



Sustainability Indicators when utilising Nature for Mental Health

Kaye Richards, James Fullam, & Neal Anderson





Authors:

Dr Kaye Richards



Dr James Fullam



Neal Anderson



Partners:



Dr Alison Greenwood



Professor Chris Loynes



Andy Hardie



Dr Linda Allin

Funders:



UK Research
and Innovation

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Table Of Contents

1	Introduction	4
2	Setting the Scene	5
	The outdoors and mental health	5
	Outdoor learning	6
	Professional practice in the outdoors	6
	Integrating outdoor learning and psychotherapeutic services	7
	Green social prescribing	8
	The Covid-19 pandemic	8
	A framework for sustainability	9
3	Research Approach	10
4	The Six P Sustainability Framework	11
5	Domains and Sustainability Goals of the Six P Sustainability Framework when Utilising Nature for Mental Health	12
6	Applying the Framework	14
	Making a self-assessment	14
	Scope	14
	Application	14
	Suitability	14
	Ethics	14
	Gathering evidence	15
	Assigning a score to each indicator	15
	Positioning	16
	Purpose	17
	Pathways	18
	Provision	19
	Place	20
	Preparedness	21
	Self-assessment summary	22
7	Conclusion	23
8	References	24

Introduction

The **MARCH Network^[1]**, a UKRI funded national mental health research network, set out in 2018 to transform our understanding of how social, cultural and community assets enhance mental health and wellbeing, help prevent mental illness, and support those living with mental health conditions. A key objective was to support collaborative research that addressed the challenges facing mental health provision and practices in the UK.

The ‘**Sustainability Indicators When Utilising Nature for Mental Health**’ resource is an outcome of one of the MARCH network funded research projects. The research was co-led by Dr James Fullam (University of Exeter) and Dr Kaye Richards (Liverpool John Moores University), it brought together partners across the UK to focus on the evolving landscape of using the outdoors for targeted mental health benefit and interventions. This project represented a unique attempt to collate and explore sustainability-related concerns with service users and stakeholders in this rapidly growing sector. The work was particularly concerned with how these types of approaches can best achieve ethical and effective delivery for long term benefit.

A key outcome of the project, **The Six P Sustainability Framework**, is intended for organisations utilising Nature for Mental Health. It provides a structure from which a practical set of sustainability indicators have been derived and collated into a **self-assessment tool**. The range of associated indicators offered in the tool can be used to review and self-assess sustainability across key domains related to the delivery of outdoor mental health interventions.

This guide presents a context to the development of this Sustainability Framework, and the associated self-assessment tool. The tool is intended to support critical reflection and dialogue to help develop and support

practice. Additionally, stakeholders may find this a useful aide in guiding the initial planning of interventions and programmes, and/or for incorporation into standards for sustainable practice.

This project has addressed a significant gap in current understanding and knowledge of the evolving landscape of using the assets of natural environments for mental health benefit. The framework and indicators are based upon the lived experiences of both the participants of outdoor mental health interventions, and the professional stakeholders who deliver such services. It is these voices that are to be celebrated and thanked for making this work possible.

Dr Kaye Richards, Dr James Fullam, and Neal Anderson

This Sustainability Indicators Guide reflects an important agenda in the rapidly growing use of green spaces as an asset for improvement of mental health and wellbeing. As a practical resource it epitomises the aspirations and achievements of the MARCH research network in addressing important research questions that help us to enhance the ways in which we can engage more fully with our social, cultural and community assets in the UK.

This resource is highly important to the sector. Its accessibility for a range of stakeholders will facilitate the enhancement of mental health research and practice across a breadth of valuable practices in natural environments. I hope that it achieves its ultimate goal of supporting more people in having beneficial access to time spent outdoors.

Professor Daisy Fancourt
March Network Lead /
University College London (UCL)



Further information about the MARCH network (2018-2021) and its legacy: <https://marchlegacy.org/>

Setting the Scene

The Outdoors and Mental Health

The role of the outdoors and nature as a community and national asset is clearly part of UK heritage and encompasses using outdoor spaces for leisure activity, education, therapeutic, and environmental citizenship purposes, to name a few. There are a wide range of access points to going outdoors, whether that be a home garden, a local park in an urban area, or a visit to the coastline or mountains of a National Park. There are diverse activities that individuals and groups go to do in outdoor spaces - it could be taking the dog for a walk, going camping, a stroll in the countryside, meditating in a forest, kayaking down a river, or hiking in the hills. Irrelevant of the activity, the recognition of **the value of using the outdoors and nature as an asset for the health and well-being of the population** is now a firmly evidenced position that has driven policy change in the UK (DEFRA, 2018; Public Health England, 2020; Fullam et al., 2021).

