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ABSTRACT:

Equine-assisted psychotherapy is one of various uses of horses in a therapeutic setting. The following paper provides an overview of this treatment method in therapy. Appropriate terminology and definitions are provided to clarify differences between equine-assisted psychotherapy and other equine therapies. Research provided shows that this treatment method is highly effective, especially for individuals who do not respond to traditional therapies. EAP can be utilized for a variety of conditions including depression, anxiety, PTSD, trauma, and more. The Equine Growth and Learning Association (EAGALA) model is the basis for most treatments involving EAP and has detailed guidelines and processes for formatting therapy sessions. Overall, equine-assisted psychotherapy is highly effective, however, further studies should be conducted involving larger populations to support EAP as a treatment.
Equine Assisted Psychotherapy: An Overview of the Therapeutic Use of the Horse in Mental Health Settings

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Introduction

“Bonding or interacting with companion animals has been shown to be a useful treatment tool or adjunct for people experiencing distress associated with loss, alienation, trauma, and other forms of disequilibrium (Osborne 299).” Equine-Assisted Psychotherapy is a more recent therapy involving animals to assist individuals with psychological conditions in a less traditional setting. Equine-Facilitated psychotherapy is a technique in social work where the horse is a tool in therapy for people with mental health needs such as anxiety, depression, autism, and more (Masini 30). It was only recognized as a component section of the North American Riding for the Handicapped Association (NARHA) in 1996 (Masini 30). Although it is a growing area, there is still research to prove the effectiveness of EAP as a treatment. The following pages will discuss the existing research, difference between forms of therapy, treatments and varying conditions, as well as details of a hands-on experience at an existing private practice.

Why Horses?

The difference in using equines in therapy as opposed to dogs or cats is that horses are non-predatory animals. Even domesticated, dogs will still possess predatory behaviors, where horses will still exhibit prey instincts and behaviors. Horses respond to incongruence in the environment, and their responses can be observed through cues in their body language. These reactions can be utilized as material for client processing (Thomas 9). Because of this, horses can offer unique opportunities in the therapeutic process that may not be found elsewhere. Horses can also offer extreme sensitivity to the environment and an ability to mirror behavior and emotions of those participating in therapy (Osborne 300). Aside from the horse’s prey
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instinct, horses are big and powerful creatures. This creates an opportunity to overcome fear, build confidence, and gain insight on dealing with challenging situations in life (Thomas 10).

**Definitions and Terminology:**

Horses have been used in a therapeutic setting in many different ways for many different conditions. Often times, consumers do not realize the differences between types of therapy or settings where the horses might be utilized. However, it is extremely important to clarify for billing and insurance purposes, as well as when doctors or other medical professionals are referring clients for services.

Equine-Facilitated or Equine-Assisted Psychotherapy (EAP) is a “specialized form of psychotherapy using the horse as a therapeutic tool.” It is used by licensed mental health professionals to assist clients’ self-esteem, personal confidence, communication and interpersonal effectiveness, trust, boundaries and limit-setting, group cohesion, and much more (Schultz 265). EAP is an approach that can be used with a variety of therapeutic modalities as well as a very diverse client population (Masini 30).

With EAP being focused on mental health or psychological conditions, another form of equine-assisted therapy is hippotherapy. According to the American Hippotherapy Association, hippotherapy is “how occupational therapy, physical therapy, and speech-language pathology 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.” The AHA states that hippo therapy is used as a part of the patient’s integrated plan of care with other treatment strategies. The horse is used to assist in treating specific conditions in a non-clinical setting. The horse becomes a tool in the therapy session to work on core strength,
motor control, balance, posture, endurance, motor planning, receptive/expressive language, sensory processing, and attention (Kuropatkin 34). It is important to note that in hippotherapy, the goal is not focused on the riding. The goal is to improve the skills listed above with the horse as a support. The treatment team includes the speech, occupational, or physical therapist as well as an equine specialist. It is possible for a therapist to become certified and then also fill the role as the equine specialist.

Therapeutic or adaptive horseback riding or horsemanship is one other common form of therapy using a horse. Therapeutic/adaptive horsemanship is where individuals with special needs participate in equine activities as a recreational activity. The individuals may participate in group or private classes that are taught as an adaptive sport. In this type of setting, the focus is actually on the riding, and the participants work to develop their independent riding skills. A certified therapist is not required in this setting, and sessions are run by a certified therapeutic riding instructor (Kuropatkin 33).

