Growing Spaces: A Mixed Methods Evaluation of a 'Mental Health Recovery Programme' for people with mild mental health problems.

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21 1996-2017

Background: Green Care & Social Prescribing

- 'Green Care' is promoted globally as an approach that can help people with mental health problems engage.

- Green care is described as "nature-based therapy or treatment interventions – specifically designed, structured and facilitated for individuals with a defined need" (Bragg and Atkins, 2016)

- *Social prescribing1 is a way of linking patients in primary care with sources of support within the community – usually provided by the voluntary and community sector, offering GPs a non-medical referral option that can operate alongside existing treatments to improve health and wellbeing. (Bragg & Leck 2017)*

- Social prescribing can link patients in primary care with sources of support in the community and help reduce health inequalities (York CRD 2015) .

- NHS in the 'Five Year Plan: new approaches to care better care prevention and person and community centred approaches to support community resilience.

- Green Care and Social Prescribing could offer contemporary and relevant opportunities for nurses to develop therapeutic relationships with a range of populations in diverse community based contexts.

Therapeutic Horticulture

- Therapeutic Horticulture (TH) is a type of green care that promotes wellbeing for people with mental health problems using green activities such as gardening (Howarth et al 2016).

- It is believed that Mental Health Recovery Programmes (MHRP) that use TH present an approach that can reduce social isolation for people with mental health problems.
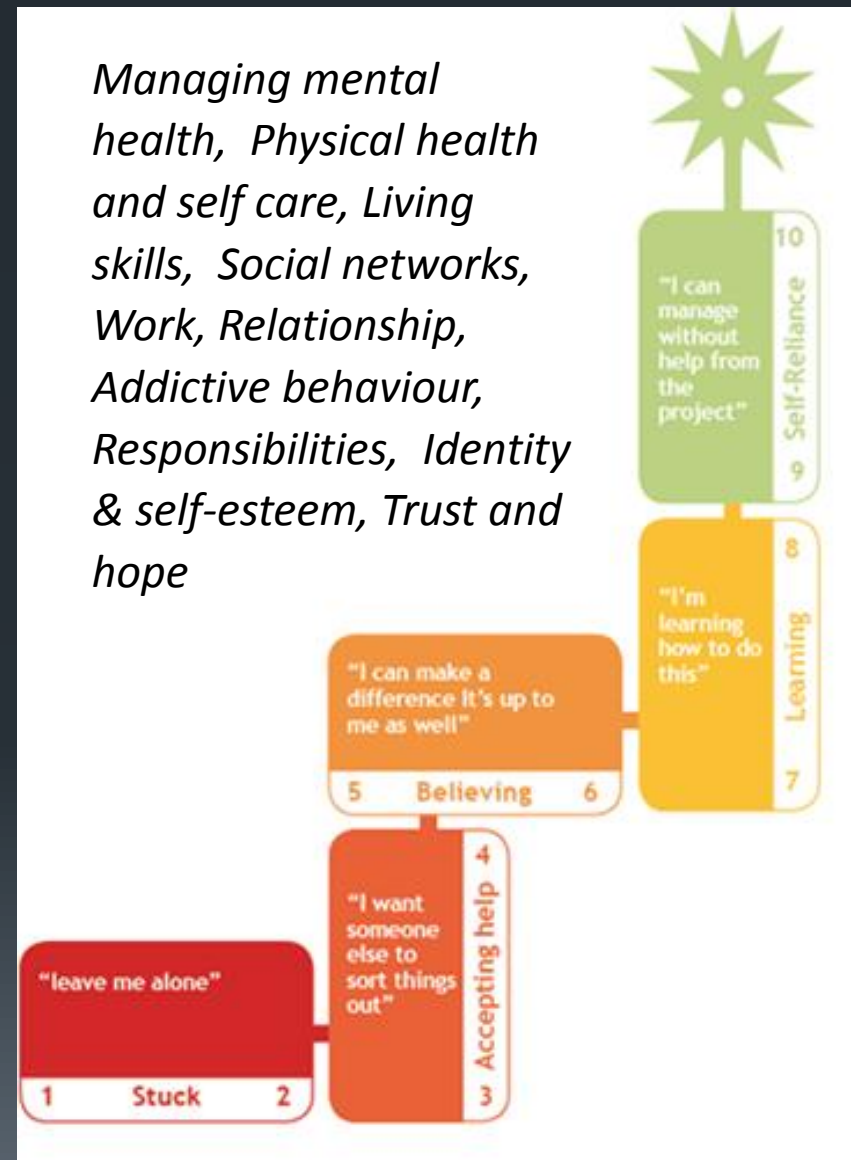
The Centre

- The MHRP is located in a local Social Enterprise Garden Centre which was originally established as a community wellbeing garden centre.

