

DIGGING IN

NOVA SCOTIA HORTICULTURE FOR HEALTH NETWORK

Spring 2025 Volume 11 Issue 2 nshhortnetwork@gmail.com

The Nova Scotia Horticulture for Health Network is a coalition of people interested in supporting horticulture for health initiatives through resource-sharing, exchange of practices/knowledge, and networking.



5-Part Series

Practitioner Tool: Therapeutic Horticulture Goals with THAD Activity Examples: Cognitive Domain

Text by Lesley Fleming, HTR

Photos by OPPO Find x5 Pro & C. Harris.Unsplash

Original Publication: Fleming, L. (2025). Practitioner Tool:

Therapeutic Horticulture Goals with THAD Activity Examples: Cognitive Domain. *Cultivate*, 5(1).

Therapeutic goals are an essential component of therapeutic horticulture practice. In this 5-part series, therapeutic goals will be identified by health domain, intended to be used as an index for identifying possible goals. Subsequent articles will cover other health domains – physical, psychological/emotional, sensory, and social, along with relevant therapeutic goals. Examples from THAD ([therapeutic horticulture activities database](#)) have been selected to demonstrate applications for use in therapeutic horticulture interventions.

Setting therapeutic goals is based on client assessment and need, working toward specific outcomes, which can be measured informally or clinically charted. Achieving desired health outcomes requires intention, therapeutic techniques and client engagement.

Therapeutic goals can fall into more than one health domain. The THAD examples identify multiple therapeutic goals in each of the five domains for each activity, though typically only one or two would be emphasized in a given session.



CONTENTS

- 1 Practitioner Tool:
Therapeutic Horticulture Goals with THAD Activity Examples: Cognitive Domain
- 5 Defining Cognition
- 9 The Veteran Farm Project, Therapeutic Horticulture & Nature Engagement in Support of Service & Veteran Women
- 11 TH Activity Plan – Cut Flower Production
- 13 Spring Resources

Photo top right: Seibert & Rice

A *Journal of Therapeutic Horticulture* article, [Therapeutic Horticulture and Its Therapeutic Goals: Expanding the Scope and Practice Through the Therapeutic Horticulture Activities Database and Its Use of Health Domain-Specific Goals](#) organizes TH goals also using health domains, referring to functional and goal areas, not specific therapeutic goals.

This series—[Practitioner Tool](#)—identifies specific therapeutic goals intended to expand practitioner knowledge and applications.

Cognitive/Intellectual Health Domain: Therapeutic Goals + THAD Activity Examples

Goal Areas	Therapeutic Goal	THAD Examples
------------	------------------	---------------

Language & Numbers	Practice reading skills	Plant Parts & Plant Parts Rap (Fleming & Sullivan, 2023)
	Participate in word games individually or in groups	In the Garden Slide Show (Laurenhue & Fleming, 2023)
	Demonstrate counting skills	Seed Tape (Fleming, 2024)
	Demonstrate spatial reasoning	Forcing Paperwhites & Other Bulbs (Sterling, 2023)
Reasoning & Problem Solving	Attend to task	Planting Microgreen Seeds (Stivland, 2024)
	Follow sequential steps	Making Salsa (Carroll & Carroll, 2023)
	Use cognitive strategies to understand and practice self-regulation	Daily Gardening Tasks (Lindsay & Fleming, 2023)
	Apply strategies for addressing impulsivity	Transplanting Herbs to Outdoor Garden (Relf & Morgan, 2023)
	Develop cognitive strategies for coping with cognitive/physical effects of illness or injury	Growing Garlic (Fleming & Morrison, 2023)
	Strengthen cognitive function, executive function &/or decision-making	Herb Propagation from Seed (Relf, Morgan, Fleming, 2023)
	Foster brain development through matching skills/games	Matching Game: Photos to Live Plants (Fleming & Bethel, 2024)
	Practice responding to cues for short term memory impairment/dementia	Peeling Vegetables (Fleming, 2024)

Goal Areas	Therapeutic Goal	THAD Examples
------------	------------------	---------------

