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“Inn på tunet” as a vehicle for the promotion of mental health in Norway

- A study of young people’s experiences

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v. Abstract

Mental health among young people is a worldwide concern today. Mental ill health is one of the biggest health challenges in Norway. The most recent public health profile of all the counties and municipalities in Norway demonstrates that younger members of the population report a lower score of life satisfaction, including loneliness and worrying, than older people. The public health programmes of the municipalities in Norway prioritizes mental health, with a particular focus on children and youth. A number of studies have identified physical activity in the outdoors, either in the form of leisure, sport or work, as particularly beneficial: so-called green exercise. Aware of this, the Norwegian government has invested in public health policies aimed at increasing the involvement of some groups, (e.g., young people) in green exercise. The strategy points to “Inn på tunet” (IPT) as an example of a preventive tool to promote well-being and better mental health, using local outdoor areas and community resources.

Through a qualitative case study of five IPT farms in Innlandet, Trøndelag and Viken County, the purpose was to explore mental health among 12 young people who had attended IPT, and to examine whether IPT has the beneficial mental health impact desired by policy-makers. The analysis of the semi-structured interviews with the young people recruited identified social bonds, community participation and meaningful activities as most important for strengthening their self-identity and mental health. These findings may have implications for policy-makers in regard to green care services and mental health among young people.

Sammendrag

Mental helse blant unge er en verdensutfordring i dag. Psykisk uhelse er en av Norges største helseutfordringer. Den nyeste folkehelseprofilen for alle fylker og kommuner i Norge viser at yngre i befolkningen rapporterer lavere skår for livstilfredshet, inkludert ensomhet og bekymring, enn eldre. Folkehelseprogrammene til kommunene i Norge prioriterer psykisk helse, med særlig fokus på barn og unge. En rekke studier har identifisert fysisk aktivitet utendørs, enten i form av fritid, sport eller arbeid, som spesielt gunstig, såkalt grønn aktivitet. Den norske regjeringen er klar over dette og har investert i folkehelsepolitikk som tar sikte på å øke involveringen av enkelte grupper, (f.eks. unge mennesker) i grønn aktivitet. Strategien peker på «Inn på tunet» (IPT) som et eksempel på et forebyggende verktøy for å fremme trivsel og bedre psykisk helse ved bruk av lokale friluftsområder og samfunnsressurser.

Gjennom en kvalitativ casestudie av fem IPT-gårder i Innlandet, Trøndelag og Viken fylke, var formålet å utforske psykisk helse blant 12 unge mennesker som hadde vært på IPT, og å undersøke om IPT har den gunstige psykiske helseeffekten som politikerne ønsket. Analysen av de semistrukturerte intervjuene med de rekrutterte unge menneskene, identifiserte sosiale bånd, samfunnsdeltakelse og meningsfulle aktiviteter som viktigst for å styrke deres egenidentitet og psykiske helse. Disse funnene kan ha implikasjoner for beslutningstakere med hensyn til grønne omsorgstjenester og psykisk helse blant unge.

1. Introduction

1.1 Mental health as a public health challenge

Mental health is a growing public health problem in the global north (Mykletun et al., 2009). Norway has not escaped this trend (Mykletun et al., 2009). Like elsewhere, the Norwegian government is particularly concerned with the mental health of young people (Norwegian Government, 2017). Mental health is defined as “a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community” (World Health Organization (WHO), 2022a, para. 1). Today, mental ill health is one of the biggest health challenges in Norway and the rest of the Western world (WHO, 2021). The WHO (2021) estimates that 20 percent of the world’s children and youth have a mental health condition, and one in seven (14 %) of 10–19-year olds experience a mental disorder. Two aspects of mental health appear to be especially problematic among young people, namely stress and anxiety (Wilkinson & Pickett, 2018). The age of onset for mental disorders is low, and the first symptoms often appear during puberty (WHO, 2021). This means that primary prevention must start early.

1.2 Life satisfaction of young people

The public health programmes of the municipalities in Norway prioritize mental health, with a particular focus on children and youth (The Norwegian Directorate of Health, 2018). According to Ragnhild Bang Nes, “a good quality of life is a value that promotes health and healthier lifestyles. A good quality of life also strengthens resilience in the face of stress. The municipality has the means to create a society that promotes quality of life” (Norwegian Institute of Public Health, February 15, 2022). However, the quality of life experienced by Norwegians varies, particularly in relation to mental health and well-being. The most recent public health profile of all the counties and municipalities in Norway demonstrates that younger members of the population report a lower score of life satisfaction, including loneliness and worrying, than older people (Norwegian Institute of Public Health, February 15, 2022). Underscoring this trend is the

observation that the more ‘stressors’ one experiences, the lower quality of life score is reported. These so-called stressors are “especially related to economic challenges, being unemployed, having health problems, and experiencing loneliness or having few people to confide in” according to Thomas Hansen at NIPH (Norwegian Institute of Public Health, February 15, 2022). Stress, defined as how we react when we feel under pressure or threatened, usually occurs when people are in situations that they feel unable to manage or control (Espnes & Smedslund, 2009). This might reduce quality of life, especially when it is experienced over time, which can further lead to mental health problems. Research has demonstrated that poor upbringing and living conditions, trauma, ostracism and negative social evaluation are particularly stressful. Studies have also identified community and social support networks as means to protect against such stressors (Norwegian Institute of Public Health, February 15, 2022). Thus, policy strategies and interventions aimed at promoting healthy lives among future generations need to explore which activities or settings can create the aforementioned social support networks and community bonds in order to promote healthy lives among young people.

1.2 A national strategy to improve mental health

The Norwegian government has a national strategy to improve mental health among young people (Norwegian Government, 2017). The goal of the strategy is to implement targeted measures for young people who are in a vulnerable situation, before they may develop mental disorders (Norwegian Government, 2017). One of the strategies is to ensure that everyone has green areas for physical activity and nature experiences near where they live. There is a growing body of evidence that physical activity alleviates some of the worst effects of stress and anxiety - defined as excessive worrying and feelings of unease and tension as a reaction to stress (Wilner & Shaal, 2020). Exercise may help building resilience - defined as the ability to positively adapt to and/or rebound from significant adversity and distress (Everly & Lating, 2019). More specifically, a number of studies have identified physical activity in the outdoors, either in the form of leisure, sport or work, as particularly beneficial: so-called green exercise (Bischoff et al., 2007; Everly & Lating, 2019). Aware of this, the Norwegian government has invested in public health policies aimed at increasing the involvement of some groups, (e.g., young people) in green

exercise. The strategy points to “Inn på tunet” (IPT), translated to “Welcome to the farmyard”, as an example of a preventive tool to promote well-being and better mental health, using local outdoor areas and community resources (Norwegian Government, 2017).

An important principle within all work on prevention is that sectors other than the health sector must be involved in order to achieve successful change to prevent mental illness. A national strategy was launched by the Ministry of Agriculture and Food and the Ministry of Local Government and Regional Development (2012) to secure positive development of IPT regarding quality control, research and responsibility. The Ministry of Agriculture and Food (2022) highlights “Inn på tunet” (IPT) and its cooperation with sectors regarding health, education and social work, with an action plan to use the farms as an arena to promote young people’s physical and mental health, but also other age-groups in society including in work training, to contribute to solve other societal challenges like unemployment. However, there is a need to explore if and how IPT affects young people’s health, and to gain insight of their perceptions of IPT services. From the farmers perspective, a safe environment, contact with adults and animals, and physical work are the most important qualities of the IPT services (Fjeldavli & Meistad, 2004). Questions that arise are: if the closer connection to nature and being physically active in the outdoors are what young people perceive as the most beneficial for their well-being, or are there other factors of the IPT services that contribute more to their well-being, like the development of social bonds?

1.3 “Inn på tunet” (IPT) as a preventive measure

Whilst there is some research on the effects of IPT, there are few studies on young people’s perceptions of it and how IPT affects their mental health. Hence the justification for this study. Based on the national strategy of IPT as a preventive measure for young people’s mental health, the study sought to find out if and how the exposure to and engagement with nature and living on a farm affects the mental health of young people. IPT falls under the category of “green care” or “farming for health,” that includes the use of the farm’s resources like plants, animals, forests, landscape, and human resources to promote health and well-being, while also being an

economical resource for farmers. This health promotion service is offered on farms all over Norway, where the use has been largest among children and youths from families of low socioeconomic status, with learning impairments, or who have experienced family difficulties including traumatic episodes (Inn på tunet Norge SA, 2022). IPT provides the opportunity for close contact with nature, animals, farmers, and a practical and adjusted learning environment. Intended benefits of IPT are to provide an alternative learning arena that reduces stress and enhances safe social bonding among the youths themselves, but also between the young people and the farmers (Inn på tunet Norge SA, 2022). The hope is that these positive outcomes will continue to induce positive mental health benefits in young people's current and future health status and life quality (Norwegian Government, 2017).

As outlined in detail in chapter 3, the research design was a case study of "Inn på tunet" farms in Innlandet, Trøndelag and Viken County. The sampling strategy was purposive and convenient. The overall research strategy was qualitative, including semi-structured interviews to achieve extensive insight in how IPT works with, and affects, vulnerable young people. It sought to examine whether IPT has the beneficial mental health impact desired by policy-makers.

2. Literature Review

Several recent review articles from Europe and Nordic countries (see e.g. (Andersen & Bakken, 2015; Bor et al., 2014; Collishaw, 2015; von Soest & Wichstrøm, 2014) point to the fact that there has been an increase in the incidence of mental health problems among young people (Sletten & Bakken, 2016). However, it is not a clear-cut issue. There are individual studies discussing whether a possible increase in self-reported stress and mental health problems is primarily an expression of more attention to mental health, changes in language and form of expression, greater openness or a lowered threshold for assessing various symptoms as problematic, rather than an actual deterioration in young people's mental health (Bor et al., 2014; Collishaw, 2015; von Soest & Wichstrøm, 2014). This perhaps irresolvable question

notwithstanding, much of the literature on mental health describes rising rates of adolescents' psychological distress.

Despite this, there is a gap in the literature exploring the effects and processes of different interventions aimed at improving young people's mental health, and especially pinpointing what measures are effective and have long-lasting benefits. There is evidence that certain kinds of environmental exposures, including contact with plants, animals, views of landscapes, and wilderness experiences may have positive health effects (Frumkin, 2001). This is the basis for practices such as IPT. However, the evidence of benefits from IPT and green care falls short of what is routinely required from physicians, health policy experts and regulators (Frumkin, 2004). Of the research and information available on the practice of green care, few articles have been published in clinical or medical journals that provide the underlying basis for academic and policy decisions (Van Dijk & Hassink, 2006). The lack of scientific literature in this field points to the need for further study.

2.1 Mental health among young people in Norway

The indicated trend of an increase in mental health problems among young people in Norway (Andersen & Bakken, 2015; Mykletun et al., 2009; von Soest & Wichstrøm, 2014), leads to the following questions: How significant is the increase? Does it apply to girls and boys to the same extent? How do changes in young people's environment over time affect the changes in their mental health? Research points to stress, and particularly school stress, as a recent phenomenon being studied in relation to the mental health of young people (Klinger et al., 2015; Sletten & Bakken, 2016). Several studies indicate that school stress functions as a risk factor for mental health problems. The perceived school stress among young Norwegians has increased from one in five to one in three reporting high levels of pressure during the early 2000s to 2018 (Klinger et al., 2015; Ungdata, 2018). Statistics regarding youths in middle school in Hamar, Innlandet, show that there has been an increase from 10 percent in 2016 to 15 percent in 2021 of the students reporting that they are "very much afflicted" by mental health problems (especially worrying or anxiety), and pressure to perform well in school is what they perceive as the most stressful

(Ungdata, 2021). Sletten and Bakken (2016) showed that mental health patterns are also affected by stress experienced in the home environment, from the family's economic situation, levels of physical activity, their relationship to their body and looks, and youth culture, including the way young people perceive themselves in relation to others. The study indicated that young people become stressed and anxious despite their social position (Sletten & Bakken, 2016). However, those who were at a higher risk of developing mental health problems, often from low socioeconomic backgrounds, have become even more vulnerable.

A Norwegian study of 12000 adolescents showed that gender differences in mental health tend to emerge between 13 and 14 years of age (Wichstrom, 1999). Another study found that 10 percent of Norwegian boys and 26 percent of Norwegian girls had a symptom level that indicated existence of depression and/or anxiety (Grøtvedt & Gimmerstad, 2002). The words used to describe mental health issues in the literature were based on emotional symptoms experienced by young people, mainly referring to worrying (or anxiety), stress and depressive symptoms (Sletten & Bakken, 2016). A longitudinal study from Norway found that weekly hours of physical activity at age 15-16 years might influence some aspects of mental health in boys three years later (Sagatun et al., 2007). The effect of physical activity on mental health was not evident for girls (Sagatun et al., 2007). The HUNT study of adolescents in Trøndelag found the similar results regarding mental health and physical activity, that physical activity had a potential to benefit boys' mental health but not for girls (Fløtnes et al., 2011). The study also found that the manner in which the young people perceived their own body had a greater impact on their mental health, both for boys and girls (Fløtnes et al., 2011).

2.1.1 Performance-related stress in school

Performance-related stress in school has become a more important risk factor for mental difficulties over time, especially among girls (Andersen & Bakken, 2015; Klinger et al., 2015; Låftman et al., 2013). It is argued that girls experience a particular double pressure, both being dedicated students and living up to conventional female role expectations or norms— being

feminine and attractive (Andersen & Bakken, 2015). However, the argument is not convincing as boys might experience this kind of pressure as well (e.g., being masculine and tough). A potentially greater openness in reporting mental health symptoms among girls compared to boys, might affect these results. The study also points out that boys experienced more stress from conflicts with teachers, parents, and peers in school, rather than performance-related stress (Sletten & Bakken, 2016). Experienced stress from conflicts with other people, including bullying, is likely to cause greater harm than stress from schoolwork and might lead to mental health problems (Ungdata, 2018). The greater occurrence of suicide among young men compared to young women (Larsen, 2018), alongside their lower score on reported symptoms of mental health problems, indicates that the stress experienced by boys is under-communicated.

