Moving Therapy Outdoors: Techniques, Challenges, and Ethical Considerations

As more clinicians recognize the value of incorporating nature into their work with clients and begin to move out of the confines of the traditional office setting, new challenges arise and new areas of ethical concern must be considered.

As a clinician of more than 25 years, I have had the privilege of accompanying many people on their life path for varying lengths of time and for some, over great distances. Over the years, I have drawn on many traditional therapeutic approaches in working with clients. Most of these approaches seek to understand the origins of the client’s issues. Sometimes the presenting problems are comparatively straightforward, involving recent choices or events in the client’s life, and are explored and resolved in a few sessions. But at other times, the issues are long standing, and their origins go back farther, often to childhood. To address these deeper issues, most therapeutic approaches explore the intrapsychic dynamics involved as well as a client’s interpersonal relationships. Most contemporary approaches also recognize that we exist within social systems of increasing scope—families, friendships, communities, and culture—and that the origins of issues can lie more within one than another.

One account of origins that has become increasingly clear to me over the years is hardly recognized within the therapeutic communities: to no small degree, the origins of client’s issues also involve the human dissociation from the natural world. For hundreds of thousands of years, our species came of age interacting with nature in ways that shaped the human psyche and nurtured the body, mind and soul (Kahn & Hasbach, 2012). Our increasingly urban and technological culture has enlarged the distance between our evolutionary heritage and our current lifestyle. With that distance come psychic costs. That is the basic idea that lies at the heart of ecotherapy.

Patricia H. Hasbach, PhD, is a Licensed Professional Counselor (LPC) and clinical psychotherapist with a private practice in Eugene, Oregon, and is a faculty member at Lewis & Clark College in Portland, Oregon and at Antioch University Seattle. She received her PhD from the University of Pittsburgh and a post-doctoral MA (Ecopsychology concentration) from Naropa University.

As a clinician, Dr. Hasbach incorporates ecotherapeutic practices with traditional therapy in her work with adults, couples, and groups. She also consults with hospitals, schools, architectural design firms, non-profit organizations, businesses, and community activist groups. She is a member of the Editorial Board of the journal, Ecopsychology.


phasbach@northwestecotherapy.com
Early in my professional career, I recognized the potent effect of meeting with patients outdoors. As part of my private practice, I was consulting for a local community hospital seeing patients recovering from cardiac events such as heart attack, bypass surgery, cardiac arrest, or stent implant. Most of these patients were past the crisis of wondering if they would survive the event and were enrolled in the hospital’s cardiac rehabilitation program. When the staff noticed that a patient seemed to be suffering from depression or anxiety (common in the weeks following a cardiac event), I was sometimes asked to see them. To avoid the discomfort that some patients felt about seeing a therapist, I would meet them after their rehab session, sometimes in an office adjacent to the rehab unit and sometimes in an outdoor courtyard. If we met in the courtyard, I noticed that they often commented on the recently-planted trees and shrubs and sometimes on the visiting birds and butterflies. We took our time choosing where they wanted to sit and talk and, in the process, their speech slowed and their hand wringing lessened. Many patients talked about looking forward to getting back to their normal life and often referred to activities such as working in their garden, taking walks, playing golf, or hiking in a nearby park. Meeting in that outdoor courtyard changed the flavor of our initial encounter and influenced the pace and ease of the first session and of subsequent meetings.

Grounded in ecopsychological theory, ecotherapy is an emerging therapeutic modality that enlarges the traditional scope of treatment to include the human-nature relationship (Hasbach, 2012). Ecopsychology recognizes that one of the central challenges of our time is to embrace our kinship with the more-than-human world—our “totemic self”—and integrate that kinship with our scientific culture and our technological selves (Kahn & Hasbach, 2012). I would like to share several techniques that I use to invite the natural world into the therapeutic process, and then to discuss a few ethical issues therapists need to consider when they add ecotherapy to their practice.

