

# What impact – if any – does working outdoors have on the therapeutic relationship?

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## **Abstract**

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Although outdoor therapy has emerged as a significant practice, there is very little research into what impact it might have on the therapeutic relationship. This research confirmed the relevance of all the themes discussed in the extant literature and identified two significant new themes: the ‘turning point’ and ‘transference’. The turning point in the therapy process appeared to mark the entry into a liminal or transitional space that facilitated psychological healing. An anthropological model of rites of passage rituals is one possible way of theorizing this process, but the work of Winnicott and Merleau-Ponty are also considered. The theme of transference in outdoor therapy pushed the conventional meaning of the term; the research considers what it means to say that a client experienced the transference to a natural phenomenon. The traditional psychodynamic model of transference can be applied in outdoor therapy, ideas from the work of Winnicott and Merleau-Ponty are again considered as alternatives. Although it became clear that outdoor practice does have a significant impact on the therapeutic relationship, the research concluded with more questions than answers. It opened into liminal spaces that resisted symbolization, the notion of the therapeutic relationship became problematized, and questions arose about the transference. However, the research helped to clarify key questions, identified significant new themes, and revealed interesting opportunities for further research.

**Keywords:** outdoor therapy, therapeutic relationship, nature, transitional space, transference

## **Introduction**

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Despite the increasing importance of outdoor therapy (inter alia, Buzzell & Chalquist, 2009; Mind, 2013), research into its possible impact on the therapeutic relationship is negligible. Given that the therapeutic relationship is frequently cited as “the most important factor in facilitating a successful outcome” (Loewenthal, 2014: 3-4), this seems remiss. This study sought to advance discussion by investigating therapists’ experiences of how working in nature might impact on the therapeutic relationship.

Outdoor therapy is a diverse field, found in most modalities of therapeutic practice and includes a range of approaches (Buzzell & Chalquist, 2009). Outdoor therapy typically entails either 50 minute sessions in parks and woodland or retreats of several days in more remote locations (Jordan & Marshall, 2010). This research reflects that diversity and considers a variety of approaches.

This article begins by setting out the theoretical context, outlining the research parameters and introducing the themes identified by my literature review. I next outline my method before presenting the results. The results reveal two themes which were not apparent in the literature review, so these serve as the focus of the discussion. I conclude that the research has ended with more questions than answers, which, given the novelty of the topic, is not unexpected.

## **Theoretical Context**

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A review of the literature on the ‘therapeutic relationship’ noted that while there is no agreed definition of the term (Horvath et al, 2011), several authors identified it as fundamental to the healing process. Norcross’s (2011) meta-analysis claims that the therapeutic relationship accounts for 12% of the outcome variance in psychotherapy, significantly more than any other factor. Haugh and Paul concur that “the therapeutic relationship is clearly ... the most important in-therapy factor” (2008: 13). A literature review of outdoor therapy concluded that there is no “unified model of outdoor therapy” (McLeod, 2013: 346) and approaches include horticultural therapy, adventure therapy, wilderness therapy, and ‘walk and talk’ therapy. These terms are poorly defined and overlap to some degree. Furthermore, individual practitioners sometimes locate their work outside these named approaches, so outdoor therapy is ideally considered as a spectrum rather than a set of discrete forms.

Many who practice outdoor therapy identify as ecotherapists (inter alia, McMullan, Jordan, Totton), while others do not (inter alia, Doucette). Horticultural therapy (now often referred to as *Social and Therapeutic Horticulture*) combines gardening with skills in social inclusion and therapy (Linden & Grut, 2002). It often has a broader set of aims than counselling and psychotherapy (Thrive, 2017) and was therefore excluded from this research<sup>1</sup>. Adventure therapy does not stress therapeutic relationships (Beringer, 2004) so was also not considered.

## **Themes**

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Seven themes emerged from the literature review.

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<sup>1</sup> A separate study on the therapeutic relationship in Horticultural Therapy would be valuable, especially given its increasing importance.

### ***A 3-way relationship***

A key idea within outdoor therapy is the concept of a “tripartite therapeutic partnership” (Hegarty, 2010: 66) between client, therapist and nature. Each participant in this relationship can affect, and be affected by, the others. This may be a subtle process whereby client and therapist “expand our conversation to include a third party” (Buzzell & Chalquist, 2009: 48) or more interactive, such that “nature becomes a partner in the therapeutic process” (Hasbach, 2012: 124). Jordan & Marshall opine that “the client is forming a relationship with the natural environment as much as with the therapist”. Berger (2006: 198) and Magowan (2012: 11) independently conclude that the tripartite relationship can enable the client to experience connection to something larger than the conventional self.

Despite general agreement that a powerful relationship between client, therapist and nature exists, there are diverse ways of understanding it. While Buzzell and Chalquist (2009) suggests this is a subtle process, Watkins (2009) implies that nature has a central role. Corazon et al (2012) focus on the therapist’s role in framing the client’s relationship to nature. However, both Berger and McLeod (2006) and Jordan and Marshall (2010) concur in their emphasis on a dual role for the therapist, becoming more active or passive as appropriate.

### ***Nature and the therapeutic process***

Scull contends that we must “[l]et nature do the therapy” (2009: 148) and McMullan concurs: the therapist should allow “nature to act as the primary healer” (2008: 4). Others note specific ways in which the natural world impacts on therapy: Jungian art therapist Rust suggests that working outdoors can open us to “a more diffuse and playful state of consciousness” (2009: 43); Corazon et al (2012), who use mindfulness therapy, suggest that being in nature can “emphasise a special way of being present” (p. 340), a phenomenon also noted by Orchin (2004); Doucette (2004) identifies nature connection as being a key element of her walk and talk therapy.

