Therapeutic Riding: An Educational Tool for Children with Disabilities as Viewed by Parents

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Abstract

The purpose of this research was to examine the perceived benefits that therapeutic riding has on children with disabilities through the eyes of their parents. The results indicated that there are noted changes in children who are in these types of programs. The results also showed that children developed a great deal of self-esteem working in these programs. They also learn to follow directions to the fullest working around the horses. It was perceived that children learn better socialization skills through interaction with horses. All of the parents believed that the children have to deal with social skills working within the program. Parents believed that they would like to see therapeutic riding in some way a part of the school curriculum or have an option to be able to use these programs. The parents stated that they felt very strong about the collaboration that is involved in keeping and building an effective learning environment within the therapeutic riding centers. Overall it was perceived that Therapeutic Riding could serve as a mechanism for the development of children with disabilities.
Introduction

Riding horses by individuals with disabilities has been around since the time of the ancient Greeks. Even during that time, it was recognized that riding was more than a means of transportation; but a way of improving the health and well-being of people with a disability (North American Riding for the Handicapped Association, 2000). In England during the early 1900’s, it was acknowledged that riding for people with disabilities was a beneficial form of therapy. During this time, riding therapy for wounded soldiers was offered at the Oxford Hospital during World War I. British physiotherapists were exploring the possibilities of riding as therapy for all types of disabilities by the 1950’s. In 1969, the British Riding for the Disabled Association (RDA) was founded with the enthusiastic support of the Royal Family (North American Riding For The Handicapped Association, 2000).

At the 1952 Helsinki Olympic Games, Liz Hartel brought attention to riding for people with disabilities when she won the silver medal for Dressage, despite being partially paralyzed in both legs from polio (Crawley & Cawley, 1994). Riding for people with disabilities began as a form of recreation in the United States, but as it evolved, therapeutic riding became a means of motivation for educators to use for the purpose of encouraging self-esteem in youth with challenges. In 1969, The North American Riding for the Handicapped Association (NARHA) was founded to serve as an advisory body to the various “riding for people with disabilities” groups across the United States and its neighboring countries. The organization provides safety guidelines and training, certifies therapeutic riding instructors, accredits therapeutic riding centers according to its own high standards, disseminates information, and offers low-cost insurance to its member organizations (North American Riding For The Handicapped Association, 1995).

Riders with disabilities today display their remarkable accomplishments in national and international sport riding competitions. Hippotherapy (physical therapy on horseback, using the horse as the therapist) has developed as a medical field recognized by most major countries. Medical doctors, psychiatrists, physical and occupational therapists, speech therapists, recreation therapists, and teachers all refer patients and students to riding programs for people with disabilities. Riding for people with disabilities has become a well-recognized and acclaimed method of improving the lives of those who refuse to let their disabilities limit them (Crawley & Cawley, 1994).

To be productive in today’s world, children must learn not only problem solving skills, but also how to positively interact with their peers and adults. Professionals in the mental health and educational fields have identified therapeutic horseback riding as one method in working with children to redirect negative behavioral patterns, build self esteem, and develop social skills (Fischbach, 1999). Improved balance is one way Therapeutic Riding can benefit a student. As the horse moves, the rider is constantly thrown off-balance, requiring that the rider’s muscles contract and relax in an attempt to rebalance. This exercise reaches deep muscles not accessible in conventional physical therapy. Stretching of tight or spastic muscles is also a good benefit. Sitting on a horse requires stretching of the adductor muscles of the thighs. Decreased spasticity is also a problem that Therapeutic riding could
help control. Spasticity is reduced by the rhythmic motion of the horse. The warmth of the horse may aid in relaxation, especially of the legs. Sitting astride a horse helps to break up extensor spasms of the lower limbs.