Whilst the value of going outdoors has had longstanding recognition in the outdoor learning field and with local, country, and national parks, UK government has now turned its attention to equity of access. Over the next 10 years a key UK Government commitment is to ensure everyone has access to a green space within 15 mins of their home (Natural England, 2023). Such a position underpins how the

lifelong health benefits (both physical and psychological) from going outdoors reflects a step change in transforming how the individual, social and cultural benefits of the community asset of green spaces is realised and enhanced more fully for all.

In more recent years, an abundance of literature on the psychological and physical health benefits of spending time outdoors and natural environments has emerged (Kelly et al., 2018; Jimenez et al., 2021; Richards et al., 2022), which has strengthened the advocacy reflected in the long historical traditions of outdoor learning provision. For example, at the general population level in the UK the likelihood of reporting good health and wellbeing is significantly greater in individuals spending 120 minutes or more in natural environments in the previous week (White et al., 2019). The rationale for going outdoors for population health agendas has clearly become an accepted narrative. Specific to mental health, an expanding body of high-quality research means that it can be stated with confidence that nature-based experiences and exposure to natural environments, supports increased psychological wellbeing, and the reduction of risk factors and burden of some types of health and mental illness (Bratman et al., 2019).



Outdoor Learning

Whilst the current consensus is that getting outdoors is 'good for us' in a multifaceted range of ways, professional practices involving taking people outdoors for physical and mental benefits is by no means a new phenomenon. The utility of the outdoors and outdoor activities as a mechanism for psychological development, and well-being, health, and community benefits, has been evident for many decades in **Outdoor Learning** (Ogilvie, 2013), and whereby these associated benefits saw the emergence of outdoor adventure-based therapies (e.g., Itin, 1997).

Outdoor Education, Adventure Tourism, Outdoor Therapy, and Forest Schools are all established themes within Outdoor Learning, each with their own distinct history, approach,

and established goals of building a range of associated impacts; for example, resilience, self-efficacy, prosocial behaviours, and pro-environmental behaviours (Mann et al., 2021; English Outdoor Council, 2015).

Outdoor and adventure therapies clearly work with a targeted mental health agenda across a range of mental health need and conditions, and psychological perspectives (Gass et al., 2012). These collective practices have a strong national and international foundation in their historical developments and applied practices (Pryor et al., 2023), and have operated in the UK under different guises in many different settings and contexts for many years.

Professional Practice in the Outdoors

Recognition of the outdoor learning field and how this has developed, including the emergence of outdoor and adventure therapy, is necessary in appreciating that the professional landscape of delivering outdoor practices has a range of overarching frameworks. As an example, in the UK this includes **government licensing of outdoor adventure activities** that speak to professional standards and health and safety requirements of working safely with individuals and groups doing activities in outdoor, adventure, green and natural settings (HSE, 2023).

A range of professional competencies for working as an outdoor activity instructor or outdoor learning professional are clearly defined and upheld by a range of associated associations and professional bodies, for example the Institute for Outdoor Learning (IOL). However, in more recent years this has arguably been at risk of being displaced with

new initiatives that might take claim to new ways of working, when in fact these types of practices are not as new as they might first be perceived to be.

The common approaches to personal development that have informed the work for outdoor learning in different guises in many different settings, has in some settings simply been replaced with the word 'well-being'. The implication of this shift is not for detailed discussion here, but what it has meant is that a ground swell of new initiatives claiming to be for mental health benefit and extending reach to mental health groups have come to fruition. And whilst this can and should be celebrated, caution should also be held in ensuring that ethical practice is both set and upheld to safeguard that approaches are best suited to client needs from both a psychological and outdoor activity type perspective, outcomes claimed to be achieved are, and that no harm is done to participants.



Integrating Outdoor Learning and Psychotherapeutic Services

In response to the rapid increase in the number of ways the outdoors is actively incorporated into programmes and services for therapeutic benefits the **Outdoor Mental Health Interventions Model**, was co-created by Richards, Hardie and Anderson (2020). It recognises how different levels of competence, professional responsibility and leadership might apply across a range of outdoor mental health approaches.

The model describes three core zones of practice that reflect the types of work both outdoor professionals and psychological professionals may operate within whilst working outdoors (see Table One). The three zones of practice are not hierarchical, each brings with it different types of emphasis, ethical obligations, competence requirements, and intention of outdoor mental health practices.

Table One:
Zones of Practice for Outdoor Mental Health Interventions

Zone 1 Therapeutic Outdoor Engagement	<p>In this zone of practice engaging individual or group experiences are enriched by the addition of an outdoor or psychological dimension.</p>	<p>Zone 1 encompasses:</p> <ul style="list-style-type: none"> counsellors and psychotherapists offering an individualised outdoor 'walk and talk' session; or outdoor instructors and leaders incorporating a psychological tool within a session; or facilitated or self-led outdoor experiences that promote wellbeing and mental health.
Zone 2 Therapeutic Outdoor Enhancement	<p>In this zone of practice outdoor activities and psychological approaches are jointly used and complement each other to enhance the benefits for participants.</p>	<p>Zone 2 encompasses:</p> <ul style="list-style-type: none"> outdoor and nature-based activities delivered using a complementary psychological approach; <i>or</i> a course of therapy enhanced by relevant outdoor activities or experiences to support resourceful thoughts, feelings, and behaviours.
Zone 3 Integrated Outdoor Therapy	<p>In this zone of practice unique and dynamic integrated experiences fully utilise professional competence in both outdoor learning and psychological therapy.</p>	<p>Zone 3 encompasses:</p> <ul style="list-style-type: none"> co-created, person-centred outdoor, adventure and nature-based psychotherapeutic experiences designed to address individual emotional, psychological, and social difficulties.