While most outdoor therapists accept the healing power of nature, they frequently emphasize what seems most relevant to their approach: while an art therapist will note enhanced playfulness, a mindfulness therapist will find a deeper sense of being present. Perhaps, as Corazon et al (2012) suggest, nature can be many different kinds of therapist.

### ***Boundaries and containers***

There is less consensus here than with other themes. Totton (2012), a body psychotherapist, offers a thoughtful critique of the notion of therapeutic boundaries

while McKinney (2011), and Jordan and Marshall (2010) emphasize the importance of these boundaries. By questioning conventional models of the self, Rust (2009) problematizes the notion of a therapeutic boundary. However, relationship remains central for all these therapists. Rust seeks a more ecological understanding of relationship which, she implies, can become a therapeutic container. Jordan and Marshall (2010: 357) offer the idea of a “‘living frame’ ... which includes relationality”, while Totten’s (2012) critique of the therapeutic boundary is grounded in his belief that it can interfere with the therapeutic relationship.

### ***Power***

In conventional therapy the space is “set up, controlled and ‘owned’ by the therapist”, which Berger believes creates a power imbalance (Jordan & Marshall, 2010: 349). In contrast, a natural setting can “flatten hierarchies” as client and therapist co-create the therapeutic space (Berger & McLeod, 2006: 84). Jordan and Marshall (2010: 355) agree that this facilitates a more equal relationship, adding that clients sometimes report a stronger sense of the therapist “as a ‘real’ person in the ‘real world’”. McKinney (2011: 117) notes that being outdoors introduces a beneficial element of casualness. Hasbach (2012: 129) suggests that it provides “an opportunity for the co-created therapeutic experience” while Berger and McLeod (2006: 84) opine that it helps create a therapeutic alliance. However, mutuality does not imply equality and balancing the “inherent, asymmetry of the therapeutic relationship” with the mutuality that emerges in nature is a key challenge (Jordan & Marshall, 2010: 351).

Although power dynamics have not been widely discussed in the literature, a consensus emerges: All the therapists who mention power dynamics agree that while the natural environment creates a more neutral space, the therapist/client relationship is not equalized.

### ***Self/other, inside/outside***

Several writers problematize notions of self and other and/or inside and outside. Conventional understandings of ‘therapist’ and ‘client’ are critiqued and questions about the therapeutic relationship emerge. As noted above, Rust’s (2009) conception of the self as interconnected with the natural world problematizes notions of a therapeutic boundary. Jordan (2012) rejects traditional notions of consciousness as set apart from nature, preferring to understand the self “as a relational process, folding and unfolding in spatial temporal locations, which are both interior and exterior” (p. 142). He suggests that when we work outdoors “[t]he myth that the self is somehow separate from nature becomes exposed as the fallacy it is” (Jordan, 2009a: 30). More important for this research is the concern that if the ‘self’ becomes “entirely entangled with the Other”, we might “risk losing the difference and thus any

possibility of relationship” (Harris, 2013: 340). There is general agreement amongst ecotherapists that conventional notions of the self are inadequate and discussions continue (inter alia, Buzzell & Chalquist, 2009). However, this is a complex question and the most extensive debates take place outside the literature under consideration (Harris, 2013: 340).

### ***Therapeutic relationship and the environment***

Rust (2008: 75) hopes that therapeutic work will lead us “to live more lightly on the Earth” while Jordan (2009a: 28) argues that because environmental issues are essentially “issues of relationship ... they should be integrated fully into our therapeutic practice”, adding that “reconnection to nature as a reconnection to self” is the fundamental process in ecotherapy. This close connection between therapy and environmental issues is unique to ecotherapists and is entirely absent from both Doucette (2004) and McKinney (2011).

### ***Symbolism, metaphor and synchronicity***

A particular aspect of nature or a specific location can symbolise something fundamental for the client. Jordan (2009) claims that in outdoor therapy, “new internal landscapes start to emerge in interaction with external landscapes” and these both challenge and support the work. Berger and McLeod (2006) recall how a 12-year-old client spent several sessions creating a space outdoors where he and the therapist would sit. This spot, which came to be called the “home-in-nature”, “symbolised their therapeutic alliance” (p. 83).

Rust (2009: 43) recalls that “there are many ways in which the other-than-human world can mirror the process of a session”. Totton (2012: 160) claims that when client and therapist regularly practice outdoors “it is common for the other-than-human to take part in the therapy”. Both therapist and client will have feelings evoked by the outdoor setting and any synchronistic experiences that occur. Because these experiences are shared, exploring them together tends to foreground and deepen the therapeutic relationship (Totton, 2012). This final theme echoes the first as specific natural phenomena take on a therapeutic role, partnering the therapist. As with several previous themes, the therapist’s modality seems relevant. Body therapist Totton and Jungian Rust experience synchronistic events; the more pluralistic Berger and McLeod refer to symbolization, while psychodynamic therapist Jordan highlights internal landscapes.

## Method

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### *Reflexivity*

I have been involved with ecopsychology since around 2007 and it was unsurprising that I already knew some participants. I have sought to understand how my own “personal and theoretical commitments” might serve as resources for the research process (Schwandt, 1997: 136): Personal bias and influence were not excluded from this study but rather addressed with thoughtful reflection.

