

MICHAŁ ROMAN,^a WIM HEIJMAN^b

Care Farms: Dutch Roots and Polish Experiences

Abstract. The aim of this article is to describe the development opportunities for care farms and identify differences in the management of these facilities in the Netherlands and Poland, using survey data collected in 2024. The survey involved 90 care farm owners, including 67 from the Netherlands and 23 from Poland. It was found that Dutch service providers prioritized increasing the promotion of their tourism facilities, while their Polish counterparts preferred a strategy of diversifying their tourism offerings. The results of the χ^2 independence test showed that statistically significant differences in the structure of responses between Dutch and Polish respondents existed only for selected levels of the response variables.

Keywords: care farms, tourism offering, regional development, the Netherlands, Poland

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1. Introduction

Care farms are an innovative form of agricultural activity, which combines traditional farm functions with care, therapeutic and educational services (Emerson et al., 2012; Cleary et al., 2023). Care farms have appeared in response to growing social challenges such as population ageing, the increase in the number of people requiring long-term care and the need to integrate socially excluded people (Thoonen, et al., 2024; Iancu, 2013). The Netherlands has seen a growth in the

^a Warsaw University of Life Sciences, Institute of Economics and Finance, Department of Tourism, Social Communication and Consulting, <https://orcid.org/0000-0003-3596-2587>

^b Czech University of Life Sciences Prague, Faculty of Economics and Management, Department of Economics, <https://orcid.org/0000-0003-0514-3855>

number of care farms, which reflects different approaches to sustainable rural and agricultural development, as well as to social policy (Hassink et al., 2010).

As already mentioned, care farms combine agricultural activity with care for people in need of support (Elings, 2012; Elings & Hassink, 2008). Their characteristic feature is the use of typical farm assets for various therapeutic, care and integration activities. The beneficiaries are provided with various activities that help them keep fit, improve their well-being and encourage participation in social life (Baxter et al. 2015; Bjørgen & Johansen, 2007; Bond et al., 2007; Bragg, 2013; Burns et al., 2009; Catty et al., 2008; Clatworthy et al., 2013).

In the Netherlands, where the concept of care farms has had a long tradition, the model is already well established and enjoys wide support from the government and society at large. Dutch care farms are characterized by a high level of professionalization, and their development consists in further specialization of services and integration with the social welfare system (Crowe, 2024). There are currently over 1,400 care farms in the Netherlands, which provide over 6 million overnight stays per year (Hoogstra et al., 2024).

In Poland, despite being a relatively novel idea, care farms are gaining popularity as a way to meet the growing care needs in society (Knapik, 2020). The challenges faced by Polish care farms include the lack of appropriate regulations, low social awareness, and limited sources of financing. However, successful examples of foreign solutions, such as the Dutch model, indicate that there is great potential for the development of this sector in Poland as well (Kamiński et al., 2018). In 2024, 31 farms in Poland were registered as care farms (Zieliński et al., 2024).

The main aim of the following article is to present the organizational and financial factors of care farms in the Netherlands and Poland and outline possible directions for their development in an effort to bridge the current research gap in the literature of the subject.

The data collected by the authors suggest that care homes are becoming increasingly popular. The range of services offered by such facilities is diverse and adapted to the needs of young and old people requiring therapy to treat physical or mental problems.

2. Literature Review

As can be seen in Table 1 below, previous studies analysed as part of this review involved a number of different research methods depending on specific research goals and topic, including systematic literature review (SLR), empirical research based on

qualitative and quantitative data collected using questionnaires or interviews, the case study method, statistical data analysis, including modelling to predict trends in the development of care farms. The articles were selected from the Web of Science database using the key words ‘care farms’.

Table 1. A list of studies on the development of care farms in selected countries

