

Talking about green care

Green care is an inclusive term for many interventions, including animal-assisted therapy and therapeutic horticulture. Earlier this year, SCAS attended a seminar to discuss what other organisations are currently delivering and how we might better collaborate.

What is green care?

Green care is an umbrella under which there is much diversity but a common linking ethos of essentially using nature to produce health, social or educational benefits.

The diversity that sits under the umbrella of green care all with a range of different contexts, activities, health benefits, clients, motivations and needs includes:

- Social and Therapeutic Horticulture
- Animal-Assisted Interventions
- Care Farming
- Facilitated Green Exercise as Treatment
- Ecotherapy
- Wilderness therapy; Nature Therapy

With support from COST (European Cooperation in Science and Technology), a collaboration took place across Europe and the result was a conceptual framework being developed for green care and published as a book in 2010.

The book described and defined green care and set it within the context of a number of theoretical and practical frameworks including those of Psychology, Psychotherapy, health promotion, social inclusion and others. The aim of the book was to help researchers and others to understand the principles of green care and its links with other disciplines and approaches.

You can download "Green Care: a Conceptual Framework" from <http://bit.ly/green-care>.

Green care – a way forward

On 20 January this year SCAS was invited to attend a seminar as an opportunity to help those involved in green care better understand what the other organisations are currently delivering, our directions and plans, and how we might better collaborate.

At the seminar there were representatives from the different sectors that sit under the umbrella of green care, and it was agreed that:

"Health and Wellbeing feeds into both social and health policy. The only way to scale up delivery and to get our messages across is probably through co-ordination and an alliance of those present. There was consensus that this is essential, and will be supported, subject to clarification on who and what it is we want to influence eg the LGA

or all principal local authorities. We essentially need to be arguing for the same thing. We all work at a local level but our efforts are often diluted; we need to operate with a sufficiently large voice and within a framework. Government needs just one message, loud and clear, not multiple ones, ideally from a single voice.

"There are many reports available to substantiate benefits, but we need supportive messages to come from powerful bodies such as NICE, Royal Society for Public Health and Public Health England. NICE stood out as a key target otherwise GPs won't listen. The way to influence the treasury – so far – is to show the value for money and the cost benefit analysis of using nature and green care as an intervention; the Health and Wellbeing agenda needs to show that cost savings are intrinsic to the value of nature itself. But it is also necessary to influence/market to beneficiaries so they are encouraged to ask for these services and influence policy through demand.

"There is a need to recognise and promote increased joined up thinking, with education, health and care departments increasingly working together."

There was discussion around whether "Green Care" as a term might be replaced with a more generic "Nature Based Intervention" to distinguish from clinical intervention.

There was also a clear recognition of the necessity to reference the benefits and actions on prevention, not just focus on therapy-orientated services. Resilience, prevention, public health and therapy being all in the mix.

The next meeting will be in March 2015. SCAS will continue to report to its members and those interested on further developments and how these might impact in a positive way upon the work that SCAS does and the field of AAI generally.

