

# Adventure Therapy Deconstructed

## A Journey Towards the Good Enough Practitioner and Professional Practice.

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I practice Adventure Therapy (AT) as a blend of talking and nature-based-therapies, wilderness experiences, adventure, and experiential education. Here AT includes any therapeutic process involving any type of adventure, which I define as any physical undertaking with some degree of risk and an uncertain outcome.

There have been calls to professionalise Adventure Therapy and studies have suggested frameworks for competency to practice. However, data to identify how AT practitioners are professionally qualified to practice across diverse disciplines, and to what extent theories of AT practice are mirrored by what practitioners deliver in the field, is limited. I am interested in how practitioners qualify themselves (Natynczuk, 2016) and how they assemble theoretical and practical components to train themselves.

### A brief overview

AT is a richly diverse field of expertise, therapeutic modalities and qualifications and has been difficult to define despite at least three decades of debate. Various authors have made suggestions as to what professionalised AT might look like. Carpenter (2015) reflects on the tremendous diversity of practice in AT in terms of environment, activities and therapeutic modalities. Some practitioners are clinical psychologists, registered counsellors, others are not, and there is a tradition of amateurs working in this area. There could be as many forms of AT as there are practitioners. Crisp (1998), Ringer (1994), Gillis (1998) and Papadopoulos (2000) suggest desired skills for practitioners though much of their thinking concen-

trates on therapeutic skills. Venues for therapy outdoors range from urban parks to remote wilderness, the more remote and adventurous the activity; the more training, experience, expertise, qualifications, and planning are required to be safe.

### Qualifying as a practitioner

Establishing common ground in a diverse field has been a stumbling block to professionalising AT (Bunce, 1998). Crisp (1998) suggested the ideal was to achieve cross-trained therapists and adventure leaders so that AT practitioners are “Fully competent in both safety and technical skills as well as therapeutic areas”. Others have preferred to consider competencies as a better descriptor of ability than skills (Gass, Gillis and Russell, 2012) and some general guidance exists, for example from TAPG and Richards, Hardie and Neal (2019).

UK practitioners hold adventure sport qualifications from National Governing Bodies, which oversee training and assessment for adventure leadership. However, the time and effort needed to gain outdoor leadership, guiding and coaching qualifications and to become accredited as a counsellor, means that there are two broad camps of practitioners: adventure biased and psychotherapy biased with seemingly few practitioners in both camps (Aldridge 2015). I (Natynczuk, 2016) and



Heidi Schwenk (2014, 2017) investigated core competencies of AT practitioners in the UK and identified the difficulty practitioners have connecting with each other to establish and maintain a professional identity: it seems they rarely meet. It could be that there are insufficient numbers of cross discipline practitioners to form a professional body, perhaps because the barriers to entry are so high.

### Being professional

What does it take to be “professional” and how does being professional differ from having an occupation? Bayles’ (1998) criteria for an occupation to claim the status of a profession require extensive training, an intellectual skill, and services that are important. Howard (1998) offers three tests for the status of a professional: clarity about a body of knowledge and skill, clarity about the results of professional interventions, and achieving better results than amateurs. It follows that commissioners and clients should also know what to expect when buying AT provision in terms of clear expectations around the quality of provision, accountable best practice, support from peers in a professional network, and clear marketing messages. At the time of writing there is no governing body for adventure therapy that holds individual practitioners accountable for

their combined competencies in therapy and adventure leadership. AT practitioners in the UK should be accredited with a counselling governing body to professionally provide talking therapies and hold an appropriate adventure leadership award. They might also need to be covered by an adventure activities licence if they are paid to work with people under 18 years old. AT practitioners have shown that they can generally work ethically and fulfil most of the demands that being “professional” across disciplines requires. Curiously the field seems self-regulating, though in an ad hoc way (Natynczuk, 2016).

## Twelve components of competency

Beyond general considerations of professional practice I would like to consider briefly twelve components of thought and practice, which I consider contribute most to the expertise of a good enough AT practitioner.

### 1. Pedagogy

This concerns the principles, practice, and profession of teaching, including teaching styles adopted by outdoor educators, methods of feedback and assessment and teaching theory. Beames and Brown (2016) consider pedagogy in adventurous learning as a synthesis of uncertainty, mastery, agency, and authenticity. I have found utilising students’ natural curiosity a rewarding introduction to experiential learning as a co-discoverer (Natynczuk, 1991). Managing pedagogy is important to how practitioners facilitate meaningful experiences.

Probably the most influential schools of pedagogy can be described thus:

**Behaviourism:** learning is teacher centred with the use of direct instruction and lectures. One could expect to see a teacher led mixture of lecturing, modelling and demonstration, rote learning, and choral repetition. However, during the lesson students might demonstrate their own learning and become the centre of activity.

**Constructivism:** students come ready to learn. Teachers build activities to facilitate learning through individualisation, a slow pace, hidden outcomes, and less

teacher talk, perhaps with an emphasis on being outdoors, and engaging with nature. Learning is inquiry based through experiences and reflection.

**Social Constructivism:** a collaborative process between student and teacher with learning in its social context. The teacher might use more questioning, and a mixture of individual, pair, and whole class exercises.

**Liberationism:** focusses on removing two barriers to learning: poverty and hunger. The student voice is central, with democracy encouraged into the classroom. Teachers and students make discoveries together.

### 2. Philosophy

Philosophy can be summarised as the rational investigation of being, knowledge, and right conduct, a system or school of thought, the critical study of the basic principles and concepts of a discipline. It could be any system of beliefs, values or tenets, a personal outlook or viewpoint. For AT we should also include essential components of landscape and nature for its influence on thinking and being. For me, philosophy has to include tests of thinking through good, robust, scientific enquiry.

