

Critically evaluate the impact of outdoor recreation upon the health & well-being of a specific demographic group in your local area and make recommendations for the removal of barriers to participation.

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Often, for emerging interventions in the health and wellbeing space, where the dominant forms of practice are challenged, there can be questions on the strength or weight of evidence to underpin the claims. However, the efficacy of a regular dose of nature for humans is now hard to dispute for outdoor recreation. With robust discourse dating back to Wilson's Biophilia theory in 1984 and Kaplan's Attention Restoration Theory in 1989, there has been a steady flow of research around the globe underpinning the positive impact of outdoor recreation and nature-based experiences on health and wellbeing. Outdoor recreation is consistently linked with positive health and wellbeing outcomes (Pretty, 2005; Brymer, 2010; Annerstedt & Wahrborg, 2011; Robertson, 2011; Hanson & Jones, 2015; Twohig-Bennett & Jones, 2018; Rogerson, 2020, Loureiro, 2021). Twenty-five years after Wilson's seminal work, Heerwagen reinforces that "If there is an evolutionary basis for Biophilia, as asserted by E.O Wilson...then contact with nature is a basic human need: not a cultural amenity" (Heerwagen, 2009, p.39). Barton and Pretty agree, asserting that it is now well evidenced in the scientific literature that:

"a dose of nature has been shown to have an immediate positive effect on mental health for a wide range of activities (e.g. walking, angling, cycling, gardening), for all age groups, for men and women, for every green environment and habitat (with additional benefits from the presence of water), and for the already healthy and the mentally-ill"

(Barton & Pretty, 2016, p.xii).

Despite the literature pointing to impactful health and mental health benefits, time spent outdoors seems to be diminishing (Barton & Pretty, 2016, p.xiv) for affluent populations, and there are still many barriers preventing those from different socioeconomic groups, ethnic groups, gender and disability groups from getting access to the restorative power of the outdoors in the first place. Prior to the impact of the global Covid-19 pandemic, research by Larson et al. (2019) underlined growing concerns about the impact of technology, particularly on youth groups. Their study contributed “to growing evidence highlighting the negative influence of escalating screen time on outdoor time and connection to nature during adolescence” (Larson et al., 2019, p.966). Despite this concerning trend, according to the People and Nature Survey for England (www.gov.uk, 2020) almost half the population (46%) in England in June 2020 reported spending more time outside than before the pandemic. However, it is worth noting that these findings came soon after national lockdowns for Covid-19 were eased in England, allowing people outside with more than one person for the first time since 23rd March 2020 (instituteforgovernment.org.uk, 2022). Whilst we have certainly seen some bounce back in time spent outdoors during the pandemic in the United Kingdom, it is not clear if the recovery is temporary or linked only to lockdown restrictions rather than a genuine desire to reconnect with nature. In terms of diversity, there is a growing body of research and attention around disability, ethnicity and socioeconomic status in the outdoors (Sugarman, 2011; Roberts, 2015; Nystrom et al.2019), which is vital if we are to encourage society as a whole to reconnect with nature and ensure that we support health and wellbeing across the breadth of society not just those with privilege and historical access.

In the spirit of a genuinely pan-societal view of the outdoors and health, this paper will look specifically at health, wellbeing and mental health in men. In a patriarchal society, it is easy for those that identify as male to get less support. The governing viewpoint is that traditionally suppressed groups now need our support and focus. Whilst that is undeniably true, it is also reasonable to assert that support, research and focus need not be a zero-sum game where one is deprioritised at the expense of the other. The recent high-profile conversations around toxic masculinity, in particular, can be worrying in that they potentially ignore how patriarchy and damaging historical definitions of masculinity are damaging for men too. Liz Plank boldly illustrates this point in her impactful book, *For the Love of Men*, when saying, “although the news often focuses on the threats of terrorism, natural disasters and nuclear war, there is no