Authors	Title	Year	Journal	Methods
Hassink, Zwartbol, Agricola, Elings, Thissen	Current status and potential of care farms in the Netherlands	2007	<i>NJAS – Wageningen Journal of Life Sciences</i>	statistical data analysis
Bruin, Oosting, Kuin, Hoefnagels, Blauw, Groot, Schols	Green Care Farms Promote Activity Among Elderly People With Dementia	2009	<i>Journal of Housing For the Elderly</i>	group and individual observations
Hassink, Elings, Zweekhorst, Nieuwenhuizen, Smit	Care farms in the Netherlands: Attractive empowerment-oriented and strengths-based practices in the community	2010	<i>Health & Place</i>	interview questionnaire
Leck, Upton, Evans	Growing well-beings: The positive experience of care farms	2015	<i>British Journal of Health Psychology</i>	interview questionnaire, statistical data analysis
Pedersen, Patil, Berget, Ihlebæk, Gonzalez	Mental Health Rehabilitation in a Care Farm Context: A Descriptive Review of Norwegian Intervention Studies	2016	<i>Work</i>	LR a with a non-systematic search strategy
Hassink, De Bruin, Berget, Elings	Exploring the Role of Farm Animals in Providing Care at Care Farms	2017	<i>Animals</i>	survey questionnaire
de Boer, Hamers, Zwakhalen, Tan, Verbeek	Quality of care and quality of life of people with dementia living at green care farms: a cross-sectional study	2017	<i>BMC Geriatr</i>	survey questionnaire
Buist, Verbeek, de Boer, de Bruin	Innovating dementia care; implementing characteristics of green care farms in other long-term care settings	2018	<i>International Psychogeriatrics</i>	interview questionnaire
Murray, Wickramasekera, Elings, Bragg, Brennan, Richardson, Wright, Llorente, Cade, Shickle, Tubeuf, Elsey	The impact of care farms on quality of life, depression and anxiety among different population groups: A systematic review	2019	<i>Campbell Systematic Reviews</i>	SLR
Wojcieszak-Zbierska, Roman, Nadolny	Functioning of Care Farms in Poland on the Example of a Selected Case Study	2022	<i>Annals of the Polish Association of Agricultural and Agribusiness Economists</i>	case study
Barnhart, Silverwood, Efid, Wells	Animal assisted interventions on therapy farms for those with autism	2023	<i>The Humanistic Psychologist</i>	observation method, interview questionnaire with practitioners
Mitchell, Hardman, Howarth, Cook	Mind, body and blood: advancing green care through innovative methodologies within the field of health geography	2024	<i>Cities & Health</i>	pilot case study

Source: Authors' own work

Hassink et al. (2007) used data from the National Agricultural Census, which were analysed to describe the care farming sector in the Netherlands. The authors found that the number of care farms had increased from 75 in 1998 to 591 in 2005, which suggested that care farming was the fastest growing sector of multifunctional agriculture. Almost 10,000 people used the services of care farms in 2005, with non-institutional care farms accounting for 80% of that market. The main customer groups included people with mental disorders, those undergoing psychiatric treatment, patients with autism, the elderly and young people. The average annual income from care activities of a non-institutional care farm was about €73,000, which corresponded to an annual income of €37.1 million for the entire Dutch non-institutional care farming sector. The annual income from care activities was significantly higher than that from other extended activities. In 2005, care farming created 473 additional jobs in the Netherlands. According to the authors, the outlook for care farming was positive and the growth in the number of care farms was likely to continue.

In another study concerning the Netherlands, Bruin et al. (2009) found that an increasing number of green care farms provided day care for community-dwelling elderly people with dementia. In order to find out whether participation in activities and the use of facilities by elderly people with dementia in green care farms differed from those in regular day care facilities, the authors conducted group and individual observations in 11 green care farms and 12 regular day care facilities. They found that activities of elderly people in green care farms were more frequent, more of them were conducted outdoors, were more physically intensive, and more often suited for individuals than those in regular day care facilities. The authors concluded that the environment of green care farms could be more beneficial for elderly people with dementia than that of regular day care facilities.

In their 2010 study Hassink et al. wanted to know if care farms in the Netherlands were examples of social integration. They identified characteristics of care farms that were particularly important for three different groups of clients: people with serious mental health problems, people from families caring for young people and frail older individuals. They conducted interviews with 41 clients, 33 care farmers and 27 health workers. They found that care farms were perceived as providers of unique services owing to a combination of different characteristics: a personal and committed attitude of the farmer, a safe community, useful and varied activities and a green environment.

Leck, Upton, Evans (2015) investigated how being on a care farm affects health and well-being. Their study involved 216 recipients of care farm services. They found that the farm environment had a positive effect on clients' health, their positive experiences supported their personal development, and related social interac-

tions became increasingly influential over time. The health and well-being outcomes of being on a care farm were found to affect many aspects of the human condition, especially in the case of vulnerable people with a wide range of personal needs.