### *Participants*

The original intention was to recruit up to six participants from members of *Counselling and Psychotherapy Outdoors (CAPO)*, a professional members organisation. However, there was a low response to the invitation and only two participants came from CAPO. Two more participants were recruited through my professional network. In most cases participants names have been changed and identifying characteristics anonymised. A significant part of one interview was published (Harris, 2015) so that participant’s name has been used here with permission. The participants, in order of interview, were as follows:

- Mark worked with individuals and groups outdoors, typically with clients recovering from alcohol and drug addiction. His approach was influenced by Transactional Analysis (TA), Person Centred Approach, 12 steps and ecopsychology. Mark practiced in a variety of locations including parks, woodland and the grounds of rehabilitation centres. The interview took place in a wood.
- David was an ecotherapist whose influences include Rogers, Jung, Hillman, Assagioli, TA, Gestalt, transpersonal therapy and deep ecology (Naess, 1989). Although he occasionally practiced indoors, the majority of his work took place outdoors, usually with a second therapist, with residential groups in a wilderness setting. The interview took place via Skype.
- Gregory trained in psychoanalytic therapy and although he drew on a range of theories his approach was primarily psychodynamic. Gregory usually practised individual therapy indoors but had worked outdoors on several occasions. He described working in a forest near his home with one client (hereafter referred to as the ‘forest client’) and in a private park adjacent to his consulting room with other clients. Gregory did not identify as an ecotherapist. The interview took place via Skype.

- Sarah was a psychotherapist. She drew primarily on three approaches in her outdoor practice; ecotherapy, art therapy and psychodynamic. While Sarah typically worked indoors, she had considerable experience of outdoor therapy with a range of clients. The interview took place in Sarah's therapy room.

### ***Procedure, analysis and interpretation***

Interpretative Phenomenological Analysis (IPA) was chosen as a suitable method. As is typical with IPA, this research used semi-structured interviews for data collection (Smith & Osborn, 2008). Recorded interviews of up to 1 hour took place via Skype, at the participants place of work, or in an outdoor location, depending on the participant's preference. Interviews were then transcribed verbatim.

I read each transcript several times. At least one of these readings was made while adopting a Focusing attitude (Gendlin, 1981), which was intended to provide an intuitive sense of what was being expressed (Harris, 2017). My initial reading of each interview noted "similarities and differences, echoes, amplifications and contradictions" (Smith & Osborn, 2008: 67). I then re-read the text looking for themes. Themes are "like knots in the webs of our experiences, around which certain lived experiences are spun and thus lived through as meaningful wholes" (van Maanen, 1990: 90). The next stage was to find connections between themes and cluster them into superordinate themes (Smith et al, 2009). Themes that were not included in a cluster were dropped as they "neither fit well in the emerging structure nor are very rich in evidence within the transcript" (Smith & Osborn, 2008: 72). This whole process was repeated with each interview to create a master table of superordinate themes<sup>2</sup>. These themes were then considered in relation to the existing research identified by the literature review.

## **Results**

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Table 1 presents an overview of the findings. The therapeutic relationship outdoors is affected by many factors: culture, environmental context, the therapist's and the client's state of mind and beliefs, etc. are all relevant. It was thus difficult to exclude anything because almost everything is relevant. As a result I initially found a large number of themes. However, a thorough analysis identified three superordinate themes: The Process, Indoors/Outdoors, and Culture. These are listed below with any subordinate themes as bullet points beneath them. Data from every participant was represented in each subordinate theme.

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<sup>2</sup> A complete table of all themes is available in the appendices of the MSc dissertation (Harris, 2014)

**Table 1: Overview of themes**


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 THE PROCESS

- Therapist's role - Mutuality and Control
- Boundaries
- The turning point
- The role of nature in the relationship
- Transference
- Psyche and nature

## INDOORS/OUTDOORS

- Outdoors better than indoors
- Challenges

## CULTURE

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These findings will be considered in detail in the order set out above.

### *The process*

Each participant described key elements of the process of outdoor practice. Although these elements differed significantly for each participant a common pattern can be identified. The process is especially apparent in David's interview as he presented a detailed outline of his practice. The process began with David "creating a crucible", which involved "opening up space" and then "stepping into that space with someone else" in "a wholehearted" way. Although David never mentioned boundaries, his notion of the crucible may be understood as fulfilling a similar role. Creating the crucible was closely tied in with the theme of not taking a central role: "There needs to be a level of presence that is helpful to that process", and the therapist must provide "enough of a nucleus to create a gravitational pull" so that he was "holding whatever it is I need to hold". However, "that needs to be offset with a real strong letting go" and the key to the therapist's role as facilitator was to withdraw at the right point and allow nature/place to take over and do the work. This marks an "important ... shift" that is "like a bifurcation point on a graph". At this turning point the "container for the process shifts from being another human being to being the place" which henceforth formed the "crucible for the experience". The role of nature in the relationship now became central because the turning point marked "the point where that therapeutic relationship has shifted away from me and the client, to me the client and everything else that is present in that context". For David, nature was the primary therapist for much of the process:

... as therapist, I'm actually secondary, very much secondary. Tertiary perhaps, even, to the primary process, which is being facilitated by the place, not by me.

One of the fundamental ways in which nature functioned as a therapist was through the “interpenetration of psyche and matter” (*psyche and matter*). David thought this was:

deeply therapeutic because it allows us to have this *incredibly* strong experience of of an essential kind of [...] interconnectedness to reality where everything is suddenly meaningful and we're part of it – we're part of the story, we not observers separate from it.

The theme of transference was complicated in David's interview. He referred briefly to clients “projecting parent stuff” when they first arrived at the wilderness location where the work was done. But “the process works things out” and, as discussed above, after the turning point the therapeutic relationship moved from the therapist to the place. However, he mentioned a client “who lost his mother at a very early age, and [...] came to find, that the love that he had lost [...] by being out in the mountains”. David chose not go into details for reasons of confidentiality, but noted that “[I]t healed his loss, because he had a sense of being able to enter into that kind of relationship that he thought he'd lost, with nature as a whole”. If we allow that there can be transference to a natural phenomenon, then that is one way to understand this process. This possibility is explored later in the discussion .

