

**EMBRACING WILDERNESS TO HEAL COUNSELLOR VICARIOUS
TRAUMA**

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EMBRACING WILDERNESS TO HEAL COUNSELLOR VICARIOUS TRAUMA

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Dedication

I dedicate this research to any mental health professional that has ever lost themselves in the therapeutic processes required to heal their traumatized clients.

Abstract

The presenting research examines the experiences of eleven mental health professionals who have embraced nature in order to heal from vicarious trauma. The analysis was conducted through a phenomenological hermeneutic approach and a transpersonal lens was utilized to interpret the themes according to Wilbur's Spectrum of Consciousness (1986). The themes that emerged from the participants' journeys were organized into three phases: Setting the Stage, The Wild Plunge, and The Profound Shift. The two most elaborate themes that emerged were centered on mindfulness and a sense of connection and belongingness experienced in nature.

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Prima facea, I need to express my gratitude and appreciation for the delightful participants of this study. I am thankful for their time, passion, energy, and willingness to recount their stories. Their palatable love for the natural environment kept my fire burning strong through this research process.

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Chapter 1: Introduction

Here is this vast, savage, howling mother of ours,
Nature, lying all around, with such beauty, and such affection for her children,
As the leopard; and yet we are so early weaned
From her breast to society, to that culture which is exclusively
An interaction of man on man. (Thoreau, 1862, p. 34)

As an avid rock climber who has grown up near coastal mountains and a vast ocean on the West coast, I have witnessed inexpressibly beautiful landscapes and experienced the true silence of the mountains. I believe the natural world evokes a sense of well-being, renewal, oneness, and interconnectedness with God and the Universe. Having felt the healing powers of these surroundings, I am interested in exploring if these nature spaces can help prevent and manage the stress that results from working with a trauma population. As a graduate student in Counselling Psychology, I am also highly interested in the counsellor's voice, especially after having noticed its absence in the literature pertaining to vicarious trauma. The presented study is a fusion of my greatest passions: wilderness, therapy, and self-care. My research is a small attempt to simultaneously reconnect our society with nature and help counsellors process the content of their therapy; my hope is that this research provokes a discussion and future research on the benefits of the union between nature and humans.

Research Statement

Among the wide array of occupations, counsellors are among the few professionals who can use themselves as instruments to effectuate client change (Corey, 2013). The quality of therapy is affected by the personal characteristics, values, and

presence of the counsellor (Corey, 2013). Since counsellors utilize themselves as instruments in their professional work life, they must be particularly vigilant to care for and maintain their “tool.” The chronic day-to-day exposure to clients and the distress they experience may become emotionally taxing on counsellors or other helping professionals, resulting in the experience of conditions known as professional burnout, traumatic countertransference, secondary traumatic stress, or vicarious trauma (Lawson, 2007; Lawson & Myers, 2011). The study of preventative self-care strategies for counsellors is increasingly important due to the high rates of vicarious trauma. A number of epidemiological studies suggested that secondary traumatic stress affects from 10 to 35% of those in the helping professions (Bride, 2012); 10.8% of counsellors experience symptoms of vicarious trauma (Lawson, 2007); and about 10% of counsellors report moderate, high, or extremely high compassion fatigue symptoms (Ortlepp & Friedman, 2002; Sprang, Clark, & Whitt-Woosley, 2007). One third of counsellors in a Canadian study experienced conditions that affect the quality of the therapy they provided (Buchanan, Anderson, Uhlemann, & Horwitz, 2006). Research on vicarious trauma (VT) is necessary, especially in this time of augmenting levels of nation-wide stress, client case-loads, and the increasing prevalence of high-risk clients seeking therapy (Pretty, Peacock, Sellens, & Griffin, 2005; Roszak, Gomes, & Kanner, 1995).

The Canadian Psychological Association [CPA] *Code of Ethics for Psychologists* (CPA, 2000) outlines the issue of competence; registered psychologists must “seek appropriate help and/or discontinue scientific or professional activity for an appropriate period of time, if a physical or psychological condition reduces their ability to benefit and not harm others” (pg. 17, article II.11). In the face of this criterion, VT may lead to

professional impairment; thus engaging in self-care strategies and the identification of coping mechanisms is an ethical imperative for counsellors.

A number of external and internal coping mechanisms have been identified to prevent or manage VT. Organizational coping mechanisms pertain to methods that lie beyond the counsellors' intrinsic control; these include peer supervision, team support, decrease in caseloads, and adequate training (Bride, 2012; Jordan, 2010; Killian, 2008). Among the most common personal coping mechanisms, physical exertion, healthy sleeping/eating habits, leisure, social support, humour, and self-awareness have been found to be particularly effective in countering VT (Bober & Regehr, 2006; Harrison & Westwood, 2009; Iliffe & Steed, 2000; Jordan, 2010). Activities that are spiritual in nature, such as mindfulness, have also been found to manage VT (Harrison & Westwood, 2009; Thompson, Amatea, & Thompson, 2014). To date, nature experiences as preventative measures to VT have not been fully explored in the literature.

In the past 30 years, research has been conducted focusing on the stress reducing, emotionally recharging, and spiritually renewing effects of nature experiences. Similarly, the findings of meta-analysis on nature's therapeutic effects in a wide range of fields - psychiatry, ecology, leisure, and recreation - suggest that nature decreases stress and increases wellbeing (Brymer, Cuddihy, & Sharma-Brymer, 2010). Specifically, nature experiences have been shown to reduce mental fatigue (Hartig & Staats, 2006; Kaplan, 1995), reduce aggressive behaviour (Kuo & Sullivan, 2001), increase positive emotions (Maller, Townsend, Pryor, Brown, & St. Leger, 2006; Pretty et al., 2005) as well as increase life reflection and spiritual well-being (Heintzman, 2003; Kamitsis & Francis, 2013; Nisbet, Zelenski, & Murphy, 2011). Natural environments have been found to

induce transcendent, peak, flow, and mindful experiences (Ambrose-Oji, 2013; Csikszentmihalyi, 1990; Maslow, 1968; McDonald, Wearing, & Ponting, 2009). Two prominent theorists, Ulrich (1981) and Kaplan (1995), though varying in focus, provided the first empirical data that supports the claim that nature reduces physical, cognitive, and emotional stress.

Research suggests that embracing wilderness increases well-being, and has been shown to benefit certain populations (McBride & Korell, 2005; Wilson & Lipsey, 2000), but few studies focus on the counsellor population. Despite the increasing exposure of counsellors to a trauma population (Pretty et al., 2005), there is lack of understanding of the ways wilderness is used to manage VT.

Purpose and Value of this Research

The purpose of this phenomenological study is to explore the healing effects of wilderness for counsellors with VT. Specifically, the study seeks to identify the distinctive elements of wilderness experiences that affect VT symptoms in counsellors who provide therapy to a trauma population. My research question asks: What is the lived experience of counsellors who use the wilderness to heal from VT?

The exploration of this phenomenon has significant implications for counsellors. Specifically, this study contributes to our academic understanding of the manners in which counsellors are able to benefit from nature. In varying degrees, our natural world is an accessible and cost-effective therapeutic resource that could be utilized. The lack of research on personal coping mechanisms needs to be remedied and the proposed research will fill this gap in the literature. The practical value of the findings of this study lies in outlining the individual strategies/processes for countering VT in nature. Moreover, the

study is the attempt to provide the opportunity for research participants to share their experience and help the field become proactive in the planning of self-care that is tailored to the needs of counsellors.

Research Method and Theoretical Framework

Phenomenology is a type of study that sprung from Husserl's philosophical movement; it details the meaning of the lived experience of a phenomenon as it presents itself to the researcher's consciousness (Creswell, 2013). Due to the open-ended nature of the research question, a hermeneutic phenomenological perspective is well suited to allow an exploration of the essence and significance of the participants' nature experiences. In accordance to the hermeneutic tradition, the language embedded in the lived experience was examined. Eleven participants were interviewed, and the resulting audio recordings were converted into textual form as transcripts. The phenomenon was then interpreted as if it were, itself, textual (Klein & Westcott, 1994). I analyzed the transcripts for prominent themes and interpreted them according to two theoretical frameworks: A constructivist self-development lens of VT and a transpersonal lens according to Wilber's Spectrum of Consciousness.

Terminology: Definition of Used Terms

The complex nature of the human experience related to stress and trauma is evident from the variability of terminology that is used in the reviewed literature. The following definitions are provided to ensure the uniformity of these terms and the better understanding of their use throughout the study.

For the purpose of this study, the term VT, is defined as a psychological response to an indirect exposure to traumatic material– this directly speaks to the dynamics of the

relationship between a counsellor and his/her clients who have experienced trauma (McCann & Pearlman, 1990). The syndrome of VT is characterized by a long-term shift in cognitive schemas relating to frame of reference, self-capacities, ego resources, psychological needs, and memory system. The psychological needs and related cognitive schemas that are disturbed in VT are trust, safety, power, esteem, and intimacy (McCann & Pearlman, 1990). A disordered belief system can affect the way the counsellor interprets his or her experiences. For instance, VT may result in a change of worldview or/and a disconnection from one's sense of spirituality (Trippany, Wilcoxon, & Satcher, 2003). Symptoms leading to counsellor impairment such as cynicism, fear, helplessness, and anxiety have been well documented (Collins & Long, 2003; Trippany et al., 2003).

Counsellors are defined as registered social workers, psychotherapists, psychologists, and counselling professionals who provide individual or group therapy to a trauma population. I will be using the title, counsellor/s, to encompass all the aforementioned terms as a way to minimize the quantity of terms used.

Nature experiences are understood as time spent outside in city parks, lake resorts, sunsets, green spaces, gardens, weather, and deserted alpine mountain zeniths. I will be using Gallo's (2006) all encompassing definition of nature being, "equivalent to the natural world, the opposite of the physical, material and cultural world" (p. 18).

Wilderness, as defined by McDonald et al. (2009), is used to specify a natural setting that includes the following: "a large uninhabited land containing native plant and animal communities that had been relatively unaffected by modern civilization" (p. 383).

Wilderness therapy is a broad term that has been conceptualized in many different ways; it includes adventure camps, outdoor behavioural health care, wilderness education,

and expeditions (Rutko & Gillespie, 2013). For the purpose of this study, wilderness therapies encompass nature-based programs that incorporate assessment, intervention, and monitoring (Rutko & Gillespie, 2013).

Heintzman (2003) suggests that spirituality be defined broadly in order to allow room for personal interpretation. In this study, spirituality is defined as the profound otherworldly feelings of compassion, unity, and connectedness with all of existence that are unrestrained by religion (Kumar, 2000).

Trauma is defined as a sudden major upheaval, such as a horrific, violent, or graphic event, which involves significant and prolonged suffering (Figley, 1995). And thus a trauma population includes individuals who have experienced one or more of these events (Harrison & Westwood, 2009).

Organization of the Study

To begin, the presenting study introduced the topic of managing VT through nature experiences and outlined the research process that unfolded. Following this overview, Chapter Two contains a review of the literature on stress related conditions concerning counsellor work stress; particular emphasis is placed on factors that contribute to VT and its symptoms. Literature pertaining to the effect of nature on mental health is explored through salient theories and studies. In Chapter Three, I provide a description and rationale of the chosen methodological approaches. Further elements of the research process such as interview method, data interpretation, and data trustworthiness are also examined. In Chapter Four, I introduce and discuss the themes that evolved from the data by presenting striking quotes from the eleven participants. Chapter Five includes a summary of themes, interpretation of the findings, limitations,

personal reflections, and lastly the research implications. I will now begin with a comprehensive review of the literature.

Chapter 2: Literature Review

This chapter provides a review of the literature pertaining to VT and the restorative elements of nature. The first section begins with an overview of the literature relating to the various constructs of stress syndromes associated with counselling and then continues with a comprehensive description of the prevalence, symptoms, and preventative or contributory factors to VT. In the second section, the literature turns to an exploration of the therapeutic benefits of nature experiences. Numerous theories highlight our affiliation with our environment and the positive psychological consequence that result from this union. The theories that are explored allude to a human need for connection to nature that emanates from a deep, evolutionary, emotional, and spiritual dependence on our environment. The constructivist theory of VT and transpersonal psychology according to Wilber's Spectrum of Consciousness will both be examined in detail, as the results will be interpreted based on these two lenses.

Stress Response to Counselling

For the past 30 years, researchers have examined the stress-related response that results from working in a helping profession. The response can be categorized into two groups: (a) professional burnout and (b) trauma related stress (Newell & MacNeil, 2011). Professional burnout is a general phenomenon that exists in all professions (Maslach, 2003), whereas traumatic countertransference (Figley, 1995), secondary traumatic stress (Figley, 1995; Stamm, 1995), compassion fatigue, and VT (McCann & Pearlman, 1990) have been conceptualized to explore the stress emanating from working with a traumatized population. Two challenges in the terminology related to these constructs exist. First, practitioners often use professional burnout interchangeably with the various

trauma related responses, despite the former being an all-encompassing term that can be used in any population. Second, an overwhelming proportion of the studies use the terms traumatic countertransference, secondary traumatic stress, compassion fatigue, and VT interchangeably despite their different operationalized definitions: “Even leaders in the field do not always use the terms with consistency” (Mathieu, 2012, p. 137). To ensure understanding of these definitions throughout the study, these constructs will be deconstructed in the following section.

Professional burnout. The term burnout - as experienced by helping professions - was first coined by Christina Maslach (2003) in her novel *Burnout, the Cost of Caring*. Burnout is a stress response to exposure to: “...the chronic emotional strain of dealing extensively with other human beings, particularly when they are troubled or having problems” (p. 2). The dimensions of burnout are three pronged: a) emotional exhaustion; b) depersonalization and cynicism; and c) diminished personal accomplishment (Cordes & Dougherty, 1993; Maslach, 2003). These multifaceted consequences of burnout may inevitably negatively affect the therapeutic process (Cordes & Dougherty, 1993).

Stress response to working with a trauma population. The biological, emotional, and psychological stress related specifically to working with a trauma population has been labeled in professional literature as traumatic countertransference, secondary traumatic stress, compassion fatigue, and VT (Bride, 2012; Figley, 1995).

The theory of countertransference dates back to the Freudian era, however, it was Herman (1992) who first used the term “traumatic countertransference” to specifically describe a counsellor’s past trauma being triggered by exposure to a traumatized client. This trauma is described to rub old scars new and cause once resolved issues to surface

(Bober & Regehr, 2006; Wall, 2001). Traumatic countertransference is difficult to distinguish from other client-therapist behaviours, and is thus not commonly used in the literature (Figley, 2002).

Figley (2002) defined secondary traumatic stress (STS) as an emotional duress that result from witnessing the firsthand trauma experiences of another individual. Later on, compassion fatigue (Joinson, 1992), considered a less stigmatizing term, became used interchangeably with secondary trauma (Bride, 2012; Harrison & Westwood, 2009). The symptoms of STS (or compassion fatigue) mimic those of post-traumatic stress disorder (PTSD). In the current edition of the *Diagnostic and Statistical Manual of Mental Disorders* (American Psychiatric Association [APA], 2013), PTSD is diagnosed if trauma has been experienced indirectly (i.e., counsellor experiences trauma via the client). Criterion A of the PTSD diagnosis requires exposure to actual or threatened death, serious injury, or sexual violence in one (or more) of the following ways: (a) direct exposure (b) witnessing, in person, the event as it occurred to others (c) learning that the traumatic event(s) occurred to a close family member or close friend (APA, p. 271). Counsellors' reactions to their clients' trauma would be classified under the last criterion.

Vicarious trauma is a syndrome that is operationalized by a long-term shift in cognitive schemas, beliefs, expectations, and assumptions about self and others (McCann & Pearlman, 1990). The construct emerged from the social constructivist theory, which assumes that clients construct their own realities (Pearlman & Saakvitne, 1995). With regards to VT, a constructivist lens is interested in the way in which clients interpret and construct meaning around the trauma (Pearlman & Saakvitne, 1995). Counsellors suffering from VT experience an alteration of cognitive schemas that affect the

psychological needs of safety, trust, power, independence, esteem, intimacy, and control (McCann & Pearlman, 1990). Accordingly, VT's hallmark is a disrupted sense of spirituality, meaning, or hope (Pearlman, 2012). Although potentially highly deleterious and severe, VT is seen as a natural response to indirect trauma (Baird & Kracen, 2006). Research has reliably supported the cognitive based theory of VT (Iliffe & Steed, 2000; Johnson & Hunter, 1997; Schauben & Frazier, 1995).

Among the terms relating to an exposure to a trauma population, the most commonly used are VT and STS (also known as compassion fatigue). The following section reveals additional differences between the two terms. These two constructs were initially developed for different populations: STS was first recognized in the significant others of sexual assault survivors and combat veterans, whereas VT was initially identified in counsellors working with trauma survivor clients (Baird & Kracen, 2006; Pearlman, 2012). Also, STS can occur after one exposure to a trauma population while VT is a result of a cumulative exposure to traumatic content (Jenkins & Baird, 2002). Certain experts believe that STS and VT are the same phenomenon (Mathieu, 2012); others posit that the two are related terms, each with its own distinct features (Baird & Kracen, 2006; Jenkins & Baird, 2002; Pearlman, 2012). As can be predicted from the varying opinions in the field, two studies that analyzed the construct convergence between VT and STS found that the conditions are complementary, yet can be experienced differently (Baird & Kracen, 2006; Jenkins & Baird, 2002).

As VT was specifically developed for counsellors, it has been utilized in this study. Despite the differences in terminology between professional burnout, traumatic countertransference, STS, and VT, the knowledge acquired from studies based on the

related constructs is presumably relevant and linked to VT. In the following section, all empirical work regarding these concepts will be explored along with the impact of VT on counsellors.

Significance of vicarious trauma. Research on preventative self care strategies for counsellors is increasingly salient due to augmenting levels of nation-wide stress, heavy client case-loads, and the increasing prevalence of high-risk clients seeking therapy (Pretty et al., 2005; Roszak et al., 1995). Clinicians' caseloads can range from 28 to 79 clients per week depending on the operational definition studies have utilized (Lawson, 2007). Not only are caseloads heavy, but also the clientele is challenging in nature. More than half of the counsellors in community agencies work with a high-risk (e.g., suicidal, dangerous, self injurious, etc.) population, which significantly increases the prevalence of VT in counsellors (Lawson, 2007). One study suggests that across all counsellor workplace settings in both clinical and nonclinical populations, approximately one third of clients are trauma survivors, and 15% of clients are dealing with suicide and self harm (Lawson, 2007). Counsellors working with high-risk clients are significantly more likely to experience licensing board complaints, as this population is more vulnerable to misunderstanding interventions (Harris, 2003, as cited in Thomas, 2005). Even if dismissed, board complaints are additional stresses for counsellors working with a trauma population; almost 50% of counsellors who have been issued a board complaint experience depression (Montgomery, Cupit, & Wimberley, 1999).

Definitive incidence rates of trauma-related stress are challenging to acquire due to the aforementioned lack of clear terminology. However, a number of epidemiological studies do suggest similar results: STS affects from 10 to 35% of those in the helping

professions (Bride, 2012); 10.8% of counsellors experience symptoms of VT (Lawson, 2007); and about 10% of counsellors report moderate, high, or extremely high compassion fatigue symptoms (Ortlepp & Friedman, 2002; Sprang, Clark, & Whitt-Woosley, 2007). Moreover, one third (33%) of Canadian mental health workers experience STS (Buchanan et al., 2006), while approximately 35% of Canadian child welfare employees self-identify as being highly emotionally exhausted (Mandell, Stalker, Wright, Frensch, & Harvey, 2013). On the higher end of the varying results, about 50% of child protection workers in Colorado report experiencing “high” or “very high” levels of compassion fatigue (Conrad & Kellar-Guenther, 2006).

It is important to note that even though surveyed helping professionals are not diagnosed with a trauma-related disorder, a large proportion may be experiencing the symptoms. Bride (2007) showed that while only 15% of counsellors met the criteria for PTSD, more than half of the surveyed participants (55%) experienced several core symptoms of STS. Similarly, the incidence of VT is predicted to be higher than the studies reveal due to the issues with self-reporting and experienced shame. An under reporting of stress was observed in the study of the American Counseling Association [ACA]; 15% of counsellors reported being stressed and 4.3% reported that they were “distressed” (ACA, 2007, as cited in Lawson, 2007). However, when asked to assess their colleagues, counsellors found 33.3% of their peers stressed, 12.24% distressed and 4.05% distressed to the point of impairment (Lawson, 2007). Despite counsellors’ knowledge of the development of VT, many think they are to be blamed for their symptoms (Canfield, 2008). Others may feel a sense of incompetence for experiencing VT, and, as a result, may deny their feelings to themselves and to others (Adams & Riggs, 2008). The current

President of the Canadian Counselling and Psychotherapy Association suggests that the hiding the symptoms of VT among counsellors might be the reason for the lack of studies on VT in the field (Blythe Shepard, personal communication, November 18th, 2013).

Ethical considerations of vicarious trauma. Professional impairment and competence are significant issues in the discipline of psychology (Lawson, 2007). Based on Pope, Tabachnick, and Keith-Spiegel's (1987) study, 59.6% of counsellor respondents admitted to providing therapy while too distressed to be effective. Counsellors experiencing VT may be unable to provide quality therapy due to emotional withdrawal, a lack of empathy, and cognitive shifts in how counsellors view the world and themselves (Yassen, 1995). These symptoms disrupt the entire therapeutic process by damaging client treatment outcomes and the therapeutic alliance (Hayes, 2004). Symptoms related to STS have been found to decrease the quantity and quality of counsellors' responses to clients (ACA, 2005). According to the CPA *Canadian Code of Ethics for Psychologists* (CPA, 2000), the issue of competence is outlined within the Principle of Responsible Caring. Under Standard II.11 psychologists must, "seek appropriate help and/or discontinue scientific or professional activity for an appropriate period of time, if a physical or psychological condition reduces their ability to benefit and not harm others. In the face of this criterion, VT may lead to professional impairment. Furthermore, as stated in Standard II. 12, psychologists must prevent impaired judgment by engaging in self-care activities (CPA, 2000). As a result, registered psychologists are ethically obligated to prevent and manage VT.

Professional impact of vicarious trauma. The negative impact of VT on professional functioning is multi-faceted. First, task performance decreases both in

quality and quantity due to perfectionism, detail-obsession, task avoidance, and a lack of motivation (Yassen, 1995). Second, morale is negatively affected in those suffering from VT. Professionals may experience a decrease in confidence, a loss of interest in their work, persistent dissatisfaction, and apathy towards client problems (Yassen, 1995). Along with professional incompetence and a negative attitude, interpersonal work relationships may suffer. Counsellors with VT are likely to withdraw from colleagues. Moreover, lack of communication or poor communication skills may result in a higher incidence of staff conflicts (Yassen, 1995). Finally, professional functioning may decrease due to behavioural changes such as tardiness, absenteeism, and general irresponsibility. Additionally, counsellors with VT may change professional roles within their current workplace or begin to jump between different organizations or agencies. To protect themselves from further traumatic exposure, counsellors become emotionally numb, which in turn causes an inability to empathize with clients, referred to as emotional paralysis (Collins & Long, 2003). Alternatively, some counsellors may react to witnessing trauma by overly identifying with their clients (hypersensitivity) and thus take on more responsibility than is healthy (Collins & Long, 2003). Numerous researchers agree that VT affects competence and can lead to professional impairment (Dutton & Rubinstein, 1995; Lawson, 2007, Pearlman & Saakvitne, 1995; Yassen, 1995).

Personal impact of vicarious trauma. In addition to being disruptive to the therapeutic process, VT affects counsellor's functioning and personal life. Pearlman and Saakvitne (1995) asserted that: "[t]he effects are widespread; its costs are immeasurable" (p. 281). They elaborate that protecting oneself from the knowledge of people's cruelty comes at a great cost. The cognitive, spiritual, emotional, social, and physical symptoms

of VT are often difficult to disentangle as the behaviours manifest themselves differently depending on counsellor characteristics and the type of trauma that has been witnessed (Bober & Regehr, 2006).

The most salient long-term symptom of VT is a change in cognitive schemas in the form of a disruption of one's view of self, others, and world (McCann & Pearlman, 1990). Changes in cognition regarding safety, trust, power, intimacy, self-esteem, control, independence and frame of reference have been identified (Iliffe & Steed, 2000; McCann & Pearlman, 1990; Ortlepp & Friedman, 2002). Since disrupted trust schema lead to an increase in suspicion and cynicism of others, counsellors might feel increasingly unsafe and take extra precautionary measures against perceived violence. A sense of helplessness and vulnerability can result due to the loss of power experienced by their clients. Counsellors may also vicariously feel a loss of independence, along with a sense of feeling trapped and confined. Esteem or "the need to perceive others as benevolent and worthy of respect," is negatively affected by an exposure to ongoing human violence and cruelty (McCann & Pearlman, 1990, p. 140). Counsellors may adopt a bitter and pessimistic perspective on humanity due to diminished esteem for the human race. Schauben and Frazier's research (1995) on the experience of female counsellors dealing with sexually abused women demonstrated the disruption of the cognitive belief regarding trust and the "goodness of people" among the counsellors. Furthermore, a distorted schema in intimacy can create a profound sense of alienation. Regrettably, loneliness may be magnified due to the counsellor's inability to talk to a friend due to client confidentiality and boundaries (Wheeler & Hewitt, 2004). The last cognitive schema affected by VT is frame of reference, which relates to the causality of events.

Counsellors may become trapped in persistent thinking about the causes of horrific events, such as perseverating on the individual that was responsible for the trauma.