One technique, which takes place during the intake session, has a strong impact in the practice of ecotherapy. It is here that therapists learn about the issues that have brought clients to therapy and gather information about clients’ physical and mental health, their education and work history, their current living situation, and their families of origin. To understand the broader context of nature in my clients’ lives, I weave into the interview several nature-oriented questions. These explore recollections of being outdoors in nature as a child; of how the family members viewed the natural world; and of what they like to do outdoors now, as well as how often they get to do it. Answers to these questions provide me with initial information about the clients’ historical and current relationships with nature and the ways that they orient to it, value it, and engage it. Our discussion also opens nature as an appropriate topic for therapy and lays the groundwork for future discussions and assignments.

Clinicians who practice ecotherapy also listen for metaphors that clients use that come from nature. They employ nature metaphors to deepen the therapeutic discussion and enrich the nature-based experiences we assign to clients between sessions. Elsewhere, I have written extensively on the use of nature metaphor and imagery in working with clients, and on using a Nature Language in the practice of ecotherapy (Hasbach, 2012).

We can access a part of our deep knowing if we are willing to move out into nature and to experience it mindfully, with full awareness and presence. Direct experience affords heightened sensations and perceptions that connect our inner world with the outer landscape. For this reason, some ecotherapists assign clients homework that invites them to go outdoors. Along similar lines, ecotherapists also accompany clients outdoors during the therapy session. When therapy is conducted outdoors, nature becomes a partner in the therapeutic process. Some unique features of outdoor therapy include:

- Emphasis on direct contact with nature results in heightened sensory awareness and attunement.
- The pace or rhythm is often slowed, creating an opportunity to notice what it is that draws our attention.
- There is the opportunity to frame the client’s issues within a wider and deeper context.
- Spontaneous interactions with nature often emerge that influence the client’s perspective.
- The place becomes a witness to the client’s narrative story.

Because we are meeting in a space that is neither the therapist’s nor the client’s, the shared situation provides an opportunity for a co-created therapeutic experience. This presents new challenges for the therapist regarding the boundaries between shared experiences and maintaining the asymmetry of the therapeutic relationship (Hasbach, 2012). In a 2010 article published in the European Journal of Psychotherapy and Counseling, Jordan & Marshall reflect on factors that affect the practitioner in a natural setting that wouldn’t normally occur in an office. They write, “The boundaries between mutuality and the asymmetry of the relationship we feel become more magnified, and can provide ample grist for the therapeutic mill. We believe that this then presents an increased challenge for therapists to hold these tensions including their own anxiety about how to hold them” (p. 357).

Some practitioners in the field call for a new code of ethics to address the unique concerns of nature-based therapy (Berger, 2008). Others are concerned that applying a code of ethics would further “professionalize” the practice of ecotherapy, and squeeze the vitality and creativity out of the practice for fear of potential malpractice suits (Buzzell, 2012).

From years of practice as an ecotherapist, discussions with colleagues who incorporate nature into their work in varying degrees, and lively exchanges with my graduate students, I have concluded that in preparing to take therapy outdoors, clinicians must address three overarching ethical issues that involve confidentiality, avoiding harm, and competency. These are discussed in existing codes of ethics held by the American Psychological Association (APA) (2010), the American Counseling Association (ACA) (2005), and the National Association of Social Workers (NASW) (2008). Here I highlight how these three areas of the Codes of Ethics apply to the practice of ecotherapy.
CONFIDENTIALITY

The APA Code of Ethics addresses the issue of confidentiality (4.01 Maintaining Confidentiality, 2010, p. 7) and directs psychologists to discuss the limitations to confidentiality with their clients/patients (4.02 Discussing the Limits of Confidentiality, 2010, p. 7). The ACA Code (2005) is particularly relevant for ecotherapists as they address the issue of confidentiality when leaving the confines of the clinical office, indicating that practitioners should consider situations where confidentiality might be breached.

Before taking therapy outdoors, the clinician should raise the issue of confidentiality with clients and understand how they want to handle certain situations that might arise. For instance, I ask clients how they would like to handle the situation if we encounter a familiar person while outdoors. I also raise the question of how we will manage discussing sensitive material if someone approaches or passes us on the trail. It is the therapist’s responsibility to raise these potential situations and to support the client in making an informed decision.