2.1.2 Social anxiety or shyness?

A study of social anxiety among 29 young adults with a bachelor's or master's degree indicates that higher education does not exclude the risk of experiencing mental health problems (Hjeltnes et al., 2016). The young adults in the study of social anxiety described an important tension between seeing their stress reactions as a part of their own way of being in the world and understanding these reactions as symptoms of a mental disorder (Hjeltnes et al., 2016). This leads to the question of where the line is to be drawn between shyness/introversion and a mental health disorder? The young adults' reflexive attempts to understand and make sense of their troubling experiences generated self-criticism, worries, emotional distress and eventually social isolation as an undesirable coping method (Hjeltnes et al., 2016). This resulted in feelings of loneliness and a sense of not living "fully" or being their "true self" (Hjeltnes et al., 2016).

2.1.3 Social media challenges mental health

Social media is another contributory factor to mental health problems among young people today (Richards et al., 2015). There is an association between the use of social media and self-esteem and body image. Social interaction over the Internet plays an important part in the lives of many young people. Key themes identified in a study of social media's impact on young people's

mental health were self-esteem and well-being, cyberbullying, Facebook depression, online risk-taking behaviour and communicating with youths (Richards et al., 2015). The study found that the more time spent on social media, the lower the self-esteem among college students. Cyberbullying is bullying over the Internet, and it is harmful to people's mental health. The effects of cyberbullying are depression, anxiety, social isolation and in some cases suicide (Le Heuzey, 2012). Social media has become a channel through which schoolyard bullying now reaches the home, and the root of the problem is the bullying that stems from the social environment (Kwan & Skoric, 2013). The term Facebook depression comes from the identified relationship between depression and social networking activity and the claim that teenagers who spend a great deal of time on social media begin to exhibit symptoms of depression (LaRosa, 2011). The benefits of social media are that it allows people to stay in touch and it can be an effective way of communication regardless of people's situation or health condition ("Social media sites let chronically ill teens be teens," 2012). Despite these perceived benefits, there is a risk that social media afflicts mental health and well-being from negative influences including "false" images of people when presenting themselves only in a positive way, which in turn can lead to reduced self-image and self-esteem (Richards et al., 2015).

2.1.4 Young Norwegians with mental health problems are not in school or at work

Uncertainty exists about whether the prevalence of mental health problems among young people has increased over the last three decades (Steigen et al., 2018). Knowledge about how mental health problems developed over time among young people in Norway is limited. However, there are indications in recent years that the consequences of having mental health problems, such as disability leave, have increased among young adults in Norway. For instance, the number of young adults receiving disability pensions in Norway increased from 7,657 individuals in 2009 to 16,879 in 2018 namely for diagnoses of mental health problems (Norwegian Labour and Welfare Organization, 2018b). In August 2018, 70 percent of the 26,260 recipients of work assessment allowance under the age of 30 suffered from mental health problems (Norwegian Labour and Welfare Organization, 2018a). These numbers indicate that many young adults in Norway are not

in school or employed due to mental health problems (Steigen et al., 2018). The labour market's increasing emphasis on education, communication competence, and social skills poses special challenges for this population (Steigen et al., 2018).

2.2 Causes of increased mental health problems

In the debate and discussion about the causes of changes in mental health problems among young people, the societal changes of increased individualization and commercialization in the last 40-50 years have been given great emphasis (Beck & Ritter, 1992; Giddens, 1990). These changes have led to a modern society where the collective identities linked to class, family and gender is weakened, and largely replaced by individual aspirations (Beck & Ritter, 1992; Giddens, 1990). Crawford (2006) meant that individual aspirations such as social status, body fixation and individual mastery affects our health negatively and causes stigmatization and reduced life quality. Interestingly, Scandinavians tend to accept a high level of stress in order to achieve such individual aspirations, including the pursuit of personal health (Kristensen et al., 2016). The risk of developing serious mental health problems increases when several burdens (distress) occur at the same time, especially when there is little social support. The effects of socioeconomic status on mental health is significant among young people who struggle the most, and it follows a social gradient (Mykletun et al., 2009). Eckersley (2011) and West (2009) presented existential and relational factors linked to increasing individualization as a more serious threat to young people's mental health, rather than material and structural conditions. The complexity of societal changes can make it difficult to investigate and understand its significance on mental health.

2.3 The background of IPT

“Green care” as a concept goes back to the end of the 1980s with a focus on rural development, meaning business development in connection to agriculture in Norway (Bjørger et al., 2007). This has been the primary driving force in the development of the field, which can be illustrated by a quote from the White Paper St. meld. 19 (1999-2000) “On Norwegian agriculture and food production”; “Examples of local and regional efforts to develop new market opportunities include

development of work in relation to products such as shellfish, freshwater fish and Green care.” The White Paper further states that: “Green care must be a supplement in relation to ordinary offers within the social and health sector or teaching offers that the school sector can provide” (St. meld. 19, 1999-2000).

In 2001, the term “Inn på tunet” was introduced to embrace a broader spectrum of services and activities (Bjørngen et al., 2007). Today, IPT farms are quality-assured farms through European Quality in Social Services (EQUASS) and “Quality system in agriculture” (KSL). IPT farms offer welfare services that are supposed to provide mastery, development and well-being by using the farms’ property including agriculture, farm animals, forestry or horticulture (work with plants) (Kogstad et al., 2012). The main focus of the IPT service is within education, childcare and mental health care (Kogstad et al., 2012). The activities of the IPT services are linked to the farm, life and work there. In the broadest sense, IPT offers organized activities to increase the users quality of life and sense of mastery (Kogstad et al., 2012). Examples of the organized activities are cultivation of food and plants, forestry, wood cutting and care of animals, as well as cooking, carpentry, maintenance, housework, artistic activities and pure leisure activities such as relays, games, orientation and excursions. Green care is thought to benefit the young people’s physical and psychosocial health and well-being by working with and experiencing nature together in social settings (Bjørngen et al., 2007).

Since its introduction green care has been developed over the course of the last 30-40 years. However, the use of farms as a health promotive source goes back to much older trends in nurturing, caring and education, where nature was perceived to have special health-giving effects for people. Within prisons, hospitals, monasteries and churches, this tradition goes back to the Middle Ages, and perhaps even longer. However, the historical use of green care has been criticized for being a place to hide or store people who struggle in society, rather than having their health and well-being as the purpose of the service (Skjelkvåle, personal communication, November 2022). Despite this, the rise of green care/IPT can be seen in the context of the need to restore and strengthen the connection to nature to benefit physical and mental health (Kogstad et al., 2012). Green care also means an increase in physical activity (green exercise), that has been

shown to affect mental health positively (Bischoff et al., 2007). However, the farmers' economic interest of IPT and the creation of jobs at their farms are eminent (Skjelkvåle, personal communication, November 2022), which might lead to a conflict of interest; the economy of the farm versus the health of the users.

2.4 IPT attitudes

In a conversation with Innlandet's County Governor, who has been working with IPT the last 20 years, it became apparent that despite being Norway's largest agricultural county – based on creation of economic value (County Governor of Innlandet, December 12, 2021) – attitudes towards farms and agriculture in Innlandet are poor, insofar as they value them less than other occupations or companies, which might be coloured by a lack of knowledge, a belief that farmers demand high subsidies, and the cultural view of favouring professions of higher education or professions in the urban areas (Skjelkvåle, personal communication, October 2022). This leads to an argument against the use of IPT and the potential risk of stigmatization of groups of young people that are taken out of their class in school to attend alternative education at a farm. As a consequence, Innlandet is lagging behind other counties when it comes to development of IPT (Skjelkvåle, personal communication, October 2022).

The interest of green care farms and life outdoors is becoming more and more prevalent. Tellnes (2017) argues for the combination of physical activity with cultural and social activities. This, he claims, creates a kind of togetherness or sense of belonging. He adds that even if the physical part of the activity might not motivate young people the social and cultural parts likely will (Tellnes, 2017). Perhaps this is a reason for young people exploring other arenas for social activity, as there is a large dropout from sports during teenage years (Tellnes, 2017). Despite this viewpoint, a systematic literature review from the University of South-Eastern Norway in Telemark claimed to show that the physical element of life outdoors was the aspect which contributed most to both physical and mental health (Bischoff et al., 2007). However, the study points out that there is a need for more research in the area of outdoor life, including the life at farms, and its relationship to health.

2.5 The development of IPT policy

The development of the IPT policy originates from the mid-1990s, in which a focus on increased production of goods and services in the agricultural sector worked as a driving force, leading to the use of farms as a pedagogical resource in the early 2000s (Norwegian Government, 2012). In 2007, the policy of IPT farms shifted from mainly focusing on agricultural business development towards a focus on using farms as an alternative health service, especially due to the increase of drop-outs and young adults that fell out of the labour market (Kogstad et al., 2012; Norwegian Government, 2007). Thus the Green Care action plan was launched by the Ministry of Food and Agriculture in which active care and partnerships with local communities and families were important parts of the action plan (Norwegian Government, 2007). Later, in 2012, the IPT policy expanded to a spectrum of sectors, including child and family protection, nursery schools and kindergartens, compulsory school, upper secondary school, adult education, after-school care, occupational training, outdoor and physical activities, adapted services for mental health, addiction, psychiatry, and services for the elderly (Norwegian Government, 2012).

The Norwegian Government's action plan for IPT (2013) refers to the White Paper (St. meld. 29, 2012-2013) "The Future of Health Care", where IPT is a potential solution within "active care", which is a strategy for future health care services including the use of social and cultural resources. Also, in the Public Health Act (St. meld. 34, 2012-2013) – *Good Health: Everyone's Responsibility* – IPT is referred to as an example of business services that are important for achieving the goals of public health policy, saying IPT can provide positive coping experiences and thus have a positive effect on physical and mental health (Norwegian Government, 2013). The County Governors are responsible for facilitating and developing IPT in broad interdisciplinary partnerships including health care, school and agricultural sectors (Norwegian Government, 2012).

2.6 Young people as a target group of IPT

The largest target group of IPT are young people, as two of their top three most-used services are alternative education (primary school and high school) and offers for kindergartens and farm nurseries (Norwegian Government, 2013). The fact that the most used IPT service is alternative education for young people (Norwegian Government, 2013), implies that such offers impact these young people's daily or weekly lives, potentially affecting their mental health. Leisure activities for children and youth, and family social assistance/relief are popular services among the IPT farms as well (Inn på tunet Norge SA, 2022), which also has a potential to affect young peoples' mental health.

The County Governor of Innlandet explained that there are no standard criteria or guidelines for which of the young people who are eligible for the IPT programs, but rather the teachers (and in some cases the parents) at their school who see students who need an adapted scheme such as that which IPT can offer (Skjelkvåle, personal communication, November 2022). The young people attending IPT farms are often ethnic Norwegian boys from middle school, who struggle to participate socially and academically in school (Skjelkvåle, personal communication, November 2022). The County Governor said that there is no overview of their socioeconomic background, but from her experience working with IPT the past two decades, the young people who attend IPT programs are vulnerable to experience mental health problems in the future by not being able to finish school, by struggling to be included into social groups, and later, by not having a job due to drop-out from school (Skjelkvåle, personal communication, November 2022).

2.7 Young people's experiences of green care

A Norwegian study of young people who had dropped out from school and attended green care farms for mental health reasons found that nearly all participants reported that they were pleased or very pleased with the nature-based service (Steigen et al., 2018). Another study of young people who were not in school or in work found that the most effective factors for increased well-being among young adults attending green care programmes were the varied tasks which allowed step-wise increases in self-efficacy and the leader's ability to create a good group atmosphere that

provided comfort for young people who lacked trust in people and needed safe situations to recover a positive sense of self (Kogstad et al., 2014). The young people in this study experienced marginalization and social exclusion by not “fitting” into the labour market and the school system, which resulted in dropping out of school or receiving welfare services (Kogstad et al., 2014). Efforts to prevent drop-out and social exclusion among the young include attempts to motivate and support the students while they are in the school system and find alternative arenas aiming at increasing self-confidence and competence, where the hope is that green care such as IPT can contribute to this (Kogstad et al., 2014).

Sollesnes and colleagues (2017) found that what young people perceived as the most important aspect of the IPT farm program towards getting back to school was the farmer’s personality, that they could trust him or her, and that they had a leader who was clear about expectations, and that he/she addressed negative behaviours clearly and in a non-judgmental way. These young people also described themselves as being condemned or stigmatized throughout their school days, and that it was hard to free themselves from the “loser” stamp (Sollesnes et al., 2017). Eventually, feeling valuable, being accepted as they were, and to receive and give trust emerged as the most important factors for their path to change – both in continuing/getting back to school and towards building positive relations (Sollesnes et al., 2017). Two studies from IPT in Innlandet (Granerud et al., 2012; Aasen, 2012) found that the users of IPT valued the feeling of being important in a social group while not only receiving support, but also by giving support to other group members. Other categories that were identified were being physically active in natural environments and close contact to animals (Granerud et al., 2012; Aasen, 2012).

2.7.1 Green care in Nordic countries had a positive effect on well-being

The literature on green care services in Nordic countries reported positive social and health effects, although the effects varied according to the context and conditions – political, economic and bureaucratic – that influenced the services (Steigen et al., 2016). Nature’s potentially healing effects on human health has recently received renewed interest, but now in a quite different society, one characterized by technocracy and a strong confidence in modern science, especially

in the health field (Steigen et al., 2016). In their review of participants' experiences of green care and nature-based services in Nordic countries, Steigen et al. (2016) found that nature was experienced as a rewarding and supportive environment, and being in nature with animals was described as meditative (being non-judgmental) and giving an inner peace of the participants. However, a Norwegian article about IPT and mental health revealed that green care services such as IPT seem to work best for those with an interest in animals and agriculture (Bjørngen et al., 2007). Those who do not have such a direct interest in farm life seem to experience the IPT service as a temporary service in a transitional phase while waiting for other alternatives over the longer term (Bjørngen et al., 2007). Another finding was that stigmatization of farm life and other poor attitudes related to IPT in small towns might hinder the possibilities for users to benefit from the service (Bjørngen et al., 2007). Despite this, the Nordic review about green care services in Nordic countries found that nature-based services had a positive effect on mental health in regards to mental well-being, a new positive attitude, self-acceptance, and self-insight among participants who were marginalized or in danger of dropping out from school and/or work due to ongoing mental health problems (Steigen et al., 2016). A decline in the symptoms of depression and anxiety was found and stress levels declined during participation in green care services (Steigen et al., 2016). Berget (2006) found that it can be difficult to measure the effect of green care for young people while attending IPT, and that the young people first noticed changes after their time at the farm.

