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# Exploring the impact of nature-based training on practitioners in mental health and public, primary, and community health services

FINAL RESEARCH REPORT

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# INTRODUCTION

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Being in nature can have a significant impact on mental and physical health. This has been resoundingly demonstrated through research and practice in recent years and many practitioners within the NHS and other health services have a desire to bring nature-based interventions into their work. The question, for us here, is about how this can be done within the framework of the NHS and as part of existing job roles. How easily can practitioners adapt so that nature-based work becomes part of what they do? What are the obstacles in the way? What helps them? What role can training programmes play within this process?

This report explores these questions. Twenty practitioners within the NHS in Sussex took part in a comprehensive training programme run by Circle of Life Rediscovery over a five-month period – some face-to-face in a woodland training venue, and some online - all of whom had expressed a desire to bring nature-based practices into their existing roles. The training was free to attend, funded by Natural England, and the practitioners were all supported, to some degree at least, by their workplaces and/or their managers. They included nursing staff, psychologists, community health practitioners, occupational therapists, art therapists and more. They worked across the county, within different teams, such as forensic units, probation services, acute services, mental health teams, community teams, and hospitals. During the training, they explored practical questions of risk, safety, insurance, and legal issues. They had the chance to learn hands-on skills of fire-making, crafts, nature games, shelter building. They explored theories and research around neuroscience, therapeutic nature-based models, and ways of embodying nature-based relationships. They practiced facilitating sessions in the outdoors. They built connections, they dreamed, they talked, they developed their ideas. They took all of this into their workplaces.

## **What happened next?**

This research report is based on qualitative data which were gathered before, during and after the training programme. The facilitators shared their rationale for why the training programme had been designed and organised in the way it had, and rich stories were gathered from participants of their experiences of trying to bring nature-based interventions into their workplaces. All information was analysed to draw together a set of common themes, and case studies from practitioners were created to illustrate the diversity of experiences.

Following a rigorous examination of the data, a set of recommendations was identified about how this work could be developed in the future within Sussex and/or transferred to other locations in the UK.



# REVIEW OF CURRENT LITERATURE

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This research study did not take place within a vacuum. There is a growing body of research which relates to nature and its impact on physical and mental wellbeing.

The state of the mental health of the population in the UK appears to be deteriorating, and poor mental health is a contributory factor in poor physical health, in disability, in having difficulties accessing education and the workplace (Seers et al, 2022a). The Covid-19 pandemic brought some of this into the light as rates of depression significantly increased during that time. The NHS is under enormous strain, with pressures on mental health services, general practice, secondary care, hospital waiting lists, chronic funding shortages, and increasing numbers of staff shortages (BMA, 2024). Medics have publicly acknowledged that the situation is unsustainable without significant investment and/or a change in approach (BBC News. 2 Jan 2023).

Against this backdrop, so-called 'green and blue' social prescribing have become more well-known. Access to green and blue spaces - such as woods, forests, mountains, nature reserves, parks, community gardens, rivers, lakes, oceans, canals, coastlines - have been suggested as treatments for all sorts of health conditions. Where medication and other treatment options have failed, people have looked to nature to provide a cure. The list of health concerns which nature appears to be able to support is extensive and includes physical health, mental health, self-esteem, self-confidence, self-acceptance, regulation of the nervous system, suicide prevention, stress, heart rate, blood pressure, psycho-social wellbeing, mood disorders, ADHD, anxiety, depression, somatic diseases, type-2 diabetes, cardiovascular and respiratory disease (although it is important to note that the evidence base is more robust and more extensive with regard to mental rather than physical health). Nature connection has understandingly, therefore, been of increasing interest to the health service. Could nature, often seen as a free or cheap resource, take some of the pressure off the health service and even replace conventional approaches?

Given the financial pressures on the NHS and other health services, it is understandable why the cost of any treatments or therapies is a factor in decision-making about their efficacy. The evidence for the cost-effectiveness of social prescribing is strong (NASP, 2023), and the British Government committed £5.77 million to a two-year Green Social Prescribing Scheme in 2021, with the interim evaluation report already showing "positive improvements in mental health and wellbeing and strong engagement in communities experiencing high levels of social inequalities that affect health and wellbeing." Additional research shows that nature connection interventions are cost-effective as a treatment offer, especially for mental health conditions (Seers et al, 2022a). Although it might be assumed that nature-based interventions are more costly than conventional approaches, this does not seem to be the case, and thus, it is perhaps unsurprising that it has become a viable proposition as a treatment option.

Having ‘exposure to nature’ and experiencing a sense of ‘nature connection’ are not the same, and this is an important distinction (Seers et al, 2022a; Richardson, 2023). There appears to be a significant health impact when someone develops a sense of connection – a two-way connection – rather than simply using nature as a setting, a resource, or a sideshow. There is evidence that having a connection to nature is also correlated with improved educational, pro-environmental and pro-conservation behaviours, all of which have important implications for the state of the natural world and the climate crisis (Seers et al, 2022d). Further than this, the concept of ‘deep nature connection’ is correlated with even more profound health and pro-environmental benefits. For green and blue social prescribing, this is worth highlighting, as longer-term and sustained connection with nature appears to be of more benefit than one-off or short-term interventions, although there is a shortage of longitudinal studies available at the current time.

As with all research, it is important not to generalise. It is simplistic to suggest that nature is always of benefit or that everyone will experience improvements in their health. This is not the case. The research is nuanced. For example, it has been highlighted that there are significant differentials across social, economic, ethnic, age, disability and gender demographics (Nejade et al, 2022). Higher levels of deprivation are correlated with less access to outdoor spaces (Seers et al, 2022a) Health inequalities, defined by the NHS (2024) as “unfair and avoidable differences in health across the population, and between different groups within society” appear to be strongly mirrored with the inequalities that the same groups of people experience in accessing nature. As a result, the issue of access to green and blue spaces has been identified as a social justice issue because of its implications for health, wellbeing, and social participation (Holland, 2021).

**What are the on-the-ground experiences of trying to bring nature-based interventions into existing job roles and workplaces?**



For practitioners working within the NHS, it is clear why they might be drawn to use nature-based interventions as part of their work; the evidence, as outlined above, is increasingly persuasive. They might be convinced by the arguments, but does this mean that they are able to pivot their practices? It is not usually part of their initial training, and there are all sorts of factors to consider, including health and safety, risk management, their levels of personal confidence, their capacity and workload, as well as the specifics of the additional skills and expertise that they might need to develop. How, then, do they become effective nature-based practitioners? What are the on-the-ground experiences of trying to bring nature-based interventions into existing job roles and workplaces?

It is these questions which drive the research outlined here.





# RESEARCH STUDY METHODOLOGY

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Natural England funded a project with two elements: a) the first was for Circle of Life Rediscovery to recruit twenty practitioners from the NHS and other health services in Sussex and to offer a five-month intensive training programme designed to equip them to plan, organise and facilitate nature-based interventions within their workplaces; the second was for Circle of Life Rediscovery to employ an independent researcher to undertake a qualitative research study to take place for the duration of the training and for an additional five months after its completion (see Appendix 3 for info on the researcher).

## Overall Aim of Research

To undertake qualitative research to examine the impact of staff training in nature-based group interventions on the practices in mental health and public, primary, and community health services.

## Objectives

- a) To explore how staff who have received nature-based training use what they have learned in the workplace
- b) To identify enablers and obstacles to implementing learning from nature-based initiatives in the workplace
- c) To make recommendations for how nature-based training might be most effectively used to make an impact in the workplace

## Methodology and Research Design

The research was a qualitative study and utilised these research methods: pre and post course questionnaires; extensive observation of face-to-face and online training; one-to-one and small group interviews with practitioners and course facilitators; creative writing and oral sharing of participant stories using storytelling methods; polling through Mentimeter software; creation and refinement of narrative case studies alongside participants.

The one-to-one and group interviews were audio recorded and transcribed in full. These were added to a data set with pre and post course questionnaires, observation notes, training materials, photographs, participant stories and polling results. Everything was examined using line-by-line analysis and key themes were generated to highlight both the commonalities and the nuances in the data. Narrative case studies were co-created with participants to illustrate the rich variety of experiences and to draw attention to the complexity of the data. A set of recommendations were drawn through analysis of the data, and cross-checked against the original data set to ensure they were an authentic reflection of the material.

## **Ethical considerations**

The research was designed to adhere to all ethical guidelines from the British Educational Research Association and from the Social Research Association. It was also approved by the Ethics Committee of Natural England.

Participation in the research element of the project was voluntary. Participants gave informed written consent at the start of the training and were able to withdraw at any time. A significant proportion of the data was gathered during training sessions to reduce the time burden upon participants, but they were also invited to volunteer for an extra one-to-one or small group interview if they were willing to co-create a case study. Twenty participants agreed to be part of the research, with thirteen of these volunteering for an additional interview.

Some of the names, job roles and workplaces in the case studies are anonymised or use pseudonyms but others are identifiable. All participants made a free decision about this. No significant details have been changed.

The photographs in this report were taken during the training or provided by participants from their workplaces. All participants in the photographs have consented to be included.