In addition to cognitive distortions, temporary changes to the counsellor's imagery system of memory have been reported to occur with VT. Mirroring the symptoms experienced by traumatized clients, traumatic images may appear to counsellors as fragments with no presenting stimuli (Iliffe & Steed, 2000; McCann & Pearlman, 1990; Trippany et al., 2003; Yassen, 1995). Other cognitive symptoms include thoughts of self-harm, self-doubt, and a decreased self-esteem (Yassen, 1995).

Spiritual damage or "soul sadness" has been used to describe the spiritual suffering that occurs with those inflicted by VT (Chessick, 1978; Pearlman & Saakvitne, 1995). A disordered belief system negatively affecting spirituality has been well documented in the literature (Canfield, 2008; Lahad, 2000, Sabin-Farrell & Turpin, 2003). Through a fracture of cognitive schemas, those affected by VT experience a loss of purpose and meaning may cause counsellors to question their prior religious beliefs and idols (Yassen, 1995). A disordered belief system can cause counsellor confusion, despair, and anger towards God or gods (Trippany et al., 2003, Yassen, 1995). Consequently, cynicism, suspicion, and a decrease in the belief of the "goodness of our species" occur as a result of an exposure to traumatic material (Ortlepp & Friedman, 2002; Sabin-Farrell & Turpin, 2003).

Crises in cognitive schemas and spiritual life are often accompanied with a range of emotions experienced in those suffering from VT such as anxiety, guilt, irritability, helplessness, powerlessness, anger, and an increased fear for self and for loved ones (Carlier, Lamberts, & Gersons, 2000; McCann & Pearlman, 1990, Schauben & Frazier,

1995; Yassen, 1995). Counsellors working with domestic violence identified intense feelings of isolation, helplessness, anger, and horror against the injustices in the world. Frustration at the extant inequality in organizations that allow perpetuating violence to continue is another persisting emotion reported by counsellors (Ilfie & Steed, 2000). Moreover, Schauben and Frazier (1995) propose that indirectly witnessing intense pain causes psychic drain. Indeed, emotional exhaustion, a long-term symptom of VT, has been identified in trauma counsellors by Johnson and Hunter (1997).

The intense emotions that counsellors encounter during sessions with trauma clients often cause bodily distress. An increased arousal due to anxiety may cause sleeplessness and drowsiness (Sexton, 1999). According to Pack's (2014) study, participants reported that their anxiety manifested itself through physical "fight or flight" sensations (e.g., sweating, rapid heartbeat, and dizziness, etc.). Upon hearing traumatic client material, participants felt heaviness, stomach churning and nausea (Ilfie & Steed, 2000). Body tension, headaches, and increased susceptibility to illness were also reported in counsellors (Ilfie & Steed, 2000; Yassen, 1995).

Social and interpersonal relationships can be greatly affected by VT. Counsellors with VT who have children may become overly protective as a response to a growing mistrust in others, and an increased fear of random acts of violence (Yassen, 1995). Professionals experiencing VT may withdraw from friends and family and project anger or blame due to a strong "disjuncture" from self and others (Pack, 2014, p. 22). Counsellors may also isolate themselves from loved ones as a result of heightened mistrust in once-trusted individuals (Pearlman & Saakvitne, 1995). Other symptoms may include a decrease in interest in sex and intimacy (Yassen, 1995).

Factors contributing to vicarious trauma. Vicarious trauma symptoms levels are affected by counsellor characteristics, amount of training received, and work setting. Many studies agree that novice or young counsellors are more vulnerable to the deleterious effects of VT (Adams & Riggs, 2008; Bride, 2012; Pearlman & MacIlan, 1995; Pearlman & Saakvitne, 1995). Counsellors in training are more preoccupied with self-concerns and show more disrupted cognitive schemas. Experienced counsellors showed fewer signs of distress (Pearlman & MacIlan, 1995). Despite experiencing fewer signs of distress, counsellors who have extensively worked in the field have more disrupted beliefs about intimacy with others due to a prolonged exposure to traumatic material (Bober & Regehr, 2006).

Counsellors with a history of trauma are more vulnerable to VT (Adams & Riggs, 2008; Camerlengo, 2002; Jenkins & Baird, 2002; Jordan 2010; Pearlman & MacIlan, 1995). In particular, counsellors with a history of trauma and a self-sacrificing defense style are at an increased risk for developing VT (Adams & Riggs, 2008). Several studies contradict these findings in proposing that a counsellor's trauma history is not related to an increase in stress symptoms (Follette, Polusny, & Milbeck, 1994; Schauben & Frazier, 1995). Gender may also affect VT levels: most studies find that individuals who identify with the female gender are at an augmented risk for VT as compared to those who identify with the male gender (Sprang et al., 2007).

Some researchers suggest that focusing on counsellor characteristics as factors that can cause VT places unnecessary blame on the counsellor. Throughout the academic community, it has been emphasized that the primary factor causing VT is not the individual nor the client, but the trauma itself. It is important to highlight that VT is a

natural and normal response to indirectly witnessing trauma (Astin, 1997; Baird & Kracen, 2006; McCann & Pearlman, 1990).

The prevalence of VT varies greatly between work and community settings. A significant difference in burnout levels between practitioners working in private practice and the public sector has been identified (Lent & Schwartz, 2012). Counsellors working in the community score highly on “emotional exhaustion” (Lent & Schwartz, 2012, p. 363). These findings are logical since public and non-profit organizations serve a more distressed and traumatized population, and counsellors have less control over their work environment in these settings (Sprang et al., 2007). According to the Mental Health Commission of Canada (2012), mental health services in rural areas are underdeveloped: communities face a lack of services, a shortage of mental health professionals, and limited resources. Due to these challenging conditions, mental health workers in rural areas are more at risk for burnout and VT than those working in urban centers (Meldrum, King, & Spooner, 2002).

Seeking solutions: Strategies to prevent or manage vicarious trauma. The research community has identified a variety of factors that can help prevent or manage the symptoms of VT in counsellors. Studies have shown that work settings alone are inadequate to fully explain and prevent the stress related symptoms of VT. Consequently, both personal and contextual strategies need to be considered (Linley & Joseph, 2007). Although neither settings nor counsellors’ traits can cause VT, agencies and individuals have the responsibility to manage the stress response associated with working with a trauma population (Pearlman, 2012).

Contextual/organizational factors. There is an amassing body of research that pertains to the environmental factors that increase VT. It has been posited that the largest predictor of high VT scores is a high exposure to a traumatized clientele (Bride, 2012). This suggests that, although difficult to implement, one of the most effective coping strategies is monitoring client caseload (Bober & Regehr, 2006; Harrison & Westwood, 2009; Jordan, 2010; Killian, 2008; Trippany et al., 2003). In the current economic climate, however, reducing client caseload as a strategy to prevent VT remains a difficult task (Ortlepp & Friedman, 2002). Contrary to the findings on the positive relationship between heavy caseload and VT, it must be noted that a few studies have found an insignificant correlation between client volume and compassion fatigue (Jenkins & Baird, 2003; Trippany et al., 2003).

Peer supervision and case consultation are preventative strategies that are extensively supported in the literature. Consultation with colleagues and supervisors allows counsellors to share how work is affecting their personal life, and it is beneficial in assessing levels of cynicism or isolation (Killian, 2008). Similar to clients seeking counselling, counsellors benefit from debriefing with colleagues who can provide empathic responses (Jordan, 2010; Schauben & Frazier, 1995). Peer consultation is also constructive in helping counsellors separate their own emotions and meanings from those of their clients (Jordan, 2010). Team support was also identified as key in decreasing VT symptoms; counsellors with team support felt less weighed down by responsibility in complex cases (Bernard & Goodyear, 2004; Iliffe & Steed, 2000). While clinical supervision allows counsellors to gain a different perspective (Knight, 2004), weekly

case conferences are important in countering isolation and managing VT (Harrison & Westwood, 2009).

Adequate training is a quintessential preventative factor in VT. Counsellors who are well educated in dealing with traumatized clients experience less distress (Ortlepp & Friedman, 2002; Sprang et al., 2007). Despite this fact, few graduate programs in Canada and the United States include appropriate trauma training (Arvay, 2002; Trippany et al., 2003). According to a study conducted in a counselling psychology graduate program, 25% of the students reported working with traumatized clients before having received any formal training and those that were trained often received a one-time lecture on trauma (Adams & Riggs, 2008). Students should be thoroughly trained across a series of workshops in order to gain the skills to protect themselves from VT (Adams & Riggs, 2008).

A notable theme in the literature is that the environmental factors outlined above rely on program coordination. Hence, organizations need to restructure their facilities and institute policy changes to enhance peer supervision, and decrease counsellor caseload (Bober & Regehr, 2006, Figley, 2002; Harrison & Westwood, 2009; Iliffe & Steed, 2000, Killian, 2008; McCann & Pearlman, 1990, Trippany et al., 2003). As organizational reconstruction tends to require the input of a program coordinator team and/or a team, individual counsellors may find it challenging to influence change on their own (Ortlepp & Friedman, 2002).

Personal coping mechanisms. Personal coping mechanisms, although helpful in combating VT, have not been as thoroughly investigated as external preventative strategies. A consensus exists in the literature pertaining to the lack of research on the

topic at hand (Bober & Regehr, 2006; Buchanan et al., 2006; Harrison & Westwood, 2009; Lawson, 2007). Counsellors' individual experiences and personal circumstances can prevent or/and moderate the impact of witnessed trauma. Commitment to self-care and self-preservation may include a variety of strategies that include, but are not limited to, maintaining a healthy life style, sustaining relationships, humour, mindfulness, and developing self-awareness and spirituality.

Leading a healthy lifestyle that incorporates exercise and self-care have been found to prevent and manage VT (Iliffe & Steed, 2000; Jordan, 2010). Exercise, adequate and quality sleep, and healthy foods were found to be helpful coping strategies for 35% of counsellors (Schauben & Frazier, 1995). Physical exertion was identified as helpful in processing strong emotions arising from difficult sessions. Counsellors reported feeling emotionally refuelled after engaging in exercise (Schauben & Frazier, 1995). Leisure time was suggested to have the largest effect size when Canadian counsellors were asked to determine the most beneficial strategy in dealing with the effects of trauma work (Bober & Regehr, & Zhou, 2006).

In the same way, sustaining relationships by talking with friends and family have a preventative effect on VT (Wallace, Lee, & Lee, 2010). Engaging in social activities was found to be a nurturing form of self-care for trauma counsellors (Pearlman & MacIan, 1993), suggesting that expression and verbal exchange mitigate trauma exposure symptoms by allowing counsellors to process and debrief (Badger, Royse, & Craig, 2008).

Several studies found humour to be helpful in reframing and reinterpreting traumatic events (Moran, 2002). Humour was one the most common adaptive strategies

used by women treating sexual violence survivors to cope with the trauma (Schauben & Frazier, 1995). Equally, VT levels decrease in individuals who use humour as an adaptive coping mechanism (Adams & Riggs, 2008).

Empirical evidence on factors that manage traumatic countertransference suggests that a deep understanding of self, as promoted by self-integration, is the most influential preventative factor of VT (Hayes, 2004; Hayes, Gelso, Van-Wagoner, & Diemer, 1991). Specifically, self-monitoring and self-awareness skills were ranked as the highest factors that contributed to counsellor well-being (Coster & Schwebel, 1997).

Spiritual damage is one of the most deleterious symptoms of VT (Pearlman, 2012), as such, it is understandable that a focus on spirituality to mitigate VT symptoms is a growing interest in this field. Counsellors with a larger sense of meaning and connection who are in touch with their spirituality are less likely to develop VT because they are more ready to accept their inability to change occurrences (Pearlman & Saakvitne 1995). A survey conducted by Pearlman and MacIan (1993) suggests that 44% of trauma counsellors found spirituality effective as a coping mechanism against VT. Similarly, Trippany and colleagues (2003) and Killian (2008) confirm the finding that a sense of spirituality is a protective factor against VT. Spiritual practices such as mindfulness, engaging in a spiritual community, spiritual rituals, and maintaining one's own spiritual practice are effective in reducing the symptoms of VT (Dombo, Gray, & Early, 2013). Spirituality strengthens and restores the following beliefs: a) growth can occur after trauma; b) people are resilient; c) life is more than suffering; d) counselling efforts are meaningful, and e) the counsellors are not solely responsible for recovery (Harrison & Westwood, 2009). Although a spiritual connection can be enhanced through

a range of religious and non-religious source, the majority of the participants in Harrison and Westwood's (2009) study found a spiritual connection through time spent in nature: "[W]hen I go walking by the ocean, which I do very frequently, I always think about and pay attention to how the ocean persists, and that's how humanity persists, people persist, you know, that kind of idea" (p. 209).

Therapeutic effects of mindfulness. Closely connected to spiritual development and its mitigating effect on VT is the practice of mindfulness. In this section, the empirical evidence that supports the value of mindfulness as well as how it relates to VT will be explored. Mindfulness is a practice that originated from the Four Noble Truths of Buddhism (Silverton, 2012). In the West it has been defined as: "a process of sustained attention and awareness of the present moment in daily life" (Morgan et al., 2014, p. 288). Mindfulness has also been described as a here-and-now focus and an awareness of shifts in mind, body, and environment (Kabat-Zinn, 2003). In fact the word meditation comes from the Latin word *mederi* that means "to cure." Kabat-Zinn (1990) stated that mindfulness could cure as by bringing us closer to what is most fundamental in life: wholeness and connectedness. An abundance of studies in the literature indicate the effectiveness of mindfulness in treating a range of physiological and psychological conditions (Ambrose-Oji, 2013). In particular, numerous studies have examined the effectiveness of Mindfulness-Based Stress Reduction programs (MBSR), founded by Jon Kabat-Zinn in the 1970's (Kabat-Zinn, Massion, & Kristeller, 1992; Vollestad, Silvertsen, & Nielsen, 2011). Clients with anxiety disorders reported a marked decrease in anxiety levels and panic after participating in an 8-week MBSR program (Kabat-Zinn et al., 1992).

Pearlman and Saakvitne (1995) boldly assert, “every intervention strategy for vicarious trauma is predicated on mindfulness and acceptance” (p. 77). Moreover, mindfulness is necessary to achieve the equilibrium required to stay grounded while witnessing trauma (Pearlman, & Saakvitne, 1995). In Thompson and colleagues’ study (2014), mindfulness was inversely correlated with compassion fatigue: as the participants’ level of mindfulness increased, their symptoms of compassion fatigue decreased. Similarly, mindfulness was found to act as an internal stress thermometer, or “check in,” encouraging participants to engage in other self-care practices when necessary (Harrison & Westwood, 2009). Mindfulness has been seen to increase self-awareness and an understanding of self, two concepts that are key to managing the stress associated with exposure to a trauma population (Hayes, 2004; Hayes et al., 1991).

Lastly, conflicting studies must be acknowledged, and contrary to most studies, Bober and Regehr (2006) found no association between levels of VT and amount of time spent engaging in personal coping skills. Symptom levels associated with VT were affected by unhealthy work conditions, not by a lack of personal coping skills.

As demonstrated, many researchers have discussed the various symptoms of VT ranging from personal to environmental factors. The personal coping skills most effective are exercise, humour, social support, leisure time, spirituality, and mindfulness. To date, no extant research on nature experiences or an exposure to wilderness as a preventative or coping factor for VT has been conducted.

Well functioning counsellors. From a positive psychology perspective, strengths need to be assessed and expanded to fully thrive (Seligman & Peterson, 2003). In light of this philosophy, it may be useful for those suffering from VT to learn from thriving

counsellors in the field. Two studies in the literature were conducted on well functioning counsellors in order to identify factors that contribute to their ongoing wellness (Coster & Schwebel, 1997; Harrison & Westwood, 2009). The contributing factors that overlapped between these studies were the following: spirituality, a sense of personal community, supervision, life balance, ongoing professional development, and self-awareness (Coster & Schwebel, 1997; Harrison & Westwood, 2009).

Recently, it has been suggested that counsellors can be positively affected by providing therapy to a trauma population (Hernandez, Gangsei, & Engstrom, 2007). Vicarious resilience is a concept that has emerged in the last decade and describes growth, meaning making, and transformation of counsellors engaging in trauma work (Hernandez et al., 2007). Through an exposure to traumatic client material and an engagement of empathy, counsellors learn about coping with extreme hardship and pain from their clients. It is interesting to note that trauma work does not only prompt negative experiences in counsellors (VT), but that it can instigate significant positive experiences such as empowerment, new-found hope, a tolerance for frustration, and a meaningful reconsideration of one's own problems (Hernandez et al., 2007). Vicarious resilience was also found to cause counsellors to reflect upon appropriate and healthy boundaries, the role of spirituality in therapy, and the use of community interventions (Hernandez et al., 2007).

Thus far, various terms relating to the stress symptoms experienced by those working in the mental health profession have been defined and their characteristics explored. This study will focus on VT as it relates most to counsellors working with a traumatized population. Research pertaining to more accurate incidence levels of VT in

the population is required – to date, only rough estimates have been identified across a wide array of studies. We know that VT, STS, or compassion fatigue affects 10 to 35% of mental health professionals. Numerous strategies that prevent VT have been identified; however, the largest gap in the literature concerns the effectiveness of personal coping mechanisms (Bober & Regehr, 2006). Lastly, the positive aspects of working with a trauma population and strategies adopted by well-functioning counsellors were examined. Further research is required to assess how healthy counsellors prevent VT, and how impaired counsellors manage VT. Extant literature pertaining to the therapeutic qualities of nature and its effectiveness as a coping strategy will now be investigated.

Nature as Restorative

For centuries, indigenous cultures in pre-industrialized Western society, have viewed nature as a therapeutic antidote to life changes and stressors. Native American indigenous people have long valued nature as healing; we can see examples of this through Vision Quests and sweat lodges (Beringer & Martin, 2003). Vision Quests are right-of-passage rituals that consist of four or more days of solitude and deep communion with nature to find one's life meaning (J. Henry, personal communication, Sep 18, 2013). Shamans would utilize nature's healing power in rituals that helped individuals to both cope with the unknown and to deal with life transitions (Berger & McLeod, 2006). The ancestors of the people of Japan practiced a spirituality called Shintoism. They engaged in the practice of "misogi", a healing and purifying ritual that communes a waterfall with the worshipper and the life force (Sawada, 1998). The beliefs of the aforementioned cultures were based on the notion that "Mother Earth" is a living organism that can heal,

sustain, nurture, and that people were intrinsically connected to Her. Samuels and Bennett (1983) explain:

Within this system of thinking, people viewed themselves as intimately connected to everything around them, from the tiniest insect or pebble to the greatest constellations in the heavens. Each member of the universal community supported each other in perfect harmony (p. 3).

Thus, harmony and healing with oneself, was dependent on harmony in the natural world. As civilizations grew, nature was incorporated into healing practices. During the Ottoman Empire, Sultan Bayezid II began integrating nature into treatment by designing a hospital for the mentally ill where therapeutic interventions included gardens, water therapy, and aromatherapy (Adhemer, 2008).

Despite the link between well-being and nature experiences, in the last 100 years the human species has sharply decreased its contact with nature (Maller et al., 2006). Modern living has insulated us from the natural environment. Not only do 81% of Canadians live in urban metropolises (Statistics Canada, 2011), but on average individuals spend 90% of their lives indoors (Evans & McCoy, 1998). Spending a majority of time indoors can cause negative emotional, physical, and psychological consequences such as depression, mental fatigue, aggression, obesity, and a loss of emotional control (Kuo & Sullivan, 2001; Weinstein, Przybylski, & Ryan, 2009). The symptoms associated with a disconnection from nature have been coined “nature-deficit disorder” (Louv, 2008). The symptoms of this disorder are the following: attention disorders, depression, obesity, and myopia (Louv, 2008). Alongside the data that

demonstrates that a disconnection from nature can cause detrimental effects, many studies have shown that nature increases well being.

Over the past 30 years, the therapeutic effects of nature on our mental, physical, emotional and spiritual health have been well investigated (Harrison & Westwood, 2009; McDonald et al., 2009; Nisbet et al., 2011). Nature experiences have been shown to facilitate physical health (Maller et al., 2006), relieve stress (De Kort, Meijnders, Sponselee, & Ijsselsteijn, 2006; Gulwadi, 2006; Van den Berg, Koole, & Van der Wulp, 2003), reduce mental fatigue (Hartig & Staats, 2006; Kaplan, 1995), reduce aggressive behaviour (Kuo & Sullivan, 2001), increase positive emotions (Maller et al., 2006; Pretty et al., 2005) as well as increase life reflection and spiritual well-being (Heintzman, 2003; Kamitsis & Francis, 2013; Nisbet et al., 2011).

Due to the large amount of people living an urban lifestyle, there is a large body of literature investigating the stress reducing capabilities of green areas in urban environments (Greenleaf, Bryant, & Pollock, 2013; Mayer, Frantz, Bruehlman-Senecal, & Dolliver, 2009; Nielsen & Hansen, 2007; Stigsdotter & Grahn, 2003). Brymer and colleagues (2010) conducted a meta-analysis of studies on nature's therapeutic effects and found that the findings and opinions are remarkably unanimous: the latest research from a wide range of fields – from psychiatry to ecology to leisure and recreation – agree that nature decreases stress and increases wellbeing.

Nature and spirituality. The spiritual dimension of nature experience has recently gained quantitative and qualitative empirical support (Kamitsis & Francis, 2013, McDonald et al., 2009; Nisbet et al., 2011). Natural environments have been found to induce transcendent, peak, flow, and mindful experiences (Ambrose-Oji, 2013;

Csikszentmihalyi, 1990; Maslow, 1968; McDonald et al., 2009). Transcendent experiences, states of absorption in which timelessness and union with a power co-exist, have been experienced in forest and national park settings (McDonald et al., 2009; Williams & Harvey, 2001). Peak experiences involve transcendental feelings of euphoria and a sense of union with the universe (Maslow, 1968). Wuthnow's (1978) study on peak experiences found that 82% of the participants: "experienced the beauty of nature in a deeply moving way" (p. 61). McDonald and colleagues (2009) found that feelings of "oneness-connectedness," and "heightened awareness" were the most prevalent themes of participants who experienced nature (Williams & Harvey, 2001). States of flow and optimal experiences (Csikszentmihalyi, 1990) entail total involvement, richer perception, intrinsic motivation, and self-transcendence (Mannell, 1996). The most researched flow experience in nature is rock climbing and mountaineering (Csikszentmihalyi, 1975; Davis, 1998). Several studies suggest that nature experiences are one of the most common factors in assisting spirituality well being (Heintzman, 2000, 2003).

The therapeutic effect of mindfulness in natural environments has been studied in forest bathing and mindfulness and CBT approaches in nature. Forest bathing, also known as *Shinrin-yoku*, is a method developed in Japan (Ambrose-Oji, 2013). This approach consists of walking through or sitting in a forest mindfully and making an emotional connection with the natural environment (Ambrose-Oji, 2013). Overall stress levels decreased during forest bathing. Additionally, the sight, smell, sound, touch experienced in the forest have been replicated in labs and have been found to decrease stress levels (Tsunetsugu et al., 2013; Tsunetsugu, Park, & Miyazaki, 2010; Yamada, 2006). According to the State-Trait Anxiety Inventory, the Rosenberg Self-Esteem Scale,

and the Happiness Index for Koreans, forest walking has been found to increase self-esteem, happiness, and decrease symptoms of anxiety (Shin et al., 2013). Published literature, although scarce, does exist on the effectiveness of mindfulness in forests in conjunction with CBT approaches. Kim, Lim, Chung, and Woo (2009) conducted a study that found that combining mindful forest walks with CBT was found to be more effective in decreasing depression-rating scores in participants than those who were treated with CBT. During the forest walk, participants were asked to become aware and mindful of their senses (e.g., feeling the wind, listening to the nature sounds, etc.; Kim et al., 2009).

Thus far, previous research was predominately qualitative due to the abstract concept of spirituality in nature. A recent noteworthy quantitative study conducted by Kamitsis and Francis (2013) suggests that spirituality mediates the relationship between a connection to nature and an increased psychological wellbeing. These findings imply that spirituality allows individuals to reap the psychological and physical benefits of nature.

Contemporary wilderness programs targeting at risk-youth and women have evolved from the findings that demonstrate the therapeutic nature of wilderness experiences (Hinds, 2011; McBride & Korell, 2005; Russell, Gillis, & Lewis, 2008). These types of programs will now be explored.

Wilderness therapy. Wilderness therapy is a broad term that has been conceptualized in many different ways (e.g., adventure camps, outdoor behavioural health care, wilderness education, expeditions, etc.; Rutko & Gillespie, 2013). Powch (1994) asserts that wilderness therapy includes challenges in new environments, the immediacy and concreteness of the physical environment, and the therapeutic effects of a sense of connection with nature. Wilderness therapy is an alternative therapeutic

approach that predominately treats youth dealing with trauma, substance abuse, depression, delinquency, and antisocial behavioural problems that may not otherwise benefit from traditional talk therapy (Bettman, Lundahl, Wright, Jaspersen, & McRoberts, 2011; Davis-Berman & Berman, 1994; Russell et al., 2008; Wilson & Lipsey, 2000). Additionally, wilderness therapy has been useful for clients with developmental delays and attentional challenges (Russell, 2003). It has been stated that: “Traditional outpatient approaches to therapy sometimes encourage the kind of submissive, passive response that can develop in in-patient settings” (Davis-Berman & Berman, 2008, p. 12). According to two meta analytical studies, wilderness therapy decreases recidivism, improves psychological and social functioning, and decreases behavioural and emotional problems (Cason & Gillis, 1994; Wilson & Lipsey, 2000). Based on a three-year study investigating the effectiveness of wilderness therapy, clinical and significant changes were found when comparing levels of distress of clients at intake and at discharge (Hoag, Massey, Roberts, & Logan, 2013). Notable improvements were found in life effectiveness, motivation, therapeutic alliance, and attitudinal problems (Hoag et al., 2013). A multitude of studies indicate that challenging natural environments, action based activities, and the spontaneous scheduling that are characteristic of wilderness therapy have been found to foster therapeutic growth. Specifically, these types of environments encourage self-disclosure, develop a trust in authority, and increase self-esteem, goal achievement, and motivation (Clark, Marmol, Cooley, & Gathercoal, 2004; Lambie & Seymour, 2006; Schell, Cotton, & Luxmoore, 2012). Simple nature experiences such as nature walks have also been demonstrated to lower anxiety and the

symptoms of behavioural syndromes such as attention deficit/hyperactivity disorder (Lawrence, 2012; Taylor & Kuo, 2011).