Although the process outlined by Sarah is somewhat different, key parallel stages can be identified. Boundaries framed the process: “I say to the client [...] ‘we can make a boundary around us’”. However, the process itself, which she described as a “medicine walk”, began when she and the client crossed “a threshold, at the bottom of the path”. Sarah drew a parallel between outdoor and indoor practice: “in many ways there is an invisible threshold at the entry of my house and into the session, but we never name it, as such. Those aren't the words that we're using in traditional psychotherapy”. Crossing the threshold marked a turning point; it was an entry into “a ritual space” and from then on “everything that comes and everyone who comes into a session has a meaning, including humans”. After this turning point the theme of the role of nature in the relationship emerged. During this phase the therapeutic role changed and the wood seemed to carry part of the transference. Sarah suggested that the art therapy model offered a useful comparison: “[t]he painting often holds some of the feelings that might otherwise have got projected onto the therapist”. Working in nature worked in similar way:

it's not all incumbent on me as the therapist. I am not the major place for which the client interacts with and projects onto. For me I, I feel an enormous relief that I don't have to be, kind of the sole [laughs] holder of all of that. You know, that it can be a shared thing.

Sarah concluded that the whole subject of transference outdoors needed “[m]ore

articulation. Which I haven't done and hasn't been done, yet".

In the woodland space a relationship between psyche and nature became apparent as "things outside started to mirror, things inside". She described an instance with a client who would often feel "terribly judged" by the therapist and fall into "really difficult" silences:

I didn't know how to help her. I would often feel like I was chasing her, you know, I would try this and we would sit in silence and I would try that, and this didn't work and that didn't work, and I noticed that there were some squirrels chasing each other around a tree, and I felt that she had noticed it too. And, and I thought, "I'm chasing her". Somehow nature had, told me, what I do, mirrored to me what I was doing and I so thought I'm just going to sit back and relax.

Sarah wondered if this was synchronicity, noting that "it's incredibly powerful" and suggested that it revealed a blurring between psyche and nature such that "our psyches are no longer inside, they're outside as well".

When Mark talked about boundaries it was usually to dismiss them: "I will go over time, because how can you manage that?" However this did not seem to have a negative impact on the therapeutic relationship. Mark's understanding of the therapist's role as a facilitator often seemed similar to David's:

I'm almost invisible if you like. [...] I'm holding that space from a distance and just watching over them.

Trust underpinned this stance: "There's an element of trust that you also have to let go as facilitator". Some sections of the interview seemed to belie that approach. Mark explained how he would often begin a session by saying:

what's going to happen today is that I'm gonna challenge you. And what I'd like you to do – and this is where people get uncomfortable – I would like you to challenge me. And if you're not challenging me, I'm going to ask you the question, why not? Because quite simply, I have something to learn from you and I want to know what it is".

This can be understood as setting out one of the parameters of the therapeutic relationship as a kind of boundary. It is notable that Mark set this boundary at the very start of the sessions; later on the therapeutic relationship shifted as the role of nature in the relationship became more significant.

Before therapeutic work began "You have to get the base rhythm down". A person's base rhythm referred to their overall level of stimulation and was assessed by the degree to which their presence disturbed wildlife. Given that it's a key stage in the process Mark described, getting the base rhythm down signalled an important turning point. From this point, the role of nature in the relationship became central. There was a "move into that space which takes you away from the traditional way of counselling because it's a three- way relationship ... me you and nature". This created

a more equal relationship between therapist and client which Mark contrasted with the “imbalance” he’d experienced in indoor practice.

Mark frequently used nature awareness games as a therapeutic intervention, an approach related to wilderness therapy. A client would, for example, be led blindfolded to a particular tree and invited to use touch and smell to get an overall sense of it. They would then be taken some distance away and be invited to find the tree again. Mark would in each case interpret the interaction of client and nature, explaining that “I work with nature to raise that level of awareness about our relationship with ourselves”. Although Mark didn’t explicitly say so, it became apparent from the interview that he believed that nature had primary agency in the therapeutic process: The flora and fauna are “communicating with us all the time”. Mark explained that “I have a spiritual relationship with what I believe to be my Creator” and added that if “you’ve got a question? Ask nature, she’ll show you the answer”. Nature awareness games were a tool to enable a spiritual process: “On another level things are taking place that I’m not always aware of I just trust my intuition – I trust”.

Sometimes Mark described something like transference to nature. When a client was asked about her relationship to a tree, she responded, “I fucking hated it”. When Mark asked her for more about that feeling she explained:

My ex-partner is an addict. I love him to bits I still want to be with him, but I can’t deal with his addiction and have ended the relationship.

Mark commented:

So that’s what I try to get them to do. Take ownership of the feelings. He’s an addict, that’s it. [...] We have to own our emotions around that and be aware that we project.

At other times a different process was taking place. Mark described a client who had “anger issues”. The client had tried to see how close he could get to a chaffinch on a path. On the first two occasions the bird flew away when he got within 20 meters, landing again further along the path. Mark suggested that the client try to calm his feelings and so the client relaxed. On his next approach the client got within 5 meters before the bird flew away. Mark interpreted this incident:

Okay, so let’s assume for a moment that this chaffinch is your mum. She didn’t want you near her did she? Not for the first two attempts anyway. But when did you get closer? ‘When I let go’. Okay. So *maybe* [...] you remember the chaffinch when you’re going to work [...] . And he went: ‘Fuck! I never thought about it like that’.

In Mark’s ontology the way the chaffinch behaved was deliberate. The chaffinch – as ‘Mother Nature’ - knew the lesson the client needed to learn and communicated that with its behaviour, which Mark then interpreted. Questions arise about the

therapeutic relationship; did the client only have a therapeutic relationship with Mark or did he also have one with the chaffinch or some transpersonal other? For Mark the answer was clear; the therapeutic relationship was a “three-way thing [...] relationship with me in nature, the relationship with you and me in nature and a relationship with the Creator in nature”.

