

# Stabilizing a care farming project: Challenges and importance of supporters

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**Abstract:** Innovation always means combining old and new practices. In the case of care farming, this means that the daily necessities of the agricultural business need to be in accordance with clients' needs. This paper focuses on "emotional stress" that was observed to be a possible problem for care farmers when implementing the new practice. The attention is on from whom care farmers obtain certain forms of support, respectively how they profit from being affiliated with a group of care farmers. Therefore a qualitative personal network approach is combined with an innovation theory in order to focus on challenges and problems that occur in the implementation period. As a result, this research proved the advantages of being affiliated with a group of care farmers and it has also shown that continuing contact between care farmers and clients' key care givers and care experts is indispensable in order to stabilize a care farming project and to decrease emotional stress.

**Keywords:** Qualitative Social Network Analysis, Care Farming, Innovation

## Introduction

In the present time farmers are forced to find new income possibilities beside food production in order to maintain their business, meaning they have to change their previous practice because the traditional form of farming does not stand the test of time. As a consequence, some farmers follow the idea of multifunctional farming, whereas the innovative practice of care farming is part of it. Care at farms is an increasing phenomenon in Europe, a new practice that provides people with special needs with meaningful work and offers new forms of therapy and care. In this research I use the term *care farming*, which is defined by the SoFar-research group (2007) as follows:

Social farming (or 'care farming' or 'green care') is a term used to describe a wide range of diverse farming practices aimed at promoting disadvantaged people's rehabilitation or care and/or contributing towards the integration of people with 'low contractual capacity'. (SoFar-research-group, 2007, 88).

The fact that farmers are looking for new income possibilities with the consequence of the development of multifunctional agricultures in general and care farming in more specific terms, is strongly connected to the demand for this offer in contemporary time. On one hand, care farming offers possibilities to enhance rural development because it is a new income alternative for farmers and it produces new working places for other professionals in the countryside. It offers possibilities to connect urban and rural areas, as in the case of the Netherlands where drug addicts or homeless people from Amsterdam do meaningful work on care farms near the city. On the other hand there are many developments in contemporary times that demand new forms of rehabilitation, long-term care etc. For instance, one third of all economically active Austrians were "exposed to at least one mental factor at work that can have adverse effects on health, suffering most frequently from time pressure or overload of work" (Statistik-Austria, 2007, 12). Demands of the professional world do often not accord with the capacity of individuals. Subsequently burn-out or drug abuses for instance accumulate within the time of individualization because one has to be able to cope with having multiple options. Another typical development of contemporary time is that we face a superannuation of the population. Currently Austria has about twenty-two percent of inhabitants older than 60, but it is expected that this number will increase by about one third until the year 2075 (cf. Statistik-Austria, 2008, 16ff). Subsequently, there will be an increasing need for new forms of

rehabilitation and care places in the future. Hence care farming could offer alternative forms to live, to provide therapy and care for people with special needs.

To put the focus on the potential of care farming for diversifying agriculture, an investigation of farmers' needs when implementing this new practice is essential. Little is known about handicaps experienced by farmers when implementing a care farming project and care farming is not yet investigated from innovation- and network-theoretical perspectives. Putting the focus on farmers' perspective and focusing on the farmers' personal network and its influence on the process of innovation could enhance the understanding of the development of care farming. Consequently, the aim of the following chapters is to explain why it is meaningful to understand care farming as an innovation but also to emphasize and to constitute the importance of a social network perspective.

## The innovative practice of care farming – A collective effort

In difference to technical innovation, social innovation means a change of social action (cf. Gillwald, 2000, 41). Following Gillwald (2000) technical innovation is rather positively honoured by society and easily implementable because, in general, politically and economically strong groups develop it. In fact, quite the opposite is true for social innovation. It is seldom positively accepted by society and difficult to implement because economically and politically weak groups often try to develop it to advance their own situation (cf. IBID. 2000, 37).

