

THE VALUE OF EXPERIENTIAL/ADVENTURE-BASED EDUCATION

Over the past several decades, experiential education has been gaining popularity both in classrooms and in other learning programs. Rather than teaching by memorization or textbook examples, experiential education allows participants to experience and discover first hand the value of teamwork, leadership, and communication as they work together towards a common goal.

Group initiatives are one component of the Experiential/Adventure based education model of learning. They are challenging problem-solving activities, which are designed to create a situation in which each group member's unique skills and contributions are necessary to complete the task.

The group will be encouraged to

- Contemplate the problem
- Brainstorm solutions as a group
- Design a plan of attack
- Execute the plan
- Celebrate successful completion of the initiative
- Discuss and evaluate

If the team is unable to complete the challenge, they may re-strategize and repeat the steps.

Following each group initiative, the facilitator helps the group process their experience. By asking questions or conducting follow-up activities the participants acknowledge their personal contributions. Each individual is encouraged to consider parallels between the challenges of completing the activity and communication, cooperation, leadership, trust, and problem solving in other aspects of life.

Often in the process of learning new skills, especially those that appear to be risky, there is a certain level of anxiety that precedes the adventure. Generally speaking, people are more capable when they focus on their strengths, keep an open mind, and confidently share and learn through trial and error. Trying new things in a supportive atmosphere gives participants an opportunity to challenge self-imposed limitations.

KEY CONCEPTS OF ADVENTURE BASED EXPERIENTIAL EDUCATION

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|---------------------------|---|
| COOPERATION: | Working with others to achieve a goal |
| RESPECT: | Treating others as you would want to be treated |
| SUPPORT: | Helping others and accepting help |
| TRUST: | Believing in others' abilities and willingness to support one another |
| PATIENCE: | Waiting your turn and taking the time you need |
| CONFIDENCE: | Believing in yourself |
| WILLINGNESS: | Ready to do what needs to be done |
| HONESTY: | Speaking and acting sincerely |
| COMMITMENT: | Deciding to give 100% to see the project through |
| STRENGTH: | Physical, emotional, and mental abilities |
| ABILITY TO PROBLEM SOLVE: | Thinking outside the Box |
| SAFETY: | Taking care of yourself and team members |
| LISTENING: | Paying attention to others' ideas, suggestions, and advice |
| FUN: | Positive attitude |
| ENTHUSIASM | Eagerness to succeed |

Reinhold Messner so beautifully applies ADVENTURE as the following acronym:

| | |
|---|--|
| A | Adaptability |
| D | Determination without conditions plus great desire |
| V | Vision (Power of Imagination) plus Values |
| E | Experience |
| N | Natural Curiosity |
| T | Teamwork and Trust |
| U | Unlimited Optimism |
| R | Readiness to take risks |
| E | Energy, Enthusiasm, and Emotion |



**CHALLENGE COURSE
MEDICAL INFORMATION FORM**

ALL INFORMATION MUST BE FILLED OUT COMPLETELY BEFORE YOU MAY PARTICIPATE IN THE CHALLENGE COURSE!

Name: _____ Phone: _____ (day) _____ (evening)
Street Address: _____ City: _____ State: _____ Zip: _____

MEDICAL INFORMATION: (Please be thorough and specific with your answers)

Height: _____ Weight: _____ Age: _____ Sex: _____

Current Physical Condition (Overall): Excellent _____ Good _____ Fair _____ Poor _____

Do you currently have or have you ever had: (please explain all "yes" answers)

Heart Problems: Yes _____ No _____ Explain _____

High Blood Pressure: Yes _____ No _____ Explain _____

Back/Knee/Shoulder/Neck injuries or surgery: Yes _____ No _____ Date _____ Explain _____

Bee Sting Allergy: Yes _____ No _____ Explain _____

Asthma: Yes _____ No _____ Explain _____

Diabetes: Yes _____ No _____ Explain _____

Do you smoke? Yes _____ No _____ If yes, do you have any lung disease or problems: _____