(Richards, Hardie, & Anderson, 2020)

The framework offers a way for stakeholders and providers to examine the ways in which each service or intervention is best suited to the individual needs of the client (or group), the piece of work required / commissioned, and/or the environment (see Richards et al., 2020, for a full copy of the associated

statement of good practice the model is associated with). It is, in part, this previous work, alongside that of Fullam et al., (2021), that led to the recognition of the need for greater consideration of issues of sustainable practices across the sector of using nature for health focus and benefit.

Green Social Prescribing

One of the most radical changes to primary care in the UK in recent years has been the policy-mandated emergence of **social prescribing** (NHS, 2019). It emerges from the recognition that some physical and mental health problems are linked to social conditions, and may be better addressed by social, rather than medical, intervention (Alegria et al., 2018).

“Social prescribing is a mechanism for linking people (via a ‘link worker’) from primary care, social care or other/self-referral routes to the voluntary sector and community organisations to support their health and wellbeing.” (NHS, 2019)

Green social prescribing refers to a set of offers and opportunities within social prescribing which connect people with outdoor nature-based programmes and interventions. Major government funded programmes of research are taking place in sites across the UK to test its feasibility, and in time, its effectiveness. Interim findings of this work have highlighted challenges around referral pathways; voluntary, community and social enterprise (VCSE) funding, link worker capacity and demand; and engaging underserved communities (Haywood et al.,

2023). It also represents a new area for GPs, and link workers, and has attracted new entrants to the mental health professional landscape, for example, conservation organisations offering well-being services. Whilst these organisations both control and help give access to a range of outdoor sites, and can also be relatively adept at procuring funding, they can lack knowledge and expertise in mental health.

Stakeholders, including link workers have also raised concerns about the dynamic between health inequalities and access to Green Social Prescribing (Plimpton, 2023; Fullam et al., 2021). Those individuals that tend to make up the largest cohort being referred to social prescribing schemes, older, and multi-morbidity clients, face significant barriers to feeling comfortable and safe in open-air spaces (which reduces the chances of referral to ‘green’ interventions, when other options are available) (Fixsen & Barrett, 2022). There is a risk, therefore, that Green Social Prescribing will mirror or exacerbate the current inequality of access to green and blue spaces across social groupings (CPRE, 2021), a concern that is likely to touch on many aspects of sustainability related to mental health and the outdoors.

The Covid-19 Pandemic

The outdoor and voluntary, community and social enterprises (VCSE) sectors experienced huge challenges, practical, financial, and ethical during the Covid-19 pandemic (IOL, 2020). The resilience of many organisations has been tested, and recovery and adaptation are ongoing processes. There is a clear imperative to make the consideration of future pandemic responses a priority in these sectors. The pandemic was also responsible for a re-evaluation of the importance of access to green spaces, for example, research has suggested that spending time in nature may have buffered some of the negative mental and behavioural impacts of lockdowns (Labib et al., 2022).

The pandemic may have been a catalyst for the increased recognition of the benefits of nature emerging in health policy in the UK (Natural England, 2023). Furthermore, it has clearly accelerated the increase of counselling and psychotherapists taking their work outdoors, as during Covid this was the only way they could work face-to-face with clients. Given this, there has been an exponential rise in psychological therapists recognising that therapy outdoors is a feasible option. Albeit this has been an established way of working for decades from an outdoor and adventure therapy perspective, this is not always recognised or understood.

Although the overall impacts of the pandemic on mental health were mixed, and the full effects are yet to emerge, there is likely to be a pandemic driven increase in demand for support services in the future, particularly in children and young people (Newlove-Delgado

et al, 2022). Furthermore, increasing numbers of psychological and psychotherapeutic professionals are now taking their practices outside. This demand will present both challenges and opportunities for providers of services and interventions in the outdoors.