2.7.2 Attributes of green care that influence mental health

The opportunity for physical activity was emphasized as important in many of the studies of green care, and the participants reported positive health and well-being experiences due to being physically active (Steigen et al., 2016). The participants experienced that their physical condition had been improved during their participation in green care services and that this again had positive effects on their mood and sleep patterns. The calming effect of natural views and elements in nature, as well as the presence of animals, are indicated in a number of studies (Beetz et al., 2012; Ewert & Chang, 2018; Tsunetsugu et al., 2013). Nature and its calming effect is

especially important for young vulnerable people to reduce their stress levels and to give them room to seek their own peace through practical work and life outdoors (Ylilauri & Voutilainen, 2021). Another important factor identified was the structure of the day that made everyday life more meaningful (Steigen et al., 2016). Being drawn out of passive lifestyles and obtaining a routine was reported in particular as generating satisfaction for many participants. In addition, most of the literature described experiences of meaningfulness and a sense of purpose with work tasks related to farm work and other nature-based activities (Steigen et al., 2016). The experience of being needed and useful, to see concrete results of their work, and to contribute to society and give something back rather than being a passive recipient, were all essential to experience meaningfulness, dignity and equal status (Granerud et al., 2012). The service leader, other participants, and the animals were important contributors to social support, including emotional, esteem, informational, and instrumental support in addition to social integration (Steigen et al., 2022). The participants were able to share experiences and be accepted for who they were when meeting people in the same situation with similar challenges. In addition, the cooperative aspect of working together was seen as beneficial by many of the participants, and it strengthened the solidarity and self-efficacy among them. The positive experiences of being a part of a group led to a more active social life outside the farms (Granerud et al., 2012).

In summary, social context and social support have been found to be important in nature-based studies. Supporting hope and motivation, building good relationships and networks, promoting citizenship and strengthening identity, dignity, meaning and efficacy were key concepts in the process of green care towards getting back to school or work and functioning psychosocially (Kogstad et al., 2014). Using examples from outdoor preschools, it is apparent that natural settings can produce effects that are both calming to an overactive child, and at the same time encouraging and activating for a timid child (Ylilauri & Voutilainen, 2021). During a national webinar of IPT in November 2022, schoolteachers and service providers suggested that IPT gives young people experiences that they can later express through art, essays at school and tell family and friends about. It gives them content and inspiration in life. An example used by primary school teachers was: “if you ask the students to write an essay, you need to give them something

to write about. When you ask the students to paint a picture, they need to have impressions in their lives to communicate and tell stories.” The webinar also emphasized that insight into our history and culture through farming is important for the students’ identity and creates a sense of belonging to society.

2.8 A need to investigate natural elements’ effect on well-being

More recently, mental health research has returned to a focus on the outdoors. A study from the Netherlands, looking at natural elements and their effect on human health and well-being, pointed out that it is hard to tell which element of the natural environment affects people’s health the most (de Vries, 2006). The study focused on preventive effects and those that enhance well-being and, more generally, quality of life in residential areas for urban residents. De Vries and colleagues (2003) showed a relationship between the local amount of green space and self-reported health at a national level. This relationship persisted after controlling for socio-demographic characteristics known to affect health. However, the research did not prove convincingly that the natural elements were instrumental in the observed relationship (de Vries, 2006). The Health Council of the Netherlands highlight five mechanisms, besides physical aspects of the environment, such as air quality, that links spending time in residential areas to well-being: reduction of stress, promoting physical activity, enhancing positive social contacts, healthy development of children and enhancing life quality (Health Council of the Netherlands, 2004). However, little is known about the size of the health effects and the contribution of the different mechanisms of natural elements in residential areas (de Vries, 2006). The study suggests many areas of future research to be conducted regarding natural elements and human well-being (de Vries, 2006). An example is that there is an indication that people with more positive social bonds feel healthier and live longer. If green areas stimulate such contacts, perhaps this is the factor that makes the greatest contribution to their mental health, not merely being outdoors alone in residential areas. The interrelationships of factors on human well-being make it difficult to assess the contribution and relative strength of the different mechanisms in a field setting, especially when looking for long-term effects. As a result, practical guidelines for policymakers, spatial planners, landscape architects, and health practitioners, are not always evidence-based.

2.9 Aim of study

The study set out to examine whether IPT had the beneficial mental health impact desired by policy-makers. While there is evidence that green care programmes can be effective, there is limited research on how green care functions and what the long-term effects are. There is a gap in the literature on young people's experiences of IPT. Thus the over-arching research question was: How do young people with mental health problems experience placements on IPT? Subsidiary research questions were: How does the mental health policy of IPT work in practice with the young users? Has IPT affected the lives of the young people involved in the scheme and, if so, how? What do young people perceive as the most beneficial aspect of the IPT experience for their well-being?

3. Methods

3.1 Ontological and epistemological paradigms

This chapter will outline the research strategy, research design and method for the study, including the underpinning ontological and epistemological perspectives. First, I will explain where my research is located in both ontological (the nature of social existence) and epistemological (the nature of social knowledge) terms. What we believe to be the nature of human existence has consequences for what we believe it is possible to know. Epistemological issues in social sciences are what is (or should be) seen as acceptable knowledge in a discipline, and if the social world can and should be studied according to the same principles and procedures as natural sciences (positivist epistemology) (Clark et al., 2021). Realism is an epistemological position that claims to identify a reality, independent of the senses, that is accessible to the researcher's tools and theoretical speculations (Clark et al., 2021). A realist epistemology asserts that the study of the social world should be concerned with the identification of the structures that generate that world (Clark et al., 2021). So-called 'critical realism' is a relatively common-place

and popular example of the realist approach. Unlike a positivist epistemology, critical realists accept that the structures that are identified may not be amenable to the senses (Clark et al., 2021). The Critical Realist approach proceeds as if there is, in practice, a reality which we can more or less adequately identify – on the basis of our observations, studies, and experiments – but that this will inevitably be more-or-less coloured by our individual perceptions, prejudices and interpretations (Roberts, 2014). By taking a critical realistic approach, I will follow the assumption that it is possible to adequately identify what might be termed ‘reality’ while, at the same time, acknowledging the fallibility of the researcher’s perceptions insofar as the complexity of the social world implies that our knowledge of it might always be more or less incomplete or misleading. Thus, in order to minimize bias, there is a need to reflect upon these tendencies in a reflexive and critical manner.

3.2 Research strategy

This study aimed to explore young people’s perceptions of the effects of green care in the form of the policy of IPT on their mental health and well-being. The study adopted a qualitative research strategy by conducting semi-structured interviews with the young people involved in IPT projects in order to obtain their experiences and perceptions. The semi-structured interview was based on a list of questions, an interview guide, that in an open way allowed and encouraged the interviewee to articulate a detailed response (Clark et al., 2021). Qualitative research emphasizes words rather than quantification in the collection and analysis of data (Clark et al., 2021). This qualitative research strategy was chosen to provide insight in topics regarding mental health and green care, and to seek meaning and interpretation of the young people’s perceptions and the way they viewed these topics.

3.3 Research design

The research design was a typical case study of 12 young people who have attended the programs at “Inn på tunet” farms in Innlandet, Trøndelag and Viken. A typical case study involves the detailed and intensive analysis of a single case, where the case could be an individual, group, or

organization, that captures the circumstances of a commonplace situation epitomizing a broader category (Clark et al., 2021). IPT farms are part of a broader category of shared features that are assured through quality systems EQUASS and KLS, making sure IPT farms follow the same ethical- and safety guidelines while providing services within physical activity, learning, food, animals and social support and more (Kogstad et al., 2012). This case study included five typical “quality-assured”¹ IPT farms with the identified features mentioned above where three farms are located in Innlandet, one farm is located in Trøndelag, and the last farm is located in Viken.

3.4 Research method

The research method employed was a semi-structured interview, as mentioned above. Semi-structured interviews refer to a context in which the interviewer has a series of questions that are in the general form of an interview guide, but where the interviewer can vary the sequence of questions (Clark et al., 2021). The interviewer has some latitude to ask further, follow-up questions in response to what they see as significant replies. Several pilot interviews were conducted to adjust the wording and sequence of questions. This resulted in a number of changes to the language from formal to less formal, from complicated sentences to simple sentences, and from using technical terms to everyday language adjusted to be understandable by young people. An example is question number 6 that was originally worded thus: "How would you summarize the advantages and disadvantages with the life on the farm?" Subsequently, and on the basis of the pilot interviews, it was re-worded thus: “What do you like best and least about being on the farm?” More follow-up questions were also added based on different answers in order to make the questions specifically related to IPT and their life. After adjusting the interview guide, a couple of the questions related to favourable activities at the farm seemed too similar, therefore one of them was replaced with the question “Did you learn something new at the farm (rather stating the particular farms name)?” Following the pilot interviews, experienced IPT farmers recommended using the actual farm name where each participant stayed to make the interview

¹ Quality-assured farms are approved through the quality systems: European Quality in Social Services (EQUASS) and “Kvalitetssystem i landbruk” (KLS); Quality system in agriculture.

more personal and accurate. The farmers advised easing into the interview by engaging the respondents in some harmless small talk first since the target group consisted of vulnerable individuals, many with a diagnosis such as ADHD.

3.5 Sampling strategy

The sampling strategy was purposive and convenient as the researcher lives and studies in Innlandet and most of the informants had attended an IPT farm in Innlandet. Purposive sampling is a form of non-probability sampling, a sample that has not been selected randomly, in which the researcher aims to sample cases or participants in a strategic way so that the sampled are relevant to the research questions that are being posed (Clark et al., 2021). A convenience sample is a sampling that is selected because of its availability to the researcher and is also a form of non-probability sampling (Clark et al., 2021). The informants were collected based on recommendation and advice from Innlandet County Governor, the administration of IPT and farmers with knowledge on which farms that would be relevant for my project based on the target group. Some of the informants were collected based on the snowball sampling strategy, where an informant or farmer that was already recruited recommended other potential informants. The target group was adjusted from middle school students to young people of the ages 13-30 years after experiencing short answers with little reflection from the pilot interviews with younger participants. The intension of extending the age range to 30 years was to ensure more detailed answers by including older informants who could reflect on what IPT had meant to their lives. The total number of informants was 12, 7 from Innlandet, 3 from Trøndelag and 2 from Viken.

3.6 The young people comprising the sample

The 12 young people recruited to this study were all from lower socioeconomic backgrounds. Their parents had no higher education, and many of them received disability benefits or worked as transport drivers. The young people themselves were either working or studying. The young people who were employed worked as transport drivers, fishermen, or furniture makers. Although this socio-economic profile was typical among the respondents in this study, no statistics on

socioeconomic status of users exists for IPT as a whole. The rest of the young people were still in school, some in middle school or high school, and two of them were studying agriculture and health and social services. The distribution of sexes among the informants were 3 females and 9 males. Nearly all of the informants had attended IPT during middle school age. IPT is most used by middle school students in Innlandet and perhaps the rest of the country. During a national webinar about IPT in November 2022, the County Governors said that IPT is rarely used by high school students because of stricter academic demands and the schools' economical resources. Innlandet County Governor said that in primary school, the children's "problems" are not as visible as they are later, in middle school. Teachers and parents see the need for an adapted scheme when the child is a little older (12-16 years old).

Having interviewed young people in a spread of ages from 13 to 30, most of them were old enough to reflect on their middle school years when attending an IPT farm. This emerged as being beneficial for the aim of study – to examine whether IPT has the beneficial mental health impact desired by policy-makers, as more mature informants had a greater insight of what IPT had meant for their lives over the long term. The interviews took place in January and February 2023 at an IPT farm, in their homes, at the local library and over the phone. The interviews conducted over the phone were necessary because of the great distance to some of the informants living in other parts of the country, and it also turned out to benefit the interview process by being less intimidating.

3.7 Thematic analysis

The transcripts from the recorded interviews were stored in a secure account at Inland Norway University of Applied Sciences. The recorded interviews lasted from 15 to 30 minutes and were stored in Nettskjema. Data analysis followed a thematic analysis approach – an approach that aims to extract key themes in the data (Clark et al., 2021). A theme is a category of interest identified by the analyst which relates to the research focus and builds on codes identified in transcripts and field notes. The coding followed a line-by-line coding strategy, where each line in the transcripts was analysed for significant content to the aim of study. The first round with

coding resulted in 140 codes. The codes were organized into 9 categories, where 3 main themes emerged. The themes provide the basis for a theoretical understanding of the collected data, that further can make a theoretical contribution to the literature relating to mental health and IPT as a health promotive service. To help being transparent in the thematic analysis and to justify how the chosen themes were selected, it is helpful having an audit trail of key decisions relating to coding, theme identification, and conceptualization, as well as an evidence base for those decisions. The process of thematic analysis followed these guiding set of principles: 1) reading thoroughly through the material to familiarize with the collected data; 2) beginning with open/initial coding of the materials; 3) elaborating codes into themes; 4) evaluating the higher-order themes, combine previous codes to into even higher-order codes; 5) examining possible links and connections between concepts and/or how the concepts varied in terms of features of the cases and create a network of themes; and 6) writing up the insights from the previous stages, tying the themes to the research focus and literature review (Clark et al., 2021).