For Mark psyche and nature were interwoven and what was important was “the relationship of your experience of the external relationship engaging with the internallandscape – where the external landscape meets the internal landscape”.

For Gregory, the process was understood in psychodynamic terms and there was no explicit mention of thresholds or a turning point. Sarah’s suggestion that the client crosses a threshold into a psychotherapeutic session indoors is illuminating and there is a temptation to parallel Gregory’s psychodynamic boundaries with Sarah’s threshold. However, there is something more subtle and significant going on. If the crucible that David created paralleled the psychodynamic boundary, then the turning point must be something different. The next two paragraphs consider the possibility that there are two moves – setting a boundary and then a turning point – in Gregory’s process.

Gregory carefully considered two aspects of psychodynamic boundaries in outdoor practice; confidentiality and timing. While confidentiality always needed careful management, with the forest client the timing boundary emerged “naturally” and “mutually”:

it was fantastic in terms of you know how naturally we came to a kind of, natural agreement without you know imposing a boundary and we mutually in a way came to the same end every week

This sheds considerable light on the therapist’s role, especially in terms of mutuality and control. The agreement was both natural and mutual, a significant change from conventional psychodynamic practice. Gregory was surprised and delighted by this - “it was fantastic”, which implies that it was both positive and quite different from his indoor practice. Furthermore, he emphasized how “natural” this felt, language which suggested that the natural environment was a key factor in this change. Gregory’s relationship with the forest client was unusual as this client initially found it “impossible” “to be contained within the space of four walls”, so they had to work in the woods.

When discussing how the timing of these sessions emerged, Gregory said “it became like a kind of ritual”, echoing Sarah’s understanding of the therapeutic environment as “a ritual space”. In this ritual-like therapeutic space unusual processes occurred, notably “a transference to the trees” that was so intense that Gregory concluded that “the trees became more important to the transference than I was”. Later Gregory

described sitting in a private park with a different client. The natural environment facilitated an “almost a kind of, semi-contemplative semi-meditative state” that enabled a moment when “something was opening up” between them. He continues, “something new was happening. Something was introduced into the relationship that opened things up”. In this latter case Gregory had worked with the client for several years and had established a strong therapeutic relationship. Yet when working outdoors “the client was able to go places that he couldn’t go before”. Something happened to the therapy – and the therapeutic relationship – when Gregory worked outside that seems to mark a turning point that was largely unrelated to the psychodynamic boundaries.

As with other participants, this turning point marked the emergence of nature in the relationship. This is most apparent with the forest client where “the forest itself became part of the relationship” as “the transference object”, while the therapist “was there as a facilitator of trying to find out what sort of this transference represented for him”. Gregory concluded that:

the natural environment and trees became the third, which again, was introduced by both – by him by choosing the trees but also, by me in a way by analysing some of that sort of relationship he had with them, providing the interpretation for them.

Gregory suggested that the natural environment became a:

third space where [...] things can be either projected, introjected or it could be either the container or a kind of transitional space or – a third in-between.

This seems to echo Sarah’s interview as she commented that the woods are a “marvellous space in which to, project and take back our projections, and to have spaces hold our feelings”. Both use the psychodynamic language of containment and projection and this might reflect their psychodynamic training.

The relationship between psyche and nature in Gregory’s interview is most striking in this transference to the trees. These transferences played a fundamental role in the work with the forest client and could not “have been done without them”. Both the physical reality of the trees and their transference significance were important for the forest client. While the “materiality of the tree [...] was very powerful for him”, they “could be taken in as well as images as metaphors and not as real concrete objects”. The psyche and nature relationship is also apparent elsewhere. Gregory described how the natural environment “provided the material” for a “dream to play out”: “there was something about it that it became part of his sort of internal world”. Gregory concluded that the natural environment is both created by the therapeutic relationship and is real: it is

[s]omething co-created something you know produced together [...] but also at the same time existing as real and outside. Not something created by the two participants either, you see?

Although transference appears to be an aspect of all the participants' practice, Gregory's psychodynamic approach renders it explicit. This is ideographic to Gregory because all the other participants identify as ecotherapists. Gregory considered indoor psychodynamic practice as the norm, with outdoor practice as an exceptional approach that should be used in quite special circumstances: "on special occasions not often". Even when the client was outdoors Gregory preferred to reproduce the indoor dynamic as far as possible: it worked very well because, you know the bench was so and so, the way the bench was established was almost the kind of therapeutic positions".

### ***Indoors/outdoors***

Although the research question deliberately didn't suggest any comparison between indoor and outdoor practice, this still emerged as a superordinate theme.

**Outdoors better than indoors.** David and Mark both preferred working outdoors. David said nothing about any contrast, noting simply that he sometimes worked indoors. Mark however was critical of indoor practice, suggesting that "[t]here's no flow" in a room. He opined that indoor practice created an "imbalance" that provoked a sense of conflict between therapist and client: "when you're in a room there is this kind of thing, like I'm not going to give you anything until I get something from you". This encouraged clients to do "door handle disclosure", the practice of revealing something significant just before leaving the consulting room. However, Mark added that outdoor clients "can't do door handle disclosure", which implies that they might if it were possible.

When he recounted his experience of working outdoors, Gregory said "I wish in a way I could be able do that all the time". However his ambivalence was apparent:

But I tell you what, I would be more than willing – I don't know I mean I don't know, I'm undecided actually, whether I'll do outdoor therapy – although for me it was an immensely useful experience. Not, to be honest, it wasn't easy.