Care farming can be understood as a *social innovation*, but in order to narrow down this quite abstract term, a specification is made by using the term "new practice". According to Reckwitz (2003) a precondition of a social practice is that there is a consensus about normative rules, meaning the new practice of care farming must be brought into the focus of a care farmer and understood as socially valuable. In practice theory, "social" is not an outcome of individual action but individual action is based on social rules (cf. Reckwitz, 2003, 287). A social practice means behaviour routines realized by individuals who incorporated "practical knowledge, skills, know how [...] [or in other words] practical understanding in the sense of 'to be skilled at something'" continues Reckwitz (cf. IBID. 2003, 289). Furthermore, there is on the one hand "routinization" of a practice, but on the other hand "unpredictability" or "relative closeness" and "relative openness". If a certain practice does not prove itself, no matter for what reason, a modification of the practice is likely. This is how a new practice can develop (cf. IBID, 2003, 294).

If we transfer Reckwitz' approach to care farming it can be interpreted as follows. In the present time farmers have to change their previous practice because the traditional form of farming does not stand the test. Hence, farmers are forced to find new income possibilities beside food production in order to maintain their business. Some farmers follow the idea of multifunctional farming, whereas the innovative practice of care farming is a part of it. If farmers offer care at their farm, they need to value this new practice as positive and need to know how to practice it when implementing this innovation. Moreover, they need to be able to cope with occurring problems and challenges in order to stabilize the new practice.

The stabilization of the new practice demands to bring the needs of an agricultural business and that of clients in accordance. A precondition of this work is that the stabilization of care farming is assumed to be depending on care farmers' social networks, because new practices demand an infrastructure. They need to be cognitively, emotionally and technically embedded in order to be stabilized. This assumption is in accordance with the applied innovation theory by van de Ven et al. (1999) that understands "[i]nnovation [...] [as] a network-effort (ibid., 1999, 115) [...] a collective achievement" (ibid., 1988, 105). Van de Ven et al. (1999) emphasize the unpredictability of the development of an innovation. This is caused by the complex interplay of actors involved (cf. Braun-Thürmann, 2005, 58).

Van de Ven, Polley et al. (1999) studied the processes of innovation among fourteen different technical and administrative innovations and found out that innovations neither follow a simple linear course nor a clear sequence of stages or phases. "Instead, a much messier and more complex

progression of events was observed in the development of each innovation.” (van de Ven et al., 1999, 23). However, van de Ven, Polley et al. (1999) explain that some commonalities were explored and that those common elements were described as parts of periods or, in other words, an ideal-typical course was depicted as follows (cf. *ibid.* 1999, 23).

According to van de Ven, Polley et al. (1999) the “initiation period” starts from the gestation process and ends at the time at which actors start to plan the budget and further steps for the development of the innovation. At the stage of planning further steps, the transition to the “developmental period” is marked (cf. van de Ven et al., 1999, 30). The initiating idea starts to unfold in many new ideas like a “firework” (cf. *ibid.* 1999, 34). Many different ways are tested, setbacks happen and unexpected problems appear. A lot of new relationships are made and it is a highly instable period for all members involved (cf. *ibid.* 1999, 34ff). “The implementation period begins when activities are undertaken to apply and adopt an innovation” (van de Ven et al., 1999, 53). Implementation is realized when new and old practices are connected (cf. *ibid.* 1999, 53). The innovation terminates if it is not possible to link new and old practices or if resources run out and the innovation cannot be implemented (cf. *ibid.* 1999, 54ff).

This work focuses on the implementation period only that begins when clients visit the farm and receive a form of care, hence if interviewees still offer care to clients and receive money at the time the interview was held, they are treated as “adapted” projects. Cases are treated as “terminated projects” if it was not possible to link agricultural and social tasks. As a result of that interviewees do not offer care at their farm anymore.

