

## **CHAPTER II: LITERATURE REVIEW**

### **2.1 Introduction**

Adventure-based therapy (ABT) has emerged as a promising approach for enhancing couple relationships. It utilizes experiential learning within a therapeutic framework to facilitate communication, trust-building, and conflict resolution skills (Gillis & Gass, 1993). While research supports the effectiveness of ABT in various therapeutic contexts (Gass, Gillis, & Russell, 2012), a limited findings exist regarding its specific impact on couples' relationships. This chapter researches into the relevant literature, exploring the theoretical foundations of ABT, current research trends focusing on couples, and the potential benefits and challenges associated with this therapeutic approach.

### **2.2 Definition of Adventure-Based Therapy**

By emphasising emotional growth as a core component, adventure-based therapy (ABT) programmes differ from basic outdoor education programmes and are therefore therapy-based (Berman & Davis-Berman, 2000). According to Crisp (1998), ABT is:

A therapeutic intervention which uses contrived activities of an experiential, risk taking and challenging nature in the treatment of an

individual or group. This is done indoors or within an urban environment and does not typically involve living in an environment (p.9.)

It is important to distinguish between the terms therapy and therapeutic while defining AT. A therapy is "a treatment designed to relieve or cure an illness, disability, or other bodily, mental, or behavioural disorder" (Williams, 2004, p. 199). The process a client goes through to bring about good change in their life is referred to as "therapy" (Williams, 2004). On the other hand, "therapeutic" refers to a client's experience that leaves them feeling better, such as happier or more at ease (Williams, 2004). It's crucial to make this distinction because AT programmes may use the terms "therapy" or "therapeutic" in their programming.

The phrases "wilderness therapy" and "wilderness AT" are often used interchangeably to identify or categorise the sort of outdoor adventure programme. Wilderness therapy includes solitude and the necessity of sleeping in the wilderness, either in a designated campground or on a journey where participants are required to learn to be independent. Kayaking, backpacking, trekking, climbing, and other forms of backcountry travel are all common activities in wilderness therapy (Crisp, 1998).

The term "wilderness-adventure therapy" refers to shorter day visits, "a short session or where a natural environment is used for an adventure therapy type of activity" (Crisp, 1998). Lastly, "wilderness family therapy" is defined as "the process by which family members participate in a wilderness experience and take risks, which are often in high-stress situations" (Mason, 1987).

These distinctions help ensure clarity in understanding the scope and purpose of different ABT programmes. Accurate terminology is essential for effectively communicating the goals and methods of therapeutic practices in wilderness settings.

### **2.3 History of Adventure-Based Therapy**

ABT has its origins in the 1800s, when Friends Hospital in Philadelphia combined outdoor activities to treat mental health disorders. In 1901, outdoor therapy was employed to separate tuberculosis patients at Manhattan State Hospital East by using tents for patients to sleep in. In the mid-to-late 1900s, several camps began to use therapeutic tactics. The camps were designed for people with a variety of medical and mental illnesses (Gillis, 2005).

Kurt Hahn started Outward Bound in 1941 to provide the first experiential education programme that combined the outdoors with education (Outward Bound, n.d.). Hahn got the concept after noticing that young British sailors serving in WWII lacked the skills needed to survive at sea. "There is more to us than we realise," Hahn was quoted as saying. If we can be forced to perceive it, perhaps for the rest of our lives we will be unwilling to settle for less" (Outward Bound, n.d.).

As an American professor residing in Scotland, Josh Miner was introduced to Outward Bound. Miner was taken with Outward Bound and set out to build it in the United States. Outward Bound in the United States had a huge impact on experiential education by providing programming that provided students with experiences that lead to improved empowerment, self-esteem, and a sense of responsibility for others.

Outward Bound offered clients with the thrill and skills that no other programme in the United States had done previously (Outward Bound, n.d.).

