideline on obesity includes advice for people to eat at least five portions of fruit and vegetables each day in place of foods higher in fat and calories, and to make enjoyable physical activities part of everyday life. Engagement in gardening and food growing can address both of these recommendations and gardening is indeed recognised as moderate-intensity physical activity that adults are advised to undertake 30 minutes or more of five or more days of the week (NICE, 2006).

### Evidence of impact of gardening and food growing on:

#### i) Fruit and vegetables consumption

Reviews of academic studies from the UK and abroad, concluded that food growing programmes in schools can have positive impacts on pupil nutrition and attitudes towards healthy eating, specifically related to willingness to try new foods and taste preferences (Nelson *et al.*, 2011; Draper and Freedman, 2010). For example, a study carried out in the USA 11-12 year old students involved in food growing over a four month period found that students were more willing to taste, and ate, a greater variety of vegetables than those in the control group (Ratcliffe *et al.*, 2011). Lineberger and Zajicek (2000), also in the USA, reported more positive attitudes towards vegetables and increased snack preference for fruit and vegetables amongst 8-11 year old students involved in hands-on school gardening programmes. Evaluation of Food for Life Partnership (FFLP) in the UK showed significant associations between healthy eating and FFLP related behaviours (including participation in cooking and growing at school or at home); following their participation in FFLP the proportion of primary school-age children eating five or more portions of fruit and vegetables increased by 28% (Orme *et al.*, 2011). Nelson *et al.* (2011) reported details of a number of studies demonstrating that pupils engagement in food growing activities resulted in increased consumption of vegetables, but also noted that most of the studies only considered whether pupils consumption habits had changed as an immediate effect of their involvement in growing and highlighted the lack of longitudinal evidence research confirming whether such programmes can change eating habits long term.

For adults, Alaimo *et al.* (2008), reported that household members who participated in community gardening consumed fruits and vegetables 1.4 more times per day than those that did not and that they were 3.5 times more likely to consume the recommended 5 portions a day of fruits and vegetables. In the UK, the low-income diet and nutrition survey (Nelson *et al.*, 2007) showed that men and women living in households that grew food consumed more fruit and vegetables than other men and women.

## Gardening and growing for people with dementia

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Being in a garden and taking part in horticultural activities has been shown to be of benefit for people with dementia, with structured therapeutic gardening activities having a positive impact on sense of wellbeing, cognitive abilities, communication and engagement. Deweaver *et al.*, 2012 and Hewitt *et al.*, 2015.

### Background

Dementia is a long term condition with a high impact on a person's health, personal circumstances and family life. Alzheimer's disease is the most common form of dementia and is generally diagnosed in people over 70 years of age. Early-onset dementia refers to the onset of symptoms before the age of 65. As well as having profound impact on the individual, dementia can also have high impact on family members and friends. Dementia results in a progressive decline in multiple areas of function including memory, reasoning, communication skills and those skills needed to carry out daily activities. Alongside this decline, individuals may develop behavioural and psychological symptoms such as depression, psychosis, aggression and wandering, which complicate care.

The National Dementia Strategy (2009), aims to ensure that improvements are made to dementia services across three areas: improved awareness, earlier diagnosis and intervention, and a higher quality of care (Department of Health, 2009). The Alzheimer's Society statistics show that there are currently 500,000 people living with dementia in the UK, and it is predicted that this number will rise to over

one million people by 2021. It is estimated that dementia currently costs the NHS, local authorities and families £22 billion a year and this will grow to £27 billion by 2018 (Kane and Cook 2013). The Alzheimer's Society notes that the Welsh Assembly in its framework action recognises that low-level support services such as gardening clubs are vital, and reduce the need for more intrusive and costly care solutions (Kane and Cook, 2013).

### Evidence of benefits of horticultural therapy for people with dementia


The UK National Institute for Health and Care Excellence (NICE) recommends that care plans should address activities of daily living that maximise independent activity, adapt and enhance function, and minimize need for support (NICE, 2011). The garden and the activity of gardening provides a non-pharmacological approach to address these goals and horticultural therapy can be utilized to improve the quality of life for the aging population and yielded high level patient/ carer satisfaction, possibly reducing costs of long-term, assisted living and dementia unit residents (Deweaver *et al.*, 2012; Gilin *et al.*, 2012).




Horticultural therapy, active and green groups

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# Case studies



**Sydenham Garden**  
Sydenham, London Borough of Lewisham



**Growing Health Case Study**  
**Health area: Mental health and dementia**

This series of Growing Health case studies provide examples of projects which use food growing in the community to provide health benefit.



**Brighton & Hove Food Partnership: Harvest**  
Brighton & Hove



**Growing Health Case Study**  
**Health area: Healthy eating, physical activity and mental wellbeing**

This series of Growing Health case studies provide examples of projects which use food growing in the community to provide health benefit.

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# Growing Health Network

- Website
- e-newsletter
- Social media  
@growing\_health Facebook Growing Health
- PR
- Advisory group
- Growing Health Champions



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# Next steps

- Locate and map projects
- Work with social prescribing
- Encourage partnerships
- Guidelines for practice
- Awareness raising
- FUNDING



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# Thank you

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