

An Overview of Social Farming in Ireland

The State of the Art

SOFAR Project

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1. Introduction.

It is necessary to preface the following commentary by noting that, to our knowledge, this overview represents the first attempt by Irish researchers from any discipline to provide a comprehensive picture of the nature and extent of Social Farming in Ireland. As such, the results should be regarded as preliminary and as seen a point of departure for further analysis. While our longer-term goal is to explore Social Farming on the island of Ireland, time constraints dictated that our predominant focus was on the Republic of Ireland. However, we did address a very limited number of projects in Northern Ireland. If time and resources permit, we would aim to include more initiatives from this region in our subsequent analyses.

The term ‘Social Farming’ is not one readily known or initially understood in Ireland. As elsewhere, the use of agriculture and horticulture as an activity within care settings such as within the old Psychiatric services and Intellectual Disability Services has a long history. However, in former times the use of agriculture and horticulture was largely as a vocational activity for clients and may often have made a significant contribution to the reduction of costs (through the provision of food) associated with running large residential institutions.

In this paper, no distinction has been made between social, therapeutic or vocational applications of horticulture or agriculture or working with animals. Therefore this overview casts a wide net, including *inter alia* farms dedicated to providing a quality living experience for people with intellectual disabilities, drug and alcohol recovery programmes, mental health day centres, community training programmes, peace building projects along the border with Northern Ireland, programmes for older people and many more besides.

2. Number of social farms in Ireland in 2007.

Traditionally in Ireland, care tended to be provided from within an institutional setting, often at great distances from the service users’ home due to the relatively

sparse population and consequent low concentration of demand in many parts of the country.

Today, within the health services and other care providers there is a new focus on person centred care and the need to move away from the artificial living conditions of many institutions. The focus is now on the re-integration of service users back into the wider community and also to re-integrate the wider community with service users.

However, such major shifts in policy take many years to take effect and although change is certainly evident, many of the ‘social farm’ situations reflect the traditional background to how these services were delivered.

The idea of linking a private farm with a social service is a novel one in Ireland although anecdotally this has been practiced on a one to one informal basis on many farms down through the years with no remuneration involved. There has been virtually no development thus far of social care farms as private farms as has emerged in some other areas of Europe. However, this is likely to change.

In the absence of an existing body of research on this area in Ireland, it is a difficult task to determine the current extent of social farm/care farm activity. There are no centralised accounts of Social Farming available in Ireland. Therefore wide ranging attempts were made to contact organisations and various state and non-statutory bodies and voluntary groups to attempt to develop a picture of the current ‘state of the art’. The details of this are provided in Table 1.0 below.

Table 1.0: Social Care and Farming in Ireland 2007.

Social Farming	Ireland
Private Care Farms	2
Institutional Farms and Sheltered workshops	80
Other Social Farming projects	8
Total	90

3. The history of Social Farming in Ireland;

Again, given the paucity of research on Social Farming in Ireland, our assessment of the history of these initiatives and the key actors involved is based primarily on informal discussions with a number of stakeholders and publicly available material (websites, annual reports etc.) related to specific initiatives.

Our analysis to date suggests that the earliest modern initiative related to Social Farming in Ireland dates from the mid-1960s. The establishment of the Cuan Mhuire Centre in Athy, Co. Kildare was the first step in what has evolved into a network of drug and alcohol treatment centres where farming and horticulture are considered as core activities (see www.cuanmhuire.ie).

Another key set of actors in the Irish context are the Camphill Communities who are established in approximately 15 locations in the North and South of Ireland. Their earliest interventions in Ireland date from the late 1970s when they established a therapeutic farm at their community facility for disabled adults and children in Co. Kilkenny. The Camphill Community network, with horticulture and farming as key components of life in their communities, has continued to expand throughout the island of Ireland in the 1980s and 1990s and another facility opened in Kerry in 2004 (see <http://www.camphill.ie/>).

The Irish Society for Autism, an organisation established in the 1960s sought ways to improve the quality of life for people with Autism. They established their first farm in 1982 identifying a farm as a nurturing healthy environment for people who may find it difficult to cope with excessive external stimuli. Their approach called the ‘Dunfirth model’ of living for people with autism has been adopted by groups in a number of countries in Europe (Matthews, pers comm., 2006).