According to Gillis (2005), the phrase adventure-based counseling was first used in 1979, and the field has continued to grow since then. The development of adventure activities such as ropes courses, as well as professional education programmes with an emphasis on AT curriculum, all contributed to the advancement of the AT profession. The sector developed worldwide conferences as well as the Association of Experiential Education (AEE), a professional organisation. AEE has influenced and shaped the nascent field of AT towards the objective of becoming a recognised approach of therapy (Gillis, 2005).

#### **2.4 Key Area of Adventure-Based Therapy Treatment**

Adventure-Based Therapies (ABTs) aim to address a variety of mental health and personal development issues, including depression, stress, anxiety, substance abuse, self-efficacy, trauma, and self-esteem (Bettman et al., 2016; Bowen et al., 2016; Fernee et al., 2017; Hill, 2007; Mutz & Müller, 2016). Bowen's research indicates that even three months post-ABT, clients showed substantial improvements in depressive symptoms (Bowen et al., 2016). These programs often intensify trail activities to substitute the everyday stressors that contribute to depression, negative emotions, or poor well-being (Mutz & Müller, 2016). Bird (2015) demonstrated that stress levels were significantly reduced following an ABT, with sustained benefits observed after two months.



In addition to depression, anxiety is another focus area for ABT programs. Bettman et al. (2017) found that participants who reported lower levels of resentment and anxiety towards their parents were more likely to have stronger interpersonal connections and reduced anxiety and fear of abandonment. Substance abuse is also a critical issue addressed by many ABT programs (Hill, 2007). Similar to the spiritual aspects of Alcoholics Anonymous (AA), negative spirituality can exacerbate feelings of depression, low self-esteem, and defensiveness (Katsogianni & Kleftaras, 2015).

Participants in ABTs often experience an increase in self-esteem and self-efficacy, which Fernee et al. (2017) define as confidence in one's ability to overcome life's obstacles. This enhanced self-efficacy allows participants to tackle previously daunting challenges successfully (Mutz & Müller, 2016). For victims of abuse, ABTs linked with other counseling modalities can significantly boost self-confidence and self-efficacy. Kelly (2006) noted that programs like Outward Bound, which require additional individual or group counseling before engaging in wilderness therapy (WT) for abuse victims, are particularly effective. These programs help participants develop the resilience and skills needed to confront and overcome their traumatic experiences.

## **2.5 Couple Intimacy**

Intimacy is a term that many believe they understand, but it often lacks a precise technical definition. Words such as love, friendship, connectedness, and closeness are frequently associated with it. Sternberg defines intimacy as "feelings of closeness, connectedness, and bondedness in loving relationships. It thus includes within its purview those feelings that give rise, essentially, to the experience of warmth in a loving

relationship" (Sternberg, 2017). The sense of closeness and connectedness is a crucial aspect of a strong marital relationship. In their study on intimacy, Tani, Pascuzzi, and Raffagnino (2015) utilized the Couple's Affectivity Scale (CAS), which examines self-disclosure, partner disclosure, perceived partner responsiveness, relational communication, physical attraction, and sexual satisfaction to assess couple intimacy.

Humans have an inherent desire for a sense of community and belonging where vulnerability is both encouraged and safe. Adler referred to this connectedness as "Gemeinschaftsgefühl" (Reese & Myers, 2014, p. 401). Enhancing connectedness and commitment can increase couple intimacy, which, according to Brittle (2014), can also lead to a more satisfying sexual relationship. For some couples, intimacy can hold more significance than sexual intercourse itself. Intimacy, therefore, can become a critical element in marital relationships. During periods of transition and marital adjustment, intimacy is significantly enhanced by the couple's ability to communicate their emotions effectively (Tani et al., 2015). Intimacy is vital to marital satisfaction for both partners, encompassing emotional and physical dimensions.

Despite extensive research on the individual benefits of ABT, understanding its effects on couple intimacy and relationship dynamics is still limited. While ABT has been shown to improve various aspects of mental health and personal growth, the specific impact on couple relationships is less explored due to the apparent lack of targeted programming and research in this area. To address this, the current study focuses on the lived experiences of couples in adventure-based therapy, particularly through hiking, to explore how such therapeutic interventions influence relationship dynamics, communication, and emotional bonds between partners.