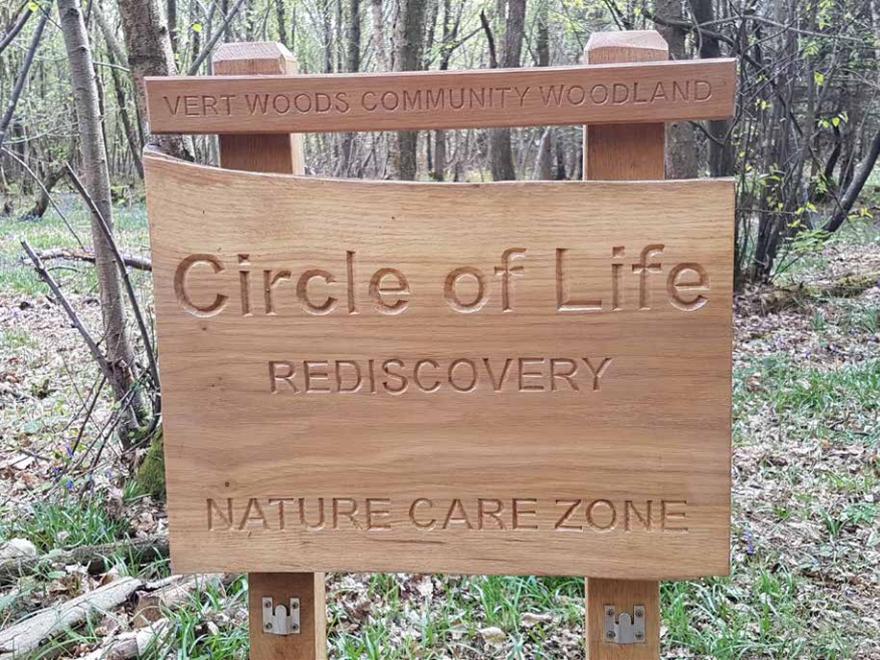
## **Who are the participants?**

There were twenty practitioners who worked within the NHS or other health services within Sussex. These were selected from an application pool of over 90 people. These twenty all received the training and associated support at no charge. In addition to these, there were two self-funded applicants who attended from other areas of the UK. They have not been included as formal participants in the study, although they do appear in some of the photographs.

## **Limitations of the study**

This study is limited by the time frame in which it took place. Some participants were unable to undertake their pilot sessions within the duration of the training programme because of a) the wintry conditions (the training ran from Oct-Feb) impeded some in taking their practice outdoors; and b) the structures and processes of the NHS were a constraint (more on this later), and the practitioners could not complete their sessions by the time the course ended. The researcher was able to follow up during the spring and summer months which added some rich detail to the case studies, but a longitudinal study would have enabled a shadowing of practitioners for an even longer period. Nonetheless, the case studies provide valuable insights into the early stage on-the-ground experiences of practitioners attempting to change their practice and should thus be considered valuable regardless of whether the practitioners implemented the nature-based interventions in the way that they had intended.

The scope of the research is necessarily limited. Although there are various quantitative and qualitative measures and scales have been developed to examine the level of nature connection of an individual (Seers et al, 2022d), these have not been used here. This study is not about whether the level of nature connection of practitioners or their clients has increased, although there are anecdotal references to this within the data set. It is also not an assessment of the quality of the nature-connection interventions themselves, or an evaluation of the training offered by Circle of Life Rediscovery. Although these would be interesting areas of exploration, they are beyond the capacity of this project.



Since 2007, Circle of Life Rediscovery has developed training programmes that enable teachers, health professionals and outdoor practitioners to develop the skills they need to take educational and therapeutic programmes outdoors.



# INFORMATION ON TRAINING PROGRAMME

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## What is Circle of Life Rediscovery?

Circle of Life Rediscovery is a community interest company, based in East Sussex, which has in the last five years reached over 2000 young and disadvantaged people and families.

It is an award-winning company, that helps young people, adults and families in Sussex prevent and tackle mental ill-health by co-developing and providing green care services for the people who support them.

Circle of Life Rediscovery has worked extensively in partnership with the NHS for over 20 years in the role of an external provider of **therapeutic green intervention services**. Their flagship '**Woodlands Project**', a joint CAMHS-FISS-LD project working with families with children with severe disabilities won ITV's People's Project in 2017, and many other NHS teams including ADCAMHS, Discovery College & CAMHS, groups with **Dementia** and **Early Psychosis**.

Although their work has been highly effective, founder and Managing Director, Marina Robb, has long-since recognised the capacity issues and the limitation of this approach, and has thus strived to empower practitioners within their own professions so that schools and the NHS are not solely reliant on external providers.

Since 2007, Circle of Life Rediscovery has developed training programmes that enable teachers, health professionals and outdoor practitioners to develop the skills they need to take educational and therapeutic programmes outdoors. Current training programmes include ITC Level 3 for Forest School Leaders, Outdoor Learning Continued Professional Development for practitioners, Nature-Based Training for Psychiatrists, and the one offered as part of this project – the Certificate in Nature-Based Practice (see <https://circleofliferediscovery.com/certificate-in-nature-based-practice/>)

## Structure and content of the programme

Led by Marina Robb (biography in Appendix 1) and Jon Cree (biography in Appendix 2), the five-month programme consists of four full days held outside in a well-equipped woodland site in East Sussex (three in Oct and one in Feb) and five two-hour evening sessions on zoom (taking place from Nov – Feb).

The programme is broken into four modules: Place (locate a suitable place); People (your clients); Practice and practical (how to set up and facilitate nature-based programmes) and The Practitioner, and covers:

- A therapeutic nature-based model that meets **clients' whole health: mind, body, social and environmental relationships**
- **Nature connection, neuroscience and supporting mental health**
- Practical outdoor **nature-based skills** and activities
- Adapting activities to a range of green spaces
- How to be a **reflective practitioner**
- Practical skills to **minimise risks** associated with taking groups outdoors
- Ways of embodying nature-based relationships in order to stimulate and **balance clients' brain body relationships**

In addition to the training, participants are also given free access to an extensive library of online materials, some tailor-made for the programme, but the most substantial element being a lifetime's access to over 100 videos and downloadable resources from the Outdoor Teacher (<https://theoutdoorteacher.com>). These include short skills-based videos on fire, nature crafts and play, ropes and knots, using tools, cooking on fire, wild food and foraging, shelters, and nature awareness games. These online materials are designed to support participants to recap on skills that are covered during the training and to explore new ones. Each component includes a risk assessment that participants can adapt for their own settings.

### **What level is the programme pitched at?**

The Certificate in Nature-Based Practice is aimed at experienced professionals within the NHS, and it is assumed that people have expertise within their own fields. Their level of competence - as nurses, art therapists, support workers, occupational therapists and so on - is acknowledged. They are not trainees or beginners and do not need to be supported to undertake their specific jobs. This is important as it establishes a relationship of mutuality and equanimity between facilitators and participants. What is needed, nonetheless, is the experience of the facilitators in delivering nature-based work. All participants have voluntarily applied for the programme and made a strong case about why they want to bring nature-based interventions into their practice. The course is designed to support them to extend their existing practices so that they can confidently use nature-based interventions as part of their job roles, for example, by bringing nature into art therapy, or to offer support sessions outdoors, or knowing how to manage risk so that group sessions can take place in the woods.

Being a competent and confident nature-based practitioner requires an extended immersion into nature-based work and this cannot be achieved within five months. Becoming a nature-based practitioner requires more than a simple set of techniques. It is not a toolkit. The facilitators acknowledge this and have designed a course that aims to be foundational in a range

of areas of nature-based work. The expectation is that practitioners will go away and want to learn more, to immerse themselves in the natural world, to practice the skills, to develop their confidence, to explore the meaning that this work has on themselves as people. The hope is that what they experience on the course will enable them to appreciate the therapeutic value of being in contact with the natural world and will help them to see the benefits that this can have, for themselves as professionals, and for their clients.

The facilitators understand that many of the participants will be nervous about running nature-based interventions and that they will experience some obstacles along the way (more on this later). Their approach, therefore, is to encourage people to start with something relatively small and achievable. Take one client out for a walk instead of staying in the office. Ask colleagues for support to run an existing group in an outdoor location. Make plans for an activity in a local area where there is already some familiarity and/or partner with an organisation that already does similar work. They believe that the reflective learning happens best when there is something concrete to reflect upon, and where a practitioner has already gained some momentum by starting with something small.

**A key element of the pedagogy is also to see the practitioner as a human being, and not just as a health professional.**



### **What is the pedagogy / approach to training?**

The training is designed to be run in a way that models the values and principles it espouses. The concept of 'nature pedagogy' is important here (explained more in Marina and Jon's own book - Cree & Robb, 2021). This is "the practice of teaching alongside nature and the learner." Key values include: being highly participatory; supporting the agency of the learner; creating welcoming and inclusive spaces; offering a healthy container, a bounded and emotionally safe space; using power wisely; giving voice to everyone; supporting others to step forward and realise their own potential. Moreover,

it is about partnering with the natural world as a teacher, facilitator, and ally. It is about seeing the natural world as more than a stage on which activities can take place, but an essential ingredient which dramatically shapes the experience and the impact that might come from this.

A key element of the pedagogy is also to see the practitioner as a human being, and not just as a health professional. Through deepening their personal connection with the natural world, practitioners can drop into a more regulated state with their own nervous systems. They can participate in activities that help themselves to feel more embodied. They are introduced to activities – sit spots or nature-based crafts or plant / animal identification – that help them to feel more connected to the natural world. This is important. By having this level of immersion, they are more likely to understand the benefit of bringing these things into their professional practice, but it also helps them to be better practitioners when doing so. Their own regulated nervous systems – along with the level of regulation that can be attuned from trees, plants, animals, oceans and so on - will support their clients to regulate their own nervous system, and the value of this is immeasurable.

### **Ecosystemic approach**

The training programme was aimed at practitioners within the NHS in Sussex. Twenty people, with different job roles, in a variety of teams, working across the county. The decision to do this, and further than this, the choice to select some people who working together within the same teams, was deliberate. The facilitators wanted the chance to work within a local ecosystem, to give people the chance to meet and to self-organise who might not otherwise have known one another, to build connections and a sense of solidarity. To aid this approach, they also invited more experienced practitioners to be guests on the zoom webinars, and they had a previous course participant in a support role on the course. She was able to share practical experience about who to contact for insurance, what resources might be available locally, and so on.