The connection of old and new practices is assumed by the author to be a considerable challenge for farmers. That is why this research focuses on problems and challenges that are perceived by original farmers as soon as they offer care at their farm. It is regarded that farmers are an economically and politically weak group; hence the author assumes that this group needs different forms of support in order to stabilize the new practice. Van de Ven’s model of the process of innovation is applied in order to focus on the implementation period because it allows focusing on the collective effort and assumes a non-linear, very complex course of periods within an innovation process. Social relations can mitigate the burden of stressful situations (cf. Hollstein, 2001, 26). They can influence self-esteem directly by social recognition or social learning processes and produce the feeling of being backed up by somebody, to name a few examples (cf. *ibid.*, 2001 21ff). In addition, within social networks, resources can be produced that could facilitate care farmers with larger options for their action.

Consequently, the thesis of this work is that social networks are important to better understand and explain the implementation of care farming.

## **The qualitative personal network approach**

This paper is part of a larger research project (Renner, 2010) and is why criteria for case selection were applied that are not relevant for this research. Nevertheless, 18 Austrian and 18 Dutch care farmers who want to reach income by care farming are part of this sample. Interviewees of this research needed to work on a “real” farm and to be farmers themselves, or at least the partner of a farmer. The consequence of this requirement was an investigation of mainly family enterprises that offer a variety of different forms of care at the farm. Neither the form of care nor the client group was a criterion for case selection. In order to conduct this research, the “qualitative network analysis” (Hollstein, 2006, 12) was applied. Qualitative network analysis considers the principles of qualitative research and of network analysis, meaning this approach focuses on both the meaning behind an action and on underlying structures (cf. Hollstein, 2006, 11). Hence, an interpretation of actors, subjective perceptions and the benefit of connections to other actors in order to implement care farming are investigated by that. Qualitative network analysis in practice means applying data collection techniques similar to the quantitative network approach but combining it with qualitative social research methods, for instance the “problem-centered” or “narrative interview” (Witzel, 1982, 47 and 89). In addition to that, interpretative methods for data analysis need to be applied, hence

the “interpretative paradigm” (Wilson, 1973, 58ff) is followed by applying a qualitative design because it allows a “methodically controlled understanding of the other” (“Fremdverstehen”) (Schütze et al., 1973, 433ff).

Because of being interested in care farmers' perspective, the *qualitative personal network approach* was applied in this work. The personal network does not consider the position of the actor within a network because “sets of ego-alter relationships” (Beggs et al., 1996, 309) are investigated and defined “from the standpoint of a focal individual” (Jansen, 2006, 80). As a consequence of this, a network approach is applied and a name generator is developed in order to collect particular relations.

In this work the name generator included care farmer colleagues, family members and clients' key care givers or care experts. The qualitative approach allowed the necessary openness in order to not oversee if other actors also played an important role. Nevertheless, the “problem-centered interview” (Witzel, 1982, 89) is applied because it is more structured than the narrative and allows to focus on a relevant social problem. The relevant social problem in this paper is if problems and challenges occur when care at the farm is already practiced. This interview approach allows asking ego (care farmer) to mention those who supported him/her practically as soon as they offer care at their farm. So the question of the interview was: *Did unexpected challenges occur when you already offered care at your farm? If yes, which challenges?* Because of the assumption that forms of support could help to overcome these challenges, the following question was added: *How and by whom were you supported in managing these challenges?*

To take the individual orientation into account, it is of importance to analyze the interviews as a case. Furthermore, it is of significance to find similarities and differences between the cases as well as to allow generalization based on case and group comparisons for developing a theory. For that reason “thematic coding” (Flick, 2009, 318) was applied. This method was developed for comparative studies with “[t]he underlying assumption [...] that in different social worlds or groups, differing views can be found.” (Flick, 2009, 318). Findings in terms of similarities about perceived problems and challenges and about how care farmers cope with them are depicted in the following chapter.

