

## PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (<http://bmjopen.bmj.com/site/about/resources/checklist.pdf>) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

### ARTICLE DETAILS

<b>TITLE (PROVISIONAL)</b>	Can Care Farms improve quality of life and reduce offending? A pilot study among probation service-users in England.
<b>AUTHORS</b>	Elsey, Helen Farragher, Tracey Tubeuf, Sandy Bragg, Rachel Elings, Marjolein Brennan, Cathy Gold, Rochelle Shickle, Darren Wickramasekera, Nyantara Richardson, Zoe Cade, Janet Murray, Jenni

### VERSION 1 – REVIEW

<b>REVIEWER</b>	Prof Gill McIvor University of Stirling UK
<b>REVIEW RETURNED</b>	12-Oct-2017

<b>GENERAL COMMENTS</b>	<p>Care farms, in principle, offer a promising therapeutic approach with people with convictions. This paper explored the feasibility of evaluating their impact using a range of outcome measures, including PNC reconviction data. The paper is weakened, however, by a lack of methodological detail and by factual inaccuracies. The authors would have benefited from perusal of the extensive criminological literature of the challenges associated with evaluating interventions of this kind – this would have demonstrated that the challenges they identify have already been well documented.</p> <p>The specific methodological problems include the allocation to the CF and comparator sites. It is not clear what type of CO the offenders were subject to – if it was unpaid work requirements, then it would not be appropriate in any case to assess the ‘therapeutic’ impact of CFs because unpaid work is not inherently therapeutic in intent. If those allocated to different interventions were subject to different conditions then this is inherently problematic because such allocation would be needs led and mean that like was not being compared with like. The comparator sites, and the characteristics of those allocated to them and the CFs appear to be so different as to make comparison relatively meaningless, even with the use of propensity score matching. What were the criteria that had been used by the probation service to allocate people to different</p>
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	<p>interventions? The ‘representativeness’ of the sample (although I use this term cautiously with such a small sample size) is also questionable since 29% were female – this is much larger than the percentage of women subject to COs in England and Wales.</p> <p>There is insufficient detail on the outcome measures, especially the PNC data and potential problems associated with it. Were the CF and comparator groups followed up for the same length of time – and, if so, for how long?: the follow-up period should ideally be the same for everyone. Were the PNC data free from ‘pseudo-reconvictions’ (that is, convictions rather occur after the intervention but which relate to offences committed before it)? Why was there any expectation that health outcomes might differ between the two groups other than as a result of the a priori differences between them? The costing data lacks sufficient detail and clarity. It is not clear how the annual costs of the interventions and comparator sites were arrived at – hourly rates are quoted but hourly rates of what? Are the annual costs total annual cost to the probation service or costs per participant?</p> <p>The use of relatively loose terminology suggests a lack of familiarity with the criminal justice system. For example, reference is made to the ‘risk of reconviction’ (a hypothetical) when it should be the ‘rate of reconviction’ (an actual occurrence). It is also stated that decisions about which organisation (CRC or probation service) manages offenders once they have been sentenced and the types of activities they undertake is made by the courts – this is inaccurate: the court decides which conditions will be attached to a CO but the actual activities of an unpaid work or other requirement will be determined by the probation service as will the decision as to who manages the case, based on an assessment of risk. Some of the results are presented as if they are novel/surprising/interesting when they would not be to anyone familiar with the literature on factors associated with risk of recidivism.</p> <p>In conclusion, although research on Care Farms is limited, this paper has significant weaknesses and covers well-trodden ground in relation to the feasibility of evaluating criminal justice interventions.</p>
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<b>REVIEWER</b>	Dr. Richard Gorman University of Exeter, United Kingdom
<b>REVIEW RETURNED</b>	07-Nov-2017