Cognitive Initiative	Experience curiosity	What Plant Speaks to You? (Fleming & Roberts, 2024)
	Expand self-awareness by becoming informed about neuroscience inputs, limbic system, triggers for inappropriate behavior	Harvesting Herbs for Oils (Fleming, Relf, Predney, 2023)
Knowledge Acquisition & Skill Development	Acquire a new skill	Freezing Herbs (Relf & Morgan, 2023)
	Practice employment skills	Pre-employment Program Activities at Hospital Market Garden (Lindsay & Fleming, 2023)
	Undertake horticulture career exploration	Hardwood Stem Cuttings (Brown, 2023)
	Research and identify plants	Alphabet Garden (Fleming & Oliver, 2023)
	Expand understanding of human development using plants, plant knowledge, plant metaphors	Planting Mint or Catnip in Garden (Relf, Predney, Fleming, 2023)
	Focus on plant task: process, technique, or environment	Training Rosemary Topiaries (Relf & Fleming, 2023)
	Practice mindfulness techniques	Growing Mindful Awareness in TH Activities (Fleming & Creus, 2024)

“Cognitive and intellectual goals have been grouped together in the THAD platform. They can be quite different, however, and depending on the client and population, may require understanding of brain health and processing” (Fleming et al., 2024). They may be best delivered as horticultural therapy or in conjunction with specialists in fields of trauma, autism, mental health, psychology or with interdisciplinary treatment teams because of complex neuroscience processes and self-regulation challenges.

This listing of goals is not definitive, but is intended to broaden practitioner understanding and application of therapeutic goals for therapeutic horticulture delivered to multiple populations.

Fleming, L., Diehl, L., & Grimes, K. (2024). Therapeutic horticulture and its therapeutic goals: Expanding the

Nova Scotia Horticulture for Health Network

NSHHortNetwork@gmail.com

scope and practice through the therapeutic horticulture activities database and its use of health domain-specific goals. *Journal of Therapeutic Horticulture*, 34(1).

Hazen, T., & Lamoreau, C. (2024). Defining cognition. *Cultivate*, 5(1), 5-8.

Lesley Fleming, HTR has delivered therapeutic horticulture to a variety of populations using specific therapeutic goals. She has led the THAD advisory team in developing the on-line database of therapeutic horticulture activities and their correlated therapeutic goals across health domains. Leah Diehl, RLA, HTM and Katie Grimes, HTR, MAT contributed to this article.



Defining Cognition

Text by Teresia Hazen, MEd, HTR, QMHP & Cathi Lamoreux, MA, CCC/SLP

Graphics by Herowl, McDonald, & Legacy Rehabilitation Institute of Oregon

Original Publication: Hazen, T., & Lamoreux, C. (2025). Defining Cognition. *Cultivate*, 5(1).

At the 2024 American Horticultural Therapy Association’s annual conference, a presentation by Teresia Hazen and Cathi Lamoreux discussed cognition and communication strategies used in therapeutic horticulture and horticultural therapy. [Clinical Practice: Elevating Cognition and Communication Strategies for Client Success](#) explored this very complex, vast area of brain health. The following are excerpts from their presentation including their evidence base bibliography.

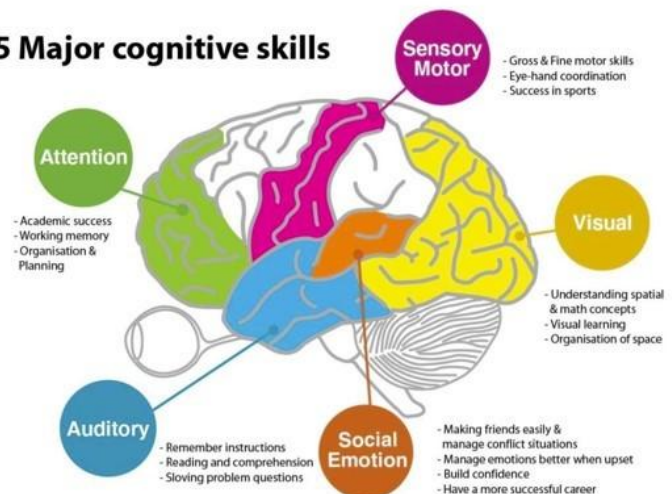
Cognitive function is a major determinant of an individual’s quality of life. However, the number of individuals developing a neurocognitive disorder (NCD) is increasing as the population ages. The primary recognized neurocognitive disorders include Alzheimer’s disease, frontotemporal degeneration, Huntington’s disease, Lewy body disease, traumatic brain injury, Parkinson’s disease, prion disease, such as Creutzfeldt-Jakob disease or *Bovine Spongiform Encephalopathy*, dementia/neurocognitive issues due to HIV infection, and vascular dementia ([Psychology Today, 2019](#)).