Are you currently taking any medications? Yes _____ No _____ If yes, please list: _____

Are you pregnant? Yes _____ No _____ if yes, due date: _____

Have you been pregnant in the past two months? Yes _____ No _____ If yes, delivery date: _____

Any complications with that pregnancy? Yes _____ No _____ Explain _____

Any other Allergies which we should be aware of? _____

Any other medical problems or concerns (dizziness, headaches, or earaches): Yes _____ No _____

Explain _____

IN THE EVENT OF AN ACCIDENT OR EMERGENCY, PLEASE NOTIFY:

Name: _____ Phone: _____ (day) _____ (evening)

Street Address: _____

City: _____ State: _____ Zip: _____ Relationship: _____

TO THE BEST OF MY KNOWLEDGE, I HAVE ACCURATELY FILLED OUT THE ABOVE INFORMATION

Signed: _____ Date _____

Signed: _____ Date _____

Parent / Guardian if under 18 years of age

CHALLENGE COURSE CONSENT TO PARTICIPATE

PLEASE READ CAREFULLY

The *Challenge Course* is composed of a series of individual and group challenges that require a combination of teamwork skills and individual commitments. The *Course* consists high and low elements constructed from ropes, cables, wood, telephone poles, and a variety of other material components.

As with all sports and activities, there are certain inherent physical risks involved in the activities. We ask that you read the paragraph below and sign to indicate your understanding, consent, and agreement to participate.

I am aware that I will be given the choice to participate in outdoor and indoor activities through the *challenge course*, that are physically and emotionally demanding and may involve certain inherent dangers, stresses, and risks. I may be exposed to various risks, and I agree to release and hold harmless (unless due to the *Challenge Course's* sole negligence) North Star Behavioral Health System, its owners, representatives, assistants, employees, medical staff, and all related entities from any and all liability, loss or damage, actions, claims and demands, which I now have or may arise from my participation in these activities. I consent to the administration of first aid or other medical treatment in the event of any injury to myself (or dependent), and consent to be financially responsible for such treatment. This form shall serve as a release and assumption of risk for my heirs, executors, and all personal representatives. I agree to abide by all rules, regulations, and standards for these activities or to accept dismissal for refusing to follow them.

SIGNED _____ DATE _____
Participant

SIGNED _____ DATE _____
Legal Guardian (if participant under 18 years of age)

SIGNED _____ DATE _____
Witness

FULL VALUE CONTRACT

“Full Value” means taking care of yourself and others to the best of your ability and giving 100%. It recognizes and values anything that goes into making you the individual you are (feelings, opinions, strengths, weaknesses, etc.) and acknowledges and values the individuality of others.

The Full Value Contract asks for two commitments. The first is an agreement to adhere to certain safety and group behavior guidelines (i.e. no “put-downs of yourself or others, serious focus on supporting or spotting others in your group, full participation in all activities, and others). These guidelines must be discussed and agreed upon and reinforced by each participant and by the group, or they will be meaningless. The second commitment is to give and receive feedback, both positive and negative. It is a responsibility of the group to develop the process and ability to communicate openly in order to work through issues and obstacles which otherwise will invariably hold them back. Keep in mind that failure is an important part of the process, and that “picking on”, harassing, or targeting others breaks the first agreement of the Full Value Contract.

“Full Value” centers on the concept of VALUE and the fact that all members of the group are committed to establishing the highest possible value for all.

CHALLENGE BY CHOICE

The Challenge Course is designed to provide a “pushing the limits” atmosphere for all levels of physical and psychological abilities. What is comfortable for one participant may be unimaginable to another. Each participant has a choice to set and/or stretch his or her own personal parameters of comfort. We ask only that each person choose to participate in some way. This may include climbing all of the high elements, climbing one ladder, or by being the support crew with keeping feet firmly on the ground. It is your **Challenge by your Choice**.