However working outdoors had "a positive impact" on Gregory's clients and "[s]ometimes definitely" enhanced the therapeutic relationship. Being outdoors was "far more relaxing" and "calming". This helped open up "something in the relationship that perhaps might have felt stuck and a little bit stuffy [...] there was something facilitative, about the space in a way, that created that, you know the freedom of associations".

Although Sarah said "I don't have a really strong preference", she felt it was a wonderful way to work:

it's wonderful to go into the woods, it's really is wonderful. It's a *completely* different experience, in terms of the session. It's *completely* different it's just *completely* expanded. It's *fantastic*. It's so

exciting ... I feel so nourished. I feel nourished by being outdoors, that has to be good for the sessions.

**Challenges.** It is notable that the two psychodynamically trained participants identified the most challenges in outdoor practice. Gregory understood outdoor therapy as an exceptional option and opined that “[y]ou have to be very careful who you are you suggesting it to”. Sarah was less cautious but agreed: “there are some people that I wouldn’t necessarily want to take into a public space”. Privacy was a concern for both of them and Gregory’s interview revealed considerable anxiety about it. He was emphatic that working outdoors was not violating boundaries. Although the interviewer had not made any suggestion that working outdoors might be unreasonable, Gregory needed to defend his practice:

it was a reasonable suggestion, to be honest. [...] I don’t think I was violating any boundaries I wasn’t I wasn’t introducing a space that was not private, and it felt to me that we had the necessary privacy, and the necessary sort of conditions to carry out the session. So I didn’t feel that I was violating any boundaries if I did I wouldn’t have suggested it.

Gregory found outdoor practice “really challenging” and added:

I had my suspicions about if he freaks out what am I gonna do. We are in outdoors of course and what he falls and has an accident while he’s very upset?

If a therapist’s anxieties about working outdoors were communicated to the client that might well have a negative impact on the therapeutic relationship. In Gregory’s case this does not seem to have happened; as described above, outdoor practice had a beneficial effect. Sarah was less concerned about confidentiality than Gregory, believing that therapist and client generally “created a little sort of psychic boundary around” them, but she had other concerns. The more “completely expanded” experience Sarah found exciting (above) “might be just way too much” for some clients and “they need the confinement” that the indoors provided. Sarah opined that “there is a danger, when we go outside that we are distracted” from “looking at the inner world”, which she felt was an “incredibly important part of psychotherapy”. She also talked about the way that outdoor practice could “encourage a sort of friendliness” that wasn’t conducive to the work. However, this is “quite easy to handle, when you’re alert to the problems”. Sarah had learned from experience how to deal with boundary issues outdoors, but when she started “[I]t felt really peculiar, because it felt I felt naked in some sense”. She lacked many of the familiarelements of practice: “the formality of the room, and my traditional ways of setting things up”. Sarah acknowledged with a laugh that “all the ways of keeping boundaries” were often also “keeping defence structures for the therapist too”. This raises wider questions about how traditional practices around boundaries might over-defend the therapist to the detriment of the therapeutic relationship.

Mark had very few concerns about outdoor therapy and was initially dismissive of boundary issues. He mockingly described setting a boundary:

Right now there is a boundary and don't go outside it. Da da da. And I could come up with all sorts of reasons why not to do that. So what's the point going into nature then? If you're going to do that?

When asked explicitly by the researcher about “the client meeting someone in the woods that they know”, Mark responded:

I observe it. I observe it and if I feel that it's going where it shouldn't really go – that's a really good question. It depends on the circumstances I suppose.

In practice it had never been an issue: “I can't think of one where that's come up. Not even in a park”. The weather was the only challenge for David. Sarah and Gregory mentioned the negative impact of bad weather, with both preferring to work indoors in the Winter. But the weather was more serious for David, presumably because he often worked in wilderness. When land, sea and sky form “the crucible” for the work “[I]t can often be quite traumatic [...] Especially if it's raining”. Sarah and Gregory sought to avoid bad weather at least partly for the sake of the work, implying that cold or rain prevented the therapist from being fully present. But David suggested that physical discomfort could be a therapeutic tool. Most approaches are “not physical enough” and that's “a limiting factor I think in some ways”. David's comment opened up a quite different aspect of the therapeutic relationship outdoors but there was too little data to explore it further. However there's a connection with the case of transference that David mentioned above, where a client healed the loss of his mother through a relationship with nature. This relationship included:

the negative aspect [...] [t]he times when it's really hard and difficult and you get setback, and cold and frightened and all the things that most of us have experienced with our parents.

Thus bad weather came to represent the negative aspects of nature as symbolic/transference mother.

## ***Culture***

All participants referenced aspects of culture or language to make sense of their experience; aspects of the therapeutic relationship in outdoor practice were variously framed by the language of psychoanalysis, deep ecology or indigenous worldviews. Gregory's practice was distinctly framed as psychodynamic and he explicitly distanced himself from ecopsychology, describing it as “New Age stuff”. Mark can be placed on the opposite pole. He was inspired by ecopsychology and an idealised vision of the past that was influenced by Native American culture:

We're going back to the old days, when we had elders and grandfathers and grandmothers and

mentors and aunts and uncles who took care of all these things while the parents went out and worked.

Culture was a recurrent theme for Sarah because she thought it important to pay attention to “the water that we all swim in”. She suggested that while everyone who enters the “consulting room” was “walking in with a Western worldview”, this was “covert, it’s not made overt, is it?” Ecopsychology was grounded in “a different [...] much more indigenous worldview”, which is premised on a belief that “we live in psyche”. This ontology has ramifications for the therapeutic relationship which will be considered in the discussion and it’s related to David’s difficulty in finding a language to describe his experience.