Cognition definition and the cognitive domains

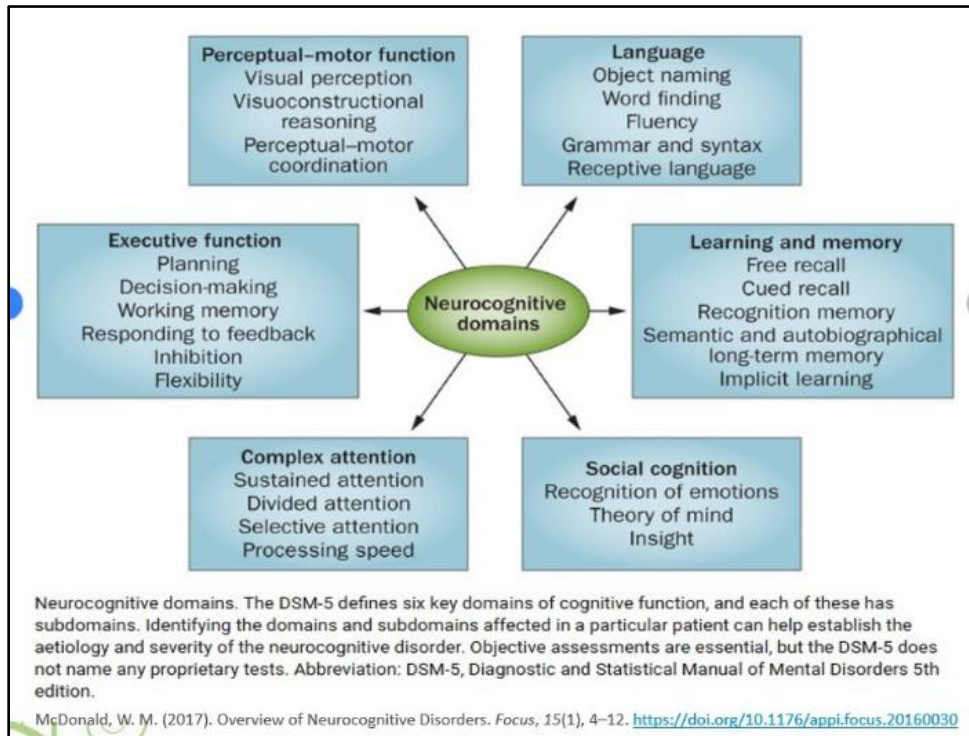
N. all forms of knowing and awareness, such as perceiving, conceiving, remembering, reasoning, judging, imagining, and problem solving. Along with affect and conation, it is one of the three traditionally identified components of mind. Adapted from the [APA Dictionary of Psychology](#)

- Sensation and perception
- Motor skills and construction
- Attention and concentration
- Memory
- Executive functioning
- Processing speeds
- Language skills