# WHAT DOES THE DATA TELL US?

## PRE AND POST COURSE QUESTIONNAIRES

All participants completed a **pre-course questionnaire** prior to commencing the programme. These gave useful insights into the participants, their prior experience, and their reasons for applying for the programme.

The following are selected quotations and provide a brief overview of the data.

### **Reasons for signing up for the programme:**

"I work with young people and wellbeing and am very outdoorsy so I thought this course looked like it was an amazing opportunity to try and incorporate everything."

"Seeking out green spaces is my go-to for calming my own nervous system. Therefore, I am passionate about the therapeutic properties of being in nature and wanting to bring this into my work."

"In order to learn a new way of offering spaces to meet young people and give them more opportunities to be outside."

"I am keen to broaden what we offer at our centre, beyond the gardening groups and allotment sessions already offered and provide a range of opportunities under the nature-based practice/ecotherapy umbrella. I feel our allotment space is under-utilised and would like to establish some workshops with different focuses. I have particular interests in sensory modulation and mindfulness and would like to consider how I can incorporate nature-based practice into groups and sessions we offer around these."

"I appreciate the value of nature in my own wellbeing and want to incorporate the outdoors into my work with people with psychosis."

# WHAT DOES THE DATA TELL US?

## **Current experience of nature-based work:**

“Minimal - some previous woodland days focussed on participation and activities with children in care in East Sussex in previous years.”

“None other than meeting young people in parks for walks.”

“Lots of mind body work in my workplace, but not in nature.”

“In a previous role I was able to work with young people on a 1:1 basis outside in local parks/trees which was regulating for them but I was limited in what I was able to offer.”

“I have co facilitated a bush craft group in the past within my workplace and I have used outside spaces for grounding work.”

## **What would you like to do?**

“I would like to take the service users I support out into nature more often as I believe it would be of benefit, allow them to connect, ground, breathe better and find a voice in a different environment.”

“Supporting unaccompanied asylum seeking children to maintain continuing bonds with their loved ones via nature connection, use nature for healing past trauma, use nature-based interventions to manage anger, depression, loneliness, grief, PTSD; also as a self-reflective tool.”

“Creating a group space for young people to meet others and connect through nature.”

“To take teams of staff into natural spaces for reflective practice or training sessions. To take small groups of people on probation into natural spaces. To support other team members accessing allotment sessions etc. To bring natural objects into our buildings and sessions inside.”

“I would like to bring sensory and mindfulness sessions outdoors and generate new ideas.”

# WHAT DOES THE DATA TELL US?

The **post-course questionnaire** invited participants to reflect on their experiences of the programme and to offer insights into how it had impacted on their experience in the workplace.

## **In a couple of sentences, could you share your reflections at the end of this course?**

“The course took me from an idea of what I’d like to do to an understanding of how to do it.”

“The course has really highlighted to me the simplicity of nature, being able to practise in nature and the huge impact this has on wellbeing of clients/young people as well as practitioners working in this space.”

“Having undertaken the Nature Based Training which is a living, learning experience, I feel well equipped to run such groups myself. The course pulled together all of the elements of the work I already do but in an outside environment. It was creative, thoughtful, mindful, grounding, connecting and fun.”

“I have thoroughly enjoyed completing the course. I’ve particularly enjoyed the experiential learning aspect in the woodlands and feel more confident regarding the practical considerations and skills for running nature-based sessions. I haven’t been able to dedicate as much time as I would like to have to the online resources and am grateful we have ‘lifetime’ access to these. It’s exciting to be involved in the research too and I feel motivated to remain an active part of the community we’ve established, as much as my current work pressures allow, anyway!”

“I really enjoyed the course and found it to be a good springboard into the potential of moving my practice outside. The invitation to gather around the fire, share stories and food made me feel as though I was part of a community.”





# WHAT DOES THE DATA TELL US?

## 1

### ILLUSTRATIVE CASE STUDY

## Chris Saxby-Randall and Lisa Ransom

Picture a terrier and a retriever, collaborating to achieve a goal. That is how Chris described herself (the terrier) and her colleague Lisa (the retriever) in their working relationship. Chris and Lisa are both nurses in a specialist group treatment service for those with Complex, Emotional and Relational Needs. The team includes community staff, peer support workers and students alongside the clinical team.

Why does a team like this need a terrier? Chris explained that it's important to be determined and not give up. She describes herself as 'quite persistent', which is important as introducing nature-based work within their service has not been an easy task. Why is Lisa a retriever? This duo both work part-time, and they need to continue passing the baton to one another. Lisa – according to Chris – has a lot of energy and she totally trusts that when she is not around, Lisa 'will pick up the stick, literally'. They work in a similar way to one another and neither of them will 'drop the bone'. This strong collaboration has been essential to ensuring that they are able to work through the challenges and overcome the barriers.

Lisa explains that one of the main challenges has been working out how to fit nature-based work into their existing provision. Ideally, they would like to offer nature-based sessions for a whole day, but this has proved impossible to co-ordinate alongside other activities. The pair have felt well supported by their manager and the wider team in terms of valuing nature-based work and getting it onto the agenda, but the practical issues have been substantial. The service offers group-based interventions, with clinical groups in the morning and activity-based groups in the afternoon. Chris and Lisa both work part-time, and so it is a 'real logistical problem' to create the 'big jigsaw' of where everything fits together. The nurses, occupational therapists and psychologists run the clinical groups, with the activity-based sessions providing opportunities to practice skills and relate with one another – all work is seen as relational. There is a question, of course, as to where nature-based work fits within this framing. Is it therapeutic? Is it an activity? Does it fit within the mind-body programme? Is it none or all of these? These questions need answering in order to work out where to position nature-based work and to decide who should be running nature-based groups.

The team has access to a garden though they are keen to access 'wilder' spaces which are a little further afield, although they acknowledge the limitation of these often not being private (parks,

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 1: CONTINUED

the beach, woodlands etc). They have started to offer simple activities in the garden, such as inviting people to find something that appealed to their senses. They have run a focus group with existing 'members' (their preferred way of describing 'clients'). They have managed to find some funding for first aid training. They are at the early stages of running groups outdoors, and they are learning that it is important to adapt depending on the weather and who turns up.

There is a lot of enthusiasm amongst others in the staff team to get involved with nature-based interventions, to the extent that Chris and Lisa feel protective of the embryonic stages of their projects. The take-up from members, however, is harder to predict as 'we always struggle with the engagement of the members'. One of their sessions only had one member despite their efforts to encourage more to participate. The reasons for this are numerous: the weather, people being new, not having a designated space, lack of confidence, physical barriers, psychological barriers, feelings about being outdoors, social anxiety, problems with buses. To support people to access nature-based sessions, there is the need for support in advance, all of which takes time.

Chris and Lisa recognise that the way that the groups are held is of vital importance. They are experienced in facilitating 'quite difficult groups' and creating safe and trusting environments. The relational element is central to their work, and they believe that 'there's something about being out in, you know, out in nature, that truly allows that to happen.' They explained that when they had run an activity on the beach, 'there was a real genuineness in how we related'. Even though they are responsible for holding the space, they believe that being in nature is a leveller which 'allows our members who struggled so much with relational stuff to actually experience a real relationship.' Being outside of the usual buildings meant that there was less formality and fewer boundaries between people, and a sense of all being in it together and of taking risks. Members were able to share what they already knew or were skilled at, such as carving a cuttlefish, and this felt more equalising in the relational dynamics. This is highly significant.

In the longer-term, Chris and Lisa would love to see nature-based work embedded into their service as a core element. They are deeply committed to this, with Chris stating that 'I can't think of anybody who wouldn't benefit from some time being outside.' The obstacles to getting to this point are considerable. Funding, the weather, time, finding sites, physical accessibility of locations, secondary physical health problems, locations being too far from bus routes, sustaining member interest, capacity of staff, finding time for planning.

There are two main factors which Chris and Lisa highlight as enabling them to do this work. The first is that they have each other. The fact that there are two of them on the same team, that they

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 1: CONTINUED

are experienced in working with one another and are in a good rhythm of doing so is 'probably the most helpful thing actually'. They both have substantial caseloads and are busy, and so having one another helps them to sustain the momentum to bring in new projects – hence, the terrier and the retriever.

The second factor is that, according to Chris, they are 'genuinely really authentic' and deeply invested in nature-based work. She explains that 'when I wrote the application for the course ... it was only then that it revealed to myself, yeah, of course it's important, it's what you've always done, it's what you're always drawn to, it's what you know, and makes you makes myself feel, you know, better, more grounded, you know, and you know, kind of distracted from the normal life kind of stressors.' Lisa describes nature as being her 'comfort zone' and 'a bit of a passion'. They explain that they already have 'the reasoning and the rationale', and so the main curiosity for them was about how to 'adapt it to fit in with people that have really complex needs, you know, secondary, physical, health problems, who perhaps never had the opportunity to be around nature much in their lives whatsoever'.

### ONE SENTENCE STORY SUMMARY:

**Chris: Terrier and Retriever won't stop trying.**

**Lisa: The beginning of an exciting journey.**

## 2

### ILLUSTRATIVE CASE STUDY

## Sarah Muckett and Michela Ragonese

Sarah and Michela are occupational therapists who did the programme together. They work in the early intervention psychosis service. Sarah is a senior mental health practitioner and is on the leadership team. She says that she 'is happiest when she is outside in the fresh air', and this comes with an infectious enthusiasm for nature-based work which Michela explained had 'carried a lot of this'. There is no doubt that this has helped maintain momentum amongst a team which is busy and working at full capacity.

The team mainly works with young people at the beginning of their journey with mental health services. They are an intensive support team. The role of the team is 'around trying to get people back on track, back to their normal lives, back and engaged with education and with work.' They run groups and activities as well as doing one-to-one interventions, and the way they are organised means that they have some flexibility to be creative about what they offer. This means that 'it can be as varied as the practitioner's imagination' and where one constraint is actually 'the limits of our own imaginings'. This is a rich context in which innovative new interventions might be developed.

