

Northern Virginia Therapeutic Riding Program

Volunteer Training Manual



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NORTHERN VIRGINIA THERAPEUTIC RIDING PROGRAM MISSION STATEMENT

NVTRP, at O'Shaughnessy Farm, is a nonprofit 501(c)(3) that helps each individual realize their highest potential by providing equine-assisted activities to people with disabilities, youth-at-risk, recovering military personnel, and others in need in an inclusive, community setting.

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WELCOME!

All of us at the Northern Virginia Therapeutic Riding Program (NVTRP) want to welcome you to our program and thank you for joining our volunteer team!

We serve over 400 clients every year, and this would not be possible without you! We appreciate your time and interest. Your help is invaluable to our clients.

As an active participant in the Equine-Assisted Activities and Therapies (EAAT) team, you will help individuals to progress physically and mentally and to achieve goals they never thought possible. You will see joy and determination on the faces of our clients. You will see the pride on the face of a client who has left his wheelchair and completed a series of tasks while riding his horse. By helping and encouraging, **you** will be an important part of the progress our clients make. Thank you for volunteering with us!



ABOUT NVTRP

NVTRP is a 501 (c) (3) non-profit organization. We are a Premier Accredited Center of the Professional Association of Therapeutic Horsemanship (PATH Intl.) and a member center of the Therapeutic Riding Association of Virginia (TRAV). We have worked with individuals in the Northern Virginia area since we started as the Fairfax 4-H Therapeutic Riding Program in 1980.



ABOUT EQUINE-ASSISTED ACTIVITIES AND THERAPIES (EAAT)

EAAT was organized formally during the 1950s and has proven to be an effective activity for people with mental, physical and emotional disabilities. By focusing on each client's ability rather than their disability, a high rate of success has been seen in improving balance, coordination, muscle strength, rhythm, speech, social skills, and self-confidence. Combine all of these individual benefits with the special relationship between horse and client, and our clients have an exceptional opportunity to grow mentally, physically and emotionally.

PROGRAMS AT NVTRP

Therapeutic Riding (TR):

Therapeutic riding provides an opportunity for individuals with disabilities to learn how to ride a horse and also gain both physical and emotional rewards through challenging and stimulating activities. We see improvements in balance, strength, coordination, confidence, concentration and self-discipline while having fun.

The goals of therapeutic riding sessions center on learning riding skills such as steering, halting, and controlling the horse. The aim is for the client to become as independent as possible. Games are also an important part of many therapeutic riding sessions. Although fun, games are designed with a specific purpose in mind to enhance the client's skill level.

Therapeutic riding sessions are taught by a PATH Intl. certified therapeutic riding instructor.

Depending on a client's experience, volunteers may assist as horse leaders, sidewalkers or spotters during sessions.

Hippotherapy (HPOT):

Occupational therapists, physical therapists and speech-language professionals use evidence-based practice and clinical reasoning in the purposeful manipulation of equine movement to engage sensory, neuromotor, and cognitive systems to achieve functional outcomes. At NVTRP, we refer to this as hippotherapy (HPOT).

Unlike therapeutic horseback riding (where specific riding skills are taught), HPOT is part of a client's integrated plan of care and exists within a medical model of treatment in which equine movement is a treatment tool/strategy applied by the therapist.

A horse leader and sidewalkers are almost always required to assist the therapist and client in HPOT sessions.

Military Service Personnel:

NVTRP offers special sessions for recovering military service personnel. We are honored to partner with local military installations to provide EAAT services to active duty service members who are recovering from PTSD and other mental illnesses and substance abuse issues. Patients come from all branches of the military, from across the U.S. and deployments around the world, to work on getting healthy again.

Equine-Assisted Learning (EAL):

EAL combines academics and life skills with horses. These sessions partner with the horse through groundwork. Some examples of goals could be: improving literacy, building communication skills, or learning teamwork all through individualized lesson plans that facilitate goals for the group or individuals. These sessions serve a wide variety of individuals from school groups to corporate teams.

Equine Facilitated Psychotherapy (EFP):

NVTRP partners with Ioana Marcus of Equibliss Psychotherapy to offer individual and group psychotherapy and counseling. Ioana takes an experiential and relational approach, focused on mindfulness and self-discovery facilitated by our equine friends and teachers. The relationship with the horses helps deepen relationships with self, not only in recovery, but way beyond.