## 2.6 Current Research on Adventure-Based Therapy

There is a lack of internal and external validity in the research on adventure-based therapy (ABT). To effectively connect ABT as an application that causes change in participants, Newes (2001) suggest that solid research with an empirical foundation is required. In order for adventure-based therapy for families to be accepted into an evidence-based therapy treatment, further empirical research must be conducted (Gillis & Gass, 1993; Burg, 2001; Newes, 2001; Neill, 2003).

Gillis (1994) proposed five enhancements to the field of AT in 1992. First, he realised the need to finish a meta-analysis project that incorporates clinically acknowledged and significant criteria. "A method of statistically integrating outcomes from many separate studies" (Cason & Gillis, 1994, p. 41) is defined as "meta-analysis." Cason and Gillis (1994, p. 41) advocated for the use of meta-analysis to synthesise the findings of numerous research into data that could be evaluated by in-depth study. Second, Gillis proposed that research be concentrated on developing user manuals that would allow data to be collected with them to better accept or prohibit certain uses of AT. Third, it is critical to address the issue of AT staff members lacking the requisite credentials for both therapy and adventure programming to maintain safety and professional standards for activities and therapeutic components. Fourth, Gillis encourages AT researchers to collaborate in their writing. Finally, Gillis (1992) proposes that AT research findings be published in psychotherapy journals.

According to Neill (2003), industry standards for measuring the outcomes of adventure-based programmes should be established. This is accomplished by developing statistical benchmarks and comparing the results of investigations to the standard. As stated by Neill, this will provide a standard for the industry to better assess

what works and what doesn't in adventure-based therapy programmes. Neill recommended that adventure programmes in general subscribe to the most recent forms for analysing outcomes. Neill suggests standardising future research by investigating specific aspects of AT using standard measurements, completing research focusing on "clinically significant moments and processes that occur," and sharing data with the international AT community (Neill, 2003, p. 320).

Burg (2001) proposes that studies should better define course factors such as programme length, aims, intensity, and practitioners' level of training in therapy and adventure programming. The goal is to build a repository of research studies that is capable of recognising the best adventure-based therapy treatment for a specific population or diagnosis.

A growing body of research is exploring the effectiveness of ABT for couples. A recent systematic review by Fletcher et al. (2017) identified positive outcomes associated with ABT, including improved communication, conflict resolution skills, and relationship satisfaction. However, the authors highlight the need for further research with stronger methodological designs to establish more definitive evidence. Studies by Gass and Priest (2017) and Neill and Dias (2001) demonstrate the potential of ABT to enhance teamwork and emotional expression within couples. While these findings are encouraging, further research investigating long-term effects and exploring the specific mechanisms of change within ABT is crucial.



## **2.7 Benefits and Challenges of Adventure-Based Therapy Towards Couples**

Several potential benefits are associated with ABT for couples. The challenging nature of outdoor activities can foster a sense of shared accomplishment and interdependence within couples (Gillis & Gass, 2017). The focus on communication and teamwork during activities can translate into improved communication skills and conflict resolution strategies in daily life (Priest & Gass, 2005). Additionally, ABT can provide a safe space for couples to explore their emotions and vulnerabilities, leading to deeper intimacy and connection. Research suggests that ABT can enhance couples' problem-solving abilities, resilience, and overall relationship satisfaction (Fletcher et al., 2017).

While ABT offers numerous benefits for couples, certain challenges may arise. Safety concerns related to outdoor activities are a primary consideration, requiring careful planning and risk management (Crisp, 1998). The intensity of some activities may not be suitable for all couples, and therapists must carefully assess participants' physical and emotional readiness (Gillis & Bonney, 1986). Additionally, the effectiveness of ABT may be influenced by the qualifications and training of the therapists leading the programs (Newes & Bandoroff, 2004). Addressing these challenges requires careful program design, therapist expertise, and appropriate participant screening.