David found it difficult to talk about the therapeutic relationship with nature:

how do we as human beings even conceptualise the therapeutic relationship that the land or the sea offer us?

This relationship was both powerful and unacknowledged by psychotherapy in general:

I see and I’ve experienced this immense feeling coming apparently from a relationship that, you know, that most modalities of therapy – psychotherapy anyway – don’t even see.

However, David thought that:

the therapeutic relationship in the conventional sense is necessary in our culture. Because we live in a culture where we we conceive ourselves as distinct, beings, as selves.

David later problematized the notion:

I love the word relationship [...] and designing processes about relationship that seem to work and seem to be helpful on the one hand and on the other hand there’s a feeling that that word is kind of redundant when you get some kind of some kind of primary state of being.

David’s critique of the language of relationship focused on the dualistic notion of one distinct entity related to another distinct entity:

it’s that something/something else thing which, is useful in our language and culture, as a tool but it actually when you test it out against, or the universe if you like [...] it kind of falls apart.

He contrasted this dualistic conception, conventional Western ontology, with a deep ecology notion of “self as ecological” within a “relational field”; this made more sense of his personal experience.

David then wondered if the therapist had a role in helping clients experience that field. He gradually developed a theory about “the role of the therapist in allowing the

client orientate to themselves in [...] that relational field” which he described as an “immense web of relationships”. Most people “don’t actually know” that they are part of this web of relationships because “[u]ntil you come up against, something that that, that makes, that puts that relational field into relief, it’s very difficult to see that you’re in it”. But the therapeutic relationship could change that:

Then I come up against a relationship or something. I come up against something that allows me to see, all these relationships that I’m in. And then suddenly my self construct changes because I’m no longer, this, this kind of thing moving around, not having no idea, that I’m in relationship I become something that realizes I’m relationship and that becomes part of my understanding of myself.

Initially it was the therapeutic relationship with the therapist that enabled this change, but after the turning point noted above:

the place, you know the land and the sea and the sky, start to provide that sense of something to define our relationships by, we start to get a sense, that we’re in relationship from the rest of nature not from another person.

## Discussion

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While all the themes identified in the literature review were represented in the results, some were more apparent and others appeared in a modified form (see Table 2). However, the superordinate theme of the process didn’t appear explicitly in the literature review. Furthermore, two subordinate themes found in the results were absent from the literature review: the turning point and transference. These apparently new themes will be the focus of the discussion.

The turning point did not appear in the literature review, perhaps because it is quite subtle and the researcher only initially noticed it via David’s explicit references. Nevertheless the turning point is a phenomenon that warrants further investigation and is illuminated by considering its role in the process. Although the notion of a therapeutic process is not explicit in the literature review, it is implicit in much of the material discussed there. Foregrounding the process in the way these results do makes it easier to compare how different practitioners engage in outdoor therapy. The process may also have correlations beyond psychotherapeutic frames, notably in anthropological rites of passage theory. Van Gennep (1960) opined that rites of passage have three phases: separation, transition, and reincorporation. The rite begins with the candidate being separated from their usual social context, a phase often marked by crossing a threshold. The threshold defines a transitional (liminal) space where the person is in an in-between state. Having successfully completed the rite, the initiate re-enters society with a new status. Van Gennep’s ideas were developed by anthropologist Turner (1967) who emphasized the importance of the central phase where ritual participants are in a liminal space, “betwixt and between”.

**Table 2: Comparison of results and literature**

<b>Literature review themes</b>	<b>Results themes</b>
3-way relationship	The role of nature in the relationship (The Process) Therapist's role – Mutuality and Control (The Process)
Nature & the therapeutic process	The role of nature in the relationship (The Process) Outdoors better than indoors (Indoors/Outdoors)
Boundaries & containers	Therapist's role – Mutuality and Control (The Process) Psychodynamic as norm (The Process)
Power	Therapist's role – Mutuality and Control (The Process) Psychodynamic as norm (The Process) Potential challenges of working outdoors (Indoors/Outdoors)
Self/other, inside/outside	Psyche and nature (The Process) Culture
Therapeutic relationship & the environment	Culture
Symbolism, metaphor & synchronicity	Psyche and nature (The Process)

The therapeutic process appears to have the same structure as the rite of passage. This is perhaps clearest in Sarah's interview where she described crossing a threshold (themed as a turning point) into the "ritual space" where therapy takes place. However, a similar three phase pattern is apparent in all interviews. The liminal phase is particularly significant in both rites of passage and the outdoor therapy process as this is where much of the work of change takes place. Several writers suggest parallels between Turner's liminality and Winnicott's transitional space (Jones, 2002; Katcher 2002), and this connection with therapy reinforces the interpretative value of 'the process' as a superordinate theme. Winnicott viewed the consulting room as a transitional space between the analyst and the client (Phillips, 2007) and Gregory referred to the natural environment as "a kind of transitional space". It seems that the therapeutic space is always transitional, whether it is created indoors or outdoors.

Transitional space is "is an intermediate area of experiencing, to which inner reality and external life both contribute" (Winnicott, 1971: 2) and it emerges "in many kinds

of ‘betweens’, for example: inner and outer reality, separateness and interrelatedness, and the concrete and symbolic” (Cayne & Loewenthal, 2011: 34). This carries echoes of comments where participants questioned the Cartesian belief that that psyche and matter are fundamentally separate (Descartes, 1968) and opined that the two are somehow interwoven. Rycroft (1991: 144) notes that in most formulations of psychoanalytic theory, psyche “is in inherent opposition to ... external reality”. However in Winnicott’s transitional space “subjective and objective ... remain undifferentiated” and “objects are felt to be parts of both internal and external reality, to possess both selfhood and otherness” (p. 144). The theme ‘psyche and nature’ provided several examples of play between “inner reality and external life”. The word play is used advisedly; there appears to be a playful connection between inner and outer that allows for movement.