greater threat to humankind than our current definitions of masculinity” (2019, p.1). Indeed, the American Psychological Association (APA) recently established specific guidelines for supporting men and boys, focusing on the perils of masculinity's traditional definitions, which severely threaten men’s mental health and well-being. Whilst this may not seem unusual, this is a significant step, marking the first time the APA has created specific guidelines for a demographic group that is not considered vulnerable or under-represented. According to Plank (2019, p.3), we live in a society that “teaches boys stoicism over authenticity, dominance over empathy and that if they do not follow their script, someone will take notice and take their “man card” away”. Ilich (nextgenmen.ca, 2021) reinforces this view that patriarchy is not just bad for women; her view is that it is bad for men too and creates a negative circle of damage, effectively ensuring the continuation of the patriarchal ideas that are destructive to society as a whole. According to Ilich, men are “less likely to go to the doctor or seek counselling support for mental health issues...more likely to stop taking medication than women and less likely to take time off work when they are sick” (nextgenmen.ca, 2021). For men who do not match the rigid, deeply entrenched societal standards of masculinity, particularly gender non-conforming men, this disconnect can quickly lead to hate and violence. In this paper, I will examine the state of men’s health globally, critically discuss what effect the outdoors can have on health for this group and, ultimately, point to examples of research and groups attempting to buck this negative trend. Finally, I will highlight how barriers can be removed for men wanting to use the restorative power of nature and the outdoors to develop new reference points for more mindful masculinity.

Research into men’s mental health has demonstrated that men have a higher tendency to develop negative behaviours when faced with psychological stress and pressure. “This acting-out often involves high levels of alcohol and drug misuse, dangerous risk-taking, poor impulse control, and increased anger and irritability. Again, these behaviours are more consistent with dominant notions of masculinity in comparison to crying or talking.” (Affleck, Carmichael & Whitley, 2018, p.583).

Affleck et al. (2018, p.581) in, research studying social determinants of men's mental health issues and the resulting implications for care providers, stated "there is a silent crisis in men's mental health" specifically identifying the barriers to men seeking help and proposing that general solutions today are "inherently feminized" (Affleck et al.2018, p.586). Male depression is a growing problem in a society driven largely by masculinity norms preventing men from seeking help. A recent study considered the role of masculinity norms concerning men's help-seeking when suffering from depression. The study outlined how men find it hard to recognise and flag signs of depression and were also more likely to utilise maladaptive coping mechanisms, thus deepening the depression spiral. They were able to demonstrate the "...negative impact of adherence to traditional masculine norms on the way men experience and seek help for depression." (Seidler et al., 2016,p.116). The statistics show that when men get severely depressed, the impact is often catastrophic for men and broader society. The Samaritan's website quotes Office for National Statistics suicide data, revealing that men are three times more likely to die by suicide than women in England and four times more likely in Wales. Further, males aged forty-five to forty-nine have the highest suicide rate in the UK (Samaritans.org, 2022). According to the charity Alcohol Change, in England, there are around six hundred thousand drinkers, of whom only 18% are receiving treatment and men in the UK are twice as likely as women to die of alcohol-related causes (alcoholchange.org, 2022). WomensAid, the national UK charity working to prevent violence against women and children, confirms that "domestic abuse perpetrated by men against women is rooted in women's unequal status in society and is part of the wider social problem of male violence against women and girls" (womensaid.org.uk, 2022). Gibbs et al. (2020), when reviewing research on the drivers of men's physical or sexual violence against female partners, noted that the literature shows men who conform to stereotypical ideals of masculinity have poorer mental health and that there is a strong, evidenced link to intimate partner violence [IPV] (Gibbs et al., 2020, p.9).

