

Sailing adventure therapy for young people who have experienced psychosis



Background

Early Intervention in Psychosis services (EIPS) aim to engage and work with young people who have had a first episode of psychosis, to reduce the risk of further episodes by providing therapeutic optimism and evidence based biopsychosocial interventions. EIPS aims to go beyond a narrow 'medical' intervention focussed on symptom reduction and relapse prevention, by considering the young person's broader developmental needs, and trying to address family and systemic issues (McGorry, 2015).

While the EIP population is diverse, there are many widely shared, intersecting problems (Jones et al 2019). A history of developmental trauma and social difficulties is common. For many, life is restricted by a combination of factors such as social avoidance, paranoia, substance misuse, overprotection by parents or services, loss of motivation, stigma and social exclusion. Young people are often isolated, with little sense of meaning or purpose, low self esteem and confidence, and little or no routine or regular exercise. The physical and social contexts in which such lifestyles are embedded effectively become maintaining factors in a web of psycho-environmental inertia. Mental health services, with their focus on symptom reduction through tranquillisation, stress reduction, and risk avoidance, and can all too easily become part of this cycle, rather than offering a way out.

Sailing Adventure Therapy

Adventure therapy offers a radically different approach to these issues by offering opportunities for both young people and therapists to work outside their 'comfort zone' environments, in contexts which undermine habitual constraints and avoidances, and promote cognitive,

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I am a Consultant Clinical Psychologist, recently retired from my role as Clinical Lead for EIP in North Wales, and currently working a Research Director on the North Wales Clinical Psychology Programme. I have had the privilege of appreciating the sea and sailing throughout my life, and for me it has always been an important source of spiritual sustenance as well as enormous pleasure. I have long been interested in offering alternative and outdoor therapies for the young people I work with, and sailing adventure therapy offers an ideal opportunity to share my own experience and inspiration with both them and my colleagues. *Dr Jackson*

emotional and behavioural shifts. Rather than focussing on reducing symptoms of illness, adventure therapies primarily aim to nurture personal growth by offering manageable challenge, adversity, novelty, excitement and enjoyable activities, ideally in beautiful natural environments, and in the context of a supportive therapeutic relationship or group. The experience of coping with new challenges as part of a group is potentially potent in developing a sense of personal competence and social connection. The use of adventure therapy in EIP was first reported by Girard et al (2021).

Although it has not been previously used with young people with psychosis, sailing adventure therapy provides a special and unique way of offering these and further therapeutic opportunities. A total environmental shift is involved in living at sea on a sailing boat, away from the land and its associated stressors. Social interaction is continual and unavoidable, and for those with social anxieties, this provides a powerful level of exposure which can shift long held patterns of avoidance. Sailing involves comprehensive participation in shared activities, and a strong sense of literally being 'in the same boat' as everyone else – young people, leaders and professional crew alike. This may be challenging for highly 'boundaried' professionals, but is ultimately rewarding and productive in developing more authentic relationships between 'staff' and 'patients', as these distinctions are rapidly eroded at sea. For young people who struggle to engage in more conventional therapies sitting in a clinic, the context provides opportunities to talk through difficulties and problems, with each other and with therapists in the crew, and with an external focus which takes some of the pressure off the interaction.

The EIPS Voyage to Recovery 2021 Project

The North Wales EIPS first introduced outdoor therapy as a way to improve engagement, with the substantial sub-group of our caseload who find conventional therapy hard to engage with. Taking advantage of the natural

landscape of Snowdonia, we found that for some of the young people we work with, outdoor therapy sessions with a shared external focus provided by the activity of walking in a beautiful natural environment, were less daunting and more productive than clinic based sessions. From this basis, the potential benefits of adventure therapy became more apparent, and our first steps were prompted by an opportunity which arose for a sailing based adventure. This was so evidently constructive for the young people who participated that we repeated the experience annually, then broadened it to include EIPS from across Wales in a three week, 600 mile, Celtic Sea project, with an integral ethnographic study (Radford, Bartlett and Jackson, in preparation). The success of this venture led us to propose and develop the EIPS Voyage to Recovery, 2021.

For this project, we collaborated with EIPS from across the UK, to sail 1700 miles along the South and East coasts over 8 weeks with 70 young people who have experienced psychosis. We had originally planned a more ambitious circumnavigation of the UK, but in the event, the pandemic rendered that impractical. Each participating EIPS raised its own funding and made its own arrangements with the Cirdan Sailing Trust, which provided the boat and a professional crew.

