AN ADOLESCENT JOURNEY: EXPRESSIVE LETTER WRITING THROUGH A WILDERNESS ADVENTURE THERAPY PROGRAM

by

Ava M. Crump

A thesis submitted in partial fulfillment of the requirements for the degree of

MASTER OF SCIENCE

in

Family, Consumer, and Human Development (Marriage and Family Therapy)

Approved:

Dr. W. David Robinson
Major Professor

Dr. Linda Skogrand
Committee Member

Dr. Ryan Seedall
Committee Member

Dr. Mark McLellan
Vice President for Research and Dean of the School of Graduate Studies

UTAH STATE UNIVERSITY
Logan, Utah
2014
ABSTRACT

An Adolescent Journey: Expressive Letter Writing Through a Wilderness Adventure Therapy Program

by

Ava M. Crump, Master of Science
Utah State University, 2014

This qualitative phenomenological study explored the key themes of an adolescent journey during a wilderness adventure therapy program through expressive letter writing to their parents. Ten complete sets of letters (five boys and five girls) totaling over 400 pages were analyzed by four independent coders until saturation of themes were reached. There were five overarching themes that emerged from the data: impact of wilderness experiences, desires for improved relationships, apology and accountability, negative emotions, and positive growth and coping. These themes were presented in the chronological pattern that they appeared in the letters. The findings represent the adolescents’ experiences written in their own words. This research is the first of its kind and has implications for parents and adolescents who are considering this growing treatment modality of wilderness adventure therapy, and for professionals,
especially family therapists, who can use the pattern in assessment and as an intervention tool in working with families.
PUBLIC ABSTRACT

An Adolescent Journey: Expressive Letter Writing Through a Wilderness Adventure Therapy Program

Ava M. Crump

The objective of this research study was to discover what the key themes that mark an adolescent journey through a wilderness adventure therapy program as found in letters written to parents. Wilderness adventure therapy is a growing treatment modality well suited for adolescents. In the treatment program in this study, communication between family members is through letters exchanged weekly. Expressive letter writing is a therapeutic tool that has physical, psychological, and relational benefits.

Through qualitative phenomenological methodology, a team of four independent coders read and analyzed complete sets of letters for five male and five female participants in the wilderness adventure therapy program, which were systematically coded. Through consensus, findings coalesced into five overarching themes. The themes found were: impact of wilderness experiences, desires for improved relationships, apology and accountability, negative emotions, and positive growth and coping. Illustrative quotes from the participants are represented through the phases of the journey. This research fills a gap in the literature linking expressive letter writing to wilderness therapy as a treatment intervention. It has implications for parents and adolescents, professionals, and family therapists who can use these findings as an additional
assessment and intervention tool when working with families. There was no funding for this research.
DEDICATION

This study is dedicated to all of the adolescents I have had the privilege to work with and to those who I will work in the future and their families.
Used with permission: *Windmere Map Portrait* by Ed Fairborn
ACKNOWLEDGMENTS

I would like to thank my committee chair, Dr. Dave Robinson, for his constant encouragement through my personal journey of learning to be a researcher. Thank you to my other committee members, Dr. Linda Skogrand and Dr. Ryan Seedall, for your support. I would also like to thank Dr. Gordon Day for making available the research data set for the research in this thesis.

I give special thanks to my coding team, Krystal Hoffman, DJ Zolman, and Preston Kadleck, for their tireless hours of data coding; to my family, and to my friends who have supported me and helped me remember that I live in a world of can’t-do-it-alone.

Ava Crump
# CONTENTS

<table>
<thead>
<tr>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABSTRACT</td>
</tr>
<tr>
<td>PUBLIC ABSTRACT</td>
</tr>
<tr>
<td>DEDICATION</td>
</tr>
<tr>
<td>ACKNOWLEDGMENTS</td>
</tr>
<tr>
<td>LIST OF FIGURES</td>
</tr>
</tbody>
</table>

## CHAPTER

I. INTRODUCTION ................................................................. 1

II. LITERATURE REVIEW ............................................................. 4

- Family Systems Theoretical Framework ........................................ 4
- Parent-Adolescent Relationship .............................................. 6
- Adolescence ........................................................................ 7
  - Strengths in Adolescence ..................................................... 8
  - Struggles and Diagnoses in Adolescence .................................. 10

- Therapeutic Options for Parents and Adolescents .............................. 11
- Wilderness Therapy Programs .................................................... 12
  - Wilderness Therapy Defined ............................................... 12
  - Types of Wilderness Therapy and Population Served ....................... 13
  - Advantages of Wilderness Therapy ......................................... 14
  - Disadvantages of Wilderness Therapy ..................................... 16
  - Effectiveness of Wilderness Therapy ..................................... 16

- Wilderness Adventure Therapy ................................................. 17
  - Advantages of Wilderness Adventure Therapy ............................ 18
  - Disadvantages of Wilderness Adventure Therapy ......................... 19

- Parent-Adolescent Relationship at a Wilderness
  - Adventure Therapy Program .................................................. 20
- Letter Writing ........................................................................ 21
Positive Growth and Coping ................................................................. 55
Desire for Improved Relationships ....................................................... 58
Negative Emotions ............................................................................. 60
Apology and Accountability ................................................................. 61
Conclusion of the Middle Phase ......................................................... 65

The End Phase ....................................................................................... 65
Positive Growth and Coping ................................................................. 66
Negative Emotions ............................................................................. 68
Conclusion of the End Phase ................................................................. 70

Case Examples ................................................................................... 70

Vignette 1: Ingrained Patterns Impede Progress .................................. 71
Vignette 2: Healing Through Letter Writing ........................................ 72

Summary of Findings .......................................................................... 74

V. DISCUSSION .................................................................................... 76
An Adolescent Journey ........................................................................ 76
The Arrival ............................................................................................. 76
The Themes of the Journey ................................................................. 77

Limitations and Future Research ....................................................... 82
Implications and Unique Contributions ............................................. 84
Gaps in the Literature ......................................................................... 84
Implications for Adolescents ............................................................... 85
Implications for Parents .................................................................. 88
Implications for Wilderness ............................................................... 90
Therapy Program Professionals .......................................................... 90
Implications for Family Therapists ..................................................... 93
Speculations ........................................................................................ 96
Conclusion ............................................................................................ 98

Researcher Observations ................................................................. 99
Conclusion ........................................................................................... 100

REFERENCES ...................................................................................... 102
<table>
<thead>
<tr>
<th>Figure</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The panoramic view of the phases and themes within each phase of the journey.</td>
<td>46</td>
</tr>
<tr>
<td>1a. An adolescent journey through the beginning phase.</td>
<td>47</td>
</tr>
<tr>
<td>1b. An adolescent journey through the middle phase</td>
<td>55</td>
</tr>
<tr>
<td>1c. An adolescent journey through the end phase.</td>
<td>66</td>
</tr>
<tr>
<td>1. The panoramic view of the phases and themes within each phase of the journey.</td>
<td>71</td>
</tr>
</tbody>
</table>
CHAPTER I

INTRODUCTION

The family is the building block of society. When families thrive, it creates a positive impact on society, and when they struggle it has a negative effect. Problems inevitably arise in families and intervention strategies benefit individuals, families, and ultimately societies. Family systems theory provides a context from which to view families. Each individual within a family has influence on the other members of the family unit (Zabriskie & McCormick, 2001). This is especially true at the transitional time of parenting an adolescent son or daughter. Studying not only the individual adolescent in a family, but also the relationships between parents and their adolescent is an important paradigm shift from individual therapy intervention methods to more systemic thinking (Magnavita, 2012).

Adolescents undergo physical and mental changes as well as generally gain more independence from their parents. They are presented with opportunities for growth and difficulties while navigating the transition, which have an impact for adolescents individually, and on the parent relationship (Christie & Viner, 2005). When adolescents are successful, parents are usually positively affected, and when adolescents struggle, their parents are usually negatively impacted.

At times, parents may become overwhelmed with difficulties they face with their adolescent son or daughter and may seek outside help to remedy those problems. Help may come in the form of traditional therapy. One growing treatment option for parents is to select a high-impact, short-term (e.g., 1-3 months) wilderness adventure therapy program (Russell, 2001). Many families choose wilderness adventure therapy to help
their adolescent build on their strengths through challenge activities as well as work through the difficulties they are experiencing individually and within his or her family with the aid of staff and a licensed therapist (Davis-Berman & Berman, 1994; Harper, 2009). While at the wilderness program, the adolescent can have a meaningful separation with time to ponder life choices in his or her past as well as develop skills to enhance growth (Harper, 2009).

When adolescents participate in the wilderness adventure program, they receive individual and family therapy from a qualified therapist. However, the primary source of communication between parents and adolescents happens through letters that are exchanged weekly. Expressive letter writing has been shown to have many therapeutic benefits (Mosher & Danoff-burg, 2006). The adolescents communicate their experiences in the wilderness program with their parents through letter writing, which can be a powerful therapeutic tool (White & Epston, 1990). Through the medium of expressive letter writing, parents and their adolescent correspond and work through their relationship difficulties and other challenges. These letters can become a permanent record of progress that the adolescent experiences in the wilderness program (Hirshfield, 1997).

Letter writing can slow down the often-difficult communication process and allow both parents and their adolescent time to reflect on one another’s perspective and eventually align their goals and experience the potentially therapeutic journey together. These important letters can document the interpersonal and intrapersonal themes of this journey of which is the object of this study.
There has never been any research which links the benefits of expressive letter writing with experiences of adolescent writers at a wilderness adventure therapy program nor has the combined process revealed the journey that an adolescent experiences. This study fills this important gap in the literature also indicating what the journey is like and how families and helping professionals can influence the therapeutic process.

My objective was to capture the lived experience of these adolescents. I used a phenomenological research design to analyze the letters and explore the process that occurred at the wilderness adventure therapy program for each adolescent through their letter writing. The overarching research question that I explored is: What is the journey during the lived experience of adolescents participating in a wilderness adventure therapy program as documented via adolescent letters to their parents? A greater understanding of this journey and its implications is explained throughout this research.
CHAPTER II
LITERATURE REVIEW

My objective was to explore what the key themes were during the lived experience of an adolescent journey of participation in a wilderness adventure therapy program as documented via adolescent letters to their parents. I researched current literature to provide a foundation to show the importance and necessity of this study. I will explain the following topics related to the research objective in detail: family systems theory, parent-adolescent relationship, adolescence, therapeutic options for parents and adolescents, wilderness therapy programs, wilderness adventure therapy, parent-adolescent relationship at a wilderness adventure therapy program, and expressive letter writing. The following literature, cited within the context of each of these topics, is foundational to understand the necessity and value of this research.

Family Systems Theoretical Framework

Systems are a larger and valuable scope from which to look at phenomena as compared to an individual viewpoint. Adolescents are a subsystem within the family, and according to systems theory it is important to consider how interrelated parts of the family affect one another (von Bertalanffy, 1968). General systems theory provides a lens from which to consider the adolescent and his or her family and how it is relevant to this study.

General systems theory is a professional worldview that provides a framework for assessment and intervention with family systems. It began when von Bertalanffy (1968)
attempted to combine systems thinking and biology to a more universal theory of living systems. It holds that every system is a subsystem of larger systems (Davidson, 1983). For example, a state or province is a smaller jurisdiction within a nation, or an organ is a smaller subsystem within the body. A system is a “bounded set of interrelated elements exhibiting coherent behavior as a unit,” just as a watch is more than a collection of cogs and springs (Constantine, 1986, p. 50). To understand a system, one not only needs to understand the individual parts, but how the parts are interrelated (von Bertalanffy, 1968).

Each family member is a part of a family system, and valuable information is found within each person in a family individually, as well as relationship dynamics between family members. Both visions give increased insight: the greater panoramic vision as well as an intricate view of the family and its members. Family systems theorists hold that “families are goal directed, self-correcting, interconnected systems that both affect and are affected by their environment and by qualities within the family system itself” (Zabriskie & McCormick, 2001, p. 281). Looking at the family as a whole unit working together gives the impression that the whole is greater than the sum of its parts (Goldenburg & Goldenburg, 1985; von Bertalanffy, 1968).

Family systems theorists gave a language for describing the complicated nature of family relationships. They suggested that each individual within a family has an effect on the whole, while the whole family has an effect on the individual (White & Klein, 2008). Individual successes, such as a promotion at work, affect the whole family whereas, individual struggles such as addiction, also inherently affects the whole. Therefore, from a systems perspective, examination of family variables such as the adolescent journey
through a wilderness adventure therapy program likely will provide valuable insight into both the family and the individual (Ward & Zabriskie, 2011). Bowen (1978) asserted that “each of us is best understood not as an individual psychological unit, but as a functional part of an emotional unit—the family” (p. 188).

Family systems theory was a novel perspective and a paradigm shift from the individual psychology (Magnavita, 2012). This systemic worldview emphasizes that therapeutic change occurs through social relationships, and that cause for problems is nonlinear or of circular causality within the confines of significant relationships (Cottone, 1991). Family therapy has its roots in systems thinking, which is thinking of the family as a shift from the focus on the individual to the relationship patterns between family members. For example, the parental subsystem and the adolescent subsystem of a family bi-directionally influence one another. From a systems perspective, problems are a larger contextual issue and do not lie inside the individual (Cottone, 1991). For this reason, a closer look into the parent-adolescent relationship interaction is warranted.

**Parent-Adolescent Relationship**

One important aspect of the family system is the parent-child relationship. Parenting can be a difficult and rewarding opportunity at any age, but especially during adolescence. Adolescents’ relationships with their parents undergo transitions as the adolescents grow more independent. Despite this change, the role of parents remains very important and is often underestimated (Schofield & Beck, 2009). Some adolescents maintain good working relationships with their parents. Adolescents and their parents with open communication can provide emotional support, express caring, and use healthy
parental controls (Crockett, Brown, Russell, & Shen, 2007). In healthy parent-adolescent relationships, there is a proper balance between support and autonomy. The presence of parental support and monitoring of activities is a strong predictor of adolescent identity achievement (Sartor & Youniss, 2002).

Some parents and their adolescent have a troubling relationship as a result of difficulties that arise during the transition period in the second decade of life. There may be differences of opinion and conflict. Limits set by parents may promote tension as the adolescent negotiates the struggle between developing his or her autonomy while continuing to have close bonds with his or her parents (Luthar, 2006). Adolescents’ developing, yet often immature cognitive capacities further complicate the issue of responsibility for decision-making (Patton & Viner, 2007). Sometimes adolescents struggle to communicate their concerns with their parents (Zhiwen, Xiaoming, & Stanton, 2011). Despite this, most parents show love and concern for their adolescents at times when they struggle and seek ways for things to get better. More understanding about adolescents’ personal journey of triumphs and difficulty through this transitional time can give clues as to how parents and other professionals can intervene with the system.

**Adolescence**

Adolescence is a time of transition from childhood to adulthood. It is marked with physical and psychological maturation. Adolescents deal with the transition through puberty (Ellis, 2004). Social ties in adolescence become more important (Johnson, Crosnoe, & Elder, 2011). Identity formation is one of the key tasks of adolescent development (Erikson, 1968). Adolescents also experience, ideally, a healthy relational
transition from more dependence to more independence from their parents (Robinson, Power, & Allan, 2011). This process has a direct effect on the family as a whole. As adolescents grow into young adults, they have the opportunity to develop their strengths, but they may also struggle in a variety of ways.

**Strengths in Adolescence**

Focusing on adolescent strengths can have a positive impact for both adolescents and their parents. Adolescents can develop strengths to help them thrive. Similar to the efforts of professionals to be able to classify mental disorders found in the Diagnostic Statistical Manual or DSM-V (American Psychiatric Association, 2013), in order to assess and diagnose, Martin Seligman and Christopher Peterson have identified and classified the positive psychological traits of human beings in the Character Strengths and Virtues or CSV Handbook (Peterson & Seligman, 2004). They have identified 6 core virtues made up of 24 character strengths. These include wisdom and knowledge, courage, humanity, justice, temperance, and transcendence. Despite problems each adolescent has resources for growth and change and can be identified as having some of these specific strengths and virtues.

Adolescents have great potential given their talents, interests, and strengths. Traditionally, more resources are dedicated to remediating the incapacities of adolescents rather than increasing their more positive characteristics. I believe that a shift away from viewing young people by their deficits and risks begins with a vision of an adolescent fully able to explore and contribute to the world (Schneider, Bugental, & Pierson, 2001).
Energy is then spent teaching and engaging youth in productive activities rather than curing or treating them for maladaptive behaviors (Damon, 2004).