The team has a strong ethos which means they are involved in each other's caseloads, and there is a drive to do therapeutic groupwork and activities which means that each practitioner can bring their own interests into the work environment. They use a recovery-oriented model and try to find tools which support clients to navigate their own recovery. In addition, the culture of occupational therapy is that of supporting clients to find 'meaningful activity', something that is important to them is good for their wellbeing and will help them be at their optimum. This can be defined in many ways, depending on what might be meaningful to each client. It could include sport, art – and, of course, being in nature. Sarah and Michela were able to frame nature as a valuable therapeutic tool, to see it as a 'meaningful activity' for those who had expressed an interest in this. This meant that the challenge of building nature-based interventions into their work was not difficult - in theory. It made total sense in terms of 'meaningful activity'. They were convinced about the value of it from the research and understood how nature could help with wellbeing; this 'added weight to us promoting it as something to do within the service.'

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 2: CONTINUED

In short, Sarah and Michela understood how nature-based work could fit well within their service, they were confident about its usefulness, they wanted to do it. The challenges they had to overcome, therefore, were largely practical.

The team has previously used nature-based work in some of their team days. They have done some foraging with the team, been out in nature and cooked on open fires. They already ran regular walking groups for clients, in urban and more rural locations. They have previously run a residential sailing trip.

Through undertaking the programme, Sarah, Michela, and another colleague with a background in forest school created the idea of 'Nature Days'. They planned an initial trial session for December. There was paperwork to complete for risk assessments and insurance which all took time. The team is short-staffed, and they are waiting to recruit new members, so 'everybody on the team is feeling stretched'. Finding the time to sit down and plan was slightly overwhelming, but they managed to do what was needed to get started. They also had to work out how to acquire the kit that they needed, and in this case, they were lucky as Sarah was able to borrow equipment from a friend – Kelly Kettles, a fire pit, a tripod, and other camp resources. For the



# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 2: CONTINUED

trial session, they went for a walk and took Kelly Kettles with them (portable kettles with an internal fire chamber which are lit with twigs and sticks) so they could brew hot drinks. Michela reflected that the session was OK but that it was harder than they thought, as some of the clients had struggled to join in with the group. She said that staff had left feeling a bit disheartened.

Their second attempt at a 'Nature Day' was with seven clients and three staff. It was for one afternoon in a local community orchard with a fire, a shelter, a kettle. They met in a clearing, a 'nice spot', and put blankets down to create some seating. It was a windy day, but the clouds stayed away. They took ingredients and make soup on the fire, along with hot chocolate, teas and coffees. Sarah read some poetry, and they did some craft activities, and it was a lovely atmosphere. There were some accessibility issues, as Michela had to come on the bus with some clients, and others were given lifts from the centre. Another client struggled with the transport and arrived an hour late. During the session, someone needed to use the bathroom and so one member of staff walked with them to a garden centre which took a chunk of time from the afternoon. Nonetheless, the team was happy about the event. They felt they had managed to create a different vibe from the trial session, and everyone felt it was successful. They are hoping to do another Nature Day soon.

The main issues for this team are around capacity, time, and resources. They do not have a budget in which to pay for extra resources. They have had to rely on personal contacts to borrow essential kit, which is clearly not a satisfactory long-term solution. Even if there was a central equipment bank within the Trust, Sarah worries about how easy this would be to access, where it would be located, and the paperwork needed to borrow things – an example of where a practical solution to one problem might create its own chain of additional demands and challenges. In fact, the administrative requirements of planning and organising all nature-based interventions were specifically named as one of the obstacles to doing more of this work. There is a real danger that 'everyone wants to be there in the woods, but no-one wants to be sat doing a risk assessment'. Over time, they hope to have all the procedures and protocols in place so that it is easier for everyone on the team to work in natural settings, but at the start of this journey, the administrative requirements have been overwhelming and might have even caused the work to stall. The enthusiasm and commitment of the staff was essential to maintain motivation.

Sarah and Michela have also identified the need to be able to offer activities which are not resource-heavy and are thus easier to offer, but doing this requires a level of experience and confidence that only comes with time. The programme from Circle of Life Rediscovery has been invaluable here, as according to Sarah, it 'opens up this whole other world of possibilities, and

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 2: CONTINUED

that's what I found so rich about the experience.' She describes how she has been able to use and adapt activities that she has experienced on the course, but also wishes there was the chance to do more of this.

Sarah believes that if this team manages to create nature-based offerings like the ones trialled here, they have a good chance of working with a lot of clients at the same time. She argues therefore, that although it is hard work to plan nature-based interventions, in the long-run they might prove to be less labour-intensive. The risk, of course, is that people won't attend or will drop out (due to the nature of the client group), and therefore 'you might end up with putting all this work in and then only getting one or two people'. Even with extra support work, offering lifts, sending reminders and so on (which also all takes time), there is no guarantee that people will attend. This is the nature of the service in which they work and there is no easy answer to this dilemma.

### **ONE SENTENCE STORY SUMMARY:**

**Sarah: OT sharing passion, fire, and soup.**

**Michela: Just get out and get on with it.**

# WHAT DOES THE DATA TELL US?

## 3

### ILLUSTRATIVE CASE STUDY

## Gabriella King

Gabriella largely works on her own, and she was the only person in her team who participated in the programme. She is an occupational therapist in an Autism Specialist Service within CAMHS (Child and Adolescent Mental Health Services). She works with autistic young people aged 5-18 who are presenting with behaviours that are challenging, often anxiety related, that are putting themselves or others at risk. They usually attend mainstream schools. Most of the work she does with young people is one-to-one, although she does sometimes work with siblings and/or parents as well. She meets them at school, at home, or in community environments.

After the first three days of training with Circle of Life Rediscovery, Gabriella felt excited to bring nature-based interventions into her work, and she was fortunate that two young people who had identified nature and the outdoors as being areas of interest came onto her caseload. For her, the potential to offer nature-based interventions quite quickly was high.



# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 3: CONTINUED

The purpose of Gabriella's work is to set goals which are based on what the young people want to do, rather than just trying to change behaviour. She does a lot of emotional or sensory regulation work, which is a key driver for her interest in nature-based work. She wants to offer nature-based initiatives which support with emotional regulation and co-regulation, especially with young people who have identified nature, wildlife, or the outdoors as being of special interest to them. She acknowledges that her thinking and planning is still at an early stage, so she is still 'trying to figure out' what it might look like in practice.

One of her clients – called Kyle for the purpose of this case study – accessed Forest School within his school setting, and Gabriella wondered whether she could use this location to offer support sessions to him and his mum. The aim was to find ways to build communication and co-regulation between them. On further investigation, it became apparent that this site would not be suitable because a) it could only be accessed by walking through the school which would be visible to other students; and b) it was in full view of the classrooms and in no way private or confidential. She therefore needed to find another suitable site.

Although Gabriella loves being in nature, and one of the reasons she moved to Brighton was to be nearer to natural spaces and to the sea, she freely admits that she lacks confidence when it comes to leading nature-based practices. In planning her work with Kyle and his mum, she decided to try and partner with someone more experienced in this field, and this brought her to Charlie. Charlie is a forest school practitioner who works across schools but has access to a lovely, private site, and he has his own equipment. He agreed to do a pilot run of a few sessions with Kyle, supported by Gabriella. Charlie has not previously worked alongside therapists, and so this is an experiment for everyone, but Gabriella was hopeful that it could be a good way forward.

Another client – called Josh in this story – is in a PRU (Pupil Referral Unit) and has a history of leaving without permission which had led to a situation where he is not allowed outside. This creates further dysregulation of his nervous system. Gabriella hopes that she will be able to negotiate a way for him to create a garden project where he can be outside and build the trust, where he can have some responsibility and become more grounded. Josh 'loves being outdoors' and is 'really into bird watching', so it makes sense to bring nature-based experiences to him. Gabriella admits that she is 'kind of making it up as I go along because it is a new way of working' but she strongly believes that offering opportunities in nature could be incredibly valuable for some clients.

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 3: CONTINUED

Gabriella has accompanied Josh to a session with Charlie, where they started a fire together. She reflected that 'it was completely different seeing him in an outdoor environment as opposed to a pupil referral unit and it really went well'.

Working with Charlie appears to have been a major enabler for Gabriella. Not only was he able to work directly with the young people in a way that she could not, but she also hoped to learn from him. She says 'it is good to link in with someone who's a very experienced forest school teacher, and for me at the moment it's about while I learn the skills - whether that be putting up a shelter, or fire starting or all those nature-based things that we did while we were with Marina - that's going to take me time to know those myself and to be comfortable to do that.' In the long-run, she hopes she could run sessions herself.

Through the service, Gabriella can offer up to twelve sessions to each client, but that is split between OT and Psychology. She often contends with missed sessions or late cancellations which can make things 'a bit patchy'. Given that she must plan and negotiate an individualised support programme for each person, finding suitable locations to do nature-based work has been a major barrier as it is so time-consuming. There is also a cost implication for some sites, as well as a need for some resources, and there is no budget that she can access within CAMHS. She will need to do this type of planning for every individual that she works with as she does not have access to a dedicated site. She would love for CAMHS to have its own specific location in the future as this would save so much time, even if 'we just had a little green space outside'.

Gabriella states that 'the growth period was slower than I imagined.' She also recognises that her apprehension around some of her own skills is holding her back, and that she needs to start with something simple and within her comfort zone, whilst also taking some time to practice her skills and build her confidence. She says that the video content which has been provided as part of the course has been useful, but that she needs to get outdoors on her own to practice. For her, 'if I can just do one thing outside with the young person, that would be good.'