Women in wilderness therapy. Wilderness camps and adventure programs tend to be more geared towards men (Russell, 2001), perhaps due to its original foundations as a means to prepare soldiers for the duress of battle (Bacon & Kimball as cited in Powch, 1994). Despite the historical bias, recent studies demonstrate that wilderness experiences are particularly empowering for women (Hinds, 2011; McBride & Korell, 2005; Wang, Liu, & Kahlid, 2006).

Wilderness expeditions aimed at young women have been found to increase leadership skills, social skills, self-esteem, and intrinsic motivation (Wang et al., 2006). Self-determination was seen as key to increasing intrinsic motivation; women were given choices regarding schedule, activities and were encouraged to assert their power (Wang, Ang, Teo-Koh, & Kahlid, 2004). Several researchers found that women participants on wilderness trips experienced goal accomplishment, solitude and simplicity, and meaningful perspective changes (Frederikson & Anderson, 1999; Hinds, 2011).

As solo expeditions require self-reliance, courage, fear conquering, and strength, they are particularly beneficial in empowering abused women (Angell, 1994). Nature experience provides women in abusive relationships an opportunity to feel fulfilled without their partners (McBride & Korell, 2005).

Seeing that wilderness therapy has been beneficial to at risk youth and women, it may be assumed that nature experiences may also be beneficial for a counsellor with VT.

Challenges to the validity of wilderness therapy. A lack of a universal definition and criteria for wilderness therapy makes it challenging to assess its

effectiveness. Wilderness therapy is a term that has broad implications – there are significant differences in the manners in which these programs are organized, implemented, and assessed (Russell, 2001). Despite the multitude of studies supporting the effectiveness of wilderness therapy, recent studies also state that the outcome of wilderness therapy is varied and challenging to measure (Lariviere, Couture, Ritchie, Cote, & Oddson, 2012). Lariviere and colleagues (2012) used behavioural observations from three counsellors to assess if wilderness therapy promotes change. The behavioural results significantly varied between the observing clinicians. Further research is required to develop a valid tool to measure change in wilderness therapy (Lariviere et al., 2012).

Theories and philosophies. Various theorists, social scientists, philosophers, and researchers across many academic fields articulate an emotional, psychological, and spiritual human connection to the natural environment and the greater web of life. To begin, the psychoevolutionary hypothesis and attentional restoration theories provide an explanation for the stress reducing qualities of nature. Following, theories that allude to the human spiritual dependence on nature, namely biophilia hypothesis, depth psychology, and ecopsychology/transpersonal psychology will be delineated.

Psychoevolutionary hypothesis. Ulrich spent his life exploring nature's ability to help combat stress, and he was the first to provide empirical evidence in this field. Ulrich (1981) proposed a "psycho-evolutionary" theory that states that nature has the ability to mentally restore individuals through a shift in emotional and physical responses to stress. More specifically, Ulrich (1981) hypothesized that visually pleasing patterns of vegetation, such as a mountain landscape or a body of water, activate the parasympathetic system that evokes relaxation as well as the limbic system that induces positive emotions.

Ulrich theorized that humans evolved to emotionally and physically respond to the threatening and non-threatening aspects of nature as a survival strategy. Analogously to when our instinctual “fight or flight” mechanism is activated at the edge of a cliff, when we encounter a nonthreatening environment (ie: calm body of water), a sense of wellbeing is instinctually activated through the parasympathetic nervous system. Ulrich et al. (1991) suggest that after an adrenaline encounter (ie: a sharp cliff), there is an “adaptive need for restoration or a ‘breather’ from stress, perhaps partly to restore energy to sustain subsequent behaviours to exploit food, water [...]” (p. 208). Ulrich’s hypothesis was supported by numerous studies measuring the physiological recovery of stress (e.g., heart rate, muscle tension, galvanic skin conductance, blood pressure, etc.) of participants exposed to various forms of nature (De Kort et al., 2006; Parsons, Tassinary, Ulrich, Hebl, & Grossman-Alexander, 1998; Ulrich, 1981, Ulrich et al., 1991; Van den Berg et al., 2003). As aforementioned the emotional benefits of nature have also been empirically validated (Maller et al., 2006; Pretty et al., 2005). The psychoevolutionary hypothesis states that we are conditioned to unconsciously de-stress in the presence of nonthreatening, natural landscapes.

Attentional restoration theory. Kaplan is another researcher in the field who extensively studied the stress-reducing benefits of natural environments. Instead of focusing on emotional and physical reactions to nature like Ulrich, Kaplan proposed that exposure to nature can combat mental fatigue through a change in cognition (Kaplan, 1995). He defined stress as a mental exhaustion that results from the enormous amount of directed and effortful attention required to complete daily life chores in the Western world. This cognitive overload can lead to stress related illness (Kaplan, 1995). Mental

fatigue can be restored in natural environments, as they do not require direct and focused psychological attention. Attentional restoration theory was first empirically supported by research that examined a wilderness programme that lasted over a decade (Kaplan & Kaplan, 1989). Based on this body of research, Kaplan and Kaplan (1989) suggest that mental fatigue is restored in pleasurable or “fascinating” environments where attention is held without too much effort. Kaplan and Kaplan’s studies (1989) highlight the importance of changing locations to temporarily escape from one’s typical day-to-day setting to mitigate the mental fatigue. In this way, Kaplan and Kaplan (1989) posit that green urban areas are not as effective in decreasing stress as nature experiences that occur outside the urban metropolis. The attentional restoration theory has also been confirmed by a large body of recent literature on the subject (Berto, 2005; Felsten, 2009; Hartig & Staats, 2006; Staats, Kieviet, & Hartig, 2003).

It is important to note that both the psychoevolutionary and attentional theories are mostly based on studies that have been conducted in psychological laboratories that are lacking in validity due to the contrived sources of nature that were utilized (e.g., films, slides, paintings, etc.; Berman, Jonides, & Kaplan, 2008; Ulrich, 1981, Ulrich et al., 1991). Since then, studies in the field have strengthened psychoevolutionary and attentional theories by conducting experiments directly in nature (Hartig, Mang, & Evans, 1991, 2006; Korpela, Kyttä, & Hartig, 2002).

In accordance with Kaplan’s theory, Hartig and colleagues’ (1991) study highlighted that taking a break from daily activities is not adequate to gain emotional and cognitive restoration. A natural setting is an essential component of emotional and mental restoration. Hartig and colleagues (1991) suggest that Kaplan and Ulrich’s hypotheses

can exist simultaneously, but at different times. Emotional and physical restoration occur immediately, within 4 to 10 minutes after a nature experience (Ulrich et al., 1991), and cognitive restoration tends to be more of a process that occurs over prolonged periods of time (Kaplan & Kaplan, 1989). These theories and studies have provided data to suggest that natural environments enhance mental health and wellbeing through physical, emotional and cognitive restoration.

Biophilia hypothesis. The biophilia hypothesis was proposed by Harvard professor, Edward Wilson, in the novel *Biophilia* (Kellert & Wilson, 1993). The hypothesis states that humans have an intrinsic emotional connection to other living organisms (Kellert & Wilson, 1993). Since we have evolved from a natural habitat in the savannahs of Africa, the theory suggests that we have genetically evolved to have a human dependence and a need to commune with nature. The desire for a union with our environment is a result of the last 350,000 generations; for over 99% of our time on earth, humans have been intimately connected to the natural world (Kellert & Wilson, 1993; Sullivan, 2005). In addition to a dependence on resources, nature fulfills a spiritual need (Kellert & Wilson, 1993). The biophilia hypothesis links psychological health to a connection with nature and our ever-increasingly globalized and urban world; the need to connect to nature is ever more pressing.

Depth psychology. Carl Jung, an Austrian psychologist, advocated embarking on wilderness journeys to quench humans' innate "thirst for wholeness" through solitude in nature and a communion with our natural environment (Mahdi, Christopher, & Meade, 1998). He proposed the existence of an innate collective unconscious, a notion that implies that humans are all in some way interconnected (Jung, 1966). Jung believed that

not acknowledging and claiming this collective unconscious through nature has a stifling effect on human vitality (Jung, 1964). He explains:

Man feels himself isolated in the cosmos, because he is no longer involved in nature and has lost his emotional “unconscious identity” with natural phenomena. These have slowly lost their symbolic implications... No voices now speak to man from stones, plants, and animals, nor does he speak to them believing they can hear. His contact with nature has gone, and with it has gone the profound emotional energy that this symbolic connection supplied (Jung, 1964, p. 85).

Contemporary depth psychology added a dimension to the collective unconscious by developing the world unconscious, a notion that asserts that all humans, animals, and living organisms are interrelated (Aizenstat, 2003).

Ecopsychology. First coined by Theodore Roszak (1992) in his novel *The Voice of the Earth*, ecopsychology deals with the human psyche’s relationship to nature. Roszak defined ecopsychology as a union between psychology and ecology (Mishlove, 1998). He proposed that, “[...] at a very deep level the human psyche is grafted to the planet out of which we evolve, that there is what I call an ecological unconscious” (Mishlove, 1998, “Ecopsychology with Theodore Roszak,” para. 14). In other words, humans are part of nature and visa versa – no division exists. The ecological unconscious resides in everyone and ineradicably connects the human race to the natural world. Ecopsychology proposes that humans crave and require nature experiences in order to create a meaningful life; in this way optimal mental health requires a marriage between humans and their environment (Brymer et al., 2010; Roszak, 1992). Roszak proposes that our outer world reflects our inner world, that is, thriving ecosystems will promote a healthy state of mind.

He states that: “The needs of the planet, are the needs of person, the rights of the person are the rights of the planet” (Roszak, 1992, p. 321).

Transpersonal psychology. Transpersonal psychology, defined by Abraham Maslow (1968), is a psychology that moves beyond the ego and its stance on ecology has much in common with ecopsychology (Davis, 1998). Maslow (1968) proposed that humans are first and foremost multi-dimensional and spiritual beings who seek wholeness; as such transpersonal psychology embraces spiritual experiences and outlines a specific model of a human development of consciousness. As identified by Pearlman and Saakvitne (1995), the most salient symptom of VT is a disruption in spirituality. In this way, transpersonal psychology is a theoretical lens that is germane to this research. Wilber (1996), a pioneer in the transpersonal movement, created a theory that drew upon a variety of fields including psychology, anthropology, mythology, cosmology, linguistics, and philosophy (Grof, 2005). Transpersonal psychology is the “Fourth Force” in the field of psychology, as it developed after behavioural, psychodynamic, and humanistic/existential approaches in the field of psychology. Ken Wilber (1996), a leading figure of the transpersonal lens, explains the psycho-spiritual development of consciousness through the Spectrum of Consciousness. His model includes three developmental phases: a) prepersonal, b) personal, and c) transpersonal. These levels indicate the stages through which one can attain higher levels of consciousness. Within the levels, there are ten stages: the first six stages are based on knowledge and concepts developed by Piaget, Kohlberg, and Loevinger, and the last four stages are based on Eastern and Western philosophies of consciousness (Nixon, 2005). Healing can occur at

the egoic stages (prepersonal and personal), but profound and transformational healing occurs in the transpersonal stages where one has detached from the ego (Grof, 1993).

The prepersonal phase relates to the physical realm of sensation and perception where one is concerned with one's bodily self (Tzu, 2012). The prepersonal phase includes a bodily self, emotional self, and lastly a theoretical self. In the Rep-mind, the last stage of the prepersonal phase, the ego begins to develop (Wilber, 1996).

1. Sensoriphsical: The physical self.
2. Phantasmic-emotional: The emotional self.
3. Rep-mind: The conceptual self.

Within the personal phase one identifies with the emotional and cognitive world, and as a result one is concerned with one's roles in society. These stages involve mature ego development (Wilber, 1996).

4. Rule/Role mind: One adopts social rules and roles and begins to move from an egocentric to a sociocentric position (Wilber, 1996).
5. Formal-reflexive: A mature ego is developed, and one adopts an entirely sociocentric and moral position. Metacognition occurs at this stage, as such, one is able to reflect and introspect on one's thoughts and behaviours (Wilber, 1996).
6. Vision-logic: Existential issues such as the meaning of life, fear of death, and aloneness arise in this stage. The mythical Centaur that is half man and half horse, a symbol of integration between the mind and the body often characterizes level 6. This is the last phase before the ego begins dissolving in the upcoming transpersonal stages (Wilber, 1986).

The transpersonal phase encompasses four stages that describes when one moves beyond the ego and the mind (Wilber, 1996).

7. **Psychic:** A “spiritual opening” into the transpersonal realm occurs through a focus on the present moment. During this level, physical senses are heightened and one is able to temporarily separate from one’s ego (Tzu, 2012). Nature mysticism, defined as connecting to God/Universe in the wild, is embodied at this level. Here, one may surrender an individualistic perception of reality for one that is more universal, as such, natural processes are seen as interconnected, and an ecological worldview is adopted (Thibodeau & Nixon, 2013).
8. **Subtle:** Deity-mysticism embodies this level. At this stage, subtle sounds, audible illuminations, profound clarity, and transcendental insight occur (Wilber, 1996). During this level, one can experience a deep intuition through visions of archetypal forms of deities (Wilber, 1986).
9. **Casual:** One is able to subjectively witness manifest and unmanifest forms as they arise in consciousness (Wilber, 1996). This level is commonly experienced as euphoria as one connects to the cosmos existing in every moment (Wilber, 1986).
10. **Non-dual:** The final level of the “Spectrum of Consciousness” is characterized by the quintessence of Nirvana, Wholeness, and the Absolute (Wilber, 1996). An ability to dis-identify with self occurs at this level, and as a result, one is able to accept and connect to all existence (Wilber, 1996). At this stage,

individuals enter into the non-dual, that is, they can become One with existence.

Individuals can progress through the transcendental levels in nature. In the psychic level, one might experience a meditative state while walking in a forest. This experience may progress through the successive stages to a sense of nonduality, a state where one is not attached to the separate self but rather connects to all levels of existence (Tzu, 2012). Wilber (1996) highlights this phenomenon in the following excerpt: “You’re on a nice nature walk, relaxed and expansive in your awareness [psychic phase], and you look at a beautiful mountain, and wham! – suddenly there is no looker, just the mountain – and you are the mountain [non-dual phase] (p. 202).” Wilber further clarifies: “By any other terms, there is no separation between subject and the object, between you and the entire natural world (1996, p. 202).” The nature experience in this passage is the vehicle used to separate oneself from the ego. The non-duality expressed in the passage emphasises the notion that is echoed in ecopsychology and contemporary depth psychology: all life is one (Davis, 1998).

Summary

As the growing research in this area has demonstrated, nature decreases stress, improves cognitive functioning and spiritual well being. Due to the enormous amount of data identifying the therapeutic aspects of nature, it is valuable to understand how counsellors with a history of VT may be impacted by their natural world.

According to the examined literature, the therapeutic aspects of nature have been a predominant theme. Specifically, the research suggests that nature experiences have been known to facilitate mental, physical, and spiritual health. Numerous studies posit

that connecting to natural environments can evoke feelings of spirituality. The most current literature pertains to the benefits of green spaces in urban areas. We know that nature experiences, in the form of wilderness expeditions, have been particularly therapeutic to at risk youth and women. Further research is required to shed light on the ways in which different populations (e.g., professional groups, children, etc.) can take advantage of the therapeutic aspects of nature. More data is also required pertaining to the practical aspects of the manner in which individuals and groups use nature as a coping mechanism. Next, two theories detailing to the stress reducing qualities were explored, and lastly, philosophies that underlined an emotional and spiritual connection to nature were examined.

In this chapter the factors, symptoms, and coping mechanisms of VT were initially explored, subsequently the benefits of nature experiences were delineated. The investigation of the extant literature on these two concepts was conducted in order to set the foundations for a study examining the lived experience of the impact of nature on counsellors working with a trauma population. The next section will describe the research process that was undertaken in studying this population.

Chapter 3 – Methodology

In this chapter, the research methodology and procedures used in the study are outlined. An explanation of the hermeneutic phenomenology approach is summarized followed by a section that details the chosen research design for the presenting study. The following section also details participant selection and the sampling methods utilized. The data analysis process, from interviewing strategies to theme analysis, are further examined. Lastly, trustworthiness and salient ethical considerations are explored. This study used a phenomenological approach to explore the process by which trauma counsellors use nature experiences to manage VT. The overarching question of the study is the following: what is the lived experience of counsellors who use the wilderness to heal from VT?

Research Design: Phenomenological Hermeneutics

Due to the nature of the research question, a phenomenological perspective was employed to allow an exploration of the essence and significance of the participants' nature experiences. Phenomenology is a type of study that sprung from Husserl's philosophical movement; it explores the meaning of the lived experience of a phenomenon as it presents itself to the researcher's consciousness (Creswell, 2013). Within this tradition, there are many ways to view the world, or to experience the same event, and as a result, the same data can be interpreted in various ways (Klein & Westcott, 1994). Bruyn (1966) stated that, "phenomenology serves as the rationale behind efforts to understand individuals by entering into their field of perception in order to see life as these individuals see it" (p. 90). Husserl was particularly interested in understanding the

human experience through perceiving and thinking about various phenomena (Lavery, 2003).

Two prominent influences within the hermeneutic philosophy, Heidegger and Gadamer, used interpretation as a method of understanding (Lavery, 2003). According to Heidegger, both history and language are embedded in every situation, and must be examined to accurately interpret the lived experience (Klein & Westcott, 1994). In order to examine the history and language of the lived experience of participants, interviews are recorded and then transcribed into textual form. The phenomenon is then interpreted as if it were, itself, textual (Klein & Westcott, 1994). The text is interpreted based on three properties: (a) the use of imagination, (b) the hermeneutic circle, and (c) attention to language and the writing process (Lavery, 2003). Imagination in hermeneutics requires an awareness of language use, and a desire to understand human meaning in order to interpret the phenomenon in a novel way. Meaning and themes are created through the circular reading, writing, and interpreting of the text. Throughout a hermeneutic study, participants can be included in the process of interpretation through ongoing feedback (Lavery, 2003). In this way, participants and researchers are included in a hermeneutic circle where, in a way, the data is co-created. In this study, the participants were not included in the process of interpretation as a modified hermeneutic circle was employed. Although participant feedback was not incorporated, the text was interpreted through the use of imagination and attention to language. I consciously imagined how the participants may have experienced their VT and subsequent healing in nature. During the interviews, I prompted the participants to explain the meaning behind the words they utilized. The following statements are examples of questions I asked during the interviews: “If we’re

using the word spiritual, what does it even mean to you?” “What do you mean when you say it’s bigger than you?” I paid close attention to the words and metaphors that the participants chose to verbalize their experiences. For instance, “[I]t was almost like the steam coming out of me, all the stress just lifted and it wasn’t that I was doing anything purposeful but it was out in nature.” I visualized how that experience would have felt, and imagined the process to be a type of release and letting go of stress and client stories.

Gadamer asserted that phenomenologists perceive and understand the world in a certain way based on culture, history, and upbringing; as such the researcher’s perspective will be embedded in the data interpretation (Laverty, 2003). More than in any other methodological tradition, hermeneutic phenomenology requires the researcher to be the primary data-collecting tool and is thus intimately involved in the research process (Creswell, 2013). Gadamer (1960) further highlights this notion:

To try to eliminate one’s own concepts of interpretation is not only impossible, but manifestly absurd. To interpret means precisely to use one’s own preconceptions so that the meaning of the text can really be made to speak for us (p. 358).

Due to the unavoidable presence of the researcher, rather than attempt to eliminate these influences the hermeneutic phenomenologist researcher engages in reflexivity, the process of proactively exploring one’s own biases, assumptions, influences, priori hypotheses, life experiences, and how oneself is entrenched in the study (Laverty, 2003). Throughout the data analysis and within the conclusion of the paper, the phenomenologist declares how their perspective and understanding of the world have contributed to the interpretive process (Laverty, 2003). There are four types of

reflexivity; the two that are important to this study will be explored (Pillow, 2003). The first is reflexivity as recognition of self, which highlights the importance of an awareness of the researcher's own subjectivity through constant self-monitoring. The second, reflexivity as recognition of others, strives to capture the essence of the experience (Pillow, 2003). To ensure reflexivity as recognition of self, the phenomenologist can engage in reflective journal writing to attain an awareness of one's biases, assumptions, and influences (Van Manen, 1990). During the theme emergence process, I countlessly asked myself: "Would my friend/supervisor/professor see what I see?" This simple question allowed my biases to surface into my consciousness. I also maintained a research journal to engage in self-reflection, excerpts of this journal are included in upcoming sections and in following chapters. In order to capture the essence of the experienced phenomenon, open-ended questions and declarative probes were asked in the interview to ensure the participants and data speak for themselves (Pillow, 2003). For instance, the following questions were asked of the participants: "Why don't you tell me about your experience as a counsellor here? Tell me a story of a time you were able to let go of a client story that had affected you."

Hermeneutic phenomenology attends to the lived experience through both an interpretation of the text and reflexivity. As an implicated researcher, I have acknowledged my position and admitted my current biases throughout this study. This chapter will now describe the selection process for participants, as well as the data collection and analysis processes.

Participants

The eligibility criteria of study participants are the following:

- Participants must have worked in the counselling field (e.g., social workers, psychologists, counsellors, etc.).
- Participants must have self-identified as having experienced VT.
- Participants must have utilized wilderness to heal from VT.
- Participants must engage in nature experiences on a regular basis, and must self identify as having a solid understanding of the phenomenon.
- The counsellor must also have to be able to identify and articulate one's experiences in an interview setting.

Purposeful sampling (Patton, 1990) was utilized to recruit research participants. In accordance with this sampling technique, only “information-rich cases” were selected to facilitate the collection of relevant and abundant data (p. 169). Interested participants were asked via online communication if they meet the inclusion criteria before an interview was coordinated. Participants were recruited from the pool of mental health professionals working in Lethbridge, Vancouver, and surrounding areas. An advertisement that was published in the Alpine Club of Canada July 2014 Newsletter (Appendix A) was most successful in recruiting participants. Once suitable participants were found, snowball sampling was utilized to find more fitting participants. Snowball sampling is a technique that entails asking well-informed individuals to recommend participants that might fulfill the inclusion criterion (Gall, Gall, & Borg, 2007). During a reflexive journaling session, I decided to slightly modify the inclusion criterion regarding

what constitutes experiencing nature on a “regular basis” to ensure that the participants hold a solid understanding of the phenomenon.

I'm struggling on how many times a week/month the participants should engage in nature experiences in order to be able to comprehend/verbalize the phenomenon at hand. I used to have a criterion of one monthly experience, but it was a haphazard criterion and now seems unnecessary because all the individuals who have responded to my advertisement (so far) seem to be outdoor enthusiasts. I might just need to ask a few questions about their experiences in nature (via email or phone). For i.e., what outdoor activities do you engage in and how often? How important are those activities to you in helping you overcome work stress? I think it will become evident through a quick conversation, whether or not the individual has an understanding of the phenomenon and whether or not they regularly engage in nature (Research Journal, 19/1/15).

While I was selecting my participants, as suggested by Englander (2012), I asked myself: “Does the subject belong to the population that I am studying?” (p. 18).

Patton (2002) suggests that the ideal number of cases varies in each qualitative study. Since the goal of this study is “depth not breadth,” the study explored the phenomenon in detail by sampling a relatively small amount of counsellors. Clearly, this study does not strive towards generalizability or population validity; rather it aims to describe the present phenomenon. According to Smith and Osborn (2003), a sample size of five has been suggested in the case of a thesis study. There has been one similar interpretative phenomenological study conducted regarding the benefits of the 10-day wilderness experience for women (Hinds, 2011) in which the researcher thoroughly

interviewed five participants. Harrison and Westwood (2009) directed a qualitative study that explored the lived experience of well-adjusted counsellors who were successful in preventing VT through a variety of coping mechanisms, one of which being wilderness experiences. In this study, the narrative experiences of six participants were collected and analysed over the course of three interviews. Likewise, Coster and Schwebel (1997) explored how well functioning counsellors managed work stressors through the content analysis of six interviews. Since the study's research topic and methodology are parallel to the aforementioned studies, the researcher expected to interview approximately five to six counsellors. During the course of the data collection the number of participants increased to a sample size of eleven in order to attain data saturation, that is, when no new themes were revealed (Gall et al., 2007).

Methods of Data Collection

Interviews are commonly used in hermeneutics to gather information that will: "...serve as a resource for developing a richer and deeper understanding of a human phenomenon" (Van Manen, 1990, p. 66). The act of recounting a lived experience prevents participants to simply reflect on the occurrences; rather it prompts them to remain as close to the lived experiences as possible (Van Manen, 1990). Due to the suitability of the interview method in hermeneutic phenomenology, semi-structured interviews were conducted to explore the phenomenon of this study (Van Manen, 1990). Interviews were an hour to an hour and a half in length, and audio recorded for further interpretation. The interview questionnaire (Appendix B) loosely directed the interviewing process. Before each interview, I grounded myself through a brief 10-minute meditation practice in order to be fully present to the participant (Osborne, 1990).