Reducing compromising behaviors is a developmental success; however, it is incomplete. There is value in developing the attributes, skills, and competencies to help an adolescent thrive because an adolescent that is problem-free is not necessarily one that is thriving (Lyons, Uziel-Miller, Reyes, & Sokol, 2000). Beyond problem prevention, there should be opportunities for support and development. When the focus is shifted to an adolescent’s strengths and skill development, it naturally mitigates psychopathology and facilitates positive growth (Park, 2004).

Adolescence is an exciting time of growth and development. During this time, adolescents can develop strengths in a variety of areas. Some adolescents excel in school and have bright academic futures (Frey, 2011). Adolescents can develop talents, skills, and abilities that will shape their future professions and interests. Adolescents can develop a sense of morality and make decisions based on their values. They can develop a sense of spirituality or connection with a higher power, which is shown to increase resilience and coping (Kim & Esquivel, 2011). One of the primary tasks of adolescence is to develop a sense of identity (Erikson, 1968) and derive meaning and purpose for their lives (Tavernier & Willoughby, 2012). Many adolescents achieve these tasks. I will outline a way parents and family therapists can use a strengths focus as an intervention resource. When adolescents are resilient, their families are positively affected, but the opposite is true as well.
Struggles and Diagnoses in Adolescence

Despite parents’ recognition and consideration of the strengths of their adolescent son or daughter, they cannot be oblivious to the problems that the parents and adolescent may face, and when they are it is problematic. Most parents are acutely aware that their adolescent son or daughter is not doing well. This has a negative effect on the family system.

Adolescents may struggle for a variety of reasons. They may have psychological disorders, experience interpersonal difficulties, act out behaviorally, or experience trauma or loss. Some psychological problems adolescents face include mood disorders such as depression (Costello, Erkanli, & Angold, 2006) or bipolar disorder (Dusetzina et al., 2012), eating disorders (Forman-Hoffman & Cunningham, 2008), or personality disorders such as borderline and antisocial personality disorders.

Some adolescents experience interpersonal difficulties, including physical, emotional, or sexual abuse (Johnson, 2004) or early sexuality (Smith, 1997). Adolescents may also experience behavioral struggles, such as addiction, self-harm, or suicide ideation. There are many types of addiction ranging from substance abuse (Ilgen et al., 2011) to video games (Young, 2009) to pornography (Haney, 2006). Other behavioral struggles include oppositional defiant disorder.

Some adolescents struggle with physical, emotional, or mental developmental issues. They may struggle with learning disabilities and failure to thrive in school (Pastor, Reuben, & National Center for Health Statistics, 2008). Some adolescents struggle with the instability of moving a lot (Raviv, Keinan, Abazon, & Raviv, 1990) or coping with
losing people close to them (Wright, 2012). Strengths and struggles in adolescents is a common occurrence and acknowledging this provides additional insight about adolescents and the issues they face. From the perspective of a family systems framework, when the adolescent struggles with these things it usually affects the rest of the family negatively, and they often seek outside help in the form of therapy.

**Therapeutic Options for Parents and Adolescents**

When adolescents experience difficulties, often it is very evident to their parents. Most parents want their adolescent to thrive and have a positive relationship with them. Often adolescents’ relationships with their parents are strained, and their parents seek help in parenting their youth but are often bewildered on how to reach their goals. Parents may be overwhelmed with the task, so they seek help through therapy.

Therapy is treatment intended to heal, prevent, and/or relieve a disorder, problem and/or conflict, and there are countless modalities in which therapy can take place. Many parents and adolescents seek therapy to help with their problems. Some common options that families have to choose from that have been shown to be effective in some cases include individual therapy (Roth, 2011), family therapy (Carr, 2009), or residential treatment programs (Hair, 2005). This study will be most useful for adolescents, parents of adolescents, and professionals working with families. The treatment option that will be explored in this study are people who chose to use wilderness therapy as the treatment modality for their family.
Wilderness Therapy Programs

With growing popularity, alternative forms of therapy are becoming more widely accepted as effective treatment modalities. Traditional forms of therapy are usually an indoor, verbal, and cognitive activity with the relationship between the client and the therapist at the center (McLeod, 2003). Talk therapy is often inadequate for the adolescent due to their stage of development (Butler, 2008).

Wilderness therapy is a subset of adventure therapy, which stems from the philosophy and theoretical roots of experiential education—learning through activities (AEE, 2014). Wilderness therapy is an alternative option to the other therapy treatment approaches that have long been viable options for residential treatment of troubled adolescents, and there are often fewer stigmas attached (Davis-Berman & Berman, 1994; Durkin, 1988). Wilderness therapy helps adolescents with a variety of clinical concerns (Harper, 2009). It can be an organized, methodological, and systematic approach to working with troubled youth. I will define and describe types of wilderness therapy and the populations they serve.

Wilderness Therapy Defined

Wilderness therapy has similar objectives as that of traditional therapy to foster healing, prevent or relieve effects of mental disorders, problems, and conflicts as well as build strengths and resilience. Wilderness therapy reveals and addresses problem behaviors, fosters personal and social responsibility, and enhances emotional growth of adolescent clients (Russell, 2003). One future goal of wilderness therapy is that it be
developed into a prevention program for at-risk youth as opposed to just a remedial intervention (Butler, 2008).

There is an array of definitions and terminology found in the wilderness therapy literature. There are more broad definitions of wilderness therapy, which can range anywhere from “wilderness experience programs” to “challenge courses” or “adventure based therapy,” and often these descriptions are used interchangeably with wilderness therapy (Friese, Hendee, & Kinziger, 1998; Russell, 2001).

Davis-Berman & Berman (1994) described an empirically based theoretical framework for wilderness therapy. They define wilderness therapy as a short-term program that employs use of traditional therapeutic techniques (including group therapy) in an out-of-doors setting, and which utilizes adventure pursuits and other activities as modalities to enhance personal growth (Davis-Berman & Berman, 1994).

For the purpose of this study wilderness programs are defined as involving the following characteristics: (a) careful selection of specific adolescent participants based on a clinical assessment, (b) leaders create an individual treatment plan for each participant that includes involvement in outdoor adventure pursuits, and (c) qualified professionals aim the program at creating change in target behaviors and providing individual and family therapy with subsequent evaluations of the adolescent’s progress (Davis-Berman & Berman, 1994).

Types of Wilderness Therapy and Population Served

Within the domain of wilderness therapy, there are several different types of wilderness programs from which to choose. Two examples are primitive wilderness
therapy, which incorporates skills such as bow-drill fire and survival skills, and wilderness adventure therapy, which has an emphasis on outdoor recreation skills (e.g., rock climbing, mountain biking, etc.). Both take place in an out-of-doors setting. Other key components of wilderness therapy are an unfamiliar environment, group living with peers, individual and group therapy under supervision of licensed professionals, and educational curricula (Russell, 2003). Some programs work from a basecamp model, which incorporates traditional therapeutic approaches and involves leaving the basecamp for wilderness expeditions then returning back to the basecamp after a week (Russell, 2003).

Most frequently, wilderness therapy is targeted for at-risk adolescents and their families (Bettmann, Lundahl, Wright, Jasperson, & McRoberts, 2011). Many therapists identify them as the most difficult population to engage in therapy (Hanna, Hanna, & Keys, 1999). At admission client samples resembled symptoms similar to inpatient samples, and on average were significantly reduced (Russell, 2003). Private placement versus adjudicated placement in wilderness programs, according to one study, was five to one in wilderness programs (Russell, 2003).

**Advantages of Wilderness Therapy**

There are several advantages that wilderness therapy professionals can offer. Bettmann, Russell, and Parry (2013) found that adolescent participants did not necessarily even want to change in order to do so, and they found that through the process many adolescents gained abstinence-focused coping skills, perhaps an effective treatment modality in many cases. Wilderness provides the key components necessary for
change such as physical exercise, primitive wilderness living, peer feedback facilitated in counseling sessions, and therapeutic relationships with therapists and guides (Russell & Phillips-Miller, 2002).

The wilderness treatment model has even been shown to be productive in the treatment of budding personality disorders and characterological change (Clark, Marmol, Cooley, & Gathercoal, 2004). One obvious and powerful advantage of wilderness therapy is the setting in which it happens.

The wilderness setting is a novel environment to experience therapy. Nature has potential as a therapeutic presence away from the bustle of everyday life (Jordan, 2009), and there is an evidence base for incorporating nature contact as a promoter of public health (Largo-Wight, 2011). This unfamiliar living environment can take adolescents out of their regular routine and give space for reflection and development of supportive relationships (Werhan & Groff, 2005).

Treatment interventions can be very effective in this setting. Hill (2007) found that the wilderness therapy setting maximizes the tendency for adolescents to spontaneously disclose in environments outside the therapy room. Although one article raises the question as to whether the interventions can be contrived in a more urban location and questioned the wilderness specific setting (Rutko & Gillespie, 2013), Berger and McLeod (2006) proposed that therapy conducted in creative ways and addressing nature as not only the setting, but as a partner in the therapy process, invites therapists to open the doors and explore with their clients in nature.
Disadvantages of Wilderness Therapy

Issues surrounding the ethics of wilderness therapy programs have come into question with reputation of “boot camp style” programming or poor risk management. There are inherent risks of wilderness therapy with sometimes unpredictable conditions. However, recent research validates that when specific wilderness therapy protocols are in place, it is recognized as an effective and ethical treatment option (Becker, 2010).

The diversity factors are not very well addressed in the literature and there are only a few articles that have studied the parent-perspective of wilderness therapy. Most of the research conducted is done on white clientele and Eurocentric values (Maguire, 2009) and in some cases may be culturally problematic or inappropriate (Parzen, 2000). There is very little evidence supporting the effectiveness of wilderness treatments with parents of adolescents (Erickson, 2004). Wilderness therapy programs need to adjust programming decisions to mitigate disadvantages and improve effectiveness of treatment.

Effectiveness of Wilderness Therapy

Standards of care and best practice have helped wilderness therapy gain more credibility. These were made through the establishment of consistent research outcomes and sharing of the critical database and critical process (Outdoor Behavioral Healthcares [OBHIC], 2014). Bettmann (2012) examined 34 studies, and she found an overall medium effect size suggesting the overall effectiveness of this treatment from this research. According to a meta-analysis, wilderness therapy has been shown to be effective in enhancing self-esteem and self-concept, improving interpersonal skills, and promoting behavior changes (Bedard, Rosen, & Vacha-Haase, 2003).
Specific diagnoses and problems can be addressed in wilderness settings and in the research. Wilderness therapy has shown some effectiveness with severe emotional and behavioral problems (Hagan, 2002). Adolescents diagnosed with oppositional defiance disorder have been treated effectively with wilderness therapy, even when relationships with parents have deteriorated (Hillstead, 2004). Positive outcomes were maintained for a 12-month longitudinal study although there was some deterioration in drug and alcohol use and some aspects of family life (Harper, Russell, Cooley, & Cupples, 2007). Also, emphasis on specific programmatic decisions can enhance outcomes in that area. Griffin (2003) found that adding a spiritual component to adventure-based programming enhanced the spiritual growth of adolescents.

**Wilderness Adventure Therapy**

Similar to treatment at wilderness therapy, in wilderness adventure therapy adolescents have the potential to build on strengths through adventure activities and to remediate struggles through therapy they will receive. This is a powerful combination of enhancing strengths and supporting adolescents where they need to improve. Weston, Tinsley, and Dell (1999) defined wilderness adventure therapy as a systematic group intervention in a natural setting that uses therapeutic experiences within the context of activities that contain elements of a real or perceived risk to facilitate improved behavioral or psychological functioning.
Advantages of Wilderness Adventure Therapy

It is obvious that one benefit of wilderness adventure therapy is the novel environment of the natural world and all of the inherent therapeutic aspects. Two other factors that aid in the effectiveness of this form of therapy are the experiential approach and the adventure and challenge components of this type of therapy.

**Experiential approach.** Many adolescents and people in general have a tendency to learn better both visually and kinesthetically as opposed to just auditory learning (Honigsfeld & Dunn, 2009). Wilderness therapy is a hands-on approach to learning in this environment, which lends itself well to work with adolescents. It is based on the assumption that people learn best by doing (Kimball & Bacon, 1993). Hands-on adventure experiences engage clients physically, mentally, and emotionally as active participants. Adventure experiences elicit motivation, provide exposure to real and meaningful natural consequences, offer a venue for reflection, and provide an opportunity for generalization of skills and experiences to life outside the therapy program (Norton et al., 2014). Within experiential education these characteristics help adolescents integrate and transfer the process (Gass, 1993). Often remembering certain words that are said is difficult, but frequently an overwhelming mastery experience, or the belief among members of a group that together they can overcome whatever challenges come their way (Bandura, 1997). This often creates a feeling that is hard to forget.

**Adventure component.** Adolescents are challenged to develop skills related to outdoor adventures such as rock climbing, backpacking, or mountain biking. While doing adventure activities, adolescents try new things and apply learning to real-life experiences
(Sheldon & Arthur, 2001). One specific adventure intervention, backpacking, is a valuable therapeutic element that improved emotional, cognitive, and physical well-being (Caulkins, White, & Russell, 2006). Adventure activities help adolescents feel empowered through learning they can do hard things and this assists in identity development.

**Identity development through challenge.** Adolescents engaged in adventure have the opportunity to explore whom they are and to make meaningful accomplishments through challenge activities (Duerden, Widmer, Taniguchi, & McCoy, 2009). Challenge is a key to facilitation growth and change and a major component of wilderness adventure therapy. When adolescents experience a state of disequilibrium due to stepping out of their comfort zone, they have an opportunity to practice healthy coping skills to regain equilibrium (Durr, 2009). Facilitation of optimal challenge can produce positive affect and consistency with theoretical and practical foundations of adventure therapy (Durr, 2009). Within this wilderness adventure therapy framework is the support of guides and therapists to facilitate and help the adolescents’ and their parents’ development and address their therapeutic concerns.

**Disadvantages of Wilderness Adventure Therapy**

Along with wilderness therapy, there are inherent risks and ineffective risk-management techniques used by guides can pose ethical concerns. Another difficulty with wilderness adventure therapy is that the adventure therapy process is hard to measure and know exactly what elements contribute to positive change (Durr, 2009).
Measuring program fidelity (how well specific interventions were implemented and planned) can be complex and problematic (Tucker & Rheingold, 2010). Execution of program fidelity requires specific skill set and training. Despite these potential disadvantages, when wilderness adventure therapy is done right the powerful experience is hard to forget.

**Parent-Adolescent Relationship at a Wilderness Adventure Therapy Program**

In wilderness adventure therapy, parents are encouraged by the potential changes that individual, group, and family therapy in the wilderness setting can make in their family as their son or daughter participates in the program. Often, when parents are to the point of considering a wilderness adventure therapy program, the situation is a crisis, and parents look externally for help with their situation (Harper, 2009). Sometimes the situation is so challenging that parents employ a transport team to take their child to the wilderness program without the adolescent’s foreknowledge. The parents may fear that if the adolescent knew he or she was going to wilderness therapy that he or she may do something impulsive. However, other parents and adolescents have carefully weighed the options and mutually agree that wilderness therapy is best for their situation.

One qualitative study shed light on the process of therapy, which took place in a short-term wilderness setting. Harper (2009) identified major themes of parents and their adolescent enrolled in a wilderness program. These included the following: a family crisis abated where the family’s circumstances felt extremely unstable and many youth were enrolled as a final option after clinical, community, and educational interventions.
Meaningful separation happened when both parents and youth experienced physical and emotional distancing to allow time for reflection. With wilderness staff and therapists as mediators, parents and adolescents began the communication and therapeutic process. Mixed emotions were a theme for both parents and youth. Parents expressed a wide variety of emotions about their decision, but were generally satisfied with family change and hopeful for the future. Finally, new beginnings/not fixed was a time when the families recognized a new opportunity wilderness had given them, yet, it needed to be tested in the home and community environment (Harper, 2009).

During the adolescent’s time in the wilderness adventure therapy program, parents and their adolescent son or daughter’s main method of communication with one another is written letters exchanged between parents and adolescents. This is a unique method of communication in comparison to typical daily interaction between parents and children. I will discuss the importance of expressive letter writing as it is one mechanism to elicit therapeutic change.

**Letter Writing**

Communication from adolescents to parents through letters is a radical change from the typical communications and interactions that parents and adolescents experienced at home. This change can facilitate a new interaction pattern between them. Letter writing is the oldest form of literature (Dawson & Dawson, 1909). Letters link stories from the past with present situations and future possibilities (Goldberg, 2000). This means that an adolescent has the capability to assess his or her past situations and
write to parents about current emotions and hopes for the future. This includes positive changes the adolescent hopes to see in their relationships with parents.

