

NATURE BASED CLINICAL SKILLS FOR PSYCHIATRISTS.

(NOTES BY ALAN KELLAS)

Psychiatrists can extend their skills in assessment and formulation to include nonverbal and nonhuman worlds. Contact with nature can promote attention, senses, mood regulation, playful curiosity, more secure attachments and meaningful purposes. Psychotherapeutic practices can be taken outdoors and involve nature as the third part of the therapeutic relationship/story/triad.

The natural world is a widely available and effective therapeutic resource, in different zones of living, while specific conditions and people may benefit from specialist interventions. But realistic expectations and careful risk assessment is still needed to gain the multiple social benefits of connecting to a broader inclusive sense of community, and the personal transformation that awe, wonder and gratitude can give us.

These are 10 key skills to consider developing:

1) SET THE CLINICAL SETTING to meet clients with nature in mind:

Where to meet? Dynamics of all meetings change to reflect the space and place: not only clinic vs home visit. In general, the more natural the environment, the less human social/power inequalities will dictate dynamics

Choosing the best space for a consultation: eg for clients who can't stay in the room (children, autistic, frightened, distractible/hyperactive) can mean conducting a consultation side-by-side, and/or meeting and talking outside. This can provide too many distractions and lack of focus, but a more relaxed dynamic and creative cues all around. (Many physio and OT assistants, recovery navigators already do this).

Within the space meaningful objects: a leaf or shell, an image or a view eg sky, trees, can provide a useful point of reference, and help bring nature (and the seasons) into the room. For those with communicative difficulties consider the presence of pets, or animals.

2) Sense your own STATE of BODY and MIND

(in order to pick up on other's) Rapport is built through breath, senses rhythms and movements in the room: Being fully present for the other person is firstly a physical skill of awareness and often helped by breath, movement and sensory alertness, especially if the person you are trying to help is stressed, in fight or flight mode or "freezing" physiologically. ...letting the room disappear, not bringing "the whole care system" into the room...beware the impact of writing or computer screens. Centring practices before any meeting.

3) Listen to Nature's STORY in the story:

Open empathic listening to a person's story may reveal important early life/family memories and experiences that include pets, or mention important trees/places/landscapes or formative experiences with nature, (ecological history); listen to (and sense) the language/words/images which refer to nature. For relaxation and visualisation: "special place"; wellness recovery plans on what makes me feel good.

Favourite questions:

- 1 Tell me about any important or favourite connections to nature in your life: particular place, landscape, creature or animal, plant or tree. This might be now or in the past: relaxing, significant, lifechanging or inspiring.
- 2 What was your childhood experience of nature? Any important family connections?

3 How much time do you spend outdoors/in nature each week?

4) Consider the WIDER (nonhuman) SYSTEM:

Be curious about who and what are the 'important relationships - not only people' in a person's life is a basic systemic or family therapist's task: this may include social media 'friends' and online communities, as well as absent and distant relatives, (including 'ancestors ') but may also include place, views, water, plants, trees, animals, especially pets; they may all make up sense of 'home'.

5) Mark and notice LIFE STAGES –

Consider the challenge of transitions, and how nature changes and transforms (adapt quest practices and Rites of passage): Extreme states of mind and behaviour can be part of a transition in life role: if this emerges in the story consider the possibility of supporting the (inner and outer) quest that might need to accompany or mark this. Hence having time to be immersed in nature and mark the change in life status, and have this witnessed/acknowledged, can be important personal and cultural practices.

6) Know your PLACE:

Connecting with nature in any or all of these different **SETTINGS or "zones" of living (a permaculture design concept): from daily domestic to occasional wilderness:**

Zone 1: Domestic homes: Technology (TV, Ipads, mobile phones etc: ? connect or disconnect,) Images/views, dogs cats birds fish, (Screens/Technology Virtual worlds) sounds, season celebrations, *Residential homes* and housing/tenancies may have common open green spaces, car free streets *Inpatients:* garden access (not top floor wards) star wards plant growing; change dynamic of staff and patients: green hour, cloud spotting/star gazing .
Gardens: herb beds, trees, birds, insect hotels, "sit spots".