Other early interventions include training programmes and day centres particularly in the wide arena of disabilities and mental health. The REHAB group, an independent not-for-profit organisation working with people with disabilities and others marginalised communities, has since 1975 provided training in horticulture, which in

recent years, has developed into a structured and accredited training programme (see <http://www.rehab.ie/>). Since 1973, elements of the Prison Service have been involved in providing access to farming and horticultural activities, specifically in open-prison or low security settings.

As detailed below, there has been a shift in care provision in Ireland from predominantly institutional settings to a more-community based model over the last 15 years or so. This is reflected in the growth of community-based Social Farming and horticultural initiatives since the early 1990s in Ireland. From a rural development perspective, of particular interest is the small but growing number of these initiatives which have benefited from the involvement and support of LEADER companies and other community development programmes such as the Local Development and Social Inclusion Programme. These include the White Oaks Centre which deals with drug and alcohol addiction; North West Parents and Friends which runs a day care centre for people with intellectual disability and linked up with a private farmer as a pilot initiative; a number of community and urban garden projects have been piloted with the support of such funds.

As discussed subsequently, one of the defining characteristics of these interventions in the Irish context is the important role of the religious and lay Christian communities and local volunteer groups. They have been involved in the inception and development of many of the key initiatives in Ireland. In the broader context of social service provision in Ireland, the Catholic Church in Ireland has historically been a key actor. However, its role in recent years has diminished somewhat, due both to falling numbers of vocations which have had knock-on effects for service provision, but also a shift in focus from direct service provision to more advocacy and policy-related work. Nevertheless, religious communities, often in partnership arrangements with different service providers and funders, are a key feature of many interventions in Social Farming in Ireland at the present time.

4. Estimation of the development of the number of social farms; and description of how characteristics are changing over time.

In the areas of mental health and intellectual disabilities there is a tradition of using agriculture and horticulture as ‘activation’ and as a means of generating either income or at least contributing to the up-keep of institutions. Many of the groups included in this study would have had historical involvement in ‘Social Farming’. However, in the past concerns were raised that institutions became more concerned with the production of goods and lost sight of the goal of developing the well being of the client. This has changed in many areas and continues to evolve with the focus moving to ‘service users’ and ‘person centred outcomes’ as a way to put the focus back on treating and helping the person and what they need and want and not fitting the person into the operating system.

Most of the sheltered workshops would have been set-up from anything between 10-25 years, particularly in the mental health field which was often initiated as a result of the closing and selling off of many farms attached to psychiatric hospitals and the development of day centres to provide services to service users’ moved out to community housing. Another possible significant factor in the development of sheltered workshops –training centre was the availability of funding for training under the European Social Funds (ESF); that acted as a major incentive to provide training services that could also operate as day care services and in this way create opportunities as outlets for service users (Anonymous, 2006).

Within intellectual disabilities services there appeared to be interest in moving away from industrial type ‘activation’ to horticulture. This could probably be accounted for under a number of reasons in addition to those given above, including a desire to provide a more meaningful activity for service users’; some recognition of the therapeutic benefits of working with soil and nurturing plants and also the employment opportunities available in the amenity horticulture sector, which has seen huge growth in the past 10-15 years in Ireland.

There is interest in using horticulture and agriculture as a rehabilitative activity in many situations. The Irish Prison Service uses horticulture and farming as one of the

approaches to develop new skills and confidence with prisoners whilst in detainment and to provide accredited training on their release.

As outlined previously, a number of treatment centres for drug and alcohol abuse use farming as a core activity to help people to overcome addiction. The first of these was established in the mid 1960s and the most recent example is in operation since 2004.

In Ireland, which until recently was a very agrarian based society, there is recognition that the incorporation of meaningful activities can yield better results in therapeutic situations and is being used in occupational therapy and long term residential care. In recent years, community groups have started to use horticulture in particular as a medium to promote healthy communities by building social capital, addressing food poverty issues and raising awareness of environmental concerns.

Community groups seeking to work with particularly disadvantaged groups such as long term unemployed men use horticulture and agriculture as a means to engage service users' and also as a conduit to encourage the service user to access other services offered.