Many adolescents and their parents have difficulty communicating especially concerning conflicting topics. Letter writing can be used to overcome people’s difficulties with verbal communication (Riordan, 1996). There are benefits of letter writing in therapy because it is indirect communication that may be less threatening than face-to-face therapy dialogues (White & Murray, 2002). The writer can take time to carefully construct the messages he or she wished to communicate and desired the recipient to hear. The adolescent may write with hope that his or her parents will understand the written message as intended while writing.

Both the reader and the writer’s messages can impact one another. Letters help parents, adolescents, and their therapist align their goals (Goldberg, 2000). This alignment is often something the adolescents and their parents did not experience prior to the wilderness program.

**Letter Writing as a Therapeutic Intervention**

Letter writing has been used for a variety of purposes including therapy. Letters are a therapeutic modality that has been used with adolescents in treatment (Goldberg, 2000; White & Murray, 2002). There are many different ways letters have been used as an approach in therapy. These may include letters from therapists to clients or letters between therapists and clients, letters of forgiveness, letters between family members, letters of invitation, redundancy letters, letters of special occasions, letters of reference, counterreferral letters, letters of prediction, and letters from clients to themselves in the
present or future (White & Murray, 2002). Goldberg (2000) and Epston (1994) have asserted that therapeutic letters can be a highly effective component of the therapeutic process. There is an abundance of literature on letter writing as a therapeutic intervention; however, the focus of this study is primarily on one type of letter writing: expressive.

**Expressive Letter Writing**

Expressive letter writing is the sharing and writing about emotional experiences. Throughout the letters adolescents disclose to their parents their stream-of-consciousness thoughts and feelings. The process of writing itself is therapeutic because it helps the writer makes sense of and disclose his or her thoughts and feelings. Disclosure phenomenon that happens during expressive letter writing has been shown to improve cognitive and linguistic process and better health (Pennebaker, 1997). Letters written in an extended and focused period of one-hour time as well as time taken daily to write can be emotionally demanding. A one-hour increment of time spent writing can be as effective as writing 15 minutes daily for 3 days (Chung & Pennebaker, 2008).

Expressive letter writing is a vehicle to meaningfully and intentionally communicate. Between writing and receiving letters the writer and recipient have time to reflect on the letters as desired (Sloman & Pipitone, 1991; White & Murray, 2002). With the intentional and slowed communication, people have an opportunity to take ownership of their actions and can be a powerful therapeutic tool for these relationships. The combination of these important letters and time for messages to permeate can be motivating for positive change.
Benefits of Expressive Letter Writing

Many positive benefits can come from letter writing. Many of the adolescents, despite being young, have experienced a variety of severe stressors. Therapeutic letters foster hope, self-esteem, and self-care practices, outcomes associated with recovery and wellbeing (Freed, McLaughlin, Smithbattle, Leanders, & Westhus, 2010). Some of the specific research-targeted benefits of expressive letter writing include physical, psychological, and relational improvements.

Physical. Links between expressive letter writing and physical health are very well supported in the literature. One health benefit of expressive letter writing was that participants reported positive sleep-related outcomes in comparison to control groups (Arigo & Smyth, 2012; Mosher & Dannoff-burg, 2006). Also, when unpredictable crises happen, expressive letter writing can help families and individuals make sense of the situation and this reflective process can lead to better physical health. For example, one study found that recently unemployed professionals who wrote expressive letters about the difficulties in their old jobs found employment faster than non-writers (Spera, Buhrfeind, & Pennebaker, 1994). There are many advantageous physical and psychological health effects of expressive letter writing, which may also buffer individuals from negative health outcomes associated with interpersonal stressors (Mosher & Danoff-burg, 2006).

Psychological. Psychological benefits of expressive letters can help a variety of people with various problems. Letter writing is a useful therapeutic tool for people who have suffered trauma or grief (Riordan, 1996). Writing expressive letters in third person
may be an especially fitting technique for recovering from traumatic or stressful events (Andersson & Conley, 2013). It has been an effective intervention used for specific problems like self-harm behaviors (Hoffman, Hinkle, & Kress, 2010). Additionally, people with high scores on mindfulness measures found expressive letter writing helpful when writing about expressive traumatic events (Poon & Danoff-Burg, 2011). Letter writing in nature can be particularly associated with contemplative and mindfulness practices (Gornick, 1994). At-risk adolescents have shown improvement in level of optimism and positive mood after writing (Long, Davis, & University, 2011). Specifically expressive gratitude letters increased participants’ life satisfaction and happiness and decreased depressive symptoms (Toepfer, Cichy, & Peters, 2012).

**Relational.** Because letters in the wilderness adventure therapy program have a strong relational component, the letters can represent an opportunity for trust building. Letter writing may produce healing and growth in family therapy (Nau, 1997). The qualities of and changes in the parent-child relationship are made evident through therapeutic letters. Intimately attuned to the relationship, letters have a relational quality as ideas of the author and the reader ideas are intertwined (Pyle, 2009). These letters have an influence that is related to the creation, harmony, maintenance, and authenticity of the relationship (Moules, 2009).

In this study, I analyzed adolescent letters throughout the wilderness adventure therapy program and discovered the themes of the journey that took place. Letters can be preserved to illustrate this journey toward the healing process for adolescents and parents. “Every letter remains an attempt to name with fidelity some complex aspect of the human
experience and keep it available through time” (Hirshfield, 1997, p. 196). Letters have the potential to become a permanent record of the therapeutic progress.

**Conclusion**

Each family member is part of a greater family system, a context to better understand each individual. Family systems theorists suggest that therapeutic change happens in the context of a relationship and in this case a parent-adolescent relationship (Cottone, 1991). Parents may experience some difficulty adjusting to the changes in their relationships with their teenagers because adolescence is a time of transition and growth. Adolescents possess many strengths and potential for positive growth. However, many adolescents also struggle with a variety of problems.

When problems feel overwhelming for families, they may seek outside intervention including therapy. Some options for treatment include traditional and residential therapy. Wilderness adventure therapy can be an effective treatment for building on an adolescent’s strengths as well as helping to remediate family problems (Bedard et al., 2003). Adolescents can have a meaningful separation from their parents in order to gain some perspective and accountability.

While at the wilderness program, adolescents communicate with their parents through handwritten letters. In these meaningful letters, the journey begins to be documented. These letters can be an important component of the therapeutic process (Epston, 1994). Letters can slow down the often-difficult communication process and bring clarity and alignment that comes from mutual understanding.
Because knowledge of potential for healing and growth can take place between adolescents and their parents in this letter writing process, it is valuable to investigate the content of these letters which document the important components of their journey. I will describe the reasons why it is so important that this research is done. This study has never been done before and it fills a gap in the much-needed literature as this treatment modality continues to grow in families served.

The gap it addresses is the crossroads between expressive letter writing as a therapeutic modality that can be used to illustrate the journey of an adolescent through a wilderness adventure therapy program. There has never been a qualitative study that has analyzed the letters written between parents and adolescents during the wilderness or wilderness adventure therapy programs so this is a pioneering and exploratory investigation. The study helps support the literature on expressive letter writing as it pertains to adolescents in treatment and as a treatment intervention for professionals.

This study will make clear the chronological phenomenon of emerging themes as found in adolescent letters to their parents during the journey through a wilderness adventure therapy program. Many families and professionals who are intimately acquainted with the field of wilderness adventure therapy possibly do not understand the phenomenon that is taking place before their eyes as written in letters from the adolescent perspective. This study will help families, professionals, and other readers because it reveals what happens throughout the process of participation in the wilderness adventure therapy program.
Many previous outcome studies in this field are focused with the intent to show the effectiveness of the programming as found in pre- and post-outcome measures. These studies have been done with an intention to ensure evidence-based validity to programming and potentially solicit customers. This study is important because it illustrates the process of an adolescent journey. Process research helps family therapists not only measure that change is happening, but more importantly, measure how the positive changes occurred. Knowledge of the process revealed gives the family therapist a more accurate understanding of the adolescents’ process and an increased ability to intentionally intervene in the process. Recognitions of patterns of more positive and negative emergent themes gives professionals a systems theory perspective and an additional assessment from which to intervene and prescribe interventions that help parents and adolescents build trust and realize the desired goals of families.
CHAPTER III

METHODS

My study was based on data collected from letters written by adolescents to their parents while participating in a wilderness adventure therapy program in the western United States. It is an attempt to document their lived experience. The phenomenological underpinnings, purpose of this study and research question, data and sample, trustworthiness, and coding and interpretation of the methodology process will be described.

Phenomenology

Phenomenology is a qualitative research design that helps to highlight phenomena related to the identity of a particular group of people. With this methodology researchers aim to capture not only the lived experience of several individuals, but to also uncover the meaning and essence of the experience (Creswell, 1998). It is a return from scientism to the traditional goal of philosophy as a search for wisdom (Creswell, 1998). Ancient philosophers believe that there are patterns and psychological structures that comprise our everyday experiences. This style of qualitative research exposes the structures of consciousness in a particular human experience, a phenomenon (Polkinghorne, 1989). It is a process of learning to see what stands before our eyes (Moustakas, 1994). At the end of this phenomenological study, the reader should be able to say, “I now understand better what it is like for an adolescent to experience a wilderness adventure therapy program as found in letters written to his or her parents.”
Purpose of this Study and Research Question

The purpose of this phenomenological study was to explore, analyze, and describe key dimensions found in letters written by adolescent participants as they journeyed through a wilderness adventure therapy treatment program and to better understand why this knowledge was meaningful and useful. Phenomenology was an appropriate strategy for this study because it captured the lived experience of the adolescents through their letter-writing journey. This research approach allowed researchers to explore the consciousness process that occurs with adolescents experiencing the wilderness program (Dahl & Boss, 2005). The conscious writing process that the adolescent went through provided the researchers an opportunity to distinguish and describe the experience.

Phenomenology is a philosophy without presuppositions, which encourages the researcher to suspend all previous judgments as they comb through the text (Creswell, 1998). It is a phenomena revisited freshly and naively by the exploratory researcher responding to senses in order to make the discovery. The question I examined, which fit this phenomenological approach was: What is the journey during the lived experience of adolescents participating in a wilderness adventure therapy program as documented via adolescent letters to their parents?

It would be easy to assume that the journey would be healing in some way; however, in this qualitative phenomenological approach, researchers who analyzed the data resisted any preconceived notions, refrained from prejudgment, and allowed the data to reveal itself, and reported the full range of experiences as illustrated in the case examples near the end of the findings section.
Data and Sample

There were several specific dimensions that distinguished the sample of this study and features of the data. Obtaining the data required two steps, (a) approval to conduct the research from the University Institutional Review Board, and (b) the wilderness adventure therapy program granting access and permission to use the data with a commitment to confidentiality. Letters from adolescent participants who completed a wilderness adventure therapy program in the western United States comprised the data set.

Inclusion Criteria

The following describes the intentional parameters and decisions as well as rationale for inclusion in the study. Only intact families (both parents present with the absence of divorce) who were biologically related were included to simplify the study because generally letters were addressed to both parents, versus potentially multiple sets of letters written to both biological and step-parents.

The adolescents also completed the program in a normal range of time permitted at the program. The adolescents included were part of the boys’ and girls’ groups within the program not in groups distinguished for non-verbal learning disorders, autism spectrum disorders, or whose cognitive and learning disorders were the primary contributor and treatment focus.

Although the relational aspect of the letters was important, the data did not include response letters written from parents to their adolescent son or daughter in order to have a more singular focus on the phases of the journey from the adolescent
perspective. Only letters written to parents were included, not letters written to friends or
others to simplify and concentrate my focus.

Adolescents were not selected in the purposive sample based on the previously
mentioned exclusionary criterion explained above. However, adolescents’ letters in the
study were not filtered out whether they were considered as having a productive and
positive experience in the program. Intentionally, all data was information to help answer
the research question. To be consistent with phenomenological data analysis, we who
analyzed the data did not make presuppositions in order to make sense of and navigate
the journey with fidelity to the data. These are the intentional inclusion criteria for the
study.

Data Set

The data are the statements written in the letters, which described to parents the
adolescent’s experiences throughout the program. In general, letters are written weekly
during the course of the program. The participants stayed at the wilderness program from
one to three months, and mail was exchanged one time per week. The range in number of
letters varied from person to person, but the least number of letters in the sample was a
minimum of 6 and a maximum of 32 letters with an average of 17.4 letters during the
adolescents’ stay. The length of the letters ranged from half of a page to 16 pages.
Because each of the adolescents within this sample came from an intact family, the vast
majority of letters were addressed to both mom and dad.

The data were handwritten letters sharing insights as to how the adolescent
interpreted his or her experiences, reflections in the wilderness adventure therapy
program, and what he or she shared of the experience with his or her parents. The letters were an expressive dialogue from the adolescent to his or her parents, which were generally uninhibited and unrestrained. The only exception to this was when the adolescent may have been advised by his or her therapist to construct a letter on a specified topic. An example of this may be when the parent has written how the adolescent’s behavior had impacted the family; the therapist may have encouraged the adolescent to write a letter of accountability in response.

Sample

A variety of characteristics made up the purposive sample population and the demographic information is described here. Interestingly, this qualitative study was not limited by sample size or lack of access to data. Rather, the sample size was decided when saturation of themes was determined because new themes were no longer emerging from reading and coding additional letters. The total number of adolescents included was five male and five female writers totaling 10 in the sample size. There was an equal male to female ratio of participants so that both genders were evenly represented.

The age range of adolescents accepted into this wilderness adventure therapy program was 12-17 years old. The average age in this population was 16.2 years old. Within the sample, there were six adolescents in 11th grade, two in 10th grade, and two in 9th grade. The average length of stay was 70 days (10 weeks), and ranged from 29 days to 95 days. The state or country from which the participants were from included eight different states (AR, MI, CA, NY, WA, NC, CT, and TX) and one international participant from England. Nine of the 10 participants were Caucasian and one was Asian. Identified
religious preferences in this sample were three “Christian,” three “Catholic,” two “None,” one “United Methodist,” and one “Non-denominational Christian.”

In the intake paperwork, parents listed their adolescent’s strengths and presenting problems. Some of the strengths listed per parent report of their son or daughter included intelligent, athletic, creative, friendly, outgoing, great social skills, kind, strong, great work ethic, fit, dreamer, sense of humor, reading, writing, articulate, bright, sensitive, and thoughtful. The listed presenting problems for this sample of adolescents entering the program included inability to regulate behaviors and emotions, lying, oppositional, suicidal thoughts, alcohol, drugs, cigarettes, arrest/legal problems, breaking family rules, anger, self-harm, eating disorders, academic failure, low self-esteem, and low motivation.

During the course of the program, this sample population was assessed and identified as filling specific diagnostic criteria for the following mental disorders. These diagnoses included six students diagnosed with attention deficit/hyperactive disorder, five with generalized anxiety disorder, five with learning disorder-not otherwise specified (NOS), five with parent-child relational problems, four with major depressive disorder, three with oppositional defiant disorder, two with identity disorder, one with disruptive behavior disorder, one with an eating disorder, one with dysthymia, one with mood disorder-NOS, and one with borderline personality disorder. For more information regarding criteria for these conditions, the American Psychiatric Association has published information in the DSM-V (APA, 2013). This sample all experienced the major components specific to this wilderness adventure therapy program.
**Adventure Therapy Program**

To better understand the adolescents’ experiences, I will describe some characteristics of the particular wilderness adventure therapy program. This wilderness adventure therapy program incorporated key components of wilderness therapy which are an unfamiliar environment, group living with peers, individual and group therapy under supervision of licensed professionals, and educational curricula (Russell, 2003). This program worked from a basecamp model, used traditional therapeutic approach, and involved leaving the basecamp for wilderness expeditions then returning back to the basecamp after a week (Russell, 2003). Therapy sessions are conducted weekly while adolescents are at the basecamp. A few weeks before the adolescent leaves the program, they reunite with their parents at a parent seminar. Following this the adolescent stays the final few weeks to finish the program.

Letter writing is a vehicle adolescents use to communicate with their parents. In the wilderness adventure therapy program, letters are written and received between therapy sessions. This gives the adolescents time to reflect on the therapeutic material (i.e., letters) both in session and outside of therapy (Sloman & Pipitone, 1991; White & Murray, 2002). Parents were instructed at times to write an impact letter describing how the adolescent’s behavior has impacted the family. For many adolescents, this letter is a sobering reality check. The adolescents then have an opportunity to take ownership of their actions and can be a powerful therapeutic tool for these relationships. One of the letters that therapists at this wilderness program encourage these adolescents to write to
their parents is a letter of accountability. These programmatic decisions give a brief context to better understand the experience of the sample population.

