

# Wilderness Therapy for Emerging Adults

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Like many of my fellow IECA members, I've noticed a dramatic upswing in *emerging adult* clients. Emerging adult is a term coined by Jeffrey Jensen Arnett, PhD, a leading expert on young people ages 18 to 25 ([www.jeffreyarnett.com](http://www.jeffreyarnett.com)). With this area of need rapidly growing, it's no surprise that programs

serving emerging adults have grown as well.

Because I am especially interested in the growth of wilderness therapy or outdoor behavioral health programs, I recently posed several questions to 14 such programs—most were both adolescent and emerging adult programs and a few operated only with that older population—that offer young adult wilderness treatment:

- Why is this age group presenting with an increased need for treatment?
- What seems to be working?
- How do we know it's working?
- What advice do programs have for parents and IECs working with emerging adults?

## NEW DEMANDS

In response to *why* programs had added emerging adult services, two themes emerged. First, the increased demand for emerging adult wilderness programming was initiated by families who had younger children who'd been successful in adolescent wilderness programs. An even more frequent reason cited for this increased demand was the economic downturn that began in 2008 that led to families putting off treatment until late in their teen's 17th year or even until after a college experience (or two or three) had failed.

Second, although there has been more traditional treatment available for emerging adults with addiction problems for some time, wilderness options are seeing great successes in this arena. But substance abuse is only a fraction of what's being treated. These young men and women are experiencing significant emotional problems—depression, anxiety, trauma, and

attachment to name a few—and plenty are dealing with failure to launch. They need wilderness therapy that can provide a clinically intense intervention and teach both coping skills and life skills.

You may have first heard of failure to launch as a comedy starring Matthew McConaughey, but it's no laughing matter. Arnett suggested that the changes in our culture over the last 50 years have led to a new developmental stage—the emerging adult. And just as society needed to accept the notion of adolescence over 100 years ago, we now must recognize this new developmental need. Wilderness may be just the ticket to assisting a client in working toward that launch.

## DIFFERENT NEEDS

Programs also reported that there are new factors in play that need to be addressed in working with emerging adults. Process addictions (especially screen time and pornography) are worse than ever, leading to inordinate and unhealthy levels of isolation. That isolation has contributed to a generation that has learned to objectify others, seeing them only as vehicles to be used, obstacles in their way, or irrelevancies to what they want. Wilderness programs offer emerging adults an opportunity free from distraction—that is, off the technology grid—to see the effect their life is having on others, to learn to take responsibility, to begin anew, and to build lasting and trusting relationships with family and others.

Increased screen time has also taken the place of other talent building. More and more emerging adults have very little success in or areas of competency outside of what they can do—or who they can be—online. Wilderness experiences force young adults to build talents, skill sets, and efficacy outside the computer.

In addition, the number of emerging adults diagnosed with spectrum issues is on the rise. Heroin is cheaper and more accessible than prescription drugs; in fact, many communities see its use as epidemic. Parents are having more trouble letting go. For example, some helicopter parents actually want, even expect, to go on job interviews with their emerging adults!

Although several programs talked about the importance of remaining “true to the basic tenets of wilderness therapy” in their young adult programs, they also identified a number of

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enhancements to their programs that have come about in just the last few years. The therapy has become much more sophisticated, and therapists as well as field staff are more highly trained. That is especially true as programs have become not only trauma-informed but are also actually treating trauma at a deep level.

### ENHANCED PROGRAMS

Wilderness therapy is more holistic than it once was, with components that address mind, body, and spirit. Programs are incorporating yoga, mindfulness, meditation, and even cultural immersion alongside more traditional wilderness experiences. Such additions add structure and strengthen the young adult programs. And although wilderness therapy has always honored a connection to the earth, horticulture therapy is now being used in some programs.

Several programs have also added more of an adventure therapy component to their repertoire and offer such activities as rock-climbing, rappelling, and canyoneering, which contribute to talent building and give emerging adults more skills with which to move into adulthood. There is also more emphasis on individualization versus a one-size-fits-all approach to programming and a far more collaborative attitude in working with emerging adults.

Family therapy and parent resources have also become more sophisticated as programs learn better ways to help parents develop a different kind of relationship with their emerging adult than they had with their adolescent child. Often there is a parallel process in place between the young adult in his or her work and what the wilderness therapist is doing with mom and dad.

A few programs discussed how important the concept of transition is for emerging adults as they move to the next step beyond the wilderness experience. Some programs offer opportunities for young people to participate in community experiences and then return to "the woods" to process and reflect on their experiences.