AVOIDING HARM

Most ethical codes admonish us to avoid harm to clients. Just as clinicians seek to provide a safe psychological space for the people we work with, we also intend to provide a safe physical space as well. Likely, we don’t give too much thought to this while we’re working in our offices or agency settings beyond typical steps to ensure safety and comfort for clients and for ourselves. But when we move our work outdoors, we must do so mindfully and ask what other influences might pose some danger to clients and raise those concerns with them. For example, before leaving the office setting, the therapist should ask clients if they have any physical conditions that could affect their safety while outdoors. I ask if they are allergic to bee stings or poison oak (which grows in my area). I also ask if they have a history of muscular-skeletal problems, cardiac conditions, asthma, or other health concerns I should be aware of.

Similarly, when I move outdoors with clients, I carry a light backpack containing bottled water, a basic first-aid kit, and a lightweight emergency blanket. I also take my cell phone in case of an emergency. Safety concerns may not be a huge issue in a nearby park or garden, but if we move into wilder areas, the therapist must be prepared.

COMPETENCE

The APA Code of Ethics states that, “Psychologists provide services…only within the boundaries of their competence, based on their education, training, supervised experience, consultation, study or professional experience” (2.01.a. Boundaries of Competence). In addition, it directs: “In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists nevertheless take reasonable steps to ensure the competence of their work and to protect clients/patients...from harm” (2.01.e. Boundaries of Competence, 2010, p. 5). The ACA(2005) and NASW (2008) advocate similar guidelines for therapist competence.

As the field of ecopsychology grows and interest in practicing ecotherapy expands, there are more opportunities than ever for clinicians to take additional training. Continuing education workshops are offered at national conferences and throughout the country. Some graduate programs are now offering courses in ecopsychology and ecotherapy, and some offer certificate tracks that integrate into their degree programs. There are also a growing number of workshops and programs emerging in Europe. In addition, there is a growing body of literature that addresses the theory and practice of ecotherapy as well as two journals—Ecopsychology, which is published in the U.S., and the European Journal of Ecopsychology, published in the U.K.

Clinicians need to recognize not only their limits of competence related to the therapeutic issues of this emerging field, but they need to be clear about their level of competence related to the environment in which they are conducting their work. It is incumbent upon the therapist to assess the level of risk and the client’s level of competence and confidence to handle that environment. Again, if you are only walking the bike path outdoors beyond the office building, there is relatively little risk involved. But if you are meeting a client along the shore of a white water river, or on a bluff top, or walking a narrow trail above the ocean — the clinician must be clear about his/her own competence and thoughtfully assess the client’s level of ability and comfort.

DOCUMENTATION

It is important that the clinician decides how best to document the preparatory discussions that they have with their clients/patients. Sometimes the documentation requirements are determined by the agency or organization where the clinician is practicing. Some private practitioners have the client sign a form that outlines the issues discussed and the decisions reached. That document becomes part of the client’s record. Others choose a less formal way to document the decisions reached, by including the details of the preparatory discussion in the session notes of the client’s chart.

A FINAL NOTE

A final area of ethical concern I would like to mention is not articulated in any of the codes of ethics we practice by. Because nature becomes a partner in the therapeutic process, it is also important to recognize not only the utilitarian value of nature in therapy, but we must also recognize nature’s intrinsic value as well. This connection to and valuing of the natural world encourages human flourishing in a way that acknowledges our deep kinship with the more-than-human
world — our totemic self (Kahn & Hasbach, 2012). This relationship challenges us to consider our ethical responsibility to the natural world in which we work and of which we are a part.

REFERENCES

Buzzell, L. (2012). Personal communication on 10/1/12 in online ecotherapy group.

---

**Dream Catcher**

*I am a dream catcher.*

*Into my web march the visions of the night.*

*Intricate, sticky are my weavings.*

*What slips through is gone forever —
What does not become my treasure to behold.*

*The dangling images shimmer*

*In the light of approaching dawn;*

*I am mesmerized by the dancing reflections . . .
In the full light of morning, I wonder . . .*

*Do I catch dreams — or do dreams catch me?*

— Lucie Lie Nielson