Horsemanship:

Horsemanship lessons are unmounted sessions that focus on learning all aspects of horse care and to provide participants with another option for interacting with the horses. Many of the physical, cognitive and emotional goals that participants work on in riding lessons can also be worked on during horsemanship lessons. Volunteers may be needed to assist instructors during these lessons.

Community Lessons:

NVTRP provides an inclusive setting where individuals with and without disabilities build relationships. As part of this culture and to build connections in the community which support our program, a limited number of lessons are available at NVTRP for individuals without disabilities. Volunteers may be needed as spotters in the ring.

VOLUNTEER GUIDELINES/RESPONSIBILITIES

- Volunteers must complete an Intro Training prior to volunteering.
- All volunteers 18 years of age or older must complete a background check.
- We ask volunteers to commit to at least **one weekly shift for an entire session**. Shifts are an average of 2-4 hours depending on the lesson schedule. To provide consistency for our riders and to ensure the care of our horses, please be as consistent as possible
- Volunteers must be at least fourteen (14) years of age.
- Volunteers must be physically fit to walk and jog during a 50 minute riding lesson in arena footing, lift at least 50lbs., move over uneven footing and work in all weather.
- All volunteers are trained to assist our riders in lessons as a sidewalker and assist with barn chores when not in lessons. To lead horses in the barn or in lessons, volunteers must meet all required criteria and attend a separate horse leader workshop.
- Please wear sensible clothing and shoes around horses. **Close-toed shoes are required**. Shoes or boots that are high around the ankle will help to keep your feet dry and arena gravel out of your shoes. Avoid dangling jewelry.
- We still need your help with horse care during inclement weather. If you can safely make it to the barn please plan to attend your regular shift.
- Please log your hours every time you volunteer. Volunteer hours are tracked and used for grant proposals and in our financial statements.
- Our activity site is a farm and as such there are natural and man-made hazards including but not limited to flies, ticks, poisonous plants, uneven surfaces, vehicles, and equines. Every effort is made to ensure your safety, but please take reasonable care while at the farm.
- All information about participants, volunteers and staff is **strictly confidential**.
- Throughout the year there will be periodic rehearsals of our emergency drills/procedures. In case of emergency, follow the direction of the instructors and staff.
- We encourage cell phones to be kept out of the riding ring during lessons. If you must keep your phone on you, turn off all rings and other notifications (including vibrate) while working with clients.
- During lessons, sidewalkers must remain with their client **AT ALL TIMES**. If you need to step away, please let the instructor or therapist know beforehand.
- There is an AED Emergency Defibrillator located in the NVTRP office.
- Staff dogs are the only ones allowed on property with the exception of working service animals.
- There is **NO SMOKING** on the property.
- No firearms, drugs or alcohol allowed on premises.

WORKING WITH CLIENTS WITH DISABILITIES

Riding is empowering. Individuals have the opportunity to participate in an awesome activity, and you support the clients in their experience.

- Be patient, let the client set his/her own pace walking or talking; if you cannot understand a person's speech, it is ok to say that you do not understand and would like for them to repeat it for you.
- Be interested in the clients as individuals. Do not make up your mind about a person with a disability ahead of time. Be open to the amazing gifts that each individual brings to the world.
- Offer assistance when asked (wheelchairs, walking, etc.) or when obviously necessary. We encourage independence as much as possible and do not want to hinder progress by over-helping. When a client falls down, he may wish to get up by himself, just as a client who is blind may prefer to get along without assistance.
- When working with clients who are hearing impaired, face them when speaking so they can read your lips. Speak naturally, but slowly. Expressions and gestures will help with communication. Do not surprise clients who are hearing-impaired from behind.
- When working with a client who is visually impaired, speak to them on approach and identify yourself. Let them know when you are leaving. When assisting, let them take your arm and advise them of obstacles such as steps, corners, etc.
- Enjoy yourself and be yourself -- your friendship with the client will grow. Talk about the same things as you would with anyone else. The client's philosophy and good humor will give you inspiration.



SIDEWALKING



The sidewalker is responsible for helping the client maintain his/her safety, position and balance while following instruction during the lesson. The number of volunteers and degree of assistance is determined by the needs of the client, safety and other factors.

Our overall goal is to foster as much independence as possible while maintaining safety. The instructor/therapist will advise you on how to aide each client and what physical support is needed for the client (see next page for holds). Please ask questions before and after the session about how you can be most effective.

If there are two sidewalkers with a client, only the volunteer on the inside of the ring will speak and reinforce the instructor/therapist's directions. Direction from too many sides may confuse a client. Your task is to keep the client's attention directed toward the task at hand and the instructor/therapist.

