



# Going back to nature

A project promoting mental health recovery through contact with nature and building relationships is providing results for service users, as well as bringing major savings to the local mental health budget, as Elisabeth Jeffries explains

**F**ive women and a man sit around a table inside a humid yurt in a most unlikely place – a suburb of Slough. One in the group is a coordinator, a few are patients and one is a doctor. But the way they talk you would never know which was which. They share an apple and blackberry pie made from their orchard containing trees now heavy with fruit. It is Thursday, the day people can turn up to Iver Environment Centre and do some gardening, tidy the yurt, cook produce made on the site or do nothing and watch. A bison made of scrap leathers guards the yurt, and a totem pole wards off harm.

But the seemingly uneventful gathering contains the germ of a therapeutic practice adopted by Rex Haigh, the psychiatrist in the group. Haigh chairs Growing Better Lives, a community interest company that develops and researches innovative approaches to mental health care. That includes the Greencare project at the Iver Heath site. Set in 2.5 acres, several inspirational zones and habitats can be explored beyond the yurt, such as a meadow, pond and wetland, woodland, allotment and pizza oven.

Greencare supports a range of activities in an environment that aims to promote physical, mental, social and spiritual wellbeing through contact with nature and engaging as a community. Haigh believes

Greencare has the potential to offer a radical alternative to traditional psychiatric approaches. It does so by helping people to relate to each other and to nature in a way that ‘gives people a life worth living on a planet that is worth living on’.

“By socialising and eating together, people usually become calmer and more chilled,” Haigh says. “Over time, they incorporate that into a feeling of being more settled, balanced and grounded. The Thursday group is available for people with personality disorders and long-term complex emotional problems. Only a few are present today but most people attending usually find it worthwhile.”

Sarah, one of the centre’s regulars, who enjoys doing cooking and gardening, adds: “It’s the highlight of my week.”

There are no deeper therapeutic activities, though people begin and end the day in the yurt with a chance to talk about their feelings. But for Haigh, this project, established in 2011 when the yurt was put up, is just the beginning. “Ultimately, I’d like it to be run as an all-singing all-dancing one-stop therapy shop for the largely deprived and dispossessed population of Slough based on principles of greencare and therapeutic communities. This is a combination I think we are pioneering,” he explains.

Among the many additional activities he would

Elisabeth Jeffries is a journalist covering sustainability and health

like to see introduced, either at Iver Heath or another suitable location, are equine therapy, an animal sanctuary therapy centre, help for those with addictions or a dual diagnosis and for veterans. “Traumatised veterans don’t get sufficient intensity of therapy from the [cognitive behavioural therapy]-type treatments through the big veterans charities, where there is very poor understanding of the psychological depth of problems in veterans,” he says.

### Different approach to risk

But these all require significant new sources of funding. The trouble is that the Greencare approach is poles apart from typical mainstream services that might gain public sector funding. For one thing, it is not accompanied by a structured risk assessment process. “This is the antidote to institutionalisation,” Haigh says. “It encourages interdependence and is congruent with but different to the recovery approach in which adults are encouraged to do children’s activities to get healthier.”

In the same way, it shuns a risk-based approach to accepting patients or measuring success. “It is against the ethos of Greencare to meticulously document every possible risk factor that arises, as is now mandatory in the NHS. We work to build therapeutic relationships and contain the risk through trust in those relationships rather than through reliance on an audit trail in an administrative system.”

Thus, as Haigh suggests, the current regulatory and governance framework of the NHS is incompatible with Greencare and its therapeutic community values. “I think that may be holding things up as much as the money,” he admits.

### Quality of relationships

By contrast, the Thursday group, as well as its potentially evolving extensions, provides time to learn about the quality of relationships. Under a different set of rules, they might be viewed as too unsafe. Coordinator Fiona, a former mental health service user, explains that patients might fail to be accepted if they were assessed on the basis of risk. Yet as she points out: “It was by coming here that I learnt to contain my risk.”

Fiona felt people related to her in a different way at Greencare – with acceptance, peer support, a feeling of belonging and the understanding that risk is part of everyday life. The space was safe enough to learn how to manage intense emotional distress without needing to resort to self-harm and suicide and to be able to cope with uncertainty. It was a feeling not of ‘being done to’ but ‘being with’ and allowing enough time that transformed ‘clinical risk’ into part of a healing process, she adds.

For as long as they like, patients explore relationships in a non-hierarchical setting. Risk is contained through the relationships, as people find out others around them care about them and they learn to look after each other. Individuals learn to contain their own risk through relationships, which they practise and model through Greencare to eventually repeat elsewhere. The non-judgemental natural environment provides a source of healing and vitality to support their progress. The co-operation process breaks down barriers.



**Inside the yurt at Iver Environment Centre**

Their only alternative might have been 20 weeks of counselling following hospitalisation – not nearly enough to help them on their way to a more stable life. To make matters worse, the local therapeutic community was closed in September 2013. One of its components was intensive therapy groups, which Growing Better Lives hopes to restart outside the NHS.

### Cost savings

That said, clients attending the Greencare Thursdays may soon be obtaining new funding due to an agreement to allow personal health budgets to be used for that purpose. It looks like it could make financial sense: figures from Greencare show it contributed to savings of £650,000 to the local mental health budget through avoided hospitalisation.

Greencare was previously part of ASSiST, a programme providing intensive structured psychosocial intervention intended for residents of East Berkshire with non-psychotic, borderline personality disorders and other emotional problems. Greencare cut the number of hospital days from 1,948 before it started to 86 afterwards, reducing costs from £681,800 to £30,100. It is still through ASSiST, or a community health team that service users are referred, normally following 20 days in psychiatric beds over the past year.

Some might be opposed to the route adopted by Greencare or find it weird. Yet the fewer bed days and sometimes reduced medication requirements, as well as the natural and resourceful setting, means it can be more sustainable and less costly than mainstream healthcare. It also has a lower environmental footprint.

But this approach could become more widely accepted. Since 2013, the Royal College of Psychiatrists has been investigating more sustainable approaches and building a national network of sustainability representatives. So maybe more people will get the opportunity to connect with nature and tune into the key to healing and recovery. ■