These three techniques are the three main types of equine-assisted therapy. There are a variety of cases in which each can be used, but the most common cases with equine-assisted psychotherapy are discussed below.

Conditions Treated:

Equine-assisted psychotherapy can be utilized for a variety of psychological conditions, especially with individuals who have not responded to traditional therapy. Some of the most common conditions include: trauma cases, post-traumatic stress disorder, depression, anxiety, addiction, attention deficit disorders, and eating disorders (Buzel 1).
An example of how one of these disorders could benefit from equine therapy would be in cases of trauma, such as physical, emotional, or sexual abuse, or PTSD. Horses are prey animals that tend to startle easily, which mirrors someone who has been preyed upon by experiencing trauma, who might also startle easily (Buzel 34). In therapy with trauma cases, a main goal is to “lay down new neural pathways that will enable the traumatized person to gain access to more life-promoting strategies (Buzel 35).” The capability of the brain to rewire its neural networks that have been impacted by trauma is what scientists refer to as “neuroplasticity” (Buzel 35). One of the remedies to help with this, is to focus on breathing and keeping calm, which is where the horse can assist. As mentioned earlier, horses tend to mirror emotions. If a client is experiencing anxiety or heightened emotions, the horse may sense this and become heightened as well. A client may work on breathing to calm their horse down, and in the process, calming themselves down and gaining control over their feelings (Buzel 38).

**Effectiveness and Research:**

As equine-facilitated psychotherapy is still a growing field, it can be difficult to find an abundance of statistical evidence to show the effectiveness of equine-facilitated psychotherapy as compared to other types of therapy. However, there is some existing clinical evidence that shows positive effects. An evaluation was conducted in 2007 of a 9-week equine-facilitated program that had 36 youth participants who were all diagnosed with severe emotional disorders. In this program, the youth attended an alternative day school for middle and high school students. The participants completed a self-report, in which their was no significant statistical data found. However, there was also an analysis of qualitative data that included case studies of interviews as
well as observations by teachers and program staff. This analysis showed improvements in self-care, attitudes, openness, and social skills (Bates 33-34).

In another study that focused on children ages 4 to 16 who had experienced intrafamily violence, researchers used the Global Assessment of Function scale to assess changes before and after participation in therapy sessions. This included 63 children who were referred over an 18 month period of time. Positive results were found with reductions in psychological distress and enhancements in psychological well-being. The improvements noted were still consistent in a 6-month follow up (Bates 34).

**Methods**

**The EAGALA Model**

The Equine Growth and Learning Association (EAGALA) was founded in July of 1999. It was founded on the basis that horses can be “a powerful and effective approach to helping people in the mental health arenas (Masini 31).” This model is the basis of equine-assisted psychotherapy sessions, and has four key components. The first is the team of two that facilitate every session. All EAGALA sessions are facilitated by one certified mental health professional and one certified equine specialist. The mental health professional may be a Licensed Professional Counselor, someone with a Master’s degree in social work, or some other similar profession. The equine specialist is an individual who has had ample experiences with horses and has been trained through the EAGALA certification program (Thomas 58).

The second component is that sessions involve no actual horseback riding; something that sets it apart from hippotherapy or therapeutic riding. All therapy is conducted on the ground so that horses may act like themselves and not in a certain way, just like the clients do. The focus
can then be on the client’s self-discovery or the building of a relationship with the horse, where
as with mounted sessions, the focus needs to turn to the skills needed to control the horse
(Thomas 58). Mounted therapy would add another level of physical and emotional risk as well
(Thomas 59).

The third key component of the EAGAL model is ethics. The code of ethics gives the
EAGALA model its credibility in the therapeutic world. To summarize, essentially the code of
ethics acknowledges that professionals working in the EAGALA and EAP field work with clients
at a vulnerable time in their lives. “In working with horses, the clients’ vulnerabilities tend to
become equally exposed. Therefore, it is the utmost duty to provide the highest quality of care in
supporting the overall health and well-being of both the clients and horses, and maintain the
highest level of professionalism in practice and work (Thomas 60).”