Although small in number, there are isolated examples of farmers linking up with social services that have come and gone over the years, some informal or on a pilot basis others that were more formalised. However, currently we are aware of only two strictly privately owned farms that are offering a Social farming service in Ireland.

5. Profile of the project holders and the participants in terms of gender.

In terms of people involved with care services that have a Social Farming element to it, from a care providers point of view, the staff an even mix of both genders, perhaps the equal involvement of men might reflect a bias due to men being more associated with farming, ground based work. However of the case studies considered, most managers were male.

What is interesting to note however is the gender profile of participants. There is a much higher involvement of males in Social Farming activities in most cases, in the order of 60-70% male participation versus 30% or even lower among females. This may be accounted for by a number of factors. Male service users may be steered in this direction due to cultural biases of gendered work roles in relation to farming. Equally many female service users may not feel that some of the work is appropriate to them.

A particularly interesting finding was that the lack of childcare services may hinder involvement in some services. Within residential drug and alcohol treatment centres the lack of availability of childcare services is believed to be a major barrier to females who are trying to receive treatment. Programmes with residential programmes from 1 month upwards to a year may be inaccessible for women due to the lack of childcare provision. This could explain the bias in the profile of participants in these initiatives, where women comprise less than 10% of service users in these centres.

6. Short description of the main types of Social Farming

As can be seen from Table 1.1 the dominant type of care farm are those that are provided by existing institutions and/ or extensions of institutions. In the last decade, Ireland has experienced significant economic growth but it is not that long ago that the economy was in a very poor state. Prior to this current period the public spending available to care projects was limited in overall provision and imagination. In the absence of adequate state involvement, care for people with disabilities and other socially excluded groups such as alcohol and drug addicts was dominated by religious orders and voluntary groups as these groups time and time again attempted to occupy the vacuum left by the State.

This historical situation is still reflected in care provision in this country with many religious orders still providing core care, although supported financially to do so by the Irish Health Services Executive (HSE).

Table1.1: Social Farming care in Ireland by service

	Mental Health	Intellectual Disabilities	Physical Disabilities	Prisoner Rehabilitation	Older	Drugs & Alcohol Recovery	Community Development	Total
Care Farms		2						
Institutional Farms and Sheltered workshops	15	57	8	2	3	7		
Other Social Farming projects	2	1				1	8*	
	17 (19%)	60 (67%)	8 (9%)	2 (0.02%)	3 (.03%)	8 (9%)	8 (9%)	**106

*In addition, there are 75 voluntary Riding for the Disabled groups nationally that use commercial equestrian facilities for this work. **A number of care providers offer more than one service, therefore they have been counted twice; % calculation based on estimate of 90 initiatives.

Traditionally, this care was provided in large institutions, but over the last 15 years increasingly there is a move away from this model to one of trying to integrate service users' into the wider community by developing social skills and supported living in communities. The use of horticulture would have been used to some extent in the past as activation for those in care. But with the move of service users out into communities there was a need to provide day care services and this has led to a growth in the area concurrent with an increasing demand for amenity horticulture services in Ireland over the same period. Alongside the asserted therapeutic benefits of working with plants and soil, there would be a focus on the use of horticulture as a vocational activity with accredited training available with a stated intent at least, for progression to employment. The positive impact of learning new skills and the opportunity to attain gainful employment undoubtedly add to a person's self-actualisation. Many of these services operate in-house workshops or day-centre activities; they may provide sheltered employment with varying degrees of commercial exposure and/or have links with external employers that provide employment opportunities for service users.

Within this general area there are specific projects of interest, the Camphill Communities and the Irish Society for Autism operate farms specifically for the therapeutic benefits of offering a natural environment for service users to live and work. The focus of these farms would be for the care and development of the person, whilst using the medium of agriculture and horticulture.

In the mental health services the provision of 'activation' facilities often were anchored around farms and nurseries, they provided food for the institutions and activity for the service users. However, there has been significant movement away from this, particularly with increased interest in a more integrated community model being developed.

There are a number of interesting approaches to incorporation of farming and growing into the treatment of drug and alcohol abuse. There are eight centres in the country and one other farm based community, using the value of learning to nurture from a seed to harvest or care for farm animals as a core part of a system of holistic therapeutic treatment which are yielding very good comparative results against other treatment options.