3.8 Process of analysis

Meaning unit	Initial Codes	Focused Code	Thematic Code
“I get motivation from working practically at the farm”	Hikes, looking after the animals, working with forestry and wood, work on cars, horse-riding and cooking meals together	Meaningful activities	Self-identities
“At the farm I contribute with something positive that gives me a sense of mastery”	Having responsibilities, being expected by the farmer and the group, contributing into a community	Structure and routines	
“I was struggling in school. I was not understood by my teacher or the other students. A bad childhood in	High demands and perceived pressure in school and through social media	Feelings of stress, loneliness, and a lack of mastery	Perceptions of own emotions and mental health

<p>school affects mental health negatively”</p> <p>"Social media creates pressure to share about one’s life all the time. It creates a false facade which is negative for mental health”</p>			
<p>“I made friends and I got a family on the farm, something I didn’t have much of before”</p>	<p>The creation of positive relationships towards other young people and the farmer</p>	<p>Bonding and bridging capital</p>	<p>Social capital</p>

4. Ethics

Ethical issues with the study included making sure that the young people being interviewed were not experiencing the questions as harmful, and to minimize disturbance both to the respondents themselves and to their relationship with their environment (the farm). A key component to protecting participants from harm was maintaining the confidentiality and security of records, meaning that the identities and records of individuals were kept confidential. It also ensured that individuals stayed anonymous when presenting the findings. This was done by presenting the young people and the farms in a way that prevent them from being identified. Another key consideration was how the researcher’s characteristics might have impacted upon interactions with the interviewees. Factors such as gender, class or being an “outsider” might have caused uncomfortable situations for the interviewee. By being an outsider as a researcher lacking continuity with the group being studied, the researcher might not share certain understandings with the target group. However, the researcher and the informants spoke the same language, and most of the informants shared ethnic origin and nationality with the researcher, which are traits of

an insider position. Christensen and Dahl (1997) pointed out that anyone can be considered an insider for certain aspects of their identity and not for others.

Informed consent was another important ethical consideration. This was especially an ethical issue when interviewing young people who might not understand the scope of the research. The principle of informed consent means that, even when people know they are being asked to participate in research, they should be fully informed about the research process (Clark et al., 2021). To the degree that the young people gave informed consent based on an understanding of what participation was likely to involve, their right for privacy was important to keep in mind if there were questions that reached into private areas. Some interviewees might have found the questions asked unsettling, therefore, letting them know that they did not have to answer the questions, or that they could withdraw from the interview at any time, was of good ethical practice.

5. Theory

This chapter will cover a conceptual framework based on the critical literature review. The widespread psychological approaches to mental health in general, and stress and anxiety in particular, tend to focus on the supposed individual determinants of mental health and well-being. Such an individualistic focus has a number of shortcomings, including differences in time (e.g., trends over time) and place (e.g., regions and countries) and the significance of structural factors (such as age and life-stage [i.e., youth], socioeconomic status, gender, and ethnicity). Hence, the growing research into the social determinants of mental health and well-being.

5.1 Sociological approach to mental health

Today, the dominant discourse within neoliberal health policy, the autonomous individual is responsible for his/her own health. This is called individualism, where the individual is motivated by self-interest to increase his/her well-being with the least effort and resources possible (Marks et al., 2018). Thurston (2014) stated that public health sociology is rooted as patterns in society

and that public health exists in different social contexts. In a critique of individualistic causal explanations of mental health, Thurston (2014) emphasized the role of social structures and society as a whole rather than simply supposed individual inadequacy. Sociological perspectives predict that especially taxing living conditions, roles, and relationships are related to low levels of psychological well-being, more than the qualities of the individuals who must deal with these situations. Good mental health is integral to human health and well-being. To understand how people become stressed or why they experience mental health problems, it is important to bear in mind that the causes of stress/mental health problems are not simply a matter of personal choice. A person's mental health and many common mental disorders are shaped by social, economic, and physical environments (WHO, 2014). Mills (1959) pointed out that in order to understand individual's health in a sociological way, we must examine the contexts in which they live, where society and culture are an important part of the explanation. Factors that lead people to respond to emotional difficulties in different ways involve social characteristics such as gender, ethnicity, age, education and cultural values (Horwitz, 2009). Sociological approaches regard mental health and illness as aspects of social circumstances, such as negative life events, ongoing stressful circumstances, demanding social roles, levels of social support, and the strength of cultural systems of meaning (Horwitz, 2009). Social and cultural influences also shape the definitions of and responses to mental health problems. Mental health has become a social phenomenon – what we interpret as good mental health varies between cultures and changes over time. Recent trends, including the medicalization of a growing number of mental health conditions, the increased use of prescription drugs for mental health problems, and a greater willingness to identify emotional suffering as mental illnesses that require professional help, are transforming how modern societies deal with psychological problems (Horwitz, 2009).

5.1.1 Cultural conceptions of mental health have altered

Culture refers to socially shared systems of beliefs, values, and meanings. Sociological research is more likely to take place in schools, family settings, neighbourhoods, and communities – natural settings where people live. Cultural conceptions of what it means to be emotionally healthy or disturbed have radically altered in recent decades (Horwitz, 2009). An example is the

high levels of distress resulting from the inability of people to attain achievements valued by their culture, such as academic performance. Cultural systems of meaning or varied expression of distress in a culture, can lead to different definitions of mental illnesses and affect how it is treated. An example is medicalization of social life that occurred in the 1990s and 2000s, where conditions that previously had been defined as nonmedical difficulties are now seen as medical problems that ought to be treated with biomedical treatments (e.g., drugs) (Conrad, 2007). In the field of mental health, medicalization has made people more willing to seek professional help for their emotional problems and social definitions emphasize how mental troubles are signs of disease. Another example of cultural changes in defining mental disorders is the increase of diagnosing distressing and disruptive children with ADHD and treatment with medications. The question is if the rise of ADHD and the use of pacifying drugs are useful for disruptive behaviour, or if it is a discovery of a previously unknown disease. Prescribing a pill can communicate the message that issues that stem from relational conflicts or adjusting into social institutions (such as school), are easily remedied through pharmaceutical interventions in the form of medicines. Current health policy might be overly reliant on using medical remedies for concerns that often can be addressed through alternative social policies. For example, investing in childhood development programmes that creates a more stimulating learning environment than the classroom (such as IPT), might be a more effective response to childhood behavioural problems than pharmaceutical treatments.

5.2 Social determinants of mental health

The social determinants of health shape and profoundly influence both mental and physical health (WHO, 2014). The social determinants of health include biological, cultural, economic and environmental factors that perhaps contribute even more to mental health than what individual behaviour does. On this view, governments potentially have great influence on several of the outer-layer determinants of health (Dahlgren & Whitehead, 1991). Socioeconomic status is widely known to affect mental health and lifestyle choices, and high socioeconomic status enhances well-being. However, the negative effects of low socioeconomic status, such as impoverished circumstances, on poor mental health are stronger than the positive impact of

economic abundance on mental well-being. Behaviours and experiences associated with low socioeconomic status are poor nutrition, family instability, low personal control, less social support, high stress levels and poorer physical and mental health (Marks et al., 2018). Social determinants of mental health such as social networks and integration in the community are important to consider when understanding how people cope with stress. Resilient and hardy people often have more resources, both materialistic and social (social capital), which might increase their self-efficacy. The social determinants of health underscore the idea that socioeconomic status predicts health and creates a health gradient: people who are higher up in the “pecking order” of wealth, education, and status have better health and live longer than those at the lower end of the scale (Marks et al., 2018). Societies with low degrees of inequality, with milder differences in social socioeconomic status, lead to more egalitarian relationships with mutual states of well-being and happiness (Wilkinson & Pickett, 2010, 2018). As well as more equal societies and being integrated in a social group or groups, having a sense of purpose, structure and identity contribute to the feelings of well-being. The kind of societies we live in, and the sorts of cultural beliefs that we share, shape the seemingly innermost aspects of our thoughts, feelings, and behaviours. The question that emerges is: what sort of social arrangements can optimize happiness and minimize distress?

Risk and protective factors of mental health act on several different levels, including the individual, the family, the community, the structural and the population levels. Life in the outdoors can be an entrance to social community and be a source for increased life quality. Access to the natural environment and outdoor spaces is vitally important for good mental health (WHO, 2014). Effective interventions to improve people’s mental health combine activities in nature with social settings such as walking in parks, running, cycling, horse riding and gardening (WHO, 2014), and nature walks have improved mental concentration among children with ADHD. A social-determinants-of-health approach requires action across multiple sectors and levels. As Per Fugelli pointed out, a healthy life is not created in social isolation, but through communities that provide safety, belongingness, and respect (Fugelli & Ingstad, 2014). Fugelli (2014) said “Mennesket blir fellesskap” which can be translated to “man is formed by

community.”

5.2.1 Education can influence short- and long-term mental health

Social arrangements and institutions, such as education, social care, and work have a huge impact on the opportunities that empower people to choose their own course in life (WHO, 2014).

Empowerment of individuals and communities is at the heart of action on the social determinants (Dahlgren & Whitehead, 1991). Education is an example of empowerment and is important in building emotional resilience and affecting a range of later life outcomes that raise the risks of mental disorders – such as employment, income, and community participation. Schools and alternative learning arenas are important institutions capable of delivering upstream, preventive programmes to young people. Schools play an integral role in nurturing development in terms of social, emotional, academic and cognitive ability; the effects of which can influence young people’s short- and long-term mental health (WHO, 2014).

Wilkinson and Pickett (2010) hypothesized that structural inequality in society causes people to become more anxious, stressed, ashamed, untrusting and unhappy. The lack of perceived control and self-efficacy, such as control over academic life increases stress in individuals at the lower end of the social scale (Marks et al., 2018). Educational stressors and a shift to knowledge-based economies makes adolescents’ future prospects more dependent on their educational performance, which in turn can elicit (or induce) stress and mental health problems (Högberg, 2021). A considerable amount of research has investigated individual-level determinants of adolescent mental health problems; however, such approaches are limited when it comes to explaining secular trends across decades, cohorts and countries, and for understanding the societal changes underlying these trends. Education systems create a hierarchy of academic performance among students, the main criterium used to allocate individuals to positions in the labour market, thus creating a hierarchy of social prospects (Högberg, 2021). Wilkinson and Pickett (2018) state that the most likely explanation for why inequality increases status anxiety across entire societies is because it increases the sense that people at the top of the social ladder are extremely important and those at the bottom are worthless, and, as money becomes more

entrenched as a measure of people's worth, it makes us all more worried about our place in the hierarchy; in other words, our social status.

5.3 Social capital

Emile Durkheim (1951) meant that the nature of the connections people have with each other and with social institutions shape their mental health. People with strong social ties were least likely to have mental health problems, and least likely to commit suicide, and shared collective experiences protected against these fatal outcomes. Durkheim (1951) concluded that optimal mental health was found in societies that had strong systems of social integration that connected people to each other. Socially integrated people not only are less likely to develop mental health problems (Turner, 1999), but they are also better able to cope with stressful experiences that they face because they receive more social support from the members of their social networks.

Contemporary studies in the sociology of mental health confirm the importance of social integration as a fundamental cause of well-being (Horwitz, 2009). To better understand how and why certain people experience mental health problems, it is important to include psychosocial aspects of health and ill-health. The individual needs to be placed in a larger context, including family and the local community, rather than merely being scrutinized for biological explanations for health. Sociological factors can influence psychosocial experiences and vice versa. For example, if one has a poor education, and is unemployed, one will be increasingly susceptible to stress, loneliness and depression. People who are depressed will be less likely to obtain gainful employment and/or have sufficient energy and motivation to work.

At the macro level, psychosocial explanations focus on the impairment of social bonds and limited community participation, so-called *social capital* (Marks et al., 2018). Social capital can be found in friendship networks, neighbourhoods, schools, churches, sports clubs and other organizations. The concept of social capital has become increasingly popular in research into mental health and well-being in recent years. As a concept that provides a means of exploring the impact of the social on the psychological, the concept of social capital holds out the promise of refining psychosocial explanations. Social capital requires us to focus on the significance of

social bonds and community participation for mental health and well-being, particularly among the young. In the process, a focus upon the role of social capital (and social networks) encourages us to consider the potential role of an apparent weakening of civil society and a decline in trust that is said to have occurred as a consequence of COVID lockdowns and that may be reminiscent of Putnam's (2000) account of how American's "bowling alone" was an expression of profound and detrimental changes in the social fabric. Putnam (2000) pointed out that we have become increasingly disconnected from family, friends, neighbours, and our democratic structures. He meant that our social capital, our connections with each other, has plunged, impoverishing our lives and communities (Putnam, 2000). Social capital works through multiple channels, such as information flows, for example through social media, collective actions based on social network, or through norms of reciprocity through bonding or bridging. Bonding networks connect people who are similar, while bridging networks connect individuals who are diverse, often across disparate social cleavages (Putnam, 2000). Social capital also forms broader identities and solidarity within or across social groups, from an "I" mentality into a "we" mentality.

6. Results

In exploring the research questions, three overarching themes were identified in the thematic analysis of data: self-identities, perceptions of own emotional state and mental health, and social capital - both in school, at the farm and through social media. Within these themes, emotional and behavioural responses were two main categories with sub-categories such as meaningful activities, daily structure and routines, and physical activity.

6.1 Self-identities

The informants talked about feelings of loneliness, anxiety and depression towards their situation, of not "fitting in" academically or socially. They spoke about feelings of stress and a lack of mastery before they attended the IPT farm. "It was difficult being perceived as a problem child" (Sverre, 23 years of age, Geiterygg farm). "It did not feel good being stamped as a difficult child

by my teachers and classmates" (Filip, 18 years of age, Blåbær farm). In middle school, the academic system became stricter, with commencement of grading on tests and exams, which increased the stress experienced by many of the young people. The experience of being bullied alongside higher academic demands created both anxiety and depression for one respondent. Middle school was tough for nearly all the informants, and this was also the time where they were offered an adapted scheme through IPT farms.