<b>GENERAL COMMENTS</b>	<p>This is a very interesting paper discussing a pilot study and methodology to assess the impact and cost-effectiveness of offenders undertaking community orders within a ‘care farming’ environment, as opposed to other types of community order projects and activities. It makes several original and important contributions to the burgeoning care farming literature.</p> <p><b>Abstract</b></p> <ul style="list-style-type: none"> <li>- I’m not sure if this is an issue with the proof or the manuscript itself, however, the ‘Design’ section is incomplete. It currently reads: “Design: Pilot study using</li> </ul>
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	<p>questionnaire, police and probation data in three site each with a” – something is possibly missing?</p> <p><b>Strengths and Limitations</b></p> <ul style="list-style-type: none"> <li>- The strengths and limitations section contradicts itself somewhat. Point 1 argues that ‘this study is one of the few exploring the health and social impact of CFs’, point 5 argues that the study was designed ‘to test feasibility and pilot methods, not to test the effectiveness of CFs in improving quality of life’. Indeed, given what point 5 states, it would seem that the title of the article “Can care farms improve quality of life” is misleading?</li> <li>- I’m also a little unsure about the claim that the study is ‘one of the few exploring the health and social impacts of CFs’ – the large majority of studies of care farming attempt to assess and discuss this. The offenders point is very true however, and possibly this sentence need re-phrasing?</li> </ul> <p><b>Introduction</b></p> <ul style="list-style-type: none"> <li>- Spelling/grammar error line 10: “Across Europe, the number of care farms has been growing across Europe” – Duplication of Europe.</li> <li>- Spelling/grammar error line 21/22: “which would randomly allocating service users” – should probably read ‘randomly allocate’ – otherwise tense is wrong or there is something missing. The entire manuscript could benefit from a thorough proof-read.</li> <li>- On the issue of RCTs and care farms, it may be worth drawing on Hine et al (2008, p.250) where they discuss the challenges of utilising an RCT design for care farming</li> </ul> <p><b>Methods</b></p> <ul style="list-style-type: none"> <li>- Grammar/Style: ‘Site’ is sometimes capitalised, sometimes not.</li> <li>- ‘CF’ is also used interchangeably as ‘Care Farm’ and ‘Care Farming’ – which can make for a challenging read. If word count is not an issue, I would recommend that this is written out in full each time rather than as an acronym.</li> <li>- Rather than ‘Site 1, Site 2’ etc., I would perhaps recommend the authors use ‘Region 1, Region 2’ – site suggests something singular, and it becomes quite confusing at times that ‘Site 1’ refers to two different and separate spatial locations (CF and Comparator)</li> <li>- Although there is an interest in the ‘site’ and ‘setting’ of these projects, Comparator Site 3 is described more in terms of the activities that take place there, rather than the place itself per se. Additionally, we are never introduced to what the ‘site 2’ CO project entails, just that they are ‘multiple’. If more information can be added here, that would be useful.</li> <li>- My main concern and question here is to what extent these different projects can be aggregated together – the three types of care farm described all seem very different, and</li> </ul>
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	<p>even more so for the comparator sites – at present I don't see the obvious logic in grouping these together to compare against each other given how different each of the 6 projects are. For example, Lancu et al. (2014) did a similar comparative project on care farming, and found it necessary to more specifically differentiate their comparative interventions into farm/work/creative. Helping care for a herd of cows is a very different set of activities and practices to aquaponics for example, in some ways as different as caring for a herd of cows is different from sorting second-hand clothes. Comparing all 6 interventions against each other individually may also produce interesting findings about different styles/models of care farming, does a cattle farm produce greater engagement for those serving COs than something purely horticultural for example?</p> <p><b>Results</b></p> <ul style="list-style-type: none"> <li>- The discussion of how the authors navigated challenges to recruitment is very interesting.</li> <li>- On Figure 1, the *** caption may be better written as 'deceased' rather than RIP.</li> <li>- Grammar/Style – the authors switch between numerical representations and written representations (90% vs. ten per cent).</li> <li>- The measurement of costs, despite only being sourced from 1 region, is a very exciting and important finding for the care farming literature. I would encourage the authors to include this in their strengths and highlights.</li> </ul> <p><b>Discussion</b></p> <ul style="list-style-type: none"> <li>- I found the author's idea of probation services actively using CFs to manage challenging offenders very interesting (p19, line 33) – though I'm not quite sure where this idea has come from – is this from literature, qualitative data, or a conclusion that the authors have drawn from the data – though interesting, the lineage/evidence for this idea isn't clear at present. I wonder if the authors could reflect on this in more detail, particularly the implications of this.</li> <li>- The author's discussions of CFs as third sector organisations with the potential to reduce recidivism is a valid point, and it is good to see the CF literature being linked directly into policy. I wonder though if the authors might also reflect here on how this might be construed as the effects neoliberalism, for example, in Kraftl's (2014, 62) work, he reports that farmers engaging in care farming felt under increasing pressure to take up 'the burden' of public service withdrawal.</li> <li>- As mentioned earlier, I'm a little unsure about the claim that the study is 'one of the few exploring the health and social impacts of CFs' (p20, line 40) – the large majority of studies of care farming attempt to assess and discuss this. Indeed, in the previous paragraph the authors list several studies that explore the health and social impact of CFs.</li> </ul>
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	<p>References mentioned:</p> <p>Kraftl, P. (2014). 'Alternative' Education Spaces and Local Community Connections: A Case Study of Care Farming in the United Kingdom. In S. Mills, &amp; P. Kraftl (Eds.), <i>Informal education childhood and youth: Geographies, histories, practices</i> pp. 48-64). Hampshire: Palgrave Macmillan.</p> <p>Hine R, Peacock J and Pretty JN (2008) Care Farming in the UK: Contexts, Benefits and Links with Therapeutic Communities. <i>Therapeutic Communities</i> 29(3): 245–260.</p> <p>Iancu SC, Zweekhorst MB, Veltman DJ, et al. (2014) Mental health recovery on care farms and day centres: a qualitative comparative study of users' perspectives. <i>Disability and rehabilitation</i> 36(7): 573–583.</p>
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## VERSION 1 – AUTHOR RESPONSE

