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Adventure based counselling, individual counselling and object relations: a critical evaluation of a qualitative study

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Adventure based counselling is a short-term experiential psychotherapeutic approach, which utilises adventurous activities and being in natural environmental in order to facilitate therapeutic change in clients. The present paper critically appraises the results of a qualitative study that investigated how clients with self-reported anxiety and depression experienced participating in an innovative counselling intervention with combined individual counselling with such an adventurous outdoor transaction. Interpretative Phenomenological Analysis, as described by Smith and Osborn (2008), was used in order record and analyse the experiences of four male and six female students who were treated at the Teesside's University Counselling Service. Interviewees perceived the counselling sessions as offering a safe therapeutic space within which they could unveil their anxieties and achieve inner healing, whereas the outdoor transaction as providing an experiential venue for achieving personal change. Interviewees felt that without the outdoor transaction the therapeutic significance of the counselling process would not have reached its full potential. Likewise, without the individual counselling, the outdoor transaction would just have an entertaining event and not a venue for personal change. These findings are discussed in relation to object relations theory.

Keywords: adventure based counselling; multidisciplinary interventions; counselling; outdoor transactions; object relations theory

Introduction

Following the experiential philosophy of 'learning by doing with reflection' (Priest & Gass, 2005, p. 16), adventure based counselling (ABC) utilises challenging experiences in natural environments (e.g. outdoor pursuits and/or wilderness expeditions) with some level of perceived, rather than actual, risk as a means of facilitating therapeutic change (Peel & Richards, 2005). According to Fletcher and Hinkle (2002) ABC is 'a therapeutic tool that can be adapted to almost any setting and is a mixture of experiential learning, outdoor education, group counselling and intrapersonal exploration.' (p. 277) As opposed to more

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traditional forms of psychological therapy, nevertheless, the therapeutic transaction between client and therapist does not occur within the strict boundaries of the therapist's consultation room but, instead, takes place in the outdoors whilst being involved in challenging activities (e.g. a rock climbing, abseiling, trekking canoeing).

In ABC therapeutic change is believed to occur through isomorphic connections – a transference of learning from a specific experience to other life experiences (Gillis & Thomsen, 1996). ABC theorists (e.g. Gillis & Priest, 2003; Schoel & Maizell, 2002) advocate that it is through adventurous outdoor experiences that psycho-emotional growth is facilitated. Hence, in order for isomorphic connections to achieve their desired outcome the therapeutic endeavour needs to occur within natural environments (Beringer, 2004). According to Fletcher and Hinkle (2002) the physical challenges that clients encounter whilst engaging in natural activities do not only promote physical fitness but also psycho-emotional catharsis since they provide an opportunity to allow the expression of frustration and anxiety. Furthermore, Peel and Richards (2005) have argued that it is the unconscious, collective responses to outdoor environments that increase an individual's awareness of self and feelings of wellbeing whilst creating a sense of connection with others and the world.

Mortlock (2004) and Gillis and Thomsen (1996) argue that an additional element that facilitates therapeutic change in ABC is the presence of perceived risk. According to Fletcher and Hinkle, (2002), perceived risk provides clients with the illusion of danger, thereby engaging them in higher levels of cognitive and emotional arousal. Furthermore, Gass (1993) advocates that the combination of unfamiliar environmental situations and activities that promote perceived risk in clients enhance therapeutic outcomes since it provides experiences that contrast with the client's concurrent phenomenological reality.

Although the role of the facilitator and the relationship that he/she develops with the group members is considered important for positive outcomes, after all it is the facilitator who raises clients' awareness of their maladaptive behavioural patterns, this relationship is not considered to be a therapeutic tool as such. On the contrary, ABC utilises a variety of techniques and strategies that aim at enhancing collaboration between group members and improving their problem solving skills (Schoel & Maizell, 2002; Witman & Preskanis, 1996). This somewhat reflects the overall short-term nature of ABC interventions, which, traditionally, last between one and three days.

Premise of present paper

Similar to Hatala's (1992) viewpoint, the author of the present paper wondered whether adventure experiences moulded into a more therapeutic model could have a more significant effect than the 1-3 day outdoor intervention. In this sense, might the combination of ABC with a relationally based psychological intervention be more concerned with a person's phenomenological reality, meanings and beliefs instead of focusing merely on the implementation of tools and techniques as a means of achieving therapeutic change?

Furthermore, wouldn't the provision of prior counselling/psychological therapy offer an active collaborative relationship (therapeutic alliance), which would better facilitate the exploration of underlying issues and empowering individuals to confront change?