Since completing the programme, Gabriella reflected that 'the course has helped shift my focus to seeing the outdoors as a huge potential resource for supporting the young people I work with. It has helped me to focus on using low risk activities outside with access to objects or environments that I already have access to'. She has started to offer sessions outdoors in a spontaneous way. The programme has given her confidence and enabled her to stop overthinking, explaining that the challenge is 'getting over that block in my head about what it is, about trusting my own judgement on risk.'

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 3: CONTINUED

Although Gabriella largely works on her own and almost considers herself a 'lone worker' at times, she identifies the benefit of having been on the programme as about meeting other people, hearing their stories, listening to their ideas. When she bumps into people from the course in the corridor, 'I've said hello to them and had a little chat with them and to know that other people are in the same sort of predicaments, and some people have pushed it further ahead and have thought of ways around things ... so talking to other people helps me because it makes me feel like, you know, keep pushing with it in whichever way you can.' This sense of solidarity has helped her to maintain her motivation and to keep striving to do the work.

### **ONE SENTENCE STORY SUMMARY:**

**Planted seeds. Slow growth. Wait and watch. Have patience.**

# WHAT DOES THE DATA TELL US?

## 4

### ILLUSTRATIVE CASE STUDY

## Jazz Tatem-Harrison

Imagine a busy A&E department. An experienced senior nurse is running an arrest in the resuscitation room. She is cool and calm, and she knows what she is doing. She has credibility amongst her colleagues, amongst the junior doctors and the rest of the team. She has worked in the Trust for 13 years. Now picture the same senior nurse on a Sunday morning, walking her dog along a country path with a group of junior doctors alongside her, some of whom are new to the UK and have not experienced being out in the countryside here.

This is Jazz, one of the participants on the programme. She has been supported by her manager to join the programme, but she is doing it in her own time (annual leave). Her 'walk and talks' with her colleagues are also in her own time. She is currently planning a camp for junior doctors in May, funded by a pot of money that they have bid for. Yes, also in her own time. Jazz is deeply committed to doing nature connection work within the NHS. She has big plans of where she wants to go next.

Jazz is a senior nurse education fellow (SNEF) and a senior nurse in A&E in a district general hospital. She has responsibility for looking after the mental health and wellbeing of junior doctors in the department. Having signed up for the programme, she made the decision to focus her nature-based interventions on her colleagues – doctors and nurses – and not on patients. As she points out, A&E patients do not stay for long, and thus, the feasibility of doing nature-based work is limited. In addition, she believes that the impact of working with doctors and nurses is potentially much higher.

As well as the monthly 'walk and talk' sessions already mentioned, Jazz has offered a teaching session to other nurses which included a presentation, a walk to the beach, a meditation, some poetry, and some quiet time in nature. The first 'walk and talk' attracted nine colleagues (six doctors, two nurses and one OT) – an unplanned multidisciplinary team event. Numbers have built over time, as participants have mentioned it to friends and colleagues, and the next one has 28 people signed up already. The intention of the walks is to get into nature and to 'get people talking'. As everyone was attending in their own time, it meant that 'only people who wanted to participate were there, which made it easier.' Jazz has been joined by many international colleagues, including people from the Philippines, India, and Africa, as well as by British colleagues. They walked, meditated on the beach, read some poetry, and wrote a letter to

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 4: CONTINUED

themselves about how they were feeling in the here-and-now which Jazz will mail back to them in a couple of months. Feedback has been 'really positive and actually they said that they really enjoyed going outside and getting in a bit of nature'. Jazz explained that she 'basically sold it along the lines of that they're all in charge of teams of people, and it's really important to, look after yourself, to look after others'.

Through doing the first walk, Jazz learnt several lessons. She realised that she needed to plan about what to do if people got separated as participants were walking at different paces. Although there were no major problems on this occasion, she realised it 'could have been a disaster', so decided to make some 'walk rules' before starting out on future ones. It was also wet underfoot and although she had sent a message about appropriate footwear and gear, she hadn't given a clear indication of the length of the walk. All of these tweaks have been made as she has gained experience.

Once the success of the 'walk and talks' become known to Jazz's colleagues, they were advertised widely within the Trust, and her emails 'have been going off the charts'. Jazz doesn't complain about doing the nature-based work in her own time, including risk assessments and so on, but she is worried about the impact on her if things accelerate even further. She hopes that if this happens, she will be able to ask for some of her time to be subsidised.

Jazz planned a camp for junior doctors in May. They secured funding from a ring-fenced pot for junior doctors (a pot of money that accumulates when junior doctors stay late and do extra hours etc). She found a reasonably priced campsite with a barn, toilets, and showers. There were fifteen participants on the camp, with interest from many more. They played team-building games, cooked food together, did a scavenger hunt in the dark, told ghost stories around the fire, went for a walk, planted sunflowers in pots to take home. For Jazz, there were two main aims of the camp. It was about the mental health and wellbeing of the junior doctors, but she also wanted the doctors to experience the impact of being in nature, so that 'it makes them think when they're prescribing, because a lot of them go into the GP surgery or psychiatry, and I want their patients to benefit.' She explains that many junior doctors are unaware of green social prescribing and that it would 'never occur to them' to suggest that someone goes into nature. She wants that to change, and offering direct experiences in nature is her way of initiating this.

Jazz believes that 'getting outside or getting patients outside – even for 10 minutes – has such a great benefit on their recovery and self-care.' She uses the example of a patient who has been in hospital for months, where she argues that 'getting them in a wheelchair, if you can, and

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 4: CONTINUED



getting them outside for 15 minutes, is actually really beneficial for their healing, as opposed to just sitting them in front of a window to look outside'. She says that all the hospitals in her Trust are near green spaces, and she is currently developing a map of all the green spaces that are accessible. She wants to plant wildflowers and create wildlife-friendly areas where the doctors can go on their breaks.

One of the obstacles that Jazz has encountered is that her enthusiasm and commitment to this work is not mirrored by her counterparts in other hospitals. She hopes that this will not mean that she is not allowed to continue with the work. She is also concerned that nature-based work might not really be considered as essential. She is worried that it is seen as a passing fad, as something that will 'go in and out', but she believes that it is bigger than that. She hopes that the fact that she has strong relationships with her colleagues and has credibility in her clinical practice will mean that they take her seriously.

Before signing up for the programme, Jazz considered herself to be connected to nature. She moved near to Brighton to start her nurse's training and has stayed ever since. She has always enjoyed being outside, walking the dog, and doing paddleboarding, but the course has 'definitely made me appreciate how much nature can give you'. She explains how 'now I look more at the trees and listen more to the sounds around me, as opposed to plugging my iPod in and listening to a podcast or something.'

### **ONE SENTENCE STORY SUMMARY:**

**Start with the staff.**

# WHAT DOES THE DATA TELL US?

## 5

### ILLUSTRATIVE CASE STUDY

## Emma and Clair

Emma is a psychologist. Clair is an occupational therapist. They came on the course together and they are both in the same team. They work together in a small service called the Children in Care Emotional Wellbeing Service. Their work to improve the mental well-being of children and young people in care is based on a deep understanding of developmental trauma.

Given that Emma describes children in care as 'traumatised', it might be assumed that the nature-based work within this service would be aimed at children and young people. Not so. Although Emma and Clair both have a deep personal investment to being in nature, they have made a different strategic decision about how to target their energy at the current time. Their priority is to look at the wider network of foster carers and social workers and supervising social workers. The rationale for not working directly with children and young people, at this stage anyway, is clear. Emma explains that children and young people in care 'have so many different professionals who come and go in their lives and yet what they need is consistency of long-term relationships, so our team coming in for a short-term relationship and then leaving again is really not often in the child's best interests.' In short, they do not want to be 'yet another grown-up who leaves.' Instead, the clinical thinking is to work with foster carers and social workers so that they develop the understanding to be able to do the therapeutic care and work themselves. In addition, Emma acknowledges that these adults are often massively impacted by the trauma of the situations they are in, and so by 'caring for the carers', this will also be of value for the children and young people themselves.

They want to take a reflective practice group for foster carers into nature, probably around a fire. This is 'already an established group with certain levels of safety' and 'it just feels natural to take it outside.' Everyone involved has already participated in an intensive therapeutic parenting group, and the hope would be to provide a nurturing space where they embed the ideas, and where they can be a 'community of practice' which supports each other with their dilemmas. There is an established regular reflective practice group running already (taking place inside), and they have plans to test out a nature-based version of this in July. They do have some trepidation about taking 'those first early steps of helping people get out into the woods or around the fire when our cohort of foster carers and social workers are so exhausted and juggling so many things', but they want to try with a small group which builds momentum over time. They believe in this work and in the benefits of being in nature, and they are convinced that this will enhance their work with foster carers.

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 5: CONTINUED

Another aim is to invite children and their carers to do some kind of attachment-focused therapy in nature, to spend time doing activities in the woods together, and 'where the lens is how do we build closeness and safety and security between the carer and the child'. This would be facilitated through nature-based activities, with the clinical psychologists or OT (who have worked with the children in care and their foster carers therapeutically previously or currently) supporting the child in care and their foster carer/ residential home worker to engage in and enjoy the activities together. A pilot session for this work is planned for September.

Clair's role as an OT on the team is relatively new, having been in post for about a year, and she is still working out how best to carry out her role within the context of the team. She loves being in nature herself, and she has previously done some eco-sensory therapy training which she feels dovetails well with the therapeutic work she does within the team. She would like to be able to do individual assessments in nature rather than being clinic-based (especially as she does not have



# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 5: CONTINUED



a clinic space anyway) but she recognises that that is ‘way, way off’. Clair’s dream, in the long-run, is ‘to work with a child and their carer/s using outdoor spaces rather than clinic spaces, having them build dens and climb trees, lie in hammocks and swing in the trees’.