Dear Editorial team,

We would like to thank the reviewers and the editorial team for their helpful comments. Our responses are given in italics below. The changes made to the main document have been highlighted in yellow.

Editorial Requirements:

- Please complete and include a STROBE check-list, ensuring that all points are included and state the page numbers where each item can be found: the check-list can be downloaded from here: <http://www.strobe-statement.org/?id=available-checklists>

This has been completed and uploaded. As a pilot study some of the aspects of the check-list are not appropriate, but many are, so the check-list is valuable.

- Please revise the Strengths and Limitations section (after the abstract) to focus on the methodological strengths and limitations of your study rather than summarizing the results.

These have now been revised to more clearly identify the methodological strengths and weaknesses of the study.

Reviewer(s)' Comments to Author:

Reviewer: 1

Reviewer Name: Prof Gill McIvor  
Institution and Country: University of Stirling, UK  
Please state any competing interests: None declared

Please leave your comments for the authors below

Care farms, in principle, offer a promising therapeutic approach with people with convictions. This paper explored the feasibility of evaluating their impact using a range of outcome measures, including PNC reconviction data. The paper is weakened, however, by a lack of methodological detail and by factual inaccuracies. The authors would have benefited from perusal of the extensive criminological literature of the challenges associated with evaluating interventions of this kind – this would have demonstrated that the challenges they identify have already been well documented.

We thank the reviewer for this insight. Our work focuses on public health interventions and particularly nature-based interventions for probationers. Our review of the literature has shown limited publications in the area of public health interventions for probationers. Our study was funded by the NIHR's public health programme and our paper is targeting public health practitioners and researchers. The presentation of the challenges that face researchers attempting to assess the effectiveness of interventions in improving offender health, rather than criminal justice outcomes more broadly, is therefore of relevance and not currently well addressed in the public health literature.

The specific methodological problems include the allocation to the CF and comparator sites. It is not clear what type of CO the offenders were subject to – if it was unpaid work requirements, then it would not be appropriate in any case to assess the 'therapeutic' impact of CFs because unpaid work is not inherently therapeutic in intent.