Pedersen, Patil, Berget, Ihlebæk, Gonzalez (2016) investigated care farms in Norway and found they could provide a variety of services, such as promoting mental and physical health, which are increasingly used in mental health rehabilitation in Norway. According to the authors, care farms can perform a complementary function to mental health rehabilitation institutions by offering meaningful and engaging activities and social inclusion.

Hassink, De Bruin, Berget, Elings (2017) investigated the role of farm animals in providing care to different types of participants in care farms (e.g., young people with behavioural problems, people with severe mental health problems, and people with dementia). Alternative and promising environments of care farms offer opportunities of interacting with animals, which are not available in the therapeutic environment of institutional health care. They found that activities involving animals and their value for different types of participants varied. They concluded that farm animals were an important element of the care farm environment that could meet the care needs of different types of participants.

Boer, Hamers, Zwakhalen, Tan, Verbeek (2017) recognized the growing popularity of a radically new approach to home care for people with dementia, which is exemplified by the green care farm in the Netherlands. They compared the quality of care in green care farms, ordinary small residential facilities and traditional care homes for people with dementia.

Buist, Verbeek, de Boer, de Bruin (2018) found that people with dementia in green care farms were more physically active, had more social interactions, participated in more activities and went outside more often than people in other long-term dementia care facilities. These aspects could positively influence health and well-being. They investigated which and how features of care farms could be implemented in other long-term dementia care facilities, taking into account possible facilitators and barriers.

Murray, Wickramasekera, Elings, et al. (2019) conducted a systematic review of the impact of care farming on quality of life, depression and anxiety, on a range of service user groups, including people with intellectual disabilities, mental and physical health problems, people suffering from substance abuse, adult offenders, discouraged youth, socially isolated older people and the long-term unemployed. They concluded that care farms improved people's quality of life and found some evidence that they could alleviate depression and anxiety.

Wojcieszak-Zbierska, Roman, Nadolny (2022) described one care farm in terms of the services it provided to seniors. According to the authors, the creation of care

farms in rural areas of Poland is an innovative idea in the context of social agriculture. Such activities can stabilize social and economic life in rural areas.

According to Barnhart, Silverwood, Efir, Wells (2023), animal-based interventions are becoming increasingly popular in treating symptoms of autism spectrum disorder (ASD). Given the lack of information as to which animals and animal-specific factors provide the most beneficial therapeutic benefits to effectively manage ASD symptoms, they examined observations and values of those who provide therapeutic interventions involving animals to individuals with autism spectrum disorder (ASD).

Mitchell, Hardman, Howarth, Cook (2024) reported that after the COVID-19 pandemic there has been an increased interest in creative stays in rural areas, including care farms. The authors believe that there is a great interest in community gardening and care farming.

3. Comparative Analysis of the Development of Agritourism, Including Care Farms, in the Netherlands and Poland

3.1. Status and Development Potential of Care Farms in the Netherlands and Poland

Rural tourism, including agritourism, in the Netherlands and Poland, involves the provision of services in rural areas on active agritourism farms, including care services. Care farms in the Netherlands vary greatly, ranging from large farms, e.g. those that keep dairy cattle, where the income from agricultural production constitutes a significant part of total income, to those where agricultural production is used exclusively to meet the needs of therapy, e.g. in the form of a vegetable and herb garden (Roman et al., 2024).

In the Netherlands, there are around 2,000 providers of agritourism services, including 1,400 care farms (with 900 entities operating as agricultural holdings, 300 others run by healthcare workers, and the rest operated by other individuals and legal entities); 995 of these entities are registered with the Federation of Care Farms, which cooperates very closely with the Ministry of Agriculture (De Moor, 2024).

A typical care farm in the Netherlands was established at the initiative of the farm owner, it usually offers day care, caters to a diverse group of recipients, does not provide specialist medical care but creates conditions that help its clients remain active (according to the 'No treatment' principle), offers a wide range of

activities combined with the possibility of working on the farm, offers services on selected days of the week, depending on the farm, from 1 to 5 days a week.

Care farms in the Netherlands offer a wide range of activities for care recipients, including practical and useful activities suited to the needs of the participants. By engaging participants in activities such as gardening, caring for animals or preparing meals together, care farms seek to educate and activate people in need of support. Another priority objective is to establish and maintain relationships with the local community. Social farms in the Netherlands are financed by relying on different sources of income.