Sensory integration occurs when riding stimulates the tactile senses both through touch and environmental stimuli. The vestibular system is also stimulated by the movement of the horse, changes in direction and speed. The olfactory system responds to the many smells involved in a stable and ranch environment. Vision is used in control of the horse. The many sounds of a ranch help to involve the auditory system. All of these senses work together and are integrated in the act of riding. In addition, proprioceptors (receptors that give information from our muscles, tendons, ligaments and joints) are activated, resulting in improved proprioception.

Building a good educational base for these students is very important and Therapeutic Riding may aid the student’s ability to learn. Reading is one major area Therapeutic Riding can aid. Remedial Reading is a basic skill everyone needs. Before one can read, it is necessary to recognize the difference in shapes, sizes, and even colors. These can be taught more easily on horseback, as part of games and activities (Fischbach, 1999). Remedial Math is also a basic skill needed. Counting is learned by counting the horse's footsteps, objects around the arena, or even the horse's ears and legs. Number concepts are gained as the rider compares the number of legs on a horse to the number of his own legs. Addition and subtraction are taught through games involving throwing numbered foam dice and adding or subtracting the numbers, with the concepts being taught through games, resistance to learning is decreased (Fischbach, 1999).

Motor skills are also enabled through Therapeutic Riding. Sequencing, patterning and motor planning help students organize their daily activities. Something as simple as holding and using a pencil requires a great deal of motor planning. Knowing which comes first in a sequence of events is an important part of most activities. These and other similar skills are taught on horseback through the use of obstacle courses, pole bending, drill team, and many other games and activities. Improved hand-eye coordination greatly improves. Hand-eye coordination is necessary for such skills as writing. These skills are taught in tacking the horse, as well as various activities and exercises (Fischbach, 1999). Visual/spatial perception improves with the use of therapeutic riding. This includes awareness of forms and space, and understanding relationships between forms in the environment. Socialization is also aided through therapeutic riding. It is shown that students with negative social skills have difficulty developing positive relationships which in time leads to poor self-esteem and negative behavior. When their behavior becomes unmanageable in a regular school classroom, the students are placed in a day treatment class. There, they are challenged to redirect their negative behavior pattern which impedes their learning process (Fischbach, 1999).

Teachers reported significant improvement of students’ behavior and attitude during therapeutic riding classes (Crawley & Cawley, 1994). Their sense of pride and accomplishment was obvious during the session. The students’ motivation to ride provides incentive for positive behavior in the classroom.
Problem Statement

Dealing with children with physical and learning disabilities can be a tremendous task for the educational system. Developing a program that does more than fill a child’s day is a goal educators face. Educators must seek new avenues for students to become more independent in their daily lives, a task which therapeutic riding could serve as a solution. There has been a limited amount of research done on therapeutic riding. This study will analyze the benefits of therapeutic riding as perceived by the parents of children enrolled in a therapeutic riding program.

Conceptual Framework

The conceptual framework for this study is built upon the concept of Inclusion. Inclusion is a philosophy that brings students, families, educators, and community members together to create schools and other social institutions based on acceptance, belonging, and community (Bloom, Permutter, & Burrell, 1999). The concept of inclusion seeks to “establish collaborative, supportive, and nurturing communities of learners that are based on giving all students the services and accommodations they need to learn, as well as respecting and learning from each other’s individual differences” (Salend, 2001, p. 5). Inclusion is built upon four major principles: Diversity, Individual Needs, Reflective Practice, and Collaboration.

Diversity improves the educational systems for all students by placing them in general education environments regardless of race, ability, gender, economic status, learning styles, ethnicity, cultural background, religion, family structure, linguistic ability, and sexual orientation (Salend, 2001). Therapeutic riding provides a mechanism that allows students to be mainstreamed into general education environments to a certain extent, while simultaneously recognizing the students’ individuality.

Individual Needs involves sensitivity to and acceptance of individual needs and differences (Salend, 2001). Therapeutic riding is an educational tool designed to develop the physical, social, and cognitive skills of students, thus, recognizing their individual needs.