## Results

### Occurring problems and challenges when implementing care farming

Dutch and Austrian farmers were asked if unexpected challenges occurred when already offering care at their farm. A challenge that was frequently mentioned by some farmers of each investigated group was *emotional stress*. Emotional stress is used as umbrella term for findings that relate to problems and challenges that lead to emotional burden, which is depicted more in detail next.

*Insecurity* in terms of *how to deal with certain client groups*, respectively the fear to behave improperly and to jeopardize clients' health, is one aspect that leads to emotional stress for care farmers. If care farmers are non-professional care givers, more questions arise in terms of how to cope with clients and their diseases and how to treat them correctly in respect to their needs. This insecurity in terms of how to cope with clients' behaviour or their symptoms increases the emotional burden for farmers. Emotional stress increases the less care farmers are embedded in a professional team of care givers, because the possibility to discuss certain occurrences or insecurities in terms of the client decreases. Moreover, a care farmer is often the clients' one and only counterpart, which is a problem that can increase in the case of 24h care as soon as not a professional team but a single care farmer is responsible for the clients.

They miss the social contact, and I was often the only contact person they [the clients] had, and good and bad times are offloaded on me because no one else is there. This happens often, and is better in public elderly care homes, because care givers change, and on the farm there is only one reference person. (Austrian care farmer, terminated project, Gerlinde F.)

In addition to that and strongly connected to the aspect of not being part of a professional care team, a lack of *mental hygiene* was observed. Often a very close relationship between clients and

their care farmers exists, with the consequence that farmers feel highly responsible for their clients, “you are also emotionally connected to the client and then you think, well, we have to help our clients” (Dutch care farmer, adopted project, Finn and Jacoba B.). “I felt bad, and was responsible for the clients; it was psychological stress I have to confess that. (Austrian care farmer, terminated project, Gerlinde F.). Farmers often still offer care because of their strongly perceived responsibility for their clients even if they do not have enough resources (emotional, time) or even if they do not receive enough income through care farming. In summary, there is no professional supervision offered and no or only very little training in terms of mental hygiene.

In addition, emotional burden increases because care farming often means a *mix of roles*, which causes new conflicts. Family farms are still very often multigenerational houses and in the case of care farming, the care giver is at the same place and often at the same time mother/father, farmer, wife/husband, daughter/son (in law), employer for the staff or boss for volunteers etc. Therefore especially multigenerational households offer enough reasons for conflicts. If clients get involved in the farming business, possible conflicts increase, in particular when no clear rules in terms of who cares for the clients and who defines farming tasks are established.

And because of this [role] conflict I felt jitters in the morning and thought that it is too much. I know that this was also a reason for terminating the project because [...] I felt that this mix is difficult for me and I was not able to divide between those roles, for instance, if my son is disobedient I tend to turn a blind eye but for my clients I needed to be an authority. [...] And I felt this role mix was a burden and I felt a lot of pressure because of that. (Austrian care farmer, terminated project, Claudia C.)

Extra burden also come up when there was a *lack of private sphere* and no clear distinction in terms of temporal or spatial aspects made at the farm. As soon as clients are at the farm, conflicting needs of family members and of clients occur. Family members want to, for instance, enjoy their spare time at the farm and might feel disturbed by clients, or the family feels disturbed when sharing toilets, bathrooms and the kitchen with clients. A lack of clear arranged schedules about the time periods in which farmers are responsible for their clients and at which places at the farm clients are allowed to be, increase emotional stress for care farmers.

[...] for instance, I did not have a duty telephone and all clients did have my private number and if someone can imagine how psychiatric ill people can be, they can have a crisis in the middle of the night and actually I am not a crisis intervention institution. (Austrian care farmer, terminated project, Claudia C.)