ABT programs for couples typically serve a diverse range of individuals experiencing relationship difficulties, including those facing communication breakdowns, conflict resolution challenges, trust issues, or a lack of connection (Gillis & Gass, 2012). Couples seeking to enhance their relationship satisfaction or build resilience may also benefit from ABT. However, it is essential to consider individual

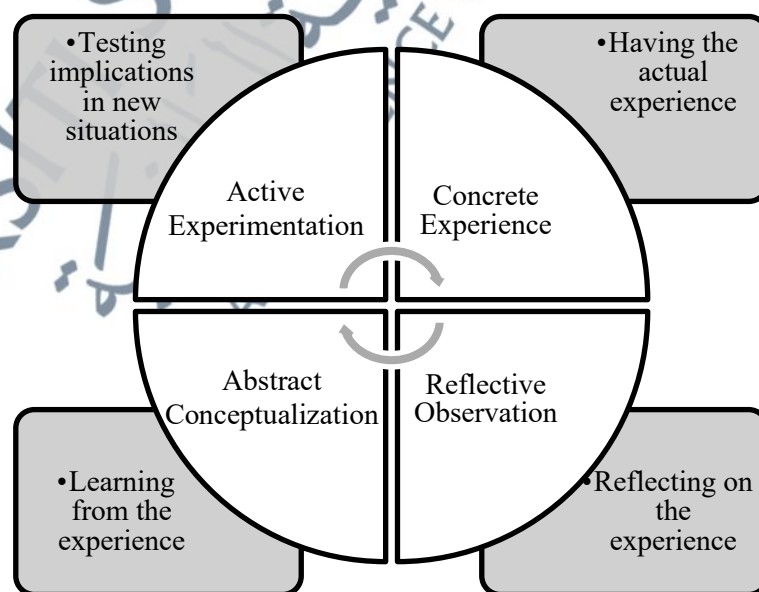
differences and tailor programs accordingly to meet the specific needs of each couple. Personalizing the approach can maximize the benefits of ABT and ensure that the therapeutic interventions are relevant and effective for each couple's unique circumstances (Fletcher et al., 2017). Continuous evaluation and adaptation of the programs based on participant feedback and outcomes are also crucial for maintaining the effectiveness and relevance of ABT interventions.

## 2.8 Theories and Model Related to the Study

### 2.8.1 Kolb's Experiential Learning Theory

David Kolb's Experiential Learning Theory (ELT) posits that knowledge is constructed through the transformation of experience (Kolb, 1984). This cyclical process involves four interconnected stages: concrete experience, reflective observation, abstract conceptualization, and active experimentation.

Figure 1: Kolb's Experiential Learning Cycle



Source: Adapted and modified from Kolb (1981).

The concrete experience stage initiates the learning cycle, involving direct engagement with a new or existing situation. Through reflection on this experience, learners engage in the second stage, where they consider their knowledge in light of the encountered experience. This reflective process facilitates the emergence of new ideas or modifications to existing concepts during the abstract conceptualization stage. Finally, learners apply these newly formed concepts in real-world situations, testing their validity and utility in the active experimentation stage.

Kolb (2000) emphasizes the iterative nature of this learning cycle, suggesting that effective learning occurs through continuous movement between these stages. While it is possible to enter the cycle at any point, optimal learning necessitates the completion of all four stages. This cyclical process ultimately contributes to the development of increasingly complex and abstract mental models (Kolb, 1984).

Adventure-Based Therapy (ABT) incorporates Experiential Learning Theory (ELT) as a foundational framework for facilitating personal and interpersonal growth. ELT, proposed by Kolb, defines a cyclical process of learning consisting of four stages: Concrete Experience (CE), Reflective Observation (RO), Abstract Conceptualization (AC), and Active Experimentation (AE). Within the context of ABT, each stage of Kolb's Learning Cycle manifests uniquely, contributing to therapeutic outcomes.