A Framework for Sustainability

The meaning of sustainability in the context of outdoor nature based mental health services and interventions has a range of considerations. Sustainability as a term is ubiquitous across many of the most important conversations happening in society today. This is evident, for example, across the United Nations (2023) defined sustainability goals. It is clearly a term with different meanings depending on the context. For the purposes of this resource, it is important to separate sustainability in this context from conceptualisations of the term as it pertains to environmental and climate change concerns, not least as many of the individuals and organisations involved in mental health practices are also likely to have conservation and environmental-care remits. Furthermore, environmental agendas are inherent as ethical drivers of outdoor learning practices, so it is not to omit these as such, but to **recognise sustainability in the delivery of health practices has a wider imperative in terms of impacts across client, community and societal benefit.**

A key aim of the research underpinning this resource was the elucidation of a stakeholder driven understanding of sustainability specific to outdoor nature based mental health services and interventions. Some preliminary boundaries were essential to inform this work

and we found that the extensive literature examining sustainability in the context of public health interventions and policy to be useful. Scheirer and Dearing (2011, p.2060) state that, “*sustainability is the continued use of program components and activities for the continued achievement of desirable program and population outcomes*”.

Moore et al., (2017, p.6) use **a definition of sustainability with five key constructs:**

- (1) After a defined period of time,
- (2) The program, clinical intervention, and/or implementation strategies continue to be delivered and/or,
- (3) Individual behaviour change is maintained,
- (4) The program and individual behaviour change may evolve or adapt while,
- (5) Continuing to produce benefits for individuals/systems.

Given this backdrop, **the aim of this research was to develop a set of indicators of sustainability** for organisations, and commissioners of mental health interventions, and support programmes, that are based in outdoor natural environments, and consider exposure to nature and activities outdoors as a key pathway to positive health and wellbeing outcomes.



Research Approach

The UKRI funded March Network research grant enabled a collaborative research team to undertake a 4-stage research process. Researchers engaged with participants of outdoor mental health interventions and service delivery stakeholders to understand and build the dimensions and associated themes relevant to sustainability. An overview of each stage is provided below, and this research activity is the basis of the indicators in this guide.



1

Creating a Sustainability Approach

Using a combined process of stakeholder engagement in the community and review of the relevant literature an initial sustainability framework was developed. This framework was used to refine the methods for the research carried out at seven case research sites across a spectrum of outdoor mental health practices.



2

In-depth Case Study Interviews

The research aimed to identify and classify the processes and factors affecting sustainability in different types of outdoor mental health practices, across a range of mental health conditions, and to understand the evolving impact of the COVID-19 pandemic upon these factors.



By conducting in-depth interviews (n=23) with case site organisation representatives and intervention participants, we were able to identify and categorise those processes and factors crucial to sustainability. While acknowledging that effects of COVID-19 on day-to-day delivery of interventions has largely dissipated, other unexpected events can and have impacted on delivery (e.g., foot-and-mouth outbreak disease in 2001). Our research was able to determine features of practice that are essential in the face of major shocks, whilst also considering a wide range of diverse factors that both influence and determine sustainable delivery and impact. An important aspect of this was the perspective of those that have directly used these services, to ensure voices of participants underpinned any emergent model.

3

Analysis and Refinement

Through an iterative process of thematic data analysis and refinement, a final framework incorporating key stakeholder-defined domains of sustainability emerged, the 'Six P Sustainability Framework'.



4

Defining Indicators

Through reviewing the range of identified subthemes from the research analysis in collaboration with sector practitioners and partners, these were translated into individually defined indicators under each of the Six P core domains. This was an in-depth process of dialogue and review to ensure they maintained core identified themes and their emphasis remained reflective of the research findings. These provide the basis of the detailed self-assessment tool of the 'Six P Sustainability Framework'.





The Six-P Sustainability Framework

From the research process a comprehensive and contemporary sustainability framework has emerged. The research results identified six core themes, which have been labelled as domains of the emergent **Six P Sustainability Framework when Utilising Nature for Mental Health** (see diagram below).