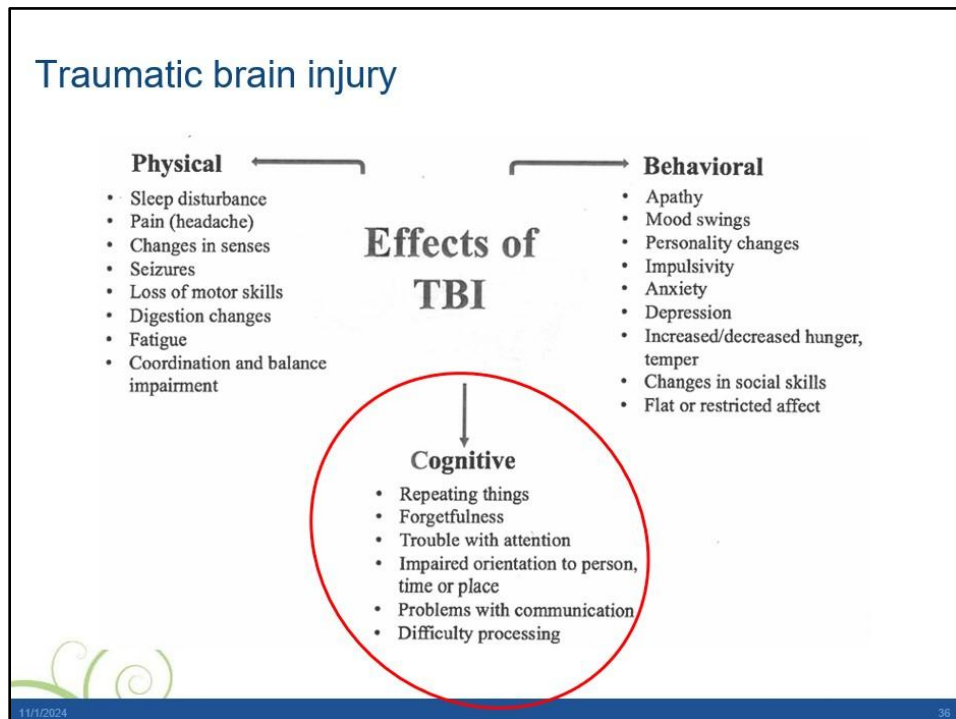
5 Major cognitive skills



Graphic: Herowl Brain Training & Learning Center



Graphic: McDonald, 2017



Graphic: Legacy Rehabilitation Institute of Oregon, Speech and Language Pathology (2024).

Bibliography - Evidence Base for Clinical Practice: Elevating Cognition and Communication Strategies for Client Success

Avan A, Hachinski V; Brain Health Learn and Act Group. Brain health: Key to health, productivity, and well-being. *Alzheimers Dement*. 2022 Jul;18(7):1396-1407. doi: 10.1002/alz.12478.

Collins R, Owen S, Opdebeeck C et al (2023) Provision of outdoor nature-based activity for older people with cognitive impairment: A scoping review from the ENLIVEN project. *Health and Social Care in the Community*. 2023: Article ID 4574072.

Corley J, Cox SR, Deary IJ. Healthy cognitive ageing in the Lothian Birth Cohort studies: marginal gains not magic bullet. *Psychol Med*. 2018 Jan;48(2):187-207. doi: 10.1017/S0033291717001489.

Dhana K, Evans DA, Rajan KB, Bennett DA, Morris MC. Healthy lifestyle and the risk of Alzheimer dementia: Findings from 2 longitudinal studies. *Neurology*. 2020 Jul 28;95(4):e374-e383. doi: 10.1212/WNL.00000000000009816.

Elf M, Norin L, Meijering L, Pessah-Rasmussen H, Suhonen R, Zingmark M, Kylén M. Rehabilitation at Home With the Development of a Sustainable Model Placing the Person's Needs and Environment at Heart: Protocol for a Multimethod Project. *JMIR Res Protoc* 2024;13:e56996. doi: [10.2196/56996](https://doi.org/10.2196/56996)

Harvey PD. Domains of cognition and their assessment. *Dialogues Clin Neurosci*. 2019 Sep;21(3):227-237. doi: 10.31887/DCNS.2019.21.3/pharvey.

Jiang H, Eaglestone G, McCrone P, Carr C, Stoner C. How are nature-based interventions defined in mild cognitive impairment and dementia studies? A conceptual systematic review and novel taxonomy. *Dementia (London)*. 2024 Jul 24:14713012241261788. doi: 10.1177/14713012241261788.

Klatte IS, Lyons R, Davies K, Harding S, Marshall J, McKean C, Roulstone S. Collaboration between parents and SLTs produces optimal outcomes for children attending speech and language therapy: Gathering the evidence. *Int J Lang Commun Disord*. 2020 Jul;55(4):618-628. doi: 10.1111/1460-6984.12538.

Li X, He Y, Wang D, Rezaei MJ. Stroke rehabilitation: from diagnosis to therapy. *Front Neurol*. 2024 Aug 13;15:1402729. doi: 10.3389/fneur.2024.1402729.

McDonald WM. Overview of Neurocognitive Disorders. *Focus (Am Psychiatr Publ)*. 2017 Jan;15(1):4-12. doi: 10.1176/appi.focus.20160030.

Mmako NJ, Courtney-Pratt H, Marsh P. Green spaces, dementia and a meaningful life in the community: A mixed studies review. *Health Place*. 2020 May;63:102344. doi: 10.1016/j.healthplace.2020.102344.

National Academies of Sciences, Engineering, and Medicine; Health and Medicine Division; Board on Population Health and Public Health Practice; Nicholson A, editor. *Brain Health Across the Life Span: Proceedings of a Workshop*. Washington (DC): National Academies Press (US); 2020 Mar 31. 6, *Brain Health in the Social Context*. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK556441/>.

Oher N, Tingberg J, Bengtsson A. The Design of Health Promoting Outdoor Environments for People with Young-Onset Dementia-A Study from a Rehabilitation Garden. *Int J Environ Res Public Health*. 2024 Aug 9;21(8):1047. doi: 10.3390/ijerph21081047.