As we consider how nature-based experiences can help men deal with depression, anxiety, and anger, it seems helpful to look to Post Traumatic Stress Disorder (PTSD) research since many PTSD study participants are male. For example, Poulsen, Stigsdotter and Davidsen (2018) studied the effects of a ten-week nature-based intervention with a group of veterans suffering with PTSD; they found that "...all the participating veterans gained a greater insight

into and mastering of their condition, achieved better control of their lives, and developed tools to handle life situations more appropriately and to build a new identity.” (Poulsen, Stigsdotter and Davidsen, 2018, p.15). In addition, the participant interviews in the Poulsen et al. study reveal interesting insights into the severity of bottled-up emotions in men and how hard they can find it to communicate their feelings:

“I was like a volcano; I felt the pressure inside and out. Suddenly it says BOOM. Sometimes I felt like I had to run as fast as I could to get away from myself.”

“It’s hard for me to express how I’m feeling and maybe also hard for them to know what to say to me [...] Not even my family knows much about how I’m doing. It stays inside me, and it’s very hard to open up and talk about how I’m feeling and thinking.”

The concept of Nature Assisted Therapy (NAT) has attracted significant research interest, with studies examining the impact of such interventions. Annerstedt and Wahrborg (2011, p.371) conducted a systematic review of scientific evidence from NAT studies and concluded that we must consider “nature as an important resource in mental and public health care.” (Annerstedt & Wahrborg, 2011, p.385). As with similar literature reviews, it is essential to note that minimal research exists considering the enduring, long term impact of such interventions, which will ultimately be critical in supporting the funding of NAT programmes. Research certainly supports the notion of men being drawn to the outdoors in general. A Norwegian study in 2016 of men’s preferences for physical activity found that men in their study group had a strong preference for being outdoors when taking part in physical activity, emphasizing the “sensory experience of nature, enjoyment of the pleasure of outdoor activities and the importance of fresh air as meanings and values related to being active outdoors” (Hervik & Skille, 2016, p. 1652). Pretty et al. (2005) considered the mental and physical health benefits of green exercise and found that exercise in more pleasant, natural environments may significantly impact health more than exercise alone (Pretty et al., 2005, p.334). These findings are promising for men looking to deal with depression and poor health, indicating that exercise and activity outdoors could have more impact than going to the gym, which might usually be considered a more traditionally masculine activity.

Accepting that green exercise was repeatedly shown to positively impact health and wellbeing, Rogerson et al. (2019, p.1) compared green exercise interventions impact for individuals exercising alone versus those participating in groups. The findings of this study indicated that there was no meaningful impact of social setting, implying that the benefits can be achieved in both lone and group conditions (Rogerson et al., 2019, p.5). However, practitioners looking to support men using the outdoors should be cautious when considering this evidence, given that exercising alone may further exacerbate feelings of isolation and lack of support. Rogerson et al. themselves acknowledge that more study is needed given that participants' prior preferences and usual behaviours were not measured before commencing the study. Furthermore, it is not unreasonable to assume that a combination of both lone and group green exercise could be optimal for supporting men with mental health issues.

If one accepts the evidence presented outlining the importance of nature-based experiences on physical and mental health, the damaging definitions of masculinity preventing men from seeking help and the worrying domestic violence and suicide statistics relating to men, it is natural to consider then what groups are available to men who need help. The answer, at least here in the UK, is worrying. Extensive searches reveal little to comfort those concerned for themselves or a loved one. Whilst clubs and groups exist in the United Kingdom, they are sporadic and have limited funding. Take the Chaos Group in Cornwall, a men's group "looking after each other, finding ways to keep mentally well and physically safe from suicide" which attempted to raise funds on crowdfunder.co.uk in 2021, offering wild camping experiences in return for vital funds to support their work with men (crowdfunder.co.uk, 2021). Unfortunately, the project failed in its attempt to secure funding, with only four supporters signing up despite forty-one thousand people in Cornwall being registered with depression in 2017/18 and over 4,800 with some form of mental illness (Cornwall.gov.uk, 2022). A stark reminder that mental health is only just becoming a mainstream agenda item in the collective conscience and that there is little explicit focus on men's mental health.