Trustworthiness

The ability to assess the reliability and validity of research is an essential component of the scientific process. Because there are different philosophical underpinnings (Merriam, 2009), the standards of rigor applied to qualitative research differ from that of quantitative. Trustworthiness and credibility are used in qualitative research, and these standards help ensure that the findings are worthy of attention. Four criteria of trustworthiness were addressed in this study: credibility, transferability, dependability, and confirmability (Lincoln & Guba, 1985; Morrow, 2005).

Credibility

Credibility assesses the level of rigor present in the research for this study and is analogous to internal. Triangulation of data is one way to check and compare results with other sources of information about the sample. This study used triangulation to strengthen credibility. One point of triangulation in this study was that all coders of data did so independently. They were not influenced originally by an unquestioning conformity with other team members. When they came together each coder voiced their own findings from within each letter, and then the team came to an overall consensus.

An additional triangulation point was seeking comparability of the findings with the experience of experts in the field. Because checking with the sample participants in the study was not possible (member-checking), those data were checked by comparing
the findings with the experiences from the experts in the field working with adolescents in wilderness adventure therapy treatment. I was frequently in touch with the clinical director of the wilderness adventure therapy program throughout the research process, and once findings were solidified, they were reported and confirmed as fitting with the experience of the clinical director of the program.

Another point of triangulation is that the adolescent participants were also measured quantitatively. They took the Youth-Outcome Questionnaire-Self Report (Y-OQ-SR; Ridge, Warren, Burlingame, Wells, & Tumblin, 2009) at the beginning of their stay in the program. Overall, credibility is an evaluation of whether or not the research findings represent a credible conceptual interpretation of the data drawn from the participants’ original data, which this study does very well (Lincoln & Guba, 1985).

**Transferability**

*Transferability* is the power of the findings to transfer beyond this research and be applied to other contexts. Due to small sample sizes, unique contexts of findings, and choice not to use statistical analysis, qualitative researchers do not assume that their findings can be generalized to other populations and different settings (Morrow, 2005). However, implications for the study will be addressed in the discussion section, although often readers themselves may determine the potential applicability of the research findings to their unique populations and situations (Merriam, 2009). I provided detailed information about the coding and interpretation of the study below so as to be as transparent as possible and to increase likelihood for results to be reproduced. Direct quotes from participants found in the findings also enhance the transferability. Because
the sample was represented by a variety of demographics, it provided a high level amount of variation in the sample so that findings may be more widely acceptable to a variety of participant situations (Merriam, 2009).

**Dependability**

*Dependability* is an assessment of the quality of data collection, data analysis, and theory generation. Dependability ensures that the study is clearly described and consistently carried out (Gasson, 2004). In this study, I paid particular attention to the integrity and precision with which the procedures in the study were carried out as outlined in the coding and interpretation section below. For example, saturation was reached not when the coding team was exhausted with reading and analysis, but the point at which no new themes were emerging and saturation of themes had been reached. Another way to show dependability is through future replication of this study. Of course, the researcher would not expect the exact same results as the situations are dynamic. However, the results will make sense in light of the data collected (Merriam, 2009). An audit trail was established to document the major and minor processes from which I arrived at the results illustrated in the findings section.

**Confirmability**

The final element of trustworthiness is *confirmability*. This is a measure of how well the research findings are supported by the data collected (Lincoln & Guba, 1985). It certifies that the findings are grounded in data, *not* in assumptions, biases, or researcher beliefs (Gasson, 2004). In this study, the data coders had very few ideas about what the results would yield. In this study, the researchers demonstrated sound data analysis as
described below to arrive at research results, which shows confirmability. In this study, again, an audit trail was established to document the researcher’s analysis procedures (Morrow, 2005). The process of data analysis was also transparent as independent coders came to a consensus on the data, which shows confirmability as well.

**Coding and Interpretation**

Coding and interpreting the data was a rigorous and time-consuming process that produced clarity about the findings and meaning of the study. In this section, phenomenological data analysis is outlined generally and then specifically according to this study. I will explain my rationale as to why the analysis was completed in the specified way.

**Guidelines for Phenomenological Analysis**

In this study, researchers used qualitative methods to obtain findings. Phenomenological researchers data coding and analysis follow steps that take the entirety of data and systematically reduce it to a narrative description of the phenomenon and its meanings. Creswell (1998) outlined five steps we used in our data analysis: (a) the data coders read all of the statements in the data set, (b) the coders identified and extracted specific descriptions that were significant, (c) these statements were formulated into meanings, (d) the statements were eventually reduced to overall themes to answer the research question, and (e) the information was compiled into a fluid narrative description.
Recruitment and Coding Process

The specific implementation of these qualitative guidelines are highlighted and described here. Four independent coders were recruited from the university based on interest in being a data coder and gaining more experience or learning qualitative research methods. There were two females and two males selected in order to obtain a balanced perspective from each gender. There were two graduate and two undergraduate level coders who completed data analysis and were trained to follow the guidelines for this type of research by an expert qualitative researcher. The expert researcher was not part of the coding team but was a process consultant for when questions arose as to how to proceed with the coding and analysis. The coders met weekly for two hours over a five-month period. Intentionally throughout the analysis, coders were blind to any demographic information excluding first name and gender so as to remain as unbiased as possible due to those specific descriptive factors and statistics.

Phases of Analysis

Because this study was analyzing over 400 pages of letters and took over five months to read, code, and make sense of the information, it was a multi-phased process. This will be summarized here in the following phases.

Phase I: Coding

Each independent coder was given a hard copy of the handwritten letters so that they could annotate and code in the margins. Each coder was trained in research analysis, which was divided into steps. First, the coder read one letter and highlighted the
significant descriptive statements. This is what Crabtree and Miller (1999) describe as *entering the text*. It is reading the data and highlighting identified categories most pertinent to the research question.

Second, the coders then re-read the letter, summarized the highlighted sections, and wrote a summary in the margins. This step is called *sense making* (Crabtree & Miller, 1999). This is where connections and relationships are found in the data statements within in the letter. Summary concepts, which were written in the margins, were meant as a form of researcher shorthand, which were used to summarize the participant’s experiences in light of the specific adolescent’s context. Within these summaries, clear and pertinent themes and patterns emerged directly from the narratives in the letters. *Sense making* was not derived from statistical manipulation but from successive reading, critical reflection, and persistent immersion in the text (Dahl & Boss, 2005).

Third, each coder individually synthesized the already written summaries in the margins, on average, into three to five themes from each letter. This step was where the coder *clustered the meanings* from the emerging phenomena within the letter (Crabtree & Miller, 1999). This beginning three-step process was repeated for each letter in an entire set of one adolescent’s letters. Each coder completed this process on his or her own independent of one another.

For the fourth step, coders met together to discuss each individual letter and themes they found independently from steps one through three. Within the fourth step, there were two component parts. First was verifying or confirming, and second is representing the account (Crabtree & Miller, 1999). *Verifying or confirming* happened
when the researcher sought for alternative explanations or negative cases and discussed this with other coding members. And finally, the coders *represented the account* of what each individual coder learned in the independent research process, and he or she reported to the other coding members. The coding team discussed until they reached an agreement on the three to five themes and the specific wording to represent the concepts in context of each letter. The process continued as the coding team attained consensus for each letter in an entire set of letters and eventually through eight sets of letters in their entirety. As the coders read and summarized the letters, clustered the meanings, and came to consensus repeatedly, the circular process yielded chronological themes from each adolescent’s journey through the wilderness adventure therapy program in his or her letters.

**Phase II: Reaching Saturation**

At the completion of the fourth male and fourth female adolescent’s letters, the coding team recognized that there were many common themes emerging across genders and among the first eight sets of letters, and researchers needed to determine if we had reached saturation. The coding team then set out to synthesize what exactly the overarching themes of the letters were at that point according to the data.

In order to determine this, each of the four coders was given a copy of all of the themes that had been identified for one male’s and one female’s entire sets of letters through consensus. Related and similar themes from that male and female were grouped into categories (e.g., coping skills implemented) by the coder, and that coder wrote down what he or she determined were the overarching themes derived from the groupings from
that adolescent writer. Then each coder systematically analyzed the groupings determined by other coding team members and wrote on a separate paper what he or she would change about how it was grouped. The coders also individually wrote the overarching themes that were independently identified in making sense of the groupings. After this was complete, the coding team came together and suggested the changes identified and came to a consensus on how the themes were ultimately grouped. These themes we determined in this phase were documented. After each coder read aloud his or her overarching themes for each adolescent, the coding team agreed upon the final overarching themes from all eight adolescents’ sets of letters.

This information was compiled into a document where similar overarching themes were again grouped and juxtaposed, which reduced all of the information into five overarching themes (Creswell, 1998). Each theme was given a color. These colored themes formed a template, from which was used to determine whether or not saturation was reached. Saturation is when the coding team reached a point where no new themes emerged with one new male’s and one new female’s entire sets of letters (Lasch et al., 2010).

While reading male five’s and female five’s letters, they were not coded as outlined in phase I. They were color coded into the five overarching theme categories. A sixth color and category was created for other miscellaneous themes that were not part of the categories on the template. When the coding team reconvened, all coders agreed that no new themes emerged from the two new sets of letters.
Phase III: The Journey

Once the themes were known, and in order to be able to synthesize a coherent representation of the journey that tells about the sequence of the themes’ emergence, I went back to the themes determined by consensus in phase I. Each of the themes were color coded according to the template created in phase II, and then patterns from the beginning, middle, and end phases came to light. The beginning phase was represented by the first few weeks of the program and the proportionate amount of letters written corresponding to this section of the journey. The middle phase was the phase with the most letters and weeks spent on the trail. The end phase represented the final few weeks of treatment and the subsequent letters. My ability to connect, interweave, and integrate the data played a vital role in making meaning from the parallel journeys in this qualitative process. Boss (1987) illustrated this point, “discovery . . . happens not with the scientific method, by magic or by luck, but through heeding one’s senses and responding to one’s intuition . . . it requires willingness to open one’s mind and feelings, to make oneself prone to discovery” (p. 154).

In order to represent each theme within each phase of the journey, I re-read all of the letters and highlighted illustrative quotes within each of the five categories. These quotes were typed, and each person from the coding team indicated which quotes best represented the story as a coherent whole. The final narration recognizes, supports, and enhances the identity of an adolescent journey in a wilderness adventure therapy program through letter writing.
CHAPTER IV
FINDINGS

The journey of an adolescent through a wilderness adventure therapy program is a physical, mental, spiritual, and emotional trek that has the potential to impact families in a positive way. Adolescents have an opportunity to tell their parents about their experiences and emotions through weekly letter writing. Through phenomenological data analysis of these letters, I found five overarching themes that marked each adolescent’s journey. The themes were: impact of wilderness experiences, desire for improved relationships, apology and accountability, negative emotions, and positive growth and coping. These themes appeared repeatedly through the letters.

There were three phases of treatment that emerged from the data: the beginning phase, the middle phase, and the end phase. Each portion of the journey reveals a distinct pattern of the overarching themes that is common among the adolescents participating in the wilderness adventure therapy program. The power of this research is that it is not a result of someone’s professional assessment of the adolescent’s experience, rather, the unfiltered telling of the experiences and thoughts of the adolescents themselves. They write their story to parents directly and in their own words. I will describe each phase of the journey in the patterned order in which the themes were found within each phase. I will illustrate the themes with key exemplars* to narrate the journey of an adolescent during a wilderness adventure therapy program.

* Please note that all of the names are pseudonyms and identifying information has been removed so as to maintain confidentiality.
In order to represent a panoramic view of the findings, I have developed a model to distinguish the order in which the five overarching themes occurred within each of the three phases of the adolescent journey (see Figure 1).

**The Beginning Phase**

For many of the adolescents, the beginning phase was the most steep and difficult part of the journey. Adolescents were faced with new challenges of living in a novel environment, physical separation from family members, and an overwhelming task ahead of them. The beginning phase accounted for the first few weeks of the adolescent’s time.
and first few letters written in the wilderness adventure therapy program. During the beginning phase, the adolescents described their emotions and adjustment to their new situation (e.g., surroundings, environment, group living, etc.). The themes that took place, in the order that they appear in this phase of the journey are: negative emotions, apology and accountability, the impact of wilderness experiences, and a desire for improved relationships. I will share adolescents’ quotes that exemplify each theme that emerged throughout this phase (see Figure 1a).

Figure 1a. An adolescent journey through the beginning phase.
Negative Emotions

Without exception in the first letters home, the adolescent expressed to their parents the negative emotions that they were experiencing. Negative emotions may be an important part of this journey as the discomfort may motivate some adolescents and become an important catalyst for change. The most prominent negative emotion in this phase was missing family and friends described as homesickness as found in the following quote:

Elaine: I miss you both so much more than I would ever think. I have been holding back tears ever since I arrived. I feel scared, and I don’t belong here. I really, really, really, really just want to go home, more than anything ever in my life. I don’t think I can last six weeks. I legitmately feel like crying every second of the day.

Some adolescent’s negative emotions they experience initially were expressed in anger about the new situation. Some were surprised to be in their current situation and gave voice to threats directed at parents as in the following examples:

Andrew: I feel I will have much more success on my own, with or without your support. I don’t need your money or to know you care about me.

Brett: I must admit, I’m not happy with you. I’m also not particularly upset. I should have saw it coming. It was obvious in hindsight. Honestly, the part I’m most mad about is my relationship. If this program ends my relationship, I will never forgive you. I don’t care what you say; I’m head over heels in love with Alison.

Some adolescent’s negative emotions came in a different form. They were disappointed and expressed anger toward themselves. Others wrote about their overwhelming emotions of depression and anxiety:

Gabe: I know that you guys are doing this for me, and I guess I will understand it eventually. I am not feeling too good right now. I am very depressed and anxious and I am not quite sure how I am going to get through this. I really want to come home and see you guys…I really miss you guys and I think I feel very homesick.
I don’t know how to deal with this depression I am feeling. I know there is no way I will get my way this time.

Most of the adolescents lobbied for various reasons to come home early due to their uncomfortable negative feelings. Following these negative emotions, many adolescents turned inward and started to analyze their own part leading up to the current situation.

**Apology and Accountability**

The next theme that emerged in the beginning phase was *apology and accountability*. The adolescents expressed to their parents that after reflecting on their current situations that they were beginning to realize the negative impact that their behavior had on their families. This *apology and accountability* differed quite a bit from the *apology and accountability* that takes place in the middle phase. Initially some students expressed a more blanket statement of apology but did not go into many of the specifics at this time. They began to take some responsibility, but some blamed their parents in the same sentence, for example: Andrew: “I know I haven’t done the greatest job, but I think you could have done better as well.”

Some adolescents said sorry and started to open up and explain their perspective on problems. They began to share things they were realizing after looking at their life from a more removed perspective.

Gabe: Dear Dad, I have not been fair to you as recent. Recently, our relationship has gone downhill and took a turn for the worse. I was too busy hanging out with friends and doing drugs to realize that I have been hurting you and myself. We used to have such a good relationship. Now that I am sober, I have realized that I have not been the son I should have to you. I was being selfish and barely spent time with you. I always thought you were constantly getting angry at me, but, in
reality, it was me that was getting angry at you. I can never imagine how painful it was for you to see me hospitalized from alcohol.

Many expressed regret about the problems that had been happening at home due to the adolescent’s poor choices and stated their hopes to repair the damages done, for example:

Gabe: Not a day goes by when I don’t miss you. Being out here I’ve had a lot of time to think about the terrible things I have done. All this time, I was always thinking of myself. I never took your guys emotions into account. I didn’t realize how much this was hurting you all this time. I was being selfish and only thought of my feelings and what I wanted. I never spent time with you when I should have. I didn’t respect you guys as parents as I should have. I was so hooked on the drugs that I let them control me. I became numb to other people’s emotions except my own.

William: I want to say I’m truly sorry for how I’ve acted these months. I’ve been completely selfish and careless. I thought I was doing better (getting better grades, being sober, being happier, trying to be more honest) but for anything I’ve done recently, I’m sorry. I was too self-centered to realize the amount of pain I was causing you.

In summary, apology and accountability at the beginning phase were indicators of potential to change. Adolescents at this phase both started to take some responsibility as well as blame parents for their part in the problems. General statements of apology and accountability happened in this phase as opposed to specific instances that the adolescent wrote about in this phase of treatment.

