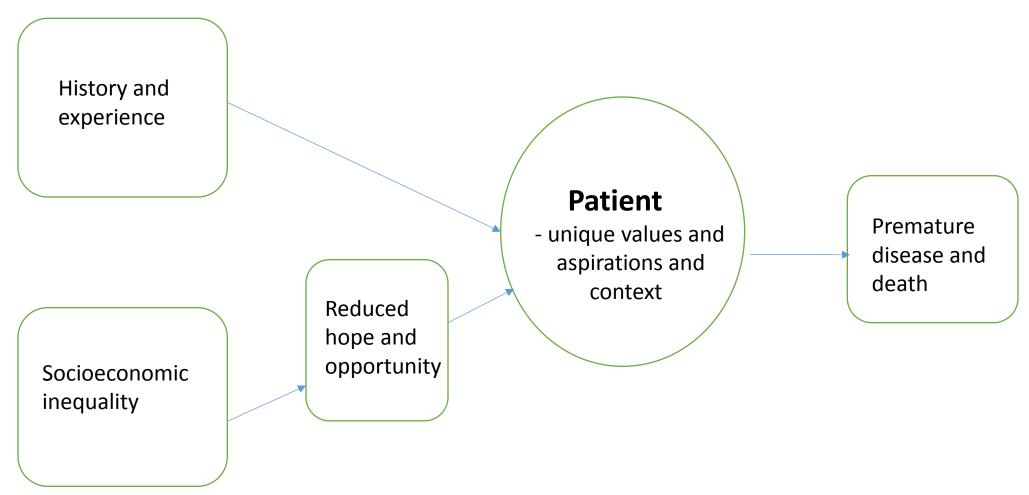
Gardening as social prescription:

thoughts and a case study

Joint GP Mental Health Lead for Lewisham Clinical Commissioning Group





after Heath I. BMJ 2016;355:i5705

Marmot Review (2010) commissioned to propose strategies to reduce health inequalities.

Marmot found that around 70% of health outcomes are determined by social factors, and just 30% by clinical interventions.

Prescriptions for antidepressants:

2005 - 29.4m prescriptions

2015 - 61m prescriptions

GP consultation rates:

1995 patients visited their GP **3.9** times a year on average;

2014 increased to **5.5** times per year

Causes are increasingly chronic, complex and social in origin.

".. to see and hear each patient in the fullness of his or her humanity in order to minimise fear, locate hope, to explain symptoms and diagnoses in language that makes sense To witness to courage and endurance and to accompany suffering. No biomedical evidence helps with any of this.. '

Humanity

Biomedical data

Medicine has to approach each patient in the fullness of their humanity and so must draw on wisdom from across the full range of human understanding.

The **recovery processes** that have the most proximal relevance to clinical research and practice are:

Connectedness

Hope and optimism about the future;

Identity

Meaning in life

Empowerment

(giving the acronym **CHIME**). (Leamy et al 2011)

Social Prescribing:

A mechanism for linking patients with non-medical sources of support within the community.

I didn't become a GP to spend my life prescribing pills.

Respondent, Deep End Report 9

Social prescribing for mental health provides a framework for:

- developing alternative responses to mental ill health
- a wider recognition of the influence of social, economic and cultural factors on mental health outcomes



Centre for Reviews and Dissemination

There is little good quality evidence to inform the commissioning of a social prescribing programme

Most of the available evidence tends to describe evaluations of pilot projects but fails to provide sufficient detail to judge either success or value for money

• There may be evidence for relevant interventions that have yet to be evaluated as part of a social prescribing programme

Gardening as a mental health intervention: a review

Jane Clatworthy, Joe Hinds and Paul M. Camic

Mental Health Review Journal · September 2013

DOI: 10.1108/MHRJ-02-2013-0007

Quantitative studies have found

• significant reduction in symptoms of depression and anxiety following gardening-based interventions.

Qualitative studies have provided insight into service users' experiences of gardening-based interventions, with a range of potential benefits highlighted, including

- enhanced emotional wellbeing,
- improved social functioning,
- improved physical health and
- opportunities for vocational development.

HOW DO WE EVALUATE SERVICES?

"the challenge is to make the important measurable, not the measurable important".

(Mc Namara)

Includes:

- adequacy of housing
- friendship
- safety
- employment
- close relationships
- progress towards personal goals

What matters most to service users, as rated by service users.

(Thornicroft and Slade 2014)



















Primary-care based participatory rehabilitation:

users' views of a horticultural and arts project.

Elizabeth A Barley, Susan Robinson and Jim Sikorski

Br JGenPract 2012;DOI:

10.3399/bjgp12X625193 (abridged text, in print:

Br JGenPract 2012; 62: 88–89).

'All three of us weren't feeling very well, but we all stayed for the session and we got on and we did stuff, and we were all feeling a bit brighter at the end of it.'

'The salad that goes with the barbeque has actually been grown in the garden and picked and prepared by people here, you can't beat it ... It's an "ownership".'

'I mean one of the joys of coming up here is having someone to talk to. Make conversation, talk about this and that, or what I'm going to have for dinner or whatever.'



Annual evaluation of Sydenham Garden 2015/16



CO-WORKERS STUDY BASED ON WARWICK EDINBURGH MENTAL WELLBEING SCALE (WEMWBS)

Group initial average (average of the scores on the first session): 40.8

Group average (average of all the scores during a placement): 43.9

Group final average (average of the final score): 45.9

A change of 3 points or more is considered meaningful (WEMWBS user guide vers.2), and therefore we can conclude peoples' mental wellbeing meaningfully improves during their time in the Garden project.

I have gained a bit more perspective on my own issues (having heard about what others in the group have been through). I have more confidence in talking to others as well as confidence in my own abilities.

I'm sleeping better and have lost some weight. My stamina has improved enough that I can now go to the leisure centre twice a week. Most of all I'm mixing with people again outside the garden sessions. I'm less anxious and depressed and the work at the garden has contributed to me taking less medication.