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Multifunctionality and care farming: Contested discourses and practices in Flanders

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ABSTRACT

In recent years, European political, professional, and scientific interest in care farming – the farm-based promotion of human health and social benefits – has been growing. This growing interest can be largely explained by transformations within the agricultural sector (from productivist towards multifunctional practices) and within the health and social service sector (from highly institutionalized to community care). The concept of care farming has the propensity to bring the above transformations together and link the two formerly distinct sectors. In practice, however, boundaries between such distinct social worlds are not easily bridged. This paper studies to what extent and why care farming in Flanders (the northern part of Belgium) is characterized by synergetic practices and coalitions that move beyond traditional sectoral boundaries. Based on a literature study and qualitative interviews with different actors involved in care farming operating at different institutional levels (including care farmers, care institutions, farmer and care sector representatives, and representatives of the Ministries of Agriculture and of Public Health), the paper determines the discourses and practices enabling and constraining cross-sectoral synergies. The paper concludes with discussing the impacts that these enabling and constraining factors have (had) on the innovative character of care farming in Flanders.

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1. Introduction

In recent years, European political, professional, and scientific interest in care farming – the farm-based promotion of human health and social benefits [1] – has been growing. This growing interest is for an important part inspired by transformations within the agricultural and the health care sectors [2,3]. Agriculture goes through substantial economic, socio-cultural, and ecological changes in the face of altering political, market, and social demands [4,5], signifying a shift from a productivist towards a multifunctional agricultural regime [6]. The conventional, highly institutionalized health care system is increasingly challenged on cost-efficiency and moral grounds [7], triggering a socialization of care through an integration of clients in society with a focus on clients' potential to actively participate in community life [8,9]. The concept of care farming has the propensity to bring the above transformations together and link the two formerly distinct sectors [10].

Care farming is often portrayed as a win-win situation for agriculture and health care [11,12]. Within the framework of multifunctional agriculture, care farming comes forward as a

'broadening' activity that may widen farmers' income flows, contribute to (re)new(ed) agriculture–society relations, and foster rural development [13]. From a socialization-of-care perspective, care farming signifies a concrete example of an empowerment-oriented practice centring on social integration [3]. Yet, despite these apparent cross-sectoral benefits, the boundaries between distinct social worlds like those of agriculture and health care can be difficult to bridge in European practice [1,12].

In the emerging body of social scientific literature on care farming, care farming is principally considered a social innovation a set of novel strategies, concepts, and organizations that meet social needs and strengthen civil society [1] - that is locally rooted in perspectives and practices of farmers or small groups of local stakeholders. Stemming from such distinct localities, which in turn are embedded within context-specific socio-economic and political structures, care farming may institutionalize in different arrangements (e.g., market-based ones as in the Netherlands, or voluntary ones as in Italy [13,14]), and in different combinations of 'care' and 'farming' (e.g., a deliverance of care on private farms as predominantly found in the Netherlands, or an integration of farming practices in health care institutions as in Austria and Germany [15]). Yet, despite such context-specific differences, it is generally claimed that pathways of innovation can be seen as the same throughout Europe, with a mutual recognition and funding of care

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farming arrangements by both the agricultural and health care sectors as an endpoint [1,11].

Analysing the factors that stimulate such an innovation, scholars tend to adopt institutional and rational choice approaches – leading respectively to a focus on issues as norms, organizations, procedures and laws (institutions), and on knowledge and information. For instance, Vik and Farstad [12] argue that in Norway institutional frameworks that facilitate market transactions between farmers and health care agents should be constructed to embed care farming in the distinct social worlds of these agents and to stimulate growth in the number of care farming services. In Di Iacovo and O'Connor [1], an improvement of knowledge and awareness about care farming is considered key to promoting a mutual recognition of care farming amongst agricultural and health care agents, and a subsequent institutionalization of care farming arrangements in judicial and policy frameworks.

From these conceptual perspectives, social scientists have tended to consider care farming arrangements in Flanders (the northern part of Belgium) as an illustration of care farming's innovative potential, because unlike many other EU regions and countries, Flanders has established an institutional framework that mediates cross-sectoral interaction, and has a relatively large number of care farms [11,16]. This paper critically examines to what extent and why care farming arrangements in Flanders are actually characterized by synergetic practices and coalitions that create cross-sectoral benefits and innovation. We do so by taking the meaning-giving 'homo interpreter' as an analytical starting point of our analysis, which provides an alternative to the models of the rational 'homo economicus' and the norm-following 'homo sociologicus' and allows for drawing another picture of Flemish care farming developments [see also 17,18]. Based on a literature study and qualitative interviews with care farming agents from different sectors and different institutional levels, we determine the discourses and practices enabling and constraining crosssectoral synergies. Subsequently, we discuss the impacts that these enabling and constraining factors have (had) on the innovative potential of care farming in Flanders, and reflect on our analysis' contribution to the growing body of literature on agricultural and health care innovation through care farming in Europe.