Over ten years ago, the mental health charity Mind published a paper called "Get It Off Your Chest", which focused on understanding the challenges men specifically face in dealing with mental health issues (Mind.org.uk, 2019). In 2019 Mind commissioned a follow-up paper exploring the progress in addressing the issues highlighted ten years earlier. Some positives

were noted, such as men being almost three times more likely to see a therapist when worried than during the prior research and two in five men surveyed admitting to regularly feeling worried, up eight per cent from the previous report (Mind.org.uk, 2019). However, the stigma is still significant and prevents men from securing the help they need, with one focus group participant stating that “from childhood boys are told to keep quiet about emotions and that men don’t talk to each other....it became tiring, and I became very withdrawn. I felt forced to conform.” One of the most significant barriers for men opening up about their feelings and seeking support is their concerns around the optics of showing vulnerability. According to McKenzie et al. (2018, p.1259), men in their study felt a significant weight of expectation about whether they could freely share personal feelings. Frosh, Phoenix & Pattman (2002, p.74) found that men often “...experienced the ‘policing’ of their behaviour by other men who deemed it to be unmasculine”.

Whilst the research focused on men suffering from anxiety and depression is limited, other research could be helpful. Doucette (2004, p.373) conducted qualitative research involving behaviourally challenged adolescents in Canada taking part in a ‘Walk and Talk’ intervention combining walking and counselling. The results pointed to a positive impact with improvements in behaviour and higher feelings of personal well-being and self-worth. Robertson et al. (2011, p.73) conducted a systematic review of studies looking at health and wellbeing benefits of walking and concluded that “walking has a statistically significant, large effect on the symptoms of depression”. Rogerson et al. (2020) studied green exercise as a mechanism for improving overall wellbeing. They produced compelling evidence that nature-based exercise can play a critical role in supporting general feelings of wellbeing, especially in those experiencing low wellbeing or depressive symptoms (Rogerson et al., 2020, p1). The evidence base reinforces the hypothesis that supporting men with their mental health and creating opportunities for them to talk openly and improve feelings of self-worth could be amplified by outdoor environments, particularly those centred around hiking or walking.

The farming community offers interesting insights into other ways to remove barriers, as we consider men’s mental wellbeing and the outdoors. For example, Roy et al. (2013, p3) studied male farmers’ mental health given concerns for the high instance of mental distress, suicide and low levels of support seeking from this group. The authors recognised that farming is

known to have high job-related stress, and male farmers, in particular, are at high risk of self-medicating and suicide rather than asking for help (Roy et al., 2013, p.3). Given the prevalence of traditional concepts of masculinity in this subgroup, one suggestion from this study was to develop more self-help guides and digital therapy solutions to help mitigate the inherent concerns this group has with confidentiality (Roy et al., 2013 p.6).

Given the recognition that the anonymity of using self-help digital resources could enable more men to seek help, it is worth simulating what a man might find if he types into Google – “depressed man need help”. The Google search results broadly fell into two categories – intimidating clinical therapy-related information or guidance directed at women to support their partners with links such as “dating a man with depression” or “how to help a depressed boyfriend”. As men’s health groups consider ways to improve the conversation with depressed men, it is worth considering the first links they may see and how that may reinforce a sense that other men are not part of the conversation or there to support them (marieclaire.co.uk, 2021).

Some of the best-known Men’s groups at the timing of writing this paper still have minimal coverage across the UK. For example, the ManKind Project is now in over 21 countries and has a mission stating that when “men of integrity and compassion join together to wake up, grow up and show up, the ripples created change the world.” (GQmagazine.co.uk, 2020). However, despite such comprehensive international coverage, they have no presence in my local area. Similarly, ManHealth, sponsored by the National Lottery Community Fund, is still only in the North East of England. MenSpeak, a men’s group where men can “hang out, be heard and get real”, offers in-person and virtual meet-ups for men to get together with sporadic coverage across the UK (mensgroups.co.uk, 2022). Overwhelmingly, all the groups targeting men who want to talk and open up in the UK had a very sterile, almost clinical feel both in terms of branding and content. In researching this paper, I only found one group which had any links to the outdoors. The Men’s Sheds Association (menssheds.org.uk, 2022) was founded in 2013 and has international equivalents in countries worldwide. The Men’s Shed Association exists to campaign for the setting up and supporting of Men’s Sheds around the UK rather than owning or managing the sheds themselves. The Sheds are community spaces where men can come together and enjoy practical activities, make new friends and learn new