In adventure-based therapy (ABT), the concrete experience stage involves participants actively engaging in outdoor activities or experiential challenges. These experiences serve as the foundation for therapeutic

exploration and growth (Russell & Phillips, 2015). For example, a study by Gass and Priest (2017) demonstrated that activities such as ropes courses, wilderness expeditions, and group initiatives provide opportunities for couples to develop teamwork skills, build trust, and overcome challenges together.

Following the concrete experience, reflective observation allows participants to process and make sense of their experiences (Gillis & Gass, 2017). Research by Neill and Dias (2001) highlights the importance of structured debriefing sessions in ABT, where couples engage in reflective discussions facilitated by trained therapists. These discussions encourage participants to explore their thoughts, emotions, and relational dynamics in relation to the activities they have undertaken.

In the abstract conceptualization stage, participants derive broader insights and understanding from their experiences (Gillis et al., 2020). For instance, a study by Priest and Gass (2005) found that couples participating in ABT often develop new perspectives on communication, problem-solving, and relationship dynamics. Through guided reflection and dialogue, they begin to conceptualize these insights and apply them to their everyday lives.

Active experimentation involves applying newfound insights and skills to real-life situations (Russell, 2001). Studies by Blumenfeld et al. (1991) emphasize the importance of post-program support and follow-up activities in ABT to facilitate the transfer of learning to participants' daily lives. For example, couples may set goals for applying communication techniques learned during therapy sessions to their interactions at home.



Building upon his experiential learning cycle, Kolb (1984) further developed a framework for understanding individual learning preferences, known as learning styles. He posited that individuals tend to favour specific approaches to learning, influenced by factors such as social environment, educational experiences, and cognitive disposition.

Table 1: Kolb's Four Learning Styles

|                                                      | <b>Active<br/>Experimentation<br/>(Doing)</b> | <b>Reflective<br/>Observation<br/>(Watching)</b> |
|------------------------------------------------------|-----------------------------------------------|--------------------------------------------------|
| <b>Concrete Experience<br/>(Feeling)</b>             | Accommodating<br>(CE/AE)                      | Diverging (CE/RO)                                |
| <b>Abstract<br/>Conceptualization<br/>(Thinking)</b> | Converging (AC/AE)                            | Assimilating (AC/RO)                             |

Source: Adapted and modified from Kolb (1981).

Kolb conceptualized learning styles as a product of two dimensions: the processing continuum (how individuals approach tasks) and the perception continuum (how they think or feel about them). These dimensions intersect to form a two-by-two matrix, resulting in four distinct learning styles: diverging, assimilating, converging, and accommodating.

Diverging learners excel at concrete experiences and reflective observation, demonstrating a preference for imagining possibilities and generating ideas. Assimilating learners favour abstract conceptualization and reflective observation, demonstrating a tendency towards logical analysis and

integrating information. Converging learners prioritize abstract conceptualization and active experimentation, excelling at problem-solving and applying knowledge to practical situations. Finally, accommodating learners thrive in concrete experiences and active experimentation, demonstrating a preference for hands-on learning and risk-taking.

In the context of adventure-based therapy for couples, understanding Kolb's four learning styles can significantly enhance the therapeutic process by tailoring activities to individual learning preferences. This personalized approach can maximize the therapeutic benefits for each participant, thereby improving the overall effectiveness of the therapy.

Diverging learners, can benefit from activities that encourage creative expression and emotional exploration. These individuals might find particular value in journaling or artistic reflection sessions after completing a hike, allowing them to process their experiences deeply and explore various perspectives. For example, a couple might use creative writing to articulate their feelings about a challenging hike, thus gaining insights into their relational dynamics (Russell & Phillips, 2015).

Assimilating learners thrive on logical analysis and integrating information. These individuals might benefit from structured debriefing sessions where they can analyze their experiences and draw logical conclusions. For instance, a therapist might guide a couple to discuss how their communication strategies during a hike relate to communication theories, helping them understand their interactions on a deeper level (Gillis & Gass, 2017).