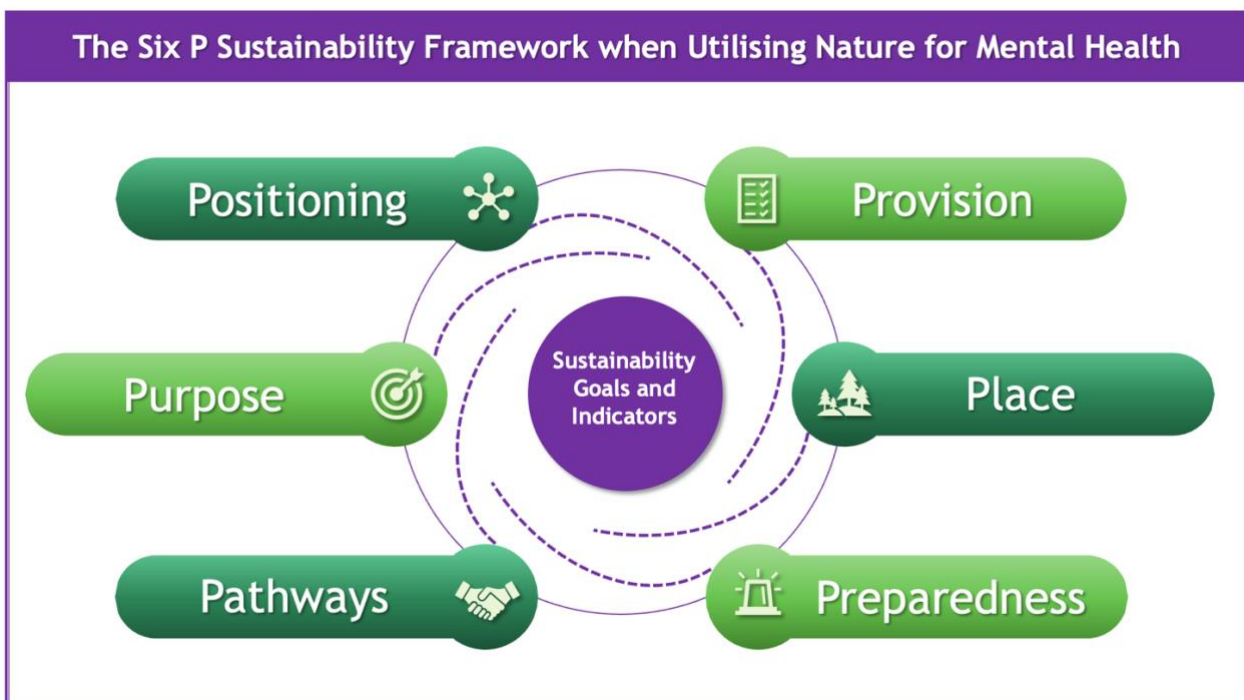
- Purpose
- Positioning
- Pathways
- Provision
- Place
- Preparedness

Each of these six practice domains has associated sustainability goals (see, diagram on the next page) underpinned by 38 unique indicators. However, domains should not be considered in isolation. The research case

studies identified, dynamic convergences across complex interactions, and unravelled wider considerations in best service of participant needs.

The **self-assessment tool** in the next section represents one way of translating the results of the research into a practical and useable format.

The data set is UK based and the indicators have been written with a UK perspective. Those in other countries seeking to apply the self-assessment should make the appropriate contextual considerations.



Domains and Sustainability Goals of the Six P Sustainability Framework when Utilising Nature for Mental Health



Positioning

The identity and alignment of the organisation in an outdoor and mental health context.

Six P Sustainability Goal: The organisation clearly communicates its identity, how it operates in a local context, the impact and credibility of its approach, and how it works alongside others to meet mental health and well-being priorities.



Purpose

How the intervention or service will achieve its stated outcomes.

Six P Sustainability Goal: The therapeutic and outdoor activity approaches clearly match the needs of patient or client groups, are designed and evaluated to enable the intended benefits, and foster ongoing participation in the outdoors.



Pathways

The recruitment, engagement and next steps from the intervention or service.

Six P Sustainability Goal: There are dynamic strategies, local partnerships and information that foster inclusivity and support participants entering and exiting the intervention or service.



Provision

The actions and decisions concerning day-to-day delivery of an intervention or service.

Six P Sustainability Goal: Staff and volunteers are valued. Safety and risk management underpin all phases of the intervention or service. Appropriate outcome measures are employed, and evaluation is used as tool to further develop and improve.



Place

The engagement and impact with the local environment and community.

Six P Sustainability Goal: Decision making at all levels upholds care for the environment, builds knowledge and value of local outdoor spaces, and supports community building.



Preparedness

The capacity of the organisation to respond to major shocks or significant local events.

Six P Sustainability Goal: The organisation has the capability to recognise, adapt, and respond to the consequences of significant events that impact access to outdoor spaces and the demand and delivery of services.



Applying the Framework

Making a Self-Assessment

This resource of indicators complements existing literature in the area of the outdoors and mental health, offering a practical way to assess the sustainability of services and interventions in the outdoors.

With an ever-increasing growth of terminology in 'green' and 'blue' spaces, the Six P Indicators for Sustainability can be applied across the full range of organisations and professionals providing therapeutic outdoor and nature-based experiences for the benefit of others, however they may be described.

Scope

The self-assessment tool reports on those indicators that the research revealed have a relevance to sustainability. Whilst each of the Six Ps may be of value to many organisations and professionals, they are not presented as definitive predictors of sustainability. Other factors may also be important in each setting.

Not all items in each domain will be appropriate for each intervention or service. Take a critical approach to considering the relevance, or not, of each indicator in your particular context. Focus on those that are most useful at this moment in time and be open to critically exploring and identifying others.

Application

The self-assessment tool is an opportunity to review both current and planned practice and provision against the Six P Framework. It can be used by service providers and organisations to review their current position and to inform conversations about plans and activities. In addition, those involved in commissioning or funding services may well find the Six P framework and sustainability indicators offer a useful prompt when examining effective and ethical practice in this area.