- The centre was introduced to support community health and well-being through the use of eco/green therapies.

- The centre is based on a partnership project between 'Mind'© and a third sector organisation and its vision is to "*to be the pioneer in connecting people with nature and inspiring them to lead healthier and happier lives*".

Project Aim & Objectives

- To evaluate the impact of the Mental Health Recovery Programme (MHRP) using Therapeutic Horticulture volunteer programme on the recovery of the participant.

Design

- Mixed Methods
- Recovery Star data
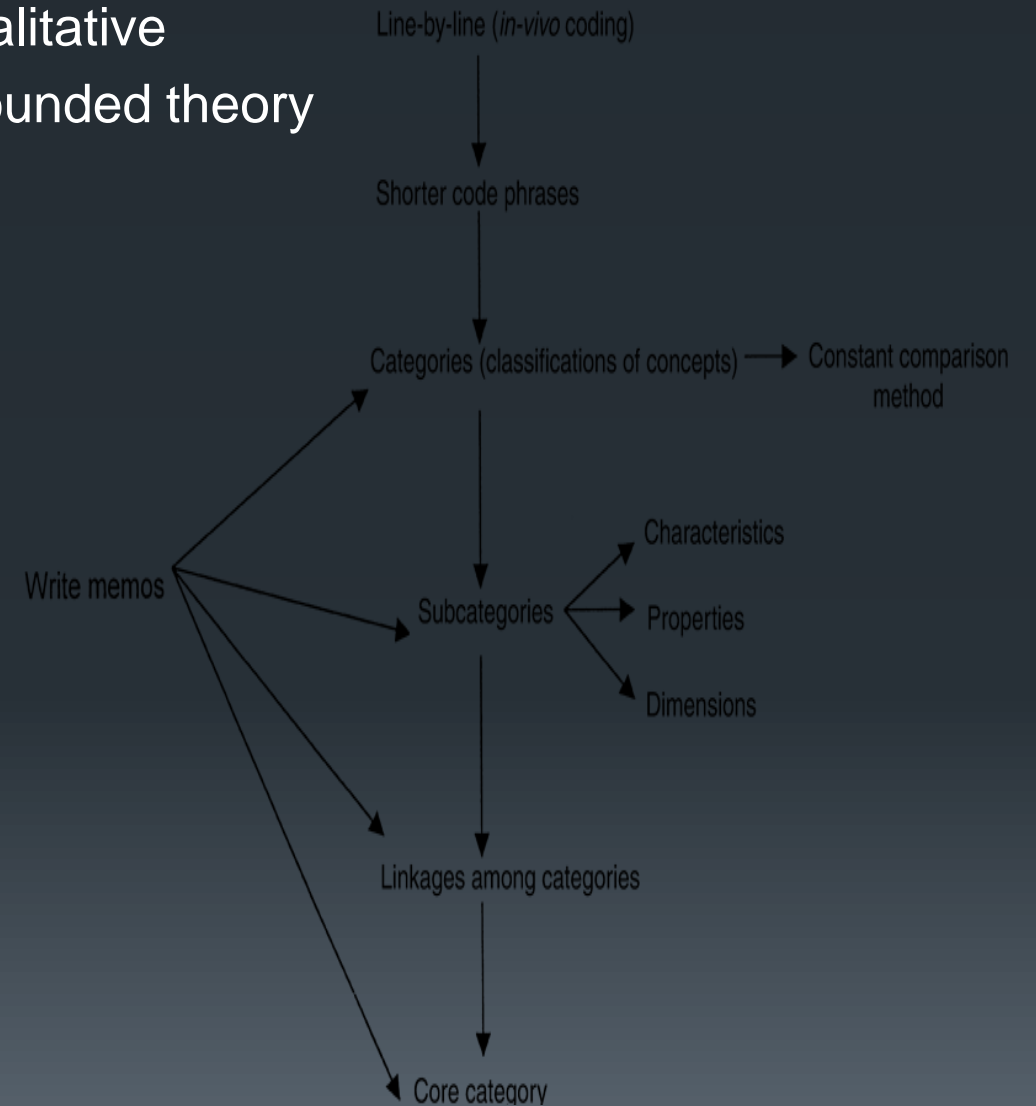- Qualitative Focus Groups
- Exit Interviews
- Triangulate data

Managing mental health, Physical health and self care, Living skills, Social networks, Work, Relationship, Addictive behaviour, Responsibilities, Identity & self-esteem, Trust and hope

Data Analysis

- Quantitative recovery Star
- Descriptive Statistics
  - Frequency
  - Trends
  - Progression