People operating care farms in the Netherlands treat their work as a mission that, apart from the financial aspect, gives them a sense of doing something good for others. They see the beneficial effects of contact with nature, closeness to animals, being in a group, and everyday duties during simple farm work on people with various disabilities. The main mission of Dutch care farms is to get people out of their homes by finding them something to do that will give their lives meaning. People in their care regain the sense of being useful members of society, and do not feel excluded. By staying people on a farm, the well-being of people with special needs improves and they are more socially integrated.

There are over 8,300 agritourism providers in Poland, which is a reflection of the country's exceptionally favourable natural and cultural conditions for this type of service. There are 31 agritourism care farms in Poland: 30 in the province of Kujawsko-Pomorskie and one in the province of Lubuskie.

In both countries, social tourism is mostly associated with rural areas, which is why care farms are part of the so-called social agriculture trend, which is an alternative approach to agriculture based on the assumption that farm resources can be effectively used for other purposes. Social agriculture can therefore be understood as a combination of agricultural activity with social activity in four distinct areas: 1) re-educational and therapeutic activities, 2) integration through work and social inclusion, 3) pedagogical activities, and 4) care services (Leck et al., 2014).

A care farm can be defined as an entity engaged in agricultural activity and providing support in the field of care and social integration for individuals and families in order to improve their functioning.

Services in the field of care and social integration are provided by exploiting the farm's infrastructure and are associated with the farm's agricultural activity. The care farm should have farm animals or agricultural crops that can be used as part of agrotherapy.

A care farm can be operated by a social economy entity or as part of economic activity, which includes care and integration activities tailored to the individual needs of the target group (Hassink et al., 2020).

3.2. Strengths and Weaknesses of the Development of Care Farms in the Netherlands and Poland

The Dutch care farms sector is much larger than its counterparts in other European countries. Volunteers play a significant role in such activities, mainly by providing transport to town residents within a radius of 15 kilometres. Fuel costs are partially reimbursed by local governments. Additional insurance, required in the case of transporting passengers, is mainly financed by local authorities, which are also involved in referring people in need of assistance to the farm. Social workers contact future charges and examine their prospective needs during their stay at the care farm.

Farms can also benefit from public funds as part of what is known as the personal budget system, which offers people in need the possibility of using state-issued vouchers for care services issued at the farm. Beneficiaries can choose the provider of the services they are entitled to, and many of them opt for care farms. The services are also paid for directly by care recipients. Currently, care farms can operate under individual contracts for the provision of care services, including contracts involving financing from the personal budget, contracts for financing from private funds and contracts financed by local government.

In the Netherlands, care farms operate as members of a larger cooperative, which gives them a stronger position in their relations with the local government and the ability to obtain funds allocated in tenders for care services.

Another key aspect of the system is the integration of care farms with local communities, which includes the participation of volunteers, who help to transport participants or assist in daily activities, the organization of open meetings, e.g. at Christmas, which can be attended by care farm residents, carers, volunteers, as well as members of the local community.

One of the key roles in Dutch care farms is that of the farmers who run them. It is their responsibility to ensure safety. This involves not only managing the facility itself, but also motivating the participants to be active. Their main task, however, is to help participants focus on their abilities, not on their illnesses.

Residents of a care farm must have an opportunity to participate in farm work, especially with animals and plants. This gives them a chance to perform useful work with visible effects. Residents can choose activities they find interesting and which they can treat as a challenge. Another benefit is the green environment, which helps residents relax and has a positive effect on their health and well-being.

According to data from the Polish Ministry of Family, Labor and Social Policy (2019) published in the report "Information on the situation of seniors in Poland in 2019", about 2.1 million people aged over 65 live in rural areas. This number

is forecasted to reach 3.4 million in 2035, which means an increase of 60%. Thus, the percentage of seniors living in rural areas is predicted to increase from about 14 to 22%.

To address the aging of the rural community, the National Centre for Research and the Ministry of Agriculture and Rural Development launched the GROWID project, which continued from 2019 to 2022 in cooperation with the Agricultural Advisory Centre in Brwinów, Krakow Branch, the Jagiellonian University and the University of Agriculture in Krakow. The aim of the project was to develop a systemic model enabling the establishment of a network of care farms in Poland (Fig. 1).