This all makes sense. They have a clear plan. They know how nature-based work fits into their service. They have full support from their manager. In practice, however, progress is slow and the concrete steps they have been able to take so far are relatively small. There are significant capacity issues and a lack of resources. They are a ‘really tiny service’ and the first step is to ‘embed this within our team and look after ourselves and our colleagues’. They held an initial session with the wider team, which included going outside into a small patch of land that they call the ‘sensory garden’ – a ‘small overgrown wild space’ – and they organised a team away day in April. They created a tree together with nature paint brushes and discussed their individual journeys and shared values. In feedback, it was ‘mentioned how much everyone appreciated the difference of having conversations outdoors, appreciating the fire and connection with the outdoors and each other.’

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 5: CONTINUED

Despite their strong intentions and clear articulation of their strategy, Emma and Clair know they must be realistic about what is feasible in the short, medium, and long term. Their capacity and the demand for the service is out of balance; their 'trauma-saturated' service literally cannot keep up. They also describe the NHS as being 'complex and slow', with challenges around how to embed things strategically when there are not the structures in place to do so. They are cautious about implementing new things when they might not be sustained if people 'move on or get burnt out' or if they cannot manage them 'amongst all the other things that they are having to juggle.' For now, they see their efforts to introduce nature-based work as being 'the long game'. They are determined for this to become 'a full part of the service offer' but know that this takes time and determination.

In the meantime, Emma has led on a multi-team bid to secure funding for shared resources for this work. With support from one of their assistant psychologists, she co-ordinated about ten people from different services and teams to create a collaborative bid – they had met these people through the programme with Circle of Life Rediscovery. The bid includes three components: site hire, equipment, and money for the first aid course. It was a time-consuming process as they needed literature reviews and outcome measures, but she hopes that now these documents are in place, they might be used for other bids or pieces of work.

### **ONE SENTENCE STORY SUMMARY:**

**Germinating and nurturing the seed of the benefits of nature based practice within the team and looking forward to the growth and implementation of this for ourselves as a team, for those caring for children in care, and for children in care themselves.**

# WHAT DOES THE DATA TELL US?

## 6

### ILLUSTRATIVE CASE STUDY

## Kristina Usaite

Imagine being an unaccompanied asylum seeker, a child who arrives in West Sussex from a land far away. Sudan, Afghanistan, Iraq, Iran, Eritrea, Ethiopia, Egypt, Syria. You have grown up surrounded by mountains, or herding animals, or living in a remote village. You are not used to living in a town or a city. You are not familiar with the sites or the scenery or the culture.

You might meet Kristina who grew up in Lithuania, spending her summers at her grandparents' smallholding, before she moved into an apartment in a city as a teenager and found herself feeling somewhat displaced and lost. She now lives in the UK and works as an Occupational Therapist with unaccompanied asylum-seeking children. She has been in her current role for two years, and she is passionate about finding ways 'to support them to feel more at home by reconnecting with nature where they are.'

When Kristina started the course with Circle of Life Rediscovery, she described herself as 'a lone worker' even though she was based within a wider team. By this, she meant that most of her work with children and young people was done alone. She worked one-to-one, and although she could work outside if this seemed appropriate, she did not work with groups. Her ambitions were to create a nature-based group, and this created an obvious problem - she could not manage the protocols around staff ratios. She needed to find colleagues to support her to realise her dream and given that she was in a rapidly changing service with upheavals in staffing, she did not know if this was possible.

Kristina knows from experience that being in nature can provide solace and comfort for people who have been displaced from their own land and communities. She explains that many of the children and young people she works with 'are very traumatised and they experience a sense of sadness, missing their homes, their families, and the countries they come from ...' She believes that nature can 'bring that sense of continuity within themselves that help them to maintain an internal sense of wellbeing and belonging.' She explains that her understanding of mental health in terms of location, dislocation and relocation is linked to helping people to make sense of their past and find a new sense of belonging in the place they are now. She wants to support people to explore 'where they come from and where they are now', and she believes that nature can play a therapeutic role in this.

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 6: CONTINUED

In her one-to-one work with children and young people, Kristina has found that being connected with the natural world 'is soothing and calming' and helps people to 'maintain their focus or attention to something that is still and at the same time changing.' She explains that many of them have experienced significant trauma, and 'so there is that kind of other level of healing in addition to bringing that sense of coming back to home.' During activities where they are invited to find natural objects that are grounding or soothing, she notices that they often find objects that 'remind them of home.' Despite the landscape being geographically so different, unaccompanied asylum-seeking children and young people find that nature has a regulating effect on their nervous systems.

As the course progressed, Kristina reported that she had been put in touch with someone who might be able to support with her nature-based groups. This person, a recently trained eco-therapist, was a personal contact of one of her colleagues, and Kristina was excited at the



prospect of having a collaborator.

Between them, they have planned a six-week project for unaccompanied asylum-seeking children which is due to start in June. They are still 'figuring out the logistics' but they have managed to find a suitable location and are working through some of the practical challenges, such as travel arrangements for young people travelling from some distance away. They have secured a small amount of funding to support with refreshments and lunch. They still need to work out some details, including safeguarding policies and so on, but Kristina hopes to enlist help from her wider team with these issues.

Kristina recently put out an advert for another member of the team – a volunteer role – and has been approached by a family support

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 6: CONTINUED

worker who wants to help with the group. Kristina the lone worker now finds herself part of a team of three, and she is excited about what might unfurl from this. She says that 'it feels like it's been a bit of a miracle that it's actually happening'.

The aim of the pilot project is to work with a group of nine young people, many of whom will be travelling from other parts of West Sussex to access the group. What will they do? Embrace the 5 pathways to nature connectedness: senses, emotion, beauty, meaning and compassion through creative activities, meditations, walks, fires, spending time on their own and being together. It might not feel the same as the landscapes that these children remember from their homelands, but Kristina believes that it has the potential to be potent work. She explains that it's 'connecting to earth isn't it, and I mean that connection regardless of specifics of individual landscapes. The connection is the same earth.'

### **ONE SENTENCE STORY SUMMARY:**

**Nature based meets the clinical needs of the people I work for, and therefore I hope individual nature based work will be given the green light.**

# WHAT DOES THE DATA TELL US?

## 7

### ILLUSTRATIVE CASE STUDY

## Amy Boot, Laura Carrick and Emelyne Fleet

One medium secure forensic hospital. Four wards. Up to 56 service users. About 20 staff in the team. Three members apply to do the training with Circle of Life Rediscovery at the same time, although they do not all expect to be accepted. They are all offered places and they are off - they have a vision and a plan!

Meet Amy, Laura, and Emelyne. Amy is the manager and a clinical specialist occupational therapist. She is well placed to influence service development and management decisions. Laura works as an occupational therapist. She specialises in horticulture and is heavily involved in the existing gardening and allotment groups. Emelyne is a peer support worker, someone who has lived experience of the healing power of nature. By applying for the training together, they wanted to use their combined skills and expertise to garner momentum and enact their plans.

This trio are all deeply committed to using nature as a therapeutic tool. Laura explains that 'I'm very keen on nature-based practice and it's the reason that I became an OT. I was volunteering on a nature reserve helping people with mental health difficulties engage with conservation and horticulture as a therapeutic tool and it was run by an OT.' Emelyne and Amy have their own stories of how they came to be so passionate about incorporating nature into their professional practice, as well as into their personal lives. All see nature as a powerful agent in supporting recovery.

The service users at the secure hospital are varied, as are their needs. There are four wards in total. For male service users - two medium secure wards; one focussed on admissions and assessment, the other treatment and rehabilitation and a low secure ward, for service users to 'step down' to. For female service users - one medium secure ward, whereby people are at different stages of their recovery journeys. Most of the service users have been in contact with the criminal justice system and will have been admitted to the hospital via court or prison. Some will return to prison after their stay at the hospital. All service users are detained in the hospital, for the purposes of assessment and treatment, under sections of the Mental Health Act. Sections are used when there are concerns that the health and safety of an individual is at risk and/or for the protection of others. Many service users are on forensic sections, where there are additional restrictions in place as they are considered a significant risk to others. The variety of service users makes it hard to generalise about the mental health needs or about what might be useful as part of therapeutic or rehabilitation processes.

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 7: CONTINUED



Each person has a personalised care plan which outlines their level of supervision and support and their access to facilities such as the gym, music resources, vocational areas, the shop, and so on. This extends to outside areas within the secure perimeter - each ward has a garden, and there is a sports pitch. There is also an allotment within the grounds which service users can access if they have the required leave - 'Section 17' (MHA) . Some people have permission to go beyond the hospital grounds and have permission to go to the local town and further afield, either escorted by hospital staff or unescorted.

The team recognise the benefit of having their own outdoor spaces and gardens, including the allotment, and the service users who have permission have been able to participate in gardening and horticulture for some time and clearly benefit from doing so. Amy, Laura, and Emelyne wanted to expand the nature-based offerings to be more than this. Emelyne explains that 'when I started, the allotment was already running, and I noticed that it was very focused on 'let's grow your own, let's do this, let's make stuff', ... there was no time to really sit and appreciate the environment you were in and being able to work out or learn how to really utilise that as a separate entity ...' They all believe in the power of just being in nature, having a sit spot, practicing

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 7: CONTINUED

mindfulness, connecting with nature through crafts or through other activities. They felt that the gardening and horticulture, although valuable, held an implicit agenda about 'doing something' or 'an end result'. They wanted to offer a different emphasis through other types of nature-based practice, and ensure interventions offered are inclusive, considering a number of service users are limited by their physical health.

The team signed up to the course to get ideas and to build their confidence about offering nature-based interventions at the hospital. Despite their shared vision and enthusiasm, however, the team has faced considerable challenges.