While writing my research journal, I explored my interview insecurities and I realize that I had to eventually adapt this practice:

Beginning this interview I was anxious, as it was my first one. I was worried that I wasn't asking the right questions, or being supportive enough. This is all new for me! I wish I could have practiced my interview skills more, but part of me also realized that I just had to dive into it as well. My meditation before this interview did not ground me, I might have to try something else if this technique doesn't work next time...next interview perhaps I will try taking deep belly breaths when I feel my jaw tightening (Research Journal, 2/7/14).

Basic demographics were collected to provide background information to the participants: occupation, job setting, years in the profession, education, workload, and type of clientele. Only personal information that was pertinent to the study was collected.

Due to the in-depth nature of the interviews in this study, the interview may have been taxing for the participant. My priority was to create a strong working alliance and to create an environment conducive to client storytelling and openness. As a counsellor in training, I aligned with Osborne's (1990) person-centered theoretical orientation. The principles of qualitative interviewing and person-centered approach were adhered to through the use of active listening, minimal directing, and gentle prompts. When possible and opportune, rather than bombarding the participant with questions, I used silence to prompt a revelation of the true experience (Van Manen, 1990). I used paraphrasing and reflection of meaning and content, along with frequent check-in questions to ensure I was correctly understanding the participant. The following statements were utilized: "Is that right? Let me know if I say something that doesn't explain your situations accurately.

Does that summary seem correct?” Above all, I attempted to build rapport between the participants and myself in order to help me in gaining an authentic description of the phenomenon (Osborne, 1990). In order to stay attuned to the micro movements, after each interview, I recorded notes on facial, conversational, and behavioural cues that might be of interest including silence, tone of voice, and gesticulations. Journal entries about initial perceptions, curiosities, as well as ideas to improve upcoming interviews were routinely expressed:

I feel different levels of connection with each participant during the interviews that have taken place. I wonder... how will the data be affected by these varying levels of connection? I imagine that I receive a more “authentic” or “accurate” version of the participant’s experience when we are mutually connecting with one another. I also feel that I get a more comprehensive understanding of the participant when the interview is conducted in their home. Perhaps it is because we both feel relaxed? I’ve noticed that when the interview takes place at their workplace, our interview is slotted into their regular work schedule and the participant is not given the same space to unwind/relax as they would at home (Research Journal, 31/10/14).

I practised my interviewing skills before the interviews to ensure that I delivered the questions comprehensively and eloquently. I practiced my skills with one counsellor in training and one family member, and although my initial interviewees were not counsellors, the process was meant to help me foresee possible challenges during the official interview and to understand how the process might unfold.

Due to the qualitative nature of this study, the researcher is the only instrument used for analyzing data. I conducted, transcribed, and interpreted the interviews so that I could be fully immersed and involved in every step of the process. The materials that were used included the following: the interview questionnaire, an audio recorder, and a personal notebook to record reflections that occurred during the interview process.

Data Analysis Process

The interviews were audio-recorded, and then transcribed verbatim to ensure credibility. Interactive, active, and deep listening were employed during the transcription process (Osborne, 1990). Once physical copies of data were created, reflective analysis was conducted. Reflective analysis is a procedure that relies on the researcher's intuition to accurately depict the phenomenon being studied (Gall et al., 2007). To begin this process, Osborne (1990) suggests that researchers examine and re-examine the transcripts in order to get acquainted with the participant narratives. After meticulously engaging with the data through multiple readings and the transcription process, I began the process of horizontalization by dividing the transcripts into manageable and meaningful clusters of statements. A highlighter was used to identify these clusters. I interpreted each cluster of meaning to identify salient themes through textural and structural analysis (Gall et al., 2007, p. 495). Textural analysis describes a participant's perceptions of the phenomenon being studied. Key verbatim examples were extracted during this analysis. Structural analysis describes the commonalities that emerged when the participants described their experiences in nature (Gall et al., 2007). Following this process, I systematically studied the themes to understand their complexities as well as the relationship they have with one another. Osborne (1990) demonstrates this notion:

The researcher's focus is upon the deep structure of meaning rather than surface linguistic structure. A skilled phenomenological researcher 'reads between the lines' as he or she looks for deep structures which characterize the phenomenon... (p. 85).

Thus, I was continuously searching to illuminate the essence hidden in the transcribed words. In addition to the transcripts, the notes made during and post-interview were methodically organized and analyzed in the same manner. Gradually, throughout the research process, I gained a deep understanding of the phenomenon. The overall process of extracting themes continued until data saturation was attained (Laverly, 2003).

Theoretical Lens Rationale

The VT constructivist self-development lens is based on the supposition that all individuals are unique and multidimensional with distinctive, socially constructed beliefs, behaviours, and perceptions (McCann & Pearlman, 1990). Thus, rather than a pure objective truth, an infinite amount of subjective truths make up our reality. The research question aligns with a constructivist lens as it explores each participants' personal and unique experience of healing in nature. Furthermore, the constructivist perspective of VT has been specifically operationalized for counsellors working with trauma survivors (Pearlman, 2012); as such it is a theory that is highly suitable to the presenting research.

The term "transpersonal" implies an experience that goes beyond the individual/ego; it embraces spiritual experiences and outlines a specific model of a human development of consciousness (Maslow, 1968). The spiritual dimension of healing in nature emerged when reviewing the literature concerning both VT and the restorative properties of nature. As a disruption in spirituality is one of the most severe

symptoms of VT (Pearlman & Saakvtine, 1995), a framework that incorporates the spiritual realm is germane for this study. While the VT constructivist self-development model explores each participants' unique experience, the transpersonal lens investigates the broader themes and universal truths that emerge from the data. By utilizing both theoretical lenses, I can deeply examine the lived experience of the participants.

Trustworthiness of the Study

I ensured the trustworthiness of the study through credibility, dependability, and reflexivity of the data (Lincoln & Guba, 1985). Credibility is the accuracy to which the phenomenologist interpreted the participant's lived experience (Beck, 1993), and is reinforced through prolonged engagement and persistent observation (Lincoln & Guba, 1985). Prolonged engagement requires the researcher to become oriented to the situation they are studying by, "soaking in the culture through his or her pores" (Lincoln & Guba, 1985, p. 302). As a Counselling Psychology graduate student, I easily became oriented to the phenomenon studied as I am currently fully immersed in learning about the counselling profession. To further ensure credibility and to create depth to the study, interviews were conducted and data was analyzed through persistent and deliberate observation to every minutia (Lincoln & Guba, 1985). Dependability was strengthened through the use of an external who inspected my research process (Maxwell, 1992). My supervisor, Dr. Gary Tzu, read the themes and found that my interpretations resonated with his interpretations of the transcripts. My findings further increased in dependability when my committee members found that their personal experiences in nature resonated with the themes in this study. Van Manen (1997) utilizes the word epiphany to describe this type of resonance: "Epiphany refers to the sudden perception or intuitive grasp of the

life meaning of something. This experience is so strong and striking that it may stir us at the core of our being (p. 364).” Trustworthiness was further ensured through reflexivity. Rather than mechanically collecting data, reflexivity ensures the participants and data speak for themselves (Pillow, 2003). After the interview, I engaged in reflexive journaling to describe my reactions to each participant’s account of their personal experience (Van Manen, 1990). The following entry details some initial anxieties about the complications associated with the implied researcher role:

The theme creating process is harder than I imagined. I feel like I can’t be truly objective! I am interviewing female counsellors who love nature, and use it to cope with VT. I am a woman, novice counsellor, and I use nature to cope with my life stress. I couldn’t be more of an implicated researcher if I tried! I want to very deliberately incorporate my opinions and biases throughout the thesis so that I can fully inform the reader about my challenges to objectivity. Let me list my biases: I already believe that nature is therapeutic, so I will naturally see that theme presenting itself. I have had spiritual moments in nature, and have felt connected to God out in the vast outdoors. I believe that nature is a channel to the spiritual. I haven’t really thought about how I utilize nature to decompress, but when I hear my participants’ story... I feel like I too have felt similar experiences (Research journal, 2/14/14).

It is important to note that due to the qualitative nature of this study, transferability of this study cannot be guaranteed. All the themes presented in my analysis will only be applicable to my participants at one given period of time (Creswell, 2013).

Ethical Considerations

The study was conducted after obtaining ethical approval from the University of Lethbridge's Faculty of Education Human Subjects Research Committee (HSRC). Before the interview, participants completed a consent form (Appendix B) that informed them of their voluntary participation and risks involved, among other information. I reminded the participants of the confidentiality of the interview. I worked collaboratively with the participant to find the most appropriate and comfortable setting. The participants of this study have the right to privacy. Confidentiality was maintained through the use of an assigned pseudonym, each participant was randomly assigned two letter initials. Two individuals viewed the transcripts: the thesis supervisor and myself. The audio records and all participant interview files are stored in a password-protected computer, and will be deleted after five years of the completion of the study. All identifying information pertaining to the participants will also be destroyed. The function "secure delete" will be applied to guarantee thorough and permanent destruction of the data. Lastly, all individuals who participated in this study did so voluntarily. At any point during the interview, participants were informed that they could stop the audio recording or opt out of the interview session. Had this occurred, no questions would have been asked.

Summary

This chapter examined the methodological approach and research procedures of the study. To start, a description and rationale of the phenomenological hermeneutic lens were examined. The reasons for the chosen participant demographics, and the number of participants were provided. Following this section, the methods of data collection and each step of the data analysis process were detailed. Osborne (1990) and Van Manen

(1990) were two researchers whose work I consulted in order to complete these sections. The means that were taken to ensure the trustworthiness of this study, namely credibility, reflexivity, and dependability were focused upon. Lastly, the ethical measures that were undertaken to warrant a honourable and ethical study were delineated.

Chapter 4: An Exploration of Themes

Introduction

This chapter begins by introducing the participants through a demographic table and a general description of the eleven counsellors who shared their stories. A hermeneutic phenomenological research approach was used to analyze the transcripts and uncover the emerging themes. Before exploring the themes, an outline will be provided that details the breakdown of the ten themes into three phases. Lastly, each of the themes will be presented and illustrated through evocative quotes from the participants.

Demographics

The interviews were conducted from July 2014 to November 2014. Although I distributed poster advertisements in towns and cities between Lethbridge and Vancouver, a majority of my participants were recruited by the advertisement that was placed in the Alpine Club of Canada monthly newsletter. The Alpine Club of Canada is an athletic association that promotes skiing, climbing, and hiking in alpine environments. Seven participants live in urban areas, and four participants live in rural areas. According to Statistics Canada (2012), I have used the term rural to encompass small population centers that have a population of 1,000 to 29,999.

All the participants are educated Caucasian females with varying amounts of expertise in the mental health field. Their ages range from the 26 to 65 years of age. Two participants have a bachelor's degree, six participants have a master's degree, and three have acquired a Ph.D in a psychology related field. The eleven participants held the following occupation titles: Registered Counsellor, Licensed Marriage and Family

Psychologist, Registered Clinical Social Worker, Registered Psychologist, Mental Health Nurse, Certified Body Talk Practitioner, Registered Social Worker. Registered Psychologists made-up the majority of the participants. The one Body Talk practitioner that participated is an outlier as she has not received a university education centering on mental health issues, and her profession does not require her to focus on mental health alone. She was included in this study as she specializes in clients who present symptoms of anxiety, depression and PTSD and she has experienced VT working with these individuals. All but two participants are employed on a full-time status at their current place of employment. From the two participants, one is recently retired, and the other works on a part-time basis as a mental health practitioner. Approximately half of the participants work in community agency settings and half work in Alberta Children's Hospital in Child Abuse Services. Their clientele is a diverse group of individual that mostly include children/families who have experienced trauma, and adults/adolescents with a range of issues including addictions, sexual abuse, complex grief, anxiety, and depression.

Table 1

Demographic Information of Eleven Participants

<i>Particip-ants</i>	<i>Education</i>	<i>Occupation</i>	<i>Job Setting</i>	<i>Years in profession</i>	<i>Client type/issue</i>
Z. L.	Master's	Registered Counsellor	Community agency	15 years	Sexual trauma, grief
M. M.	PhD	Licensed Marriage and Family Psychologist	Community and private practice	30 years	Families, all ages and issues
G. T.	Master's	Registered Clinical Social Worker	Hospital	2 years	Children with trauma
S. K.	Master's	Registered Psychologist	Hospital	4 years	Children with trauma
H. C.	Master's	Registered Psychologist	Hospital: Neuroscience	2.5 years	Children – brain injury, somatic disorders
Y. K.	PhD	Registered Psychologist	Hospital	15 years	Children with trauma
B. A.	PhD	Marriage and Family Therapist & Mental Health Nurse	Hospital	28 years	Children with trauma
D. A.	Bachelor's	Certified Body Talk practitioner	Community	3 years	Adults with anxiety/ depression
M. K.	Master's	Registered Psychologist	Community	10 years	Children with trauma
R. R.	Master's	Registered Clinical Social Worker	Community Mental Health	4 years	Addictions – group work
K. L.	Bachelor's	Registered Social Worker	Community	3 years	Adolescent – group work

Introduction to the Themes

Based on the literature that I have read, and on the deep reflective engagement with the transcripts, several stages have been identified that detail the lived experience of counsellors who embrace nature in order to heal from VT. The participants underwent three stages in their lived experience of healing VT in nature. In the first section of their journey, *Setting the Stage*, the participants were introduced to wilderness as children and then as adults felt drawn back to wild spaces to heal from VT. In the next phase, the participants took *The Wild Plunge* into nature and were recharged through mindfulness, surrender, and fresh perspectives in a natural space void of expectations and over stimulation. In the final stage, *The Profound Shift*, the participants experienced a deeper healing evoked by gratitude, awe and as a sense of connection and belongingness experienced in the wild. Due to the positive aspects associated with natural landscapes, some participants conceptualized nature as “home.” These phases were pulled from the themes to answer the research question: What is the lived experience of counsellors who use the wilderness to heal from VT?

Setting the Stage

The first phase of the participants’ journey, *Setting the Stage*, unfolded in three parts beginning with the theme *Childhood Experience: A Foreshadowing of Healing in Nature*, which marked and explored the participants introduction to nature. Next, the theme *Vicarious Trauma: A Disconnection from Wellness* depicts how the participants experienced the effects of VT as a disconnection from themselves and from others, and as shifts in their schemas. Lastly, due to their trauma, the participants felt a strong urge to

commune with nature, as exemplified through the theme Innate Pull Towards Wilderness. This phase concluded when the participants felt the “call” to get into the wild.

Childhood experiences: A foreshadowing of healing in nature. Most participants noted having positive interactions with nature early on in life as children. Some were introduced by their parents through family wilderness excursions, several were born in remote areas, and others escaped to outdoor spaces to process difficult emotions during their childhood. Many participants spoke of these memories fondly, as the most memorable moments of their youth. These positive interactions lay the groundwork for future healing in nature; in this way their early experiences foreshadowed their future connection to nature.

Many participants were naturally introduced to wilderness as children because nature activities were embedded in their family life. B. A. explains that her love for nature began when she spent her summers as a child in camps accompanying her father while he completed fieldwork as a prospecting geologist:

So we would go out there – that was our summer vacations – was we would go out and stay with my dad at this camp. Usually not the whole summer, but usually three weeks at a time where we would be in the bush, like literally in the bush. I think for me that was the beginning of feeling a real connection to the natural world.

G. T.’s love for nature began while spending time with her grandfather. She spent her childhood in the woods of Ontario helping her grandfather collect tree sap:

I grew up, um, on the east coast sugaring, and so right from the time I was born I was out in the woods and snowshoeing around and gathering sap and the whole

process. My grandfather did so, um, I think like definitely that's how my connection with the land began with me.

Other participants explored nature as a childhood pastime. R. R. found herself being drawn to natural spaces as a child, and would independently choose to spend time in nature:

It [Nature seeking] has always been something that I did, though, ever since I was a kid. Like, I do remember like going on walks as a kid. My mom didn't worry too much about where I went or how long which... I would walk him [dog] for hours and hours in parks and wherever and that always used to be a great source of comfort.

Some participants were drawn to nature as it allowed them to escape their chaotic family life and to process strong emotions. For G.T, having grown up in a restrictive environment, the freedom and lack of expectations in nature have always been an important aspect of nature. She was able to cope through the space she found in nature:

I grew up in a family where there was too many expectations. It was an extremely religious environment, so I felt like I couldn't breathe all the time and that was a result of many outbursts and fights, and people were watching me all the time. And my father was constantly watching everything we ate he didn't want his kids to be fat, an emotionally abusive environment. So when I went to the woods I was like, "Phew, I threw it all off". And it was just me, so I didn't have to deal with anybody else's emotions and, um, or judgments or feeling like people were looking over my shoulder. I was just sooooo free so I think that's emotional space too.

Similarly, M. M. was instinctively drawn to nature in order to heal and cope during her tumultuous childhood:

Yeah, that is hugely beneficial to me [being outside] and always has been even though I was unaware that I was doing it when I was young. I was doing it... Even when I was a child I had kind of, um well not kind of, I had an abusive father and I used to run to the park, which was 3 blocks away, and sit in my favourite tree. And that would be my safe place. So this forest was there, so I had that experience right since childhood, eh? This was safe, this felt good. I love being here, this felt healthy and free. It felt good. It helped me deal with what was going on – it kind of balanced out things. Even though I wasn't understanding that that was going on.

It is evident through the quotes that the participants were primed at a young age to appreciate and savour nature. We will know fast forward to a point in the participants' lives where they felt the effects of their work as counsellors, which manifested in VT.

Vicarious trauma: A disconnection from wellness. After discussing work environments, most participants outlined the extent to which their occupation affected their personal lives. Counsellors may experience shifts in their psychological need for safety, control, esteem, intimacy, and control. Survivors of VT can also have a variety of schematic shifts in identity, worldview, self-capacities, frame of reference, and spirituality (Pearlman & Saakvitne, 1995). And in fact, each participant did experience VT differently, and had distinct schematic shifts in thinking.

Certain participants experienced a shift in identity that resulted from a disconnection from oneself (Pearlman & Saakvitne, 1995), this can involve questioning

one's vocational identity, and feeling lost. Z.L. felt a shift in her identity during her recent episode of VT:

The vicarious trauma piece really knocked over a part of my identity that I believed in – that I was strongly connected to. You know I thought I arrived because I had my master's, I arrived because I was a professional and good counsellor and all this kind of stuff. “Oh, Z. L. she's a great counsellor.” And so when that, when the doctor was like nope you have to stop I was like, ohhhhhh...but that's who I am!

During this time in her life, Z. L. experienced another symptom of VT: her empathy and active listening, resources important to the therapeutic process, diminished. It was imperative that she took a break from counselling during this time because she struggled to empathize with her clients. Z. L. explains:

I remember this particular incident when this person came [client] and was talking about recently being sexually assaulted, and I was like [big sigh] who cares? And in my head I was going: “Who cares?! You know what you'll get over it. And I'm like I can't listen to this”. And then I would be like... Omg! So then this started happening more and more.

In a certain way, Z. L.'s lack of empathy affected her self-identify. She remembers being astounded that she could think in such a way; her thoughts and behaviour were not in line with her identity.

Several participants experienced a shift in worldview, namely their overarching beliefs about justice and benevolence in the world changed. S. K has a stronger distrust in human sincerity due to her work in child abuse:

Sure there are stories that are really upsetting and distressing and then, yeah, those can stick with you and you can think about them when you go home. It changes a little bit of your worldview, I'm much more jaded and skeptical than other people would be. Yeah I saw pictures in (name of city)... an ad for Uncle Barny's clown birthdays or something... and all I can think about is this guy's a pedophile. I don't think most people would assume that, but that's where my brain goes because of all the stories I've heard.

B. A. describes her challenges to come to terms with the knowledge that predators live in her community:

Sometimes I get struck by the unbelievable cruelty that human beings show to each other, and that's the sort of thing that I could get stuck on. Like, how could one person possibly do that to another person? That's just so unbelievable to me. Even now – even if I've done this work – you think you've heard it all and then you hear something else and you kinda just, woowooooow how does that person live with themselves?

Closely related to a shift in worldview, S. K. also experienced a shift in her psychological need for trust. Several participants expressed becoming hypervigilant with their children's safety, as well as their personal safety. Y. K found that her need for safety increased after becoming a therapist, especially in regards to her children: "Now since I had children its that the risks seem a little more exaggerated to me...Because I am, um, just overly vigilant. Does that make sense?" When S. K. was working with victims of crime at her previous workplace, she felt unsafe in the city in which she worked:

Those stories were really hard to hear and that's where I really started to experience VT. I started to feel unsafe, I was actually unsafe in (name of city). Part of that was real, and part of that was becoming hyper vigilant and more aroused when I got home. And [I] really had to work hard to try and turn my brain off. When I crossed the bridge back into Canada, but the stories piled up and I noticed my mood changing, being more grouchy, more irritable.

Others felt overwhelmed by the magnitude of problems of their clientele, and their inability to change their situation. When H. C worked in youth forensics, she was struck by her lack of power to help her clients:

So you've already seen the damage of their unfortunate life, which is really hard. Like, I found that really tough sometimes and it seems so haphazard. Why was this kid – the same as any other kid – just happened to be born into this family that ended up steering him down such a difficult path; whereas I had a completely different experience? That unfairness was really hard, and the helplessness that sometimes came along with that.

As is commonly experienced with VT, a therapist's self-capacity to tolerate strong affect can decline when working with traumatized individuals (Pearlman & Saakvitne, 1995).

At times B. A. has felt utterly drained after working with particular clients due to her diminished ability to process and tolerate strong emotions:

Yeah, it is hard to explain, I see a lot of these things as flows of energy and when I'm working with somebody that's been very traumatized themselves, and it's a – their narrative is a narrative that is traumatizing to me. It's very hard to hear and there's something about them that I'm feeling particularly empathetic too. There

is a process: if I am giving my energy, that, that's a healing sort of thing and they are also taking in energy and so there is this...the energy is flowing to them and away from me. That's exactly how it feels, it is this energy is flowing out of me to them and that I feel empty. I have nothing, I have absolutely nothing, I can barely drive home.

Numerous participants were affected by a shift in intimacy, which is their need to feel connected to oneself and others (Pearlman & Saakvitne, 1995). Z. L. describes feeling so raw that she emotionally shutting off her need for intimacy due to a fear of vulnerability. She describes shutting down for purposes of self-preservation:

The pressure was so much in my chest and in my heart centre as well as in my lungs because I couldn't breathe. It's like somebody turned off my heart and it was like, "You scare me, because you love me or I love you so much." And I couldn't connect to that place of letting in anymore. Like I was so disconnected from myself that place of love – loving myself. Even for your clients, empathy was gone. Any kind of place of being vulnerable with any creature –whether it was my colleagues, my friends, myself.

Z. L.'s personality temporarily changed when she shut down her need for intimacy.

Understandably, her "turning off" affected her interactions with her friends and colleagues. Feelings of anger and blame as a result of a shift in intimacy, as experienced by Z. L. are common for those with VT (Yassen, 1995):

Really I was very angry at work. Like I would come into meeting[s] and I would just yell at people and I would be mean and I would be manipulative. And I would be ornery and I would cut people off, cut colleagues off, um, it [affects]

relationships right? So I'd be really close, I was really close to a person and I cut her right off and I was just like I'm not talking to you anymore, like really nasty stuff. They [colleagues] don't get it, they don't understand who I am and they are making stupid decisions. Making wrong decisions, you know, I'd tell my supervisor that she was full of shit...really not good things.

During this time Z. L.'s emotional barriers were so high that she could not connect to animals or vast nature scenes. In this case Z. L.'s frame of reference regarding her spiritual connection to nature had shifted. She explains her inability to connect to nature for the first time in her life:

I couldn't believe I wasn't going outside because it was so beautiful. And I was feeling so ugly and when I looked out everything was so sunny and bright. And I was like, oh god, I just couldn't do that. It [beautiful day] was just reminding me of just how - instead of reminding me of love and of like life - it was reminding me of just how ugly I was and how ugly I was feeling and how constricted I was.

The participants experienced diverse schematic shifts: several participants questioned their identity and/or changed their worldview in the form of an increase in hypervigilance and a decrease in safety and trust. Others were less able to tolerate strong affect, and to feel empathy for their clients. Participants were also affected more intrinsically in terms of their own self-connection and identity. Many noted a shutting off of their emotional needs for intimacy, for some this affected their connection to spirituality. The effects of VT were manifested in distinct schematic shifts and when these occurred, the participants felt an innate drive to reconnect with nature. The following section explores this "pull" to leave the city and get into the wild.

Innate pull towards wilderness. The participants' dependence on nature was evident through narratives that described their drive to run away from the city, and through anecdotes that highlighted their propulsion towards nature spaces. Several participants noted that they became demanding and protective of the time they spent in wilderness. It became apparent that every participant had a powerful drive to commune in nature spaces when they felt the effects of their work as counsellors through the analysis of the transcripts.

Driven out of the madness of the city. The participants spoke of needing to get away from civilization to release the "pressure" from urban life. Numerous participants expressed being driven out of the city in order to get away from the following: people and their energies, the chaos of the city, the concrete jungle, overstimulation, complexity, and the flawed systems that are found in urban environments. The pressures of urban life described by the participants may be explained by Kaplan and Kaplan's (1989) attentional restoration theory, which explains that daily life chores in urban environments require immense amounts of direct and focused attention. Many participants spoke of the bombarding pandemonium of the city, and how they had to run away and commune in nature to maintain their well-being. G. T describes this process:

Looking at billboards and like I don't know...even if you go into say Shopper's Drug Mart these days they even have ads on the floor. I don't know if you've noticed that, with some of them back East it will be like on the linoleum. You just can't get away from anything right? It's pulling you away from yourself and so when I go into the woods...I'm not escaping.