Sidewalkers must be constantly aware of the client and what he/she is doing. Watch for signs of fatigue, illness, muscle cramps, behavioral problems, or seizures. If you notice a problem, ask the leader to take the horse to the instructor/therapist and explain the issue.

The safety of the client is the first and foremost responsibility of the instructor/therapist and volunteers. Keep this in mind during all phases of the session. We would rather stop the lesson and correct any problem than risk injury to clients, volunteers or horses. Look to the instructor/therapist for directions in case of any emergency.

Feel free to give encouragement and praise as appropriate but be mindful not to distract the client or interfere with the instructor/therapist's control of the lesson. Help to keep the client's attention directed toward the task at hand and the instructor/therapist.

HORSE LEADING

Leading horses around the farm and in EAAT sessions is a very rewarding experience, but also a serious responsibility. Even best trained horses can be unpredictable, which is why here at NVTRP we have a special process for selecting and training our horse leaders. Potential horse leaders must turn in a Horse Experience Questionnaire (available online) and successfully complete a Horse Leader Workshop.

It is not in our mission to train people to lead horses; however we want to help you build your horse experience and reach your horse leading goals. Continuing education opportunities will be available as time permits within our session schedule.

SIDEWALKING HOLDS AND POSITION

HOLDS

You may be asked to do a variety of holds as a sidewalker to help your client balance on the horse.

ANKLE/HEEL HOLD



ARM OVER THIGH HOLD



SPOTTING

While spotting, your main job is to support the client in following the instructor's direction during the lesson and ensure the client is maintaining a safe distance from other horses (at least two horse lengths).

POSITION WHILE SPOTTING



BARN CHORES AND HORSE CARE

When not assisting riders in lessons, volunteers at NVTRP may also help with caring for our wonderful horses and farm.

The types of tasks that you will be asked to assist with include, but are not limited to: feeding, grooming, tacking, mucking stalls/pastures, and filling water troughs.



VOLUNTEER INPUT



Many volunteers offer helpful ideas and suggestions or compliments, which are always welcome. You are an important part of our program and can help us to improve.

If you have noticed something that we have missed, please make suggestions to a staff member or instructor. We are all working toward the same goal for our clients and can do this best when we work together.

EMERGENCY PROCEDURES

Falls

There is always the possibility of a fall. If one seems likely, you can catch your client, perform an emergency dismount or help break their fall. Remember to keep yourself safe as well. If your client falls, remain CALM in order to keep the horses and clients calm. The leader will remove the horse and your job is to stay with your client and do not move them. Do not attempt to move a client that is on the ground. Get the attention of the instructor/therapist. The instructor will make an assessment to determine the next step. In most cases, the client gets back on a horse.

If a different client falls, try to divert the attention of your client so they will not become alarmed. This is a great time to interact with your client and play a game of horse trivia or whatever is appropriate for your team. The leader should get in front of horse and hold its head. All other horses and clients should halt and wait for further instruction. Remember to stay calm. The horse leader is responsible for the horse and the sidewalkers are responsible for the client.

Human Injuries

All of our instructors are CPR/First Aid certified. Emergency contact information is located in the carport (entrance to NVTRP office). There is an AED in the staff office.

Call 911 in case of any severe human injury/emergency and notify the staff member on site and parents as soon as possible.

Mounted Emergency

In case of emergency involving a mounted client, the leader will stop the horse and immediately secure it by holding the horse's bridle. The sidewalkers are responsible for the client and are to maintain the client's position on the horse. The instructor/therapist will be in charge of dismounting the client as appropriate, or instructing the sidewalkers to dismount the client if necessary.

Uncontrolled Horse

If an emergency arises with a horse, the leader should make all attempts to control the horse. If the horse is running away, a sidewalker should remove the client from the horse immediately and secure the safety of the client on the ground.

Equine Injury

Notify a staff member as soon as you notice an injury or unusual behavior in any of our herd.

Fire

In case of a fire, notify staff immediately. Call 911 as soon as possible. Staff will be responsible to lead horses from a stable and move them to a safe and secure area such as a paddock or pasture away and upwind from the fire. At no time should a human endanger their life to save horses or equipment. If possible, use a fire extinguisher to put out or minimize the fire. All people will be directed to the playground area.