Suitability

A number of sustainability indicators call for approaches that are designed to foster ongoing participation in the outdoors. However, therapeutic outdoor experiences may not be appropriate for all. Careful thought should be given to the suitability of a service for participants who:

- don't feel confident and safe being in the outdoors,
- may be re-traumatised by being in specific outdoor spaces or activities, or
- have physiological constraints that need careful attention for participation.

Though many challenges can be overcome with an inclusive approach and careful planning, organisations and professionals should consider individual needs when providing a service.

Ethics

The indicators, and the framework underpinning them are intended to provide sustainability-linked guidance for the assessment and conduct of effective, ethical, and equitable person-centred approach to outdoor adventure and nature-based mental health services and interventions. Ethical perspectives that underpin outdoor mental health practices may be drawn from combining of long-established codes of practice in the fields of psychology, counselling, and psychotherapy (e.g., BPS, UKCP, BACP), along with outdoor learning and outdoor activities (e.g., IOL, MTA, BC, RYA). In addition to these ethical codes, and recognising that services and interventions involve a blending and integration of two established fields, the Outdoor Mental Health Interventions Model (Richards et al., 2020) offers 12 indicators of good practice when providing interventions utilising outdoor learning competence and psychotherapeutic competence.

Gathering Evidence

A key part of the sustainability self-assessment involves identifying appropriate sources of evidence. Without evidence, there is a danger that the assessment tool may be influenced by intended (not actual) practice, group think, confirmation bias, personal agendas, or political bias.

Completing a self-assessment may require some effort in retrieving evidence from a range of sources for each indicator.

Evidence sources might include for example:

- Feedback from conversations with service users, staff, community, stakeholders, etc, and the actions taken.
- Programmes of work, intervention / service agreements, staff competency matrices, quality assurance reports, theories of change.
- Strategy documents, policy statements, annual reports, and action plans.

Assigning a Score to Each Indicator

Some organisations will find it useful to give a score to each indicator to help quantify their current sustainable practices, some may not. Using the indicators as a prompt for conversations within your organisation and with a range of stakeholders is likely to yield the greatest benefit.

Three broad categories for assessing the level of evidence for providing a sustainable intervention or service are suggested below:



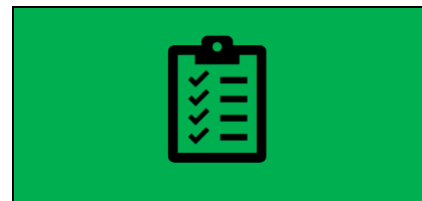
Minimal or no Evidence

We have taken tentative or no steps towards meeting the indicators for providing a sustainable intervention or service.



Some Evidence

We acknowledge the importance of sustainability and react to required changes in the provision of our intervention or service.



Comprehensive Evidence

Sustainability of the intervention or service we provide is normal and responsive strategies are a part of our culture.

Recording Current Status

Following a realistic and critical approach to evaluating evidence, the scale below may serve as a convenient guide for recording current status and identify threats to sustainability. The score awarded in a self-assessment can be collated on the summary page “Self-Assessment Responses” to provide a one-page overview of an organisations or services current status and priority areas.

Score 0	Score 1	Score 2	Score 3	Score 4	Score 5
We have not given specific attention to this indicator.	We have taken tentative steps towards meeting this indicator.	We have some evidence of meeting this indicator.	We seek to make changes to improve how we meet this indicator.	Meeting this indicator is normal and part of our culture.	We have a proactive schedule of continual improvements in meeting this indicator.






Positioning

The identity and alignment of the organisation in an outdoor and mental health context.

This domain considers factors that help consolidate credibility and influence how practice is communicated and integrated to enable responsiveness within different systems and services.

Six P Sustainability Goal: The organisation clearly communicates its identity, how it operates in a local context, the impact and credibility of its approach, and how it works alongside others to meet mental health and wellbeing priorities.

Suggested Indicators of Sustainability			
1. Supporting or providing outdoor mental health interventions or services is a named priority within the strategic aims of the provider organisation.			
2. The provider organisation is aware of local, regional, and national mental health priorities and funding and has responded with a targeted approach to provision.			
3. The provider has established relationships and a clear understanding of their role in providing interventions or services alongside local voluntary community and social enterprise organisations, local health and social care systems, GP services, and other relevant stakeholders.			
4. The type of intervention or service being provided is accurately described, e.g., by positioning it within the appropriate zone of practice on the Outdoor Mental Health Interventions model.			
5. The purpose and benefits of an intervention or service is communicated using language that is aligned with the intended client group.			
6. Claims made about value and impact are supported by good quality evidence that is relevant to the intervention or service being provided.			
Overall score			

“We knew right at the outset ... you know, to make this truly sustainable, it had to be embedded within the existing NHS structure, rather than working as a complete tangent off over there. And that's what we've been doing since then.

But it's taken time to get that buy in. And to establish those relationships”

(Interview Participant)





Purpose

How the intervention or service will achieve its stated outcomes.

This domain relates to the links between the who, what, how and why of the intervention or service, and how sustainable benefit is achieved for the participants.