M. M. was particularly traumatized by the pathologizing system evident in hospitals in the 1970's as portrayed in drama film *One Flew Over the Cuckoo's Nest* (Zaentz, Douglas, & Forman, 1975). She ran away from these systemic, human created problems by heading into the mountains:

That whole institutionalized “cuckoos-nest” kind of mentality, I mean that’s kind of what drove me to the mountains in California. I was just like this is...I don’t want to be near that! Let me get some health! So I went to the mountains where things were healthy. Yes even when I worked for Mental Health in the psychiatric hospital in (name of the city) I found myself – just to keep my sanity – every weekend. Thursday night I’d pick up the car, Friday I would be driving to the Adirondack Mountains. And camping out, hiking, climbing all around the Blue Mountain range.

When the participants were unable to run away from the city, they felt adverse effects similar to those described by Louv (2008) in his conceptualization of nature-deficit disorder, including depression, irritability, and fatigue. H. C. noticed that she would also feel burdened when she was unable to commune in nature during stressful times in her life:

We just bought a house and there have been a lot of demands to get stuff done around the house. And I haven’t been able to get out as much, whereas previously we were out every weekend and, um, I definitely felt the burden of not having that time out like I was getting irritable. I was tired, I felt stressed, I was feeling negative. And, um I know myself well enough to say: “I have to get out, I can’t stay in.”

Drawn towards nature. When the participants spoke of their experience healing in nature, they would often use evocative language to describe an innate, magnetic pull towards natural spaces. When referring to these compulsions, the participants would use the following words: craving, yearning, drawn to, obsession, and desire. M. M. uses the word “addiction” to conceptualize her love for mountaineering because her dependence to be the mountains is endless. She recounts not being able to get her mountain “fix” after conquering her goal to ascend Mt. Assiniboine:

I thought, I’m 59, I’m going to hire a guide and climb and get it all out of my system. And just the opposite – I was addicted hahaha. So right after I climbed [Mount] Assiniboine I told the guy: “Hey as long as I’m in shape we might as well climb [Mount] Edith Cavell too!” So we went and did that too.

Several participants noted that instead of running away from urbanization - they were running towards nature to find minimalistic living, simplicity, and a symbol of health. K. L. felt that there was a force beyond herself, that was pulling her towards nature. That force fueled her motivation to invest time and money into nature activities and to explore nature-related career options:

I not only enjoyed those things but I don’t know I guess like it just grabbed me, starting then. It feels like very much like being grabbed like, uhnnn haha, do you know what I mean? And then I was all about that [being outside]. I was like ok this is what I want – I want to do this and this...My dad found us a mountain guide, and me and my dad drove me to Canmore so I can interview him. It was really intentional.

K. L. explains that her propulsions towards nature stems from her love of these spaces, and a desire to learn and explore every inch of her environment:

Yeah, topophilia, we learned that in a first year English, like an English course a long time ago and I always loved it. It means love of place and I feel like that's what drives a lot of my, like my, wilderness urges because it's a love and that it just...it's a love of place whether it's familiar and being in that place and exploring it or if it's a bit more unfamiliar. But again to see, I'm always really wanting to see everything.

Other participants mentioned that they are automatically pulled towards nature when they need to find peace before or after a challenging day with clients. D. A. prepares for challenging sessions as a counsellor by harnessing energy from the mountains to help her feel grounded and present during her sessions:

So when I have to deal with.... a really...difficult case, um, I just I'm drawn – I look at the mountains. I'm drawn. I don't even know that the difficult case is coming up, I'll look at the mountains and I'll just like, oh okay, and I physically bring in their energy into my body. And so I can feel them filling me up energetically, okay?

D. A. feels such a strong attachment to her local mountains to help her succeed as a counsellor, she claims that she would not be able to live in a flat-landed environment:

I would not live anywhere where I could not see a mountain or have easy quick access to them...For me personally, I want to be in the mountains. I want to be in the mountains. I really, really, really want to be in them, it's deep seated and I have to be there.

Prioritizing time spent in the wild. Due to the magnetic pull of nature, several participants described becoming protective about their nature time. H. C. explains that despite being an undemanding person in other areas of her life, she is guiltlessly demanding about the time she spends in nature.

I do not care what the weather is; I do not care what we get done today [errands]... I just got demanding about it, like that's it! Last weekend we spent working on the yard, what's done is done now we are going hiking, like I don't care haha! I can totally be demanding about being outside...I feel comfortable about being demanding about it.

R. R. expressed having a parallel experience to H. C.:

I mean I always knew that [nature time] would help and I was engaging in it as often as possible but now I'm very protective of that time...I knew I felt off if I didn't have a chance [to go outside], but now I'm like no I need this haha.

Several participants expressed adjusting their life priorities in order to release the pressure that is built up in urban environments. H. C. recounts this experience:

I do not want to be constrained in this life... Yeah, to this stupid yard in this suburb like whatever. I'll just buy my kale from the grocery store, like, I don't care anymore and I definitely feel the pressure building up in me and I have to get out.

Overall, the participants were simultaneously driven out of the city and pulled into natural spaces. Most participants felt enriched in nature, and so they prioritized spending time outside of the city.

This concludes the first phase, Setting the Stage, of the participant's lived experience of healing VT in nature. This initial stage began with an introduction to nature through positive childhood experiences in wilderness. Next, participants described feeling traumatized by their work through schematic shifts, and consequently, they all felt an intrinsic pull towards nature. Having set the stage, we will now move to the second phase The Wild Plunge, to examine what the participant's experienced once they had plunged into nature.

The Wild Plunge

The second phase, The Wild Plunge, explores how the participants experience healing once they get into nature. Initially, the theme No Expectations, No Demands in Nature depicts how participants are able to feel release in the undemanding, unrestrictive environment of the wild. During this time they are able to nurture their inner child through zestful play and exploration. The next stage of the participants' healing journey, entitled Mindful Appreciation in Nature, is one in which the participants rejuvenate through being mindfulness and awareness in the wild. By being conscious of their moment-to-moment experience, the participants can tune into their physical senses and disconnect from their thoughts. In addition to the release found through mindfulness, the participants experience fresh perspectives and adopt attitudinal shifts in nature as exemplified in the theme Discovering Fresh Perspectives. This phase concludes with the theme Transformational Healing Through Surrender and Allowing, when participants are able to let go of their attachments and, to an extent, surrender control of their lives.

No expectation, no demands in nature. Numerous participants noted that, in part, the beauty and healing properties of wilderness experiences lay in the utter absence

of expectations and demands that are placed on them in these environments. Thomas Moore (1998) highlights the necessity of expeditions in order to get away from one's daily taxing life: "The soul is only half satisfied with the things of this world. Traditional literature states over and over that the soul needs a break from time and place. It needs regular excursions out of busy life, demanding relationships and incessant productivity" (p. 8). The participant's experiences mirrored Moore's musings.

G. T. is able to heal from VT in environments that offer her a wholly undemanding and peaceful environment: "[In nature] I don't feel claustrophobic, I feel like there's no expectations. That's what it feels like; when I'm in there, in the woods I have no expectations placed upon me, um, that I could just be me." Specifically, she finds the wild therapeutic due to its lack of intense emotions.

This is intense work that we do here [trauma work], where emotions are like really vibrant in the room and it's so... it can feel, um, claustrophobic. It can feel thick, the room can feel thick with emotion and it can be, you know? If it's two people in the room, it's both people's emotions. It's mine as well, as the therapist, because I can be triggered. I have to constantly go okay send it down through the force, send it down through back into the earth. Ground yourself, you know? It's like there's a thickness in the air so when I'm outside alone in the woods it's just the trees, and the plants, and the flowers, and the birds, and anything else that's around then. Yeah there's a freeness and space around me.

Many participants enjoyed the lack of stimulation in natural environments. H. C. highlights the importance of non-attentiveness by an anecdote that contrasts experiences in wilderness with playing soccer recreationally:

[Nature] it's not like soccer – where you're having to be attentive to the people around you or what's going on or being alert. There's not like demand or responsibility. You get into this wonderful rhythm, and you can just take in whatever you want around you. There's nothing you need to be attentive to, there's no demands. You're just kind of like tromping along and you can enjoy the outside and you can take in everything from your senses, you can let your mind wander, you can totally do whatever and there's just absolutely no expectation of what to do at all. I really prefer that for relaxation and for like my own kind of enjoyment.

She explains what she finds so peaceful about nature:

Yeah you can take in as much as you want. It's [nature] not over stimulating. So I really like just the quiet lack of demand that comes with those outdoor pursuits. I find it so relaxing.

Some participants most enjoyed the minimalism of nature excursions. K. L. sees the natural world as uncomplicated, a place where one can live on the bare essentials in a state of simplicity. She says:

It's [kayaking] very paired down because once I'm on the river, everything I need is like contained in my boat and it's all rolled up in dry bags or whatever. And you have your equipment and your dadada and it's all paired down, simple you know and like I don't have my phone with me or whatever.... but you know, I don't have the outside world. It's just like much more simple and then, like, you go from point A to point B and you eat and you sleep and you take care of each other.

Kaplan (1995) and Hartig and colleagues (1991) note that the sense of being in a whole other world is a restorative element of natural settings. The natural environment is healing, as it is not only completely separate from, but also in contrast to, every day urban life. Numerous participants reveled in the complete separate space that nature offered them. H. C. explains the refreshing differences between nature and her daily life:

It [Nature] does its own thing and it turns out so well, the less we meddle the better it is. I just think it's fantastic... the complete opposite to the rest of my life. I have to be so dedicated [in daily life] or things will fall apart like my garden, professional practice, or whatever.

Many participants reported that they appreciated both the beauty and simple state of being of animals. The participants noticed that animals - both wild and domesticated - live simple lives that serve as a stark contrast to their complex and multifaceted work lives. B. A. finds that she can disconnect from her "complicated" life by spending time with her animal companions:

There's something that animals, I find for me, that really give back to me too. Like spending time with them and you know life is just so simple for them, really straightforward. Give me something to eat, keep me warm and dry and I'll be happy...It just looks so easy. Some of that rubs off when you spend time with them.

Zestful play. Several participants noted that in nature they could, in some ways, return to the simplicity and joy of their childhood, where they can play and frolic in nature with no other motive beyond enjoyment and curious exploration. As the German philosopher, Friedrich Nietzsche (1878/1986), eloquently articulated: "We think that play

and fairy tales belong to childhood: how shortsighted that is! As though we would want at any time of life to live without play and fairytales!” (p. 270). He noted that an inner child resides in everyone, and that the wise pay attention to the needs of the child within them. Many spoke of being able to recreate a carefree innocence and a child like playfulness in nature similar to their experiences while growing up.

In nature, H. C. is reminded of the ways she spontaneously experiences nature as a child. As an adult, she engages in nature in the same childlike manner:

Like, it feels like it kind of returns me a little bit to the things I enjoyed as a child.

Like I catch myself doing things that my husband doesn't do because he has sort of gotten into the outdoors older as an older adult rather than as a young child. I really like to touch things, like, I like to feel like what does that bark feel like?

G. T. spoke of being so present in the moment, so enthralled by the beauties of the natural environment, so intent on filling her senses that she loses track of time:

I find that when I completely let go, then time slows down. Remember when you're

a kid and you just didn't pay attention to time? And then there is almost this... (longer pause) like you feel more in between the space between time. It's just... it was more playful you just didn't think about time. It's all play and that's what it feels like. Noticing different plants, picking different berries in different seasons whether it's cranberries, or from different areas. Like I'll just notice rocks and different shapes in the rocks and the different trees, noticing how they've changed or the path and how it's changed or overgrown. I just feels like a sense of playfulness, then I can relate to feeling that when I was a kid.

Numerous participants conveyed that nature activities evoke in them a child like curiosity about the beauties of the natural world and a desire to explore. H. C honours her inner child by adventuring in the wild:

Whenever we hike and stuff I'm like...look at how big this tree is! Look at how smooth the bark is! And we're such tree-huggers, haha, because we just love them.

I think they are just such amazing plants, and I'm so curious about them.

R. R. adds that she enjoys being outdoors because she can wander aimlessly on her own volition, free from any authoritarian figure: "I don't want someone to tell me what to do, I want to just meander off and do my own thing...I can stop when I want to, I can start when I want to, I can keep going."

In addition to reveling in the lack of stimulation of nature and indulging their inner child, the participants were able to experience mindfulness and awareness in the wild.

Mindful appreciation of nature. A prominent theme in the interviews was that nature spaces were particularly conducive to a state of mindfulness. The interviews are strewn with terms that speak to the notion that nature experiences facilitate mindfulness: being grounded, centered, at peace, a slowing down of thought, in the moment, fading thoughts, brain emptying, and presence. Every participant noted that in nature, they were able to progressively slow down their thoughts, and become present in their here-and-now experience as described by Kabat-Zinn (2003). Many attribute the healing and rejuvenating aspects of nature to this state of mindfulness. The participants were particularly attuned to their senses and were aware of the natural beauty of the outside world.

Restorative healing. The participants described the profound restorative and healing properties of mindfulness in nature. G. T. is able to overcome strong emotions by being present in nature: “Oh yeah, totally, I walked on that land and I tried to let go of what was going on in my head and just be connected with what was around me – that was a lifesaver for me.”

Others experienced nature activities as a different form of meditation. B. A. believes that scuba diving in nature is effectively therapeutic as it is highly conducive to a state of meditation:

For the most part it's [scuba diving] silent and you can hear your breathing, so each dive lasts about an hour. So for an hour you are floating in the water and looking at all these amazingly cool, unbelievable things and you're listening to your breathing and it's the... I do meditate but it's the closest to meditating that I've ever found and it's just so amazing because it's under the water. So these are the sorts of things that are really therapeutic for me – so like being out in the wilderness.

Several participants experienced a recharging and re-energizing after time spent being mindful in nature. M. K. lives on a farm, and makes a point to visit her animals after working with clients in order to “reset” her energy:

I notice that when I come home from work, I go outside and then that's kind of how I rejuvenate or how I ground. It's a necessary part of my day... I don't think I actually think about anything much when I'm just sitting in nature. It's just nice to be, um, yeah there's something nurturing – I like just sitting on the ground, laying on the ground and feeling at peace.

B. A. is a counsellor who often feels energetically drained after counselling, she refuels by disconnecting from her mind by taking her pet on a walk:

I have a dog, so I'm out walking my dog or you know trying to go hiking. Those are the kind of things that um that really help me zone out, get out of my head, get out of that stuff that is really taking things away and it tends to give energy back to me, I find.

The participants' ability to feel restored through mindfulness began with an attitude of receptiveness to the natural environment.

Receptive openness. Several participants spoke of their ability to perceive and enjoy nature in places where others could not. Due to her receptivity, B. A. says that she can even tune into the nature occurring in the city streets:

To me, I walk down the street and I'm hearing all kinds of bird songs. That's one of the things I notice about when Spring comes is that all of a sudden, it goes from being quiet to this absolute cacophony of bird song. And I sometimes walk down the street thinking to myself: hey no one else is noticing this. Like everybody else is kinda just, you know, rushing to their next meeting and nobody's hearing that there's a – you know whatever it might be – sort of squawking in the background.

Although little moments of nature are occurring all the time, B. A.'s awareness to these moments grew as she aged:

I find that it happens more, the older that I get, I think because I'm open to it. In a way that, I don't think, when I was younger and I had younger kids and lot's of my time and energy was taken up by that kind of stuff. And I think I was just too caught up in all of that to notice. And, uh, I think it's happening all the time those

things but it's just do you notice them? Do you take the time to stop and notice them actually happening? It's kind of like, do you hear the bird song? Like I hear the bird song everywhere I go, but I don't think most people do.

Some participants use their sense of intuition to guide them into a state of "nature awareness," for instance, when M. K. tuned into her intuition she was able to experience a special moment with her steer:

Yeah, it [moments of healing in nature] all happened through intuition and energy and through being in the present moment. Because like I had things to do that day I could have missed that moment at the same time too. Part of it is being open and aware.

A slowing down of the mind. A large component of mindfulness is that there is a slowing down or absence of thoughts. Numerous participants expressed their ability to slow down in nature. G. T. elaborates how she becomes mindful and aware in wilderness:

I'm just very mindful and present in that moment of noticing everything that's around me, so my mind is just right here instead of being lost back there in the worries of whatever. We have to think about the past and the future at the same time. So I think that[']s parts of it...it just brings me back to the present moment and noticing you know with the leaves when they're fluttering. And then my attention moves on, and I'm with I'm noticing this rock that's jutting out of the creek and the way I step on it in a certain place, it pushes into the ball of my foot and liking that feeling and having that happen when I step on to other rocks and being super present that's what it is. I'll be back there for an hour and half to two

hours and I'll come out this different person. Like ah! Okay, now I can go back to my life.

M. K. finds meditation through the sounds of her animals: "It depends where the herd is at the time, because I like to be in the middle or close too, because even the sound of them grazing is meditative. Meditative sound." She highlights the importance of simply being:

I think when you get to the point where nothing is going on, then that's a good place to be. I think sometimes especially for work you can take that home with you, you can take those running thoughts and wondering about different clients home with you. But if you are able to go home and just be, then that's helpful.

Y. K. finds it difficult to analyze the positive effects of being in nature, because it is not a time when she uses her cognitive brain. She states that thinking about the healing or spiritual properties in nature can ruin it, so it is essential to simply not think:

You know I think that's what it is. You're just feeling, stops the thoughts for a moment. Your brain is on hold and you're in touch with your, um, but it's not just...it's the impact. It almost feels like instead of bad stuff rushing in, it's good stuff, I think that's where the moment comes from. It's this moment of beauty, this moment of serenity, this moment of...see as soon as I start to label it (it goes). If I see it can feel it but as soon as I start to describe it goes.... It's almost like if you examine it too much, if I'm in that moment and I go "ohh this is a spiritual moment in nature" then... pouf! It's gone, you know what I mean? It's gone.

Numerous participants specified that it was through rhythmic, repetitive motions that they could meditate. Csikszentmihalkyi (1990) would classify these experiences as

moments of flow, a mental state in which an individual is so completely immersed in an activity that one cannot focus on one's thoughts or emotions. Individuals find genuine satisfaction during moments of flow, which are defined as: "[T]he best moments in our lives..." (Csikszentmihalkyi, 1990, p. 3). S. K. experiences a meditative flow when she kayaks: "You just kind of get in the groove and you just paddle and it's almost hypnotizing because it's just: stroke...stroke...stroke...stroke." She adds that when she is exercising in nature, her mind progressively slows down: "Moving really fast, thinking really fast, and then slowly getting calmer and not needing to talk as much. Not needing to think as much, my brain emptying out as we got there."

Coming to our senses. The majority of participants discussed the sensual experience of wilderness activities in great detail. Perls (1969), a Gestalt therapist, advocated that emotional healing requires one to, "Release your mind, get in touch with your senses" (p. 69). He highlighted the healing aspects of being aware of one's body. When asked to describe an energizing wilderness trip, the participants described their environments through their sense of smell, touch, taste, sight, and sound. They spoke of hearing birds, silence, horses grazing, and the sound of one's own breath. The participants described feeling the sun, the breeze, and the dirt on their hands. The soothing and therapeutic effect of connecting to one's senses experienced by the participants aligns with the extant literature. By connecting to their senses, the participants were able to tune in with their body and reconnect with themselves and their environment. Many found sensual outdoor experience meditative and profoundly healing. Z. L. describes her nature experience through her sense of touch and smell:

When I go to the river, wow, and I sit there and feel it... I'm a tactile kind of person. When I go down and feel the river, and I feel the coldness of the water, or just the cleanness of the water, or I smell the you know a herb or a sage, or something in the coulees and it's just like, "Ahh ya". This is what it's all about... All the senses are alive and it's just alert and it's just carrying on. Carrying itself through.

Some participants tuned into their senses through urban nature activities like gardening.

B. A. describes her awareness of her senses in her garden:

There's something about digging in the earth and feeling the dirt under my finger nails and the smells. Like the smell of the dirt and the smell of the plants and, you know, if you break a leaf its got a smell and, you know, and plus the bird song...and probably all of it together. It probably does keep me very much in the moment and there's something restful about that.

She hypothesizes that it is through indulging her senses that she is able to feel restored from the exhaustion created by VT:

I don't know what happens that just puts the energy back in [to my body]. I think it's just doing, the actual like the physical doing of something and then, you know, I think there is that engagement of the senses, you know? Somehow for me when I'm outside I hear things, and I smell things, and I see things, and I feel things, and when I look at things I do lot's of times have to feel them.

R. R. describes a surreal moment while visiting the ocean in Prince Edward Island when her sense of sight and sound were overloaded in the best of ways:

All of sudden I could hear the roaring. And I looked out and we crossed over so I could see the ocean over the dune, and it was like the most incredible thing I've ever seen. I remember standing there like all the dunes everything I just sank, the heart centre open, and I got all teary. I was like, oh my gosh, this is like the moment of my life. It was like the best moment of my life seeing the ocean and hearing the thunder. It was like a really active ocean day, waves are crashing, and the way the air smelled. It was like sensory overload in the best possible way.

Numerous participants emphasized the therapeutic effects of the beauty they were able to witness through their sense of sight.

Awe struck by the beauty of nature. Many participants described the joy of appreciating nature's beauties as a key component of their healing outdoor experiences. G. T. elucidated that the beauty in nature is a large contrast to the functionality of cities and every day life. She explained that this beauty is necessary for her soul. She echoed Moore's (1998) thoughts about beauty and purposelessness during our interview:

We live in a world that gives scant attention to beauty. We're willing to build cities that function but have little beauty to make homes that are convenient and affordable but not necessarily beautiful. We believe that beauty is expendable, but to the soul beauty is more important than almost anything else (p. 15).

In contrast to her functional daily life, H. C. compares nature to a work of art that can be enjoyed and appreciated at her leisure:

I'm much more conscientious of outdoors being more like a canvass, whereas indoors it seems very functional. I mean things outside have a function too but it's just so much colour, and it's just natural colour and it wasn't put there for any

reason. And if you find it pleasing great, and if you don't then – wow – it's still going to be there. I just like that, I like that things just grow where they grow and it's interesting to look at the vegetation, and just look at the landscape and just kind of, I don't know, take it in and usually appreciate it, I think.

Recently R. R. has begun seeking beauty in all the seasons of the year to help her manage VT symptoms. She articulates:

I usually don't enjoy winter but trying to find the beauty in the branches being bare, you know? And I started becoming, you know, really fascinated like I like photography and stuff, so I started becoming really fascinated with the way the branches look bare against the sky. Well that's the beauty thing that I can find in winter.

She expressed that her newfound practice of beauty appreciation has made for “quite a fulfilling year.”

Z. L. excitedly recounts being struck by the physical beauty of the colours present in nature:

I love to see the different colours. Yesterday I was in the mountains and I was like look at the green colours! Like they are green, and there's different colour browns, and there's different colour oranges, and then I took pictures of the meadow. And how, again, nature just shows up in different colours...oh and then we see the big horned sheep walking down the street. And then there's elk doing their thing. It was just amazing, right?

These anecdotes are indications that the participants were able to heal in nature through mindfulness and awareness of their surroundings. The participants presence was even apparent over the course of the interview itself.

Immediacy: Even now. The interviews were held in various locations: University of Lethbridge library, University of Calgary library, Children’s Hospital Child Abuse Centre, a participant’s office or a home. I noticed that the participants were very aware and mindful of their environment during our conversation. Most were present and grounded, practicing: “sustained attention and awareness of the present moment in daily life” (Morgan et al., 2014, p. 288). The participant’s eyes would often drift out to a nearby window, focusing on the green spaces outside. They were conscious and aware of the natural environment, and would often comment on the beauty of the area.

In the library, M. K. explained why the interview environment was appealing: “I just like the view, it’s a nice view here...And really you’re not seeing a lot of people either. Like for being in a library, you’re pretty much looks like you’re in nature. Mhm.” Likewise, Z. L. describes her moment-to-moment awareness of the action what was taking place outside her office window:

Because the one thing that I love more than life itself is being in nature, is being like...even right now the birds are flying there and I’m like, “Oh look at the birds!” And even as we’ve been talking, there have been many birds coming over, umm, and the little birdies lay in the vines and they chirp.

G. T. shows that she uses her awareness of nature in her surroundings to ground herself in the moment. The green space outside allows her a moment of relief:

Or so I'll like...with talking with you right now, I'll take the time to look out the window and to think and center myself. I'll do that with my clients too, and I'll take a moment and glance out the window and that will give me a moment of phew as well.

Along with a state of mindfulness, the participants also experienced a diversity of perspective shifts in the wilderness.

Discovering fresh perspectives. Participants experienced numerous parallels between their day-to-day lives and the natural world. By witnessing these parallels, they were able to experience positive cognitive shifts during their nature excursions. As a result of these cognitive shifts, participants were able to feel more hopeful, empowered, non-judgmental, and clear-minded than prior to their nature experience. They were also able to feel like the world is a safe and uncomplicated world.

Hope in destruction and creation. Z. L. was prescribed three months off work from her general practitioner to recover from her VT. During her recovery she felt depressed and, at times, suicidal. At some point during her journey to recovery, she experienced a shift in perspective regarding the “negative” events in her life such as VT. By looking to nature, she was not only able to reframe her VT experience as a natural and positive process, but she was able to feel hopeful for recovery and healing. She came to the realization that with suffering comes enormous growth and transformation. In this way, her VT experience became meaningful:

I think I read it in a Hindi book somewhere along the way, oh it's about Kali: the god of...Kali, goddess of destruction. Well, it's just like nature with destruction, comes creation. With the three months off I kept that in my mind, with destruction

comes creation: with the trees falling, with the leaves falling of the trees came the creation of new leaves coming next spring. With fire – fire’s destruction – forest fires, destruction comes creation. And it was like how I was to look at this [VT] as transformational. There was destruction and then creation and I can’t create that. And I’m not creating that, existence is creating that. It seems like full of hope. Still that hope like this is bad now, but just you wait this will create fertile soil for growth to happen. Yeah, for me I came to a place of hopelessness and not seeing that as bad. Seeing the hopelessness as creation as opposed to destruction. The hopelessness was actually the soil that actually was able to plant the seed of creation. There was something so...in my really being vulnerable to how much fear and ugliness I felt and hopelessness I felt. It was like it freed me up to go oh! There really is no problem here Z. L....Z. L. there’s no problem. You got constricted into thinking there was a problem.