The central obstacle has been about capacity and a stretch on staff time. There has been a lot of short term and long term sickness absence within the team, and a number of vacancies and gaps, including in leadership roles. This has created huge issues when trying to embark on new projects as the focus has been on trying to maintain the service as it is, rather than developing things. This has also added pressure on scheduling and 'being able to carve time out as a team to do it together, especially at the early stages of planning everything and making sure you're doing it right.'

The team pivoted. Rather than waiting to find enough time to develop nature-based interventions for service-users, they decided to organise some staff wellbeing days. The first was small, involving only a handful of the team, but the feedback was extremely positive. One participant wrote: 'The whole experience in the woods was just so relaxing. After a crazy morning on the ward, it was lovely to be at one with nature and slow down and actually take time to listen, see, and feel what was around us.' Another commented that 'The smell of the woods didn't hit me until you drew my attention to it. Amazing that my focus wasn't there naturally.'

Spurred on by the success of the first wellbeing session, the second event was aimed at the full team, and about 12 staff participated. The session was for 3-4 hours, and included games, pottery, a fire, and refreshments. Emelyne reflected that 'we'd actually helped the team come together a bit more after being quite disjointed for a few weeks because it was particularly rocky at that point as well.' All three noticed the impact on people and said that 'it definitely reinvigorated everyone when they came back into work.' As well as being beneficial in themselves, Emelyne noted that the team days were also useful for their long-term plan to offer more nature-based interventions to service-users. She said that 'it can only help to get them on board with the cause ... if they've been and they've experienced it and seen the benefit themselves, they're a lot more likely to be an advocate for us doing it with the people that they're working with.'

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 7: CONTINUED

The team is now ready to start developing more nature-based interventions for service-users. They have identified some woodland that falls within the hospital boundaries, and they hope to 'start some of the activities that we've already done, like the pottery and the games and the mindfulness', and start to incorporate some of what they learnt in the training for example, fire building and wood whittling. To be able to offer these types of activities, they must overcome another challenge. This relates to risk management, and a tension between 'security, rules, and procedures' and 'the therapeutic side of things.' As Amy explains, OTs are 'at the forefront of unpicking everything, doing activity analyses, thorough risk assessments, grading and adapting things' and advocating for taking positive risk, if it is of therapeutic value. She hopes that these



# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 7: CONTINUED

discussions will be easier if people in the wider team have attended the wellbeing events and had personal experience of some of the activities and has offered 'their services' to other teams in the hospital/the service.

The main factor which helps Amy, Laura and Emelyne is clear. They have each other. As Laura says, 'the combination of us together has really been good.' Each were able to identify strengths and contributions in one another that have aided their progress. Further than this, they also recognise that doing the training with a lot of other people from the same NHS Trust has also been 'a real enabler' as it has given access to documents and resources that have already been tested as well as to the people themselves. They already have a little network/community of practitioners and hoping to expand on this and create an official community of interest/practice.

With the strength in numbers, this trio has the potential to make significant inroads at the hospital, offering nature-based interventions in ways that could not happen if just one of them had done the training. The passion and commitment are there. They have a vision, ideas, and newfound confidence. They have started to influence the wider team through their wellbeing days. They want to get on with their offerings for service-users. It will be exciting to see what they manage to do over the next six months.

### **ONE SENTENCE STORY SUMMARY:**

**Really been trying to put into practice our plans.**

# WHAT DOES THE DATA TELL US?

## 8

### ILLUSTRATIVE CASE STUDY

## Grace Fisher

Grace works as a psychologist for three days a week within the Offender Personality Disorder Pathway, which is a partnership service between Sussex Partnership NHS Foundation Trust (SPFT) and the Probation Service. Her team works with people as they are released from prison into the community, and the probation practitioners who supervise those people. Her roles include being a supervisor/leader, providing consultation, training and advice to support probation practitioners to work more effectively with people on their caseloads who may have significant personality difficulties, and facilitating an art group directly with people under probation supervision. Her time is in high demand, with little flexibility for squeezing in additional projects. She is also deeply committed on a personal and professional level to bringing nature-based interventions to clients within the Probation Service. She strongly believes in working holistically, and she sees the role that nature-based work can play within this. It is with this backdrop that Grace signed up for the programme, with a view to trying to expand the service's offer to include nature-based work, as she did with the arts project. Since the start of the course, she has been promoted and taken on more leadership responsibility. Her sights are set on the future and the hope that she might be able to support more nature-based work to take place in the future. She also hopes she may be able to weave elements of it into her work with Probation Staff and/or the psychological staff she supervises.

The art has been successful, in her view, because it provides a space where 'staff and people on probation can feel relaxed and meet different parts of each other, away from the formal setting of probation supervision.' Within the service, the art club is seen as 'new and innovative', and Grace knows that one of the reasons that it has gained credibility is because she has worked hard to 'capture the data to show why it's valuable', while maintaining a certain level of oversight and governance to do it safely'. She is convinced about the value of using stories as data, as they are 'important narratives' which capture people's emotions and tell a "different story". Grace has tried to offer opportunities for the art club to bring some nature into their activities by, for example, going to the beach to find things to draw, or going on a drawing trip.

One of the issues that Grace identifies in her work is a systemic one. As a specialist service, her team is relatively well resourced, but they are currently experiencing pressures in the system. As a result, it is challenging to gain momentum with groups as the numbers of participants is difficult to predict. This is one of the reasons, perhaps, why Grace has focused some time on

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 8: CONTINUED

working with the staff team. She is also interested in staff well-being and believes that it helps to embed any new initiative if you can get the staff to buy-in to it first, through experiencing it directly. She is also keen to explore the benefit of bringing nature-based interventions into staff groups to try and strengthen their resilience and connection with each other, and to improve staff dynamics. She explains that that offering nature-based opportunities for staff could be part of a commitment to wellbeing and to supporting with retention. She is aware of some interest from staff in this area, and is exploring wellbeing day options. Grace is also mindful that being based in the criminal justice system rather than a health context, there can be additional cultural and political barriers to work that is not seen as core public protection.

In terms of future developments - there have already been some initiatives within the service which have the potential to be developed: an allotment project, mindfulness activities with staff, a staff day including some ecotherapy. There is goodwill and interest for nature-based work within the team.

Grace is deeply committed to nature-based work. She saw the course as an opportunity to bring more of herself and what she values into her job. Her personal experience is of 'immersing herself in nature' to overcome burnout and witnessing its restorative effects on others via retreats she has attended.' She would like to see more investment in preventative and holistic approaches to health that support healthier lifestyles.

Professionally, she believes offering nature-based work to people who have just left prison could be especially valuable, as many of them have spent nearly 24 hours a day in their cells - particularly since Covid. She says that 'they've had really limited access to nature' but also explains that for some 'it might be outside of their thinking at the moment'. She says that people could spend time in nature for free, but they're not necessarily recognising the wellbeing benefits.

Recently, Grace has been promoted and will be working four days a week. This promotion presents some interesting dilemmas as the demands of her role change. For now she is planning a team day through her links with Natural England, to begin with the staff in her team. She knows that she might encounter a culture within the service of expecting that work is assigned to people in particular roles or at certain bandings. What is a psychologist's job? What is an OT's job? Can work be done by someone on a lower banding? Nature-based work requires someone with passion, drive, and skills, and it will be interesting to find out what happens here. Watch this space.

# WHAT DOES THE DATA TELL US?

## ILLUSTRATIVE CASE STUDY 8: CONTINUED

### **ONE SENTENCE STORY SUMMARY:**

**An enthusiastic but busy psychologist is looking for opportunities and laying foundations.**



# COMMON THEMES FROM THE DATA

## Theme One

### NATURE-CONNECTED PRACTITIONERS ARE KEY DRIVERS OF THIS WORK

Finding the right staff to lead on this work is essential. Almost all the participants in this programme already described themselves as being **nature-connected** (although not necessarily choosing that term). They described enjoying being outdoors, loving nature, going for walks, spending time in the garden and so on. This is why they were drawn to the course and why they wanted to bring nature-based interventions into their job roles. They were already convinced as to the value; they did not need to be persuaded. The course gave them momentum and skills and a renewed interest, but it did not kick-start them.

## Theme Two

### MAJOR OBSTACLES WITH TIME AND CAPACITY

Almost all participants identified issues with **time** and **capacity**. Nature-based interventions often take longer, especially if they require the use of different sites. They often require extra planning, additional resources, the creation of risk assessments, checking insurance cover, undertaking first aid training and so on. To exacerbate the issues with time and capacity, many participants also described their services as being short-staffed, with absent colleagues and unfilled posts. Many felt stretched as they were already taking extra responsibilities and covering vacant posts. In these contexts, extending their work into nature-based projects was additionally challenging.

## Theme Three

### NATURE-BASED WORK NEEDS ADDITIONAL FUNDING AND RESOURCES

**Funding** and **resourcing** were a problem for many participants. Even if the staff salaries were already covered, funding was often needed for first aid training, insurance, site rental, transport costs, purchasing or hiring equipment (shelters, fire pits, kettles, whittling knives, etc). Some participants borrowed equipment from friends or even purchased it themselves, and others spent their own time writing funding bids. The suggestion of creating a resource bank for use by practitioners across the Trust was one possible solution, but even this brought concerns about the location of these resources and the potential paperwork requirement for borrowing items.

# COMMON THEMES FROM THE DATA

## Theme Four

### PRACTITIONERS STRUGGLED WITH ACCESS TO WILD PLACES

**Access to space** was an issue for some participants. Some worked in buildings with gardens or green space attached, but many needed to seek external spaces such as parks, woodland, or the coast. This caused some problems in terms of transport, a lack of confidence from clients, the need for funds to pay for locations, access to toilets and so on. One person was in the process of mapping all the green spaces that were available within the hospital that they worked in so that doctors and other staff were more able to find spaces to be in nature.