Palmer R, Pauranik A. Rehabilitation of Communication Disorders. 2021 Jan 15. In: Platz T, editor. *Clinical Pathways in Stroke Rehabilitation: Evidence-based Clinical Practice Recommendations [Internet]*. Cham (CH): Springer; 2021. PMID: 36315698.

Psychology Today. [Neurocognitive disorders \(Mild and major\)](#). (2019). PsychologyToday.com.

Rost NS. Author Response: The Brain Health Imperative in the 21st Century-A Call to Action: The AAN Brain Health Platform and Position Statement. *Neurology*. 2024 May 14;102(9):e209382. doi: 10.1212/WNL.0000000000209382.

Scott TL, Jao YL, Tulloch K, Yates E, Kenward O, Pachana NA. Well-Being Benefits of Horticulture-Based Activities for Community Dwelling People with Dementia: A Systematic Review. *Int J Environ Res Public Health*. 2022 Aug 24;19(17):10523. doi: 10.3390/ijerph191710523.

Soga M, Gaston KJ, Yamaura Y. Gardening is beneficial for health: A meta-analysis. *Prev Med Rep*. 2016 Nov 14;5:92-99. doi: 10.1016/j.pmedr.2016.11.007.

Styck AC, George DR. Evaluating the Impact of Community Gardening on Sense of Purpose for Persons Living with Dementia: A Cluster-Randomized Pilot Study. *J Alzheimers Dis Rep*. 2022 Jul 4;6(1):359-367. doi: 10.3233/ADR-220018.

Tennstedt SL, Unverzagt FW. The ACTIVE study: study overview and major findings. *J Aging Health*. 2013 Dec;25(8 Suppl):3S-20S. doi: 10.1177/0898264313518133.

van Heugten, C.M., Wilson, B.A. (2021). Cognition, Emotion and Fatigue Post-stroke. In: Platz, T. (eds) *Clinical Pathways in Stroke Rehabilitation*. Springer, Cham. https://doi.org/10.1007/978-3-030-58505-1_12

Venita, Y., & Devina, A. (2024). Impact of Speech Therapy on Communication Skills and Social Interaction in Children with Autism Spectrum Disorder. *International Journal of Nursing and Midwifery Research*, 2(3), 96–103. Retrieved from <https://journals.iarn.or.id/index.php/ners/article/view/314>

Wang Y, Pan Y, Li H. What is brain health and why is it important? *BMJ*. 2020 Oct 9;371:m3683. doi: 10.1136/bmj.m3683.

Whear R, Coon JT, Bethel A, Abbott R, Stein K, Garside R. What is the impact of using outdoor spaces such as gardens on the physical and mental well-being of those with dementia? A systematic review of quantitative and qualitative evidence. *J Am Med Dir Assoc*. 2014 Oct;15(10):697-705. doi: 10.1016/j.jamda.2014.05.013.

Zuo W, Cheng B, Feng X, Zhuang X. Relationship between urban green space and mental health in older adults: mediating role of relative deprivation, physical activity, and social trust. *Front Public Health*. 2024 Aug 29;12:1442560. doi: 10.3389/fpubh.2024.1442560.

Teresia Hazen, MEd, HTR, QMHP worked as a medical horticultural therapist for three decades serving patients, families, employees, and communities across Legacy Health in Portland, Oregon. She managed twelve gardens at six hospital campuses, with specialty training in pediatrics, gerontology, psychology, education, and addictions counseling among others.

Cathi Lamoreux, MA Speech Disorders worked as a Speech Language Pathologist for 28 years with adult populations. She has a Certificate in Horticultural Therapy, worked for Eldergrow.org, and is active in Master Gardeners (Washington state).



The Veteran Farm Project, Therapeutic Horticulture & Nature Engagement in Support of Service & Veteran Women

By Lesley Fleming, HTR, Monica Collicutt & Jessica Miller

Photo by Veteran Farm Project

Using a farm setting, the Veterans Farm Project (VFP) pursues its mission of supporting service and veteran women in Nova Scotia, creating a community with purpose and healing. Using the farm itself as a peaceful nature environment, and volunteer activities related to cut flower production, along with [free workshops](#) throughout the year, a variety of methods have been effective in empowering women. One such methodology is therapeutic horticulture. Another is nature engagement.