Extreme Weather

In case of a flood, hurricane, earthquake, or other natural hazard, the horses should be turned out by a staff member and all electrical equipment unplugged. Extra water is kept in containers in case of a loss of water after the event. Flashlights are kept in the feed room in case of a loss of power. If severe weather is forecasted, it is at the instructor's discretion to cancel lessons. Volunteers may be advised to stay home, but if they are here, they will be directed to the **office, basement or to meet in the playground area.**

Other Emergencies

The instructor/therapist is responsible for providing or summoning proper assistance and/or emergency care to students and horses as necessary. In the event of incapacitation of the instructor/therapist, the staff member on site will make an assessment and designate a responsible person to summon proper help.

Incident Report

An incident report will be prepared and filed for every incident including: falls from mount, injuries sustained by any participant, volunteer, or staff, regardless of severity. The instructor/therapist is responsible for filing all incident reports. The incident shall be submitted to the Program Director and then filed in the appropriate place.

Accidents that occur during other Program activities such as workdays shall also be recorded by filing an incident report. The staff person in charge of the activity shall be responsible for filing the report.

<i>Where to find it...</i>	
Fire Extinguishers	Feed Room, Tack Room, NVTRP Office
Emergency Phone/Numbers	Carport - Volunteer Nook (Numbers are also posted in the Tack Room)
Human First Aid	Feed Room (on the shelf to the right), NVTRP office
Equine First Aid	Feed Room (tall metal cabinet on right side)
AED	NVTRP office

WEATHER

**NVTRP is open 7 days a week 365 days a year
– rain or shine, sleet or snow.**

Although sessions may be canceled, your shift is still going on. If you can safely make it to the farm, please come and help care for the horses!



NVTRP TACK

Each horse has their own set of tack that includes a saddle, specialty pad, square pad and girth located on the right side of the tack room and their own bridle located on the left side of the tack room. The instructor will post any changes to the tack being used or if specialty tack is needed. Some of the tack used is non-traditional. See below for pictures.

SQUARE PAD



SPECIALTY OR MATTES PAD



LEAD-LINE SADDLE



SINGLE-HANDLED SURCINGLE



BAREBACK PAD



WESTERN PAD



Contact Information:

For information on NVTRP programs, donations, and merchandise:

NVTRP Office (703-764-0269 or office@nvtrp.org)

For cancellations/scheduling, records of your hours, event volunteering, paperwork, horse leading and any other volunteer-related questions:

Volunteer Coordinator Shelby Morrison (703-239-3635 or smorrison@nvtrp.org)

For volunteer lessons and other riding program questions contact:

Program Director Olivia Taylor (571-314-0383 or otaylor@nvtrp.org)

Need to Cancel?

We hope that you will always be able to make your shift, but we understand that you may have other commitments from time to time. Please indicate what days you plan to be away on your Availability Sheet each session or email smorrison@nvtrp.org.

If you have to cancel, contact the Volunteer Coordinator Shelby Morrison at least 48 hours in advance. This will give our team time to find a sub to cover your shift. (703-239-3635 or smorrison@nvtrp.org) If you do not cancel, we will be expecting you at your regular shift.

Last Minute Cancelations:

Please only cancel last minute (within 12 hours of your shift) in case of an emergency. Because we are not always able to find a sub for last minute cancelations, it could result in a client not being able to ride that day. Cancelations within 2 hours of your shift will be considered a no show.

Subbing:

You are not required to sub, however if there are times that you are free to help out covering for other volunteers that are out on vacation, sickness or other reasons, it is greatly appreciated. Indicate on your Availability Sheet which days you can sub or email smorrison@nvtrp.org.

The Volunteer Coordinator will contact you regarding particular shifts and sessions based on the days that you mark. Subs for sessions should arrive 15 minutes prior to the start time.

Subbing is considered an additional volunteer time, and you will still be expected at your regular shift unless you make different arrangements with the Volunteer Coordinator. Please contact the Volunteer Coordinator with additional subbing questions.

Understanding the Impact of Therapeutic Riding

(source www.pathintl.org)

The benefits of animal-assisted activities and therapies have been recognized for a long time, but the specific benefits of interacting with horses may be less well known. Working with horses can have a major physical and emotional impact on people with a wide variety of issues and disabilities. Some (but not all) issues and disabilities for which equine-assisted activities and therapies (EAAT) are useful are listed with supporting evidence where available.

Amputations

People who have experienced an amputation can be successful riders. Many para-equestrians have successfully competed with an amputation. Professional Association of Therapeutic Horsemanship International (PATH Intl.) centers are experienced in creating adaptations in equipment to accommodate for people with amputations of upper and lower extremities.