Having the opportunity to spend one or two days a week at IPT was considered positive among all the young people interviewed. "In a way you get a kind of spark in life. A kind of new start in life, if you have had a rather bad childhood with school. Being at IPT is liberating" said Karl (25 years of age, Ull farm) who had experienced bullying in school. What stood out as most significant for positive mental health and in building positive self-identities from the data were: meaningful activities and structure and routines, while being a part of a group. The significance of meaningful activities seemed to lie in their impact upon the young people's self-esteem and self-identity. During IPT stays, the young people said that they felt accepted as they were, and they could participate in physical work and activities together with other young people and the farmers. The socialization led to the development of friendships that they perceived as beneficial both during the time period they went to IPT but also for their lives after.

6.1.1 Strengthening self-identities through meaningful activities

The young people emphasized meaningful activities such as hiking in nature, working with something of interest, taking care of animals, and helping each other with tasks at the farm. Examples of activities or work at IPT that they valued was looking after the animals, working with forestry and wood, working on cars, horse-riding and cooking meals together. "We started the day with eating breakfast, and then we went to the barn to feed and groom the animals, after that there was a good deal of woodwork, and later we could work in the car workshop for those who were interested. I was working a lot on cars and tractors there. We were also allowed to drive a quad bike and drive a tractor, that was really fun" (Even, 28 years of age, Snøtopp farm).

The informants spoke about having people and animals that relied on them, they needed their help and care, which made the time at IPT meaningful and strengthened their self-identity. “I used to help out grooming the horse and cleaning the stable. We also went for walks in the forest, and sometimes we played boccia” (Andy, 22 years of age, Hest farm). Contributing to the community was experienced as meaningful and strengthened their sense of self. Sharing nutritious meals together was another aspect of the social life at the farm that was highly valued by the young people. “The best part of the day was when we made food and ate together. I enjoyed making food with the others and the food was delicious” (David, 23 years of age, Havre farm).

At the farm they were allowed to "be themselves" and to learn by doing, a lot of practical work at the farm led to a better understanding of theoretical principles and they experienced their achievements as being meaningful. "I experienced the feeling of being free from theory at the farm. I could do practical work and things I enjoyed" said Even (28 years of age, Snøtopp farm). Patrik (25 years of age, Gran farm) said “I learned more by doing practical work" when talking about the differences between school and IPT. Two young people said that they had leader responsibilities towards other young people at the farm, delegating tasks and showing them how things were to be done. This, they said, contributed to their self-confidence and their experience of being a leader at the farm was beneficial for their work today: "My experience at the farm has brought me to where I am today. I have never been a theorist, I've always been better at practical things, so had I not had that opportunity through the farm, I don't know...I certainly wouldn't be driving a truck today" (Tore, 30 years of age, Gran farm). Seeing the results of their work and feeling tired in a good way after being at IPT was experienced as very positive for their mental health. "Having the opportunity to leave the school desk one day a week, and to enter the farmyard and stay there for a whole day, where the agenda wasn't theory, only practical tasks, it did something with me. I became happier and more satisfied. IPT gave me courage to work harder in school" said Amund (16 years of age, Havre farm) when describing the sense of mastery he experienced with practical work on the farm. In school, the young people with experiences from IPT had more to write about. They got impressions in their lives to

communicate and to be inspired from that were important when learning about themselves, what they enjoy doing and what they master. Leaving the school desk for a day or two a week to go to a farm where there was limited internet access had a calming effect on the young people. This might suggest that natural surroundings with less stimuli from social media reduced their stress levels.

Hikes in the natural landscape were mentioned by almost all the informants as positive for their well-being. Being outdoors with the group doing leisure activities such as horse riding or ball games was also referred to as positive for mental health. Arriving home from IPT, the young people mentioned being tired in a satisfying way after having used their bodies in physical, productive work. They also said that their experiences at the farm gave them memories to think about and share with others. IPT gave the young people a purpose, something to look forward to, and hope for their future because they experienced excelling at something meaningful.

The young people talked about how working with each other, learning to cooperate and to communicate was essential to their experience of IPT and to their lives since. An example is that three of the informants talked about how they learned to run a wood business, where they felled trees and sawed and split wood into firewood that they sold. The profit from the wood business was given to the young people who worked with wood. "When we worked with wood production, the more firewood we produced, the more trees we could cut down, and the more money we made. It taught us about employment and business, the more you work, the more money you earn," (Patrik, 25 years of age, Gran farm).

6.1.2 The importance of structure and routines

Structure and routines were sub-categories of meaningful activities that were interpreted as important for positive mental health and the development of self-identities. With structure and routines, the young people meant having to get up in the morning to go to work, school or IPT, and to experience predictability with work/school and everyday life. The young people identified

structure and routines as positive for mental health because it helped them keep themselves and their lives organized and purposeful. Knowing that someone or something was dependent on their presence and effort was talked about as beneficial for their mental health. “Stability and routines are important for my mental health. My usual tasks at the farm were to cook for the others and to take care of the animals” (Hanne, 27 years of age, Geiterygg farm). She also emphasized how they relied on each other: “At IPT there were people around me that gave me support, and I supported them back. We helped each other there.”

Many of the young people emphasized how important the shared meals at IPT were, that the meals helped structure each day with the same time being an enjoyable social gathering. Shared meals seemed to be important for the young peoples' well-being and sense of togetherness. Many of the informants said that each day began with having breakfast together while going through the day's schedule and assigning tasks and responsibilities. At two of the five recruited IPT farms, the young people had an hour of theory from the school syllabus after breakfast. English and math were subjects that were repeated. "I didn't enjoy having theory, but today I am thankful of the theory we were taught because it has been useful" (Filip, 18 years of age, Blåbær farm). The young people's responsibilities at the farm included cooking for the group, and this was talked about as a meaningful activity that was positive for their sense of mastery and self-confidence. An informant said that having a plan for the day and tasks assigned to the young people, made them experience independence by having responsibility to complete a job. “At the farm I became more independent because I was given more responsibilities. My responsibilities were the woodwork, feeding the animals, carpentry, to make hay bales, and helping the younger participants” (Tore, 30 years of age, Gran farm). Often, work at the farm required cooperation, and this challenged the young people's patience and communication skills, which many of the informants recognized as positive. The fact that the day at IPT was full of activities, both concerning work and leisure, time went by very fast, many of the young people said. Having a clear structure and routines at the farm was important for their work experience as well. Nearly all the informants talked about how their time at IPT benefitted their knowledge and experience of having a job. This, they said, has helped them later in life to maintain a job by knowing and

having experienced that having employment requires a lot of effort, discipline and structure, which they learned at the IPT farm.

6.1.3 Meaningful experiences with animals

Animal care was mentioned by several young people as valuable for their lives both during and after IPT. Learning how to take care of an animal that is dependent on you and learning their signs of need and their behaviour, to feed them and to groom them were meaningful activities that increased the young people's sense of responsibility and self-efficacy. Knowing that they were important for the animals' well-being gave them the opportunity to show concern for the animals. Some of the young people continued with horse riding after IPT, while a couple of respondents talked about walking and playing with the dog, and others continued to work at a farm: "The contact with animals felt safe, they did not judge me, they always liked me" (Ida, 19 years of age, Ull farm). Another girl said that riding a horse gave her a sense of mastery, because she was able to cooperate with a huge animal, and the feeling of working together was based on trust and goodwill. "The feeling of sitting on horseback, being in charge of where we are going, it felt great. It gave me butterflies in my stomach" (Sara, 14 years of age, Hest farm). The farmer at this particular farm said that horse riding gave the girl a new interest that she could enjoy beyond her time at IPT, and that being with animals has helped her to feel safer around people and it has become easier to make friends.

6.1.4 Physical activity and work experience benefited self-identity

All the informants referred to physical activity at the farm as a positive aspect of their time at IPT. They especially enjoyed hiking, animal care, horse riding or working at the farm. A lot of time was spent in the outdoors surrounded by an agricultural landscape and forests, which was emphasized as being "calming and providing a sense of freedom" (Hanne, 27 years of age, Geiterygg farm). When they arrived home, they felt relaxed and satisfied from having used their bodies. They learned about working life at the farm, about what having a job entails. This was identified as very useful for their future employment. The surroundings contributed to their

experience of IPT "There was no internet at the farm, which gave us a break and we were able to calm down" (Ida, 19 years of age, Ull farm).

Informants talked about being able to complete education after IPT, that it became easier to make friends and that they were able to get a job. Many of the informants said that being able to have a job today positively impacts their mental health and well-being. Sverre (23 years of age, Geitrygg farm) said "I was so tired of school, but at IPT I got to be outside and do things, which rescued my schooling. I am grateful that I got that opportunity, because without it, I don't think I would have completed school as well as I did. And I was accepted into high school, which has helped me a lot." Some informants even chose to continue to work at a farm and to study agriculture post-IPT. Tore (30 years of age, Gran farm) said that he had a leader responsibility at the farm that contributed to his role as at his job today; he said, "Today my thoughts and ideas are being heard and acted upon, I get a feeling of being important where my suggestions are valued more than they were before. My ideas can be smart in many ways." A couple of informants said that the experience at IPT gave them courage to continue to work and that they became more independent. Another informant said that he gained more mental strength, especially through pushing himself during long hikes and bike rides where the leaders and the other young people motivated him to continue even though he was tired. "We were on a long bike ride where I was helped up the steepest slopes. It was very tough. The others gave me motivation to continue to pedal and pedal upwards. I felt I gained more mental strength" (Amund, 16 years of age, Havre farm). Other aspects of IPT that the young people recognized as meaningful was that they learned how to tolerate others and to respect each other despite different ability levels and backgrounds. They learned how to work with others and to be patient with each other. "I have learned to tolerate and be patient with others, more than I was before IPT" (Karl, 25 years of age, Ull farm).

6.2 Perceptions of own emotions and mental health

Perceptions of stress and pressure were talked about in relation to school, social media and social capital. Nearly all the informants experienced stress at school. Experiencing trouble academically

and socially was linked with having been diagnosed with ADHD or dyslexia or simply experiencing difficulties with concentration in school. Before IPT, many of the informants described themselves as a student who struggled in school and experienced difficulties socializing and establishing friendships, in particular. Many of the informants had experienced school as something negative, a place where teachers did not understand or adjust the learning and activities for “people like them,” (Andy, 22 years of age, Hest farm). Many of the young people had been diagnosed with ADHD, and they believed this affected their behaviour and learning abilities in school. Informants talked about how their ADHD made them less attuned to theory and learning, while sitting still in school was difficult. They did not experience learning in the traditional ways as meaningful.

Responses to the question "What is it like to be X years old today?" was mixed. Some of the young people said that being young today is a feeling of freedom. "I can do what I want to do" (Ida, 19 years of age, Ull farm). The young people spoke about having a job they enjoy, and that their time at IPT showed them that being good at practical work can help land a job. Another comment was that there are so many opportunities for young people in Norway today when it comes to education and career paths, which was talked about in a positive tone. “When we live in Norway, we have the opportunity to do what we want and a freedom to choose education. It feels good” (Hanne, 27 years of age, Geiterygg farm). Some of the young people said that being young today is the same as it was before their time at IPT, but that they have gained more insight, work experience and have become more reasonable. However, many of the young people said that being a young adult today is stressful because of a feeling of elevated expectations and that society puts high demands on people, with everyone striving to become the best version of themselves and to be accepted and liked by others. Social media was mentioned by many as something that increases this pressure. Some young people described an inner pressure of being a grown-up. “You see people on the internet and in society, and you pick up things, and then you create expectations and demands on yourself. Society contributes to these expectations, but it is mostly created within us. We can’t stand against what society and others do. We continue to chase the better. It isn’t always bad to seek the best version of oneself, but I think we should be

more satisfied with what we have and how we are. The better is not always best” (Karl, 25 years of age, Ull farm). They also said that this pressure contributes to more loneliness, anxiety and depression. David (23 years of age, Havre farm) said “social media and the internet have made people more demanding; everything has to be perfect. If you’re not the coolest, then nobody listens to you among the boys.” Social media was mentioned by all the informants as a contributing factor to the expectations we create. Some said that they felt the pressure for young adults today to settle down and have a family, house and children. Being independent and having more responsibility was experienced as both positive and challenging aspects of being a young adult today.

An informant talked about how IPT helped her with anger management and how to tolerate others. She emphasized the diversity at IPT that taught her to be more patient with others. “I am not the most patient with people around me. I must practice and develop my patience, which I did at IPT” (Ida, 19 years of age, Ull farm). She also talked about how cooperating with people she did not get along with was something she learned at IPT: “The people at IPT were very different, and I learned to cooperate with people from different backgrounds. That is very important, I think. I have learned that sometimes you don’t like a person, but it doesn’t have to be the person’s fault” (Ida, 19 years of age, Ull farm). This experience was similar to those of the other young people as well. One boy said that IPT taught him to be respectful towards others and to be patient with people who were at a lower functional level than himself. His foster mother also said that IPT helped him understand how to behave and adjust his behaviour around people. Another boy said that being at IPT with all kinds of people, even older people, made him realize that everyone has abilities excel at something. He said “One of the people at the farm was an old blind man, and we gave him pieces of wood, and he stacked them perfectly, even though he couldn’t see. He really enjoyed his time at the farm. Having people of all ages there was good for us, because we got to know nice people, and some of us lacked having contact with adults.”

6.3 Social capital

6.3.1 Social capital in school affected mental health

One of the key features of the data was the ways in which the young people were especially concerned with their relationships with both peers and people in position of authority such as teachers, and the ways in which these relationships affected their mental health. Some of the young people spoke of being bullied in school, about having too much energy to sit still, and that they did not learn the way the other students did. "I didn't master the homework or tests in school" (Filip, 18 years of age, Blåbær farm). He explained how other classmates perceived him. "Classmates looked at me in a negative light because I did not understand what we were to have learned in class" (Filip, 18 years of age, Blåbær farm). This resulted in perceptions of a lack of mastery. "I developed low self-confidence, it felt like I didn't master anything" (Filip, 18 years of age, Blåbær farm). Many informants recollected similar experiences in school. This further resulted in students' absence from school, and a loss of hope for the future, they said. This was perceived as stressful for the young people: "He has been lonely a lot, and it has been difficult for him to socialize with other young people. He was often in conflicts with other students or teachers, and he had trouble making friends" observes a foster parent of one of the informants. A perceived pressure to perform well in school increased the youngsters' stress levels because of the feeling of not learning or mastering subjects in school as well as other students did. The young people spoke about how the school system does not have an adapted scheme for young people who are struggling. Some of the informants mentioned being placed in separate group rooms from their classmates because they had too much energy and could not sit still. A couple of informants said that their teachers in school sent them home because of their behaviour. Many of the informants said they did not feel "seen" or understood by their teachers. These were all examples from school that had negative effects on their mental health.