The [VFP](#) farm setting is a 26-acre plot of land in Sweet's Corner, in southwest Nova Scotia. Its property has twenty 30-40 ft raised beds for growing cut flowers, a new greenhouse built in 2024 through generous funding from Royal Canadian Legion Nova Scotia/ Nunavut Command and several other buildings. Sustainable agriculture is used to grow a variety of flowers, harvested and sold through the local Brooklyn Village Garden Centre in Brooklyn, NS. The collaboration between this local business and VFP includes providing wholesale access for plant purchases and a mutually beneficial supplier-vendor relationship.

Therapeutic horticulture activities are an integral part of support for women military and veterans at VFP. Using plant and gardening activities, which can have therapeutic goals like expanding sense of safety, strategies for coping with trauma, injuries and psychological healing, and increasing physical strength, stamina and coordination, the VFP farm activities can provide a path and experiences for healing ([THAD Cut Flower Production](#)). Therapeutic horticulture is a recognized modality used worldwide, with programs specifically designed for veteran and active military populations. [Research on veterans and therapeutic horticulture](#), identified in the [Florida Horticulture for Health Network Resource Hub](#) has substantiated the effectiveness of this type of experiential health intervention (Besterman-Dahan et al., 2023; Hart & Zanzskas, 2021; Wheeler et al., 2020).

Nature engagement at the farm is also providing respite and healing. Research has determined that nature engagement and nature interventions (formalized therapies) can be impactful for brain injury, PTSD, pain, and mental health, among other health challenges, some of these evident in veteran and military populations ([FLHHN Resource Hub, 2024](#); Vibholm et al., 2020; Bettermann et al., 2021; Jones & Litzzen, 2022, Joschko et al., 2023).

The Veteran Farm Project's role in building community extends beyond services for military women. It participates in *We Care Boxes*, delivered by Legions in Nova Scotia, along with support for 2 pantries at the Military Family Resource Center (MFRC) in CFB Halifax and CFB Shearwater. A third MFRC is expected to be opened in 2025 at CFB Greenwood, NS, all supporting serving members and their families facing difficulties. Boxes contain bulk pantry items, fresh produce, health, hygiene and home items along with toys to promote outdoor physical activity.

Veteran Farm Project has received help from others. [Team Rubicon Canada](#), a veteran-led humanitarian non-profit helped with farm maintenance tasks and damage sustained in the 2023 storm and flooding. Support from Legions across Nova Scotia, True Patriot Love Foundation, Veterans Affairs Canada and government of Nova Scotia provide financial and other resources. Strengthening communities - military, women and geographical communities. Giving and receiving.

Besterman-Dahan, K., Hathaway, WA., Chavez, M. et al. (2023). [Multisite agricultural veterans affairs farming and recovery mental health services pilot program: Protocol for a responsive mixed methods evaluation study](#). *JMIR Res Protoc.*, 12, e42029.

Bettmann, J.E., Prince, K.C., Ganesh, K. et al. (2021). [The effect of time outdoors on veterans receiving treatment for PTSD](#). *J Clin Psychol.*, 77(9), 2041-2056.

Florida Horticulture for Health Network. (2024). [Nature-based interventions](#). *Resource Hub*.

Hart, B., & Zanzskas, S. (2021). Cultivating care: Trauma, homeless veterans, and nature-based therapy. *Journal of Therapeutic Horticulture*, 31(1), 25-38.

Jones, R.J.F., & Litzzen, C.O.R. (2022). An analysis of theoretical perspectives in research on nature-based interventions and pain. *Int J Environ Res Public Health.*, 19(19), 12740.

Joschko, L., Pálsdóttir, AM., Grahm, P. et al. (2023). [Nature-based therapy in individuals with mental health disorders, with a focus on mental well-being and connectedness to nature-A pilot study](#). *Int J Environ Res Public Health.*, 20(3), 2167.

Miller, J. (2024). [TH activity plan: Cut flower production](#). *University of Florida Therapeutic Horticulture Activities Database*.

Veitch, J. (2021). [Veteran Farm Project: Healing through nature and nurture](#). *Lookout newspaper.com*.

Vibholm, A.P., Christensen, J.R., & Pallesen, H. (2020). [Nature-based rehabilitation for adults with acquired brain injury: A scoping review](#). *Int J Environ Health Res.*, 30(6), 661-676.

Wheeler, M., Cooper, N.R., Andrews, L. et al. (2020). [Outdoor recreational activity experiences improve psychological wellbeing of military veterans with post-traumatic stress disorder: Positive findings from a pilot study and a randomised controlled trial](#). *PLoS One*, 15(11), e0241763.