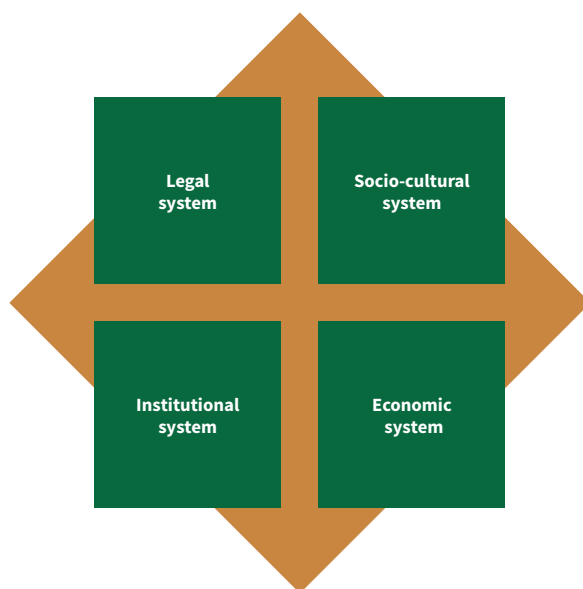


Figure 1. The model of a care farm
Source: Stępnik et al. (2020)

To sum up, the number of people requiring support in the Netherlands and in Poland keeps increasing. This group includes not only the elderly (owing to population ageing), but also people with disabilities, who are at risk of social exclusion. Rural areas and agriculture offer excellent conditions for the creation of care farms with multiple opportunities for the development of such services.

Unfortunately, compared to the Netherlands, the development potential of care farms in Poland is still rather limited. First of all, there is no recognized definition of a care farm in Poland or principles that could regulate their functioning. These farms are often defined in the sense of social agriculture. The existing literature contains concepts like social farming, social farms or green farms. It is also to es-

tablish a model of operation for such a facility, including the legal framework and a system of financing, like the one which exists in the Netherlands.

4. Research Method and Data

In order to identify the main factors that affect the operation of care farms, empirical data were collected using a survey questionnaire. The Dutch data were collected in the Gelderland region between June 20 and September 14, 2024. The sample consisting of 67 farms was selected at random from a list of care farms in the Gelderland region, which was obtained from the Dutch Association of Care Farms. In Poland, the question was answered by representatives of 23 care farms in the province of Kujawsko-Pomorskie (the counties of Tucholski, Mogileński, Wąbrzeski, Świecki, Brodnicki, Rypiński, Włocławski, Golubsko-Dobrzyński, Żniński, Sępoleński) during a survey conducted from October 1 to 31 October, 2024. The following results are only part of the survey that Michał Roman conducted as part of his research internship at Wageningen University & Research between June 14 and September 14, 2024.

The χ^2 test of independence was used to check whether there was a relationship between the nominal variable — the country (Poland vs. the Netherlands) — and one of response variables.

Table 2. Characteristics of the sample

Category		Netherlands		Poland	
		N=67	%	N=23	%
Sex	Female	29	43.3	15	65.2
	Male	38	56.7	8	34.8
Age	Up to 34 years	1	1.6	–	–
	35–44	6	8.9	3	13.1
	45–54	16	23.8	14	60.9
	55–64	26	38.8	5	21.7
	Over 65 years old	18	26.9	1	4.3
Education	Basic	7	10.4	1	4.3
	Basic professional qualifications	9	13.4	2	8.7
	Medium	37	55.2	14	60.9
	Higher education	14	21.0	6	26.1

Source: Authors' own work

5. Results

5.1. Recipients of Care Farm Services

The most frequently reported category of recipients of services provided by Dutch care farms in the survey were the elderly (97%) and people with disabilities (67.2%). In contrast, 96% of Polish respondents mentioned people with physical and intellectual disabilities, while services for seniors were reported only by a third of the surveyed farms (Table 3).

Table 3. The number of service providers in the Dutch and Polish survey who reported specific categories of people using care farm services

Category	Netherlands		Poland		Test χ^2 (p-value)
	(N=67)	%	(N=23)	%	
Elderly people	65	97.0	7	30.4	<0.001
People with various types of physical and intellectual disabilities	45	67.2	22	95.7	0.007
People with dementia	32	47.8	11	47.8	0.996
People struggling with burnout	21	31.3	6	26.1	0.635
People with addictions	9	13.4	4	17.4	*
Socially excluded persons requiring reintegration (e.g. released from prisons, long-term unemployment)	5	7.5	2	8.7	*
Children with special educational needs	4	6.0	1	4.3	*
Troubled teens	2	3.0	0	0	*

*The χ^2 test of independence was not conducted owing to small cell frequencies and small sample size.