Reflective Practice insist that educators reflect upon their attitudes, teaching and classroom management practices, and curricula to accommodate individual needs (Salend, 2001). Therapeutic riding provides a mechanism that if incorporated into public school curricula, would require all teachers who instruct special needs students to reflect upon their pedagogical practice.

Collaboration involves groups of professional educators, parents, students, families, and community agencies working together to build effective learning environments (Salend, 2001). In order for a program such as therapeutic riding to work effectively, parents and school officials would have to collaborate in order to create a high quality educational experience.
Purpose and Objectives

The purpose of this research study was to evaluate the effectiveness of therapeutic riding as an educational benefit for students who are mentally and physically challenged. In order to accomplish the purpose of this study, the following objective was developed:

1. To determine the effectiveness of a therapeutic riding program as viewed by the parents of youth with disabilities enrolled in a therapeutic riding program.

Methodology

The populations for this study were the parents of children enrolled at the Kopper Top Life Learning Center (Therapeutic Riding Center) in Gibsonville, North Carolina. The parents that took part in this study ranged in age from 30 - 45 years of age, and held occupations in such fields as education, construction, and the service industry. For this study, ten parents, representing five children, were randomly chosen from an analysis of clientele records with the assistance of the riding center director. University protocols in relation to research were adhered to in this study.

This study utilized a qualitative interpretive case study to accomplish the stated objective. The development of an interpretive case study begins with the establishment of a theoretical framework, followed by a set of questions to be answered by the research. The way the questions are framed and what they seek to know are influenced by the epistemological orientation of the researcher, how the researcher sees the world and the acquisition of knowledge. This is in part a reflection of the researcher’s professional discipline and a review of its body of literature. With the researcher’s focus established, the framework then addresses the problem to be investigated by the study, what is known about the topic, what is not known, why it is important to know it, and the specific purpose of the study. Because interpretive research is inductive, leading to constructs, hypotheses, and theory, it is sometimes confusing to think of it as also beginning from theory (Merriam, 1988). However, theory is present in all qualitative studies because no study could be designed without some question being asked explicitly or implicitly. The phrasing of a question and the development of a problem statement reflect a theoretical orientation. Even case studies which generate theory grounded in the data of the study itself are not conducted in a theoretical vacuum, but contain a “complex process of induction and deduction, guided by prior theoretical commitments and conceptual schemes (Schwandt, 1993). Insights that form the basis of grounded theory can come from existing theory, personal experience, and the experience of others (Merriam, 1988).

The interview schedule, which consisted of five questions and one lead-in question, was developed from a review of related literature concerning therapeutic riding. Interviews were recorded and transcribed verbatim and copies where given to the special education teachers interviewed for their approval. Respondents were insured confidentiality at the beginning of the interview session and were given a disclosure statement to review and sign, which was approved by the university’s human subjects committee. The interviews took
place in early February of 2003 in the Agricultural Education program of North Carolina A&T State University, and consisted of a focus group format.

The interviews accomplished the following tasks: Interviews with the parents gave a perspective of the child before starting the program and how the child progressed during participation in the therapeutic riding program. In order to record the responses, video taping was conducted. In all cases any video recorded material was erased and no names were used in the study to protect the confidentiality of the parents, and most of all the children under study.

Triangulation was the case study method used to gauge the validity of this study. Triangulation is a technical term used in surveying and navigation to describe a technique whereby two known or visible points are used to plot the location of a third point. Triangulation is the process of using multiple data collection methods, data sources, analysts, or theories to check the validity of case study findings. Triangulation helps to eliminate biases that might result from relying exclusively on any one data collection method source, analyst, or theory (Merriam, 1988). Triangulation plays a part in the process of using multiple data collection methods, data sources, analysts, or theories to check the validity of case study findings. For this study, triangulation was done through an analysis of each child’s physical/occupational therapist reports, school records, and other confidential documents in order to authenticate the responses given by the parents regarding their child and the educational benefits of therapeutic riding.