Each EIPS brought up to ten young people in recovery from a first episode of psychosis for a week long voyage. All the young people were well known to their EIPS, assessed as being sufficiently stable, fully informed and consenting, with known risks and triggers identified. For each young person, the voyage represented a very substantial challenge, and this was discussed carefully with them in advance. For example, habitual substance users were committing to a week with no drugs. Everyone would be living in close proximity with others, and would be subject to a strong routine of early morning active starts, vigorous physical work and substantial communal meals. Seasickness was a likely risk, and hard work and physical tiredness was a certainty. Despite these considerations, the incentive of the opportunity for adventure was sufficient to engage plenty of young people and staff from each service.

Participating services were encouraged to run a programme of activities in preparation for the voyage, to develop resilience and group cohesion. Despite Covid restrictions, a wide range of group activities were provided by participating crews around the UK, including : mountain walks, ten pin bowling, paddle boarding, kayaking, climbing, BBQing and cooking. Each crew of young people were supported by up to five leaders from their EIPS, who fully participated in every aspect of the voyage, and all tasks were shared. Leaders were also available to support, encourage and provide therapeutic input for the young people as required. Across the project, the full range of EIP professionals participated.

Outcomes

In taking 70 vulnerable young people to sea for around 6 days each, some in very difficult weather conditions, there were no adverse incidents or acute psychotic episodes, and everyone returned safely. Our general observation is that psychotic symptoms are less troublesome when young people are occupied and engaged (and at sea – one young man commented – 'I've left my voices on the land'). We are in the process of collecting outcome measures from routine service data on quality of life and the recovery process. Qualitative feedback from the participating groups supports the key characteristics identified in the ethnographic study, summarised in table 1.

Whilst it is not possible to adequately summarise the range of qualitative data here, some illustrative feedback included :

- It has been life changing in many ways because I found myself for the first time in 5 years
- Because this was such a unique experience, it destroyed the loops I was in... it really worked for me... I am now 2 years ahead of the process (of recovery)
- Outdoors stuff is exhilarating, it makes me feel alive, I need more in my life!
- Being part of this has been one of the highlights of my career
- The greatest gift from the trip

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- Being part of this has been one of the highlights of my career
- The greatest gift from the trip was our feeling of teamwork and camaraderie.I was extremely proud of our patients who put in so much effort, conquered their anxieties and got to know each other. Goodbye was painful. As I reached out to shake hands with one of the Norfolk and Suffolk patients, his face crumpled. 'I want a hug', he said. Human relationships transcend everything we do.

After the voyage

All services which participated in this project made an enormous effort to do so, especially in the context of the Covid-19 epidemic. Whilst we are confident that this innovative project opens up a new and fruitful direction for EIPS, it also raises important questions which future projects will need to address. How much challenge and adversity is it ethical and therapeutic to offer, and when does this become counter-productive ? Which other areas of adventurous activity would be most fruitful to explore. How can we best support young people to translate the important gains they make whilst on board into sustainable benefits in 'real life' ? We are looking forward to extending and developing this project in the future, with further research built in to explore these and other questions.

Selected References

- Girard, C , Dubé E, Abdel-Baki, A, & Ouellet-Plamondon, C (2021) Off the beaten path: Adventure Therapy as an adjunct to early intervention for psychosis, *Psychosis*, 13:4, 338-348, DOI: 10.1080/17522439.2021.1901301
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- McGorry P. D. (2015). Early intervention in psychosis: obvious, effective, overdue. *The Journal of nervous and mental disease*, 203(5), 310–318. <https://doi.org/10.1097/NMD.0000000000000284>
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Table 1. Key characteristics of sailing adventure therapy

Imposition of purpose, structure and routine.

Joining a common purpose requiring tasks which set structure and routine

Opportunity for engagement learning and skill development.

Numerous new tasks and skills
Facilitation of engagement by crew
Positive social feedback
Trust and responsibility fostered by crew members

Removal of negative environment influences.

No access to drugs
Limited access to technology
Absence of other negative / threatening social / environmental influences

Novel Ocean Environment

Natural world and changing conditions (weather, sunsets, stars, landscapes, seascapes)
Encounters with Wildlife

Physicality

Physicality of tasks and interaction with constantly moving environment
Physicality of elements
Physicality of bodily responses

Social engagement

Inescapable social contact
Opportunity for discussion
Experiences of praise and giving praise
Music / games
Numerous shared experiences (adverse, exciting, enjoyable, novel)
'All in the same boat' (mental health professionals and young people)

Extreme physical and environmental challenge

Rough sea states (healthy risk)
Sea sickness
Inescapable nature of experience
Confined living conditions
Sleep difficulty

Cumulative aspects of the voyage

Leading to a shift in sense of self and world based upon cumulative experience and interaction of previous themes

(From Radford, Bartlett & Jackson, in preparation)