Impact of Wilderness Experiences

In this theme, the adolescents told their parents about the impact of the new wilderness experiences and outdoor living. They described enjoyment and excitement about itineraries and beauty of the landscape and stars. They also described many difficulties of this new environment including struggles with cold or hot weather,
adjustments to going to the bathroom outside, cooking for themselves, dynamics of group living, and the rigorous nature of adventure activities.

Some adolescents welcomed the outdoor living experience and found peace and serenity in the beauty and feelings of accomplishment from doing hard things as in this quote:

Lindsey: Howdy from the wilderness. It’s now my fourth day here at this program, and it is probably the most challenging things I have ever done. BUT-almost the most beautiful, inspiring, and incredible experience I have ever taken a part of. Yesterday, I climbed a mountain, literally. I’m sitting now at 76,000 [sic] ft and the mountain is 96,000 [sic] ft. I cried, laughed, shrieked, and ate pasta that I cooked [while] watching the wildflowers dance. Things I saw: A dead elk (?!), LOTS of bleached bones, Aspens, a radio tower, the horizon.

The adolescents also described the adversity they faced with outdoor living. They found themselves in a novel environment inherent with natural consequences and immediately faced the steep learning curve of new and necessary outdoor skills. The following exemplars represented the impact of these wilderness experiences:

Chloe: The wilderness is like nothing I had imagined. I got in really late the first night and went straight up the mountain and began unpacking in the pitch dark. It was so scary and freezing cold. Mom, I got my blood drawn without you and it was the worst thing ever. I just wanted you here. The second day I woke up feeling so sick. No one offered a nurse, a hug, or anything. That’s when I wanted you guys here the most. I ended up puking and still feel awful while I write this, but the thought of y’all is comforting.

Lindsey: My daily routine is pretty tough. Up at 7, go for a pee (no toilets, find a tree) or if you need to go for a No. 2 you dig a hole and bury the waste. Yick [sic], I know, but there you have it. Then you pack up all of your stuff (sleeping bag, tarp, clothes bag, etc.) and go eat brekkie [breakfast]. Then we have some sort of discussion, inspirational or T-time, which means I can write letter and do assignments from Michael, who is my therapist! Then we go walk. Lunch is on the road, and we get back to a campsite to build a shelter and eat dinsdins [dinner]. Then it is bedtime (best part of my day)...It’s so wonderful here: the sun and the mountains and the forest and the rivers. So gorgeous.
James: Left foot still frozen… It is Sunday now and all is better… Got homesick first thing this morning… But I was in a bad mood cause I got ice in my sleeping bag this morning… But now I am better… One of my guides Abby, talked me through it, and I realize that this is a new start, not prison… I’m here for a fresh start not to be punished.

Oftentimes the nature of the adventure activities gets the adolescents out of their comfort zone and they learn to challenge themselves. Again, one adolescent described her experience:

Lindsey: The first day [of week 2] was tough with a capital “ouch.” We first had a 9-hour drive from base camp to get to what I call Enchiladas, two and a half hours on a dirt road. We kept our spirits up by singing very badly and loudly... We arrived at the car park at 9pm, just in time to watch the sun slip behind the horizon. So, night hiking anyone? We finally got to our campsite at three in the morning after spending hours searching for the carins [trail markers] that marked the trail. Not one of my finest moments, but I didn’t complain. I have never been so glad to see a patch of campsite in my life.

After just one week of wilderness living, this adolescent described what she had learned from her wilderness experiences so far:

Lindsey: Things I’ve learned: Toilets are a luxury, so are beds, Moms food is amazing, long car rides are fun, don’t burn porridge, water is crucial, hot water in a bottle makes a cold night bearable, talking while you hike increases enjoyment, I love you all to infinity and beyond (and back), I MISS MASHED POTATO AND CHICKEN, REAL FOOD.

In conclusion, the wilderness living can be a novel environment that adolescents may find peaceful and healing. Because of the challenges of outdoor living and adventure activities, adolescents had the potential to experience an increased sense of efficacy and felt empowered to accomplish other hard things in their lives. Having spent several weeks living outdoors and in reflection, adolescents could not help but be impacted.
Desire for Improved Relationships

The final theme of the beginning phase was a desire for improved relationships. This included family relationships and relationships with friends and boy or girlfriends. Expressions of love and longing for family relationships to be rebuilt were very prevalent communications throughout the letters. Although much less frequently mentioned, the writing also included bitterness and blaming of parents.

Family relationships. During the first part of this journey, most of the adolescents expressed a need of sending love and a desire for family relationships to be rebuilt. There was a new sense of sincerity in the writing that perhaps parents had not heard coming from their child in the preceding time and events that led up to participation in the program. The following are a few of the many statements about hopes for improved family relationships:

Elaine: It was nice to hear from you both, I still miss you both incredibly and came to the realization from the other girls that it is not normal to love my parents as much as I do, so I guess I am one lucky kid! I want you both to know in my eyes you two are the greatest people I have ever met and will ever meet…besides you sending me here you are great.

William: You’ve raised me so well, and I want to thank you for everything you’ve done. From feeding me every day to trying to cheer me up when I cry. You’ve always been there for me. But know I love you, and I’m proud to call you my mom.

James: Mom, I love you, and I am so sorry I ever swore in front of you, that I took you for granted. I listen to these other guys talk about their families and mothers and it brings me to tears that I lied to you and argued with you so much. I should have just listened and maybe I wouldn’t be here covered in snow freezing my rear off, and I wouldn’t have the fact that I hurt my mother on my heart.

Brynne: More importantly I want to have a relationship with you and mom because you guys are so important. You guys will never leave, and I need a stable supporting family….I love you. How can I get and build a relationship with you?
Other important relationships. Some adolescents avoided expressions of love for parents, and they emphasized their longing for friends instead. They expressed the importance of maintaining connections with friends or boy and girlfriends and concern that problems arose in these relationships as a result of going to the program. Below is an example of the importance of this adolescent’s relationship with his girlfriend:

Brett: Second, this is the hard one. Tell Alison I’m going to boarding school 100% and that it’s her move now. I love her dearly, but if she doesn’t want to go through long distance, I understand. Tell her that in my optimal world, I get out of boarding school with my problems solved, go to college with her, and live happily ever after. Ultimately, it is her choice though. Please allow me to receive just one letter from her about this topic. If she breaks up with me, I’ll use it as motivation. If she doesn’t, I’ll be the happiest I’ve been in weeks. It’s a win-win. Either way, tell her I love her and that she’ll always be in my heart.

Conclusion of the Beginning Phase

These are the first themes that emerged in the transition to a wilderness adventure therapy program. Adolescents spent time adjusting to the new environment and began reflecting on their past experiences as well as hopes for change in the future. Some adolescents experienced anger and frustration with their parents about being at the program and blame parents for making them do something they did not want to do. Frequently, this phase is described as the most difficult part of the journey.

The Middle Phase

The middle phase includes the majority of letters, and it also encompasses the majority of the time spent in the program. In this phase, there is an overall reduction in anxiety about adjustments to outdoor and group living. In this phase, one new theme was
discovered: positive growth and coping. Other themes reappeared during this phase of treatment. Despite many of the same themes repeating from the beginning phase, the tone of many of the letters during this phase makes a marked transition from the beginning phase for many of the adolescents. I will describe each theme in the order it generally emerged throughout the letters and quotes that illustrated these themes during the middle phase of the journey (see Figure 1b).

**Positive Growth and Coping**

In this phase, the new theme of *positive growth and coping* was expressed in the letters. With some adolescents who wrote more lengthy letters, this theme was much

*Figure 1b. An adolescent journey through the middle phase.*
more prevalent than with others. With those who had written less, this theme emerged less frequently. For many adolescents, the tone of the letters changed from a more negative outlook to a more positive and clear one as in the following examples. James wrote, “Thank you for sending me here so I can have the opportunity to restart and find this wonderful man I have become.”

Chloe: My first week here was a steep adjustment, I was sick, it was cold, and I had trouble seeing how it was that I needed to be with some of these girls who made my issues seem microscopic. Beyond that week however, I have been able to distinguish how negatively some of my actions affected a lot of people. I’m proud of my growth and attitude here.

Some adolescents turned inward and began to recognize truths that they had not previously identified outside of the wilderness experience. One adolescent described her learning in the following quote:

Chloe: Distance. All it is…empty space dividing one place from another. In this way, distance is not powerful, strong, or impactful. But what distance does to a heart is the real miracle. I have spent days filled with guilt and regret. I’ve felt things that I didn’t imagine were possible. All that has changed? Distance. Distance from my support, from my rocks, distance from comfort, from my source of love, and distance from those who I’d forgotten how to love and appreciate. Distance is painfully beautiful. With pain comes a new, bigger, broader perspective on where you were. It’s the difference of looking at a town from ground level or looking at the same town from the top of a mountain. Distance allows your distorted view on reality the space necessary to see what life really is: beautiful.

Specifically, the adolescents implemented new skills and strategies and dealt with difficulties they experienced. For example, some coped with news that they would be attending a boarding school or were broken up with by a boy or girlfriend and the adolescents disclosed the unhealthiness of the romantic relationship to parents. The following quotes described participants’ experiences with coping:
Chloe: I laugh a lot out here. I think that will be comforting for you to know. My sense of humor is still the very same. This morning I woke up early and was eye to eye with a mouse. All the girls were awake, but still in their sleeping bags. I woke up cold and sick and only said, “I am having a stare off with a mouse.” Lexy hates almost all animals and started gagging and the other girls were screaming or laughing.

Brett: I’ve been taking the break up really well compared to how I thought I would, and honestly feel better now that I have myself to focus on, solely. I’ll miss her, but I think it was for the best.

Brett: I’ve had other dysfunctional relationships. My most recent girlfriend Alison and I had a very unhealthy, control-based relationship. I spent far too much time being jealous and protective over Alison, and it showed me that I can never have a successful relationship if all I do is worry if she was cheating on me or something. Relationships should be two-sided and about give and take. When one person starts to gain more than the other in any aspect, be it as simple as music, to as personal as sex, it’s time for that relationship to be re-evaluated.

They wrote about positive ways they started to self-identify, and this was a major shift from the beginning phase of treatment as evidenced here: “Brett: I think I am ready now, I am ready to find who I really am and how amazing I can be, by myself.”

Chloe: Today for the first time in a year, I desired and believed that I want and can be that girl I used to be. The girl who had standards, the girl who promoted love, goodness and Godliness. I’m working on myself, but I know I won’t ever be perfect. I never thought I would desire to be the girl who was on homecoming court, the girl who brought people closer to Jesus, and the girl who held a higher standard for herself again, but this morning I found it, or God revealed it.

The middle phase of the program was the introduction to the theme of positive growth and coping. Adolescents wrote to their parents about how their perspective of the past had changed and their new recognition of problematic behaviors. For adolescents who wrote less to their parents this theme was less apparent than with those who wrote more. Through treatment, adolescents gained an increased insight into what they needed to work on, and they were eager for their parents to notice the growth.
Desire for Improved Relationships

The next theme that emerged in the middle phase was again the importance of improved relationships. The adolescents were preparing for the opportunity to reunite for a few days with their parents and frequently wrote about happily anticipating that time together. They described a deepening relationship with peers who also experienced the program with them. Some adolescents expressed hopes and requested that their parents make changes simultaneously with themselves.

Throughout the letters they were continually expressing the importance of their relationships with parents and family and wanting to spend future quality time together. They often inquired as to how people were doing at home. These are a few examples of hopes and validation for family relationships in the middle phase:

James: Dear Mom and Dad, First, let me tell you how amazing you are as parents. I couldn’t ask for any more hard working, loving, kind parents as you guys! Your impact letter and writing this response is one of the most emotionally challenging things I’ve ever done.

James: Dear Dad, I miss you very much. I think about you every day and our past relationship. In the past I feel like we have argued a lot and not spent as much time as we should have together. When I get back, we should spend a week together on our adventure just you and me. Whether we spend it at West Lake or climbing I could care less. I just want to be able to spend some father-son time with you. I am sorry for every time I started a fight with you and swore at you. I have always been there for you in my heart but not in reality. It hurts me because you have always been there for me.

Chloe: After all of my rebellion and resisting mom’s control over a relationship I no longer was up for the fight. I was done, it seemed to finally click, not easily may I add, that none, no friendship or relationship, should ever come in between our family. That was the day I dropped a letter off at the Smith’s explaining to Matthew that I wouldn’t be talking to him anymore, and that I needed to focus on my family and I right now. Although I continued to have moments where I really felt God speak to me, our relationship was lost, I was lost, and still a bit angry.
Many of the adolescents wrote about their newfound friends and peers at the program and described some of the challenges and joys they experienced out on the trail together. For example:

William: I’ve been making some friends committed to sobriety. My friend Abraham is mega chill, and my boy Gary (who’s unfortunately leaving for home soon) works out with me as well as my friend Eli. They’re really kind and genuine which brings me joy.

Some adolescents did not transition to more positive sentiments about their parents and continued to blame and demand things from them. They emphasized the importance of other relationships in their lives as this adolescent did:

Brett: I’ve been racking up entitlement points lately with all the requests I’ve sent you. I have but one more. You go on my facebook and give Jakkie access to family bridge? Or text her with my phone. Since I can’t write Alison anymore or don’t really want to for that matter (I want to completely get over her). It would really help to have a friend I can write. There’s something different about letters from family and from friends. If you want someone you know better, maybe Joe or Amelia? I don’t know, I’d prefer Jakkie cause we’re pretty much besties. Thanks!...Back to the subject of letters from friends, I’d just like to be able to exchange with at least one friend. It feels better getting a letter from a friend then from family, in a different sort of way.

The adolescents had the chance to reunite with their parents for a brief time during the program. This was anticipated and following the experience was an important point during the middle phase of treatment.

Chloe: Six weeks, 42 days, 1,008 hours, 60,480 minutes, 3,628,800 seconds at this program thus far. All spent reflecting, learning and growing. All the time (worth it) for the feeling of the first second I saw my parents, my support, my source of love, my anchors, my protectors, my biggest fans. The safety felt in that first hug, and the buckets of tears that began even before I got to them made every cold night, every angry moment, and every tear shed worthwhile.

Some adolescents had a newfound sincerity in expressed gratitude for their parents, for example:
Lindsey: I am so eternally in awe and grateful because you have never once given up on me. Even when I have betrayed your trust, lied to your faces, hurt myself, stopped working, screamed abuse at you, bullied you and my siblings, been manipulative, ripped your wonderful family apart and caused you so much pain you never stopped loving me, even when I stopped loving myself. You have held me when I cried, defended me against judgment, fended off unwelcome questions, comforted my siblings after I have been cruel, supported and encouraged me, laughed at my jokes, given me opportunity after opportunity and always believed in me. Thank you for accepting me for who I am and loving all of me, as that love is teaching me how to love myself.

In the letters during the middle phase, it was evident that most adolescents felt emotionally safe and began to disclose new things about the past with their parents. They expressed anticipation and excitement about being reunited for a brief time. Although some adolescents did not completely change their attitude toward their parents, most of the adolescents expressed a profound love and sincere desire for their past relationship to evolve into something more positive and fulfilling for both parent and child. The adolescents were grateful for their parents and wanted to spend time together going forward.

**Negative Emotions**

*Negative emotions* were less prominent, but still present in the middle phase. *Negative emotions* appeared to be an important motivating factor as well as a sign that the adolescents continued to be stuck like this example of an adolescent who had the tendency to self-harm:

Lindsey: I’m worried about being away from home for so long and bitterly amused at all the sharp implements in the dirt, which can be tempting. I’m frightened at my parents’ reaction. It’s about to storm; I don’t like it.
And some adolescents wrote about still experiencing some anxiety, depression, or shame; for example, William: “I’m not sure if my antidepressants are working. I frequently feel worthless, hopeless, and directionless.”

Others continued to blame and manipulate parents with demands or entitlement such as the following from Brynne: “How much money did you guys put into my bank account? And can you keep putting my allowance in there too?”

Some adolescents continued to write about being jealous of his or her parents’ conveniences as compared to his or her own struggles in outdoor living as in the following quote:

Elaine: Dear Mom and Dad, It is miserably cold here. So cold! I hope you are grateful for the fact that you are in California, that it is not snowing (4 inches +) and that you have a warm bed, a warm house, a fireplace and the most you have to be outside for is about 10 minutes. I have been living and sleeping in the freezing cold (5 degrees F at night and 15 degrees F during the day). Burr!

Negative emotions took place within each phase of the journey. They are a normal part of the human experience especially when they were attempting to complete a wilderness program mounted with physical adversity and self-examination. The negative emotions in the middle phase were less prominent than in the other two phases, but they were still present.