## Theme Five

### PARTICIPANTS NEEDED TO USE OWN TIME TO DO PROGRAMME

Although all participants had a signature from a manager to indicate some level of institutional support, some attended the course in their **own time** (annual leave) and were not given any tangible support within the workplace. Their willingness to do this indicates a strong level of personal commitment to nature-based work. For many, the allure of spending four days in the woods was the main motivator, and yet despite this, several participants sent last-minute apologies because they were unable to leave their workplaces or were unwell. This indicates - perhaps - a high level of **stress, overwhelm and/or burnout** within staff at the Trust.

## Theme Six

### SUPPORT FROM COLLEAGUES AND MANAGERS WAS HUGELY BENEFICIAL

Participants who did the programme with **another colleague** from their team were at a huge advantage in terms of support and momentum. If these colleagues were also **supported by managers or other team members**, they were most strongly positioned to develop and enact their nature-based initiatives. Participants who were more isolated and were not strongly connected to others struggled to build the same level of momentum and often encountered more obstacles, although even these participants did identify the benefit of the programme helping them to develop new connections with people in other teams across the Trust. An informal nature-based community of practice started to develop through the programme which has been sustained.

# COMMON THEMES FROM THE DATA

## Theme Seven

### PARTICIPANTS BUILT CONFIDENCE BUT STILL EXPERIENCED STRUCTURAL BARRIERS

Many participants said that the programme had **built their confidence** and helped them to see how they could bring nature-based interventions into their job roles. They recognised that starting with something small and doing something achievable was the best way to develop their practice. Some wanted to have more opportunities to develop their practical skills - such as putting up tarps and whittling - before they felt able to bring these activities to their client groups. They also recognised that there were **structural** issues that they would need to overcome in their own settings.

## Theme Eight

### NATURE-BASED WORK IS MORE THAN A FAD OR FUN EXTRA

In some of the workplaces, participants felt that nature-based work was seen as a 'fad' or a 'fun extra', but not that it was seen as an **essential part of the service**. They wanted to be able to develop interventions that were valued and were sustainable over time. Some were able to see the bigger strategic picture and had clear plans and a strong rationale as to how they wanted to build and embed nature-based work into the structure and culture of their services. For many, this was communicated in terms of 'planting seeds' and 'playing a long game'.

## Theme Nine

### TARGET NATURE-BASED WORK AT STAFF AS WELL AS CLIENTS

Although it might be assumed that nature-based interventions would be aimed at the NHS patients / clients, this was not always the way that participants intended to implement their nature-based work. Several of them had a deliberate strategy to **work directly with their colleagues** (doctors, psychiatrists, social workers) or **with adults connected with the service** (foster carers, parents). The rationale was unique to each service, but in general, it was connected to both ease (i.e., it was sometimes more realistic to work with colleagues than directly with clients) but also to impact (i.e., in the long run, the impact might be more significant as these individuals could then work with a larger number of patients/ clients).

# COMMON THEMES FROM THE DATA

## Theme Ten

### NATURE-BASED ENVIRONMENTS ENABLED DIFFERENT RELATIONSHIPS

Offering nature-based interventions enabled participants to create a different dynamic in their relationship with clients. Nature was described as being a **'leveller', an 'equaliser' and an 'enabler'**. Practitioners said they were able to see their clients in more holistic ways (and vice versa) and get to know them beyond the formalities of the service. The values of the staff were essential here as they had to be open to creating these different dynamics.

## Theme Eleven

### EXISTING EVIDENCE NEEDS TO BE DISSEMINATED

The importance of **evidence-based practice** has gained momentum in recent years, and although the participants on this programme were already convinced as to the benefit of nature-based work, they were aware that there was still some work to do within their teams and the wider service. Some felt a pressure to share existing evidence to back up their rationale for wanting to do this work, and to gather evidence of the efficacy of their own interventions. They did not all, however, have confidence in how to do this.

## Theme Twelve

### EXPERIENCE AND EXPERTISE OF TRAINING TEAM IS ESSENTIAL

The programme was led by two **highly experienced nature-based practitioners** from Circle of Life Rediscovery who modelled a facilitator style that was consistent with the values of the work, but also, it was supported by a member of NHS staff who had previously done the programme and was a few steps ahead on the journey. The addition of this **'bridging person'** proved invaluable to some participants as they were able to see a concrete example of successful work that had been done within their own Trust, and they were given useful insights about how to manage this work within the complex internal systems of their own workplaces. The use of this kind of **'champion'** is a useful way of showing how the work can happen and the impact of this.

# RECOMMENDATIONS FOR THE FUTURE

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Green and blue social prescribing have become more commonplace, and yet there is little research about the on-the-ground experiences of practitioners within the NHS who are new to using nature-based interventions as part of their job roles. This study provides unique insights into the obstacles and the enablers that have been encountered by twenty practitioners within Sussex, and it is hoped that the common themes are useful starting points for conversations about how to normalise and scale this work in the future.

## There are five key recommendations

- 1** To build a commitment to nature-based interventions into **Trust-wide strategies** so that projects are not seen as 'extras' which stretch capacity and run the risk of being unsustainable.
- 2** To develop a **cohesive network of nature-based practitioners** across teams within the Trust, with a view to pooling information, resources, and equipment, including sharing access to wild places.
- 3** To strengthen evidence-based practice by **disseminating existing evidence** of the role and effectiveness of nature-based practice across the Trust, and supporting new practitioners to gather localised data about their interventions.
- 4** To offer **funded train-the-trainer programmes** which extend beyond Sussex so that other localities can adopt similar high-quality programmes and practices.
- 5** To undertake a **new longitudinal research study** to gather richer data about the experiences of NHS staff - and their clients - over an extended period of time.

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## APPENDIX 1

### BIOGRAPHY - MARINA ROBB



Marina Robb (Bsc; PGCE; MA; Msc; Author) is Founder and Managing Director of Circle of Life Rediscovery Community Interest Company and The Outdoor Teacher Ltd <https://theoutdoorteacher.com/>, both leading organisations that aim to transform education and health through nature.

Marina has more than 35 years' experience in outdoor learning and nature connection and is host of The Wild Minds Podcast <https://theoutdoorteacher.com/wild-minds-podcast/>. She provides a deep understanding of effective nature education at all levels and for a range of diverse backgrounds.

Marina is a qualified teacher (PGCE) and since 1989 has studied Environmental Education (MA), Environmental Management (BSc) and Social Research (MSc).

She is a leading Forest School endorsed trainer and practitioner (UK and International). Her aim is to share her knowledge and experience with teachers and others wishing to work outside the classroom.

She has pioneered green care and intervention programmes within the UK health sector, and has received funding from Natural England, Mind and The National Lottery, amongst other grant makers for her outdoor work with teenagers, families and young people with mental health issues, disabilities, dementia and early psychosis.

Marina is co-author of 'Learning with Nature' (foreword by Chris Packham), a must-have book for Forest School & Outdoor practitioners, and 'The Essential Guide to Forest School and Nature Pedagogy' (foreword by David Sobel) which contains everything you need to know from theory to practice.

Marina co-founded a Community Benefit Society which manages a community woodland, used to provide access to nature for marginalised groups. She believes that everyone should have the right to access nature.

## APPENDIX 2

### **BIOGRAPHY - JON CREE**



Jon Cree's passion is reconnecting people of all ages to the natural world with a view to facilitating more compassionate relationships in communities. As Jon often likes to quote – the brain feels before it thinks and he feels this is key to building relationships.

He likes nothing more than telling stories around the fire and helping others find their 'voices' to create stronger connections, he contributed to and co-edited the acclaimed book 'Storytelling for a Greener World'. Jon has been involved with outdoor natural world learning for over 40 years and in that time worked with many young people, especially teenagers challenged by our education system, particularly in the woods – making, running and playing. You can often see him with a hatchet and other hand-tools in hand.

Jon has been training educators from many different backgrounds in outdoor and nature based learning for at least 35 years (from whole school training programmes through to youth services, environmental NGO's). He has been an earth education trainer with the international Institute for Earth Education since 1992 – having been involved in many earth education programmes at a number of centres in the UK and Europe. This brings to bear his deeper ecological understanding of how our planet operates ecologically – based on an environmental degree and conservation masters.

In the last 20 years Jon worked at Bishops Wood Centre where he was a member of the Forest School team for Worcestershire County Council and coordinated the Forest School and environmental education training programme at this widely recognised sustainable education centre. In this time Jon has increasingly got interested in the emotional literacy aspects of working outdoors, finding Forest School an ideal programme to explore this more deeply.

Jon was the founding chair of the Forest School Association (FSA) UK and remains a director of the FSA.

Jon loves nothing more than paddling down the rivers on the Welsh borders with his family, whittling the odd spoon and baking his own bread over the fire!

## APPENDIX 3

### BIOGRAPHY - DR MAX HOPE



Max Hope (she/they) is a facilitator, educator, researcher, activist, and writer. They work as an independent researcher with a decade of experience of working as an academic at the University of Hull. They have published twenty journal articles and book chapters, one co-authored book, one sole authored book, and many blog posts. They have secured three large research grants as a lead or co-lead researcher, including funding from the ERSC, EU and Spencer Foundation. They are currently leading a multi-authored book project about rewilding education.

Max is deeply committed to social justice and to radically transforming learning and education opportunities so that they are inclusive for everyone. They have spent many years as a grassroots activist, primarily focusing on challenging queer and gender-based inequalities and providing innovative alternative spaces for marginalized young people and adults. Max has co-facilitated a year-long programme with Wildwise in Devon - Call of the Wild - since 2021 and loves being in nature and bringing the wild into all learning experiences. Alongside this, they co-lead The Lodge, a consent-based and self-directed learning community for home educated young people in Hertfordshire, they created Write On Changemakers, a writing space for changemakers and activists.

For more info on Max, including a full list of publications, <https://maxhope.co.uk/>



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