Borges de Araujo, Araújo, Santana, Lopes & Franck (2006) studied the use of hippotherapy as a physical therapy strategy to improve postural steadiness in patients with lower limb amputations. Data were gathered using a platform sensor F-Mat connected to a computer before the first physical therapy session utilizing hippotherapy and after the 20th session. Results from the three participants indicated increased speed and distance post treatment.

Attention Deficit Disorder

Children with attention deficit disorder (ADD) or attention deficit hyperactivity disorder (ADHD) have difficulties with attention and self-control of behavior. Horseback riding requires attention to the instructor and the horse. Children who participate in a riding program will be taught sequential steps for learning to control their horse and becoming more independent. Riding lessons can be modified in length to accommodate for decreased attention span in the beginning of the program.

Autism

Children and adults with autism participate in a variety of PATH Intl. center programs including riding, driving, vaulting, hippotherapy, and equine-facilitated psychotherapy (EFP). Both equine-assisted activities such as riding or vaulting and equine-assisted therapy such as hippotherapy or psychotherapy can impact the life of a person with autism.

Bass, Duchowny, and Llabre (2008) studied children with autism participating in a 12 week therapeutic horseback riding program. Two instruments were used to measure social functioning before and after the intervention: the Social Responsiveness Scale (SRS) and the Sensory Profile (SP). They found the children with autism who participated in the therapeutic horseback riding program improved in sensory integration and directed attention as compared to the control group.

Macauley (2007) studied children with mild, moderate and severe autism participating in a 10 week speech therapy session using hippotherapy. The children were evaluated using the Childhood Autism Rating Scale (CARS) as well as attention to task and number or session goals met. All children showed progress on at least one of the following four CARS subtests: relating to people, listening behaviors, verbal communication and nonverbal communication.

Brain Injuries

People with brain injuries can experience multiple symptoms related to their injury. They may participate in a variety of programs depending on their abilities and goals. People with a brain injury who are seeking to pursue a new recreational outlet may benefit from riding or driving programs. Participants develop skills needed to direct their equine partners through obstacles, cones courses, or on trail rides.

Cerebral Palsy

People of all ages with cerebral palsy may enjoy interacting with horses. Children can learn a sport such as riding to share with their peers. Adults may treasure riding as a life long leisure activity. Horseback riding requires skills including good posture, coordination, and balance to direct the horse. Riders with cerebral palsy may progress from riding with sidewalkers to riding independently. Some people with cerebral palsy may prefer to learn carriage driving and may even be able to drive from their own wheelchair in a specially designed carriage.

A large amount of research in equine-assisted therapy has involved children with cerebral palsy. Shurtleff, Standeven, & Engsberg (2009) measured head and trunk stability changes in children with cerebral palsy after 12 weeks of hippotherapy treatments provided by an occupational or physical therapist. The research team used a motorized barrel and video motion capture to challenge and measure the changes in motor control. The children showed very significant improvements in control of their trunks and heads at the end of the intervention period and maintained improvements after a 12 week period without treatment.

Cerebrovascular Accident/Stroke

People who have experienced a cerebrovascular accident (CVA) or stroke may experience challenges from deficits resulting from the area of the brain affected by the stroke. Examples of deficits include loss of the use of a limb such as an arm/hand, difficulty finding or understanding words, or balance problems. PATH Intl. centers offer a variety of programs to work with these challenges and those who have had a CVA may benefit from an enjoyable physical activity involving horses. They can learn to ride or drive with one hand or may use an adapted rein on their weaker side. Riding in a group is a great shared social experience as well as opportunity to interact with horses.

Deafness

People who are deaf or hard of hearing may experience improved self-esteem and a sense of independence and empowerment by becoming an independent equestrian. People with hearing impairments will develop unique ways to communicate with their instructor and equine partner while learning riding or driving.

Developmental Delay/Cognitive Delay

PATH Intl. centers are able to provide a variety of recreational programs that reflect personal preferences and choices for the person with developmental delays. Learning horseback riding skills includes leisure and recreational activities alone and with others, riding socially with others, taking turns, extending the time of the riding lesson and expanding one's repertoire of skills towards independent riding. Some persons may choose to compete in programs such as the Special Olympics.

Down Syndrome

Children and adults with Down syndrome may participate in equine-assisted activities or equine-assisted therapy if atlantoaxial instability (AAI) has been ruled out with current x-rays and/or the participant has no signs or symptoms of this condition per their physician.