Zones 2: Community spaces: Health walks, parks, allotments, rivers/coasts, orchards, city farms, .
Community conservation projects/groups; Adopt a tree, dig a pond, support frogs, bats, local food/farm/projects, citizen scientist projects.
Health Centres and Team Hubs; Day service and school/colleges: Sensory gardens, sit spots, green building.
Sense of place may also involve history/heritage as well as nature: memorials and cemeteries.
and

Zone 3 Care farms, rural and agricultural settings

Zone 4: Wildlife areas, seaside and nature reserves, parks, rivers : conservation groups to look after nature. Promote Nature recovery networks.

Zone 5 Untouched or least touched by humans: Wilderness: sea, woods, moors and mountain: night sky/space: wilder parts where the natural patterns and power can be seen and felt alongside the smallness of humans.

7) KNOW OF LOCAL SPECIALIST THERAPIES/GREEN CARE (and local opportunities and projects)

Forest school and outdoor learning options

Nature based psychotherapy; taking therapy outdoors;.

Walking for health; Green Exercise and Green Gym.

Horticulture Therapy. Woodland Wellbeing programmes.

Animal assisted therapy and care farms: therapy with horses, dogs

Green Care: conservation volunteering projects.
Water based therapies/Blue health: being in on and near water
Wilderness Work + rites of passage

8) SPECIFIC CONDITIONS AND PROBLEMS: Know about relevant Nature based interventions..

Children and adolescents: the role of nature - place, plants, trees, animals, wild - in child development, Nature deficit as a concept or disorder, challenges of screen play overtaking outdoor play, the links between sensory and motor development and enabling environments, the place of nature contact in parenting training, the creation and labelling of attentional, educational and learning disabilities by expectations, curricula and buildings; life transitions and the role of nature based rites of passage: Nature friendly whole school interventions: carefarming and forest schooling.

Palliative and end of life care in (hospital/hospice) nature settings; smells and sounds eg of water.

Profound multiple physical disabilities; daily life may not include views of nor access to nor time outdoors, may be dependent on carers: eg ever been wet in the rain, sat on grass, stared at stars etc sensory factors: smells vibrations swings water (hydrotherapy), tastes, textures.

Autistic spectrum: communicating and relations with animals; sensory and social isolation and screen addictions.

Attachment difficulties: recognise the role of place and animals and non-human attachments , notably adapting principles of therapeutic communities:

Loss and change therapies: special places and animals, seasonal mirrors, memorialising; Trauma: unbearable abuse needing more than human help (notice role of animals); rituals

Mood states: Anxiety and depression: emotional regulation of being in nature; Sit spots, Mindfulness in nature/garden; anger management through physical outlets.

Offenders: often craving Challenge and risk...and benefit from new and different environments to engage in positive and creative ways out of institutional settings. Arson and fire curiosity need specialist advice, to consider substance abuse ecodamage

Challenging Behaviour: Functional analysis and CB: asking what who when and then where: enquire into effects of being outside/favourite place/landscape/animals; Look for environmental triggers (eg sensory sensitivities or basic boredom/lack of meaningful occupation/problems with class/indoor or roombased activities,); practical land-based tasks can provide a place and setting to shine.

Dementia: pets, sensory work

9) CONSIDER Nature's DANGERS and RISKS/ PARTICULAR CHALLENGES/CONCERNS

Nature can be dangerous and contact may have unanticipated side-effects, positive and negative

Many people feel unsafe/unfamiliar/exposed/suspicious in natural dirty or wild settings. Carer's attitudes can be obstructive. Men and women may have very different experiences. Some people have strongly aversive feelings: dirt, animals (cultural taboos); phobias vs dogs.