The fourth key component of the EAGALA model is that is solution oriented. The model
emphasizes that “the clients always have the best solution (Thomas 66). Facilitators keep out of
the way and do not instruct how to accomplish tasks or give solutions. The goal is for clients to
form their own methods for problem solving. This might mean that the clients fail in their efforts
at times, but this allows for a learning process. Lynn Thomas, founder and CEO of EAGALA,
notes in her book, *Transforming Therapy Through Horses*, that several things can happen when a
facilitator intervenes too much: the client might step back and allow the therapist to lead or
abandon their own ideas, both being a detriment to the client’s healing process (Thomas 66).

**EAGALA Session Structure:**

When facilitators are structuring an EAGALA session, they set it up with the
understanding that the EAGALA model is not about setting up an activity for the sake of an
activity, but rather for the process and purpose (Thomas 150). There are several key principles for structure that Lynn Thomas mentions in her book: metaphor, self-distancing, and using the art of improvisation.

The idea with metaphor is that everything in the arena and session can represent something in the client’s life. This way the client can create a symbolic representation of what is happening in their life to help better themselves through the therapeutic process (Thomas 150). To attain this concept of metaphor, the activities are merely structured around the client’s goals and generally fall into four different categories: observation, relationship, movement/no movement, and creating (Thomas 151). An observation activity is one that merely involves watching the horse, which allows the client to project meaning onto the situation. Through this projection of feelings or meanings, they can view aspects of their life from an outside perspective (Thomas 151).

A relationship activity is an activity in which the clients spend time with the horse to develop a relationship, which can reveal the different ways they may act in relationships with others in their life (Thomas 151).

A movement or no movement activity can help with change and transition or working towards a goal in the client’s life. The different directions of movement toward or away from something can reflect fear or confidence in different areas of one’s life in a metaphorical form (Thomas 151).

A creating activity involves the component of physically building something or creating physical representations with props and/or horses. This can be a way for clients to express concepts or feelings that are difficult for them to put into words or understand (Thomas 151).
Aside from metaphor, self-distancing is another key principle of structure in the EAGALA model. Since everything in therapy is encouraged to be a representation of an aspect of the client’s life, the facilitators and clients process these symbols “through the horse.” In other words, the focus is on the experience with the horse and the space, not the clients themselves. An example provided would be instead of saying, “There was a moment when you picked up a rope and put it on the horse,” one might say, “The rope went on the horse.” This keeps the focus solely on the horse and process (Thomas 155).

The last important structural principle mentioned is the use of improvisation. Although there are specific goals within the session, it is the facilitators' job to allow the session to flow wherever the horse and clients might take it. As previously mentioned, the facilitators do not want to block the clients’ ideas or prevent them from taking the lead. Although this seems like a simple concept, this is actually a concept that is focused on in EAGALA training to help facilitators develop the best skills to accomplish this while facilitating a successful session (Thomas 156-157).

**Personal Experience at Hope Reins:**

To gain a better understanding of the therapeutic process and the EAGALA model, I visited Hope Reins, a private practice therapy farm in Hampshire, IL. Hope Reins offers Equine-Assisted Psychotherapy based on the EAGALA model for individuals and groups of a variety of ages and conditions. To respect client confidentiality, I was unable to observe real client-counselor therapy sessions. However, as part of professional development, the staff will put on mock therapy sessions with the horses to practice different activities. I was able to actively
participate in a therapeutic activity as if I were a client in a small group session. Two other staff participated with me while two of the staff facilitated the session.

The session was facilitated by one Equine Specialist and one Certified Mental Health Professional, who has a Master’s degree in social work. To begin the session, we gathered in the office area and each wrote down personal or group goals that we were interested in working on for the day. We then shared our goals, to whatever degree with which we were comfortable, with the group. The mental health professional picked a common theme of “building confidence” from all of our goals. We then went into the arena, where five horses were roaming freely. The mental health professional explained that we would be doing a “create” and “movement” activity. She explained that with the EAGALA model, there are four different categories of activity: Observation, Creation, Movement, and Relationship, which are previously described. She then showed us the “prop room,” an area off of the arena that was filled with cones, poles, jumps, and much more. She told us that our task was to “build confidence” at one end of the arena and then get to confidence in whatever way we wanted, and that we must involve the horses. The task was left very open ended so that we, as participants, could interpret it in whatever way we needed.