**Apology and Accountability**

The last theme of the middle phase was apology and accountability. Throughout the data analysis, I found that the presence of apology and accountability in the middle phase of the journey was one of the most important indicators of growth. I propose that the adolescents who lacked this theme in the middle phase of the journey lacked the
emotional safety that the others felt with their parents. This disclosure and accountability begins after adolescents received honest and direct feedback from parents about the impact of their behaviors at home and how it contributed to the problems. The adolescents practiced taking responsibility by sharing within the group of peers, guides, and therapists out in the wilderness what the adolescent’s parents had written about them, as in the following statement:

Lindsey: It is a week before the halfway mark! I can’t wait to see you all. Thank you very much for my impact letter, it was very helpful. I’d forgotten many of the instances and helped me realize what I need to work on. Michael has already given me some very deep insights into my behavior and how I can change it. I read it out to my group, omitting nothing, even the bits that made me squirm, and I answered all of their questions as honestly as I could. It was really hard, very scary, but also very relieving in an odd way, although I was quite insecure afterwards.

In taking feedback from the group, the adolescents chose to reciprocate their parents’ honesty in their letters home. Those letters revealed courage through uncensored letter writing despite anxieties about disclosure of something their parents did not want to read. They seemed to be okay with the risk of hurting their relationships with their parents in exchange for possible benefits of raw openness to share honestly. The following was an example of this new courage to share:

Gabe: In the past I was not open to you, and now is a time for complete honesty...When I was about 14 or 15, I started smoking pot...I was feeling very anxious and depressed so I started smoking more, almost every day...I chose pot to numb my emotions instead of dealing with them. My freshman year I started to smoke cigarettes along with this. I continued to do this sorta on and off all freshman year. In my sophomore year I kept holding my emotions in, and it was hurting me from the inside. I answered this pain by using oxy-codon and pot...At this point I was completely dependent on pot. As I kept smoking, the pot affects started decreasing due to a built up tolerance. Seeking to numb my emotions I started using Xanax, an anti-anxiety medication...I had a really hard time with it, and I used vikiden [sic]. I wasn’t taking the break up well, and I started smoking vikiden [sic] on tinfoil. I was doing this for a while and I became dependent on it.
I am so sorry that I put you guys through this. This was really hard for me to write this and I know it is hard for you to read this. It must have been very hurtful for you and dad to see me doing this to myself. I haven’t been thinking clearly for a while. I am so sorry, and it kills me to read this over, and see what I have done. I hope you find this helpful, and I hope you can forgive me.

This theme of *accountability and apology* at this phase revealed to parents personal aspects of their adolescent’s life. These circumstances were not discussed openly previous to coming to the wilderness as in the following example, which this participant disclosed without her parents’ foreknowledge of the situation:

Chloe: Once I lost my virginity, I gave up on myself. I lost all motivation to live a pure and healthy life because I guess I felt like I could never be the same. Things like drinking became so casual (even if in my heart I knew they weren’t) to me. What was so hard for me during this time was the stinging pain of disappointment I felt from my peers at school, but mostly from my own heart.

At this point in the adolescent’s journey, many were ready to claim their portion of the problems and began to demonstrate this ownership through words and behaviors. These statements reported through the letters, in this phase, were one of the best indicators of progress and emotional risk-taking with parents. The following were illustrative examples of adolescents who took new ownership and accountability:

Chloe: This past year I have caused problems, tension and unnecessary stress on you both and our entire family, as well as specifically your marriage. My arrest caused not only an altering in my future schools and my reputation, but more importantly has had a disastrous affect [sic] on our family. I cannot apologize enough for my reckless, disrespectful, and overall ignorant decision to allow people in our home without your supervision. And even now, I don’t feel as if an apology will ever suffice for the damage I’ve caused your hearts, future, and wallets. I hope you both know how difficult it was for me to come back to school without having some kind of communication with my peers knowing that the story of my arrest, due to the charges against me, would be significantly altered and exaggerated. This was one of the reasons I stole my phone back from mom’s purse. I’m aware that this is just one of the several incidents that I have lied to you both. I recognize that I have a problem with lying to get my way when you clearly draw boundaries for me. I am very stubborn.
Brynne: I knew that I was heading in the wrong direction and was afraid to tell you guys in fear that you would threaten me and make everything even harder for me. I spent most of my time up in my room avoiding you guys. I separated myself because I became so depressed that doing anything was a struggle.

Gabe: I should have taken accountability and come clean about it instead of lying to you. I should have realized that honesty is the key to building our trust back. I have tried to alter urine tests many times. I have lied to you far too much, and you do not deserve it at all. I was constantly being selfish, and I used any tactic to get myself out of trouble.

Another way the adolescents took accountability was explaining to their parents the ways that they had treated them poorly as in the following examples:

Brett: From a young age, my relationships with my parents centered around control and strategy. I have manipulated and used my parents to a tee. I always use leverage such as me blowing up to control them and force them into doing things for me. I also used leverage and strategy to negotiate things like curfews into my favor. A great example of this was when I used my friend’s abilities as a math tutor to convince my parents to let me sleep over at her house after a party. Somehow, it worked. This is a perfect example of my strategy out-maneuvering my mother’s.

Chloe: I really miss you, Mom. I want to apologize for hurting your feelings and bruising your tender heart. You are absolutely the epitome of an amazing mom and you have a heart that only desires to give and help. I cannot express how much guilt I feel here. My heart breaks thinking that my actions have cost you a job that I know you are so passionate about. As I sit here crying while writing this I want you to know how sorry I am. I cannot wait to see you and hug you.

The theme of apology and accountability at this middle phase of treatment looked quite different than the same theme in the beginning phase. There was a new level of disclosure that the adolescents were willing to risk with their parents in hopes of gaining emotional safety. They described the reasons why they were at the program, and they began to gain new ownership of their issues. This theme was less prominent from the adolescents who did not write very extensive or lengthy letters to their parents. When
adolescents chose to write openly and share their truth, the sincerity and the apologetic tone is communicated through these authentic letters and potentially influenced trust.

**Conclusion of the Middle Phase**

The middle phase of treatment represented the most number of the letters and the majority of the time spent at the wilderness adventure therapy program. For many of the adolescents, the middle phase marked a period of change and growth as they found new coping skills and began to develop a better sense of self. In this phase, the adolescents expressed hope that a more positive interaction with parents would take place at the highly anticipated parents seminar. Generally, with a positive experience together and a new openness and disclosure risked with parents in the letters, these interactions invited improvements in the parent-child relationship. Those themes led up to the final phase at the wilderness adventure therapy program.

**The End Phase**

This phase of treatment took place in the last few weeks of the adolescent’s stay at the program and in the final letters home that corresponded with this time frame. There were two overall themes that reemerge in this stage. They were *positive growth and coping* and finally *negative emotions*, which usually occurred in that order. Adolescents in this phase were fairly comfortable with outdoor living and had a sense of establishment in the group. This phase represented a sort of peak of growth followed by more difficult themes in the letters as they anticipate the upcoming transition (see Figure 1c).
Positive Growth and Coping

The theme of positive growth and coping was part of the final phase as the adolescents achieved a sense of accomplishment with their time in the wilderness and took on leadership roles within the group. They described how many of the same things were happening in the group as did in the beginning of their stay, however, that their reaction to these circumstances had changed. For example:

William: No, the war-storying [continual re-telling of negative behaviors that an adolescent engaged in before at the program] hasn’t stopped, but it’s okay. It doesn’t influence me as I simply don’t participate in their conversations…I think I’ve been making a lot of progress…I can’t wait to show you the change I’ve made!...It’s been interesting seeing myself change (I’ve been journaling my progress).
Many reported being pleased with their progress until this point in their journey. One boy wrote, in a letter sent to his parents but addressed to himself, the following example:

James: Dear James, You have come a hell of long way. You’ve quit lying and being dishonest. You’ve learned to control your anger and swearing extremely well. You have discovered loads about yourself. You figured out what kind of person you are and who you wanna be.

Some expressed gratitude for the wilderness experiences and what they had learned and committed to change upon transition. They described how the program had impacted them:

Chloe: This week has really been incredible. The hikes have been challenging, silent, and long which direct me toward reflection and prayer. I’ve realized the significance of “days off” or rest days where you just disconnect from the world and connect with nature, creation, and the Lord. I’ve also, however, realized I do better when I’m busy. I want to really be involved with sports, leadership, and arts at my new school. I’m really excited for my transition and all the things the experience will teach me.

Gabe: I am done manipulating every situation, and I’m sick and tired of deceiving the ones I love. I have managed to ruin the relationship I had with my family. It brings me pain to think of how many times I have betrayed you and disappointed you. I will change, and you’ll see your son returned to purity and innocence. I am learning how to truly be compassionate, and I know that I can be great if I put my heart in it. P.S. Can you send me my glasses and a book to read, preferably Game of Thrones? Love Gabe, your misguided son.

In the end phase, positive growth and coping was the highest lookout point of the entire journey. It was as if the adolescents had reached a pinnacle and were now able to look back on their personal and relational journey through the program and recognized the transformation that has taken place. Not all adolescents in the sample arrived at this feeling of achievement, but most did. The next quote was a good example of positive growth and the negative emotions that adolescents in this end phase experienced:
Lindsey: I’m scared about coming home. I’ve really grown into myself out here - comparing the skeletal, pale girl with so many issues to the muscled, smiley, strong and yes, very hairy with tan lines is scary. I am so much happier, but I’m also very fragile and I can’t deal with another broken soul.

**Negative Emotions**

It was surprising to discover that the final theme that began to permeate the letters was *negative emotions*. However, upon further investigation, it was clear that this *negative emotion* theme was due to specific factors the adolescent in that phase faced, and it did make sense that the adolescents felt some trepidation about future unknowns.

In the letters, some of the adolescents were anticipating going to a therapeutic boarding school. Some grew impatient with their parents just before the transition, and some described feeling tired; and due to these feelings they wrote about starting to check out of the group in the following examples:

Chloe: Today has been one full of tears, faith, and disappointment. I’ve had the preconceived notion that this week would be my last. However, I got news today that I have another 3 weeks left here. This was hard to accept for many different reasons. I want to be home with the knowledge that I will be away for boarding school and college. I want to be home knowing that I’ve worked my ass off every week that I’ve been here to get the absolute most of all the resources I’m given here. I want to be home because I want time to rest with the knowledge of how busy I will be this summer. I know and trust you both, but am extremely saddened by this news. This entire journey has been difficult but extremely beneficial, and life changing. I’d like to know your reasoning behind another month here. God is in control and that’s all that has given me strength today. I’ve never felt this kind of homesickness but also appreciation for my life out of this program. I cannot and will not, for myself, digress from the growth I’ve made while I’ve been here, but my heart is aching tonight.

Brett: After 11 weeks I’m starting to seriously “check out” of the program. That’s what we call it when a guy who’s been here awhile starts to lose his grip. My attention span is starting to waver and I’m starting not to care. It’s not a good feeling and I don’t know how to fix it. All I can say is hurry up with those schools! ha ha.
Anxieties about the future emerged in the letters as adolescents anticipated difficulties of maintaining growth experienced during the program. Some adolescents even did some perspective-taking of their parents and anticipated that the transition would be difficult for their parents as well. This is illustrated in the following quote:

Ariana: Dear Mom and Dad, I’m actually going into my eighth week! Can you believe it? Two months! It’s crazy. I miss home so much and I wish you guys would really consider letting me come home. I really feel that I deserve a chance to really prove that I’m really committed to this relationship and to improving my behavior and temper…I feel that I am ready to at least try after all these weeks. I know I’ve changed so, so much. I understand that you’re scared, it’s reasonable, I haven’t done anything really to make my trust account to go all the way up, but I have built it up a little bit. Like with belaying [an act to ensure partner’s safety while rock climbing] you both at parents seminar that took trust.

Many requests were made of parents in an effort to reduce anxiety about the transition away from the program when the adolescent felt very little control, as in the following examples:

James: I write this letter to cover all possible bases about my departure so I don’t have to think about it. I was wondering (as unusual as it is), if I could leave or travel by train...Also over my transition can I get a haircut? I hate this long hair it’s annoying and I look like a damn sheep.

Gabe: Can you bring my black moccasins up? Also, can you bring me my white thermal sweater and my black analog beanie please? The clothes I have in storage are not warm enough for when I leave. One more thing, I need to shave desperately, and it is too long for a normal razor, so could you bring up the electric razor I use? It would be much appreciated. I can’t wait to see you guys. Love, Gabe

Summarizing the end phase of negative emotions is an honest statement about the uneasiness that most adolescents experienced in Brynne’s statement: “I keep wondering what is going to happen to me after this program.”

The final theme of the journey was negative emotions, and this was laden with feeling tired and impatient. In the transition, adolescents felt that they had little control
and made requests of their parents in anticipation. From the letters, although some
described some excitement, it is obvious that the adolescents felt anxious about the
unknowns of the future.

**Conclusion of the End Phase**

In the end phase of an adolescent journey through a wilderness adventure therapy
program, they experienced growth and trepidation. They described instances where they
learned, changed, and grew to help their parents see those transitions. Generally, the
adolescents felt good about their accomplishments personally and relationally with their
parents. In the following case examples, I describe the possible range of experiences that
an adolescent had as they participated in the program based upon an amalgamation of
narratives found in letters.

**Case Examples**

The five themes that permeate the letters were present in each of the adolescent’s
letter writing journey. However, because of each adolescent’s unique situation and issues
that led up to their entrance into the wilderness program, the varied relationships they had
with their parents, and the degree of their willingness and ability to change, there was a
range of growth that marked the journeys. I will illustrate with two vignettes, which show
the differences between two of the more extreme examples of letters that were analyzed.
Although the representations were of different genders, that is not reflective of either
extreme positive growth or lack of growth across gender lines. See Figure 1 for a review
of the panorama view of the adolescent journey as a reference point.
**Vignette 1: Ingrained Patterns Impede Progress**

When Brett arrived at the wilderness program, he was unaware that he was going. In his first letter home, he was angry and threatening to his parents. He was preoccupied with thoughts of losing his girlfriend and possibly going to a boarding school. He wrote about enjoyment of some of the adventure activities such as skiing. His letters, in general, were short and unsubstantial, mostly writing to make requests of his parents about things to send him. There was a tone of entitlement and blaming of parents where other adolescents began to take some responsibility for their part in the problems.
Through the middle phase of letters, he continued to be ungrateful and impatient. Then, his girlfriend broke up with him, and he found out he was going to boarding school. He began to work through those feelings. He did express some anticipation of his parents coming to visit. Even following their visit, he stated in the next letter that he felt like the broken relationship had mostly been healed. However, later in the same letter he became defensive about a disagreement that happened when they were together. It was at this point, following the parent seminar that Brett started to give his parents a small glimpse of accountability by beginning to own some of his tendency to manipulate others.

In the final phase of Brett’s letters, he was highly dissatisfied with his parents’ choice of boarding school and was reactive. He described checking out emotionally from the program. In the last letter, he was bitter and pessimistic about the future. In total, Brett wrote 14 letters in the 11 weeks he was at the program. This was a more negative extreme example of one adolescent’s journey through the wilderness adventure therapy program.

**Vignette 2: Healing Through Letter Writing**

When Chloe arrived at the wilderness program, she wrote about missing her parents and the comforts of home. She pitied herself about feeling sick, living outdoors, and how hard it was. She described liking her peers, guides, and therapist. She found comfort in humor, and, after receiving her impact letter [a letter from her parents about how her behaviors impacted her family], she became very introspective.
In the middle phase, Chloe began to apologize for her part in the problems her family had been experiencing. She described feeling proud of herself for accomplishing hard things out on the trail such as backpacking far or rock climbing high. Her letters were positive, and she described some of the humorous things that happen out on the trail.

Also in this phase, Chloe felt like she could be open with her parents, whereas previous to the program, she did not have the trust and courage in the relationship to be able to do so. She divulged the internal processing of all of the events around her arrest, alcohol use, and losing her virginity. She described how her vision of herself had changed as well. This openness showed her courage. In the next letter, she described her gratitude for her parents and how they had heard her.

Chloe began a transformation to a more positive way in which she wrote about herself in her letters. She described a search for whom she was and what she would like to see of herself in the future. She started to use language that implied a belief in herself, and she rediscovered her spirituality in the silence of nature. She described the power of uncensored letter writing and continued to be open and apologetic. Chloe described the anticipation and powerful moment of being reunited with her parents and feeling empowered.