Accommodating learners prefer hands-on learning and risk-taking. ABT can be particularly effective for these individuals by engaging them in dynamic and challenging activities that require active participation, directly experiencing the therapeutic process and experimenting with new behaviours. For instance, a couple might engage in a high-ropes course, where they must trust and support each other. This hands-on approach can lead to significant breakthroughs in trust and cooperation (Gass & Priest, 2017).

Converging learners excel at problem-solving and applying knowledge to practical situations. To cater these individuals using ABT, in problem-solving tasks and challenges during hikes, apply their insights to improve their relationship. For example, a therapist might design a scenario where a couple must navigate a difficult trail, encouraging them to apply conflict-resolution strategies discussed in therapy. This practical application reinforces their learning and strengthens their relational skills (Priest & Gass, 2005).

By incorporating Kolb's four learning styles into adventure-based therapy, therapists can create a more individualized and effective therapeutic experience. Understanding each participant's preferred learning style allows for the design of activities that not only engage the participants but also facilitate deeper learning and relational growth. This tailored approach can help couples navigate their unique challenges more effectively and foster stronger, more resilient relationships.

In conclusion, Experiential Learning Theory provides a comprehensive framework for understanding the learning process in ABT and its therapeutic implications (Neill & Giles, 2013). Integrating Kolb's Experiential Learning

Theory and his framework of learning styles into adventure-based therapy provides a robust foundation for facilitating personal and interpersonal growth among couples. The cyclical process of experiential learning, combined with the recognition of individual learning preferences, ensures that therapy is both comprehensive and adaptive, meeting the diverse needs of participants and maximizing therapeutic outcomes.

By examining each stage of Kolb's cycle within the context of ABT, practitioners and researchers can gain valuable insights into the mechanisms underlying participant growth and transformation. By understanding and adapting to various learning approaches, individuals can enhance their overall learning experience.

### **2.8.2 Bandura's Social Learning Theory**

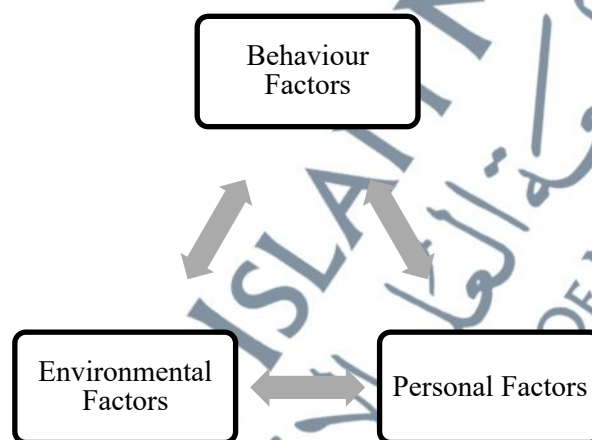
Albert Bandura's Social Learning Theory (SLT) posits that individuals acquire new behaviours through the observation of others, modelling, and imitation. This theory emphasizes the role of social influences and the environment in shaping behaviour, suggesting that people learn not only through their own experiences but also by observing the actions and outcomes of others' behaviours (Bandura, 1977). In the context of adventure-based therapy for couples, SLT provides a valuable framework for understanding how couples learn and develop new relational dynamics through shared outdoor experiences.

Social Learning Theory focuses on behaviour therapy that emphasizes directly observable behaviour, current determinants of behaviour, and learning



experiences that promote change. According to Bandura, human behaviour is shaped through the interaction of cognitive, behavioural, and environmental factors, a concept he termed reciprocal determinism. This theory is particularly relevant for adventure-based therapy as it highlights the importance of the environment and social context in facilitating behaviour change and learning.

Figure 2: Bandura's Social Learning Theory



Source: Adapted and modified from Bandura (1977).

In adventure-based therapy, couples engage in various outdoor activities that require cooperation, communication, and mutual support. Through these activities, couples observe and model each other's behaviours, leading to the acquisition of new skills and relational patterns. For example, during a challenging hike, one partner might demonstrate effective problem-solving or emotional regulation strategies, which the other partner can observe and later imitate. This process aligns with Bandura's concept of observational learning, where individuals learn new behaviours by watching others and the consequences of their actions (Bandura, 1986).