Z. L. explains that she sees creation/destruction occurring when she sees new growth and life in a forested area that was once destroyed by an avalanche. Later she explains: “So now I sit there and go okay, that was just part of the path, right? The VT was just part of the path.” For Z. L., she was simply “in the path of the avalanche” when she experienced VT, but now she feels there is the possibility of new growth and expansion after she reframed her VT experience.

“There’s good places, there’s peaceful places.” Many trauma workers view the world in a cynical way, often they can feel like it is a dangerous place due to the horrific narratives they are told throughout their careers. As indicated in the literature, working with trauma can transform one’s frame of reference in the form of a shift in worldview

(Pearlman & Saakvitne, 1995). Participants were able to reverse the effects of VT through the sense of profound harmony and safety that they experienced in nature.

S. K. specifically works with children of abuse, and explains how her negative worldview shifted in nature:

Sometimes I'm angry at the parents for doing what they've done. Or really, this yucky bleak worldview like the world is a nasty unsafe place or there are no good families. Everybody's a mess, those thoughts. [In nature] all of those thoughts fade away and I'm like, okay, no! There's good places, there's good places, there's peaceful places, and I don't know if I truly believe that there are good families but there may be. I can say that there may be good families.

For other participants, spending time in nature is comforting as it offers a constant and stable environment. Despite the stories H. C. has heard from her clients, she likes to know that some aspects of the world haven't changed:

It [a nature experience] does sort of feel like when you see like an old friend again, that kind of familiarity again. Like, oh yes, this is still here and it's still the same and the world hasn't become this crazy different place... I don't know, it does feel like a little bit chaotic sometimes that surrounded by *this* [emphasis added] many people with all these struggles.

Nature reminds H. C. that the world: "Still has the same potential, it still like could be just as safe... I don't know, it could be just as simple." Additionally, H. C. is prompted to stay more positive about the state of the world when she sees beautiful landscapes.

Basking in nature's non-judgment. The participants noted that they feel no judgments in nature, that is, natural events (i.e.: weather, animals, and plant behaviours)

are not categorized as “good” or “bad.” When the participants spend time in nature, they are reminded to be less critical of themselves, of their own experiences, and of others.

Z. L.’s VT journey was symbolized by a big tree outside her house. The tree reminded her not to judge her suffering and her healing process:

I remember throughout my three months of being off [from work], the tree began to lose its leaves. It turned colour and lost its leaves, and that was my time marker as time was going on that. And I used the tree as a symbolism as me needing to lose. Like I looked at the tree as a symbol for me needing to lose what was going on so. To shed. Yeah the falling of the leaves was a symbolism of, I just had to let this stuff fall, I had to be with this stuff, all this feeling of loss and overwhelm and anxiety and panic and vulnerability and isolating, at times suicidal. That I just needed to um I remember, and thinking just like the tree needing to lose its leaves every year and turn colour – I just needed to feel what I was feeling with no judgment. The tree doesn’t have judgment about losing its leaves, right? It doesn’t think it’s ugly because it’s losing its leaves. It’s losing its leaves because it’s nature and it’s nature and it’s nature taking care of itself... so I started to come around to that.

The non-judgment H. C. notices in nature reminds her to be gentler and less judgmental of her contributions to society. Although she is driven to make a positive change in the world, she is reminded through nature that at times it is adequate to simply do no harm:

I do feel passionate about nature in a sort of related way in that I don’t think there’s really greed in nature you know? I don’t think there’s altruism either, but

it does sort of just function independently and there isn't sort of really like positive or negative – you know what I mean? There isn't any sort of pursuit, like no wolf out there who's like, "I'm going to have as many rabbits as I can." Like they take what they need and they just kind of, um I don't know, I just find it helps balance me out. My philosophy of wanting to have a positive impact, I think it's a very rational check of sometimes the best that I can do is taking what I need and kind of going through life without having given you trouble haha. Because I'm inclined to be a little too much self-sacrificing and I need that balance. So I find nature very reassuring in that way, just to say you know over my life span, I hope that I have a positive impact but day to day I hope that I'm just, you know, at the very least not taking more than I need in the grand scheme, right? Because I think that I'd be prone to burn out if I thought about it any way.

In addition, to experiencing less self-judgment, the participants also decreased their judgment of others. H. C. feels that judgment and criticism do not exist in the wild, and is more compassionate towards other people after spending time in nature:

I think [nature] reminds me not to like be too judgmental of others, because everyone's just I think trying to be their best person. And some people have a very different idea of what a good person is, from what my idea is...right? It does, it really does make me feel less critical and judgmental because things just are [in nature] and they aren't good or bad. And you should appreciate them for what they are or you can choose not do and, it's that is sort of...I do get like critical and irritable. I think I'm prone to being a critical person to be honest.

“Everything works out.” Many participants experienced shifts in perspective relating to their life and career worries. They found it easier to let go of their concerns about their clients when embracing wilderness. The participants were able to see their problems in a truthful and detached manner by gaining insight into the true magnitude and significance of the trials in their life.

B. A. disconnects from her life worries through nature by feeling the insignificance of her existence and the triviality of her problems. During these times, B. A. can put less weight into the meaning of her problems when they are contrasted to the vast existence of the universe:

We have a place in (name of the town) – we were just out there on the weekend – and there’s not as much light pollution there and you can really see the stars, right? And just looking at the stars and thinking wow I’m really insignificant. And I don’t know it just sort of helps you put some of these things into perspective.

Other participants are reminded of their past successes in nature. While appreciating the beach on her yearly vacation to the East Coast, R. R. is reminded that she survived in the past and so, logically, she will be able to survive future challenges. She is able to meet her past self in that same space and realize that all was - and will always be - well. She recounts this fascinating process:

Like in the Maritimes we’ll be walking along the beach and I’ll remember: yeah we were here like a year ago, you know? I was here worried about this thing and it’s okay, it’s like I’m meeting my past self. Everything’s okay! Haha yeah, you know, everything worked out, you know, between my past and present.

The participants are reminded that their life events will work out when they notice natural processes in the wild unfolding naturally and perfectly (i.e., growth, death, weather). This parallel allows Z. L. to feel peace:

That's one thing now - nature is a constant reminder of that...just relax [stated her name], it's all going to unfold. And it's going to take care of itself and when I get caught up in thinking that I'm going to take care of it or I get all constricted...it's like no! It's just a great reminder.

“Our Earth is resilient, people are resilient.” The participants also noted that they were inspired by the resiliency present in the natural world. By looking to nature, they were reminded of their clients, and of their own, inner strength. In this way, nature experiences serve as a source of empowerment and reassurance for the participants.

As Z. L. witnesses nature healing and taking care of itself, she can believe that her clients, similarly, hold an innate power to heal themselves. She trusts that her clients can overcome their challenges and repair their lives by noticing how the natural world reacts to change:

So much working with people with trauma, you know, really believing that people can heal from it. And that if you look at nature, nature very much knows how to take care of itself, you know? The plant doesn't think I've got to grow towards the sun, it just goes towards the sun. Right? The bug doesn't go, oh where are the plants? I need food – it goes towards it. Horses don't think, oh that's scary I'm going to move away from that, right? Same with the river. The river knows where it's going to flow. And trauma is the same way, it's just that people get stuck and

once you unstuck it, it knows how to flow and it knows how to move itself through a person's body so that it can take care of itself.

H. C. remembers that her clients, just like natural environments, are adaptive. She is better able to deal with the traumatic stories she hears as a counsellor, knowing and trusting that people can overcome their life trials:

There's just like a natural order to things [in nature]. Like things just, things grow in the way that they need to grow and sometimes, you know, some people experiences are just awful. Like there's no way you can say, oh this person is going to have a better life because their parents were just like abusive for their first 16 years of their life. Like no that's probably not going to happen. *But* [emphasis added] some people do come out better from adversity and they do, you know, so I always think of it more as an opportunity for someone's life to change for the better...But I do just feel a little bit more optimistic and sort of a natural order of things after being outside and seeing how nature is so resilient. And seeing how nature, kind of just like, finds a way and you know embraces kinds of adaptation and uniqueness.

Participants also found peace in thinking about the longevity of our planet. R. R.:

The earth has been here so long that and there's so much that has happened and yet it keeps going, and it will continue. The changes will continue happening and my worries will not last, they will just change. I won't last and I'm okay with that, haha. Like, I don't feel the need to see how everything's going to pan out. Like, in the entire world like I'm okay having a short period of time on this earth, whatever time it's going to be and to move on. It kind of gives me comfort, like, it

won't matter in a 100 years and it's not like this really super negative...or it actually gives me peace to think of that. That it's okay. That ocean will continue (hopefully, like again the fear of being like ahh I don't want the ocean to be destroyed) but, um, that will continue and it's all going to be okay.

Horses as stress thermometers. Several participants experienced beneficial shifts in perspective and awareness due their horses' receptiveness of their owner's emotional energy. The participants recounted that their horses were able to mirror their emotional energy levels. For instance, M. K. described that if she has a "lot going" on emotionally after work, her horse doesn't choose to interact with her. When her horse shies away from her, she understands that she needs to check in with herself and fulfill a personal need. M. K. describes the manner in which her horse can shift her perspective:

Horses are interesting. They are like a mirror, so sometimes I don't know how I'm doing and I go out and hang out with them, and then I know how I am doing. If you got a lot of energy radiating off you, they let you know because they can feel the energy. So it's like okay maybe I need to do something, maybe I need to ground, maybe I need to sit here. It's nice, they are a gauge for that.

M. K. even uses the term "energy thermometer" to indicate her horse's ability to perceive and express her energy level. Likewise, Z. L. has noticed that her horse immediately picks up on her emotional energy. She attempts to explain this phenomenon:

And I don't know how else to explain it. There... because horses for me really, um, mirror how you're feeling. You can't lie to a horse, right? A horse will always know how you're feeling because they are prey animals, right? They pick up, they are so sensitive, they pick up on so much. I could be like at my car and he

[her horse] could be 10 feet away and he'll already know what I'm feeling, and he won't do stuff with me.

Both M. K. and Z. L. have found it useful to become more aware of their emotional energy levels as this allows them to work towards self-regulation. Harrison and Westwood (2009) found that mindfulness is particularly beneficial for counsellors as it acts as an internal stress thermometer, that is, mindful awareness helps counsellors to realize their limitations and to partake in activities that may restore balance. Similarly to mindfulness, the connection to horses served as a similar emotional thermometer for the participants. Spending time in nature with their horses sensitized them to their own intrinsic needs and allowed them to engage in forms of self-regulation and self-care.

In addition to the therapeutic shifts in perspective in the wild, many participants experienced healing through surrender and acceptance of their current situations.

Transformational healing through surrender and allowing. When the participants spoke of the healing that occurs in nature, they highlighted that the process occurred spontaneously. Negative emotions, or cognitions seemed to be released automatically. They did not have to take any deliberate action or effort other than being present in nature to feel better. Certain participants took one step further and spoke of sense of utter surrender of thought, emotion, control when they were in nature.

An automatic, innate process. According to the participants, healing in nature is an automatic, even unconscious, process that does not need to be taught or explained. M. K. explains how the healing she experiences in nature simply evolves:

I think sometimes you don't know what you're looking for. Sometimes it just happens and you're just like, "ohhh yeah". Um yeah, so I think the most impactful

situations I've had in nature or [with] the horses, I don't know if I wasn't looking for something. I think it just evolves, and then kinda being in the present moment allows you to experience a new perspective...I know that it's not a conscious thing, I just know that I feel better when I'm out there.

Likewise, D. A. highlights the automatic healing that occurs in nature; she explains how it is unnecessary to deliberately and consciously create a special moment in nature moment to heal. For D. A., it is sufficient to simply be physically near mountains to feel their healing power:

Um you know it's now it's completely subconscious, right? Now it's just I know it's happening and I just let it go. I know when I'm out there I'm pounding out whatever worry is in my head and I know that at the same time – just getting close to them [mountains] as I'm getting out there, I'm feeling good. Just driving out towards them, heading West, I just feel good. It's just a feeling that it's automatically, and when I'm physically in them [the mountains]. I'm always like geez why didn't I stop and take a moment to go: "Ahh Wow!" And it's because it's automatic, it's already happening. I don't need to stop and take that, that moment. Because I make such an effort to get into the mountains on a regular basis, especially in the summer and the winter, it [refuel] happens all the time. It happens organically, I'm there and it just happens."

R. R. noticed that when she was younger she needed to be more intentional about going out to nature to refuel. It is interesting to note that as she got older, the process has become more innate: "Yeah, yeah and so now things have changed where I'm not

thinking maybe as intensely or as consciously but... Yeah I think it's just so much part of me now that it, haha, can't help but just happen unconsciously [healing in nature]."

Tapping into health through non-efforting. Not only can the therapeutic aspects of nature work at an unconscious level in participants, but also, the healing is spontaneous and paradoxically "requires" non-efforting.

Y. K. recounts a time when she was spontaneously struck by a compelling image of a massive moon descending in the distance. At that moment, she felt her VT symptoms naturally "evaporating like a watermark" in nature. Without taking any action, she felt her stress dissolving:

I looked out into the distance and through the pine trees I saw this huge moon going down and it was a very compelling image. And it was almost like the steam coming out of me, all the stress just lifted and it wasn't that I was doing anything purposeful but it was out in nature. I'm sure that if I looked out at a high rise at a similar scene, haha, it would not have had the same impact.

She believes that if she were to actively think about needing to feel better in nature, that type of forced mentality may have stopped the healing process. She remarks:

I don't say I need to get rid of that particular thing or that particular thing. I never think, I never think about it [releasing work stress] when I'm out there. I'll think, oh it's going! Hahaha, but I don't think about what it is. Because if I think too much about what it would stop - it would stop the process from happening.

Z. L. explains how she does not have to make an effort, in fact, it is in forcing the healing when the healing is interrupted:

It doesn't have to be an effort, it's not an efforting in doing, like, oh I gotta make sure I go and do this...it's just that when I go out there, it gives me this space (in a sense of openness). And it reminds myself that's it's all just happening and I don't have to go into the effort of it happening. It's when I go into the effort of going, oh I need to journal. Effort into...oh, I need to go for my walk now...effort into, oh I want to go and smell the roses is when I go all...I'm still confined and trapped in that unhealthy space.

The simplicity and purity of this process is interwoven through all the interviews.

Surrendering through letting go and acceptance. When the participants were asked to describe the therapeutic elements of their nature excursions, many responded that they were able to “let go” of their thoughts and their desire to be in control of a situation. As Carl Rogers (1961) writes: “The curious paradox is that when I accept myself as I am, then I change” (1961, p. 17). Rogers illustrates that change (e.g., in VT symptoms, in emotions, in various situations, etc.) can only occur through the vehicle of acceptance. Many participants would speak of the pervasive and intrusive thoughts of their clients and found great relief in being able to accept one's limitations and efforts, as well as accepting the clients' stories and progress.

D. A. details how she was able to accept and let go of an emotionally charged session while grueling up a mountain. After letting it go, she was able to change her perspective about a traumatized client in a recent session:

As I was going up this mountain...I was just like, I let it out. As I was physically fighting my way up this mountain, I just talked about this experience with this woman and all the nuisances that happened and I could just *let it out* [emphasis

added] as I was physically beating myself up to get up this mountain, right? It, just by the time I got to the top of the slope, which was only a couple hundred meters, by the time I got to the top, it was *gone* [emphasis added]. It was *completely* [emphasis added] out of my consciousness and I felt great and I knew I had done a good job. I knew she was okay, and um I didn't have to think about it, think about it anymore.

K. L. describes being able to accept her life problems, current situation, and the role she plays in them. In nature, her resistance dissolves:

Things are how they are and you have a role in things. I don't really know, it gets very all like, everything just feels okay. It's like a very vague way to describe it, but kind of like surrendering to whatever is happening in life and, um, and feeling okay with that.

Numerous participants were able to surrender their perceived control of their lives. M. M. explains that mountaineering allows her to surrender this need: "Freedom works for me, freedom of thoughts.... No control no, just let 'er go."

For some, accepting the symptoms of VT in nature marked the beginning of their healing journey. Z. L. was reminded by nature to surrender the perceived control she had in her life:

I just um I really just surrendered to the fact that it [VT] was going to play itself out anyways. I didn't have any control over this. And again it comes back to what I was saying about nature, nature doesn't control itself right? It doesn't - I can't control how it's going to all work out. I can say these are some of my choices. I'm going to make a choice, but I can't control how my choices are going to work

itself out. I surrendered. I surrendered to that...Like I looked at the tree as a symbol for me needing to lose what was going on so...to shed. Yeah the falling of the leaves was a symbolism of, I just had to let this stuff fall.

This concludes the second phase, The Wild Plunge, of the participants' journey where they were able to find healing in nature by experiencing mindfulness, acceptance, and perspective shifts in an undemanding natural environment. In particular, the participants noted that slowing their mind, tuning into their senses, and surrendering control offered them a way to disconnect from the trauma they witnessed at work. Numerous participants continued their journey to the following phase, which is entitled The Profound Shift.

The Profound Shift

The last phase presents a deeper level of healing in nature through three themes. First, as portrayed in the theme From Alienation to Connection, the participants counter their isolation by experiencing a profound reconnection to self, others, and existence in nature. Subsequently, the theme Wilderness as Prayer: Gratitude and Awe demonstrates how participants experienced true prayer in nature that was characterized by moments of thanksgiving and awe. The final theme, Wilderness as Home and Belonging, concludes with a focus on the participants' conceptualization of wilderness as not only a restorative environment, but also as a home.

From alienation to connection. A common symptom of VT is a sense of isolation and alienation (Pearlman & Saakvitne, 1995). Counsellors commonly experience aloneness due to the confidentiality and boundaries that must ethically be upheld in the profession (Wheeler & Hewitt, 2004). The participants often spoke of finding solace in

the reconnection that they found in nature. Participants aligned to what was personally meaningful to them: A re-connection to oneself, friends, partners, family, animals, or/and to God or a larger existence.

Connection to self. The participants described wilderness as a peaceful place where they are not bombarded with external stimuli; this calm space allows them to reconnect to themselves. G. T. verbalizes this process: “I’m centering myself, I’m getting connected again. I might be escaping this [chaos of the city]...but I’m not escaping myself, I’m getting connected with it, myself.” M. M. explains that in nature, she can discover and reconnect with the person she wants to become, or as she describes it, her preferred self:

All the times surrounded by all this beautiful tranquility, nothing really getting in your...everything to help you be who your preferred self is... You can figure out, you can be that in the mountains and you can figure out how you want to be in regular life.

Last year, R. R. felt disconnected from her true self yet she was able to reverse the effects of VT and connect with herself by the ocean. Her oceanic experience was so therapeutic that she is willing to return to her special place every year:

I’m just going to have to go again and I’m going to have to save my pennies, and scrimp, and save, but I need to go back [to the east coast] because of the way... It’s far away enough where it puts a physical distance, and it allowed me to really, *really* [emphasis added] disconnect from what’s going on physically here. And then be somewhere completely different and just be in this completely different landscape - but the things that happened there *internally* [emphasis added]...I mean it’s not like we did anything super like big deal I mean it was pretty quiet.

But it reconnected me with who I am, I guess. I just got lost with everything that happened last year [at work]. Sighhh I hope I've maintained that a little better this year, but still I mean it's taking its toll some of the things that have happened so you can't help that, you know? So I think this reconnection is going to be really important.

For other participants, nature experiences, allowed them to reconnect with the meaningful and beloved people and creatures in their lives.

Connection to loved ones through bonding in nature. As previously mentioned, counsellors with VT commonly withdraw from loved ones (Collins & Long, 2003). The participants noted that nature excursions allowed a reconnection to meaningful people in their lives.

When Y. K. spends time at a cottage far away from civilization, she feels not only reconnected to herself, but to her husband, and to her family. She was able to shed the emotional weight from her counselling sessions by getting out of the city:

Well prior to this [trip] I had been really on edge, I've been stressed out and on edge and I just felt it go [in nature] so I had more patience. I was having more fun, even though I was doing some of the same activities, I was having more fun.

Again more connected with people in my family, and that kind of thing. And my husband even said "Oh! This vacation's been good for us. You're back to being more yourself." So it was, you know, other people were noticing it too. It was just lightness this more accessibility, but more access to me. Not as much garbage, in a way.

Other participants reconnect with dear friends on an intimate level during more extensive backcountry trips. K. L. explains the salience of social connections during these trips: “It’s a lot about friendship and relationship and togetherness, being in that together you know?” Additionally, backcountry trips offer a communal experience that cannot be replicated in the city environment. K. L. views the world as increasingly individualistic where it is challenging to feel truly connected to others. In part, she seeks out outdoor experiences, such as backcountry trips, to foster the interdependence and community she craves:

I think that when you are all together in a place that you have to rely on each other and not just your self, so in the wilderness, you know, I think it just ramps up that sense of community. It becomes really obvious, occasionally a kid might get pissy and want to storm off but it’s short lived for the most part. We need each other, you have that gear and this food and also we figure out where we are going together. There’s this dependence and I guess it sort of shoves away that like really individualist notion that is drilled in to us, right? Like and it’s very much like, you know, anytime you are travelling with a bigger group and even the communal aspect of eating and not...you can’t just eat as much food as you want, you are really forced to in all aspects. Like when you are figuring out sleeping arrangements, doing chores, and walking on the trail you can’t just go wherever. Everything you do is so group focused and you are forced to think about other people the whole time, which I think people can be resistant to because it’s not, not the norm always. So I think that dependence and that collectivity is probably important to that catalyzing of relationships.

Reconnecting to animal companions is powerful for numerous participants of this study. Several participants highlighted the necessity of the companionship of their pets and the therapeutic ability of animals to be present. After traumatic events occur at work, R. R. says that she finds it helpful to connect with her pets after work. R. R. recently had to put down her pet cat and is still mourning his loss. She expresses her apprehension in not having her feline friend around to help her de-stress after work:

I'm not sure how that's going to be for me – not having the cat at home. Because things have been kind of smooth, things have straightened out. It has been a good couple weeks at work, [since] losing him I haven't really had a bad situation at work and I've come home and he's not been there...so I'm not sure how it's going to be feel.

Several participants were able to tap into what Jung (1966) dubbed, the innate collective unconsciousness. That is, in nature participants were able to both view themselves as part of a greater humanity and to feel the interconnectedness of humans. R. R. feels comfort in connecting with the people who have enjoyed the same natural landscape at different points in time. She describes her experience: “If I'm outside by the coulees, or the ocean, or wherever – what I remind myself is that other people have gone there and have had the same feelings and thoughts. And I'm not alone. And the energy lingers.” She adds:

I love thinking, you know, when I'm walking in the coulees...They probably change and shift or whatever but it's like, like that maybe somebody was going through a difficult time – and inevitably someone was going through a difficult time – and they would look to it [coulees] for the same comfort too. So it comes

back to the interconnectedness, like looking at the mountains and knowing that someone else was looking at the mountains and would look there for comfort. Or someone walked in the ocean who also needed some comfort. Like it just makes me feel more connected to humans too.

Connection to the Bigger Picture: God, Universe, and Earth. In this study, spirituality is unrestrained from religion, and defined as a profound otherworldly feeling of compassion, unity, and connectedness with all of existence (Kumar, 2000). Ten of the eleven participants identified themselves as non-religious, but spiritual people. One participant self-identified as belonging to an organized religion.

During wilderness activities, the majority of counsellors found it healing to reconnect to their personal conceptualization of a God. Different terms were used to express a larger existence: a sense of interconnectedness to nature, God, a higher power, a greater organization of things, a common humanity, and a greater energy. Y. K. describes how connecting to nature is an antidote to the isolation that is often experienced by trauma counsellors:

It's kind of [a] connection to the larger world? Does that make sense? You have a place in the world, because I think sometimes this work can feel a little alienated. And I think it's like everything's in the right place in the right time. It's just a perfect moment. It's a peaceful moment [in nature]. Because when we don't feel connected, we don't feel at peace.

Many participants felt that they were a part of nature. R. R. explains that her connections to the natural world and animals are so deep that it hurts to witness violence against nature. She states:

I don't like hearing about forests being destroyed, I really feel it's almost a piece of me is being destroyed when I hear about that. And so that really affects me profoundly to see that. Like – and this sounds so gross – but road kill, then I feel this ugh pain in my heart.

The participants also spoke of feeling surrounded by living organisms that bear “witness” to their lives in nature. G. T. explains that she never feels alone while hiking:

When I'm in the space of the land and amongst the trees and, you know, I feel like all these things around me are...[pause] like I do feel like I'm amongst other things that in this strange way are bearing witness. They know, like the trees are beings out there with me.

G. T. explains that she doesn't feel at the top of the species pyramid, rather she feels equal, and thus connected, to all other organisms. She feels comfort in the presence of these beings:

I'm not at the top of the pyramid because I believe that, you know, it's shared, um, amongst all of the organisms and I'm part of that. So, um, yeah I feel part of something bigger. And, um, and so it feels like an energetic experience as well because of all the energies of the plants and the trees. I feel connected with that greater energy as well but I don't use that term in a...like in a new age-y kind of way it's just like yeah. It's nice calming energy, but it's a shared energy amongst all these organisms.