Interestingly, within the probation services included in this study there were differences in interpretation of unpaid work. In one probation service, allocation to a care farm was seen as a legitimate location to work out unpaid hours as the care farm was seen as being able to manage more challenging offenders and had a perceived good track record of positive outcomes for offenders. In one of the other probation regions, those with unpaid work were not allocated to care farms. This was because unpaid hours are meant to be 'community payback' and yet, allocation to a care farm was seen as potentially benefiting the farmer not the community. Hence, some of probationers had an unpaid work requirement and others had specified activities. This is explained under the heading 'settings' in the paper. The issues of the use and perceptions of CFs by probation services are explored in more depth in a sister qualitative paper that we are now preparing for publication. Due to word limits, we are unable to explore these issues in greater depth in this paper.

If those allocated to different interventions were subject to different conditions then this is inherently problematic because such allocation would be needs led and mean that like was not being compared with like. The comparator sites, and the characteristics of those allocated to them and the CFs appear to be so different as to make comparison relatively meaningless, even with the use of propensity score matching.

In this paper we argue that propensity scores offer a methodological solution to this problem. Given the need for well-powered studies assessing the effectiveness of probation interventions on health, social and criminal justice outcomes, finding a solution to the challenges of comparison is key. As a pilot study, one issue that we were keen to explore in this study was how probation services use CFs and also the different types of activities and structures on the CFs. As the reviewer points out, this study shows the great variety that we found. Finding methodological ways to deal with these differences, such as use of propensity scores, we believe is the most pragmatic way to address this issue.

What were the criteria that had been used by the probation service to allocate people to different interventions?

This varied across the probation services and across time. So, while one probation service claimed at the start of their study that OGR scores were used to determine allocation to care farms and other locations, we found that the OGRS cut-off points originally stated, changed throughout the study. These issues are dealt with in more depth in a qualitative paper that we are now preparing for publication and we regret there is insufficient space to explore these issues in more depth here.

The 'representativeness' of the sample (although I use this term cautiously with such a small sample size) is also questionable since 29% were female – this is much larger than the percentage of women subject to COs in England and Wales.

As this is a pilot study, we were not attempting to generate generalisable and representative results. Here we are merely aiming to understand the characteristics of the population to inform future studies. The data also helps in understanding how care farms are being used by probation services, particularly the gendered dimension of allocation to care farms. These findings are of importance for anyone designing future studies of the effectiveness of care farms. Furthermore, we explored whether gender was a potential confounder and so to be included in the propensity score. While gender was associated with whether someone was allocated to a care farm it was not associated with reoffending within 18 months, and so did not reach the criteria for inclusion in the propensity score (Table 5).

There is insufficient detail on the outcome measures, especially the PNC data and potential problems associated with it. Were the CF and comparator groups followed up for the same length of time – and, if so, for how long?: the follow-up period should ideally be the same for everyone.

Follow-up questionnaires were conducted at the end of the participant's CO or at 6 months from recruitment into the study (if their CO had not ended by the end of the study). The PNC offence and reconvictions data was collected at, at least 6 months or longer (up to 18 months) if within the study time-frame, following the start of their CO. This has been stated more clearly in the methods and results. As we used cox proportional hazards models to explore the differences in reconviction within 18 months we were able to account for the variable length of follow-up.

Were the PNC data free from 'pseudo-reconvictions' (that is, convictions rather occur after the intervention but which relate to offences committed before it)?

When requesting the linked follow-up conviction data from the PNC we specified that only those convictions and offences that had taken place that were not related to the original offence should be included. In the data we received from PNC, we had no convictions between disposal date and recruitment date as we asked for only follow-up convictions not related to original offence, so we have no pseudo-convictions. PNC data for each individual recruited into our study was collected at least 6 months, and up to 18 months, following their CO completion.

Why was there any expectation that health outcomes might differ between the two groups other than as a result of the a priori differences between them?

