

The Therapeutic Impact of Outward Bound Veterans
Research Summary

Outward Bound for Veterans Psychosocial Outcomes Study Summary

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The challenges facing today's veterans are well documented and alarming. Staggering suicide rates, Post Traumatic Stress, depression, unemployment, an overwhelmed VA system, and a sense of isolation are all very real consequences of over 13 years of continuous conflict. Those factors combined with an underlying stigma associated with utilizing mental health services results in an estimate of fewer than one third of veterans diagnosed with mental health issues seeking help (Hoge, Auchterlonie, & Milliken, 2006). This frequently leads to a confusing and difficult reintegration process for those who have served in the Global War on Terror. Given the wide range of issues facing veterans and active duty service members, it is critical to explore alternative venues for mental health assistance.

Outward Bound for Veterans is one such program providing an alternative approach to delivering mental health assistance without the stigma associated with traditional mental health avenues. This national program provides fully funded therapeutic initiatives that combine outdoor group adventure activities (e.g., hiking, canoeing, etc.) with facilitated therapeutic group sessions engaging participants cognitively, affectively, and behaviorally. The primary goal of Outward Bound for Veterans is to provide an experience where veterans build camaraderie, outdoors skills, and personal growth in a team-based, therapeutic adventure model.

The following longitudinal study examined the psychosocial impact of Outward Bound for Veterans on participants. The treatment sample consisted of 199 veterans and the waitlist control sample consisted of 20 veterans. Statistical analyses included multiple regressions and multilevel analyses to determine whether the effect of treatment (compared treatment and waitlist control group's scores) and time (examined change in treatment group scores over time) was significant. Three psychosocial domains were examined: 1) Mental Health Variables Domain, 2) Interpersonal Variables Domain, and 3) Therapeutic Factors Variables Domain. This is the first study of its size and scope to

examine Outward Bound for Veterans' impact on such a wide range of psychosocial factors using a longitudinal, quasi-experimental model.

Results showed a significant effect of treatment across the majority of variables within the three psychosocial domains. Veterans within the treatment group showed improvement across the three psychosocial domains from pre-course to one-month after course. Some variables showed non-significant change from post-course to one-month after course, indicating a tapering effect where there was minimal change in scores (time did not significantly predict change). This indicates that improvement was sustained for these variables from post-course to one-month after course. Other variables showed continued improvement from post-course to one-month after course (time significantly predicted change). The overall significant results show that the Outward Bound for Veterans treatment model helps to increase overall mental health, interpersonal relations, resilience, sense of purpose, and greater interest in personal growth, relating to their emotions, and seeking help.

Several variables across the three domains showed relatively large improvements compared to the other variables. Within the Mental Health Variables Domain, overall mental health (OQ-45_Total score) showed a significant effect of treatment from pre- to post-course and an overall average decrease (improvement) of 14.47 points from pre-course to one-month after course end. An average change of 14 points or greater is considered a reliable change, indicating clinically relevant change from pre- to post intervention (Lambert et al., 2004). The effect of treatment also significantly predicted a decrease in anxiety (DASS_Anxiety score) and depression (DASS_Depression score). From pre-course to one-month after course, Veterans' anxiety and depression symptoms on average decreased (improved) by 8.2% and 7.4%¹. Within the Interpersonal Variables Domain, sense of social connection increased on average by 10% and loneliness (UCLA Loneliness Scale) decreased by 10.6% . Within the Therapeutic Factors Variables Domain, emotional restriction decreased on average by 13%, attitudes towards seeking psychological help increased by

 $^{^{1}}$ Percent change was based on average change divided by total possible change for each scale.

10%, confidence to use resources to promote personal growth increased by 12.6%, and interest in gaining insight about themselves increased by 19.7%.

These results suggest that Outward Bound for Veterans provides both interpersonal and intrapersonal benefits. This is critical considering the increasing rates of mental health issues among veterans, particularly issues related to reintegration adjustment, depression, and anxiety/post-traumatic stress (Seal, 2010). Interpersonal factors such as loneliness and sense of social connection, and mental health factors such as depression and post-traumatic stress are considered critical predictive factors of suicidal ideation (Braswell & Kushner, 2010; Lemair & Graham, 2011; Pietrzak et al., 2010). Additionally, recent returning veterans are often faced with an overwhelming reintegration process coupled with low rates of seeking help (Burnam, 2010; Hoge et al., 2006; Seal et al., 2009). Outward Bound for Veterans can be a helpful therapeutic alternative for those veterans who are more reticent to seek out help through traditional avenues such as the VA.

Considering the significance of these findings, it is important to explore why Outward Bound for Veterans may appeal to veterans and promote psychosocial development. The camaraderie that stems from overcoming challenges as a group can instill positive feelings of efficacy and togetherness. Military culture promotes positive associations with camaraderie and team-based activity. The Outward Bound for Veterans model is unique in that it aligns with veterans' interest in group-based physical activities while promoting an emotionally supportive environment encouraging vulnerability. In other words, therapeutic adventure's use of the supportive group model combined with team challenges to promote camaraderie provides veterans' with a greater opportunity to be vulnerable and address personal issues (Scheinfeld & Buser, 2013; Scheinfeld et al., 2011).

Some veterans may prefer therapeutic adventure experiences because they hold positive associations with recreational activities, wilderness-based exploration, and hunting. These activities often heighten adrenaline and sense of accomplishment because they involve a mixture of challenge, safe risk-taking, and physicality. Hoge (2010) posits that veterans identify with experiences that induce adrenaline and are action-oriented. Outward Bound for Veterans creates a balanced approach that engages veterans' affinity

towards adventure, while simultaneously promoting intrapersonal and interpersonal insight and growth.

Additionally, Outward Bound for Veterans' focus on physical activity supports veterans' affinity to be healthy through activity and exercise (Buis et al., 2011). Mahoney (2010) also notes that high-adrenaline adventure activities can provide veterans with stress relief. Although levels of stress and adrenaline were not measured in this study, these are possible explanations for veterans' affinity towards the Outward Bound for Veterans experience as an alternative to traditional therapy.

The integration of adventure with informal emotional sharing may be a core component of the Outward Bound for Veterans program model, helping to reduce emotional restriction and increase several psychosocial markers. In other words, culture-aware approaches that can be helpful for veterans often remove direct therapeutic facilitation and use experiential activity as the precipitator to engage exploration of intrapersonal emotions or cognitions. This suggests that Outward Bound for Veterans may best align with veterans' interests if they do not overtly integrate structured therapy approaches with the adventure activities.

The significant findings from this study show that Outward Bound for Veterans is a promising approach that supports the needs and interests of veterans. The alignment between the Outward Bound for Veterans treatment model and veterans' preferences likely helped promote therapeutic value and positive psychosocial outcomes. Future research could focus on how specific course components or veteran demographics may promote or detract from improved psychosocial outcomes.