Six P Sustainability Goal: The therapeutic and outdoor activity approaches clearly match the needs of patient or client groups, are designed and evaluated to enable the intended benefits, and foster ongoing participation in the outdoors.

Suggested Indicators of Sustainability			
1. All organisations and staff involved have a clear understanding of the specific mental health need that the intervention or service is targeted to help.			
2. Intervention or service planning and operational decisions are informed by what can offer sustainable benefit for individuals and their community.			
3. An explicit theory of change model describes how the chosen therapeutic and outdoor activity approaches are applied to meet the participants needs and goals of the intervention.			
4. The intervention or service is monitored and evaluated with tools that are relevant to the client group and aligned with the intended mental health and wellbeing benefits.			
5. Policies and procedures safeguard organisations and staff from providing interventions or services to individuals whose needs are more complex than they are competent to work with in an outdoor setting.			
6. The delivery content and approach encourage participants to continue their engagement with the outdoors beyond the intervention or service for mental health and wellbeing benefits.			
Overall score			

We just need to be mindful that we don't mess it up, and it doesn't all get a bit muddled. That, we're clear ... about what it is we do, ensuring and showing that there was good practice in place for whatever that is. That's going to be different for all the different organisations, isn't it."

(Interview Participant)






Pathways

The recruitment, engagement and next steps from the intervention or service.

This domain includes aspects that impact on how participants make a choice to take part in an intervention, the initial transition into the intervention or service, and the sustainable considerations as they exit a programme.

Six P Sustainability Goal: There are dynamic strategies, local partnerships and information that foster inclusivity and support participants entering and exiting the intervention or service.

Suggested Indicators of Sustainability			
1. Marketing and referral information clearly states the intervention or service approach, who it is delivered by, how it is provided, the expected benefits, and detailed inclusion/suitability criteria.			
2. The participant recruitment strategy (referral, promotion, inclusion criteria, selection, etc.) is appropriate to the population being targeted.			
3. Pathways to join the intervention or service are designed to be inclusive and lessen any practical and psychological barriers that may be experienced by the intended participants, e.g., timings, transport, clothing, ability.			
4. Early engagement processes are flexible and responsive to the individual mental health needs of participants - comfort at initial meetings/introductions, awareness of how difficult it is for people to leave house, building relationships, etc.			
5. Onward pathways from the intervention or service follow a tailored approach and offer sustainable benefits for each client.			
6. The provider actively works alongside and with other sector members to build and maintain communities of support and further opportunities for participants.			
Overall score			

“And of course, people are anxious and depressed. I mean, a lot of them. Yes, social anxiety is huge for them. And so, it's a big deal, to just come along to a meeting with other people that people don't know. And again, the way of overcoming that for us has been the pathway to that through a volunteer so to build relationship in a one to one [manner] in the programme. That is an individual programme, and then to go along to the groups with that person.”

(Interview Participant)






Provision

The actions and decisions concerning day-to-day delivery of an intervention or service.

This domain considers issues related to mapping, monitoring, and balancing influences that impact delivery capacity, building quality and ethical practice, including, staff and volunteer considerations, safety and safeguarding, outcome monitoring, and measures of impact and benefit.

Six P Sustainability Goal: Staff and volunteers are valued. Safety and risk management underpin all phases of the intervention or service. Appropriate outcome measures are employed, and evaluation is used as tool to further develop and improve.

Suggested Indicators of Sustainability			
1. There is accurate forecasting of demand for the intervention or service, and an operational plan and resources in place to manage the risks of non-attendance and over-attendance.			
2. The provider organisation operates at a realistic capacity, expands at a rate that doesn't compromise delivery, and recognises the influences of changing policy or purpose of other services or providers in the geographical/catchment area.			
3. Monitoring and evaluation tools for the intervention or service are being used to inform decisions about delivery and continual improvement to best meet individual needs.			
4. Organisational policies and procedures address the stigma of mental health by valuing the diversity of lived experience (which may be ongoing) and the impact of life events for the workforce (paid and voluntary).			
5. The therapeutic competencies and outdoor competencies of staff delivering the intervention or service conform with good practice, e.g., can be located on the Outdoor Mental Health Interventions model.			
6. Provider organisation policies, procedures and risk-benefit assessments give due consideration to understanding of mental health conditions (as presented and in crisis) and plans for critical incident responses in an outdoor setting.			
7. There is recognition of the potential for 'come down' after an outdoor activity and processes in place manage the psychological consequences safely e.g., discussing this may happen, signposting information, providing support opportunities in the group or community, etc.			
8. Providers draw on collaborative partnerships to assist with planning and delivery of the intervention or service.			
Overall score			






Place

The engagement and impact with the local community and environment.

This domain relates to how community-building and environmental responsibility are adequately addressed, and participants are encouraged to build lasting engagement, care, and connections in their local outdoor spaces.