There is growing interest amidst the community and voluntary sector to become involved in local initiatives to promote sustainable communities through farming and horticulture as a means to build social capital by getting people working and learning side by side, using community gardens as a way to promote peace by getting cross community involvement in Northern Ireland and the border counties of Ireland; promoting environmental awareness and also promoting a healthier lifestyle through good food and outdoor activity.

7. Benefits of Social Farming to society.

Stakeholders involved in Social Farming by and large believe that involvement in Social Farming has immense benefits for service users. For many this is observed through the modification of behaviours, reduced need for medical intervention and hospitalisation or simply through the awareness that service users enjoy working with

soil, plants and animals. Among the drug and alcohol treatment centres many use the analogy that if you can teach someone to nurture a seed to grow, people can learn to care and nurture their own selves and also people around them. Many talk of the benefits of working in a healthy open air environment and increasing awareness of the natural world. For many service users, previously used to a sedentary lifestyle in confined spaces, the physical benefits of working with the land can be very important. The open spaces for those that might need some quiet reflection time from the hustle and bustle of the communities they live among or the training programme can be very important.

Social Farming is seen as a positive means to integrate people within communities and de-stigmatises services that may have been at a remove from the rest of society. Service users learn new skills and can readily identify with their role 'I am a farmer' 'I am a gardener' due to the very tangible and real nature of the work. By learning new skills and by earning responsibility the self-esteem and confidence building opportunities are immense.

As private farmers become increasingly isolated with the decline of farm numbers generally the opportunity to 're-socialise' farming through Social Farming offers potential additional societal benefits.

8. Environmental benefits to society.

There may be a common cause to be found between people who believe in the benefits of Social Farming and organic farming or sustainable farming. Of the 90 projects included in the inventory, 40% followed organic practices or low input agriculture as a matter of principle in keeping with the overall ethos of their work.

An urban sustainable garden project, Tunnel Vision which is a collaboration between mental health, physical, and intellectual disability services and two training organisations have worked with participants and trained them in the areas of horticulture and environmental awareness which these participants with a range of disabilities, now teach to primary school children in two schools in their area.

Many of the projects included environmental awareness, education and dissemination of practices which could indicate that Social Farming may contribute to enhanced environment and landscape quality.

9. Economics of Social Farming.

In Ireland, as almost all of the Social Farming type initiatives are attached to or embedded within care or community services and the virtual absence of private care farms it is not possible to analyse the contribution of care activities to farm income.

In most cases the Social Farming element of activities is not readily distinguishable from the other care service elements and is treated as part of the overall operational budget. In those cases where some goods may be sold e.g. garden centres as part of a social service, the Social Farming element is not expected to make a profit but rather balance its income and costs. In almost all cases, staff are paid out of the overall operating budget and not from Social Farming activities as these would be insufficient to meet staffing costs.

There are many different arrangements in place across projects for example, co-workers in Camphill communities receive no payment for their work as carers and are therefore effectively volunteers. Costs of services vary greatly dependent on the nature of the service in terms of usage, residential or otherwise, vocational or more specialised therapeutic provision. This varied and sometimes apparently random pricing structure may have implications and present problems for the potential development of Social Farming in Ireland.

10. Social Farming Networks.

In Ireland there are no dedicated formal networks established to promote the development of Social Farming. This research is one of the first attempts to bring different actors from across the social care sectors together in the one forum.

Throughout the compilation of an inventory of projects in Ireland there has been great interest shown by participants in the results and the means of making contact with other service providers and interested parties through the facilitation of contacts via the SOFAR project.

Notwithstanding this, across Ireland there are a wide array of religious, community and voluntary groups involved in the provision of Social Farming, particularly in the areas of intellectual and physical disabilities. There is significant co-operation both *within* these communities and *between* the various elements of these groupings.

As detailed earlier, Camphill Communities exist in approximately 16 locations on the island of Ireland and therefore constitute a broad network throughout the country. Religious communities such as the Sisters of Charity are behind the establishment of other key long-established networks such as the Cuan Mhuire Centres for drug and alcohol addiction.

The mental health area would be characterised as being led by the Health Services Executive (HSE), which is the national statutory agency with operational responsibility for running the country's health and personal social services. However, as detailed earlier, there has in recent years been a major growth in voluntary and self-help groups in this sector, with increased focus on service user needs. The HSE retains a major role in the funding of many of these initiatives.