Reinforcement plays a crucial role in Social Learning Theory. Positive reinforcement encourages couples to repeat effective behaviours, while negative reinforcement, also supports behaviour change. In the context of adventure-based therapy, couples experience both forms of reinforcement, which can strengthen their relational dynamics. For instance, successfully navigating a difficult terrain together can reinforce teamwork and trust, making couples more likely to employ these behaviours in their daily lives (Russell & Phillips, 2015).

Research by Gass and Priest (2017) indicates that activities such as ropes courses, wilderness expeditions, and group initiatives in ABT provide ample opportunities for observation and modelling. Couples participating in these activities observe each other's responses to challenges, learn new coping strategies, and practice these behaviours in a supportive environment. This experiential learning process is further facilitated by reflective discussions led by therapists, where couples can process their experiences and reinforce positive behaviours (Gass & Priest, 2017).

Bandura's Social Learning Theory also emphasizes the influence of social structures and the environment on behaviour. In adventure-based therapy, the natural environment and the social context of group activities provide a unique setting for learning and behaviour change. The serene and challenging environment of outdoor activities can reduce stress and promote openness, while the presence of other couples offers additional models for learning. Couples learn not only from their own experiences but also by observing the interactions and successes of other couples, which can inspire and motivate them to adopt similar behaviours (Neill & Dias, 2001).

Applying SLT to real-life situations, couples who participate in adventure-based therapy are likely to carry the skills and behaviours learned during therapy into their everyday interactions. The positive reinforcement experienced during therapy sessions can lead to sustained behaviour change, as couples continue to practice effective communication, problem-solving, and support in their daily lives. This transfer of learning is crucial for the long-term success of therapy, as it ensures that the benefits of adventure-based therapy extend beyond the therapy sessions (Priest & Gass, 2005).

Understanding SLT in the context of adventure-based therapy provides therapists with a framework for designing effective interventions. By creating opportunities for observation, modelling, and reinforcement, therapists can facilitate meaningful behaviour change and relational growth. This approach not only enhances the immediate therapeutic outcomes but also supports the long-term development of healthy relational patterns among couples.

In conclusion, Bandura's Social Learning Theory offers valuable insights into the mechanisms of learning and behaviour change in adventure-based therapy for couples. By emphasizing the role of observation, modelling, and reinforcement, SLT underscores the importance of social and environmental factors in shaping behaviour. Integrating this theory into adventure-based therapy provides a robust foundation for facilitating personal and interpersonal growth, ensuring that couples can develop and sustain positive relational dynamics in their everyday lives.

## 2.9 Theoretical Framework of the Study

The theoretical framework guiding this study is Kolb's Experiential Learning Theory. Developed by David Kolb, this theory posits that learning is a cyclic process that involves four stages: concrete experience, reflective observation, abstract conceptualization, and active experimentation. According to Kolb (1984), individuals learn best when they actively engage in experiences, reflect on those experiences, conceptualize abstract ideas, and apply their newfound knowledge in real-world situations.

In the context of adventure-based therapy, Kolb's theory provides a lens through which to understand how couples engage in experiential learning during outdoor activities and therapeutic interventions. By experiencing challenges, reflecting on their experiences, and integrating new insights into their relationships, couples can undergo transformative learning processes that enhance their relationship dynamics and personal growth.