The three of us were able to discuss how we wanted to proceed. We determined that we would together build our “confidence structure” in which we would ultimately try to get the horse to stop and stand. We created this by forming a semi-circle out of large plastic barrels. Then, each individual selected and created one obstacle of their own to create a course for the horse to go through. This gave each individual time to select a barrier or obstacle that may be a symbolic representation of something in their life, perhaps a personal obstacle. This
demonstrated the metaphor principle described earlier. One participant, for example, selected four traffic cones that were placed in a line approximately three feet apart. This was for the horse to tightly weave in and out of and may have represented some situation or time in their life when they’ve felt many “abrupt turns” or “unexpected twists” that may have been difficult to get through; however the individual was not asked to discuss this, which maintains the self-distancing principle. The next obstacle was a path to walk through created out of poles laying on the ground, and the final obstacle was a jump the horse would need to go over.

The next decisions to be made were whether or not the horse would be haltered and led, or if we would simply try to direct the horse without any kind of physical rope attached. We had to select a horse to use, and lastly we had to decide if there were any other limitations we wanted to place (ex: not touching the horse, no speaking, etc). Throughout the next 20 minutes or so, we worked as a team to get the horse to walk through the obstacles and into our “confidence circle.” The task was not as easy as it may seem, and compromises had to be made. There were moments when the horse would turn and run the other direction, and there were times when other horses would stand in the way. At one point, another horse stood in the entrance of our “confidence circle” and blocked the entire entrance. In our follow up discussion, we decided to refer to her as the “confidence blocker.” Again we did not specify what specifically might be blocking our own confidence, but this horse might represent whoever or whatever that is in our lives.

By the end of the activity, we did get the horse through the entire course, but there were several bumps in the road. The facilitators asked us to determine whether or not we felt successful in what we’d accomplished; we all agreed that we felt that the result was fine, but that
we could have been more successful and had lowered our expectations along the way. The rest of the session was used to talk about what we had experienced while observing the horses, who were still roaming freely. We were able to observe how their behaviors changed, what they might be feeling, and why.

One of the things that our facilitators explained, which she would not during a typical therapy session, was the facilitators’ role in the session. She explained that she and the equine specialist kept their distance from us and merely observed so that they would not interfere with our connection with the horses. The other important thing she explained was the importance of using “clean language” when discussing the results after the activity. “Clean language” refers to keeping any observations or comments completely neutral and uninterpreted. Therapists may comment on things that have occurred, but must do so in a way that leaves the actual intentions open for the client to interpret. An easy example to visualize might be if one horse chases another horse away from an obstacle, an incorrect statement would be “Wow, that other horse is being a bully and scared her away!” Instead, a therapist might say, “Did you notice how that white horse moved another direction when the brown horse approached her? Why do you suppose that is?” This type of statement leaves the interpretation up to the client, and can be an opportunity for the clients feelings from their own situation to come out in another form. This explanation and example again seem to line up with the text’s definition of self-distancing and keeping the focus on the horse instead of the client.

The experience at Hope Reigns was an extremely positive one and seemed to completely accurately represent everything that the text stated about EAP and the EAGALA model.
Conclusion

Equine-Facilitated psychotherapy is one of the younger forms of equine-assisted therapies, but it is gaining popularity. Although there is still limited research, the studies that do exist show the effects to be extremely positive; this supports that the use of horses can be highly beneficial as an alternative form of therapy. Future studies would be beneficial and should include larger populations for more reliable statistics. Studies surveying a greater diversity of conditions would also help to show the effectiveness. The therapeutic process of EAP is one that is very open ended, but does have strict regulations on the requirements to facilitate and structure the sessions. There are many wonderful resources to help individuals gain a better understanding of the process and model, but a hands on experience can be truly eye opening to the effects and structure of this remarkable therapy.
Right: Attempting to get our selected horse into our “confidence” circle.

Left: Working to get our selected horse to cross over one of our obstacles to get to “confidence”.

Left: Taking a break to discuss a new plan to accomplish our goal.
References:


http://web.a.ebscohost.com/ehost/resultsadvanced?