Taking the aforementioned into consideration, the author decided to undertake a qualitative evaluation of an innovative ABC approach, which was piloted by Teesside's University counselling service and Sport and Wellbeing Unit in 2008. This particular intervention enhanced the role of personal therapy within the process of ABC. Specifically, participating clients received 10–15 individual counselling sessions prior to the outdoor transaction as well as ongoing sessions following it.

With all the importance that is placed upon adventure based counselling as an innovative and effective therapeutic intervention by a number of practitioners (e.g. Gillen & Balkin, 2006), research literature regarding its efficacy and underlying processes has been quite limited over the past 25 years. Durr (2009) highlighted that although several researchers (e.g. Russell, 2004; Bendoroff, 1989) have called for a new direction of research to answer more specific process-oriented questions such as how these programs bring about change and what components or activities are most effective, existing studies still largely evaluate program effectiveness while there continues to be a paucity of research on the process of adventure based interventions. This view is perfectly reflected in Sibtborg and Arthur-Banning's (2004) thesis that:

the processes behind many adventure education programs remain poorly documented, and how development is fostered through adventure is not well understood. While a number of theory-based articles do exist, little empirical research has been available to influence experiential education program design (p. 112)

Furthermore, up to date no systematic efforts have been recorded which focused on a qualitative evaluation of an intervention similar to the one described in the present paper. Hence, it is safe to say that the overall objective of the author was to obtain detailed accounts of how clients experienced the combination between individual counselling and an adventurous outdoor transaction.

The intervention

During the time the intervention ran, the counseling service employed three counselling psychologists with a background in integrative relational models and three counsellors with a background in Rogerian person-centred theory and narrative based therapy. As a result, five out of 10 clients who participated in the present study received individual counselling, which was based on the basic principles of the object relations school of thought, whereas five clients received a person-centred/narrative-based intervention. In terms of the outdoor transaction, the intervention engulfed the fundamental tenets of ABC theory regarding the use of adventure, experiential group activities, being in natural

environments and encouraging isomorphic connections via the use of metaphor.

Overall, the intervention consisted of 3 stages

Stage 1 – Initial counselling sessions: Following a period of counselling, the concept of ABC was introduced to clients and upon agreement they were referred onto the outdoor transaction. The General Health Questionnaire (Goldberg & Williams, 1988) and a general fitness assessment were utilised as a means of assessing physical suitability.

Stage 2 – Experiential Outdoor Activity: The experiential stage of the intervention occurred over two sessions on separate days. Sessions was an information and team-building event designed to enable both clients and facilitators (two outdoor event instructors and one counsellor) to familiarise with each other. An explanation of what was planned for the outdoor transaction was provided allowing the discussion and expression of participants' expectations and concerns. Clients were not encouraged to talk about their individual problems. The actual transaction involved adventurous outdoor activities (trekking and abseiling in the first instance, trekking and rock-climbing in the second) in natural resorts. At parts of the trip clients were encouraged to work together to support each other and overcome certain obstacles.

Stage 3 – Return to Individual Sessions: Following the outdoor transaction clients returned to having individual sessions. Those explored the experience of the outdoor transaction. Similar to the process of debriefing counsellors aimed at reinforcing clients' positive changes and reframing potentially negative interpretations of the experience.

Methodology

Interpretative Phenomenological Analysis (IPA) as described by Smith & Osborn was used for collecting, transcribing and analysing the data. Semi structured interviews were utilised which focused on interviewees' personal beliefs and emotions (Smith & Osborn, 2003). Purposive sampling was utilised for this study. Following approval from the University's Ethics Committee, participants were approached and recruited via their counsellors. Over a twelve-month period (June 2008 to July 2009) a total of 10 eligible individuals agreed to participate in the study and be interviewed (four interviews from the first transaction and six from the second). Interviews were conducted up to one month following the intervention.

Interviewees participating in both interventions were recruited. All interviewees were Caucasian white of British origin and students. Four of the interviewees were male, aged 20–25 years, and six were female, aged 20–22 years, with the exception of two interviewees who were in their mid forties. Six participants described experiencing depression and four mixed depression with anxiety. All interviewees described having low self-esteem and confidence and experiencing problems in their social interactions and personal relationships. Seven interviewees reported a low to moderate level of physical fitness, whereas

three reported having a moderate to high one. None of the interviewees has had any previous experience of participating in any form of psychotherapeutic or adventure based intervention.

Results

Results are presented according to the particular research question, which focused on how clients experienced the combination between adventurous outdoor activities and individual counselling.