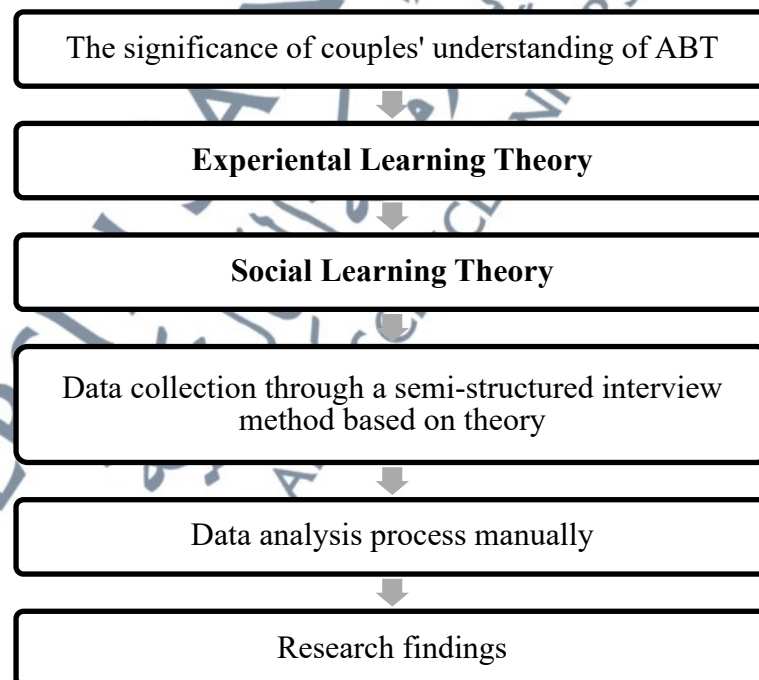
Additionally, Albert Bandura's Social Learning Theory (SLT) serves as a complementary framework for this study. Bandura's theory emphasizes the importance of observational learning, imitation, and modelling in the learning process. According to Bandura (1977), individuals acquire new behaviours and knowledge by observing others, particularly in social contexts. This theory highlights the role of vicarious experiences and social interactions in shaping behaviour and attitudes. In the context of adventure-based therapy, couples can learn effective communication, problem-solving skills, and emotional regulation by observing and interacting with their partners and other participants in the therapy sessions.



Social Learning Theory also underscores the significance of self-efficacy, which is an individual's belief in their ability to succeed in specific situations. Bandura (1997) asserts that self-efficacy influences motivation, perseverance, and resilience. In adventure-based therapy, couples may enhance their self-efficacy by successfully navigating physical and emotional challenges together. This increased confidence can translate into improved relationship dynamics as couples learn to rely on and support each other.

Integrating Bandura's Social Learning Theory with Kolb's Experiential Learning Theory provides a comprehensive understanding of how couples can grow and develop through both direct experiences and social interactions in adventure-based therapeutic settings.

Figure 3: Theoretical Framework of the Study



## 2.10 Conclusions

Adventure-based therapy programs for couples basically involve a combination of outdoor activities and therapeutic interventions. Common activities include hiking, kayaking, rock climbing, and wilderness expeditions (Gass & Priest, 2017). The therapeutic components often include structured debriefing sessions, experiential exercises, and individual or couples counseling (Neill & Dias, 2001). The emphasis is on experiential learning, where couples engage in challenging activities and reflect on their experiences within a supportive therapeutic environment (Gillis et al., 2020).

This literature review has explored the theoretical foundations, current research, and potential benefits and challenges of adventure-based therapy for couples. Kolb's Experiential Learning Theory and Social Learning Theory provide valuable frameworks for understanding the mechanisms of change within ABT.

While the primary focus of this review is on ABT and couples, it is also important to acknowledge the broader impact of ABT on mental health. Studies have shown that adventure-based programs can be effective in addressing a range of mental health issues, including depression, anxiety, and trauma (Newes, 2001). By building resilience, fostering self-esteem, and enhancing coping skills, ABT can positively influence individuals' overall well-being (Gillis, 2005). It is plausible that the benefits experienced by individuals participating in ABT programs may also contribute to improved mental health within couples.

While the research on ABT and couples is still emerging, promising findings suggest that this approach can be an effective intervention for enhancing relationship satisfaction and addressing relationship difficulties. Further research is needed to

investigate the long-term outcomes of ABT for couples, identify specific predictors of success, and explore the underlying mechanisms of change.