In the final phase, Chloe expressed excitement about the future. She was upset when she learned that she would be leaving three weeks later than she thought. She continued to write lengthy letters and talked about the courageous honesty and healing she had found through letter writing. She and her parents negotiated a home contract, and
in her last letter she described finding the positives in some adversity she faced out on the trail. Ultimately, she identified as having found herself, increased her own efficacy, and felt that she knew who she was and where she was headed after the program. Chloe wrote 26 lengthy letters and was at the program for 10 weeks. She was a more extreme example of an adolescent who had the courage to explore identity formation and found the program to be healing and therapeutic.

**Summary of Findings**

Wilderness adventure therapy treatment is an intervention that has potential positive benefits on families. As written by the adolescents themselves in letters to their parents, the discovered themes that marked an adolescent journey through a wilderness adventure therapy program were *impact of wilderness experiences, desire for improved relationships, apology and accountability, negative emotions, and positive growth and coping*. Key examples were highlighted to give the reader a glimpse into what the experience was like for those adolescents during the beginning, middle, and end phases of treatment.

The beginning phase themes emerged of *negative emotions, apology and accountability, impact of wilderness experiences, and desire for improved relationships*. Adolescents, in general, had difficulty adjusting to outdoor living. They felt homesickness, anger, and sadness. They had regret about the past and wrote about how they wanted their important relationships to be.

The majority of time spent in the program and the most number of letters were in the middle phase of treatment. This time period marked the most change for the
adolescents. Some developed new coping skills and progressed toward positive identity development. They had an opportunity to demonstrate changes when parents visited at the parent seminar. The adolescents anticipated this experience with enthusiasm. During the middle phase, the adolescents who continued to succeed in the program took risks with their parents through honest disclosure and accountability around specific problematic circumstances. This phase segued into the final stage of treatment.

In the end phase, adolescents had an opportunity to continue to implement skills and tools they had acquired in the previous weeks. They were more at ease in the wilderness environment and frequently were feeling proud of the growth from the physical, mental, emotional, and spiritual trek. They took on leadership roles, and the tone of letters to parents was more at ease. Feelings of little control and anxiety about unknowns of the future also settled in with the transitioning adolescents. They were hopeful that all of the new skills and learning would translate to their next environment.

In summary, there were a variety of experiences and individual journeys that took place in the wilderness adventure therapy program. In general, adolescents increased their efficacy about their ability to do hard things and frequently gained insight into some of the past difficulties and problems that were impacting them and their families. Most adolescents showed an increase in emotional risk-taking with their parents and expressed love and gratitude for a chance to rebuild their fractured relationships. Finally, those adolescents had a chance literally and figuratively to climb a mountain to gain a new perspective by looking back from where they came. From this vantage point and with slight hesitance, they then promptly turned around and headed for the next horizon.
CHAPTER V
DISCUSSION

This research has provided information about the lived experience of an adolescent going through a wilderness adventure therapy program as documented in letters written to his or her parents. I have identified the overarching themes that constitute the letters and in what order they generally appear throughout their stay. In this section, I will address the conclusions, observations, and recommendations as it relates to the adolescent journey, limitations, implications, and unique contributions, areas for further research, and my observations as the primary researcher.

An Adolescent Journey

In letters written from adolescents to their parents, the adolescents described their experiences while participating in a wilderness adventure therapy program. The letters revealed five major overarching themes, which were: the impact of wilderness living experiences, desire for improved relationships, apology and accountability, negative emotions, and positive growth and coping. In this section, I will review how many families arrive at sending their adolescent to a wilderness adventure therapy program and how the discovered themes that mark the journey are supported by the current literature. Each segment tells a part of the story of an adolescent who went through this experience.

The Arrival

There are many preceding factors that lead to families’ participation in the wilderness adventure therapy program. Adolescence is a time of transition and growth
(Crosnoe & Trinitapoli, 2008). In this process of change both parents and adolescents navigate the adjustment (Bornstein, Jager, & Steinberg, 2013). In this study, parents felt that their own efforts were insufficient to meet their adolescent’s needs. They intervened when they sought out help from outside sources, which may have included various forms of therapy. Wilderness adventure therapy has shown that it may be an effective intervention (Bedard et al., 2003; Bettmann, 2012; Duerden et al., 2009; Hagan, 2002). With growing numbers, many families elect to enroll at these types of programs (Becker, 2010).

**The Themes of the Journey**

While participating in a wilderness adventure therapy program, letter writing is the main form of communication between parents and children. Letter writing has a variety of therapeutic benefits (Nau, 1997). Distance can give parents and children a meaningful separation (Harper, 2009) and give both parents and adolescents space and an opportunity to reflect. Letters can slow down the often problematic and reactive conversations about difficulties that families may be facing.

Expressive letters are associated with physical, psychological, and relational improvements (Mosher & Danoff-Burg, 2006; Poon & Danoff-Burg, 2011). The adolescents write about a variety of subjects relating to past experiences, present happenings, and future hopes. Many take the emotional risk of being vulnerable with parents in expressing emotions despite the possible negative implications of full disclosure. The letters can be read and re-read by both adolescents and parents throughout the stay and following treatment at the wilderness adventure therapy program, and they
can serve as a more permanent record of growth and progress throughout the journey. Below I will outline the themes that emerged from the data analysis of the journey.

**Impact of wilderness experiences.** In the letters, the adolescents wrote about their new life living outdoors, participation in adventure activities, and how the new experiences impacted them. Russell (2012) has posited that nature-based work can potentially help to restore mental fatigue and revitalize mind, body, and spirit. In an increasingly technologically dependent world, the solitude of wilderness experiences can be extremely beneficial for adolescents (Knapp & Smith, 2005), and May (2006) suggested that there is a power of slowing, or being contemplative in nature that can be beneficial for adolescents. Letter writing in these types of settings can be particularly beneficial.

The adolescents in this study overcame challenges they found in a natural environment and adventure activities. Each successful experience can increase an adolescent’s sense of self-efficacy, or the belief in his or her ability to accomplish difficult things (Bandura, 1977). These impact experiences and increased efficacy may contribute to the personal growth and development of at-risk adolescents who have experienced behavioral difficulties at home and in school (Bosch & Oswald, 2010). The adolescents in this study were influenced by the growth experienced through the challenges and rewards of outdoor living and adventure activities.

**Desire for improved relationships.** One of the most encouraging findings from this study was that these adolescents wanted to repair relationships with their parents. It was evident from the letters that they did not want to let their parents down. For a parent
who may not always feel very loved or needed, this was a benefit the adolescents offered through their letters.

While away at the therapy program, most adolescents took the time to reflect on their relationships with their parents, and a prominent theme in their letters was an expressed hope for a better relationship going forward. Many adolescents described the importance of maintaining and improving peer and boy or girlfriend relationships, which is congruent with some of the literature (Johnson et al., 2011). While it may seem that many adolescents tend to prioritize friends and de-emphasize the role of the family, research suggests that adolescents rely heavily on families for support and values, and families still play an instrumental role for adolescents (Granic, Dishion, & Hollerstein, 2003). This finding was reflected throughout the large majority of letters from adolescents to their parents expressing love and hope for better relationships.

This desire can be beneficial for adolescents themselves as higher quality parent-adolescent relations predicted higher self-esteem and lower depressive symptoms as adolescents transitioned to young adulthood (Johnson & Galambos, 2014). The adolescents’ group living with peers and writing about the importance of peers at home in letters, is a sign of pro-social attitudes. Pro-social peer relationships help predict social acceptance among peers (Pakaslahti, Karjalainen, & Keltikangas-Järvinen, 2002), and the adolescents frequently remarked how important their relationships with their peers were.

As adolescents progressed through the program, many felt a newfound freedom to share openly sensitive information with their parents. Parent-adolescent attachment difficulties have the potential to be repaired, and ideally, when this happens adolescents
feel safe exploring past events, negative processes, and trauma stories in a different perspective as they are encouraged by the emotional attunement and responsiveness of their parents, which makes adolescents feel safe to explore and share thoughts and feelings (Diamond, Diamond, & Levy, 2014). The adolescents in this study along with Taylor (1938) answer the question: *Do adolescents need their parents?* with a resounding yes. Parents are still wanted and needed despite conflicts.

**Apology and accountability.** Many adolescents apologized for their behavior and attitudes. Many of the adolescents took new ownership of their contribution to the problems that their family had experienced. An important component of therapy is an emphasized importance of mutual accountability among family members (Boszormenyi-Nagy & Spark, 1973), and this is a positive step that many adolescents took in their letters to their parents.

An apology is an attempt to repair trust, and the adolescents in this study made various efforts. Apology can be done in several different ways with varying degrees of effectiveness (Lewicki & Polin, 2012). Perceived sincerity, timing, and taking responsibility for the adolescent’s part in family problems were factors that can indicate the effectiveness of the apology and accountability. For the adolescents who apologized and chose to write uncensored, disclose their stories, and take responsibility for their poor choices, this seemed to be a pivotal component in the therapeutic process as it has a tendency to build trust.

**Negative emotions.** Negative emotion was a theme that showed up in each phase of the journey, but was especially prominent at the very beginning and very end of the
journey. Some negative emotions may serve an adaptive purpose. One study found that the expression of negative emotions such as anger were actually associated with higher quality of life and lower depression, but that fear and anxiety among the particular population were indicators associated with lower quality of life and higher depression (Lieberman & Goldstein, 2006). It would be interesting to try to distinguish adaptive negative emotions from detrimental ones.

Negative emotions in the beginning phases of a new relationship may be considered inappropriate; however, negative emotions later on may be a sign that the relationship rules have evolved (Aune, Aune, & Buller, 1994). In this study, perhaps the adolescent’s relationship with their parents was safe to share negative emotions but perhaps was unsafe because of negative emotions. Distinguishing when negative emotions are destructive to a relationship would be a key for families and professionals to determine. Regulation of emotions is a skill that family therapists can help adolescents and parents to implement.

**Positive growth and coping.** Adolescents wrote about how they were changing and growing in a positive way as they implemented new coping skills and increased their belief in their abilities. For some adolescents who participated in wilderness therapy, they did not necessarily even need to want to change in order to do so. In the wilderness environment, they are automatically removed from many poor coping methods they may have been using to deal with problems at home (Bettmann et al., 2013).

Overall measures of resilience and learned coping skills can decrease anxiety and depression and externalize anger and aggression (Ng, Ang, & Ho, 2012), and this is
therapeutic. When adolescents felt like they had a variety of resources when things got stressful, they were able to better manage the difficult circumstances that arose in their lives and families.

In summary, many adolescents and their parents have selected wilderness adventure therapy programs as an intervention for their family. The adolescent experiences as written in letters to their parents while at the program described the overarching themes that constitute the journey. As the literature indicates, these themes may be important in the healing and growth process for these families.

Limitations and Future Research

As with all research, there are limitations to this study. Many of the limits from the study were consciously understood going into the research. This is the first investigatory research on how an adolescent described his or her journey through a wilderness adventure therapy program in letters to his or her parents, and there are no other studies from which the results can be directly compared. The population from the study was from a clinical population of adolescents experiencing a wilderness adventure therapy program, and perhaps letters from a non-clinical sample may yield different results. The findings, therefore, cannot be generalized to a greater population because of the nature of the design. It is believed however that the findings can be a guiding and preliminary resource for future studies in this area of research.

Limits to the study may also include the following factors. The scope of the study is limited to one particular wilderness adventure therapy program. The journey and results described in this research may be different depending on the therapeutic and
programmatic approaches that other wilderness therapy and wilderness adventure therapy programs have in place. The number of participants in the sample is small compared to the overall number of adolescent letters to which researchers had access to; however, saturation rather than number of adolescent writers determined the sample.

Because not all participants in the wilderness adventure are intact families, this study may not represent the experiences of adolescents who write separate letters to their biological parents and perhaps stepparents. The results may have also been different if there was more diversity in ethnicity of the adolescents. Additionally, the journey described and illustrated is not a result of direct questioning of adolescents about their experiences; however, it does indicate how they coped with the experiences during the journey through letters to their parents.

Finally, three of the four data coders had previous personal experience in working with adolescents in treatment settings that may have been an advantageous or biasing factor in how the coders experienced the letters. Despite the limitations, the research has provided valuable contribution to this limited area of study.

Due to this research being a pioneering attempt to understand the letter-writing journey of an adolescent through a wilderness adventure therapy program, there is a need for further research to compare to and potentially confirm and bolster the implications of the research findings. This study provides a foundation for important future research. Further research directions may include the following wonderings: how to effectively use the five themes found in this research as interventions strategies and measure effectiveness outcomes and family reports, effectiveness of wilderness adventure therapy
versus wilderness therapy for parents and adolescents, the journey of a parent who sends their adolescent to a wilderness program as found in letters to their children, therapists’ perspectives on working with families in this setting and the therapeutic relationship, variations on similar study with different diversity found within the sample, and post program maintenance of therapeutic goals.

**Implications and Unique Contributions**

The findings in this study provide insight for a variety of people. Parents and adolescents in crisis can use the findings to better understand an adolescent’s perspective. Parents can also learn what they and their son or daughter may experience if they decided to intervene by choosing a wilderness adventure therapy treatment intervention. In this section, I will describe the gap in the research, implications for parents, adolescents, and professionals in wilderness therapy settings, as well as implications and unique contributions this research can make with family therapists and the change process when considering families from a family systems theoretical framework. Finally, I will suggest further research and discuss my observations.

**Gaps in the Literature**

Although there have been several studies looking at wilderness therapy programs and therapeutic benefits of letter writing, there has never been a study that addressed the primary mode of communication, letter writing, as evidence to understand what the journey through a wilderness adventure therapy program is like for an adolescent participant. This finding contributes to the literature shedding light on the experience of
an adolescent through participation in the growing field of wilderness therapy (Becker, 2010). I described the process of the journey that took place as evidenced through the letters. I am not only interested in the fact that change occurred (as would be evidenced by changing scores on pre- and post-questionnaires), but I am very interested in how the change occurred. As I have discovered how the adolescents describe the process of change, this adds the adolescents’ insight and group identity to the literature, a primary objective of phenomenological research.

Implications for Adolescents

This study can impact adolescents who are considering wilderness adventure therapy as a treatment modality as well as any adolescent with strengths who may be struggling. Adolescents who know the findings of this study are more informed to determining the appropriateness of intervention. Wilderness adventure therapy is well suited for the adolescent population (Butler, 2008) as an experiential approach and is often an effective treatment modality (Honigsfeld & Dunn, 2009).

To further the transparency for informed decision-making, intentionally included in the study were participants who may or may not have improved through the wilderness therapy experience. This finding is representative of a variety of experiences of adolescents in the program and true to the lived experience of purposive sample in which some adolescents may have had more success than others. This is intentional because it is more true to life. Because many adolescents experience positive outcomes, this builds hope.
Hope. Many adolescents, despite being young, have gone through very difficult circumstances and wilderness adventure therapy offers one way that adolescents have received help. This is a treatment modality with fewer stigmas attached than other common options (Butler, 2008). Adolescent can see this treatment modality as a positive way out, to experience change, and instill hope. Many of the themes that emerged from the research have implications for adolescents.

Change. The themes that emerged from the letters served as agents of change that many struggling adolescents need. Many adolescents have a desire for improved relationships. An improved relationship with themselves can help progress in one of the primary tasks of adolescence, identity development (Erikson, 1968). Many adolescents experience self-loathing, so a validating, therapeutic environment designed to help adolescents who feel lost know who they are, what their strengths and virtues are, and increase self-compassion is a welcomed change. Also, relationships with parents are very important and this study highlights that there are relational benefits to expressive letter writing for adolescents (Toepfer et al., 2012). As emotional safety including expression of negative emotions develops in the letter-writing journey throughout the program experience, it shows the important skill of being congruent and authentically human (Satir, Banmen, Gerber, & Gomori, 1991). When this safety is restored apology and accountability is natural and becomes another chance to repair relationships.

Another way an adolescent may experience change is through a dramatic change in environment and from the regular rhythms experienced in the home environment. The outdoor setting may be appealing for some adolescents, but the impact of wilderness
experiences is something that adolescents can anticipate. They can learn that they can do hard things. Post treatment, many outdoors settings may help adolescents recall their positive growth and coping as well as adventure experiences, a therapeutic place often associated with feeling grounded. Because the experiences are so emotional, adolescents can practice emotion regulation skills that may be useful for an adolescent.