Social capital was identified as a positive aspect for well-being and mental health. However, being a part of an unstable group of friends with people who engaged in undesirable behaviours such as violence and drug use could be very damaging for mental health. A couple of the

informants used an example of how they used to be a part of a friend group or "gang" that had a goal to create fear among the other students in school, they were known to be violent and some used drugs. These kinds of relationships were seen as very damaging and amounted to a form of social capital that had a negative impact on their mental health. Bullying was another aspect of social capital that afflicted their mental health. An informant said that the bullying he experienced in primary and middle school led to the development of depression and anxiety, which he still struggles with today. Another example of social capital before IPT was the family in which the young people were raised. Some of them grew up in foster families either part time or full-time. Some of the young people said that growing up in a foster family part time was challenging, it was hard to feel attachment or belonging to a foster family that one did not see all the time. "It did not suit me to be with a foster family once a month, I never really got to know them, and it became awkward. The IPT farm turned out to fit me much better. It was easier to get into routines and it was in a countryside area" (Ida, 19 years of age, Ull farm).

6.3.2 Social capital at the farm

Social capital was identified as both positive and negative for mental health, depending on the particular people the youngsters had in their lives. The young people explained that having stable social contacts that provided support and safety was beneficial for their mental health. Bonding and building social capital at the farm had a positive impact upon the young people's feelings of self-esteem and self-worth. "It felt good that they showed interest in me. I could be myself there" (Andy, 22 years of age, Hest farm). The leader's role at IPT was mentioned as important by some of the young people. "They created a safe space and made me feel good just by being there and expressing interest in my life" (Ida, 19 years of age, Ull farm). Many of the young people said that at IPT they felt safe because of the people who were there. "I felt very welcomed by the people at the farm. The group we created at IPT was the best thing about being there" (Andy, 22 years of age, Hest farm). The young people talked about achieving a sense of mastery and a sense of belonging during their time at IPT. Patrik (25 years of age, Gran farm) said "there were good teachers at the farm. We were fewer students than in a regular class. The experience of feeling

seen and receiving more attention from teachers at the farm felt good.” This illustrates how bridging capital was important for the young people’s self-esteem and self-worth. At the IPT farm, they felt a safe and inclusive atmosphere, the farm also provided calming surroundings. The informants talked about how learning practical things instead of only theory, as they did in school, helped them believe in themselves and that this gave them more hope for the future. “If it hadn’t been for IPT, I wouldn’t have been able to complete school. IPT also gave me work experience that resulted in a job” (Even, 28 years of age, Snøtopp farm). The young people experienced increased self-efficacy and were inspired to continue to study or work. Nearly all the young people said that the sense of mastery and the sense of belonging at IPT were crucial for their completion of school and in their future lives. “I always looked forward to going to the farm because of the friendly people there. I met people who motivated me to do something. I enjoyed being around them, there was no pressure or concerns. Everything became brighter” (Karl, 25 years of age, Ull farm).

The informants said that their time at IPT helped them in forming friendships both at the farm, but also outside IPT. “Life at the farm was more social than everyday life at home. I made some of my first friends ever at the farm, lasting friendships. It was nice because then I had something to do in my free time. Friends are something you have for life” (Sverre, 23 years of age, Geiterygg farm). David (23 years of age, Havre farm) said “I feel greatest when I am together with my best friends and knowing that they truly care about me is what makes me feel good.” Many of the informants said that their time at IPT was the most social part of their life and that there was great openness for everyone to belong to the group despite different cultural and religious backgrounds. “The group we made at the farm was the best thing about being there. It was a safe space. Everyone was included and felt welcome there” (Andy, 22 years of age, Hest farm). However, Andy also said that “Everyone were different at the farm, coming from different countries and cultures. So, I had to find my own way to communicate with the others.” This is an example of bridging capital, however for those youths of similar ages and backgrounds this would rather be bonding capital. Hanne (27 years of age, Geiteryggen farm) also illustrated bridging capital: “There were people from other countries there, so I learned about religion and

culture. There was openness among us, we got to know each other. We became closer and it strengthened our group.” The young people emphasized the feeling of being seen, understood and valued by the leader and the other young people at IPT as important, something they lacked in school and for some at home too. An informant talked about having grown up in an unstable family situation, where she had trouble establishing safe relationships with family members and friends. She said that her time at IPT provided her with a kind of family that she felt safe around. The kind of relations one has to friends and family was mentioned by all the informants as significant for their well-being.

Social capital can be negative as well as positive for mental health. An example from two informants' time at IPT that could have been negative for mental health was sometimes experiencing a feeling of "all against one," giving a sense of being excluded from the "popular" group among the participants at the farm. This did not occur often, they said, but that it did affect the experience of IPT. The informants also said that social isolation or a lack of friends was negative for mental health. All of them emphasized the importance of not being alone with challenges in life and to have someone to lean on for support. Another factor that afflicted some young peoples' experiences of IPT were their classmates in school that stigmatized them as being different or problematic. This, on top of already struggling in school, was stressful, and some of the young people even experienced being bullied.

The development of friendships was crucial for the positive experiences of IPT. Some of the informants said that getting attention from the farmer and the other young people helped them to understand that they were important. Nearly all the informants talked about the sense of belonging they experienced both during and after IPT. “Being at the farm is social and it is easy to get to know each other because everyone is kind and talks to each other. Spending time with the people at the farm is good for my mental health. I have gotten more friends” (Sara, 14 years of age, Hest farm). The young people had made friends that they met in their free time after school and IPT. The friends they made at IPT became special to them because they were often in the same situation with having difficulties in school, and they had experiences at IPT in common.

Life on the farm helped them in building friendships there, but it also became easier to make friends in other arenas of life. Becoming more integrated in the community led to better mental health among these young people who had previously struggled to socialize. Knowing that people are interested in you and that you can participate well in a group, strengthened the informants' sense of self and their belief that they can contribute positively to society beyond their time at IPT. Having friendly and safe leaders at the farm was important for all the informants. "The farmers were not as strict as the teachers in school, they had a greater understanding of how to deal with someone like me" (Amund, 16 years of age, Havre farm). The leaders/farmers created a good atmosphere. When speaking to a farmer at one of the recruited IPT farms in this study, she said, "I am not here to make friends with the young people, but I am here to facilitate a good atmosphere for the young people so that they can make friends."

A couple of young people said that they wished they could have attended IPT more often than once a week, and that they also wished the municipality had more activities and services for young people. They felt like there should be an extended offering beyond IPT for young adults, so that there would be more arenas for community and socializing among the young. This was especially mentioned by young people who did not work or worked part-time. The desirability of bridging as well as bonding capital was also pointed out. "IPT should have more offerings to older people. They should mix the young people with the older people; I think that would have a positive effect. Many young people lack good relationships with adults in their life. And many need friends and a social network. It is great to have the opportunity to get to know a variety of people with different backgrounds and at different ages at IPT" (Hanne, 27 years of age, Geiterygg farm).

6.3.3 Social media affected mental health

Social media was identified by respondents as a popular channel of communication for the development of social capital in the form of bonding capital, but in contrast to the physical setting at IPT, it caused mental stress. Social media was indicated by the young people as a contributing

factor with negative consequences for mental health. As social media has increased in popularity in recent years, many young people stated their belief that this is not a positive development, as it consumes so much of their time and that the information, pictures and videos available exceeds to be too much and become negative for their mental health. Even (28 years of age, Snøtopp farm) said that his screen use has increased the past 10-15 years, and that the time spent on the phone should instead have been spent outdoors being active. He said, “People are too fond of sitting inside watching their screens instead of being outside and finding things to do. They are simply addicted to their screens.” The young people explained that their use of social media, continually sharing their life experiences, attempting to display one's best side creates a lot of pressure and stresses young people today because it creates images and impressions of perfect lives that are impossible to achieve. Body images and looks were identified as something social media promotes, and this creates pressure among young people to think that they must look a certain way. Two informants also said that with social media, the "whole world" is accessible to you, and this creates an overload of information and stimulation that is negative for mental health. They also said that social media leads to passivity, a lot of time is being spent sitting still at home rather than being active; they recognized this as being unhealthy both for their physical and mental health. A couple of young boys said that when they didn't have the IPT program during the weekend, they would sit still staring at their phones the whole day. At IPT, phone time was restricted, something they recognized as positive. However, one young boy said that less phone time made it difficult to keep in touch with friends when he was at the farm. Most young people did not miss phone time and social media during their time at IPT. “When I got to the farm, I could put the phone away and be unavailable, and I could calm down” (Ida, 19 years of age, Ull farm).

7. Discussion

Previous research on green care has stated that interrelationships of factors on human well-being make it difficult to assess the contribution and relative strength of the different mechanisms in a

field setting, such as IPT, especially when looking for long-term effects (de Vries, 2006). The contribution of this study, however, showed that teenagers and young adults who had attended an IPT farm years ago resulted in positive long-term effects such as strengthened self-identity and the development of social capital in the form of bridging and bonding capital. IPT experiences helped the young people in making friends, completing school, and increased the prospects of getting a job.

7.1 Strengthening self-identity through meaningful activities

What stood out as most significant for positive mental health from the data were meaningful activities and social capital, which were two essential parts of the IPT program. Most of the literature on green care described experiences of meaningfulness with tasks related to farm work and other nature-based activities (Steigen et al., 2016). This corresponds with the findings in this study. The benefits from having a variety of work tasks at the farm ensured that the young people could learn something new, engage themselves with something of interest and experience mastery. This seemed to be an important part in building their identity and to improve aspirations for the future. Meaningful activities often entailed being physically active, which is known to benefit mental health. Another aspect of meaningful activities was the experience of being needed and to be useful, to see the concrete result of their work, to contribute to society and to give something back rather than being a passive recipient, something that is supported by the study of Granerud and colleagues (2012). Both this study and previous studies identified an individual's feeling of contribution into a community as being highly valued. Being active, either through work or leisure, made sure that the young people got out of passivity and obtained a routine that gave them a new joy in life. Structure and routines that made everyday life more meaningful was also found as important in the literature on green care (Steigen et al., 2016). The young people knew that the day ahead would follow a schedule and that there were tasks to be completed, people and animals that relied on them, which gave them predictability and commitment. Being able to complete the tasks of the day increased their sense of self, especially for those who were struggling with school and often felt a lack of mastery in academic settings.

7.1.1 Meaningful activities at IPT reduced passive activity spent on social media

Meaningful activities at the farm that required active participation, focus, attention, and engagement among the young people seemed to be a key factor for positive experiences at IPT and their mental health. Many of the young people said that if it were not for IPT, they'd have been sitting on the couch all day or weekend with nothing else to do than spending time at social media. Social media was identified as something that was harmful to mental health. This is consistent with the work of Richards et al. (2015) on social media and mental health, that described the risks of social media afflicting mental health and well-being from negative influences including “false” images of people when presenting themselves only in a positive way, which in turn can lead to reduced self-image and self-esteem. Although not specifically addressed by the respondents of this study, Le Heuzey (2012) found that cyberbullying via social media can lead to depression, anxiety, social isolation and in some cases suicide.

Some of the young people said that the increased use of social media the past 10 years has made people addicted and immersed. Another problem is the lack of concentration that comes with constantly being pulled towards the screen. This might result in fewer childhood memories and experiences. Not only does social media consume their time, but it also puts pressure on people of how to look and how to live successful lives. As many of the young people talked about, social media has become a place where people share the perfect version of themselves, they create a false facade, and young people become unsure of themselves and how to live their lives. An unfortunate side of not having an offer such as IPT is that there will be more unorganized time, also called “dead-time”, which is then being filled with looking at the phone or the screen. As the young people said, if they do not have activities planned out for the day, they end up sitting a whole day on their screen. LaRosa (2011) identified the relationship between depression and being active on social media, and showed that teenagers who spend a great deal of time on social media begin to exhibit symptoms of depression. The young people in this study alluded to an awareness of the potential deleterious effects of social media but seemed unwilling or unable to avoid using such channels. Time spent on the screen precludes physical activity, screen time is

not led by anyone, it does not require your attendance, there is no reward other than short-term superficial impulses that trigger the reward system. This results in loneliness and perhaps anxiety and depression among young people today. Time spent alone on the phone might prevent young people from living a meaningful life, bonding with people and creating memories. Some may go as far as to call all these hours on the screen as wasted human potential.

IPT can replace this passive empty screen time with interesting experiences that enhances their ability to be creative and imaginative, to concentrate over a long period of time, to be inventive, and the ability to empathize with others. Respondents in this study recognized the benefit from IPT in helping to constrain their use of social media by engaging them in physical and social activities beneficial for their mental health. During the Webinar of IPT in November 2022, IPT farmers and schoolteachers said that IPT gave young people experiences that they can later express through art, essays at school and tell family and friends about. The results from this study also showed that IPT gave the young people content and inspiration in life, but also facilitated forming friendships and provided social support that helped them to complete school and get a job.

7.1.2 IPT as an alternative learning arena, empowering young people

Schools and alternative learning arenas, such as IPT, are important institutions capable of delivering upstream, preventive programmes to young people. They play an integral role in nurturing development in terms of social, emotional, academic and cognitive ability; the effects of which can influence young people's short- and long-term mental health (WHO, 2014). The activities, both practical and theoretical, at the farm supported the young people in completing school. At IPT, the young people were able to learn and work at their own pace, and they got extra help from tutors at the farm. This, they said, encouraged them to work harder in school. They experienced mastery and learning and working in different ways than in school increased their hope for the future – for example the possibilities of getting a job. Steigen et al. (2018) indicated that many young adults in Norway are not in school or employed due to mental health problems. However, it might be the other way around, that lacking a job induces mental health

problems. The labour market's increasing emphasis on education, communication competence, and social skills poses special challenges for people who dropped out of school (Steigen et al., 2018). Education is important for employment and is a way of empowering individuals to participate in the community. This protects against mental disorders and builds emotional resilience. The risks of developing mental disorders – such as employment, income, and community participation, can be prevented through services such as IPT that support young people in completing school.