The hypothesis that needs to be tested in a future powered study is whether care farms can improve health outcomes and recidivism for those on probation. The available evidence for other groups (e.g. people with mental ill-health, substance misuse issues) suggests that care farms could improve the health and well-being of probationers. It is not possible to test this hypothesis in a pilot study. Instead we wanted to understand any significant differences between those being allocated to care farms and



elsewhere. This information will support the design of a future well-powered study to identify the cost-effectiveness of care farms in improving probationers health and social outcomes.

The costing data lacks sufficient detail and clarity. It is not clear how the annual costs of the interventions and comparator sites were arrived at – hourly rates are quoted but hourly rates of what? Are the annual costs total annual cost to the probation service or costs per participant?

Greater detail has now been included in the section on costs to explain exactly how costs were derived.

The loose of relatively loose terminology suggests a lack of familiarity with the criminal justice system. For example, reference is made to the 'risk of reconviction' (a hypothetical) when it should be the 'rate of reconviction' (an actual occurrence). It is also stated that decisions about which organisation (CRC or probation service) manages offenders once they have been sentenced and the types of activities they undertake is made by the courts – this is inaccurate: the court decides which conditions will be attached to a CO but the actual activities of an unpaid work or other requirement will be determined by the probation service as will the decision as to who manages the case, based on an assessment of risk. Some of the results are presented as if they are novel/surprising/interesting when they would not be to anyone familiar with the literature on factors associated with risk of recidivism.

Thank you for these helpful comments. The paper has been double checked by our co-author RG who has considerable experience in probation services.

Reference to risk of reoffending is related to the ORGS score – the Offender Group Reconviction Scale – a score used widely within the probation service to assess offenders. It forms part of assessments for sentencing and suitability for interventions.

It calculates the risk of reconviction for an individual based on an number of factors including age, previous offences and age at first offence. There has been a wealth of research on OGRS and a number of revisions, for example <https://core.ac.uk/download/pdf/1556521.pdf>

The Rehabilitation Activity Requirement was introduced in 2014. The study participants were recruited between March 2013 and March 2014. Therefore at the start of this study and throughout recruitment, the Rehabilitation Activity requirement was not in effect and therefore courts were deciding the requirements of the sentences. The CRC and NPS split happened on 1st June 2014, post data collection but the impact of the impending split was felt by the project not just in terms of ability to follow up participants. The instability and changing personnel pre-split made recruitment difficult.

We use the term 'risk of reconviction' in relation to the statistical analysis as the cox proportional hazard model used to compare this outcome between CO allocation estimated the risk of the event and so is more appropriate to use this term rather than rate.

The focus of our paper is on the how to robustly evaluate the cost-effectiveness of care farms in improving quality of life and the health outcomes of those serving COs. There is currently very limited evidence of the cost-effectiveness of such interventions in improving health outcomes. While the evidence base on the predictors of recidivism is substantial, the evidence on health outcomes is much less so. It is for this reason that we believe our study provides a valuable insight into how a larger powered study to assess the health and quality of life outcomes can best be conducted.

In conclusion, although research on Care Farms is limited, this paper has significant weaknesses and covers well-trodden ground in relation to the feasibility of evaluating criminal justice interventions.



As explained above, the aim of our paper was to present key results to inform future cost-effectiveness studies focusing on health outcomes.

Reviewer: 2

Reviewer Name: Dr. Richard Gorman

Institution and Country: University of Exeter, United Kingdom

Please state any competing interests: None declared

Please leave your comments for the authors below

This is a very interesting paper discussing a pilot study and methodology to assess the impact and cost-effectiveness of offenders undertaking community orders within a 'care farming' environment, as opposed to other types of community order projects and activities. It makes several original and important contributions to the burgeoning care farming literature.

## Abstract

- I'm not sure if this is an issue with the proof or the manuscript itself, however, the 'Design' section is incomplete. It currently reads: "Design: Pilot study using questionnaire, police and probation data in three site each with a" – something is possibly missing?

There was an error in the abstract. It has now been corrected to: Pilot study using questionnaires to assess quality of life, individually linked to police and probation data.