### 3. Ethics

Ethics are important to all professional organisations. Having an ethical code in place demands a disciplinary policy for transgressions, which could lead to expulsion from the professional association and loss of accreditation. The disciplinary system of any professional association has to have “teeth” to maintain a good level of credibility for the organisation, and to demonstrate that it takes its own ethical framework seriously.

### 4. Insurance

Should something go wrong practitioners would not want to think about their insurance needs retrospectively. Aspects to consider include professional indemnity, accident and emergency, medical, evacuation, repatriations (dead and alive), legal fees, compensation for loss of reputation, property and equipment, lost baggage, delayed travel, and more. It is very important to carefully link your insurance needs to your risk assessments.

### 5. Counselling Skills

Listening and not giving advice is a good place to start, then improve active listening and apply Rogerian core conditions of congruence, unconditional positive regard, and empathy. Egan’s (2002) Skilled Helper model, which is broadly integrative and pragmatic rather than theoretically dogmatic or diagnostic, seems a useful start for non-professional counsellors. Qualifying as an accredited counsellor takes years, requiring further education, training, and many hundreds of hours of clinically supervised practice. Decide the therapeutic modality you are the most philosophically aligned to, as you will have to practice with conviction and authenticity. However, in some instances it seems being a professional counsellor gives little advantage. Karlsruher (1974) and Durlak (1979) found non-professional counsellors tended to be more effective than professional counsellors. Hattie (1984) found para-professionals more effective than trained therapists in long term counselling. Strupp and Hadley, 1979, Berman and Norton (1985) found non-professionals just as helpful as professionals. It seems that personal qualities are most helpful for getting useful outcomes. Non-professional counsellors tended to be more authentic, less likely to apply labels to clients, to stay safe, and clients attributed success to themselves rather than to the expertise of the “therapist”. Difficult cases tended to be referred on and there were limited case-loads. Amateurs tended to be highly motivated to help, more likely to be culturally compatible and to give more time to clients. It seems that some training with supervised practice can be a useful first step towards integrated AT practice.

### 6. Therapeutic Alliance

Therapeutic alliance extends across everything a practitioner does to influence the quality of working relationships with clients. It seems that therapeutic modality has a smaller effect on outcomes than the quality of the therapeutic alliance (Dobud and Harper, 2018) though Harper (2009) found complexities in wilderness settings. A useful tool for improving and sustaining therapeutic alliances, and to know whether a client is getting what they need,

is Feedback Informed Treatment such as used by Dobud (2017) during therapeutic trekking expeditions.

### 7. Technical Competence

Expectations around training and leadership qualifications seem to vary considerably between states. However, there is no excuse for having insufficient mastery or not being current with best practice for the adventure activities you specialise in. To avoid misadventures your skills and experience should always far exceed those of your clients. Competency (in the UK) is usually demonstrated through appropriate National Governing Body Awards where experience, knowledge, skills, group management, rescue, and fluency of practice are assessed by accredited senior award holders. Staying safe in your adventure environment is paramount, as is knowing what to do in an emergency, and letting someone responsible know where you have gone, with whom, and when you will be back. Knowledge of natural and human history for the venues you work at can also prove very useful for providing social contexts and useful metaphors.

### 8. Adventure Leadership

You will have to blend the roles of instructor, coach, safety advisor, guide, leader, and technical expert with your therapeutic modality. Practitioners have an enhanced duty of care towards clients' physical and emotional safety. Care has to be taken to preserve therapeutic alliances or much good therapeutic work can be undone, for example by being overly didactic, authoritative, or somehow damaging the trust and mutual respect demanded by co-adventuring therapeutically. Leadership styles and awareness are on a spectrum from authoritative "leader as hero" to something loosely democratic. I like the Host Leadership model (Natynczuk 2019) as it aligns closely with my preferred therapeutic modality of solution focused practice.

### 9. Continuing Professional Development

Refreshing, enhancing and broadening one's knowledge, skills and experience can be achieved by attending conferences and training courses, through peer-to-peer mentoring, good clinical supervision, reading, research, writing, reflective practice and paying attention to feedback informed treatment. Keeping current with best practice is essential.

### 10. Supervision

A good clinical supervisor promotes reflective practice, develops new approaches and learning and ensures high ethical standards, shares expertise, and works with a therapist to assess how best to meet clients' needs. Abiddin (2008) gives a comprehensive review of supervision models though Davys and Beddoe (2010) say there is little agreement on what constitutes good supervision. Schwenk and Natynczuk (2015) wrote about supervision specifically with AT practitioners in mind. Ask your supervisor about their preferred supervision model and how this is helpful to you.

### 11. Business administration

Knowledge and skills in business administration are important for practitioners, especially when it comes to strategic thinking about your provision. Marketing strategy is a very broad subject and there are many business models to choose from, finance models to take seriously, understanding who the clients are, who funds them, where to target marketing and how to measure success. Answering "How do I make a sustainable living wage from Adventure Therapy?" is perhaps something to take advice on.

### 12. Self-care and avoiding burnout

Burnout is insidious. The causes include working against overwhelming demands, a lack of managerial support, few resources, little autonomy, challenging interpersonal behaviour, and no confidence in an employer's core activity. Unchecked, a lack of enthusiasm, increasing cynicism, exhaustion, lost self-confidence and capacity to perform, lead ultimately to depression and a tremendous waste of practitioners' potential. Self-care is essential: for AT practitioners it means investing in oneself through personal adventures, ongoing training, professional support through networking, good supervision, personal counselling when necessary, being efficient and effective in business, investing in good quality personal relationships, taking time out, and not being afraid to ask for help when it is needed.





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