

Recipes for recovery

GAINING THE PLOT

Home-grown fruit and veg can have benefits way beyond a better taste, says nutritionist Helen Sandwell



OVER THE SUMMER I moved house and, for the first time in my adult life, I have a decent sized, south-facing garden. Despite all the chaos reigning inside the house while builders pulled it apart and put it back together again, I've managed to set up a few small fruit and vegetable beds outside, and reap the harvest from them too. Take a look at my updated website – the photo features just some of our late summer crop. On top of that, we're still harvesting cucumbers, tomatoes, parsnips and beans, with corn, squashes and lots of greens still to come.

The reason I'm sharing this with you is because I've become somewhat of an evangelist about growing and eating home-grown fruit and veg. It really doesn't take much skill. Admittedly, I'm lucky because I have a green-fingered family (father and brother are professional horticulturists), but bar one previous feeble attempt with an allotment I never visited enough to water or weed sufficiently, this really is my first go.

For those of you with any outdoor space at all on your premises, I really do encourage you to turn some of it over to cultivation and hand the project over to your clients. And for those of you who have only windowsills or small back yards, your clients don't have to miss out. Herbs and salad leaves grow well on windowsills and just about any container can be used to grow veg.

The benefits they will experience from running a veg plot are manifold. As I mentioned two columns ago, outdoor physical activity is the best type for improving mental health. Not only will they be benefiting from the vitamin D produced in their skin, but it's also now thought that exercise and omega-3 fats together have a synergistic positive effect on brain function.

Of course home-grown fruit and veg taste much better than shop bought ones. You eat them freshly picked and properly ripened and can choose varieties grown for taste rather than perfect presentation. The freshness and ripeness of your produce are likely to mean that they are more nutrient-rich than their air-freighted, cold-stored counterparts. Tomatoes can be picked so red (and hence full of the antioxidant lycopene) that tomato sauces and salads will taste just like those you've had on holidays to the Med.

What's more, the growing cycle is utterly fascinating and could provide a hugely positive and rewarding activity, completely removed from the introspection of day-to-day drug treatment. There's something compulsive about nurturing plants – germinating the seeds, tending the plants, watching them grow and the edible parts ripen until the day comes to pick and eat them. For clients who've missed out on nurturing experiences in their lives, involvement in such a process is surely a positive contribution to their recovery. And for those whose previous disordered and dysfunctional life-course has prevented them developing a taste for healthy and varied food, cooking and eating what they have spent the last couple of months growing provides a gateway to experimenting with new foods.

Now is the time to allocate a suitable sunny patch and start making plans for next spring. If it's clay soil, autumn is the time for digging it over – or for light sandy soils, throw an old piece of carpet over the ground and leave it over the winter for the weeds to die down first. Start diverting your kitchen waste (minus meat products) to a compost bin. Come the spring, you'll be ready for your clients to start reaping the rewards.

Helen Sandwell is a freelance nutritionist. Her website is at www.goodfoodandhealth.co.uk. Helen's nutrition toolkit, giving healthy eating advice relating to substance use, is published by DDN on CD-rom – email charlotte@cjwellings.com for details.



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I have for some time been questioning the 'two year rule'. My fear is that in attempting to manage the personal lives of people, we are, in fact, discriminating against the very clients we are paid to help.

Why can any person apply for a position and be subjected to one set of standardised risk management processes, while another (our client) has to go through additional measures? How can this be ethical and where is the justification, evidence of effectiveness or 'proof' that having such a system works? I think it's time to treat individuals as individuals, listen to what people have to say and accept that any recruitment has risk of the unknown, leading to problems.

My final point would be that we don't discriminate against all people with a history of substance misuse issues – just those who have accessed treatment for it.

Posted by KT