*Time-burden* is another aspect that leads to emotional stress. It was observed that clients need much more time than expected by care farmers, for instance, in terms of 24h care the client needs sociality, the client needs more care etc. In the case of day care, a care farmer needs preparation time (like making plans, what to do with the client, organizing work that can be managed by clients etc.), rework time and last but not least the farmer needs to invest time in education and in adapting the farm as a suitable care place (depending on the client group). Time pressure increases as soon as the agricultural business is equally or more important than the care business in order to reach income, because a care farmer has to reserve time in which the client is on the farm to care for them. During this time it is usually not possible to move on with your normal agricultural tasks, hence farmers have to adjust the tasks highly to suit clients’ needs and features. This sometimes conflicts with agricultural needs and has to be compensated by the farmer, which is why care farming can lead to emotional stress because of time burden.

[...] the expectations of the clients are partly relatively high, they expect you to have a lot of time [...] and then they [the client] blamed me that I have not enough time for them, when I was not talking with them each day for an hour or more...and that is something I haven’t expected that you need that much time [...] (Austrian care farmer, terminated project, Gerlinde F.)

To summarize, a lack of knowledge about how to deal with clients, a lack of mental hygiene and of private sphere for care farmers’ families, a mix of roles and time burden lead to emotional stress for

care farmers in the time of implementing the new practice. Findings about how care farmers deal with this burden and from whom they receive support are explained next.

### **The importance of supporters in order to deal with emotional stress**

#### *The support by clients key care givers and care professionals*

Training provided by care professionals increase farmers' capability to deal with clients and their background in terms of clients' diagnosis and behaviour and reduces emotional stress that could occur through care insecurity. If farmers attend certain care education training (school education or regional studies), their knowledge about certain symptoms and the ability to correctly interpret clients' behaviour increases. With increasing self-confidence in terms of how to deal with clients, the personal perceived stress subsides.

First you think you are not able to practice this job, which was the feeling we had because of not having attended an education course regarding to care but in the meantime I am educated in this respect (Dutch care farmer, adopted project, Anouk & Levi S.)

Some care farmers are highly professionalized in terms of care tasks but are not a member of a care farmer union, meaning they are not supported by colleagues. Still, care farmer unions have the capability to invite speakers in order to provide them with knowledge that is more aimed at their special needs.

If I attend presentations about drug addiction for instance [at the meetings of the care farmer union] that is very interesting for me, as a form of consulting. (Dutch care farmer, adopted project, Cornelis & Grietje K.)

Nevertheless, beside these trainings, additional regularly contacts to care professionals are quite important for care farmers. They back up, distribute the feeling of responsibility and also increase the security about the clients' needs being met and that they do not behave improperly and jeopardize clients' health.

Farmers for instance tend to keep in contact with the family doctor and even if there is no special occasion that would ask for a doctors' visit, they ask the doctor to make a round in order to cover one's back. Moreover, if farmers are embedded in a professional team of care givers, they tend to discuss their insecurity in terms of how to deal with clients in order to meet their needs rather with that team than with the care farmer union. Care farmers profit from the regular exchange of knowledge within these professional care teams and from professional supervisions and further trainings in terms of mental hygiene.

For example, in order to insure Perg's care farmers (Austrian care farmers from the region of Perg who offer assisted living at the farm for elderly), the Red Cross offered to employ them, but with the requirement to work as a care giver on the farm and part time off the farm. The farmers who followed this option were much more affiliated with a team of care professionals and profited from supervisions. Those who were not able to meet these requirements needed to agree to a care contract in order to be insured, meaning a trained nurse from the Red Cross visited the client at the farm at least once a week and cared for them or controlled how the client is doing. Those farmers who followed the second option perceived the contact to the trained nurse as very important because they had a constant confidential contact partner whom they could ask questions but also from whom they received confirmation about the correctness of their work.

Concluding, findings have shown that farmers prefer to be linked up with clients' key care givers such as parents, teachers, social workers etc. in order to receive regular feedback about how the client is doing but also to feel reinforced, meaning that they carry responsibility for clients' visits at the farm, too.