Some participants especially felt a sense of interconnectedness while witnessing vast natural spaces. R. L articulates this phenomenon:

You ask what's going on? There's a lot going on. That's like the bigness of it, that's it, a whole system like a whole ecosystem and everything is connected haha. Feels like very "Pochahantas-ey", you know, haha, like everything is connected and it's completely outside of my or anyone's control, really you know? There's a wildness, there's a vastness. There's, you know, the idea that it's so hard to cover every little area and corner it just sort of goes on. And that you can be, you can pop in and experience it and live in it, but it's there whether you're there or not. Avalanches happen, bears walk by, the mountains whatever erode and grow, it's just this really big production and you kind of be part of it and witness it.

M. M. reminisced that when her and husband used to mountaineer together, it felt otherworldly and like a supreme connection to existence: "I mean we were just in glory when we were out there together. We were in Heaven."

The participants explained that nature experiences are often the only way they can feel interconnected to the world. Since becoming a mother, Y. K. finds it challenging to connect with what she calls the "larger world" because she is unable to experience quiet moments in nature.

The following section will illustrate the experience of participants who felt a profound sense of gratitude and awe for life in natural spaces.

Wilderness as prayer: Gratitude and awe. The participants described moments of awe, bliss, complete rapture, inspiration, and even euphoria in nature. Several participants described specific moments in nature that evoked a profound sense of gratitude for their lives. Osho (Bhagwan Shree Rajneesh) (1974/2005) describes gratitude as the only true prayer: "When you become one, you feel a silent well-being. Moment to

moment you feel grateful to existence, a gratitude happens to you, and this gratitude I call prayer” (p. 17). Many felt grateful for both the opportunity to engage in their preferred wilderness activity and to experience the beauties of nature.

On a trip to Prince Edward Island, R. R. experienced profound moments of joy when seeing the East Coast Ocean for the first time:

And I, oh yeah, I... I, that was the happiest day of my life. And we spent the whole morning, there was nobody around, just walking up and down the beach and I would run in the water. It was like the purest joy! I mean I've had really joyful moments in my life, but it was something about that...that was pure joy and I think back at that every single day and I get teary, ohhhhhh that happened.

This profound moment in nature was accompanied with an opening of her heart energy:

My shoulders release for sure. And it's almost the way I think of it is an expansion in my chest. It's an opening: “Ahhh” you know but the expansion. Like my heart, I guess if you think about yoga, my heart center completely opens. And I'm just sometimes I will get, I mean I've already you know had my moment here...I'm tearful. I cry a lot. I mean a lot of it can be gratitude. When I get teary in nature, it's gratitude. It's just this feeling of connectedness.

Other participants described feelings similar to euphoria, Y. K. recounts her experience:

It's like there's no space for this – it's just a lifting. I can't explain it other than that - it's this sense of lightening. A feeling of lightening...I think the awe is like this rush right? It's like this...that's the only way I can explain it. And then, you feel the lifting afterwards it's almost like joy, or awe, or I don't really know other

than those words how to describe it, or connection I don't know what it is. Really positive emotional state that you're in. You know, I would almost go euphoria I would almost go that far, but it's a little bit different.

B. A. lives for scuba diving, explains a memorable moment of complete rapture that occurred when she was watching lava flowing from a volcano under water:

It was like really, really this *brilliant* [emphasis added] orange but it would almost immediately form a black crust over it and then the crust would break open and then more lava would flow. And you just had this overwhelming desire to touch it. Like it's just like, oh my god, I want to know how that feels like, but you don't...you know it'll burn your arm off! Anyways so my daughter and I are there and we're watching it like, oh my god this is so amazing, that's new earth forming and blabla all this...and all of a sudden this guy comes up, this big great guy, and he's got this gigantic stick and he sticks it in the lava and *pouf* [emphasis added] the stick bursts into flames! But you know he was obviously experiencing the same thing, well I want to touch it, but he touched it with a stick...which just about set him on fire. We were kinda like, wow that was totally amazing! So I don't know there's something about those kinds of things that really energize me.

I don't know how else to explain it.

Some participants believe that trauma can get “stuck” in the affective domain and, thus, it can only be healed through the affective channel (e.g., emotions of awe). During our conversation, Y. K. came to the realization that moments of awe in the wild are key to healing from the negative effects of working with a trauma population. She explains her

perspective while recounting a time when she was struck with a compelling image of a setting moon:

And that was very fast [the moment of awe] and sometimes... because it took me by surprise it was more effective, and again it was through that affective channel. It was a moment of awe. You know what?! I never thought of it, that's it. I think what's common in a lot of these things, there's a moment of awe it just seems like when you can experience that awe it's like hitting the reset button. I really think that's what it is – it's this moment, and it's like do you get your awe visually? Or do you get it? What is it? But there's something about being in nature, nature in general is awe-inspiring, right? And so that's what that moment was, and it was so intense that I could actually feel it lift at that time.

Several participants noted that after having experienced one intense moment of awe in nature, this experience opened the channel for similar experiences to occur in different natural landscapes and settings. Since R. R.'s life altering moments of nature bliss in P. E. I., she has been more receptive to feelings of awe and gratitude in nature in her hometown. She admits that although the coulees are not as fantastic of a sight when compared to the ocean, she says the hill still evoke within her a sense of gratitude and openness.

The participants explained that these moments of gratitude in nature allow them to release their work stress. When B. A. is scuba diving, she is often filled with a sense of gratitude that helps her to completely surrender to her work stress:

If you kinda work at feeling gratitude...that can help with a lot of feelings of burn out and those kinds of things. And that's often what I feel when I'm out involved

in nature, is that I feel so grateful to have that opportunity. Like scuba diving, that I am so grateful that I have this opportunity to be in this place at this point in time, to be experiencing this and this moment.

During intense moments of joy in nature, R. R often prays by giving thanks and appreciation for her life to her higher power:

I'm so glad I'm here through this. You know meaning God (or whatever) thank you for this. So happy that I can do this, and I actually do sort of feel gratitude for being able to walk. Like I start doing some gratitude stuff.

The final theme of the last phase outlines the meaning that many participants place on wilderness. For the majority of participants, nature is all encompassing; embracing nature is a lifestyle, a state of being, and the wild is home.

Wilderness as home and belonging. Along with the aforementioned feelings of unity experienced in the wild, many participants reported feeling a sense of belongingness in nature. They felt a place and a home in the world when they are in wilderness. The participants described being able to counter loneliness, isolation, and alienation through these feelings of connectedness and belonging that are evoked in nature. Nature is more than a place for recreation; it is an integral component of the participants' life. Participants have made major life decisions that would support a nature-infused lifestyle.

Wilderness integrated into all of life. Wilderness experiences are seamlessly integrated into the participant's lives; such that nature seeking becomes a lifestyle, it becomes life. As mentioned in a previous theme, most participants grew up appreciating nature, and this pattern continues throughout their lives.

They noted that they often make big life decisions (i.e., career, place of residence, etc.) based on their nature seeking life style. Participants chose to live in towns/cities that are nestled in the mountains. D. A. lives in a rural community and spoke of the importance of being close to the mountains. She firmly states: “I have a choice of where I want to live. I won’t choose to live away from the mountains.” B. A. has organized her life to complement her passion for exploring the deep seas as a scuba diver. Despite working full time, she carves out time to go on diving adventures. She explains: “I usually take two trips a year where I go someplace and I scuba dive. And I’ve been to lots of remote places to scuba dive, and that’s when I feel absolutely most alive.”

Nature complements all aspects of the participants’ lives, including their beliefs and value systems. Z. L. has delved into shamanism, a healing practice that highlights humans’ connection to nature. H. C. recounts how nature is integrated in all the different elements of her life:

I think it [nature] fits in with my worldview. It fits in with my childhood, it fortunately fits in with my marriage. It just works very well...I guess it [nature] just fits in my value system. It’s a valuable pursuit that you can enjoy without feeling greedy, even though I totally soak it up.

Additionally, numerous counsellors of this study found ways to integrate nature into their therapeutic practice. Z. L. is currently being trained to be an equine facilitated counsellor. She firmly states: “I don’t want to counsel outside in a building, I’ve always wanted to counsel in nature.” She also attempts to bring nature into her current counselling office as much as possible:

The one thing I love more than life itself is being in nature...If you look around my office right now I have plants, I have flowers things, I have my horse pictures in here, I have wood here, I've got essential oil, I have nature up there. And I have orange and reds are really important it reminds me of fall, so that kind of thing. It reminds me of this picture that I have of this woman dancing around goats. So I love that. So everything is connected that way.

The participants often spoke of the meaningful role of nature in their lives. K. L. articulates the extent to which she values outdoor activities:

It's [nature] such a foundation of how I enjoy life and spend time with people and recharge and manage my own...it's such a cornerstone of my self care. Um, like if I can't do that stuff every day – and it's not my own choice, yeah if it's outside my control I guess – then everything sucks haha.

She exclaims that not being able to embrace nature would be devastating: “I mean what's the point of life then? Because that's what I love to do right [going into nature]?” Many participants went as far to say that they would not be able to be counsellors, if they were not able to spend time in nature. K. L. elaborates on this topic:

I don't know how I would do this work if I couldn't move my body, also be in nature. I don't understand how - like I have coworkers who don't really do that - and I don't understand what they do. And my coworker pointed out, oh she drinks a lot!

The wild is my home. The participants alluded to nature as being a symbol of home. Due to their connection with the natural Earth was not just a place, but ‘their’ place; a place of comfort, belonging, connection, and love. Undoubtedly, through the

experiences described, the participants were emotionally attached to nature. G. T. explains: “I spend a lot of time outdoors actually, like everyday spend a lot of time outdoors so it doesn’t feel like... like I...the outdoors feels like my home.” She recounts that she feels such a strong sense of home in nature that sometimes she desires to be able to live permanently and secretly in the woods:

I feel like when I’m out in the woods when I’m out around all those trees...and like I take myself back to my favourite hike back home that I do back East, and that I do regularly. I don’t know I feel like that’s where I belong, I belong there more than I belong here in the city. I want to go back there [childhood hiking area] by myself and live forever probably...Just set up a little tent and hahaha like in the middle of the woods and no one knows where I am!

Natural spaces are so meaningful for H. C. that she uses the word “sanctuary” to describe the outdoor environment: “They [people who aren’t connected to nature] probably don’t care about litter or what not. Whereas for me it’s painful, like why are you doing this to my sanctuary?” B. A. unknowingly and wisely alludes to Wilson’s biophilia hypothesis while describing her belongingness in nature: “And again, you know, I mean three million years ago we were on the savannahs of Africa. Like we evolved from that place, why is it that we think that somehow there isn’t a part of us that belongs there?”

The Profound Shift, the final of the three phases, details the participants last segment of their healing of VT in nature. During this phase, the participants enter into a deep communion with nature, and as a result are able to soothe their isolation by feeling connection and belongingness to a higher power. At this stage, the participants enter in a genuine prayer of gratitude and awe for their lives. Due to the healing factors experienced

in nature, many participants defined and experienced wilderness as both a lifestyle and a home.

Summary

In Chapter Four, the participants of the study were introduced through a brief overview and a demographic table. Next, textural and structural analysis was utilized to uncover the main and sub themes. These theme were delineated and described through the use of a plethora of quotes to incorporate the participants' voice into the chapter.

The next section, Chapter Five will provide an extensive analysis of the themes through the VT lens of constructivism and transpersonal psychology. A concluding discussion will also be presented.

Chapter Five: Discussion

Introduction

The presenting study explored the experience of counsellors who healed their VT in wilderness. Specifically, it investigated the unfolding events that allowed the participants to feel restored in the natural environment. The experience of the participants of this study mirrored the extant literature that was discussed in Chapter Two. The following sections will summarize and interpret the themes that emerged in Chapter Four. A transpersonal theoretical orientation and a constructionist theory of VT will be used to interpret the transcripts of the eleven counsellors who shared their stories. The limitations of this study will be examined and personal reflections as an implicated researcher will then be shared. Following this, possible implications for counsellors and the field of counselling will be provided.

Summary of Themes

This study explores the lived experience of counsellors who use wilderness to heal from VT. Over the course of a profound analysis of the transcripts, ten themes, which then were categorized into three phases, emerged from the text. In exploring the lived experience of counsellors, the two most prominent themes that arose regarded mindfulness in nature and as sense of re-connection to self, others, and God in the wild. The majority of the themes align with pre-existing literature in the field.

The three phases that were explored outline the major themes that surfaced in the participants' journey of healing in nature. The first phase, Setting the Stage, described the three initial steps that began the healing journey in nature. The initial theme Childhood Experience: A Foreshadowing of Healing in nature concerned positive childhood

experiences and memories in nature; and this is where the participants' journey began. The experiences described match the literature that posits that child experiences in nature form the childhood perceptions and levels of comfort in nature (Chawla, 1998; Van Velsor & Nilon, 2006).

Next, in the theme *Vicarious Trauma: A Disconnection from Wellness*, the participants experienced varying levels of VT that manifested in cognitive shifts in the need for safety and intimacy, self-capacity to tolerate strong affect, identity, worldview, and spirituality. These cognitive shifts mirrored the symptoms of VT according to the constructivist theory (McCann & Pearlman, 1990; Pearlman & Saakvitne, 1995).

After being exposed to nature as kids and experiencing the negative effects of their work as counsellors, the participants were pulled to natural environments as described in the theme *Innate Pull Towards Wilderness*. According to the biophilia hypothesis and the psychoevolutionary hypothesis, a drive to commune in nature is an intrinsic part of being a human since we have evolved from a natural habitat in the savannahs (Kellert & Wilson, 1993; Ulrich, 1981). This phase concludes with a theme that outlines this magnetic attraction to nature experienced by the participants.

The subsequent phase, *The Wild Plunge*, outlines the next step of the journey and the initial level of healing. In the first theme of this phase, *No Expectations, No Demands in Nature*, participants sought freedom of their life responsibilities and expectations by indulging in the absence of stimulation and demands in nature. These experiences align with Kaplan's (1995) attentional restoration theory that defines stress as a form of mental exhaustion that results from the enormous amount of directed and effortful attention required to complete daily life chores in the Western world. Research states posits that

humans will feel restored and rejuvenated in simple, pleasurable, and natural environments that require minimal psychological demand (Hartig et al., 1991; Kaplan, 1995; Kaplan & Kaplan, 1989).

The participants' healing continued through nature facilitated meditation and mindfulness as detailed in the theme Mindful Appreciation of Nature. The traumatized clinicians were able to emotionally rejuvenate, and ground themselves by being present to their moment-to-moment experience in the wild. Literature supports the participants' experiences: mindfulness is inversely correlated with compassion fatigue and burnout (Thompson et al., 2014; Vildarga et al., 2011). The therapeutic effects of mindfulness in natural environments have been studied in forest bathing as well as mindfulness and CBT approaches in nature (Ambrose-Oji, 2013). Certain participants were able to become so present to their experience while kayaking or hiking, they experienced total involvement, and richer perception (Mannell, 1996), exactly what Csikszentmihalyi (1990) would categorize as states of flow. Participants found it easier to slow down their minds and to increase awareness of their physical senses in natural environments (Kabat-Zinn, 2005). The specific sights, smells, textures, and sounds in nature have been found to significantly decrease stress levels (Tsunetsugu et al., 2010; Tsunetsugu et al., 2013; Yamada, 2006). Interestingly, nature connectedness and mindfulness are significantly correlated: high levels of nature connectedness are associated with high levels of mindfulness (Howell, Dopko, Passmore, & Buro, 2011). Overall, mindfulness is a prominent stage in the healing process, as it aids counsellors to tolerate ambiguity, hold multiple perspectives, and accept challenging situations (Harrison & Westwood, 2009).

As such, a state of mindfulness is conducive to other therapeutic stages of healing that have been described (i.e., cognitive shifts, experiences of surrender, and connection).

The theme Discovering Fresh Perspectives revolves around cognitive shifts occurring in natural landscapes. By seeing parallels existing between the natural world and their day-to-day lives, participants were able to feel a multitude of perspective changes that allowed them to feel positive, non-judgmental, carefree, and safe in the world. Extant literature on wilderness therapy for youth shows that attitudinal shifts can occur (Hoag et al., 2013). Research has shown that women on wilderness excursions feel empowered (McBride & Korell, 2005; Wang et al., 2006) and experience meaningful shifts in perspective (Frederikson & Anderson, 1999; Hinds, 2011).

A subsequent stage of healing, Transformational Healing Through Surrender and Allowing, occurred in the form of another shift in mentality when the participants adopted an accepting attitude. As aforementioned in the review of the literature, Pearlman and Saakvitne (1995) boldly assert that, “every intervention strategy for vicarious trauma is predicated on mindfulness and acceptance” (p. 77). The use of acceptance as a coping strategy after trauma has been found to decrease symptoms and levels of distress (Silver, Holman, McIntosh, Poulin, & Gil-Rivas, 2002) as well as to increase contentment and well-being (Major, Richards, Cooper, Cozzarelli, & Zubek, 1998). By embracing nature, the participants were able to automatically let go of intrusive stories and emotions that had previously caused them suffering without exerting any deliberate “effort” to feel better. As the participants outlined, Hartig and colleagues (1991) found that an emotional release in the wild usually occurs immediately and naturally.

The last phase, The Profound Shift, the participants experienced a deep level of healing of VT. One of the most prominent themes, From Alienation to Connection, outlined the sense of true connection the participants experienced when immersed in nature (Pearlman & Saakvitne, 1995). Counsellors have been found to withdraw from loved ones and become emotionally numb to protect themselves from further traumatization (Collins & Long, 2003; Pack, 2014). During this stage, the participants were able to heal from the isolation that is commonly experienced in VT by bonding with others and connecting to themselves and to the greater world. By connecting with nature, they communed with all of existence in the form of God, Universe, and/or Mother Nature. As spiritual damage is one of the most deleterious symptoms of VT (Pearlman & Saakvitne, 1995), it is logical that the spiritual component of nature experiences was prominent in the interviews. Counsellors who are in touch with their spirituality are less likely to develop VT because they are more ready to accept their inability to change occurrences (Pearlman & Saakvitne 1995). Thompson et al. (2014) found that the isolation and despair experienced as a result of VT could be prevented and countered through the spiritual realm.

The theme Wilderness as Prayer: Gratitude and Awe describes when the participants entered into a state of prayer, manifested by feelings of gratitude and awe in the wild. The moments of awe and euphoria in nature experienced by the participants aligns with findings of research studying transcendent and peak experiences in the wild (Mannell, 1996; Maslow, 1968; McDonald et al., 2009; Williams & Harvey, 2001). Positive psychology points to certain factors that may alleviate VT, such as gratitude (Pearlman & Caringi, 2009). As evidenced by numerous studies, cultivating gratitude has

been linked with elevated scores in happiness and well-being (Sansone & Sansone, 2010; Seligman, Steen, Park, & Peterson, 2005).

In the final theme, Wilderness as Home and Belonging, the participants were able to find comfort and healing during their VT experience through this sense of connection and belongingness in the world. Whenever possible, the participants interwove nature into their lives, and associated feelings of home with the natural world. The participants often spoke of their emotional attachment to nature. Little research exists on the specific therapeutic benefit of feeling a sense of home in the wild. However, the aforementioned theory of ecopsychology, states that since humans have an emotional connection with their natural world and that they require a union with nature in order to be mentally and physically healthy (Roszak, 1992). The participants' experience of belongingness and a sense of home runs parallel to the experiences of other prominent figures in our culture, such as John Muir (naturalist), Ralph Waldo Emerson (poet), Henry David Thoreau (poet, philosopher), and Gary Snyder (poet), who have all expressed their deep-seated belief that the wild was their home. Muir highlights this phenomenon in the following quote:

Thousands of tired, nerve-shaken, over-civilized people are beginning to find out that going to the mountains is going home; that wildness is a necessity; and that mountain parks and reservations are useful not only as fountains of timber and irrigating rivers, but as fountains of life (1909, p. 1).

Similarly to Hinds' s (2011) phenomenological study on women in nature, there exists congruence between the themes that surfaced in this study. As such, certain components of one theme may appear in another theme, for instance, and attitude of mindfulness and acceptance usually co-exist. Also, some participants required a sense of

interconnectedness in order to surrender the stories of trauma. In fact, the related themes that emerged from the data appear in the literature. Pearlman and Saakvitne (1995) note that individuals with a sense of meaning and connection can more easily accept their current life situation.

The participants' journeys varied, some of their stories aligned with the constructivist self-development of VT while others fit better into a transpersonal lens of healing and growth. Both interpretations will be undertaken in order to accommodate the participant's diverse journeys.

Vicarious Trauma: A Constructivist Self Development Lens

According to a constructivist self-development theory, individuals make sense of the world by constructing individualized schemas and perceptions. Pearlman and Saakvitne (1995) state that, "the meaning of the traumatic event is in the survivor's experience of it" (p. 57). Counsellors with VT hold unhealthy schemas about the world, themselves, and others as a self-preserving response to the traumatizing stories they witness (Pearlman & Saakvitne, 1995). One way that counsellors are able to heal from VT is to restore the unhealthy shifts in perspective that are characteristic of this disorder. According to the themes emerging from this study, natural environments are able to heal counsellors because they are conducive to cognitive shifts. Specifically, the participants' cognitive schemas surrounding a need for intimacy and safety, as well as cognitions around worldview, spirituality, and self-capacities were shifted in the wild.

The need for intimacy. Clinicians who suffer from a shift of schemas in intimacy experience a sense of disconnection from themselves and from others. The participants in this study were able to remedy this disconnection by finding connection through nature

activities. As described in the theme From Alienation to Connection, soothing natural environments are conducive to reconnecting with oneself, loved ones, and all of existence.

The need for safety. When a counsellor's days are filled with stories of abuse, he/she may come to believe that the world is more unsafe and chaotic than prior to becoming a counsellor. A distorted fear of predators may result in hypervigilance (Yassen, 1995). As evidenced by the theme entitled Discovering Fresh Perspectives, the participants stated that they were able to both overcome their hypervigilance and see the world as a safe, peaceful, and stable place by embracing natural environments.

Individuals suffering from VT may also experience cognitive shifts in frame of reference, which include beliefs through which the counsellors interpret their world.

Worldview. When experiencing moments in nature, the participants noticed several parallels between the natural world and their day-to-day lives. While witnessing the strength and resiliency present in nature, they sensed a renewed belief in their personal resiliency and that of their clients. Numerous participants also experienced their personal insignificance in the world, and as a result they were able minimize their anxieties. As they observed environmental processes and life unfolding naturally in wilderness, they were more able to believe that, in the end, everything works out. These parallels were demonstrated in the theme of Discovering Fresh Perspectives.

Spirituality. Participants were able to reconnect to their sense of spirituality in nature. As exemplified in the subtheme Connection to the Bigger Picture: God, Universe, and Earth and the theme Wilderness as a Prayer: Gratitude and Awe, the participants recounted a plethora of spiritual moments and connections experienced in nature. Overall,

through these shifts in schemas the participants sensed that they were not alone in the world.

Self-capacities. The constructivist model of trauma posits that in addition to cognitive shifts in needs and in frame of reference, intrapersonal self-capacities are compromised in a trauma population. In this study, the participants specifically spoke of their challenges in tolerating strong affect (see theme Vicarious Trauma: A Disconnection from Wellness). As evidenced by the quotes in the Mindful Appreciation of Nature theme, the participants spoke of a release and emotional rejuvenation that occurs when being present in nature. I imagine that this therapeutic release would help participants tolerate strong affect in their sessions and in their personal lives.

Wilber's Spectrum of Consciousness: A Transpersonal Lens

As described in the previous section, participants were able to shift their schemas and cognitions; according to a transpersonal lens these experiences would fall into the personal (ego-related) phase of the Spectrum of Consciousness. Transpersonal psychology posits that transformational healing can occur at the egoic level, but deeper healing occurs within higher levels of consciousness when one is able to transcend one's ego (Grof, 1993).

I will now describe how the participants' experiences align with Wilber's Spectrum of Consciousness. The majority of nature experiences described by the participants occurred in the 7th level of the Spectrum of Consciousness, nature mysticism. It is important to note that each participant's journey was unique, and that every participant attained varying levels of consciousness and healing in wilderness at different points in their journey. Wilber (1996) posits that progressing through these levels is not a

simple linear process; rather one can progress through each stage one at a time, interdependently, and even simultaneously.

A level-to-level application of the Spectrum of Consciousness. On a day-to-day basis I found that the participants most commonly existed in the formal-reflexive mind, level 5; a state in which one is self-reflective and introspective (Wilber, 1986). At this level, the ego is present and the participants are able to think rationally about their trauma and take deliberate and reasonable steps to reduce work stress and VT symptoms.

In level 6, the stage of existential psychology, participants are concerned with life, death, and their aloneness in the world (Wilber, 1986). The VT experienced by participants remains stuck at this stage because in its essence, trauma can be conceptualized as a fear of death. A profound healing can occur when participants move beyond an existential stance of their trauma.

In nature, participants were at times able to transcend their ego and thus enter into the last phase entitled “Trans-ego”. This phase is comprised of four levels: the physic, subtle, casual, and non-dual levels (Wilber, 1986). The transpersonal realm begins with level 7, the psychic level that represents nature mysticism. During this state, natural processes are seen as interconnected. Emerson (1983/1836) described nature mysticism in the following quote:

Standing on the bare ground, my head bathed by the blithe air, and uplifted into infinite space, all mean egotism vanishes. I become a transparent eyeball – I am nothing! I see all; the currents of the Universal Being circulate through me; I am part or parcel of God (p. 10).

