

A campus-based community garden to enhance economic, social and health promotion opportunities for African immigrants

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¹ The authors manage the one-hectare campus-based community garden at the Logan site of Griffith University. The garden has developed in response to expressed need of local groups of African humanitarian migrants. Engagement of families from Congo, Burundi, Somalia and Sudan has resulted in a vibrant and prolific food production resource which is emerging not only as a source of otherwise difficult-to-access ethnic African food, but as a hub for social, cultural and economic activity within these groups and the broader University community. Of particular note are the opportunities for training programs in horticulture, nutrition, landscaping, basic construction and assimilation into the Australian workforce.

Introduction

Refugee wellbeing continues to be a substantial challenge for global economic, social and cultural stability (Dualeh M and D. 2002; Dualeh and Paul 2002; Manandhar, Share M et al. 2006). Having been displaced from their homelands and forced into migration, refugees are recognised as one of the most marginalised and disadvantaged sub-populations in society (Grondin 2004; Sheikh-Mohammed, Macintyre et al. 2006). Conditions of social exclusion, poverty and barriers to adequate health services can compound existing health issues (Muecke 1992; Grondin 2004; Gushulak and MacPherson 2006; Sheikh-Mohammed, Macintyre et al. 2006). Subsistence agriculture (gardening) is an integral determinant of social, cultural, economic and physical well-being in indigenous African communities. However, once refugees reach industrialized settlement countries such as Australia, the importance of gardening for food security is somewhat ambiguous since the economic necessity of home food production is relatively subdued. Nevertheless, the cultural and social significance of gardening persists and may offer innovative means to facilitate the settlement process for humanitarian migrants.

In the context of industrialized nations, there is evidence that participation in community gardening has the potential to enhance health and wellbeing, and improve overall quality of life (QoL) of participants (Myers MS 1998; Armstrong 2000; Baker LE 2004; Wakefield, Yeudall et al. 2007). Community gardening influences physical activity and psychosocial fulfilment and has impacts on diet by increasing supplies of fresh nutritious food and influencing food choices (Somerset S, Ball R et al. 2005) (Armstrong 2000; Baker LE 2004; Austin EN, Johnston YA et al. 2006). Particularly important among disadvantaged and vulnerable populations such as migrants and people suffering mental illness, is the potential for community gardens to include marginalised populations in social, collective work where they can acquire skills, access nutritious and culturally appropriate food and enjoy the therapeutic benefits of nature in a healthy, safe environment (Schmelzkopf K 1996; Myers MS 1998; Armstrong 2000; Baker LE 2004; Austin EN, Johnston YA et al. 2006).

The Griffith University Community Food Garden was established as a community outreach initiative in 2005. It is now used predominantly by African refugees from the surrounding community. This resource presents a setting to investigate how the cultural tradition of gardening is reinterpreted in the context of an industrialized settlement country, and the potential for enhancement of economic, social, and physical well-being.

Methods

A total of 17 in-depth semi-structured interviews were conducted with gardeners (9 Africans), project workers (3), representatives of collaborating organisations (2) and university representatives (3). Informants were selected using a purposive sampling approach with on-going selection guided by the analysis of data collected (Dey, 1999; Strauss & Corbin, 1998). Direct observations of community garden steering committee reference group meetings were conducted along with observations of community garden planning and development activities such as a tour of other local community gardens, construction activities, working bees and the opening ceremony of the garden.

Thematic analysis was conducted on the data. Coding progressed from the identification of topics in recently collected data, through organising these into themes and culminating with solidifying the patterns of connections both between and within categories (Strauss & Corbin, 1990). Interim analyses occurred during the fieldwork as a means to identify and develop themes and categories, which in turn, served to guide and focus the on-going process of data collection. These early analyses, coupled with data collection, generated a cyclic process that

encouraged a constant interplay between data collection and analysis that is characteristic of qualitative research (Neuman, 2006; Strauss & Corbin, 1998).

Results and Discussion

Equity in health and well-being precipitate from well-defined environmental determinants, comprising access to health services, education, adequate housing and gainful employment. The community garden under study is located in Logan, an urban area with a low socio-economic profile and ethnically diverse population. The local community has substantial need for health promotion intervention, but is often difficult to access by conventional channels. This is particularly the case for the African migrants.

The garden has offered a diversity of opportunities for the migrants to become involved in activities familiar to them and to extend their skill set and social networks within their new home country. Several community gardeners participated in community training and employment programs to construct the garden. Participants in these programs developed skills and expertise in construction and horticulture and also had some opportunity to input into the garden design. A reflection of this input, and the building of a sense of ownership by participants, was the spontaneous construction of a traditional African hut in the garden, an open fire area and play equipment for children. Some participants progressed to full-time employment elsewhere on completion of the program.

Participants consistently expressed that they benefit from the social interaction and sense of community in the garden. Others have mentioned that the exercise from gardening is beneficial and appropriate for them. Self esteem and a sense of familiarity in their new country have also been key messages expressed by informants. Although plot sizes had been decided by a democratic process to include more people, the main negative comment from gardeners is that they do not have a large enough plot. This indicates the importance that participants place on gardening and the food they produce. Interest from media has resulted in various newspaper articles and negotiation for coverage in a television program on gardening. This media profile has in turn raised the profile of the garden further amongst potential participants and sponsors within the local community.

Conclusion

This case study highlights various factors of a campus-based garden contributing to inclusiveness, participation and equal partnerships with humanitarian migrants to promote health. These factors include: participatory decision making, partnerships with community organisations, providing a culturally accepting environments and acceptable communication, and allowing flexibility. Opportunities for social interaction and networks, cultural maintenance and exchange, skill maintenance and development, job training, reciprocal giving and participatory decision making, which are all evident in the community food garden. These activities all potentially contribute to social capital and to promoting health and equity. The contact with nature adds an environmental sustainability perspective that the many stakeholders are keen to embrace.

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