Lesley Fleming, HTR, leads the Nova Scotia Horticulture for Health Network, supporting initiatives where horticulture positively impacts health. Monica Collicutt brings 40 years of store manager skills to VFP, with responsibilities for bookkeeping, sourcing items and public relations. She is a spouse of a CAF veteran. Jessica Miller's military background as an army medic for 22 years and Navy personnel on 3 different HMC ships led to her path establishing VFP in 2018. She was awarded the Queen's Platinum Jubilee Medal, and selected to serve on the National Women's Council that is working towards greater change for serving and veteran women in the CAF and RCMP.

THAD Therapeutic Horticulture Activity Database

<https://hort.ifas.ufl.edu/therapeutic-horticulture-activities-database/activities-a-to-z-list/>

Activity: Plant Care Goal: Psychological/Emotional Populations: Veterans & Active Military

TH Activity Plan – Cut Flower Production

Text by Jessica Miller

Photo by Veteran Farm Project

Original Publication: Miller, J. (2024). [Cut flower production](#). *University of Florida Therapeutic Horticulture Activities Database*.



ACTIVITY DESCRIPTION: Participants will undertake tasks involved in cut flower production at a farm setting.

THERAPEUTIC GOALS:

Cognitive/Intellectual: Make choices for own self-care related to level of participation in cut flower production in this setting; select plant tasks; take pride in accomplishing daily plant tasks

Physical: Increase physical activity in a farm setting; increase physical strength, stamina, coordination

Psychological/Emotional: Expand sense of safety being in a public setting; recognize physical tasks as a coping mechanism for trauma, injuries & psychological healing

Sensory: Expand sensory tolerance handling various plant materials

Social: Interact with other women veterans in socially appropriate manner; offer informal peer support & encouragement to other veteran volunteers at the farm

Materials

Garden tools for planting, harvesting, sorting

Bouquet wrapping materials

Bulletin board/task lists

Gloves, wipes

STEP-BY-STEP PROCESS:

1. **Pre-Session Preparation:** Facilitator determines what farm tasks need to be done each day. Prepare written list of tasks & post it for volunteers & staff. Gather tools that may be needed.
2. Facilitator begins session by welcoming participants who are attending the scheduled session, with self-introductions, outlining farm safety protocols, & ensuring all participants feel comfortable with farm animals. Facilitator reviews the daily tasks, locations for the tasks, and communication methods on the farm (phones, walkie talkie).
3. A brief discussion on expectations, role of farm staff, TH/physical tasks vs talk therapy focus is conducted by facilitator, in this setting that promotes peer support & not trauma talk or airing of grievances. One on one discussion or in small groups can be selected as appropriate.
4. Facilitator identifies plant-based tasks to be undertaken in the 2-hour session including planting, weeding, harvesting, sorting, drying flowers, or working in the field, cold storage area, or at sorting tables.
5. Facilitator works with or alongside participants, providing support as needed, guiding the horticulture tasks. As participants depart, facilitator thanks them, offering encouraging remarks.

APPLICATIONS FOR POPULATIONS: The therapeutic horticulture program described in this THAD is based on an actual working flower farm that was established specifically for women veterans and active military. Their experiences within the armed forces included (for some), military sexual trauma and physical injuries, and post

military, navigating their transition from active military service and perhaps food insecurity. Participants are seeking mental health and peer support, in a safe space without talk of trauma. (Other health services outside of this program provide talk therapy, counselling etc.). Important elements of the TH programming include a focus on the horticulture task, task-oriented volunteer activity, barrier-free physical farm facility, and female-led, female inclusive setting. The TH activities utilize military-trained organizational skills, in an outdoor setting with few confined spaces or chaotic atmosphere (a term used to explain a setting). Participants work as they are able to, physically and emotionally. There are no expectations for participants to take responsibility for flower production, but rather, to volunteer, assist and to build a personal sense of confidence, sense of safety, and for some, transition to non-military vocational paths on their individual journey post-service.

The TH focus and its activities resonate with participants on various levels like metaphors related to plants' resiliency and ability to survive, full cycle of growth and regrowth (plants and humans), beauty that can come in many forms, physical work where gardening breeds sense of accomplishment, and learning through trial and error which can be satisfying and rewarding.

SAFETY CONSIDERATIONS: Facilitators are responsible for knowing poisonous and toxic plants and plant parts.

