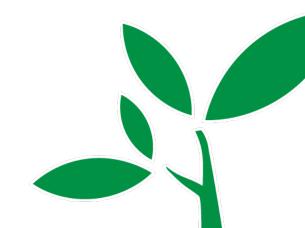


Margi Lennartsson Garden Organic









Growing Health

- Project run by Garden Organic and Sustain, funded by The Tudor Trust
- Vision community food growing to be a natural part of the health service and routinely used to deliver health improvement
- Identify barriers & solutions
- Finding ways to make it happen









Why isn't food growing commissioned?

NHS & Public Health

- Lack of awareness of food growing and the benefits
- Unsettled times and new structures
- Need evidence of outcomes and impact

Food Growing Groups

- Don't have the contacts or awareness of routes to commissioning
- Not always set up to make commissioning easy –
 define the service, work in partnerships and provide
 evidence of impact







Finding ways to make it happen

- Supporting community groups to get commissioned
- Raising awareness amongst commissioners and health professionals
- Collating and sharing evidence of the benefits of community food growing on health
- Growing Health Network and communication





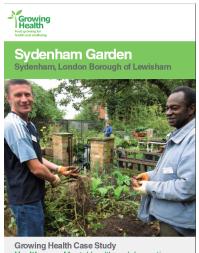


Community growing groups

- Share and learn events
 - Routes to commissioning
 - Building partnerships
 - Measuring outcomes
- Case studies
- On-line tool kit
- Evidence of the benefits of food growing for health
- Guide to tools for measuring outcomes



Health area: Healthy eating, physical activity and mental wellbeing



Growing Health Case Study
Health area: Mental health and dementia
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which use bod or grenting the documents to provide health benefits.







Evidence for health and wellbeing



The benefits of gardening and food growing for health and wellbeing

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

Gardening and food growing for healthy weight



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 * Body mass index Zick et al. 2013

The Government's obesity strategy 'Healthy Lives, Healthy People; a call to action on obesity in England' 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 old. 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 peoples' prospects in life affecting self-esteem and mental health

Excess weight gain is the result of eating more calories than needed and/or unde 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 quideline 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 on five or more days of the week (NICE, 2006).

Evidence of impact of gardening and food growing on:

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 (Batcliffe et al... 2011). Lineberger and Zajicek (2000), also in the USA, reported more positive attitudes towards vegetables and increased spack 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 behaviour (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 longer 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 that other men and women.

Gardening and growing for people with dementia



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 abillies, communication and engagement. Detweite et al., 2013 and Hewitt et al., 2013.

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 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 800,000 people living with dementia in the UK, and it is predicted that this number will rise to over currently costs the NHS local authorities and families £23 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

Evidence of benefits of horticultural



www.growinghealth.info







care solutions (Kane and Cook, 2013).

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 al. 2012; Gitlin et al., 2012).

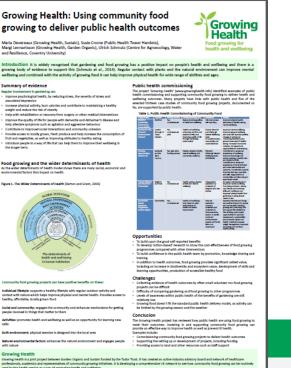
Health Professionals / Commissioners

Raise awareness

Seminars – food growing groups/commissioners

Evidence of the benefits of food growing for

health









Growing Health Network communications

- Growing Health Network
- Growing Health Working Party
- Growing Health Champions
- e-newsletter
- Website <u>www.growinghealth.info</u>
- Social Media

Twitter-@growing_health Facebook - Growing Health









Thank you

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