A proportion of the training and education programmes undertaken in the context of Social Farming and horticulture in Ireland are accredited and supported by relevant agencies such as FETAC (the national awarding body for further education and training in Ireland and FAS (the national training and employment authority). There is some involvement by elements of the secondary school system, particularly the Vocational Educational Committees (VECs). In Ireland, these have been major actors in providing educational opportunities in marginalised communities, so-called “second-chance” education and adult learning opportunities.

11. Regional and national policies relevant to Social Farming.

Potentially, the issue of Social Farming cross-cuts a range of policy domains including, *inter alia*, health; agriculture; rural development; environment; criminal justice and education. However, a joined-up approach to policy-making is not a strong feature of the Irish political landscape. Consequently, there is no evidence of any coherent policy to support the development of Social Farming in Ireland, either at an integrated level or, indeed, at a sectoral level.

This is reflected in the ad hoc nature of many of the initiatives undertaken which are largely determined by the vision of a small number of key stakeholders in each situation and the receptivity of local decision-makers. There is no standard approach across the country but rather isolated and fragmented groups developing according to their needs with little replication taking place elsewhere. However, this situation is no different to that which pertains in many other areas of social policy in Ireland.

A persistent critique, frequently voiced from within the sector itself, is that committed community/voluntary effort has effectively allowed the State “to look the other way” in terms of meetings its commitments to social service provision and has reduced its role to that of philanthropist. While recognising the significant benefits which accrue to society from the presence of the community/voluntary sector in this area in terms of building social capital, there is nevertheless a view that such activities should be a complement to, and not a substitute for, appropriate State intervention in the sector.

The lack of adequate funding to develop and maintain social services is highlighted by the plethora of training programmes developed in this area and squeezed to fit into programmes aimed at increasing participation in the labour market. Often in practice the project promoter or social care provider may not be interested in employment progression *per se* but rather finding the means to keep an initiative alive or establish a new project. Another difficulty that severely hinders development in this area is when a project may have been able to secure funds for a pilot initiative from for example LEADER are left with no clear path to follow once the initial funding is exhausted as there is no clear home for Social Farming initiatives.

During the course of preparing this overview, FÁS (National Training and Employment Authority for the labour market) although admitting that in practice they fund many ‘Social Farming’ type projects, clearly affirmed that this was not within their remit and that many projects look to them for programme money because funding for social services such as Social Farming is so constrained elsewhere (Anonymous, senior staff FÁS, 2007).

At the same time, it is interesting to note that the aforementioned Health Services Executive, (National body responsible for the delivery of health and much social care) as the key funder in this area, does already fund many varied approaches to using horticulture and agriculture as part of social care and may be amenable to the development of a consistent and innovative Social Farming model at a national level. However, within this national body there appears to be very little sharing of local practices or promotion of the work already taking place as evidenced by the complete lack of awareness of activities happening in different sectors e.g. mental health versus intellectual disability services within the same region and no awareness outside regions within the same service.

In addition to a supportive and coherent policy framework, there are many other dimensions of the institutional environment which can help or hinder the appropriate development of Social Farming services. For example, in the Irish context, regulatory issues pertaining to public liability insurance, health, safety and hygiene have proven to be major stumbling blocks in the development and expansion of small scale enterprise in Ireland. More specifically, it has acted as a barrier to the uptake of farm diversification activities which is highly relevant in the context of the provision of care farming.

12. Introduction and use of quality systems by social farms.

A number of the larger care providers are developing quality assurance systems based on the ‘Person Centred Outcomes’ as developed by Council for Quality and Leadership. To facilitate the further development of this among smaller organisations a pilot is currently being ran in the community and voluntary sector by Pobal, an

independent, though state funded agency charged with supporting the development of the community and voluntary sector in Ireland.

In some cases, individual services have, or are in the process of developing, quality assurance and monitoring services within their own work. However, as discussed above, there is an absence of any clear sectoral or integrated policy for this sector which would obviously be a pre-requisite for the development of appropriate quality assessment/quality improvement systems.