*The support by care farmer colleagues*

Nevertheless, the affiliation with a care farmer group increases the exchange of practical knowledge and helps farmers to deal with clients. Frequent communication within the care farmer union and mutual visits at the farm increases a care farmer's orientation about how others deal with clients, cope with problems in terms of clients' diagnosis or symptoms and increases their confidence to operate within the legal framework. They predominantly exchange information about how they organize working days with clients and which tasks are suitable for clients, but also how they adapt the farm in order to make it client friendly and to save one's own private sphere. As a benefit of communication within a care farmer group, practical knowledge can be transferred to colleagues, for instance, some Dutch care farmers established the rule that farmers and new clients have to have a probationary period before they decide to contract with each other. In other words experienced care farmers transfer their practical knowledge to novices and as a result the likelihood that a farmer struggles with clients because of a mismatch becomes decreased.

In addition to that, the exchange of this practical knowledge between care farmers can help beginners to avoid a role mix and to save private sphere, but also increases their knowledge about certain client groups and their needs. Still, important information about that can but is not always transferred by more experienced colleagues. Those farmers who perceive fewer problems in terms of a role mix and of a lack of private sphere have in common that they established clear schedules. For instance, only the care giver is at the farm, whereas farmers' children are at school and farmers' wife works off the farm during that time. Also spatial distinctions are made such as extra canteens, toilets and rooms for clients etc.

Frequent meetings between the members of a care farmer union/group allow them to exchange their practical knowledge. The membership to a group of care farmers decreases the necessary amount to talk about the care farming business with family members and subsequently saves private sphere in this respect because the care farmer groups function like a self-help group. This functionality increases with increasing group identity, meaning high trust between group members is a precondition in order to talk about emotional burden. The advantage of a good intra-group communication within a care farmer group is that colleagues are able to understand a certain problem of a member. Colleagues sometimes had a different view on the problem, perceived it less dramatic or offered alternatives to react to that problem because of being less emotionally involved than family members.

Even if care farmers perceive no special burden it is helpful for them to communicate with colleagues about their work because they are aware that others are interested in their work and their practical knowledge, hence motivation to continue with this job increases.

I have no one to reflect my experiences with. Sometimes I tell my family members about that, they actually do not ask but sometimes I tell it simply because I need to tell it to someone, the job is indeed a little bit lonely. It is that you stand alone with the whole and if you have setbacks no one is here who backs you up but that would be so important (Austrian care farmer, adopted project, Irma F.)

I participate in these meetings because of the exchange of practical knowledge, that is supportive [...] and the topics we talk about are diverse, once we are talking about the legal basis and another time about dementia, learn and working projects and then we always talk about our personal experiences with clients and about target groups [...] and you can say hey guys that is the problem, how would you deal with that. And somebody might have a completely different view on that and realize that the problem is not as bad. (Dutch care farmer, adopted project, Emma G.)

Nevertheless, even if farmers are in contact with colleagues they seldom discuss with them but rather with family members or care professionals about emotional stress that occurs because of a lack of mental hygiene. Care farmers are often not aware of the problem of a lack of mental hygiene and so they tend to cope with that problem by themselves as long as possible and either stop care farming at a certain point or sometimes learn from care professionals to counteract. Similar to that,

the increasing time pressure is for a long time a problem the care farmers tend to deal with him-/her until the burden reaches a certain point and forces them to find new arrangements, such as looking for volunteers or employees, decreasing the number of clients, changing the client group or terminating the project.

Mentally I think, look, the body functions but, if I talk about myself, I was always a very strong person and now I have migraine and I think does it come from that? I do not know, maybe because of the intensity? But well, I have to care for about that it works without me, too. If I would die tomorrow, it needs to continue without me, but this is not the case at the present time, I need to be more replaceable in this respect. (Dutch care farmer, adopted project, Cornelis & Grietje K.)

### *The support by family members*

Further relevant supporters are family members, hence strong commitment and practical support from family members in order to meet the requirements from the farming and care business is indispensable. Often not only a care farmer cares for clients, but also his or her spouse undertakes these tasks and is responsible, for instance, for transporting clients when day care is offered, for dealing with monthly settlements, but sometimes the couple also shares daily working tasks with clients. Family members often need to have regards for clients at the farm and often undertake the tasks of socializing with clients and in this respect their esteem support is necessary.