## Strengths and Limitations

- The strengths and limitations section contradicts itself somewhat. Point 1 argues that 'this study is one of the few exploring the health and social impact of CFs', point 5 argues that the study was designed 'to test feasibility and pilot methods, not to test the effectiveness of CFs in improving quality of life'. Indeed, given what point 5 states, it would seem that the title of the article "Can care farms improve quality of life" is misleading?

The strengths and limitations points have been revised to clarify this point.

The title has now be changed so it is clear that the paper does not report on the effectiveness of Care Farms its now: Assessing the impact of care farms on quality of life and offending: A pilot study among probation service-users in England.

- I'm also a little unsure about the claim that the study is 'one of the few exploring the health and social impacts of CFs' – the large majority of studies of care farming attempt to assess and discuss this. The offenders point is very true however, and possibly this sentence need re-phrasing?

We appreciate the sense here was unclear. The point is that few studies have assessed the effectiveness of care farms in improving health and social outcomes. Our systematic review identified only two small RCTs that were underpowered to look at the effectiveness of care farms on psycho-social outcomes. There has only been one very small (n=10) observational study of care farms for probationers. This sentence has been rephrased to convey this more clearly.

## Introduction

- Spelling/grammar error line 10: "Across Europe, the number of care farms has been growing across Europe" – Duplication of Europe.

This has been corrected.

- Spelling/grammar error line 21/22: "which would randomly allocating service users" – should probably read 'randomly allocate' – otherwise tense is wrong or there is something missing. The entire manuscript could benefit from a thorough proof-read.

This has been corrected and the manuscript has been proof-read.

- On the issue of RCTs and care farms, it may be worth drawing on Hine et al (2008, p.250) where they discuss the challenges of utilising an RCT design for care farming

Thank you, this reference has been added.

## Methods

- Grammar/Style: 'Site' is sometimes capitalised, sometimes not.

This has been corrected throughout.

- 'CF' is also used interchangeably as 'Care Farm' and 'Care Farming' – which can make for a challenging read. If word count is not an issue, I would recommend that this is written out in full each time rather than as an acronym.

Due to the word limit, we have kept CF, however the use has been carefully checked for sense, and an 's' added to all plural usages and where the meaning is 'care farming' this has now been written in full.

- Rather than 'Site 1, Site 2' etc., I would perhaps recommend the authors use 'Region 1, Region 2' – site suggests something singular, and it becomes quite confusing at times that 'Site 1' refers to two different and separate spatial locations (CF and Comparator)

We decided to use the term 'site' as 'region' might imply that we are taking all care farms within a probation region. Also the boundaries of geographical probation regions have changed during the time frame of the study with the privatisation of probation services. To avoid any confusion with the geographical probation regions, we would prefer to keep the word 'site'.

- Although there is an interest in the 'site' and 'setting' of these projects, Comparator Site 3 is described more in terms of the activities that take place there, rather than the place itself per se.

Additionally, we are never introduced to what the 'site 2' CO project entails, just that they are 'multiple'. If more information can be added here, that would be useful.

More information on site 2 CO comparator locations has now been added under the 'settings' heading.

- My main concern and question here is to what extent these different projects can be aggregated together – the three types of care farm described all seem very different, and even more so for the comparator sites – at present I don't see the obvious logic in grouping these together to compare against each other given how different each of the 6 projects are. For example, Iancu et al. (2014) did a similar comparative project on care farming, and found it necessary to more specifically differentiate their comparative interventions into farm/work/creative. Helping care for a herd of cows is a very different set of activities and practices to aquaponics for example, in some ways as different as caring for a herd of cows is different from sorting second-hand clothes. Comparing all 6 interventions against each other individually may also produce interesting findings about different styles/models of care farming, does a cattle farm produce greater engagement for those serving COs than something purely horticultural for example?

As this was only a pilot study, our findings are not powered to look at differences in effectiveness between sites. In a sufficiently powered study, exploration of the impact of different components of the CF intervention would be valuable. In this study, our aim was to explore the variety of activities on each of the care farms to identify how comparable they might be in a future study. Exploration of these differences is an important area for future study; in light of this, this point has been added to the discussion section.