Allergies and safety concerns for each participant should be identified prior to participation in the program, along with their mental resiliency, self-harm or suicidal possibilities. (This would not be asked on any form or in a group setting, rather a facilitator (certified in Peer Support) would let the group know if anyone would like to chat personally about anything - the facilitator is available. Avoiding possible triggers in a group environment is critical for each person's safety). Personal and medical contacts should be charted in case of emergencies. Access to sun protection and water (preventing dehydration) should be available.

NOTES OR OTHER CONSIDERATIONS: Cut flowers grown for this purpose include perennials and annuals - cosmos, snap dragons, tulips, statice, yarrow and zinnias in Canadian zone 6a farm setting for example. The Veteran Farm Project model described here is structured in 3 ways to achieve maximum participation. *Scheduled Sessions* have designated time, activity, and outcome. *Volunteer Call Out* helps achieve a large collective goal (planting fall bulbs, harvesting, and processing summer garlic, or help packing food hampers for families with food insecurities). Thirdly - *Drop In* at the farm without any schedule or plan for the day. Participating women typically do not like to be in large groups or with strangers and are looking for a peaceful place to relax, help as they can or play with their dogs. There is always an open invitation for women veterans to drop in Tuesday-Thursday. The facilitators' 7 years of experience delivering this TH has led them to understand the needs of the women including structuring sessions with 8 or fewer participants (this promotes focus on therapeutic activity, not becoming a grievance/complaining session).

Farm staff prep the flower beds and take responsibility for overseeing the production, with participants joining in tasks like planting, deadheading, mulching, harvesting, sorting, prepping and preparing bouquets. The Veteran Farm Project uses 30 ft beds, these determined to be less intimidating and easier to work than larger beds. Other features include large pathways, tools on site, and a 20x12 hard top gazebo for shade/resting from physical work.

The TH programming incorporates the Canadian military philosophy and leadership methodology principle: teach one, show one, do one. Funding is provided by Veterans Affairs Canada, The Royal Canadian Legion Nova Scotia/Nunavut Command, and Government of Nova Scotia. A close collaboration with a local garden center provides opportunity to help generate revenue for the farm, support the *We Care* food hampers, and allows the local community access to beautiful local fresh flower bouquets sold through the garden center.

REFERENCES/ RESOURCES:

Government of Canada. (2019). [Soldier On Program](#).
Soldier On. Sans Limites. (2024). [Activities and events](#).
Veteran Farm Project. (2024). [Veteran Farm Project](#).

Edits were made for THAD purposes in 2024.

TH Activity Plan form developed by Lesley Fleming, Susan Morgan and Kathy Brechner (2012), revised in 2024.



Resources Spring 2025

[Nourish Nova Scotia](#) identified webinars on Growing School Gardens, hosted by the Sprouts Healthy Communities Foundation in partnership with Life Lab, with these resources available online.

[Some is Something: Healthful, Healing, and Nourishing Herbs](#)

[Cafeteria to Compost: School Based Composting Programs](#)

[Real Life Garden Heroes: How Teaching Diverse Voices Improves Literacy and SEL](#)

[Upcoming webinar](#) topics: Educating on a Changing Planet, Nurturing Diversity in School Gardens & Vocational Horticulture with Exceptional Students

Publisher & Editor in Chief Lesley Fleming, HTR

Contributors

Leah Diehl, Katie Grimes, Teresia Hazen, Cathi Lamoreux,
Jessica Miller, Monica Collicutt,
Therapeutic Horticulture Activities Database,
University of Florida Department of Environmental Horticulture,
Cultivate, Florida Horticulture for Health Network

Seibert & Rice, OPPO Find x5 Pro & C. Harris.Unsplash, Veteran Farm Project,
Herowl Brain Training & Learning Center, WM. McDonald, Legacy Rehabilitation Institute of
Oregon, Speech and Language Pathology, Nourish Nova Scotia

Nova Scotia Horticulture for Health Network

To receive current or back issues of *Digging In* contact NSHHortNetwork@gmail.com



[NS Horticulture for Health Network](#)

Summer 2025 Issue of *Digging In*:
Practitioner Tool: TH Goals in Physical Domain

Products, services, references, and medical research contained herein are intended for informational purposes only and do not imply endorsement or practice by NSHHN. Website URLs may be changed without notice. Original and creative material is considered the intellectual property of NSHHN. We respectively request credit for reprinted articles.

We would like to acknowledge Nova Scotia is traditional territory of the Mi'kmaq people.