Horticulture Therapy Benefits: A Report

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Abstract:
This article examines horticulture therapy, how it is used, and the benefits that are associated with it. A literature review was conducted using peer-refereed studies and the authors’ reflections of horticulture therapy. The results showed that horticulture therapy techniques have been used in many fields, can aid in illness recovery, and there are different kinds of horticultural therapy. The benefits of horticulture therapy are discussed.

Keywords: Horticulture therapy, gardens, gardening, benefits, community.

Introduction
So often people become ill and sometimes do not know or understand some of the things and techniques that they can apply to help them during the recovery process. As a result, this article examine the benefits of horticulture therapy, how it is used in our society as well as synthesizing research findings on horticulture therapy. The results are to help people become more aware of the importance of horticulture therapy and how to incorporate it into their lives. Several research (Capra, Haller, & Kennedy, 2019; Söderback Söderström & Schälander, 2004; Suchocka, Kosiacka-Beck, & Niewiarowska, 2019) have been conducted on horticulture therapy however more research is needed to better understand the benefits of horticulture therapy. Therefore, this article addresses the benefits of horticulture therapy and provide reflections on horticulture therapy.

What is Horticulture therapy?
The world can be changed using horticulture therapy due to its application on human well-being and growth (Capra, Haller, & Kennedy, 2019). Haller and Capra (2017) posited that horticultural therapy provides rewarding and positive experiences when one interacts with the growing environment, which includes therapists, as well as program participants. In addition, horticultural therapy uses practices that many fields such as therapeutic recreation, occupational therapy, education, psychology, social work, and vocational rehabilitation employs (Haller & Capra, 2017). Haller and Capra (2017) identified four different kinds of horticultural therapy programs that exist. For example, horticultural therapy, vocational
horticulture, therapeutic horticulture, and social horticulture. However, for this study, the focus is on horticulture therapy. In another study, Capra, Haller, and Kennedy (2019) view horticulture therapy as a unique modality which connects people and plants. Capra, Haller, and Kennedy (2019) mentioned that the definition of horticulture therapy has evolved and several definitions have been used in the past. Horticulture therapy has been used for mental and physical health and also to recover from illnesses and help in vocalization rehabilitation (Capra, Haller, Kennedy, 2019). Scott (2015) refers to horticultural therapy as a process that can be passive or active, using gardens and plants, rehabilitative as well as therapeutic activities to impact people’s health and outcomes positively. Having hands-on activities, which involves using an open window to look at gardens, listen to birdsongs, and potting plants could be included in horticultural therapy. Also, horticultural therapy programs could be conducted in different ways (i.e., individually, in groups, cover areas, outside, inside, or having a garden) (Scott, 2015). Wang and MacMillan (2013) stated that gardening can be conducted in a group as well as with individuals and can establish partnerships among groups and agencies. Söderback, Söderström, and Schälander, (2004) noted that horticultural therapy consists of interventions that involve nature-oriented views, gardens, spaces, garden tools, plants, healing, rehabilitation, used to improve and restore well-being and health, garden occupations that can be done with people that are disabled and offer other general benefits. Horticultural therapy “is one of the most effective treatments for people of all age’s backgrounds and abilities” (Pouya, 2019, p. 153).

**Horticulture therapy and illness**

Horticulture therapy has been used in several ways in our society. Depression has affected about 350 million people (Najjar, Foroozandeh, & Gharneh, 2018) and finding ways to help individuals with their depression is critical. According to Najja et al. (2018) horticulture therapy has been used for decreasing psychological symptoms, increasing organizational function, as well as the memory of males that are chronically depressed. Najjar et al. (2018) examined thirty outpatients and had a control group and an experimental group. Najjar et al. (2018) results showed that the conceptual organization function, stress, anxiety, and depression scores of outpatients improved while using horticultural therapy. Horticultural therapy has also been shown to help decrease middle-aged women anxiety and depression and improve their self-identity (Kim & Park, 2018). In another study, Söderback Söderström and Schälander, (2004) highlighted that all over the world horticultural therapy is being used in different settings. For example, hospice care, older individuals with dementia, acute care, sensory defects, as well as with autism. According to Pouya, (2019),

Horticulture is used as a method of treatment for different age groups of people in different environments to promote health, well-being and social cohesion. Over the past few decades, horticulture has been used as a suitable treatment for people with disabilities and various needs, including adults with physical and psychological disabilities, disabled children, poor people, and prisoners (p.153).

**Horticulture therapy and gardening**

Capra et al. (2019) explained that “horticultural therapists bring unique and multidisciplinary skills to the process of change, emphasize the strengths in those served, and offer an intimate connection with nature through engagement in gardening” (p.4). Lehmann, Detweiler, and Detweiler (2018) examined horticulture therapy with gardening and veterans. Lehmann, Detweiler, and Detweiler (2018) found that horticulture therapy helps the veterans feel refreshed, serene, and calm whenever they visit and leave the garden. Also, that horticulture therapy is a therapeutic modality for veterans. Söderback et al. (2004) investigated the benefits of horticulture therapy with patients. Söderback et al. (2004) described the Danderyd Hospital Horticultural Therapeutic Garden organization and design and how gardening helped brain-injured patients with rehabilitation. According to Söderback et al. (2004) the horticultural therapy group consisted of forty-six brain-damaged patients. There were several forms of horticultural therapy that the patients participated in. For example, taking visits
to the hospital healing garden, imagining what nature looks like, viewing nature, and being involved in the actual gardening. Söderback et al. (2004) study found that “horticulture therapy mediates emotional, cognitive and/or sensory-motor functional improvement, increased social participation, health, well-being and life satisfaction” (p. 245).