Six P Sustainability Goal: Decision making at all levels upholds care for the environment, builds knowledge and value of local outdoor spaces, and supports community building.

Suggested Indicators of Sustainability			
1. Providers are active in supporting other local businesses / enterprises / agencies in collaborative approaches that value and build community assets.			
2. Improvement of the natural environment is considered a key objective by provider organisations. Care for the environment is upheld in policies, procedures, and actions.			
3. Local green spaces are identified, and actively used in a sustainable manner.			
4. New, enhanced, and different outdoor assets are sought out and campaigned for, e.g., safe walking and cycling routes, community green spaces.			
5. Ongoing participant engagement with local green spaces is promoted and providers foster environmental connection opportunities within the local community.			
6. The ongoing development of environmental knowledge and awareness of environmental impact is integrated into delivery to enable participants to be responsible users of the outdoors.			
Overall score			

“We could look at ... what the possibilities would be in terms of regeneration or, or restoration of green spaces in and around those communities, that, you know, could then be looked after by local teams of local people, spending time in those environments to maintain them, restore them, and offer access to them.”

(Interview Participant)






Preparedness

The capacity of the organisation to respond to major shocks or significant local events.

This domain considers ability to respond to and adjust to predictable or unforeseen local, regional national, societal changes, including adjustments to uses of types of outdoor spaces, that influence mental health needs and demands, and affect services integration.

Six P Sustainability Goal: The organisation has the capability to recognise, adapt, and respond to the consequences of significant events that impact access to outdoor spaces and the demand and delivery of services.










Suggested Indicators of Sustainability			
1. Providing organisations have considered the impact of possible major events or changes at a national / societal level - e.g., natural disasters, pandemics, conflicts, mental health policy changes, limits to use of land, etc.			
2. Providing organisations are clear about their role in responding to the mental health impact of major events and have planned for the potential impact on need, demand, and delivery of an intervention or service.			
3. Providers can change delivery environments at short notice, e.g., are able to be flexible and use alternative outdoor environment settings, access arrangements, patterns of use, etc. as available resources change.			
4. Providers can change delivery approaches at short notice, e.g., are able to be flexible and use alternative group sizes, timings, staff competencies, blended learning delivery, etc. as needs change.			
5. Providers have contingency plans for the financial impacts of changes, such as changes in funding levels, expenses, demand, stakeholder perceptions, funder priorities, economic policy, etc.			
6. Providers prioritise building resilience as an organisation/ team/individual to prepare for a future shock, e.g., using time-out to refocus, reframe, adjust processes, build capability, and offer staff care and support.			
Overall score			

“The difficulty with funding is that often funders want to fund things that are new and innovative and creative... but in terms of sustainability, generally, it's not great when you kind of go we've got this programme, bring us your referrals, and then in three years' time, you kind of disappear.”

(Interview Participant)

Self-Assessment Summary

Record your overall self-assessment score for each domain in the appropriate category to provide a one-page overview of your organisations or services current sustainability status.

Six P Sustainability Indicators When Utilising Nature for Mental Health			
	Minimal or no evidence	Some evidence	Comprehensive evidence
 Positioning The identity and alignment of the organisation in an outdoor and mental health and wellbeing context.			
 Provision The actions and decisions concerning day-to-day delivery of an intervention or service.			
 Place The engagement and impact with the local environment and community.			
 Purpose How the intervention or service will achieve its stated outcomes.			
 Pathways The recruitment, engagement and next steps from the intervention or service.			
 Preparedness The capacity of the organisation to respond to major shocks or significant local events.			

Your Priority Action Areas to Address Threats to Sustainability

Immediate term

Medium Term

Long Term



Conclusion

The research informed ‘Six P Sustainability Framework’ and the associated self-assessment tool can be useful aides in guiding the initial planning of interventions and programmes, and/or for incorporation into standards for sustainable practice. It is hoped that the indicators can be used to continue supporting the advocacy for the value of using natural environments for all in a way that helps build accountability for associated service development and delivery.

Practice in this area of utilising outdoor environments for mental health and wellbeing benefit is constantly evolving and the relevance of each of the indicators is likely to change over time, with some being discarded

and others, not yet described, coming to the fore. As the self-assessment tool gets used, we invite conversations, locally, nationally, and internationally to evolve, refine and further develop approaches to providing sustainable services and interventions in the outdoors for mental health and wellbeing benefits.

There is great scope and potential to improve the nation’s health and well-being with both increased and more consistent access to quality outdoor spaces and activities in natural environments. However, as a sector whilst celebrating the work we do, we still need to improve the sustainability agenda to help improve access to and secure nature-based services more robustly into the future.

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Abbreviations:

- BACP** British Association for Counselling and Psychotherapy
BC British Canoeing
BPS British Psychological Society
IOL Institute for Outdoor Learning
MTA Mountain Training Association
RYA Royal Yachting Association
UCKP The UK Council for Psychotherapy
UKRI UK Research and Innovation