skills. Searching for Sheds on the association website revealed a plethora across the UK and six within a 30-minute drive. On closer inspection, however, it is clear that these groups, whilst critically important and adding considerable value, are very much centred indoors and targeted at older men wanting to combat isolation and loneliness.

Considering men's low rates of self-reported depression (Affleck et al., 2018, p.583) is critical for any groups looking to help men talk about their problems. This is perhaps one of the most significant barriers to participation, and group organisers should be mindful of just how reluctant men are to admit that they have a problem. Since depression is linked to suicide, we must create safe spaces for men to talk openly about their concerns without fearing their masculinity will be questioned or that they will be ridiculed. Given the substantial and long-standing literature base citing the rejuvenating power of nature, it seems that more men's groups need to be developed leveraging the power of the outdoors and outdoor recreation to get men active and outside, creating a safe space for genuine conversation about life, pressures and depression. There is no doubt that Men's suicide rates should be a global concern, and the notion of a silent depression pandemic for men is gaining momentum. Whilst it may not be consistently discussed in mainstream media, it is clear from the literature review that men are still less likely to ask for help, less likely to share how they are feeling and more likely to bottle up their emotions; all of which combine to create significant problems for broader society. There are undoubtedly positive examples of campaigns in the men's suicide prevention space to tackle these issues. McKenzie et al. (2018, p.1259) highlight the positive work done in Australia, such as *Soften The FCK Up & Man Up* in 2017 "aimed at raising social awareness of the links between men's concealment of emotions and high rates of suicide." (McKenzie et al., 2018, p.1259). In the UK in 2022, the #IAMWhole mental health campaign partnered with Brewdog, the innovative UK brewery, to launch a new alcohol-free beer, called "Sad AF", aimed at encouraging men to talk more about their depression with 100% of all profits being donated to critical mental health research (brewdog.com, 2022). The joint campaign "aims to highlight the disparages surrounding men's mental health and the reasons why they often find themselves suffering in silence." (whole.org.uk, 2022). Whilst these campaigns should be applauded, there is still much work to be done. Adult males globally, and increasingly young men and boys, are suffering in silence, unable to synchronise their feelings of sadness, depression and vulnerability with traditional masculinity norms and

expectations. Additional research is needed to specifically study the impact of the outdoors for men and identify how frequent nature-based interventions could be a powerful tonic for this silent pandemic.

Additionally, more mainstream media coverage and social media focus on men's mental health, similar to the #IAmWhole campaign, will allow those identifying as men to speak out and find the best platform to move forward in a more connected way. In the end, the literature suggests that the basic human need to be connected to nature postured by E.O Wilson, whilst oversimplified, has solid foundations and studies have supported positive health and well-being impacts of being outdoors for decades. For men worldwide suffering alone with feelings of sadness and depression, one can turn to the wise words of John Muir, more than a century ago, who notably said, "Climb the mountains and get their good tidings. Nature's peace will flow into you as sunshine flows into trees. The winds will blow their own freshness into you, and the storms their energy, while cares will drop away from you like the leaves of Autumn." (Muir, 1901, p.56)

References:

1. Affleck, W., Carmichael, V. and Whitley, R., 2018. Men's mental health: Social determinants and implications for services. *The Canadian Journal of Psychiatry*, 63(9), pp.581-589.
2. Alcoholchange.org.uk (2022) *Alcohol Statistics*. Available at: <https://alcoholchange.org.uk/alcohol-facts/fact-sheets/alcohol-statistics> (Accessed: January 2022)
3. Annerstedt, M. and Währborg, P., 2011. Nature-assisted therapy: Systematic review of controlled and observational studies. *Scandinavian journal of public health*, 39(4), pp.371-388.
4. Barton, J., Bragg, R., Wood, C. and Pretty, J. eds., 2016. *Green exercise: Linking nature, health and well-being*. Routledge.
5. Brewdog.com (2022) *It's OK to be Sad AF*. Available at: <https://brewdog.com/iamwhole> (Accessed: January 2022)
6. Brymer, E. Cuddihy, T. Sharma-Brymer, V., 2010. The Role of Nature-Based Experiences in the Development and Maintenance of Wellness. *Asia-Pacific Journal of Health, Sport and Physical Education*. 1(2) 21-27
7. Cornwall.gov.uk (2022) *Adult Mental Health 2019*. Available at: <https://www.cornwall.gov.uk/media/xhwipake/jsna-mental-health-summary.pdf> (Accessed: January 2022)
8. Crowdfunder (2021) *Men Outside – championing men's mental health*. Available at: <https://www.crowdfunder.co.uk/p/men-outside/comments?experiment=c#start> (Accessed: January 2022)
9. Doucette, P.A., 2004. Walk and talk: An intervention for behaviourally challenged youths. *Adolescence*, 39(154), p.373.
10. Frosh, S., Phoenix, A. and Pattman, R., 2001. *Young masculinities: Understanding boys in contemporary society*. Macmillan International Higher Education.
11. Gibbs, A., Dunkle, K., Ramsoomar, L., Willan, S., Jama Shai, N., Chatterji, S., Naved, R. and Jewkes, R., 2020. New learnings on drivers of men's physical and/or sexual violence against their female partners, and women's experiences of this, and the implications for prevention interventions. *Global health action*, 13(1), p.1739845.

12. Gov.uk (2020) *The People and Nature Survey for England: Monthly interim indicators for July 2020*. Available at: <https://www.gov.uk/government/statistics/the-people-and-nature-survey-for-england-monthly-interim-indicators-for-july-2020-experimental-statistics/the-people-and-nature-survey-for-england-monthly-interim-indicators-for-july-2020-experimental-statistics> (Accessed: January 2022)
13. GQmagazine.co.uk (2020) *Inside the rapid rise of the men's support group*. Available at: <https://www.gq-magazine.co.uk/lifestyle/article/mens-groups> (Accessed: January 2022)
14. Hanson, S. and Jones, A., 2015. Is there evidence that walking groups have health benefits? A systematic review and meta-analysis. *British journal of sports medicine*, 49(11), pp.710-715.
15. Hervik, S.E.K. and Skille, E., 2016. 'I would rather put on Warm Clothes and go Outdoors, than take off Clothes to be Indoors'—Norwegian Lay Men's notion of being Outdoors during Physical Activity. *Sport in Society*, 19(10), pp.1652-1666.
16. Instituteforgovernment.org.uk (2022) *The People and Nature Survey for England: Monthly interim indicators for July 2020*. Available at: <https://www.instituteforgovernment.org.uk/sites/default/files/timeline-lockdown-web.pdf> (Accessed: January 2022)
17. Larson, L.R., Szczytko, R., Bowers, E.P., Stephens, L.E., Stevenson, K.T. and Floyd, M.F., 2019. Outdoor time, screen time, and connection to nature: troubling trends among rural youth?. *Environment and Behavior*, 51(8), pp.966-991.
18. Loureiro, N. Calmeiro, L. Marques, A. Gomez-Baya, d. Gaspar de Matos, M. (2021). The role of Blue and green exercise in planetary health and well-being. *Sustainability*. 13, 10829
19. Marieclaire.co.uk (2021) *How to help a depressed boyfriend: 7 simple steps that make all the difference*. Available at: <https://www.marieclaire.co.uk/life/health-fitness/mens-mental-health-515203> (Accessed: January 2022)
20. McKenzie, S.K., Collings, S., Jenkin, G. and River, J., 2018. Masculinity, social connectedness, and mental health: Men's diverse patterns of practice. *American journal of men's health*, 12(5), pp.1247-1261.
21. Mensgroups.co.uk (2022) *Our Story*. Available at: <https://mensgroups.co.uk/our-story/> (Accessed: January 2022)