Source: Authors' own work

As can be seen from the table above, care farms mainly provide services to the elderly, people with disabilities (both physical and intellectual), people with chronic illnesses, and those struggling with mental health issues or social exclusion. For many recipients, care farms are an alternative to traditional care institutions, by offering a more intimate, home-like environment, a personalized approach, and the opportunity to participate in the daily work and life of the farm. This form of care fosters social integration, activation, and improved quality of life for participants.

While people with disabilities are a major category catered for by farms in both countries (67.2% and 95.7%), there is a big difference (97% vs 30.4%) when it comes to seniors, which were reported only by a third of Polish respondents, which means that care services for the elderly in Polish care farms are still in their early stage.

5.2. Typology of Care Farms

The most frequently mentioned type of Dutch farms where care services were provided were dairy farms (28.4%), while in the Polish survey, the most frequent farm type were mixed farms (34.8%).

It is worth noting that customers of care farms are not limited to patients but also include tourists. While the majority of those who use the services of care farms suffer from some kind of health problems sick or are in need of care, there is a small group of customers who visit these places with their children, stay overnight, relax in nature, participate in handicraft or culinary workshops, and help with simple farm chores, such as feeding the animals.

Table 4. The number of service providers in the Dutch and Polish survey who reported specific categories of care farms

Category	Netherlands		Poland		Test χ^2 (p-value)
	(N=67)	%	(N=23)	%	
Dairy farms	19	28.4	3	13.0	*
Other grassland farms	12	17.9	5	21.7	0.686
Horticulture farms	10	14.9	2	8.7	*
Intensive livestock farms	9	13.4	1	4.3	*
Mixed farms	7	10.4	8	34.8	0.007
Arable farms	6	9.0	4	17.4	0.267
Goat or sheep farms	4	6.0	0	0	*

*The χ^2 test of independence was not conducted owing to small cell frequencies and small sample size.
Source: Authors' own work

In other words, in addition to performing the caregiving function, care farms can also have an educational and integrative function by fostering contact with nature and intergenerational relationships.

5.3. Sources of Financing

As can be seen in Table 5 below, the most popular forms of financing for Dutch care farms in the survey are contracts with care institutions or clients' personal budgets (67.2%). Care services provided by Polish farms surveyed were mainly financed directly by their clients. In other words, while Polish care farms rely almost exclusively on clients' fees, their counterparts in the Netherlands can benefit from various institutional forms of financing.

Table 5. The number of service providers in the Dutch and Polish survey who reported specific sources of financing

Category	Netherlands		Poland		Test χ^2 (p-value)
	(N=67)	%	(N=23)	%	
Independent care farms that mainly use the personal budgets of clients	45	67.2	22	95.7	0.007
Care farms that are part of a care institution	44	65.7	0	0	<0.001
Independent care farms operating under WLZ* rules	27	40.3	0	0	**
Independent care farms that cooperate with a care institution	11	16.4	2	8.7	**
Different types of care farms, e.g. farms using the reintegration budgets of municipalities	4	6.0	0	0	**
Care farms that do not receive any remuneration for their services do not receive any remuneration for their services	2	3.0	1	4.3	0.753

*Wet Langdurige Zorg (WLZ), or Long-Term Care Act in English, is the Dutch law providing lifelong intensive care for those needing permanent supervision or 24-hour care proximity. It funds stays in care institutions (e.g., nursing homes or disability facilities) or intensive home care (e.g., full home package or personal budget).

**The χ^2 test of independence was not conducted owing to small cell frequencies and small sample size.

Source: Authors' own work

5.4. Directions of Development of Care Farms

Another question that respondents in the survey were asked about were the directions of development of their care farm. As can be seen below, 80% of service providers from the Netherlands wanted to increase the promotion of their tourism offering. 91% of Polish farmers, planned to diversify their tourism offering.

Table 6. The number of service providers in the Dutch and Polish survey who reported specific directions of development for their farms

Category	Netherlands		Poland		Test χ^2 (p-value)
	(N=67)	%	(N=23)	%	
Greater promotion of the tourism offering	54	80.6	15	65.2	0.132
Diversification of the tourism offering	33	49.3	21	91.3	<0.001
More cooperation with other tourism entities, organizations and institutions	34	50.7	12	52.2	0.906
The farm will remain unchanged	8	11.9	5	21.7	0.249
More investment, including farm expansion	6	9.0	9	39.1	<0.001

Source: Authors' own work

The promotion of care farms is an important element in the development of care services in rural areas. Promotion efforts should focus on increasing public

awareness of the existence and role of care farms, encouraging potential clients (individuals in need of care and their families) to utilize care farm services, inspiring other farmers to launch similar initiatives, and building trust in the farms as a safe, professional, and socially valuable place.