13. Questions and potential issues in the development of Social Farming in Ireland.

The aforementioned lack of a joined-up policy guiding the operation and development of Social Farming in Ireland is clearly the over-riding issue and a particular challenge given the range of sectors and policy domains across which it intersects. As in other areas of social policy, the appropriate balance between State involvement and community/voluntary sector is another contentious issue. This is particularly important in the Irish context, given the historic role of religious communities in service provision and the certainty that this will not continue into the future, for reasons outlined previously.

In terms of the future of policy formulation and service delivery in Ireland, there is increasing pressure from the disability movement in particular to frame initiatives within a rights-based approach and to move away from a medical model towards a social model of disability. Another dimension to this debate is the articulation of the need to move towards the need for “basic rights” as distinct from charity, along with the entitlement to equality and full participation for people with disabilities. These developments are part of a wider debate taking place on Irish public-policy making around the issue of putting economic, social and cultural rights on the same footing as civil and political rights in terms of enforcement of entitlement.

Adequate financial resources dedicated to the provision of social services is a major issue. Many community, voluntary and non-statutory initiatives expend considerable

energy and human potential seeking new ways to ‘fit’ programmes under the available funding opportunities. Not only is this a wasteful use of staff time, the danger is that an initiative that seeks to fill an identified gap in services may through time become moulded to ‘fit’ funding streams available rather than responding to the needs of the community it serves.

The nature of the activities undertaken under the banner of Social Farming needs careful consideration. If a service is being provided to service user the terms may be clear. However if some of the services cross over into a commercial entity and service users are involved in adding value to goods that are sold for a profit, how is that contribution recognised? The ‘ethics’ of ‘using’ service users labour in projects requires sensitive handling, particularly as it is evident that service users may be desirous of being a working member of a team and all that that entails.

This and other areas will require sensitive and perhaps case by case handling. Which leads to another area of concern; safe guards must be adhered to in terms of the relationships and practices involved. However, at this experimental phase of Social Farming development, excessive regulation, particularly in the embryonic stages, may stifle innovative and worthy projects.

14. Research in the field of Social Farming.

As stated in the opening section of this paper, to our knowledge, there is no relevant body of research on this topic from an Irish perspective in any discipline and the SOFAR project is “pioneering research” in that regard. We are aware of one “desk-based” study conducted in Ireland on the contribution of social horticulture to the development of social capital but it does not relate specifically to Ireland.

15. Education, training initiatives related to Social Farming.

Many of the training courses provided have accredited training programme. This says as much about the vocational nature of ‘therapeutic’ applications as anything else. It

is also a reflection on the utilisation of funding sources which are tied to employment models to receive funding. However, the FETAC (vocational system) accreditation has merit in terms of the progression of some service users in terms of building confidence and providing recognised qualifications that are transferable in the open labour market.

Then there are other initiatives such as the training course developed by the Camphill Communities (Introductory Training for Camphill) that co-workers undertake. Another instance relates to one of the services providing training to people a variety of disability backgrounds, which as a therapeutic activity, encourages participants to go out to primary schools and teach children about growing plants and use it as a positive interaction for all involved. Another initiative of note is the Certificate in Citizenship and Advocacy for Students with Intellectual Disabilities which has been offered by University College Dublin for the last number of years. Social horticulture is an integral component of this course in which students study the interaction between humans and plants and how this knowledge can be used to improve people's lives.

16. Other relevant aspects to understand country situation.

As discussed earlier, Social Farming is an area which has received relatively little attention in public policy or research circles to date, notwithstanding the fact that there is a substantial amount of activity taking place, albeit in a fragmented and un-coordinated way and arguably as a substitute for State involvement in the sector.

From a rural development perspective, there are very few examples of Social Farming or care farming as a diversification strategy or as an alternative enterprise among farming families. However, through the circulation of information about the SOFAR project to representative bodies and individual stakeholders in the process of this research activity, the level of interest in Social Farming is remarkable. Informal discussions with farmers at recent Teagasc (the national food and agriculture advisory authority) rural conferences suggest that there is untapped potential in this regard, with a number of farm households showing a willingness to investigate the nature of

care farming activities and to seek further information about what such an enterprise might entail.

Social Farming has a clear and positive resonance with service users, farming people and service providers alike, as evidenced by the interest and willingness of stakeholders to engage in this research. This suggests the timeliness and necessity of this research and augurs well for the future development of Social Farming in Ireland.

References

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