As exemplified in the theme From Alienation to Connection, the participants were able to connect with God/Universe through nature. The participants were also able to connect with wild and domestic animals in a meaningful manner. The psychic level also encompasses the initial stages of Buddhist and Hindu meditation where one is able to perceive thoughts in a detached manner and move beyond thought (Wilber, 1986, p. 72). During this stage, one's physical senses are heightened and one's doors to perception open. As explored in the theme Mindful Appreciation of Nature the participants were able to slow their mind, and become mindful of their senses in wilderness. In awakening to the sensuous experience of nature excursions, the participants were able to begin shedding their egos. Thomas Moore (1998) validates the connection between senses and spiritual growth with the following: "Spirituality and sensation not only are not enemies, they feed each other. Sensations can be an effective way out of the ego, and therefore it serves spiritual goals" (p. 148). In nature, the participants would see the world as if for the first time, with the same fascination of a child. The participants were able to play and revel in the simplicity of nature as detailed in the theme No Expectations, No Demands in Nature. Through mindfulness and nature mysticism, the counsellors were able to begin detaching from their ego, and this, as a result, progressed their healing from VT. The theme of Transformational Healing through Surrender and Allowing also falls into the psychic level as participants were able to surrender to the moment, and accept their present life situation.

Level 8 is the subtle stage of deity mysticism (Wilber, 1986). Here, one is able to perceive audible illuminations and visions of one's personal deity (e.g., Buddha, Jesus, Krishna, etc.). Although the participants did not experience deity mysticism in the

conventional sense in the wild, several participants experienced a profound sense of gratitude as exemplified in the theme Wilderness as Prayer: Gratitude and Awe. The participants described a self-less, genuine form of prayer in which they were simply struck with overwhelming feelings of gratitude and thanksgiving.

Level 9, the causal, is said to encompass the stage of effortless insight in which one experiences vast euphoria and awe. The causal level is described as a subjective witnessing of manifest and unmanifest form (Wilber, 1986). Although few participants experienced this level of consciousness in nature, glimpses of this level were identified in the themes Wilderness as Prayer: Gratitude and Awe, and Connection to the Bigger Picture. The joy and wonder demonstrated in these themes would be classified in the causal level.

Level 10 is the stage of non-duality. This level represents the epitome of enlightenment, Wholeness, Nirvana, One-ness (Wilber, 1986). It is during this level that the formless and the form are united; no division exists between self and other. For instance, at the nondual level, individuals do not witness a mountain, but rather become the mountain. The self falls away, and the individual becomes pure interconnectedness. To attain this state, one has to surrender attachment to the ego, to life, to everything (Wilber, 1986). The participants did not describe experiences of non-duality.

Contingent on the each participant, the theme Discovering Fresh Perspectives could be placed between levels 5 through 7. Those who simply experienced a cognitive shift through a change or reframe of their story could be classified as experiencing level 5, the stage of self-reflection. For some, they were able to realize the insignificance of their problems by contrasting them to vastness of existence; these experiences would fall in the

existential stage, level 6. Lastly, participants who experienced expanded perceptiveness, (beyond mind and body) often characterized as “visionary insight,” would have experienced level 7 of the Spectrum of Consciousness (Wilber, 1996. p. 72).

The participants’ experiences varied, but all could be placed on some stage of the three phases of Wilber’s spectrum (pre-ego, ego, trans-ego). Many participants reached the psychic stage, but few attained further levels of consciousness. None of the participants experienced the last phase, non-duality, perhaps due to the real dangers existing in the natural world. I imagine it may be challenging for individuals to let go of the need to survive in the face of imminent danger such as bears, cliffs, and white water currents present in natural environments. Although deeper healing occurs in the trans-ego phases, natural environments may not be conducive to states of unity between the form and formless that is characteristic of the non-dual phase.

Exceptions

Not all participants described profound and otherworldly experiences in nature as part of their healing journey. One participant expressed that her healing experiences in nature are certainly therapeutic, but not spiritual or ego transcending. This particular individual described many cognitive shifts that occurred in nature, and thus, the experiences she described were better interpreted through a constructivist lens. For this participant, healing occurred within the ego.

One participant’s experiences mostly mirrored the psychic and causal levels, and thus her journey aligned suitably with the transpersonal framework. In this case, her healing did not occur through healthy shifts in cognition.

Many participants highlighted the importance of exercise and socializing in combatting VT, and these coping mechanisms have been well documented in the extant VT literature (Badger et al., 2008; Iliffe & Steed, 2000; Jordan, 2010; Schauben & Frazier, 1995; Wallace et al., 2010). One participant said that she rarely embarks on outdoor excursions alone, and that the social aspect that is embedded in her trips is a large component of the release she finds in nature. Others articulated the prominence of exercise in nature; one participant explained that for her it is inadequate to simply sit and meditate in beautiful natural landscapes; the physical movement (i.e., hiking, biking, skiing) is a necessary aspect of her healing journey. The transpersonal lens and the constructivist lens for VT do not specifically highlight these types of healing experiences.

One participant explained that during the challenging times of her VT, she was in such a dark place that she was unable to embrace nature. In fact, she felt vulnerable and exposed in beautiful landscapes. Instead, she required rest, time off work, and a change in schedule. As time passed, she was able to look outside her window and feel the therapeutic benefit (in the form of perspective shifts) of watching her favourite tree transform through the seasons. Slowly, she ventured outside for longer periods of time and was able to appreciate nature. Evidently, everyone's VT experience is unique, and embracing nature may not be adequate or conducive to healing for all. The themes that are depicted in this study are representative of how eleven individuals described their experiences during one interview.

Limitations

The limitations within this study need to be acknowledged and articulated. To begin, the participants included in this study were limited to eleven female counsellors

residing in southern British Columbia and Alberta. Although the counselling profession is female-dominated, a male perspective would have enriched my study. As many of the participants were recruited through the Alpine Club of Canada, to some extent they could have held similar attitudes about nature and wilderness. I could have collected my participants from various sources in order to reap more diverse perspectives and attitudes.

As a phenomenological approach offers a detailed description of a lived experience, the results provide depth rather than a breadth about the inquired phenomenon. Due to the nature of this study, my results are pulled from a small sample size of unique experiences, and are thus not generalizable to a larger population. Further, the results cannot become a part of any developing theoretical paradigm. Although this study offers rich detail from a limited sample, the results of this study are inherently challenging to practically implement in counsellor care education programs and policies, as well as the wider population.

The readers must understand that the results are a reflection of how the researcher interpreted the participants' interpretations of their experience in wilderness. In addition, the themes that arose from the data are based on how the participants articulated their experiences within one snapshot of time. The themes, then, simply reflect the one moment in time during which the interviews took place.

The quality of research depends on my ability as a researcher to build rapport, and to skillfully prompt the participants to describe their experience in such a way that I may be able to understand their experiences as fully as possible. Due to pragmatic circumstances, many of the interviews were about an hour long, and this did not afford adequate time to attain the depth of information that is often required in a

phenomenological study. Longer, more focused interviews would allow me to attain richer data, and thus richer quotes. In this sense, the data I received from my interviews did not easily accommodate a phenomenological transpersonal framework. As a phenomenological researcher, I am investigating the phenomenon not the individual; as such my priority is to understand the phenomenon and not the intricacies of the person (Englander, 2012). My interview questions began by asking for information about the participant, instead, I could have begun by asking for information revolving around the phenomenon under investigation (Englander, 2012). As a result, significant portions of the resulting interview data concerned personal information rather than details of the phenomenon.

The majority of the interviews took place in the participants work environment during their regular chaotic work schedule; in this way it may have been difficult for the participants to recall the healing that arises when they are in the depths of wilderness. Conducting the interviews in a private natural environment (i.e.: a park, the coulees) may have helped the participants recall and express the healing phenomenon that occurs when they are in nature.

Limited research exists in the field of VT and in the field of psychological healing in wilderness. To date, there are few existing phenomenological research studies that link wilderness and VT experiences; as a result, articles based on similar types of research had to be utilized to guide the study (as opposed to research on the same topic).

Limitations aside, the presenting study provided valuable themes and truly deepened my understanding of qualitative research. The lessons I reaped from the research process are detailed in the next section.

Reflections on the Research Process

The act of conceptualizing, analyzing, and writing this study was a colossal learning process in itself. I now have a much deeper understanding of the qualitative research process than before the inception of this academic endeavor. During this process, I learned that a scholastically rigorous study begins with a comprehensive and thoughtful thesis proposal. Each step, especially in the initial stages, is vital to the quality of the end product. It is essential to plan and anticipate as many details of the study before diving into the data collection phase. The interview questions are vital as their answers essentially create the data that will become the future themes. In this study, I chose to conduct a narrative approach to the interviews and thus I offered few prompts and I allowed the participant to help guide the interview. Although I value the narrative, semi-structured approach to interviewing, as a novice researcher this approach makes analyzing the data for themes more challenging. It is also easier to become overly unguided in the interviews, during the interviews it was easy to fall into the trap of veering off topic. In future studies, I will use a more structured approach by asking the participants more focused and specific questions about the phenomenon. I personally believe that one has to be an experienced interviewer and researcher in order to reap the benefits of an unstructured approach to interviewing.

I have learned that in addition to a solid proposal and specific questions, the types of participants that are selected for the study are critical. Most of the pre-interview correspondence between the participants and myself was completed online via email correspondence. As a result, it was difficult to decipher if the participant was an ideal candidate. Since my inclusion criterion was broad, I had many individuals respond to my

advertisements. However, each of the eleven participants experienced varying levels of VT. Some of the participants of this study had experienced profound life-changing episodes of VT, whereas others experienced a lesser degree of intensity and magnitude of VT symptoms. It would have been helpful if I had added a few questions about the magnitude of VT symptoms in the pre-screening process. In future studies, I would adhere to a strict inclusion criterion, as this would surely enrich the collected data. If possible, I would prefer to talk to participants on the phone before deciding to conduct an interview.

As a counsellor, it was challenging to shift my focus from the individual, to the phenomenon under investigation. In future interviews I will be more aware of my tendency to be present to the individual instead of the phenomenon, and I will modify my interview focus accordingly.

I was not able to ask for participant feedback during this study, but in future studies I will explain the hermeneutic circle to the participants and emphasize the importance of their ongoing feedback. I could easily have increased the validity of my study by engaging in a more thorough hermeneutic circle by incorporating participant feedback into my interpretations.

Implicated Researcher

Despite never having articulated my wilderness experiences before undergoing this research, I align with the majority of the themes expressed by the participants. During a two-week trek in the Negev desert in Israel, in addition to witnessing breathtaking landscapes, I was able to fall asleep under the star-speckled Milky Way every night. It was at night when I felt intense moments of interconnectedness and

oneness to God and to the Universe. Similarly to the participants, I have gained insight and a slowing down of thought when engulfed in wilderness. When I was living in the jungles of Bolivia in a rustic camp, disconnected from modern society, I was given the space to simply “be”. While taking care of Sama, an enclosed jaguar, I was completely mindful of the unfolding present moment. Time stood still as I watched groups of monkeys dancing in the canopy of the trees, ants marching with purpose, as I listened to clandestine birds bickering with each other. I was attuned to the passing of weeks and months by the changes in my natural environment such as the blossoming and decomposing of flowers, the oscillations of the moon, and the variations in the weather. It was during this isolated time when I decided to become a counsellor upon my return to civilization.

Similarly to the participants of this study, I mostly remain in the psychic level of consciousness when in the wild; the level of nature mysticism and the opening and heightening of physical senses. My heart chakra opens and my senses are flooded when I am struck by the beauty of a sunset, a mountain range, or an open ocean. Although I have experienced nature mysticism innumerable times, I have only experienced brief moments and glimpses of the non-dual level while outdoors. On the beaches near Tofino (Vancouver Island), I have experienced ephemeral moments of nirvana, where I have felt no distinction between the form and the formless – between the ocean and myself. Although fleeting, these moments are unforgettable.

Due to my aforementioned experience in the wilderness I am unmistakably an implicated researcher, and, as a result, I have acknowledged my involvement throughout the research process. Although, an implicated researcher has a deep understanding of the

phenomenon, to a certain extent, a lack of objectivity may exist. As such, the reader must understand that this study was planned, executed, and written by an implicated researcher. In order to remain as objective as possible, I endeavored to remain conscious of my biases concerning nature experiences. Innumerable times during the theme emergence process, I asked myself: “Would my friend/supervisor/professor see what I see?” This simple question allowed my biases to surface into my consciousness. During the interviews, I reminded myself to have an: “openness to experience” as described by Van Hesteren (1986), in order to be able to experience the interviews as they were, as they unfold before me in the moment. These techniques allowed me to self-monitor by engaging in reflexivity as recognition of self.

The journey of completing a thesis has reaffirmed the importance I personally place on embracing wilderness. I often found myself meandering in the coulees to shed the frustrations of analysis and writing. More than ever before, I was drawn to natural, beautiful, and peaceful places to soothe my overtaxed mind. In retrospect, I am aware that parallel processing occurred. As the participants used wilderness to cope with their VT in the transcripts that I read, I was using wilderness to cope with the struggles and cognitive strains of the research process required to study VT.

Additionally, I myself developed a stronger appreciation for nature through the inspiring narratives of my participants. I remember reading several powerful quotes from certain participants and feeling automatically re-energized and re-fueled to continue writing. The strength I found in the participants stories is described in my research journal:

Today I felt so discouraged and overwhelmed by the amount of transcribing I still had to complete. And I was scared, what if no themes emerge from the data? But something amazing happened while I was transcribing a particularly evocative segment of an interview... I felt re-energized as I read it! Even as I transcribed in my dark office, I could imagine the peace that was evoked in nature. Suddenly, I felt like I could do this! I jogged to the coulees to catch the sunset and to breathe
(Research journal, 12/13/14).

The participants' words evoked that familiar sense of healing that I've experienced in nature. I even printed a few of evocative quotes and posted them in my office in order to remind me of the moment-to-moment inspiration I felt while interviewing the participants.

As a novice counsellor, I was taught that in theory counsellors need to learn how to process and release emotions brought up in session in order to thrive in the field. However, it was not until writing the thesis that I truly grasped the significance of letting go of the emotional weight that often surfaces in therapy sessions. Through this experience, I gained a deeper practical understanding of the concept of self-care as a counsellor, and the ways in which I can feel restored in nature. My hope is that this newly acquired wisdom accompanies me throughout my burgeoning counselling career. In the future, I aim to incorporate nature activities into my lifestyle to prevent the effects of VT. If I ever suffer from VT, I feel like I would embark on a vision quest to move the trauma out of my body and mind. Another hope (and bias) is that, in time, others begin to realize the therapeutic gifts embedded in our natural environment. One participant articulated the following: "Three million years ago we were on the savannahs of Africa. Like we

evolved from that place, why is it that we think that somehow there isn't a part of us that belongs there?"

My hope is that research in this field will allow new questions, such as the one articulated above, to percolate in those that read the literature.

For all these reasons, I will always be thankful to my participants for opening their lives and allowing me to put a magnifying glass to their therapeutic wilderness experiences, if even for a moment.

Implications for Counsellors

This study offers a positive addition to the meager literature on healing counsellor vicarious trauma in wilderness. I believe that it is essential to incorporate the counsellor's voice in the self-care literature in order to improve the field of mental health. I also strongly support research that focuses on healing the healer, in this way, all those who access therapeutic services will benefit from the quality of care of a whole and healthy counsellor. Further, this research adds valuable themes that support the ongoing trend to re-integrate into nature according to a transpersonal lens.

The contents of this study suggest numerous practical personal and occupational applications. Based on the findings of this study, it would be beneficial for counsellors who experience VT to seek out wilderness as part of their healing. Embracing nature spaces on a regular basis can help process the emotional content that arises from trauma work. As suggested by a participant in this study, counsellors may be able to connect to the outside world by counselling in a room with a window. Another participant found it helpful to keep plants and nature décor in her therapy room to keep her centered in sessions. For counsellors who have never connected to the natural world, I would suggest

they begin by becoming aware of what natural environments or aspects they feel naturally drawn towards. The first step is to become curious and interested in the natural world.

The themes of this study show that nature assisted therapy is a valuable tool for counsellors who are working with a client with VT. Counsellors may also utilize nature-assisted therapy with other trauma clients. Whenever possible and confidential, counsellors are encouraged to counsel in outdoors spaces. Directors and managers of counselling organizations may aim to incorporate nature into the ways they run their establishments. For example, staff meetings may be held in private outdoor spaces. It was inspiring to hear that one participant was able to convince her counselling team to hold monthly meetings outside.

Implications for Counselling

The presenting study offers numerous implications for the field of counselling. First, it is recommended that counselling education programs teach future counsellors about the therapeutic power of wilderness. For instance, trauma courses could incorporate strategies on how to utilize nature therapeutically to process trauma. And further, based on both the literature review and the arising themes of this study, it would be advantageous to invest in outdoor programs specifically for traumatized counsellors. As we have explored in previous chapters, children's diminished contact with nature has been linked to increasing levels of mental and physical disorder. Child and youth counsellors are especially encouraged to incorporate nature into play therapy, especially since early childhood experiences in nature can pave the road for positive interactions as adults.

In regards to future research in this field, I suggest qualitative studies be conducted on the ways in which male counsellors benefit from the natural environment during VT. The presenting study solely examines the experience of a female population, a deeper exploration of a mixed sex population would shed light on gender differences that may or may not exist. While reflecting on the interviews in my research journal, future research endeavors were conceived:

The last few participants seemed to be quite similar in their level of introversion...I know this is based on pure assumptions, but it makes me wonder if there is a connection between specific personality types and nature connectedness. I know nature connectedness, operationalized as an individual's sense of oneness with nature, has recently been researched (i.e., Howell et al., 2010; Mayer et al., 2009). I would be so curious what research would reveal if I studied the type of person that is associated with high scores on a nature connectedness scale. I have so many research ideas developing now that I've begun this journey!

(Research Journal, 7/10/14).

Only certain counsellors find deep therapeutic healing in nature, while others have no interest to engage in nature activities. After all, every counsellor has a unique set of personality traits and interests. As such, nature engagement is not a coping/healing mechanism that is accessible to all counsellors. I recommend that research be conducted on the personality and environmental differences between people who frequently refuel in nature and those who do not enjoy spending time in nature. This research could potentially shed light on the factors mediating healing experiences in nature. Another

study could identify the barriers to engaging in nature to de-stress. These types of studies would help make nature accessible to the greater population.

Conclusion

This study aimed to answer the following research question based on eleven mental health professionals: What is the lived experience of counsellors who use wilderness to heal from VT? Using a phenomenological hermeneutic approach, I was able to extract themes salient to the healing journey of the participants. As evidenced by the literature and the themes the participants were able to recharge in nature through the undemanding environment, shifts in perspectives, mindfulness, surrender, and by reconnecting to themselves and all of existence. According to a constructivist framework of VT, the cognitive shifts in perspectives experienced in nature allowed the counsellors to recover from VT. Based on Wilber's Spectrum of Consciousness, the counsellors were most able to heal from VT through nature mysticism, the psychic level of the consciousness spectrum. This study is an introduction to the benefits of nature in the mental health field using a transpersonal angle. My hope is that the presenting literature marks the beginning of a trend in which nature is re-integrated into our healing practices, and that our society as a whole begins to understand and experience Muir's words (1915): "I am well again, I came to life, In the cool winds and crystal waters of the mountains..." (p. 37).

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Appendix A:
Advertisement

Wilderness-loving trauma workers needed!

Are you an individual who....

1. **Works in the counselling field as a counsellor, psychologist, or social worker?**
2. **Self identifies as having personally experienced vicarious trauma?**
3. **Uses wilderness to heal from vicarious trauma?**

Yanna Martinek is a graduate student in the Faculty of Education at the University of Lethbridge who is conducting a study on the *therapeutic effect of wilderness experiences*. The purpose of this study lies in exploring how trauma workers heal from vicarious trauma by embracing wilderness experiences in their leisure time. Vicarious trauma, or compassion fatigue, is a stress response that occurs in professionals who work with traumatized clients. Trauma workers who have vicarious trauma may have a disrupted perceived sense of meaning, trust, and hope.

Please email/call me if you are interested to participate in a 1.5-hour interview about your experiences.

Dr. Gary Tzu is supervising this thesis: gary.tzu@uleth.ca, (403) 329-264

Appendix B:
Interview Questionnaire

- 1) I'd like to understand your work atmosphere. What is your caseload? How do you feel when you come home from work?
- 2) Why don't you tell me about your experience as a counsellor here?
- 3) To begin, I am interested in your definition of nature and wilderness. There are many different ways to conceptualize a nature experience - ranging from adopting an office plant to summiting a mountain solo. How do you personally define wilderness?
- 4) Tell me about your nature seeking habits. Typically, how do you engage in wilderness? What is your 'go to' nature experience?
- 5) Tell me a story of a time you were able to let go of a client story that had affected you in nature.
- 6) Now in great detail, I'd like you to recall a wilderness experience that was particularly therapeutic to heal from VT.
- 7) Explain the landscape. Where were you? Imagine describing your setting to a blind friend who wants to experience this moment through you.
- 8) Reflecting upon this experience, what stands out to you? Is there anything else you'd like to share to give me the complete picture?
- 9) Is this experience different than your typical nature experience? If yes, how so?
- 10) Is there anything you'd like to add or do you have any questions for me?

Appendix C:

Informed Consent Form

You are being asked to participate in this study entitled **Embracing Wilderness Experiences to Heal Vicarious Trauma** that is being conducted by Janna Frances Martinek, a graduate student in the Faculty of Education at the University of Lethbridge. You may be able to contact her if you have further questions by phone at 403-359-3318.

As a graduate student, I am required to conduct research as part of the requirements for a degree in Counselling Psychology. It is being conducted under the supervision of Dr. Gary Tzu. You may contact him at 403-329-2644.

The purpose of this study lies in exploring how trauma counsellors manage their personal vicarious trauma by embracing wilderness experiences in their leisure time. Specifically, the study seeks to identify the distinctive elements of wilderness experiences that affect vicarious trauma symptoms in counsellors.

Research of this type is important because it will have significant implications for professionals counselling a trauma population. Vicarious trauma is a term used to describe the stress response of those working with a trauma population. This condition may lead to professional impairment, as such engaging in self-care strategies and the identification of coping mechanisms is an ethical imperative for therapists. The lack of research on strategies to cope with vicarious trauma will fill this gap in the literature.

You are being asked to participate in this study because you are an individual who:

1. Is working/has worked in the counselling field as a registered counsellor, psychologist, or social worker.
2. Self identifies as having personally experienced vicarious trauma.
3. Used/uses wilderness to heal from vicarious trauma.
4. Can identify and articulate your experiences in an interview setting.

Procedure

If you agree to be a participant of this study, a maximum of 1.5 hours of your time will be required to complete the interview. Interviews will be conducted in pre-reserved rooms at the library in the University of Lethbridge or at the Central Library in Vancouver. Arrangements will be made if you do not live close to these locations. If logistically possible, the researcher may be able to travel to those living in British Columbia and Alberta. Otherwise, Skype meetings may also be arranged. The interview will include questions that relate to your experiences engaging in wilderness as a way to decrease vicarious trauma. The transcripts will be divided into manageable and meaningful clusters of statements from which themes will be identified. Further communication might be necessary to clarify the data and to ensure transcription accuracy. After the interview, you will be asked whether or not you agree to a follow-up phone call.

Voluntary

Your participation is voluntary. At any point during the interview, you may ask to stop the audio recording or stop the interview session. No questions will be asked. You may ask to have your data removed from the themes and destroyed within one month of the date of your scheduled interview.

Risks/benefits of Participation

Participation in this study may cause some inconvenience to you, including the time and energy it takes to participate. Emotional content regarding vicarious trauma may potentially arise during the interview. Details regarding counsellor trauma experiences will not be asked. You will not be pressed to provide any details that you're unwilling or unready to share. If you are distressed, you will be debriefed and given the space and time needed to process. A list of counselling resources available in the community will be provided. You may gain new insights and a deeper understanding to the ways in which you have healed through wilderness during the course of your interview. You may request a summary of the study upon completion. Also, you will be provided the opportunity to share your experience and help the field become proactive in the planning of self-care that is tailored your needs. Trauma counsellors may benefit from this research by gaining a comprehensive understanding of the role of wilderness as a coping mechanism that counters vicarious trauma. You will not be compensated for your participation.

Confidentiality and Anonymity

Interviews will be audio recorded, and transcribed. Anonymity will be maintained through the use of a pseudonym of your choosing. Identifying information such as gender and age might not be removed from the quoted material if deemed relevant to the study. You will have an opportunity to remove any identifying information from the quoted material after the interview. As I am a graduate student, two people are required to view the transcripts: my thesis supervisor and myself. To ensure confidentiality, the research will transcribe all interviews. Confidentiality of the data will be protected through password-protected computer storage. Data will be reported in the form of a thesis and may be presented in the form of a published article(s) and/or a conference presentation(s). Files will be stored on a digital audio recorder, a USB external storage drive, and a desktop computer, all of which will be password protected. The function 'secure delete' will be applied to guarantee full destruction of the data. Print copies of the data will be stored in a locked filing cabinet in the researcher's office at the University of Lethbridge. Electronic and hard copy data will be deleted after five years.

Contact information

If you have any questions or comments, you are invited to contact me at:

martinek@uleth.ca

(403) 359-3318

Gary Tzu, my supervisor, is also available for questions at the following:

gary.tzu@uleth.ca

(403) 329-2644

You are welcome to verify the ethical approval of this study, or raise any concerns you might have, by contacting the Chair of the Faculty of Education Human Subjects Research Committee at the University of Lethbridge (403-329-2425).

Consent

Your signature below indicates that you understand the above conditions of participation in this study and that you have had the opportunity to have your questions answered by the researcher.

_____	_____	_____
<i>Name of Participant</i>	<i>Signature</i>	<i>Date</i>
_____	_____	_____
<i>Name of Researcher</i>	<i>Signature</i>	<i>Date</i>

A copy of this consent will be left with you, and a copy will be taken by the researcher.