Horticultural therapy uses the garden, gardening, plant cultivation and the relationship with nature to improve physical, mental and social health. Horticultural therapy is a very suitable activity for people with dementia.

1. **For whom and why?**

   **Horticultural therapy is aimed** at all people with dementia and is indicated to provide:

   - Physical rehabilitation: appetite stimulation, fall prevention, physical, cardiovascular and respiratory maintenance.
   - Cognitive maintenance: stimulation of memory, verbalisation, gestures, orientation in time and space, body schema (knowledge of body parts and body image).
   - Management of behavioural and psychological symptoms: anxiety, depression, withdrawal, agitation, insomnia, wandering.

2. **How is the intervention conducted?**

   **Horticultural therapy sessions take place** in a garden, on a patio, on a terrace, indoors or in a room near a window with an outside view (garden, terrace, forest, etc.). Sessions last 30 minutes for individual sessions and 1.5 hours for group sessions of 5 to 6 participants and are offered all year round, twice a week or every day if possible. The activities are adapted to people’s wishes and capabilities: walking around the garden, observing the plants, planting, pruning and/or watering the plants, making a bouquet, etc.

   Discussions and exchanges are proposed in connection with the activity. People at risk of falling should be accompanied on outings to the garden.

3. **What are the benefits?**

   **Observed effects** are a slowing of cognitive decline, a decrease in agitation, a sense of well-being, the expression of positive emotions and the satisfaction of engaging in nature-related activities.
How does it work?

Horticultural therapy targets and involves 4 areas:

- Physical: maintenance of physical, cardiovascular and sensory capabilities.
- Cognitive: stimulation of memory, emotions, language and imagination.
- Psychological: autonomy, self-esteem, communication, emotions expressions, quality of life.
- Social: listening, exchange, social interactions.

Exposure to natural light stimulates appetite, boosts immunity and regulates mood and sleep.

When is it contraindicated?

Horticultural therapy is contraindicated for people without tetanus vaccination and/or with uncontrolled asthma and/or severe allergies.

In all cases, it is necessary to discuss it beforehand with professionals.

Who can provide horticultural therapy?

Horticultural therapy is provided by a horticultural therapist, a gardener mediator and care staff who are aware of horticultural therapy. A double competence is required: experience in accompanying people with dementia and an awareness and/or training in horticultural therapy.

This sheet is adapted from a chapter in the guide *Psychosocial interventions and dementia: understanding, knowing, implementing* which presents 10 psychosocial interventions.