Domain 1: The role of the outdoor activity

This domain is mainly concerned with the outdoor transaction and the role that interviewees believed it played in their own therapeutic journey. The outdoor transaction was identified as an integral part of the therapeutic endeavour, which enhanced the work done during the individual counselling sessions. Interviewees felt that it provided them with the opportunity to experience a range of positive emotions while, simultaneously, offering a practical way of becoming self-aware and trying out new ways of being.

Theme 1: Enhancing sense of wellbeing

Interviewees felt that being in a natural environment gave them a sense of escape from their personal problems and the stresses associated with living in the city, which in turn enhanced their sense of wellbeing. They reported that the tranquillity of the environment, the natural scenery and most importantly the lack of external distractions that are usually encountered within urban environments (e.g. people, building, sounds, and noises) made them feel calmer, happier and more optimistic. Another element which was associated with an elevated sense of well-being was the sense of accomplishment that interviewees gained by successfully overcoming natural challenges (the rock-climbing). In this case, however, wellbeing was related to feelings of excitement and achievement rather than calmness and tranquillity.

The venue was brilliant. For the majority of the day we had the sunshine, it was brilliant. The walk, the fresh air, the countryside the view everything was nice. I felt that being in the countryside facilitated my sense of wellbeing. I thought there would be a lot of people that we would cross on the path, but I think we had just 2-3 walkers. The majority were just ourselves in the middle of nowhere, with fresh air. There was nothing. No distractions of buildings, of people, of sounds, of noises, it was just really nice and peaceful and quiet. [P7]

Theme 2: Gaining psychological benefits through managing risky situations

Interviewees felt that overcoming adventurous activities which are relatively high in perceived risk was utmost beneficial in terms of transferring the sense of confidence they gained during the transaction to their daily lives. As P4 puts it,

'if I can do this I can do anything'. Such activities also require higher levels of personal effort and team cooperation in order to successfully overcome it, which, in turn, interviewees believed enhanced the quality of the relationship between group members.

Theme 3: Changing through doing

This theme refers to the interviewees' belief that the information day and the outdoor transaction served as a experiential learning space within which they had the opportunity to practically implement what they worked on during the individual sessions whilst becoming better aware of how they relate towards themselves and others.

I needed to come out and gain more confidence, to do what I talked about in counselling. If I would have done the counselling without having done the activity then I would have not pushed myself in a practical sense. I think that you need both of them really, counselling to help me understand myself and the practical activity to help me become more confident. [P5]

Theme 4: Enhancing feelings of care-taking through cooperation

Prior to the outdoor transaction, interviewees described experiencing intense feelings of anxiety about participating in the group intervention; they feared becoming the recipient of other group member's negative judgements, not fitting in, becoming isolated and rejected, or even being a disappointment to others. Interviewees reported that this feeling of anxiety started to develop from the moment they accepted the referral to the outdoor transaction, gradually increasing in intensity as the event day drew closer and reaching its peak on the morning of the information day.

I dreaded it. I was so ill in the morning and so panicky and so nervous and even for about 3-4 days before I was just like 'I am not going, I am not going, I am not going'. I was really, really nervous about walking in this room of people I didn't know and do this team building games with. I talked a lot about it with my counsellor in the session before the Sunday. I thought like people would be judging me. [P1]

Working together and relying on one other in order to overcome natural obstacles was perceived as a positive and joyful experience, which evoked feelings of mutual care-taking (taking care of someone while, simultaneously being taking care of) amongst group members. It seems that, the engagement in such a form of cooperative activity increased feelings of trust amongst participants and further reduced their anxieties about being in the group.

The rock climbing was one of the most challenging parts. It was raining and it was slippery. This was probably the time we had to work together as a group, the rest of it we could just walk up but at the top you had to follow the person before you and make sure that the person behind you was ok and if there was a bit that was slippery or loose you had to pass that on to the other group members. [P2]

Domain 2: The role of the therapeutic relationship

This domain revolves around the therapeutic effects that interviewees attributed to the individual counselling process. This was considered to provide interviewees with a secure and contained space of self-exploration within which they could unfold their anxieties and concerns.

Theme 5: Providing a safe space for self-exploration

Interviewees perceived the counselling sessions as providing a safe and contained space within which they could unfold their feelings, thoughts and personal anxieties. Interviewees identified that they required the prior therapeutic space in order to work with themselves before participating in any form of group encounter or outdoor transaction. The counselling sessions were also considered to be a focal debriefing point, which enabled interviewees to transfer the positive experiences of the outdoor transaction into the outside world. Interviewees felt that the counselling sessions ascribed a therapeutic framework to the intervention. Without the therapeutic space, the outdoor transaction would not have achieved its positive effects; rather it would just have been a recreational activity.