An interesting find is that differences between most terminators and adopters within this sample are related to the match between clients and care farmers, the perceived emotional stress of care farmers and the willingness for or the state of professionalization in terms of education and/or farm adaption. These aspects are often strongly connected with each other, because the less farmers know about clients' needs and how to deal with them, the more they expect from clients to work autonomously, responsibly and as fast as volunteers and interpret client's behaviour as unreliable. Subsequently, farmers feel annoyed by them. In other words high emotional stress increases the likelihood to terminate the care farming project and if emotional stress occurs is strongly connected to the aspect of being not able to distribute responsibility for clients. Those who are educated in care tasks and who are in a close contact to clients' key care givers and care experts generally perceive less emotional stress.

## **Resume and final conclusion**

In this research the qualitative personal network approach proved to be fruitful in order to better understand the implementation of the new practice of care farming. On the one hand it allowed considering a care farmer's support network from a structural point of view, while on the other hand this approach allowed interpreting the importance of certain supporters. The relational network approach was combined with van de Ven's innovation theory through which a special focus was put on the implementation period or in other words on the time as soon as farmers start to offer care at their farm.

Similar to van de Ven's theory unexpected problems and challenges occur during the implementation of the new practice. Findings have shown that care farmers face "emotional stress" when offering care at their farm. If farmers are lacking knowledge about care tasks and are lacking mental hygiene, then emotional stress can increase. If there is a lack of private sphere for a farmer's family and if a mix of roles occurs because the care farming business is a family business, then emotional stress increases. The huge amount of time that is necessary in order to care for clients at the farm is often underestimated and in this respect time burden also raises emotional stress, hence the termination of this new practice is more likely.

The relational qualitative network approach allowed to find out that in order to deal with emotional stress and to fulfill the tasks that occur when already practicing care at the farm, care institutions,



family members and the care farmer union still play an important role. Farmers predominantly profit from regular contacts with care professionals and education, but also through keeping contact with other key care givers of their client. This distributes responsibility and provides them with knowledge about how to deal with clients' symptoms etc. Besides this indispensable contact to care professionals, the communication within a group of care farmers increases the likelihood of exchanging necessary practical knowledge and also allows farmers to talk to like-minded people, whereas this mutual interest in each other's project and experiences increases not only their ability but also their motivation to continue with the project. Family members are relieved as soon as farmers have the chance to communicate with their colleagues about the care farming business and this aspect helps to stabilize the project.

Trainings about mental hygiene are only seldom provided for care farmers yet, hence they tend to get aware of such a problem at very late point in time and prefer to talk about that rather with family members or care professionals than with members of their care farming union. The close contact to colleagues allows exchanging practical knowledge and can decrease farmers' emotional burden because of the possibility to talk with like-minded people and the feeling of belonging to a group. Nevertheless, as soon as farmers feel insecure in terms of clients' health, they tend to contact care professionals and feel backed up when being in a regular contact with the family doctor, clients' key care givers and other care professionals who know the care farmer's clients.

A close contact to care experts and client's key care givers is indispensable in all cases. In the long term this practice can only be stabilized by an excellent cooperation between these actors and by shared responsibility for clients. A good connection to client's key care givers and to care experts who know the clients and their present situation, who get informed about daily occurrences regarding to client's well-being and who not only support in terms of client acquisition but also decrease emotional stress through supervising care farmers and providing them with expert knowledge, is in the long term incredibly important for stabilizing the project. The combination of getting educated in care tasks and the contact to client's key care givers and care experts are essential. Furthermore care farmer unions can in this respect act as a self-help group and decrease emotional stress. Last but in no way least, the esteem and practical support of family members is a precondition for a care farming project that is based on a family business.

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