7.2 Social bonds and support affect mental health

Social capital is identified as one of the most important gains of green care services such as IPT, something this study also emphasizes. Social capital requires us to focus on the significance of social bonds and community participation for mental health and well-being, particularly among the young. The literature on social capital emphasizes that socially integrated people not only are less likely to develop mental health problems (Turner, 1999), but they are also better able to cope with stressful experiences that they face because they receive more social support from the members of their social networks. The young people in this study talked about friendships and stable relationships as one of the most important aspects of mental health. Recent studies in the sociology of mental health confirm the importance of social integration as a fundamental cause of well-being (Horwitz, 2009). In the literature of green care, the service leader, other participants, and the animals were important contributors to social support, including emotional, esteem, informational, and instrumental support in addition to social integration (Steigen et al., 2022).

Emile Durkheim (1951) meant that the nature of the connections people have with each other and with social institutions shape their mental health. He also stated that people with strong social ties were least likely to have mental health problems, and sharing collective experiences is beneficial for well-being and protects against suicide. In this study, the participants were able to share experiences and be accepted for who they were when meeting people in the same situation with similar challenges. Meeting other people, learning how to socialize in a different setting than in school, was very important to all the young people and especially for the more “energetic” boys

with ADHD and the shy and more introverted girls who had experienced family challenges or bullying. To be seen and understood by grownups that they respected was something they experienced as very positive at IPT, which the study of Sollesnes et al. (2017) also emphasized. Cooperation and communication through working together was instructive for many of the participants, and it strengthened the solidarity and self-efficacy among the young people. Like the literature on green care, including the study of Granerud and colleagues (2012), this study also found that the positive experiences of being a part of a group led to a more active social life outside the farms, and it became easier to make friends. The benefits of developing safe and stable relationships both at and outside the farm contributed to their well-being. Durkheim (1951) concluded that optimal mental health was found in societies that had strong systems of social integration that connected people to each other. IPT is an example of an arena that can contribute to social integration by connecting young people to each other and to the farmers.

7.2.1 Stigmatization of young people attending IPT farms

Unfortunately, being “stamped” as a problem-child or student by their classmates in school due to their participation at IPT had a negative impact on some of the young people’s experiences of IPT. The problem of stigmatization was also found in the literature, that stigmatization of farm life and other poor attitudes related to IPT in small towns might hinder the possibilities for users to benefit from IPT (Bjørgeren et al., 2007). As mentioned in the literature review, the attitudes to farm life are not always positive (Skjelkvåle, personal communication, October 2022), and taking young people out of class to attend an alternative program can create conflicts within small towns or areas. Young people in middle school age are vulnerable, and especially if they are having trouble with school and socialization. The feeling of being unsuccessful and different than the rest was talked about by the young people. Having to attend IPT instead of a regular school day might cause even worse stigmatization and perhaps bullying, as these young people become more visible as different when leaving the classroom. The attitudes towards farm life in the community where they live might also affect how the young people view IPT. For example, in Innlandet county the attitudes towards farms and agriculture are poor, insofar as they value them less than other occupations or companies, perhaps because of the cultural view of favouring professions of

higher education or professions in the urban areas (Skjelkvåle, personal communication, October 2022).

7.2.2 Different forms of social capital may be more or less beneficial

The risk of developing serious mental health problems increases when several burdens (distress) occur at the same time, especially when there is little social support. Several studies indicate that school stress, both academically and socially, functions as a risk factor for mental health problems (Andersen & Bakken, 2015; Klinger et al., 2015; Låftman et al., 2013). For the young people in this study who attended IPT, of whom most have an ADHD diagnosis, school was experienced as very stressful. The young people talked about how the school system was not adjusted for “people like them”, that they learned in different ways than other students did. They also spoke about not being seen and understood by their teacher. The lack of mastery in school and being excluded socially, in addition to coming from families of low socioeconomic backgrounds, were factors that likely affected their mental health. All the young people in this study had parents or foster parents that either received disability benefits or did not have higher education. In the literature, the implication of socioeconomic status on mental health is a significant trait among young people who struggle the most, following a social gradient (Mykletun et al., 2009). Resilient and hardy people often have more resources, both materialistic and social (social capital), which affects mental health (World Health Organization, 2014).

Putnam (2000) emphasized social capital in the form of social bonds and community participation as significant for mental health and well-being. However, possessing different degrees and forms of social capital may be more or less beneficial to us. Being a part of an unstable friend group or a family with undesirable behaviours like violence or bullying was identified among respondents as a form of social capital that had a negative impact on their mental health. The young people talked about not fitting in, and some even experienced bullying in school or became a bully themselves. Experienced stress from conflicts with other people, including bullying, in addition to stress from schoolwork, is likely to cause mental health problems (Ungdata, 2018). Some of the young people said that the bullying and school pressure

they felt resulted in anxiety and depression, something they still struggle with today.

7.3 A need to promote young people's mental health

Data from HUNT, Ungdata and other recent studies of young people's mental health in Norway show a remarkable development in young people's life satisfaction compared to older generations. Young generations report poorer health, more chronic illness, more depression, anxiety disorders and a poorer quality of life. The increase in psychological stress among young people has led to dropping out of school and a strong increase in demand for health services and an increase in work disability. Strengthening mental health care and low-threshold services (such as IPT) for young people with mental health problems will be important to deal with this going forward, but it is perhaps even more important to think about prevention and health promotion. The mental health trends indicate that it is now almost normal to have psychological problems. Do we see a medicalization of normal feelings? Is sadness confused with depression and worrying with anxiety? To a certain extent, increased openness in society may have contributed to increased reporting of complaints, but this does not explain everything – young people also report poorer physical health and quality of life, and the pressure on the health services increases. Young girls and women score lowest on life quality, and people of low social status come worse out than the privileged. At the same time, the government is invested in mental health, and the initiatives have mainly been to strengthen mental health care, which have clearly not been successful. We have a societal problem that extends far beyond what the health service can repair. Quality of life is about more than mental health, it is a matter for all social arenas: school, working life, sport, culture, technology and media in addition to health care. There is a need for innovation in public health work for mental health to reach out to young people before they get ill. IPT and other nature-based services are examples of such public health work.

Mental health conditions are one of the main causes of the overall disease burden worldwide (Bailey, 2017). Health systems across the world have not yet responded adequately to the current burden of mental disorders (Bailey, 2017). The gap between the need for treatment and its

provision is wide. It is clear that engagement with greenspaces offers benefits in terms of mental health and well-being, and thus greenspaces can function as an upstream preventive mental health promotion intervention (Barton & Rogerson, 2017). Green care, such as IPT, should be prioritized as a potential solution to the current healthcare context of high demand, cost pressures and community fragmentation (Townsend & Weerasuriya, 2010). Evidence show that individuals living in urban areas with more greenspace have less mental distress, less anxiety and depression, greater well-being and healthier cortisol profiles than individuals living in areas with less greenspace (Barton & Rogerson, 2017). People who engage with nature-based groups, such as IPT, can gain much wider benefits than merely symptom reduction of mental health problems. These wider benefits include aspects within physical, mental and social well-being such as increased physical activity, stress reduction and social integration. This could result in a win-win outcome when enabling people with mental health problems to experience meaningful work, a sense of well-being, creation of social bonds and a sense of self-empowerment that comes with being able to work with others as a community in and across green spaces. Mental health services and public health improving measures could benefit from nature-based services to promote well-being in societies and increase quality of life for future generations. However, a more detailed understanding of nature's mechanisms on mental health and well-being is needed to better determine how and for whom nature-based services might work best.

7.4 Sociological approach to green care services such as IPT

Previous studies of green care have mainly explored the service providers' experiences of green care and what they perceive as beneficial to the users' mental health and well-being. The sociological approach to IPT in this study adds to the knowledge of the experiences some of the users of green care have. The present study also gives us insight in the young people's thoughts on mental health, both what they experience as beneficial and negative. The sociological approach explores the significance of social structures (e.g., social class), settings (e.g., schools or IPT farm) and processes (being referred to IPT) and how human interaction in such social institutions or arenas impact mental health and well-being. Programmes such as IPT represent a

social arena where community participation and integration are key features in enhancing young people's mental health. Empowerment of individuals and communities is at the heart of action on the social determinants of health. It is important to bear in mind that the causes of stress are not simply a matter of personal choice. The social determinants of health include biological, cultural, economic and environmental factors that perhaps contribute even more to stress than what individual behaviour does. Social arrangements and institutions, such as school (and IPT), social care, and work have a huge impact on the opportunities that empower people to choose their own course in life (WHO, 2014). Education, and alternative education such as IPT, are examples of empowerment of individuals (and communities) and is important in building emotional resilience and affecting a range of later life outcomes that raise the risks of mental disorders – such as employment, income, and community participation. Schools and alternative learning arenas such as IPT are important institutions capable of delivering upstream, preventive programmes to young people that can strengthen their self-identities by development of social bonds and integration, and by providing education/work experience that can influence young people's short- and long-term mental health (WHO, 2014).

A person's mental health and many common mental disorders are shaped by social, economic, and physical environments (WHO, 2014). The social determinants of health shape and profoundly influence both mental and physical health (WHO, 2014). Social capital has been given greater emphasis in research into mental health and well-being in recent years. Green care, such as IPT, uses human resources and social interactions in natural settings, often accompanied by animals, when supporting vulnerable young people, rather than the use of medication or therapeutic treatment by trained psychologists and psychiatrist. The sociological approach and the concept of social capital explores the impact of the social on the psychological, it holds out the promise of refining psychosocial explanations. Green care provides both an alternative educational arena and health services that support and empower young people through social bonds and community participation, meaningful activities and work, and learning about and experiencing nature and animals. Green care is equigenic – it reduces socioeconomic health inequalities by providing alternative education and health promotion services to vulnerable young

people who are in risk of dropping out of school. School-based social and emotional learning programmes are among the most effective mental health promotion strategies for countries of all income levels (WHO, 2022b). Supporting mental health among the young means strengthening community-based care that promotes social inclusion and participation in community life (WHO, 2022b). The significance of social bonds and community participation for current and future mental health and well-being is emphasized among the young people recruited in the present study. Perhaps green care programmes such as IPT could be presented as an alternative or supplementary treatment for psychiatric patients and as a preventive measure for a broader group of vulnerable young people.

7.5 The effect of the natural elements on mental health

Mental health research has returned to a focus on the outdoors and the natural elements' effect. A number of studies indicate that natural views and elements in nature have a calming effect, as well as the presence of animals (Beetz et al., 2012; Ewert & Chang, 2018; Tsunetsugu et al., 2013). Ylilauri and Voutilainen (2021) identified nature and its calming effect as especially important for young vulnerable people in reducing their stress levels and by giving them room to seek their own peace through practical work and life outdoors. However, studies looking at natural elements and their effect on human health and well-being point out that it is hard to tell which element of the natural environment affects people's health the most (de Vries, 2006). Participating in activities at the farms' outdoor spaces, both work tasks and leisure activities, were positive experiences among all the young people in this study. The decrease in perceived stress and the feeling of safety and belonging in natural surroundings contributed to the positive experiences of IPT. There is uncertainty in the literature on green care whether the natural surroundings alone positively affect young people's mental health, or if the natural space provides a safe arena to build social bonds which contributes more to their mental health. This study indicates that the combination of meaningful activities in social settings contribute more to feelings of well-being than nature itself. However, the activities at the IPT farm are intertwined to

the natural elements at the farm, which suggests that the natural elements play an important role as well. Bischoff and colleagues (2007) point out that there is a need for more research in the area of outdoor life, including the life at farms, and its relationship to health.

7.6 Limitations

There are several limitations of this study. First, the recruited young people were not representative for all the users of IPT. Although their ages spanned from 13 to 30 years, and both sexes were represented, the sampling was not random but rather purposive and convenient. The sampling was based on recommendations from IPT farmers and advisors within the central IPT administration, which might have led to skewed sampling towards users with positive experiences at IPT farms. There might be young people who were dissatisfied with their experience with IPT that preferred not to be interviewed or who were not recommended by IPT farmers or administrators. The fact that all the informants were from low socioeconomic backgrounds and that most of them shared traits like age, gender, nationality, and the experience of struggling in school could mean that the sampling was too homogeneous which might have led to similar answers and less rich data. The recruited young people were a vulnerable group and talking openly about sensitive themes might have been difficult for some, which might have affected the richness of collected data. Another limitation is that qualitative research is based on the informants' recollections, which might have been selective or otherwise inaccurate. Despite all efforts to the contrary, this might also hold true for interpretation of the interviews. Some of the interviews were held over the phone, which limited opportunities for observing the informants' body language and expressions. The interview guide might also represent a limitation as the questions could have been more specific to the aim of study, and to compensate for less detailed answers from some informants, more follow-up questions could have been posed. Another possible limitation was the analysis of the interviews. There is a possibility of having lost some meaning both when translating from Norwegian to English, and in the process of refining codes into main themes. Lastly, this study provides in-depth knowledge of only twelve informants' experiences of IPT. In order to examine whether green care in the form of IPT

services has achieved the positive mental health impact hoped for by politicians, the study could have benefitted from having also employed a quantitative survey to reach out to a larger population in order to be able to generalize the results.