**Strengths focus.** Wilderness therapy has not only an emphasis on reducing symptomology, but on building adolescent’s resilience. Focusing on personal virtues and strengths in adolescents is associated with positive affect. It also builds skills and helps adolescents accomplish hard things like group-living, emotional experience of the therapeutic process, weather challenges, and demanding adventure activities requiring execution of hard tasks (Russell & Phillips-Miller, 2002). These experiences throughout the program increased self-efficacy, or belief in one’s abilities, which helped the adolescents in the study cope. Increased efficacy in a particular domain can increase likelihood that beliefs could generalize the efficacy to other problematic domains (e.g., academic performance; Bandura, 1997).

There are several implications that can have an impact on adolescents through program selection and themes that emerged which are common to adolescents which can infuse hope. Expressive letters written throughout the program or in any therapeutic setting can have a positive impact and provides a record of change that adolescents can refer to post-treatment to remember the struggles and reinforce growth.
Implications for Parents

Parents should be commended for their recognition of the needs of their adolescent son or daughter and the courage to seek and invest in getting help. As with adolescents, findings from this study can provide parents with a better understanding of the therapeutic journey through a wilderness adventure therapy program and the appropriateness of the intervention for their family. Parents in this study, to whom all the letters were addressed, have a unique opportunity to improve their working relationship with their adolescent son or daughter and I will describe things parents can do to encourage growth.

Fostering improved relationships. Throughout the journey through a wilderness adventure therapy program, as well as generally, parents play an instrumental role in progression toward family goals. Letter writing between parents and adolescents can offer a new way for parents to connect with their son or daughter. Through the letter-writing vehicle, parents have a captive audience that they may not have had at home under normal circumstances. It offers an opportunity to genuinely communicate through expression of thoughts and emotions in order to introduce a new type of communication to interrupt the often-negative homeostasis within in the family. In the adolescents’ letters, the adolescents frequently thanked parents for meaningfulness of the parent letters.

One significant contribution of this study is that it is not from the perspective of a parental or professional’s assessment on what an adolescent’s journey through a wilderness adventure therapy program is like, but the informant about the journey is the
adolescent him or herself as found in their letters to their parents. An implication for parents is that they have a chance to do some perspective taking through reading letters from their children and working toward aligning goals (Goldberg, 2000). This can potentially help them overcome difficulties that permeate the parent-adolescent relationship (Riordan, 1996).

**What to do.** Parents may wonder what their role is in the process and how they can be helpful and experience the change process themselves. I will highlight a few things parents can do to aid in this therapeutic process. First, they can ask for training in expressive letter writing strategies and practice writing letters that encourage their adolescent to feel emotionally safe. Parents can model expressive letter writing subsequently inviting the same in their son or daughter. Another thing that parents can do is take ownership for their role in the problem, which also encourages emotional safety. Finally, in preparation for the parent seminar, they can emotionally prepare to create a positive experience with their son or daughter and can seek direction from the family therapist who has done it before. During the seminar, parents can put into practice the positive changes.

Parents journey of sending their child through a wilderness adventure therapy program is a difficult and emotional experience. Parents play an important part in the lives of their adolescent son or daughter and a vital role in the change process despite distance. Expressive letter writing can be an effective treatment modality to foster an improved relationship with their children and parents can be intentional in helping
facilitate that growth for themselves and their child. Parents can also be aided through professionals at the wilderness therapy program.

**Implications for Wilderness Therapy Program Professionals**

Program professionals need to know the process of change for parents and adolescents so that they can intentionally facilitate it and this study aids in the understanding for programs. Programming designers can encourage field staff to have a strengths focus with adolescents, appropriate challenge and safety with adventure programming, and as well as skills for facilitation of emotional safety within therapy groups. I will describe implications for program decision-making and how the research can help the program itself.

**Programming decisions.** The findings in this study provide clues as to the adolescents’ journey through a wilderness adventure therapy program. Programmatic-level structuring and orchestration of programming decisions can be carefully constructed to better facilitate therapeutic growth. Findings indicate the importance of expressive letter writing as a way for parents and adolescents to experience growth and change.

There are several ways for program directors to encourage this process. First, they can train the therapists and staff in expressive letter writing and how to teach it to parents and adolescents. Generally students who wrote more, risked increased disclosure with their parents and potentially had more growth in trust building with parents. Another simple recommendations for wilderness-based programming that could go a long way to encourage expressive and therapeutic letter writing is that these programs provide high
quality writing materials. Programs could also provide a waterproof pouch to preserve letters so that adolescents can reflect on the therapeutic materials again and again. These are two simple ways for programs to enhance this therapeutic intervention that is very important.

Protocols around letter writing can be more explicit. Because adolescents who wrote longer letters tended toward relational growth with parents, letter writing time should be scheduled into daily routines. For therapists in other settings, families would have to follow-up with expressive letters on their own time, but in wilderness adventure therapy, the expressive letter writing process can be intentionally facilitated out on the trail. Writing should be daily for 20 minutes (Pennebaker, 1997) to give time and space for expressive letter writing. Field staff should know the importance of this time as an indicator to parents of therapeutic progress. Staff can also encourage adolescents to feel courage to take emotional risks to build relational trust with parents. Programs can also develop a protocol, rituals, and group support with the difficult and emotional process for adolescents of receiving letters.

As another implication for residential therapeutic programs, I recommend particular attention to the programming choices regarding introduction to and departure from the program. Because of the difficulty and negative emotions associated, a focus on beginning and end of the treatment program intentional decisions to make accommodations to decrease distress, increase safety program initially, and increase assurance at the end that they have gained the skills to be successful in the transition. Making this process more comforting and assuring for adolescents may make the
program more successful and less distressing for the adolescents. In addition, programs could consider as a transition gift to families, an organized copy of the letters to help them reflect later on the journey throughout the program to better maintain growth.

**Research as a tool.** This study has implications for the growth of wilderness adventure therapy programs as a viable treatment modality for adolescents and their families. The research can help programs accurately explain the process of change, the services they offer, and appropriateness of placing potential families in the program. Families can be recommended to read the research for more transparency to build a therapeutic alliance with the families initially. The findings indicate opportunities for growth and healing that families in crisis are seeking. This can increase the number of families served and being helped.

Also, it may be interesting to note for programs measuring program outcomes. Because the final stage of programming is associate with negative emotions, it may not actually be the best representation of adolescents overall progress at the program. Perhaps measuring progress at the end of the middle phase may be more representative of the summit of progress that adolescents experience as well. A suggestion would be one week following the parent seminar.

Programs play an important role in facilitating the change process for families. Emphasis on the direct communication method of letter writing between parents and adolescents is an important programmatic component in which therapeutic benefits should be maximized by intentional decision-making. The findings from the research can
benefit programs as well to show an evidence base for decisions and effectiveness to encourage families to choose wilderness adventure therapy as their route to change.

**Implications for Family Therapists**

The findings from this research may be very informative for many family therapists. Perhaps even the family therapists who have been working with families in wilderness adventure therapy programs do not have a clear understanding of the themed patterned journey outlined in this study. Awareness from the adolescents’ perspective can help family therapists develop a model to intentionally assess and intervene because they understand the process of change. I will describe implications for family therapists in four domains: family systems, process of change, assessment, and intervention.

**Family systems.** Family therapists are the liaison between parents and adolescents in the wilderness adventure therapy program. They can be more effective if they use the family systems contextual perspective to help families. Thinking from this family systems worldview, clinicians help families strengthen the *relationship*, not simply the *individual* adolescent’s journey. When therapists work from this perspective it takes into account translating skills developed in wilderness therapy to the family and the transitional environment.

**Process of change.** This phenomenological methodology describes the process of how change occurs, not simply that it did. Knowing *how* change happened increases the likelihood that it can be intentionally reproduced. With the understanding of process research, eventually practitioners could develop a reliable evidence-based model from which to intervene in the therapy process.
Results of this study help clinicians and families understand the process of change and not simply that change has occurred. Frequently, questionnaire scores at intake and discharge of programs are indicators of program effectiveness; however, one of the most important implications of this research is that it provides a general guideline of how themes emerged for a typical adolescent who described his or her experience throughout participation in the program. Both the quantitative measures and qualitative information in the adolescent’s letters are complimentary indicators of the process of growth that can help family therapists make accurate assessment and treatment of the adolescents. This knowledge gives clinicians the necessary knowledge to intentionally intervene specifically using letter writing as an expressive and therapeutic vehicle to facilitate progress toward meeting family goals.

Assessment. Letters play a vital role in therapy process while at the wilderness adventure therapy program and can be an important indicator to assess the therapeutic progress or lack thereof. In wilderness adventure therapy particularly, many therapists do in-person, weekly therapy sessions with adolescents and are updated by a team of professionals about weekly progress. Generally, they do not spend extensive amounts of time in the field during the week out with the adolescents. For this reason, the letters from adolescents to their parents as relayed through the family therapist are key indicators of therapeutic progress during the program. The findings from this study provide a model of the journey which can be used as a baseline assessment tool to compare generally how a particular adolescent is doing in the program. After thorough assessment of the presenting
problem and continual monitoring of progress throughout the program, therapists can utilize and prescribe intervention strategies to help families meet their goals.

**How to intervene.** Therapists may use a variety of therapeutic techniques that fit with their style of therapy as it relates to their clients. An understanding of how themes emerged throughout the program can provide increased awareness to know how to appropriately intervene. Therapists may wonder what they can do or how they can help give the findings of this study. In this section, I will describe some therapeutic interventions that therapists can use despite therapy model that are specifically related to this population in this environment as found by the results of this study.

Therapists can encourage use of letters as a vehicle for therapeutic growth in parents and adolescents, and develop a model to intentionally prescribe letters for treatment of therapy goals. Expressive letter writing is associated with increased reflection and helps adolescents and parents make sense of the important events preceding participation in the program and problematic patterns. Expressive letter writing has many positive health and relational benefits (Toepfer et al., 2012), which can be intentionally facilitated by a family therapist. Therapists can educate clients on what expressive letter writing is and encourage clients to use it. Therapists can also teach parents and adolescents how to foster emotional safety through expressive letter writing, which can improve trust and encourage relational risk-taking through accountability and disclosure (Spera et al., 1994).

Family therapists can use letters in a variety of ways. The interventions prescribed in collaboration with parents and adolescents may be specifically related to the
therapeutic goals of families. They can prescribe letters to be written not only to parents but also in a journal and in third person, which has been shown to be effective in recovering from trauma through writing (Andersson & Conley, 2013).

There are also programmatic intervention strategies a family therapist can introduce. One intervention strategy is to prescribe solos or other down reflection time to do a lot of writing. From the results in the middle phase after the parent seminar, findings indicate that after a positive interaction, some adolescents are more willing to disclose information to their parents as emotional safety is increased. This is a particularly therapeutic time when adolescents can increase vulnerability, take accountability and apologize, and following this a positive change can happen.

Another programmatic prescription that I learned through analysis of the letters is the importance of emotion regulation. Adolescents were constantly describing difficult and empowering emotional experiences. The therapist can pay particular attention to how the adolescent and parents are managing emotions. This may take the form of mindfulness skills and exercises to regulate emotions, which can be a part of the programming.

Speculations

I speculate that the implications from the findings of this study can have an effect on families and family therapists not only in the wilderness adventure therapy settings, but have an effect on more broad community settings. Throughout the letters, the components of change were present as they emerged in the themes found in the letters. Honestly, the reason why my study is important is because the themes that the
adolescents revealed are keys to relational healing. First, environment is key. In this case, the wilderness environment, group living, and programming helped to foster safety and change. In any therapeutic setting, adolescents need a space to feel safe, and when they have this safety, they are free to experience emotions and be more authentic.

Emotional experiencing in this case through expressive letter writing can be the mechanism of healing and change, which can take place in any therapeutic setting. The emotional experiencing process can be supported through intentional facilitation, which can take place through programmatic decisions, itinerary design and timing, and especially therapeutic relationships with therapists and others, and tailored intervention strategies helping the adolescent to have an emotional experience while seeing their own humanity. In this safety, they may feel the ability to be accountable and apologetic and improve their relationships.

While this process is happening, the adolescents are also developing skills through adventure programming, wilderness and group living, and emotion regulation throughout the process to be better prepared to face the challenges that they experience with a sense of efficacy and confidence. This is what positive growth and coping looks like. Skills development can also happen in a variety of settings, not just the wilderness environment.

The result of this process is improved relationships. First, there is improvement with the self through an identity development process of finding and getting to know the self, and second, with the family to improve those important relationships. This creates
healing in torn families and the healing themes can happen in a variety of therapeutic settings.

Helping professionals really need to know this process and components of change because they are the resource to which families rely when they cannot do it on their own. Therapists need to be able to teach families how to write expressive letters to facilitate this process of emotional experiencing and change.

Ultimately, helping professionals can create the space for this process to transpire, but individuals in families get to decide how their personal journey plays out and the meaning that they make of it. It is a privilege to be a part of the process. The outcomes of the journey which end in improved relationships can, if families are the building blocks of society, one family at a time and over time change the structural strength of the larger community.

Conclusion

In summary, this research may be useful for families and professionals alike. It provided clues as to what an adolescent experiencing a wilderness adventure therapy program goes through and what future participants may anticipate. It also provided insight as to how many parents experience a relationship with their son or daughter in a wilderness adventure therapy program. This research has implications that are useful for professionals and specifically family therapists at wilderness adventure therapy programs. This research identifies key indicators in the change process for practitioners working in a variety of settings with families.
Researcher Observations

As a relatively new researcher, I have been deeply impacted by the entire process of this study. I have been mentored in phenomenological qualitative study analysis, and I now know first-hand what the process can look like and the richness of data that can emerge from this process. This information can help well-intending professionals be more effective in their execution of interventions with families.

I have come to learn the rigorous commitment to maintain trustworthiness throughout the study and the satisfaction of presenting fidelity with the data as reported by the adolescents themselves. I realized how research is a very collaborative and intuitive process that has great benefits.

I have a particular interest in the process of adventure therapy as I have guided many adolescents through this journey as a lead field guide and feel that it is particularly fitting for the adolescent population. I learn kinesthetically, and this is a way of learning that is hard to forget. I have personally witnessed adolescents in a wilderness adventure therapy program who achieve and increase identity development as well as adolescents who are so engrained in negative patterns and toxic relationships that their progress is impeded even with a more extreme intervention. The therapeutic benefits offered in the wilderness setting can be healing and powerful.

I have been happy to welcome the writing that gave voice from the perspective of the adolescents who completed a wilderness adventure therapy program experience. As a marriage and family therapist, I am particularly interested in the potential application and
role that the themes which were found in the study may have in working directly with adolescents and their families in the therapy process.

**Conclusion**

An adolescent journey through a wilderness adventure therapy program is a challenging process for families. Expressive letter writing is a powerful instrument to facilitate the change process between adolescents and their parents throughout the program. Themes included: impact of wilderness living experiences, desire for improved relationships, apology and accountability, negative emotions, and positive growth and coping that emerged from the letters are critical components of an effective therapeutic process and provide beneficial information for parents and their adolescent son or daughter as well as professionals, especially family therapists who are a bridge between adolescents and parents in the therapeutic process. This investigatory study gave valuable insight into this increasingly selected intervention choice from the perspective of the adolescents themselves. This research has filled a gap in the literature and I have discussed many implications and suggestions for future research. One adolescent wrote a letter, which was sent to her parents. In this letter, one entire page was scribbled out, but not enough to not be legible. She wisely wrote how the risk of uncensored letter writing as a therapeutic forum is useful to adolescents, parents, and family therapists.

Chloe: The uncensored writing of all of my thoughts would uncover strength that I forgot dwells within me. Reflect after reading my own story, my curiosity to want to read someone else’s book would grow, to know the depths of their hearts and possibly the possibility of our stories overlapping entices my interest. Perhaps our books would have no correlation, but what if they did? The ability to experience someone else’s experiences and know through language is an opportunity that I wish we all had, and have the ability to grow from others’
suffering is an opportunity I can only dream of. How beautiful to read an unedited, complete book of someone else’s thoughts mistakes, victories and disappointments. How beautiful that after reading the best and darkest parts of me God still loves me just the same. How powerful and forgiving our God is.

From the wisdom of a young woman springs a truth that she found. She learned that through uncensored, expressive letter writing in a therapeutic environment can indeed be a powerful mechanism for change in adolescents and families.
REFERENCES


doi:10.1002/smi.2423


Erickson, M. J. (2004). *Parents' relationships with and parenting of their adolescents following the Anasazi foundation experience*. (Doctoral dissertation). Retrieved from ProQuest Dissertations and Theses. (3139215)


doi:10.1177/1359104500005001007


(199004)18:2%3C130::AIDJCOP2290180205%3E3.0.CO;2-V