Wilderness training has always been rich in metaphor; one program likened the need for thoughtful transitioning for young adults to rehabilitating a wild bird in captivity. Suggesting that just as the bird is given structure and support to practice skills slowly, rather than simply being released on its own back into the wild, so young adults often feel that they are strong enough to fly and skilled enough to thrive immediately after leaving a wilderness program, but that sense of confidence can be a dangerous illusion without thoughtful transitioning.



### RESEARCH

In 1996, several wilderness programs banded together to collaborate and share best practices. The founding programs realized the advantage of uniting to promote program standards and excellence. The original members served primarily an adolescent population, but today, the Outdoor Behavioral Healthcare Council (OBH) is 18 members strong and serves both adolescent and the emerging adult populations.

OBH partnered with the Association of Experiential Education (AEE) in 2013 to help expand AEE's existing standards to better reflect current wilderness therapy practices and create an accreditation process for outdoor behavioral health programs. Among the various accrediting bodies, AEE stood out as the best organization to collaborate with because of its long-standing reputation in the field

of experiential and adventure education, including more than 25 years of experience accrediting programs in the field.

The AEE-OBH Council partnership resulted in a detailed set of ethical, risk management, and treatment standards created by longstanding leaders in OBH, adventure therapy, and wilderness programming. To insure objectivity, AEE alone handles the actual accreditation process, which ensures a level of separation and accountability that is

essential to the integrity of accreditation.

OBH has also sponsored the development of the OBH Research Cooperative (OBHRC) to facilitate research and find credible, objective information to answer the question, Does wilderness therapy work?

The work of the research cooperative is managed by the OBH Research Center, housed at the University of New Hampshire, and directed by Michael Gass, PhD, LMFT. Several research scientists work with the center, and it supports many aspects of OBHRC, including risk management, clinical research, accreditation, and insurance reimbursement, among other initiatives.

The National Association of Therapeutic Schools and Programs (NATSAP) is also involved in research endeavors. NATSAP is committed to helping its member programs access pertinent research information and engage in the evaluation of their own programs. The organization publishes the Journal of Therapeutic Schools and Programs and manages the NATSAP Research and Evaluation Network. Go to [www.natsap.org](http://www.natsap.org) for more information.

Several studies of adolescent wilderness therapy programs have

reported successful results in terms of programming effectiveness. Outcome studies have also shown that the gains made by teens in wilderness therapy are maintained over time. Similar research is now being conducted on the emerging adult population. The results for one of the first studies that demonstrates the efficacy of wilderness programming for young adults can be found at <http://dx.doi.org/10.1080/0886571X.2013.852452>. OBHRC also has projects going on in young adult wilderness programming. The early results of research on young adults appear to be similar to and as positive as the research for adolescents. Visit the Research section at [www.obhcouncil.com](http://www.obhcouncil.com) to learn more.

### HELPFUL ADVICE

Wilderness therapy programs working with emerging adults had some advice for both parents and IECs. Parents play an incredibly important role in young adult programming, especially in wilderness programs:

- Once young adults are over 18, they cannot be compelled to stay in treatment, so parents must be willing to find some kind of leverage to help keep their young adult engaged. Their resolve will inevitably be challenged at some point, but they need to be able to hold the line.
- Parents must be committed to treatment when it comes to working with young adults. Mom and dad have to do their own work to help the family system become stronger and healthier.
- Parents also need to understand that the emotional development of their young adult is probably limited in some way, and almost certainly if he or she has been using substances. On an emotional maturity level, they may be talking to a 14-year-old in a 19-year-old's body.

IECs can help parents cope with all of the above and more by:

- Using soft reminders to parents that their teen or 20-something is, in fact, an emerging adult is one way to help.
- Helping parents understand their role as their child transitions into a functioning adult. Sometimes when that transition initially falls short, a parent can feel a sense of failure and attempt to compensate by over-parenting. In emerging adulthood, the parent's role needs to shift from acting as a manager to more of a consultant. IECs can often help parents with that translation.
- Helping parents clarify the specific outcomes they are hoping for when choosing a program. IECs can encourage parents to write down their hopes and dreams and identify the hopes that are within their control and those that are outside of their control. Knowing what the parents are looking for is helpful in identifying the right program fit.
- And even though the emerging adult is that 18-going-on-14 kid, IECs can draw the young person into a dialogue about what they want and have an objective discussion that is often just not possible for parents to do.

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*Author note: Thanks to Anasazi, Aspiro, Evoke, Expedition Therapy, Legacy Outdoor, Medicine Wheel, New Vision, Open Sky, Pacific Quest, Red Oak, Second Nature, Summit Achievement, True North, and Wingate Wilderness programs for helping me write this article and special thanks to Dr. Neal Christensen, PhD, and Will White, DA, for going above and beyond!*