- Qualitative
- Grounded theory

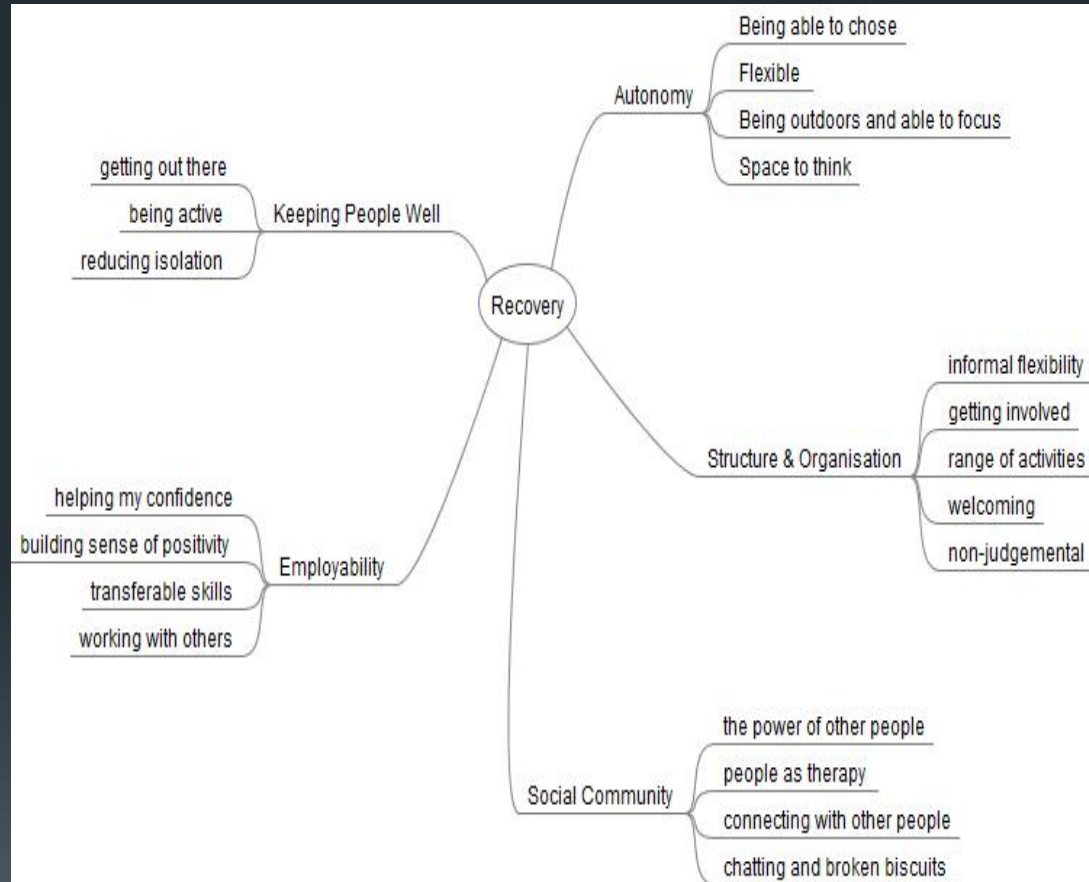| Name	M/F	Age	Score range	No of scores	+ve or -ve	Progression Scores Comments	Qual comments
AW	M	40	4-10	2	+	-W, -Rel	Redundant X2
AH	F	65	1-10	4	-/+	Sn -, MH +, Rel +	Bored & isolated
BC	F	65	3-10	3	-/+	Ab +, TH -	Overweight
BB	F	43	4-10	3	+/-	+=LS,SN, AB, Res, -=ID	Diabetes
CK	F	60	1-10	3	-/+	- SN, -W, +MH, -PH, -Rel, +TH	Unemployed, poor socialisation
CO	F	46	3-8	5	+	-W +Res, +rel	Fibromyalgia
GS	M	61	1-10	4	+	-W, -MH	Depression, arthritis, unemployed
GR	F	40	1-10	4	+	-R, -TH	Relationship 9- 1
GH	M	45	1-10	6	+/-	Rel -, AB -, PH +,	Is lonely, started work
IG	M	63	2-10	2	-	-MH, -SN, -Res, -ID,	Is a loner and doesn't socialise has a bad back
MV	M	42	2-10	2	-/+	+PH, SN+, LS -, Rel +, Res -, ID -	Unemployed and avoids others, depression
PS	M	50	1-10	4	-	-MH, +PH, +SN, -W, -Rel, -Res, +TH	Isolated, not confident to work
PG	M	59	4-10	2	+/-	+W	Works FT, scored mostly 10
SC	M	49	1-10	2	+/-	-MH, -PH, +LS, +Sn, +W, +Res, -TH	Unemployed, socialises
SW	M	47	1-10	4	+	+MH, +PH, +rel, +AB, +res, +ID, +TH	OCD and supports a family member with Dementia
SS	M	59	2-10	4	-	-MH, -PH, -LS, +SN, +Rel, -AB, -ID, -TH	Lacks wider social network
SF	F	68	7-10	2	+/-	-SN, -AB, +Res, -ID, +TH	Retired
VS	F	66	5-10	2	-	-PH, +W, -Rel, -Res	Retired has a good social network
VG	M	59	3-10	3	-	+PH, -LS, -Sn, -Rel, -AB, -Res,-ID	Making new friends through GN, has hydrocephalis
WS	F	68	4-10	4	+/-	W+. MH +	Retired and loves meeting new people
Total	9F 11M	40-68	1-10	35% =2 35% = 4 20% = 4 5% = 5 5% = 6			