In order to check whether there are statistically significant differences between care farms in Poland and the Netherlands, the chi-square test was used to test the relationship between the country of operation and the frequency distributions of four qualitative variables (e.g., service users, farm type, financing sources, development directions).

Results of the χ^2 test of independence indicate that statistically significant differences between the structure of responses of Polish and Dutch respondents exist only for some levels of the response variables. In other words, in most cases — despite the apparent percentage differences — there is no basis to reject the null hypothesis (the lack of correlation between country and a particular level of the target variable), which suggests that the observed differences may result from random sample variation rather than a true, systematic difference between the countries studied.

Another problem that should be mentioned in this context is the relatively small size of the Polish sample ($N = 23$), which may have reduced the statistical power of the test, increasing the risk of missing true correlations. Consequently, the lack of statistical significance is not necessarily the real absence of differences but may be the result of an insufficient number of observations.

6. Discussion

The Dutch and Polish care farms analysed in the previous section engage in various activities that can all be classified as social farming. They also exemplify the difference in the approach to the idea of social and care farming in both countries. In Poland, agriculture, social care, therapy and pedagogy are regulated by different laws. Statistically speaking, the structures of responses are similar, but qualitative analysis indicates different trends in the broad understanding of the development of care farms in each country. The label of social farming is applied typically to most educational farms, and most social farms are not specialized in a particular field. In the Netherlands, the emphasis is clearly placed on the diversity of target groups that care farms cater to. The Dutch farms in the survey can therefore serve as model examples of a care farm.

Care farms are a business model that plays an important role in the process of social integration and offering support for people in need. In the Netherlands, this

sector is more developed and regulated, while in Poland the idea of care farms is relatively new, albeit it is gaining popularity. In the Netherlands, care farms have enjoyed great recognition for years, mainly due to government support and social involvement. This development is facilitated by support that care farms receive through subsidies and development programmes. There is also a high level of social awareness in the Netherlands in this respect. Dutch society is well acquainted with the idea of care farms, which explains a higher level of interest in and support for such initiatives. The development of care farms is also driven by population aging society a growing need for long-term care support (DeGraves, Meijers & Estabrooks et al., 2024).

The development of care farms in Poland, although still at an early stage, shows that the Dutch model can be successfully adapted to local conditions. A look at the historical development of Dutch care farms reveals that the success of this business model rests on three main pillars: a long-term strategy of state support, active cross-sectoral cooperation, and the deeply rooted concept of social farming in public policy.

In Poland, although the inspiration from the Dutch model is clear, its implementation faces a number of barriers, which include limited funding, insufficient regulations, and low public awareness of the role and capabilities of care farms. However, experiences from pilot ministerial and EU projects conducted to date (e.g., the Rural Development Programme) demonstrate that even under current conditions, it is possible to create high-quality care facilities in rural areas.

In Poland, the idea of care farms is still at its development stage, which creates both challenges and opportunities. The main problem is the lack of regulations concerning this sector and no dedicated government support for this type of activity, although demographic changes and increasing care needs for seniors and people with disabilities provide a rationale for the existence of care farms. The availability of EU funds and local initiatives could become a catalyst for the development of care farms in the future. Despite the evident differences in the level of development of care farms in the Netherlands and Poland, both countries have the potential for further development of this sector. In the Netherlands, this will require further government support and innovation in the services offered, while in Poland it is necessary to create the legal framework, exploit the idea of public-private partnerships and build up public awareness of the benefits of care farms. This process should be inspired by the Dutch experience, especially as regards regulation and financing.

Care farms can serve as a future model for social integration and support for people in need in both countries, but the lasting success of these initiatives, especially in Poland, will depend on the level of legislative, financial and social support.

As confirmed by Dutch and Polish respondents, the main selling points of care farms are not only the green environment but also meaningful activities, contact with plants and animals and an informal non-medical atmosphere (Berget & Braastad, 2011; Fratiglioni et al., 2004; Rosenberg & Knox, 2005; Rotheram et al., 2017). Studies have shown that clients suffering from mental illnesses or addictions are particularly appreciative of the social values of care farms. Although the Polish version of the care farm model differs from the Dutch model, it can become a lasting element of the care system for the elderly and those in need, provided it receives the political, social and educational support necessary to enable the full potential of combining agriculture with care services.