## Results

- The discussion of how the authors navigated challenges to recruitment is very interesting.

- On Figure 1, the \*\*\* caption may be better written as 'deceased' rather than RIP.

This has been revised in Figure 1.

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Grammar/Style – the authors switch between numerical representations and written representations (90% vs. ten per cent).

After searching through the paper, only one incident where the 'per cent' is written in words could be found. The written representation was used to avoid starting a sentence with a number. We have left the written 'per cent' and hope this is acceptable to the editors.

- The measurement of costs, despite only being sourced from 1 region, is a very exciting and important finding for the care farming literature. I would encourage the authors to include this in their strengths and highlights.

This point has been added to the 'strengths and limitations' five points after the abstract.

## Discussion

- I found the author's idea of probation services actively using CFs to manage challenging offenders very interesting (p19, line 33) – though I'm not quite sure where this idea has come from – is this from literature, qualitative data, or a conclusion that the authors have drawn from the data – though interesting, the lineage/evidence for this idea isn't clear at present. I wonder if the authors could reflect on this in more detail, particularly the implications of this.

This comes from the results of the differing OGRS (risk of reoffending scores) presented in the paper which were significantly higher at baseline among those allocated to CFs than to comparators. The wording has been clarified in the results, discussion and conclusion sections to make the link to the results explicit.

- The author's discussions of CFs as third sector organisations with the potential to reduce recidivism is a valid point, and it is good to see the CF literature being linked directly into policy. I wonder though if the authors might also reflect here on how this might be construed as the effects neoliberalism, for example, in Kraftl's (2014, 62) work, he reports that farmers engaging in care farming felt under increasing pressure to take up 'the burden' of public service withdrawal.

This is a very good point and Kraftl's work provides a valuable reference. A sentence has been added to the discussion to alert readers to this issue.

- As mentioned earlier, I'm a little unsure about the claim that the study is 'one of the few exploring the health and social impacts of CFs' (p20, line 40) – the large majority of studies of care farming attempt to assess and discuss this. Indeed, in the previous paragraph the authors list several studies that explore the health and social impact of CFs.

This sentence has been reworded to make it clear that it relates specifically to CF studies with offenders.

References mentioned:

Kraftl, P. (2014). 'Alternative' Education Spaces and Local Community Connections: A Case Study of Care Farming in the United Kingdom. In S. Mills, & P. Kraftl (Eds.), *Informal education childhood and youth: Geographies, histories, practices* pp. 48-64). Hampshire: Palgrave Macmillan.

Hine R, Peacock J and Pretty JN (2008) Care Farming in the UK: Contexts, Benefits and Links with Therapeutic Communities. *Therapeutic Communities* 29(3): 245–260.

Iancu SC, Zweekhorst MB, Veltman DJ, et al. (2014) Mental health recovery on care farms and day centres: a qualitative comparative study of users' perspectives. *Disability and rehabilitation* 36(7): 573–583.

## VERSION 2 – REVIEW

REVIEWER	Dr. Richard Gorman
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	University of Exeter, UK
<b>REVIEW RETURNED</b>	04-Jan-2018

<b>GENERAL COMMENTS</b>	<p>The authors have more than adequately addressed all of my previous comments and concerns. I enjoyed re-reading the manuscript, the additions included by the authors have substantially strengthened the paper, and I look forward to seeing it in press.</p> <p>A final clarification is needed though: Page 16 reads: "collection points were £93 for CF users and £33.5 for comparator users". However, Table 4 lists 92.96 as the Comparator figure, and 33.47 as the CF figure. These numbers are perhaps the wrong way around on P16?</p> <p>I'd also like to apologise to the authors for whatever went wrong with the paragraphing of my previous comments, I have no idea why it emerged as such a jumbled block of text and HTML tags!</p>
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## VERSION 2 – AUTHOR RESPONSE

Thank you to the reviewer for spotting this. We have corrected the error. I have uploaded one version with the change highlighted in yellow, and a clean final copy with no highlighted text.

Thanks

Helen