It sort of like through . . . we talked about it a lot in the counselling sessions how I felt and stuff and . . . the counselling sort of reduced a lot of my fears I had about the adventure therapy and I think if it hadn't have been for the counselling although I might have went 'oh yes I'll do it' on the day I would have been a little bit too scared but the counselling kind of gave that little bit of extra push to go away. [P4]

Theme 6: The therapeutic relationship as a means of change

Interviewees perceived their counsellors as being non-judgemental, understanding, and caring. Interviewees felt that they benefited from the opportunity to return to the individual sessions and discuss the events of the outdoor transaction with someone who knew them, was aware of their problems and was not going to be judging them. The subsequent interaction with their counsellor following the outdoor event was identified as a significant factor that contributed to the better acceptance of interviewees' new sense of self.

Throughout my counselling sessions I tended to focus a lot on negative aspects of my live like 'this bad thing has happened, this bad thing has happened, this bad has happened'. When I came back from adventure therapy me and my counsellor had made a deal that at the end of every session, I had to find something positive to say. And the first positive thing was that I climbed a mountain and then the next positive thing was like 'oh I am very important and stuff' and it has made me think about the positive aspects about myself and my life. The counselling it has made me think about what happened. [P6]

Interviewees' accounts highlight that their counsellors were not only perceived as bringers of change but also as objects of relating. As Elena describes, she could not wait to get back to her counsellor on the next day and tell him what had happened during the event. In general, interviewees considered the quality

of the relationship that developed between them and their counsellor as being a significant determinant for the changing process. Furthermore, interviewees reported that it was through this relationship that their intense feelings and anxieties were contained.

Even after the event it's just a way for me to offload to someone who isn't going to judge and isn't going to be like 'oh are you going to stop wingding?' Its nice to be able to talk to someone with a little understanding. I had counselling the next day and I couldn't wait to get back and tell him everything that had happened. I felt like I needed to tell someone what I have done. [P1]

Theme 7: Personal counselling as a means of preparing the ground for new encounters

The issue of timing the outdoor transaction appropriately within the therapeutic endeavour was prominent amongst interviewees' accounts. Interviewees identified that they needed the prior therapeutic space in order to work on themselves before participating in any form of adventurous group activity. Interviewees described that without the prior counselling they would not even considered participating in the outdoor event because they would have lacked the required confidence and motivation.

I think in the early stages the counselling was the best part because I tried then to talk about things, whereas I think that the outdoor trip came sort of in the right time so I can go outside and try new things. [P8]

Discussion

Interviewees felt that the interaction within a natural environment and overcoming challenging tasks in a group enhanced their sense of well-being and contributed to the development of positive self-assessments and emotions which they could transfer to their 'daily lives'. They further felt that, the experiential element of the intervention gave them the chance to practically work on issues previously identified during their individual counselling. The latter, in turn, was perceived as providing a secure and safe space, which contained their personal anxieties and helped them develop the appropriate inner resources to engage in new challenges.

Links to attachment and object relations theory

It is the author's opinion that the present findings suggest close links between the therapeutic process in the way interviewees perceived it and the fundamental principles of attachment and object relations theory. In this sense, it could be argued that clients' therapeutic journeys symbolically represented a child's early psycho-emotional development and process of individuation.

Attachment theory considers children to have a need for a secure relationship with adult caregivers in order for a normal social and emotional development to occur (Bowlby, 1997; Cassidy & Shaver, 2007). Within attachment theory it is proposed that infant behaviour associated with attachment is primarily a process of proximity seeking to an identified attachment figure during stressful situations, for the purpose of emotional and physical survival. Infants become attached to adults who are sensitive and responsive in social interactions with the infant, and who remain as consistent caregivers during the period from about six months to two years of age (Bowlby, 1997; Cassidy & Shaver, 2007). During the later part of this period, children begin to use attachment figures (early objects) as a secure base to explore their surroundings and eventually return to. Positive parental responses lead to the development of patterns of attachment which in turn lead to internal working models which will guide the individual's feelings, thoughts and expectations in later relationships (Wallin, 2007).