22. Mind.org.uk (2019) *Get it off your chest, Men's Mental Health* 10 years on. Available at: https://www.mind.org.uk/media/6771/get-it-off-your-chest_a4_final.pdf (Accessed: January 2022)
23. Nyström, C.D., Barnes, J.D., Blanchette, S., Faulkner, G., Leduc, G., Riazi, N.A., Tremblay, M.S., Trudeau, F. and Larouche, R., 2019. Relationships between area-level socioeconomic status and urbanization with active transportation, independent mobility, outdoor time, and physical activity among Canadian children. *BMC public health*, 19(1), pp.1-12.
24. Poulsen, D.V., Stigsdotter, U.K. and Davidsen, A.S., 2018, June. "That Guy, Is He Really Sick at All?" An analysis of how veterans with PTSD experience nature-based therapy. In *Healthcare* (Vol. 6, No. 2, p. 64). Multidisciplinary Digital Publishing Institute.
25. Pretty, J. Peacock, J. Sellens, M. Griffion, M., 2005. The mental and physical health outcomes of green exercise. *International Journal of Environmental Health Research*. 15(5), 319-337
26. Raanaas, R.K., Patil, G.G. and Hartig, T., 2012. Health benefits of a view of nature through the window: a quasi-experimental study of patients in a residential rehabilitation center. *Clinical Rehabilitation*, 26(1), pp.21-32.
27. Roberts, N.S., 2015. Race, ethnicity and outdoor studies: Trends, challenges and forward momentum. In *Routledge international handbook of outdoor studies* (pp. 341-350). Routledge.
28. Robertson, R. Robertson, A. Jepson, R. Maxwell, M., 2011. Walking for depression or depressive symptoms: a systematic review and meta-analysis. *Mental Health and Physical Activity*. 5, 66-75
29. Rogerson, M. Wood, C. Pretty, J. Schoenmakers, P. Bloomfield, D. Barton, J., 2020. Regular doses of nature: the efficacy of green exercise interventions for mental wellbeing. *International Journal of Environmental Research and Public Health*. 17, 1526
30. Rogerson, M., Colbeck, I., Bragg, R., Dosumu, A. and Griffin, M., 2020. Affective outcomes of group versus lone green exercise participation. *International journal of environmental research and public health*, 17(2), p.624.

31. Roy, P., Tremblay, G., Oliffe, J.L., Jbilou, J. and Robertson, S., 2013. Male farmers with mental health disorders: A scoping review. *Australian Journal of Rural Health*, 21(1), pp.3-7.
32. Samaritans.org (2020) *Latest Suicide Data*. Available at: <https://www.samaritans.org/about-samaritans/research-policy/suicide-facts-and-figures/latest-suicide-data/> (Accessed: January 2022)
33. Seidler, Z.E., Dawes, A.J., Rice, S.M., Oliffe, J.L. and Dhillon, H.M., 2016. The role of masculinity in men's help-seeking for depression: a systematic review. *Clinical psychology review*, 49, pp.106-118.
34. Sugerman, D., 2001. Inclusive outdoor education: Facilitating groups that include people with disabilities. *Journal of Experiential Education*, 24(3), pp.166-172.
35. Twohig-Bennett, C. Jones, A., 2018. The health benefits of the great outdoors: A systematic review and meta-analysis of greenspace exposure and health outcomes. *Environmental Research*. 166, 628-637
36. Whole.org.uk (2022) #IAmWhole *Mission*. Available at: <https://www.whole.org.uk> (Accessed: January 2022)
37. Wilson, E O. (1984). *Biophilia*. Cambridge, MA. Harvard University Press