2. Care farming discourses and practices

To gain insight into the degree to which and reasons why Flemish care farming institutions and practices originate from and contribute to innovative cross-sectoral synergies, we adopt a discourse analytical approach. Rooted in the interpretative tradition of the social sciences [19], discourse analysis accommodates the existence of the distinct, socially mediated realities that are observed to exist in the European agricultural and health care sectors [1,12]. Discourse analysis starts from the assumption that a discourse which can be defined as an ensemble of social representations through which meaning is given to social and physical phenomena - is constituted in, and constitutive of social practices [19]. So this approach implies that agents' positions towards care farming do not principally stem from social world's norms, or from rational actors' responses to objectively determinable opportunities to promote multifunctional agriculture or the socialization of care [17]. Instead, this approach analyses these positions by studying the processes through which agents construct discourses by giving meaning to care farming and through which existing discourses and practices structure this meaning-giving process [18].

Discourses can be expressed at the levels of institutions and everyday practices, and can be linked to networks of actors sharing them. These 'discourse coalitions' emerge when discourses suggest a shared way of comprehending the world by reducing discursive

complexity, allowing actors to fit in their bits of information in wider knowledge frames [20,21]. Discourses situate phenomena in cultural, historical, and political contexts, and position actors in relation to these phenomena. In this way, (key actors in) discourse coalitions legitimate particular practices and policy options over others – either formally if discourses become translated into policies and organizational arrangements, or informally if agents internalize discourses and 'discipline' their thinking and acting on the basis of them [19,22]. Accordingly, discourse analysis allows for a focus on how care farming arrangements are informed and (de)stabilized by ideas, concepts and categories that are advocated and adopted by actors and their coalitions.

Analysing care farming arrangements in different European countries, Bock and Oosting [15] distinguish three analytically distinct meta-discourses that inspire these arrangements: (1) the discourse of multifunctional agriculture (care farming as a novel agricultural function and income source), (2) the discourse of public health (care farming as a health promotion instrument operating through clients' engagement with nature and green labour), and (3) the discourse of social inclusion (care farming as a facilitator of social re-integration and social justice). The authors note that normally one of these meta-discourses predominantly informs national organization and payment forms [1]. If, however, care farming practices in Flanders are valued as innovative crosssectoral arrangements, we may expect to find that neither the discourse of multifunctional agriculture, nor that of public health or social conclusion is - formally or informally - significantly more dominant than the other(s) in stimulating this innovation.

3. Methodology

To study how discourses and discourse coalitions were constitutive of, and have been constituted by Flemish care farming arrangements, we conducted a literature study and 21 qualitative interviews with care farming agents from different sectors and institutional levels (see Table 1). For our literature study, we selected all available Flemish legislative texts and parliamentary documents dealing with care farming,1 as well as grey literature that interviewees considered key documents in the history of care farming in Flanders. To gain further insight into (the history of) care farming discourses and practices of different government departments, non-profit organizations, and unions and umbrella organizations, we interviewed representatives of these organizations who are responsible for following up care farming issues. We applied snowball sampling to assure that our selection covered all relevant organizations, and ceased interviewing once interviewees' information no longer improved insight into organizational dynamics and the point of data saturation was hence

To study cross-sectoral dynamics amongst actors who together constitute everyday care farming practices, we interviewed three sets of: (1) care farmers; (2) representatives of care facilities from different sectors involved in care farming arrangements (foster care; psychiatry; care for mentally impaired persons); and (3) clients or their family members.² These actors were approached

¹ These documents are available through an online database from the Flemish Parliament, available at: http://www.vlaamsparlement.be/Proteus5/zoeklnArchief.action. Documents were searched for by using the terms zorg-boerderij (care farm), zorglandbouw (care agriculture), and groene zorg (green care), which yielded respectively 46, one, and 22 documents on 4 August 2011. The database contains documents from the parliamentary year 1971–1972 onwards. All documents containing the above search terms stem from the parliamentary year 1999–2000 onwards.

² We interviewed one client one-on-one, one client together with his parents, and one client's mother.

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