David concluded that the therapeutic relationship with the natural environment could enable a client to realize that they were an ecological self within an “immense web of relationships”. Although David didn’t refer to Winnicott as an influence, there are parallels with Winnicott’s ideas about the mother/baby dyad. Winnicott suggested that the baby’s relationship with the mother, the infant’s “first environment” (Phillips, 2007: 4), can enable the emergence of the “true self” (Winnicott, 1960). In a similar way David proposed that a client’s therapeutic relationship with the natural environment could enable a realization of the ecological self.

Merleau-Ponty’s (2002) ideas sometimes echo Winnicott’s description of transitional space, concluding that our awareness emerges from an active relationship between embodied humans and the world: “The properties of the object and the intentions of the subject ... are not only intermingled; they also constitute a new whole” (p. 13). He proposed that a “subject-object dialogue ... arranges round the subject a world which speaks to him of himself, and gives his own thoughts their place in the world” (p. 153). Parallels between Merleau-Ponty and Winnicott are perhaps less surprising when we appreciate that the former was interested in psychoanalysis (1964) and engaged with psychology (2002), while the latter can be seen as working phenomenologically (Cayne & Loewenthal, 2011). Furthermore, Merleau-Ponty’s claim that the objective world and subjective intentions are intermingled in such a way as to “constitute a new whole” offers a way of understanding the interpenetration of psyche and nature (2002: 13).

Ideas within or between Winnicott’s transitional space and Merleau-Ponty’s subject-object dialogue might also provide an alternative approach to understanding the phenomenon described above as transference. What does it mean to experience the transference to a natural phenomenon? Classically transferences are mostly unconscious processes of transferring affect from a past significant relationship to someone – typically the therapist – in the present (Freud, 1909). Ecotherapist participants all referred to nature as therapist and this concept is apparent in the

literature (inter alia, Jordan & Marshall, 2010). Given that some aspect of nature can become the therapist, then in psychoanalytic terms we would expect a transference to that aspect. Although Gregory didn't refer explicitly to nature as therapist, "transference to the trees" was fundamental to his work with the forest client. However, many of the experiences described by participants can be shown in a different light by Merleau-Ponty's phenomenology. Both the client who healed his loss of maternal love in the mountains (David) and the ways that nature mirrored psychic states (Mark, Sarah and Gregory) can be framed as the natural environment becoming "a world which speaks" to the client and gives their thoughts a "place in the world". Transference outdoors is absent from existing literature and emerges as a theme for further research.

Given the unusual experiences described in the results, it's perhaps unsurprising that this discussion has been somewhat speculative. The transitional space of outdoor therapy emerges from in-between therapist, client and nature and such a "between of relating" will "resist symbolization" (Cayne & Loewenthal, 2011, 32; 40). While this typically provokes anxiety, Cayne & Loewenthal urge us not try to escape by grasping at a pre-existing theory. In that spirit, this discussion has played in an in-between space rather than anxiously grasping at theory.

### ***Limitations and methodological issues***

Some issues with the research question remain unresolved. The literature review noted that there's no agreed definition of a 'therapeutic relationship' and Catty (2006) suggests that this problematizes using the term in research. Although this has not prevented research into the therapeutic relationship elsewhere, a question remains: Did all participants in this research have a common understanding of the therapeutic relationship? Beutler and Harwood (2002) conclude that so-called generic factors like the therapeutic relationship need to be understood within the context of specific cases. They claim that many factors, including interventions and the therapeutic relationship, "function synergistically" (p. 26). If so, trying to tease out the impact of the therapeutic relationship in outdoor therapy may be impossible.

### **Conclusion**

The results suggested that there was a turning point in the therapy process for all participants. This seemed to mark the entry into a liminal or transitional space that facilitated psychological healing. Comparisons with anthropological models of rites of passage were helpful, especially when considered in the context of Winnicott's ideas. None of this had been found in the extant literature and may offer new ways of making sense of the therapeutic relationship in outdoor therapy.

The theme of transference had not been found in the literature review, but was

apparent in the results. The discussion proposed that Winnicott's (1971) transitional space and Merleau-Ponty's (2002) subject-object dialogue provided useful and novel ways to understand this theme. These ideas may offer an alternative to the traditional psychodynamic model of transference. In as far as it involves one individual transferring unconscious affect to another individual, transference can be seen as relying on a dualistic ontology. However, in Merleau-Ponty's (1962) intersubjective phenomenology, the "body is the fabric into which all objects are woven" (p. 273). If so-called 'transference to nature' is re-framed as a local environment becoming "a world which speaks" to the client, we must acknowledge that client and place are "intermingled" such that they "constitute a new whole" (Merleau-Ponty, 2002: 13).

This research has not provided a straightforward answer to the initial question: what impact – if any – does working outdoors have on the therapeutic relationship? In simple terms, the research claims that there is a significant impact. But it remains unclear what the term therapeutic relationship means or whether research could in principle assess the impact of outdoor therapy. This research ended with more questions than answers: What seemed obvious at the start – the parameters of outdoor therapy, the notion of the therapeutic relationship, the aims and limits of research – became problematic. Given that Merleau-Ponty and Winnicott have been touchstones for this research, perhaps this should be regarded as a successful outcome, for they share a respect for the unknowable and mysterious (Merleau-Ponty, 2002; Winnicott, 1971). In his discussion of art, Merleau-Ponty wrote that "[t]he accomplished work is ... not the work which exists in itself, like a thing, but the work which reaches the viewer and invites him to take up the gesture which created it" (1993: 88). He offers a suitable final conclusion: the value of this research lies primarily in offering an inviting gesture to the reader to take it forward.

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