Line-by-line (*in-vivo* coding)

Shorter code phrases

Categories (classifications of concepts) → Constant comparison method

Write memos

Subcategories → Characteristics

Properties

Dimensions

Linkages among categories

Core category

Findings: Recovery Star

Name	M/F	Age	Score range	No of scores	+ve or -ve	Progression Scores Comments	Qual comments
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Recovery Star Findings

Progression 'v' non progression — bar chart comparing progression (blue) and non progression (orange) across categories MH, PH, LS, SN, W, Rel, AB, Res, ID, TH.

RS WS Dec-12 65

	1	2	3	4	5	6	7	8	9	10
MH	9	8	10	10						
PH	10	10	10	10						
LS	10	10	10	10						
SN	10	10	10	10						
W	4	10	10	10						
Rel	10	10	10	10						
AB	10	10	10	10						
Res	10	10	10	10						
ID	9	10	10	10						
T&H	8	8	8	8						

RS VS May-14 66

	1	2	3	4	5	6	7	8	9	10
MH	10	10								
PH	10	8								
LS	10	10								
SN	10	9								
W	0	5								
Rel	10	8								
AB	9	10								
Res	10	8								
ID	10	10								
T&H	8	8								

But…Different Perspective

- *So because you can't see it, people go: Nowt wrong with him. So I could…that's what I liked about here, there was no force and you eventually improve. No, I might have been feeling shitty this morning but have been encourage to get in there but not told.*

- *I feel very passionately about mental health and how people are treated and now as a carer and myself, I have had experience, it is not a six week course that helps. We cannot tick boxes; everything has to be measurable doesn't it? And you are not measurable as human beings.*

- *"I thought maybe there was something a bit out there or whatever, would…everybody would talk about sharing different ideas, you know. And that's what the whole place is about, getting you talking, getting your mind working again and… like, you know, an idea you'd have about stopping slugs or something like that, you know. Everything about the place was all about a team as well and everybody was allowed to put their own little input in.*

- *"I had come out of a job where I was probably doing 55 or 56 hour plus hour weeks, to stop is in itself traumatic because you have no routine. So for three days I did not get up or leave the house, I did not get dressed, I did not change my clothes because I just could not. My way of dealing with it was digging in the garden… this place [GN] does; it gives people a structure to your week*

- *"I think what you must not dismiss is the power of the other people and essentially, you are just facilitators and that a lot of the therapy is from with people".*

- *I think, tea which is a panacea for all is really important in that the simple steps to socialisation is that you can offer to make a brew for someone else when you are ready.*

Benefits of Triangulation

- Insight into the whole picture
- Ability to 'measure' impact coupled with 'why' the impact worked
- Not everything that can be measured is of value, and not everything that is measured is of value…….
- More comprehensive data set
- Inconsistences recognised
- Easier to draw conclusions.

Limitations to Study

- Recruitment slowed…
- Change of staff
- Incomplete data
- Recovery Star –
  - When
  - Who
  - What was recorded

Questions for Nursing: Broadening Horizons

- Greater Manchester Population Health Plan (2017): drive towards inter-disciplinary work that enables better care prevention and person and community centred approaches.

- Vanguard, or new model approaches promote community resilience help keep people out of hospital.

- Could Green Care provide innovative placement opportunities that could be tailored as spoke placements for student nurses?

- Opportunities that students could access to help them to think more broadly around concept of health and wellbeing and where 'care' takes place.

  - Social prescribing is suitable for AP's
  - Social enterprise role of 'care provider' ?

- Potential of Therapeutic Horticulture/green care and other nature based interventions to help with physical activity, dementia, social isolation

- **Training and education for nurses that typically allocated to NHS placements – do we need to broaden our horizons…..?**

Thank you for listening

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