7. Conclusions

Care farms are an innovative form of social support that combines agricultural activity with care for vulnerable individuals — the elderly, people with disabilities, those struggling with mental health issues, or social exclusion (Conradson, 2005; De Bruin et al., 2010; Eriksson et al., 2011; Hassink & van Dijk, 2006; Ketelaars et al., 2001). The idea originates from the Netherlands, where care farms have operated for over 20 years as part of social farming. Dutch care farms offer a range of services including day care, occupational therapy, education, and integration with the local community. By combining agricultural activities with social services farms provide residents with opportunities to participate in daily chores and interact with nature and animals, which supports their mental and physical well-being. Dutch farms benefit from various sources of financing, including the healthcare system, local government, and income from agricultural activities.

In Poland, the concept of care farms is developing gradually. The Dutch model has been introduced mainly through pilot projects, training, and experience sharing (e.g., the GROWID project). However, the Dutch model needs to be adapted to the Polish context, which is characterised by a less developed system for financing social services, a limited number of farms willing to provide such services, and the relatively low level of trust and cooperation between farmers and social institutions. Despite these challenges, the potential of care farms in Poland is significant, especially given population aging and the growing demand for alternative forms of care for the elderly and disadvantaged. The Dutch experience demonstrates that it is possible to create a model that not only helps people but also supports the development of local communities and rural farms.

From a theoretical perspective, this article contributes to the evolving concept

of social farming and the social economy in rural areas. The existence of care farms highlights the need for an interdisciplinary approach that combines theories of social policy, rural development, labour sociology, and well-being economics. Polish examples of adapting the Dutch model demonstrate that the transfer of social solutions between has to account for local cultural, institutional, and economic conditions. It is therefore possible to make a number of practical recommendations regarding the future development of this sector:

1. Create a clear legal framework for the operation of care farms, which should also regulate the status of the caregiver and the ward.
2. Implement a system of certification and service quality control to increase public trust and the safety of participants.
3. Expand financial support programmes (e.g., within the Rural Development Programme or local government funds) for farmers wishing to establish care businesses.
4. Conduct information and educational campaigns targeted at local communities, social welfare centres (OSPs), and families of those requiring care.
5. Integrate care farms into local social service networks, for example, through collaboration with social welfare centres (OSP), NGOs, and medical facilities.

8. Limitations

This study described in the article was based on a comparative analysis of survey data, and the sample of Polish respondents was relatively small, which means that the results may not be easily generalised. There is a lack of broad, systematic, large-scale empirical research that would enable the assessment of the effectiveness, quality, and long-term outcomes of care farms in Poland. The investigation of this subject is further complicated by differences in regulations and the lack of a uniform system for monitoring this type of activity.

CRedit Authorship Contribution Statement

The authors declare that they jointly wrote the introduction, literature review, discussion, and conclusions. The research and analysis were conducted by Michał Roman.

Declaration of interest

The authors declare no conflict of interest

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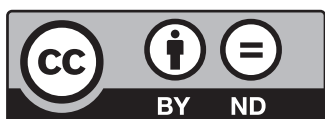
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Gospodarstwa opiekuńcze: holenderskie korzenie i polskie doświadczenia

Streszczenie. Celem artykułu jest opis możliwości rozwoju gospodarstw opiekuńczych i wskazanie różnic w prowadzeniu tych obiektów w Holandii oraz Polsce na podstawie danych ankietowych zebranych w roku 2024. W badaniu wzięło udział 90 właścicieli gospodarstw opiekuńczych, w tym 67 z Holandii i 23 z Polski. Stwierdzono, że holenderscy usługodawcy stawiali przede wszystkim na zwiększanie promocji swoich obiektów turystycznych, podczas gdy ich polscy odpowiednicy preferowali strategię dywersyfikacji swojej oferty turystycznej. Wyniki testu niezależności χ^2 wykazały, że statystycznie istotne różnice w strukturze odpowiedzi między respondentami z Holandii i Polski występowały jedynie w przypadku wybranych kategorii badanych zmiennych.

Słowa kluczowe: gospodarstwa opiekuńcze, oferta turystyczna, rozwój regionalny, Holandia, Polska



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