Meeting strangers in the woods: for vulnerable adults? Unsupervised mix of service users with unknown and sometimes forensic histories. **Exposure/neglect/safeguarding:** how wild to be ?

Different risks to assess: 'health and safety' **knives; fire, marshmallow burns; eating wild; Tick born diseases. Physical access issues for those with mobility and sensory needs.**

Service Challenge of combining skills in mental health work with nature based approaches: what is adequate training or quality eg Mental health professionals work indoors; outdoor workers doubt their therapy skills and seldom have any therapeutic training. But the natural world really is a third facilitator, so much that is healing can happen without any human quite understanding why or how.

Take time to develop relationships: beware miracle claims and shortlived unsustainable 'openings'.

10) Nature for nurturing SELF-CARE:

Personal sustainability: time for stillness and silence, awe and wonder; 5 ways to wellbeing and 5 pathways to nature connectedness; take solo time for retreat and re-energising

Mental health teams: Apathy /burnout from collective stress: eg hotdesks and screen hours: need good environments for practitioners: plants in office, encouragement to bike, health walks; food time; outdoor team time. Nature provides common ground between many professions/carers.

Community advocacy: knowing and connecting to a locality and using professional voices can help promote safe inclusive and healthy neighbourhoods for marginalised and vulnerable people/service users, and so for everyone.

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Assessing your Connections to Nature

History: early memories, formative experiences, cultural influences, etc

1. What is your earliest memory of nature? What was your impression as a child of your family's relationship with nature? Your religion's? Did you have a sense of how your immediate ancestors related to nature?
2. How did the important adult figures in your early life relate to nature?
3. What were important experiences for you in nature in your first decade? In your second? In your adult life?
4. Did you have opportunities for frequent unstructured and unsupervised play in nature as a child?
5. Did you experience the loss/destruction of favorite natural places as you grew up? What was your reaction? Has this affected your life?
6. Did you experience any traumas in relationship to the natural world?
7. Did you have a secret place in nature? What was it like?
8. Were you allowed to go outside in strong weather or in the dark? And was it ok to get dirty or wet?
9. Did you have a vegetable garden?
10. What influences about nature did you pick up from TV, school, books, stories?
11. Describe the landscape around your house. Draw a map.

Feelings: unpacking the range of feelings about the natural world

1. Describe the experience in your life that gives you the most satisfaction
2. When and where do you feel safest in nature?
3. When and where do you feel unsafe in nature?
4. What natural places do you like the most? The least? Why?
5. What animals or other living beings do you like the most? The least? Why?
6. Do you have any phobias regarding the natural world?
7. Describe your level of comfort in the natural world. What do you avoid to maintain that level?
8. What experiences of death have you had (both human and non-human)?
9. Describe your relationship with time. Are you often in a hurry?
10. Have you ever been lost in the natural world? What happened?

Lifestyle: Pleasures, habits, hobbies, addictions, ideals

1. How much daily contact do you have with the natural world?
2. What is an ideal day for you?
3. What do you do to relax? What do you do to play?
4. How do you eat? What kind of food do you eat? What is your relationship with food?
5. Do you spend much time shopping? Do you enjoy it?
6. Describe the possessions you have which you value the most. And why do you value them?
7. Do you ever buy things you don't need, or that you don't even want? What kinds of things?
8. How do you relate to the weather? What is "bad" weather to you?
9. How do you relate to the seasons? Which do you like the most and least and why?

The Body as Nature

1. How were you born? What do you know about your early infancy?
2. Have you ever given birth or been present at a birth? Describe your feelings.
3. Describe how you feel when you see your own blood, and the blood of others.
4. Describe how you relate to cold and heat.
5. Where in nature does your body feel best?
6. Are there any bodily processes, needs, or sounds, etc., that make you feel uncomfortable or embarrassed?
7. What are your feelings about your body growing older? What are your feelings about your own dying process?