Horticulture therapy reflections

We have incorporated horticulture therapy into our lives and have experienced the benefits of it. Based on the literature given above made us evaluate why horticulture therapy is important in our society and our personal lives. Having the opportunity to participate in a community garden enabled me to engage in dialogue outside of the classroom during my graduate studies at Purdue University. The gardens were located in Tippecanoe County, Lafayette, Indiana. I was able to interact with several individuals who had a garden plot as well as the extension educator. The gardens were well kept and had different crops and some people planted flowers to beautify their gardens. Many times, when I felt overwhelmed by my studies or felt ill, I would go to the garden, to weed, plant, water plants, and observe the plants. Being involved in the community garden helped me to enjoy nature and overcome challenges when they arise. This opportunity provided me a breath of fresh air where I was able to interact with others, learn from others, felt relaxed, comfortable, and forget about my illness. When we harvest the crops from the community gardens, we shared it with fellow gardeners and others. Due to the wonderful experiences that I received from the community garden, it encouraged me to have a garden every growing season. I have been able to integrate a community garden into my life and have the opportunity to reflect on horticulture therapy and incorporate it into my teaching and interactions. For example, I engage in dialogue about the benefits and positive impact of horticulture therapy and how an individual can use it in their life.

When I began graduate school in Counseling at the University of Cincinnati, my graduate cohort and I were introduced to a post-civil war community at Saint Leo the Great Catholic Church. We were asked to do an assessment and create suggested interventions with the newly resettled refugees. After careful consideration we decided to interview the African refugees with a translator. Many of the refugees asked if they could have a green space to grow garden and vegetables that they were missing from their homeland. After a discussion with the civic garden center we gained access to seeds and tools and the small plot of land where we could grow these vegetables. As a graduate student and the only one with a car I became the transportation manager in charge of the garden. The refugees grew vegetables that are important to them and helped them feel safe in their new homeland.

We had a small barn and space to store tools. With the overflow of the garden we were able to sell some of the gardens produce at the local food market called the Finley market. Towards the end of graduate school, I realized how important that experience was and carried that over to this day for not only stress relief but meditation prayer time and the ability to reconnect with nature. I use gardening regularly today and have introduced this concept to some of the addiction recovery halfway houses I have worked at as a social worker. I also have brought this to group homes and places we do therapeutic foster care for Lighthouse Youth Service in Cincinnati (Trauth, 2018).

Discussion

Our paper provides insights into how horticulture therapy is used and how it contributes to our thinking and benefits. We provided examples and reflections that show collaboration with the community and individuals on horticulture therapy. We found that horticulture therapy offers many benefits. Adevi and Martensson (2013) posited that being involved in different activities for example, raking the leaves, weeding, and sowing seeds can have a remedial impact on patients as part of the horticultural therapy and help with stress. In another study, Kim and Park (2018) have found that “horticultural therapy, using
natural setting, helps to reduce stigma associated with conventional antidepressant treatment and enhances help-seeking behavior” (p. 158). Therefore, effective horticultural therapy programs must be created since it can treat depression and other illnesses in patients. However, being aware of these benefits is key and can significantly help patients especially in the recovery process.

Conclusion
In our current paper, we reviewed peer-referred studies to explore the benefits of horticulture therapy and reflected on our personal lives. There is a growing interest in horticulture therapy research and more people are using horticulture therapy. Therefore, it is important that counselors rigorously examine the benefits of horticulture therapy and incorporate them when they are working with patients. Additionally, counselors could work collaborative with policymakers, government, educators, researchers, hospitals, retirement homes, churches, public, and non-profit organizations and help people who need horticulture therapy but are not aware of the benefits. There could be established gardens that are designed specifically for horticulture therapy which could be developed in the hospitals, and throughout the communities. Lehmann, Detweiler, and Detweiler (2018) mentioned that horticultural activities are a stress reduction treatment modality and that individuals in their study participated in garden activities even on their own free time. Lehmann, Detweiler, and Detweiler (2018) highlighted that patients should be involved in the decision process of their health care as well as their health care services so that it aligns with their preferences and needs because “the greater the patient participation in their health care program, the better their treatment experiences and outcomes” (p. 53). In another study, Scott (2015) posited that gardening could be used as a way to help smooth distractions that individuals face during their illnesses. Boyle and Pryor (2019) stated that “using a horticultural therapist to guide and support the engagement of all inpatient rehabilitation clinicians in gardening activities broadens the reach of horticultural therapy and the scope of the role of the horticultural therapist” (p. 20). Therefore, having community gardens for horticulture therapy is important and should be developed, maintained, and involve the patients in the process as much as possible.

References