Although one might argue that, the aforementioned process only occurs during the early stages of child development, the psycho-dynamic model of individuation would contradict such an allegation. According to this model, an individual finds himself in a continuous process of development, with no clear-cut boundaries between each phase. Furthermore, according to Bowlby (1980) attachment is a fundamental human need rather than a childlike condition from which people grow out off:

Intimate attachments to other human beings are the hub around which a person's life revolves, not only when he is an infant or a toddler, but throughout his adolescence and his years of maturity as well, and on into old age. (p. 442)

Comparing the aforementioned with the clients' therapeutic journey, it could be argued that in its initial stages it symbolically represents the early parent-child relationship in which the therapist/counsellor serves as the contemporary parent figure. As was evident in interviewees' accounts, they considered the relationship with their counsellor at the beginning of the therapeutic endeavour as particularly important. Through this relationship interviewees eventually developed the required confidence in order to engage in the outdoor transaction. In this sense, it can be argued that once clients established a safe relational and emotional base, they could then go out to try out new things. Clients considered it important to be able to return to this base, following the outdoor adventure, in order to discuss the events with their counsellor.

It appears that counsellors apart from providing emotional security additionally served as self-objects, satisfying client's fundamental narcissistic needs (e.g., Kohut, 1971, 1977). Clients had their sense of self-worth that was gained during the outdoor transaction reflected back ('mirrored') by the empathic and care-giving counsellor. This experience allowed them to learn the self-soothing and other skills that are necessary for the development of a healthy (cohesive, vigorous) sense of self. In this sense, through the therapeutic relationship clients started to develop a healthier sense of self and increase their self-esteem.

The question arising at this point is whether clients would have been able to work on their issues and develop more adaptive ways of relating without the prior and subsequent counselling? The findings from the present data would suggest possibly not. As interviewees highlighted, without the individual sessions they would not have developed the appropriate inner resources to engage in the outdoor transaction, nor would they have benefit from it in the same way.

The aforementioned view is supported by objects relations theory which postulates that a corrective emotional/relational experience is essential for therapeutic change to occur. In this sense, it could be argued that, an immediate involvement in an anxiety provoking physical and interpersonal situation, without a secure emotional and relational template to draw from, would be more likely to lead clients to draw from their more primitive and potentially most maladaptive internalized representations (e.g. Cashdan 1988).

Based on the aforementioned it could be argued that, the outdoor transaction may have in fact resulted in a movement by clients towards their most well-defended and/or dysfunctional states. As a result, the behavioral and emotional manifestations of the transaction without the engagement in individual therapy could potentially have a counterproductive outcome, depending on the form of each interviewee's internal representations and past coping mechanisms.

Proposed model

It is the author's opinion that the combination of ABC principles with object relations theory and practice could lead to an approach which combines the best of both models, allowing the client an experience which reaches beyond any confines of either approach. Object relations theory, on the one hand, could introduce the power of the therapeutic relationship into the therapeutic endeavour as an important determinant of change; this would provide a new template for interpersonal growth and relationship formation. In this sense, personal therapy would focus on replacing maladaptive internalized representations whilst providing the client with a corrective relational experience. It would further provide a secure emotional base allowing clients to unfold their phenomenological reality whilst containing their anxieties.

The outdoor transaction, on the other hand, would provide the benefits of tangible consequences, group level feedback, the experience of pushing oneself and the opportunity for clients to see the evidence of their own growth and change within a social context that expands beyond the boundaries of the therapeutic framework. If timed appropriately within the therapeutic process, these outdoor opportunities might reinforce the corrective emotional experience over a more continuous period of time.

Conclusions

To conclude, the themes within this paper would suggest that the provision of a longer term individual counselling period prior and following the outdoor

transaction is essential in order for client' to gain the benefits associated with a strong therapeutic relationship and a secure psycho-emotional base. Although the framing process still remains an important element of the intervention, it could be argued that the presence of a psycho-therapeutic framework enhances the practice of ABC. Again, the reader is cautioned to view this as speculative since the data available to support such a contention is based on the interpretations of a small number of interviews.

It is the author's opinion that adventure based interventions should pay a greater emphasis to attachments, both within and outside the therapeutic framework. This would shift the focus from the use of specific techniques and clinical tools as the main therapeutic strategy towards acknowledging the importance of the therapeutic alliance. As Hall and Marzillier's (2009) would postulate,

the personal relationship between patient and therapist is not merely an incidental feature of delivering techniques but a key component in psychoanalytic work. It has been argued that most successful therapists are particularly attuned to the interpersonal relationship, whatever therapy they adopt. (p. 407)

The emphasis on relationships as a means of change is particularly important during a time that positive relationships have been proven to play a significant part in the development of a person's healthy sense of wellbeing. Hall and Marzillier (2009), for instance, draw examples from recent empirical evidence within the field of attachment theory, which demonstrated how difficult current problematic attachments underpin a range of mental health conditions like agoraphobia, social anxiety, personality disorder and depression (Holmes, 2001 as cited in Hall & Marzillier, 2009). They further point towards the long established knowledge that one of the key protectors against depression, and other mental health problems, is the presence of a strong relational support network.

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