8. Conclusion

There is a gap in the literature exploring the effects and processes of different interventions aimed at improving young people's mental health, and especially pinpointing what measures are effective and long-lasting. The aim of this study was to explore young people's mental health and to gain insight into their experiences at IPT farms. Little research has been carried out to study IPT and green care from the young users' point of view. This study contributes to this knowledge, it emphasizes how green care impacts the lives of young people both during and after their time at IPT. It is important to examine whether IPT has the beneficial mental health impacts policy-makers desired. The data indicates that IPT benefit young people's mental health through social integration (social capital), meaningful activities and community participation. The young people's experiences of IPT are valuable for policy-makers regarding green care. Today, IPT is presented as an example of a preventive measure in Norwegian governmental White papers. Both this study and the literature on green care have found that most young people gain friendships, mastery, knowledge and positive experiences at IPT. Many of the young people in this study said that they wouldn't be where they are today if it weren't for their time at IPT. Based on the twelve informants in this study, the health benefits of IPT seem to correspond to policy-makers' and societal hopes; to strengthen young people's mental health by being integrated in a community, to support young people to complete school and obtain gainful employment, and to strengthen young people's self-efficacy and identity.

There was no direct evidence in the interviews indicating that the IPT informants were influenced by the trend in society of heightened awareness on mental health where increased incidences of self-reported stress or mental health problems among young people have been documented in the literature. Two informants in fact claimed the opposite, that they were not more stressed now as

young adults compared with earlier in their life, which underscores the lack of influence of societal trends on their self-assessed mental health. Over-reporting mental health problems has been identified as a phenomenon stemming from a heightened awareness of mental health in society. Although it is impossible to determine conclusively, such over-reporting was likely not a major influence in this study.

The research in this study has demonstrated that IPT as a green care service had a positive mental health impact on the young people recruited. The main contribution of this research is the importance and effectiveness of social support in combination with meaningful activities towards strengthened self-identity, feelings of well-being and increased self-efficacy. The study also emphasizes how natural elements contribute to a safe and calming atmosphere that encourages physical activities and social interaction. The implications of the findings regarding mental health and young people with previous experiences at IPT farms are that such green care services have the potential to improve young people's well-being, their sense of self and prospects for completing school and getting a job – factors that the young people themselves recognized as beneficial for their mental health.

Green care has the potential to be a health promotive resource, either alone or as a supplement to other health care services. Access to the natural environment and outdoor spaces is vitally important for good mental health (WHO, 2014). Life in the outdoors can be an entrance to social community and be a source for increased life quality. The need for alternative care and services for mental health among the young is likely to persist. Therefore, it is important to explore services such as IPT that aim to provide both an alternative educational arena and health services that support and empower young people. Effective interventions to improve people's mental health combine activities in nature with social settings such as walking in parks, running, cycling, horse riding and gardening (WHO, 2014), and nature walks have improved mental concentration among children with ADHD. Young people can create positive experiences for their mental health and well-being through the development of social bonds and community participation, meaningful activities and work, and learning about and experiencing nature and animals. Green care embraces vulnerable young people who are at risk of dropping out of school. By doing this,

it reduces health-related socioeconomic inequalities by providing alternative education and health promotion services to young people at the lower end of the social gradient. IPT as an alternative learning arena that also facilitates activities in green spaces has the potential to promote better mental health and well-being for young people. The implications of this study for future policy points towards a recommendation in support of similar services to IPT that rely on social interactions in nature to improve mental health rather than wide-spread use of medication or therapeutic treatment by trained psychologists and psychiatrists. In conclusion, it is proposed that future research should concentrate on similar green care services' effects on young people's mental health and well-being.

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Appendices

I. The interview guide

Research questions:

How do young people experience IPT?

How does the national policy of green care work in practice with the young people?

What do young people experience as positive for their well-being at IPT?

The aim of the project is to gain a deeper insight in the young people's experiences and perceptions of IPT and life there and to investigate whether the national policy on mental health and green care work in practice.

Sociodemographic traits of informant:

Gender, age, occupation, parents' education level/occupation.

Questions for the young people:

- 1) What is it like to be X years old today?

- 2) What do you usually do at the farm (the name of the farm)?

- 3) What do you like the best and least about being at the farm?
(*Follow-up question: Can you give me an example?*)



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- 4) Did you learn anything new at the farm?
- 5) What is good mental health to you?
- 6) Now we have talked a little about life at the farm, and earlier I asked what you liked best and least about IPT. What do you feel when you do the things that you like the best at the farm (the name of the farm)?
(Follow-up question: Why do you think you feel this way?)
- 7) What do you think affects mental health negatively for young people?
(Follow-up question: Are there examples from life at the farm?)
- 8) How would you describe life at the farm in comparison with life at home?
(Follow-up question: What about in comparison with school?)
- 9) Would you recommend IPT to a friend?
(Follow-up question: Why/Why not?)
- 10) Who do you think IPT could be suitable for?
- 11) Is there anything else about IPT you want to talk about?

II. Project invitation and informed consent letter in Norwegian

Vil du delta i forskningsprosjektet

” Utforske mental helse blant unge på «Inn på tunet» gårdene”?

Dette er et spørsmål til deg om å delta i et forskningsprosjekt hvor formålet er å undersøke om «Inn på tunet» (IPT) gårder har den gunstige psykiske helseeffekten som politikerne håper på. I

dette skrivet gir vi deg informasjon om målene for prosjektet og hva deltakelse vil innebære for deg.

Formål

Formålet med prosjektet er å få et dypere innblikk i de unge brukernes erfaringer og synspunkter om IPT gården og livet der. Denne informasjonen vil jeg hente ut ifra dybdeintervjuer med 12 informanter fra ungdomsskolealder til 30 år som deltar eller har deltatt på en IPT gård. Det overordnede formålet med studien er å få kunnskap om mental helse blant unge, og å se på hvilke aspekter ved IPT gården de trives med/ikke trives med, noe som kan være nyttig kunnskap for å forebygge mot psykiske plager.

Forskningsspørsmålene er; hvordan opplever/opplevde unge brukere IPT gården? Hvordan fungerer den nasjonale politikken omkring grønn omsorg i praksis med de unge? Hva syns de unge er mest gunstig på IPT gården for deres egen velvære?

Forskningsprosjektet er en mastergrad ved Høyskolen i Innlandet, fakultet for helse- og sosialvitenskap.

Hvem er ansvarlig for forskningsprosjektet?

Høyskolen i Innlandet er ansvarlig for prosjektet.

Hvorfor får du spørsmål om å delta?

Kriteriene for utvalget til studien er unge mennesker som er/var deltakere på en kvalitetssikret (KSL) IPT gård. Henvendelsen om deltakelse i studien er sendt til 5 IPT gårder i Innlandet, Viken og Trøndelag. Utvalget er trukket ut ifra IPT gårder som har målgruppen ungdom/unge voksne, og at gården har aktiviteter som er tenkt til å bidra til god mental helse/velvære gjennom opplevelser med for eksempel natur, dyr og gårdsarbeid i fellesskap.

Hva innebærer det for deg å delta?

Metoden for studien er et intervju med deltakerne på tomannshånd. Intervjuene varer i 30-45 min og blir tatt opp på lyd-opptak og notater som holdes anonymt og lagres i Nettskjema hvor kun jeg som forsker har tilgang til opptakene. Noen korte spørsmål om deltakernes sosiodemografiske kjennetegn (kjønn, alder, utdanningsnivå/yrke, foreldres utdanningsnivå/yrke) vil også bli fylt ut.

Intervjuguide kan sendes til foreldre på forhånd av intervjuene hvis ønskelig.

Det er frivillig å delta

Det er frivillig å delta i prosjektet. Hvis du velger å delta, kan du når som helst trekke samtykket tilbake uten å oppgi noen grunn. Alle dine personopplysninger vil da bli slettet. Det vil ikke ha noen negative konsekvenser for deg hvis du ikke vil delta eller senere velger å trekke deg.

Det vil ikke påvirke ditt forhold til gårdstilbudet og de ansvarlige på IPT-gården.

Ditt personvern – hvordan vi oppbevarer og bruker dine opplysninger

Vi vil bare bruke opplysningene om deg til formålene vi har fortalt om i dette skrivet. Vi behandler opplysningene konfidensielt og i samsvar med personvernregelverket.

- Det er kun jeg som forsker og veilederen min fra Høyskolen i Innlandet som vil ha tilgang til opplysningene.
- Navnet og kontaktopplysningene dine vil jeg erstatte med en kode som lagres på egen navneliste adskilt fra øvrige data», lagre datamaterialet på forskningsserver, innelåst/kryptert, etc.
- Databehandler som skal lagre opplysningene heter Nettskjema.

Deltakerne vil ikke kunne gjenkjennes i publikasjon av forskningen, ettersom datamateriell anonymiseres.

Hva skjer med personopplysningene dine når forskningsprosjektet avsluttes?

Prosjektet vil etter planen avsluttes når oppgaven blir godkjent, rundt den 20. juni 2023. Etter prosjektslutt vil datamaterialet med dine personopplysninger slettes.

Hva gir oss rett til å behandle personopplysninger om deg?

Vi behandler opplysninger om deg basert på ditt samtykke.

På oppdrag fra Høyskolen i Innlandet har Personverntjenester vurdert at behandlingen av personopplysninger i dette prosjektet er i samsvar med personvernregelverket.

Dine rettigheter

Så lenge du kan identifiseres i datamaterialet, har du rett til:

- innsyn i hvilke opplysninger vi behandler om deg, og å få utlevert en kopi av opplysningene
- å få rettet opplysninger om deg som er feil eller misvisende
- å få slettet personopplysninger om deg
- å sende klage til Datatilsynet om behandlingen av dine personopplysninger

Hvis du har spørsmål til studien, eller ønsker å vite mer om eller benytte deg av dine rettigheter, ta kontakt med:

- Høyskolen i Innlandet ved veileder Ken Green, k.green@chester.ac.uk, eller student (forsker) Silje Wilson, siljewil@hotmail.com.
- Vårt personvernombud: Usman Asghar, usman.asghar@inn.no, tlf: 61287483, personvernombud@inn.no

Hvis du har spørsmål knyttet til Personverntjenester sin vurdering av prosjektet, kan du ta kontakt med:

- Personverntjenester på epost (personverntjenester@sikt.no) eller på telefon: 53 21 15 00.



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Med vennlig hilsen

Silje Wilson/Ken Green
(Forsker/veileder)

Samtykkeerklæring

Jeg har mottatt og forstått informasjon om prosjektet *Utforske mental helse blant unge på «Inn på tunet» gårdene*, og har fått anledning til å stille spørsmål. Jeg samtykker til:

- å delta i intervju
- å delta i kort kartleggingskjema

Jeg samtykker til at mine opplysninger behandles frem til prosjektet er avsluttet

(Signert av prosjektdeltakers foreldre og prosjektdeltaker, dato)

III. Project approval from The Norwegian Centre for Research Data (NSD)

Vurdering av behandling av personopplysninger

06.01.2023

Referansenummer

690171

Vurderingstype

Standard

Dato

06.01.2023

Prosjekttittel

Exploring mental health among young people at "Inn på tunet" farms

Behandlingsansvarlig institusjon

Høgskolen i Innlandet / Fakultet for helse- og sosialvitenskap / Institutt for folkehelse og idrettsvitenskap

Prosjektansvarlig

Ken Green

Student

Silje Wilson

Prosjektperiode

23.11.2022 - 31.12.2023

Kategorier personopplysninger

- Alminnelige
- Særlige

Lovlig grunnlag

- Samtykke (Personvernforordningen art. 6 nr. 1 bokstav a)
- Uttrykkelig samtykke (Personvernforordningen art. 9 nr. 2 bokstav a)

Behandlingen av personopplysningene er lovlig så fremt den gjennomføres som oppgitt i meldeskjemaet. Det lovlige grunnlaget gjelder til 31.12.2023.

[Meldeskjema](#)

Kommentar

OM VURDERINGEN Sikt har en avtale med institusjonen du forsker eller studerer ved. Denne avtalen innebærer at vi skal gi deg råd slik at behandlingen av personopplysninger i prosjektet ditt er lovlig etter personvernregelverket. TYPE PERSONOPPLYSNINGER Prosjektet vil behandle alminnelige personopplysninger og særlige kategorier av personopplysninger om helseopplysninger. Prosjektet vil innhente samtykke fra foresatte til behandlingen av personopplysninger om barna. Vår vurdering er at prosjektet legger opp til et samtykke i samsvar med kravene i art. 4 og 7, ved at det er en frivillig, spesifikk, informert og utvetydig bekreftelse som kan dokumenteres, og som den registrerte/foresatte kan trekke tilbake. VIKTIG INFORMASJON TIL DEG Din veileder har ikke godtatt invitasjonen for få tilgang til meldeskjemaet. Fristen er om fire dager. Har ikke veileder godtatt delingen innen da må du dele prosjektet med prosjektansvarlig på nytt. Velg "Del prosjekt" øverst i meldeskjemaet. INFORMASJONSSKRIVET Informasjonsskrivet ditt er godt skrevet, men dato for prosjektslutt samsvarer ikke med det du har oppgitt i meldeskjemaet. Du må derfor oppdatere informasjonsskrivet før du gir dette til forskningsdeltakerne dine. Du trenger ikke å laste opp den



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oppdaterte versjonen i meldeskjemaet. **FØLG DIN INSTITUSJONS RETNINGSLINJER** Vi har vurdert at du har lovlig grunnlag til å behandle personopplysningene, men husk at det er institusjonen du er ansatt/student ved som avgjør hvilke databehandlere du kan bruke og hvordan du må lagre og sikre data i ditt prosjekt. Husk å bruke leverandører som din institusjon har avtale med (f.eks. ved skylagring, nettspørreskjema, videosamtale el.) Personverntjenester legger til grunn at behandlingen oppfyller kravene i personvernforordningen om riktighet (art. 5.1 d), integritet og konfidensialitet (art. 5.1. f) og sikkerhet (art. 32). **MELD VESENTLIGE ENDRINGER** Dersom det skjer vesentlige endringer i behandlingen av personopplysninger, kan det være nødvendig å melde dette til oss ved å oppdatere meldeskjemaet. Se våre nettsider om hvilke endringer du må melde: <https://sikt.no/melde-endringer-i-meldeskjema> **OPPFØLGING AV PROSJEKTET** Vi vil følge opp ved planlagt avslutning for å avklare om behandlingen av personopplysningene er avsluttet. Lykke til med prosjektet!