

Decision-Maker Talking Points

What is therapeutic horticulture?

Therapeutic horticulture is the intentional use of plant, gardening and nature-based activities to support identified health, wellbeing, participation or quality-of-life goals.

Activities are selected and adapted according to the needs, strengths, interests and abilities of the people taking part. Programs may be facilitated in healthcare, recreation, education, residential care and community settings.

Therapeutic horticulture can take many forms. It does not require a large outdoor garden. Programs may include indoor plant care, seed starting, propagation, sensory activities, floral and botanical projects, food growing, garden visits and seasonal nature-based experiences.

Why should our organization consider it?

Therapeutic horticulture can provide an engaging and flexible way to support participant goals while creating opportunities for connection with plants, nature and other people.

Depending on the population, program design and setting, therapeutic horticulture may support areas such as:

- Meaningful activity and participation
- Social connection and communication
- Emotional wellbeing and stress reduction
- Cognitive and sensory engagement
- Physical movement and functional skills
- Choice, autonomy and confidence
- Connection with personal interests, identity and past experiences

The strongest program proposals connect therapeutic horticulture with needs that the organization has already identified rather than presenting it as an unrelated new activity.

How can it support organizational priorities?

Therapeutic horticulture may help an organization strengthen existing priorities related to:

- Person-centred or participant-directed care

- Meaningful recreation and engagement
- Mental health and wellbeing
- Social inclusion and community connection
- Rehabilitation or maintenance of functional abilities
- Non-pharmacological approaches
- Staff confidence in facilitating purposeful activities
- Quality improvement and participant experience
- Accessible and inclusive programming

The exact connection will depend on the organization's population, services and strategic goals.

How is therapeutic horticulture different from ordinary gardening?

Gardening can be enjoyable and beneficial on its own. Therapeutic horticulture adds a more intentional layer of planning and facilitation.

A therapeutic horticulture practitioner or trained facilitator considers:

- Who is participating
- What they want or need from the experience
- The purpose of the activity
- How the activity can be adapted
- Physical, emotional, cognitive and environmental safety
- How participants will be supported to make choices and take meaningful roles
- How the program's value or outcomes will be observed and evaluated

The plant activity is the medium. The participant experience and intended goals guide the program.

What does the research say?

A growing body of research has examined plant, gardening and nature-based programs with populations including older adults, people living with dementia, people experiencing mental health challenges, children and youth, and people participating in rehabilitation.

Research suggests that well-designed programs may support outcomes such as engagement, mood, social interaction, quality of life and selected cognitive or physical outcomes. Findings vary according to the population, setting, program design, duration and research methods.

Therapeutic horticulture should not be presented as a guaranteed treatment or as a replacement for established healthcare or therapeutic services. The evidence is most useful when it is connected carefully with the needs of a specific population and organization.

Refer to the accompanying Therapeutic Horticulture Evidence Guide for population-specific findings and sources.

What would be required to offer a program?

The resources needed will depend on the scale and setting, but a program can often begin modestly.

Initial considerations may include:

- A clearly identified population and program purpose
- A staff member or facilitator with appropriate knowledge and training
- A suitable indoor or outdoor space
- Accessible tools, plants and materials
- A manageable schedule
- Participant intake and safety information
- A basic budget
- Support from relevant clinical, recreation, education or operational teams
- A simple method for gathering feedback and evaluating the pilot

An organization does not need to build a therapeutic garden before beginning. Many programs start with portable, indoor or container-based activities.

What are the main safety considerations?

Safety planning should reflect the participants, setting and activity.

Considerations may include:

- Allergies and sensitivities
- Toxic or irritating plants
- Tool selection and supervision
- Infection prevention
- Soil and growing-medium handling
- Food safety

- Mobility, balance and fall risks
- Sun, heat and weather exposure
- Cognitive, behavioural or sensory needs
- Medication-related risks
- Emergency procedures
- Staff scope, competence and organizational policies

Activities should be adapted so that participants can take meaningful roles without being exposed to unnecessary risk.

How can activities be made accessible?

Accessibility should be considered from the beginning rather than added after an activity has been selected.

Adaptations may involve:

- Adjusting table, bed or container height
- Offering seated participation
- Using lightweight or adapted tools
- Preparing materials in advance
- Breaking activities into manageable steps
- Providing visual, verbal or sensory cues
- Offering different levels of participation
- Reducing physical effort or repetition
- Considering fatigue, attention and processing time
- Providing meaningful choices

A participant does not need to complete every step independently for the experience to be purposeful.

How could we begin without making a large commitment?

A small pilot can help the organization assess feasibility and interest before expanding.

A pilot might include:

- One clearly defined participant group
- Four to six sessions
- A limited number of activities

- Use of an existing indoor or outdoor space
- A modest materials budget
- A trained facilitator and appropriate support staff
- Participant and staff feedback
- A short review at the end of the pilot

The pilot should have a defined purpose and evaluation plan. This makes it easier to decide whether the program should be continued, adapted or expanded.

How would we know whether it is working?

Evaluation does not need to be complex, but it should connect with the program's intended purpose.

Possible measures include:

- Attendance and participation
- Participant interest and engagement
- Mood or observed affect
- Social interaction
- Completion of functional or activity-related goals
- Participant choice and initiative
- Staff observations
- Participant or family feedback
- Pre- and post-program surveys
- Progress toward individualized goals
- Practical considerations such as cost, staffing and feasibility

The organization should determine in advance which outcomes are realistic and meaningful for the participants and setting.

What is the proposed next step?

Rather than requesting approval for a large permanent program immediately, consider asking for one specific next step:

- Permission to develop a short pilot proposal
- A meeting with relevant department leaders
- Approval for staff training
- A small pilot budget

- Permission to consult participants about their interests
- Identification of an appropriate space
- Formation of a small interdisciplinary planning group

A focused request is easier for a decision-maker to evaluate and gives the practitioner a clear way to move the conversation forward.

Suggested closing statement

Therapeutic horticulture offers a flexible way to support meaningful participation and connection with plants and nature. I would like to explore how a small, carefully planned initiative could align with our participants' needs and our organization's existing priorities. My proposed next step is [insert specific request].