Champagne and Dugas (2010) provided 11 weeks of hippotherapy to two children with Down Syndrome and measured changes in postural control. The Gross Motor Function Measure (GMFM) and accelerometry were the instruments used to measure. Improvements in gross motor behavior (particularly walking, running, and jumping) were revealed by the GMFM. The overall accelerometry data demonstrated interesting adaptive responses to the postural challenges induced by the horse.

Emotional Disabilities

Many people with emotional disabilities are able to enjoy equine based programs that promote physical activity and social interaction. PATH Intl. programs are designed for safety and close supervision as well as fun, interesting activities.

Learning Disabilities

Participants in a PATH Intl. program are presented information about riding and driving skills and horsemanship in a variety of methods. People with learning disabilities have the chance to learn through visual, auditory, and kinesthetic methods while learning to ride or drive a horse. They may be motivated to learn more about horses than they are in their school classroom. The horse's response to the aids given by the rider or driver is natural positive reinforcement and helps participants build skills.

Multiple Sclerosis

Therapeutic riding can be a great source of exercise in which people with multiple sclerosis may choose to participate. They can participate in riding within their limits of strength and energy and still enjoy an active recreational activity or sport. Riding may help people with multiple sclerosis stay limber and active.

Silkwood-Sherer and Warmbier (2007) studied the effects of hippotherapy on postural stability in persons with multiple sclerosis. They found that the group receiving hippotherapy (9 adults) demonstrated a statistically significant improvement in balance as measured by the Berg Balance Scale (BBS) and Tinetti Performance Oriented Mobility Assessment (POMA) following 7 weeks of hippotherapy intervention. The comparison group consisting of 6 adults showed no improvement in balance. A between group difference in the BBS scores by 14 weeks was noted, thus suggesting that improvements in the intervention group may have been caused by the hippotherapy treatments. None of the subjects in either the intervention or comparison groups participated in other forms of rehabilitation during the study.

Muscular Dystrophy

People with muscular dystrophy may participate in programs at PATH Intl. centers to keep active while engaging in an enjoyable activity. Riders may start out more independent, but may need more support as their disease progresses. Riding lessons may be tailored to the abilities and stamina of the rider. The PATH Intl. instructor may support their transition to a non-mounted program such as driving or a hippotherapy program as their needs change. This flexibility helps

the person with muscular dystrophy stay active and engaged while coping with changes in their abilities.

Spina Bifida

Participants with spina bifida may participate in equine-assisted activities or therapies at a PATH Intl. center. Prior to participation, the client's doctor will need to carefully screen the participant for concerns such as tethered cord, hydromyelia or Chiari II malformation. Any changes in neurological status must be carefully monitored during participation in riding programs. Learning to ride or a horse may be an empowering experience and allow someone with limited mobility from spina bifida to experience a greater freedom on the back of a horse.

Spinal Cord Injuries

People who have had a spinal cord injury may have varied levels of impairments from sensory loss to quadriplegia. A complete spinal cord injury above T-6 is a contraindication for riding, but would not necessarily prevent a client's participation in other types of equine programs such as driving and unmounted activities. Many people who have had a spinal cord injury may participate in therapeutic riding lessons, carriage driving or may choose an equine-assisted therapy program to address challenges with trunk control or coping with their injury.

Lechner, Kakebeeke, Hegemann, and Baumberger (2007) conducted research to determine the effect of hippotherapy on spasticity and mental well-being of persons with spinal cord injury (SCI). Spasticity was measured by the Ashworth Scale and subjects' self-rating on a visual analogue scale. Well-being was measured by subjects' self-report on the well-being scale Befindlichkeits-Skala of von Zerssen. The researchers found that only the effect of hippotherapy reached significance for clinically rated spasticity compared with the control condition (without intervention). Immediate improvements in the subjects' mental well-being were detected only after hippotherapy.

Visual Impairment

People who have a visual impairment are able to learn to ride or drive independently and compete in equestrian events. People with visual impairments may participate as part of a vaulting team. Strategies to help people with visual impairments include use of intercom systems with the instructors, learning to count steps/strides, or auditory markers in the arena. These strategies are frequently used at PATH Intl. centers and both instructors and horses are able to accommodate and accept the rider or driver's differences.

References

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Note: Following each reference citation is the type of evidence. In this set of references, the highest type of evidence is a published single research study, followed by a published descriptive report, and then an oral presentation of a single research project. Type of evidence is important and is a factor for consideration for evidence-based practice.

Revised October 2011 by Health & Ed Advisory