Reliability is the extent in which research can be replicated. Consistency, transferability, dependability, and conformability are terms used in discussing research reliability with qualitative studies (Guba and Lincoln, 1989). Addressing credibility happens when drafts of the report are sent to the research subjects to confirm or disconfirm the hypotheses (Guba and Lincoln, 1989). Transferability occurs when the researcher provides a descriptive detailed report that allows others to decide if the findings are applicable to other cases (Guba and Lincoln, 1989). Dependability was addressed in this study using detailed records of the data collection and analysis procedures. Each person interviewed received a copy of the transcript for verification or amendment. After approval was received from the aforementioned, all records were destroyed due to the confidentiality (Guba and Lincoln, 1989). In the study, conformability was addressed by the researcher by including excerpts from the raw data that supported interpretations and conclusions.

Findings

The purpose of this section is to present key quotes (findings) from each question asked from the interview schedule:

Lead-in Question:

Before your child became involved in the therapeutic riding program what did you know about these types of programs?
Responses were as follow:

“I did not know anything about these types of programs and that they were around for a long time until I met a parent whose child was in a program.”

“I have heard about them, but did not know that we had this type of program in our area. Once we visited the center and talked to the program director we gave it a try. This is the best thing that has happened to our child.”

Research Questions:

Research question 1: As a result of the therapeutic riding program, have you noticed any change in the child’s performance in school and at home?

“My son was so shy when we first started the program. He did not want to be around anyone and it was hard to get him involved in any activity. We have been involved with this program now for a great number of years and he is outgoing and wants to be involved in any and everything. The progress in school did get better and better as time went on because of the program bringing him out of his shell.”

“This program has been a godsend to us. We have seen so much improvement in our child. At home she knows what is expected of her if she is planning on riding that week, and with what duties have to be done before she can ride and it has taught her responsibility. At the center they are no compromise in the child duties but at the same time they never ask a child to some thing that they are not able to do. I feel this is a great life lesson for them to learn now, because they will need it as reach adulthood. As far a school goes all of this carries over to the school and we have seen as much progress at school as we have at home.”

Research question 2: Do you feel that therapeutic riding programs would be a benefit to all children with disabilities?

“With the progress that we have seen with our child, I can’t see any reason why it would not benefit all children with or without a disability. I can say one thing it sure has helped us.”

“They are many great programs out there for our kids, but I feel, anyway for us, this program has been the most successful one we have been involved with. I would highly recommend this type of program to anyone with a child with any type of problem.”

Research question 3: Would you like to see therapeutic riding as a part of the state school curriculum?

“Yes I would, but I do not seeing it happening. All you hear about is the schools have no money. I think it would be a plus to have this but I guess we can only dream.”
“That would be nice, but I don’t see it ever happening. The school would be so scared to get involved with an activity that does have somewhat a little danger to it. They would be worried about getting sued because of some child getting hurt; even if all liability questions were answered they still would hesitate about making a program like this a part of the school curriculum.”

Research question 4: What types, if any, of barriers do you see with this type of program?

“As far as the program itself I see no barriers, but one thing I see as a problem is money and finding programs close enough to get to.”

“The only thing I really see is the money issues that everyone is talking about. There must be a way or a source for these centers to get some help to get what they need. One barrier we have is our program is so seasonal. If the center could get enough funds so they could have an indoor riding ring, we could keep the program going year around.”

Research question 5: Would you recommend therapeutic riding programs to other parents of children with disabilities?

“I would and have recommended this program. Therapeutic riding is such a well round program in how it works and how it deals with so many different types of disabilities. I feel you can see a marked improvement in any child who goes and stays with the program for a period of time. The only thing else I have to say is that they are wonderful.”

“The program was recommended to me and we are so thankful that it was and we would highly recommend it to anyone. It has brought so much happiness to my child and they look so forward to being able to go ride. It has helped teach them to follow directions better, helps them understand that there is a order in which jobs or tasks are to be done. We really love the program and how more parents of children with disabilities hear about programs and get involved in them. We are going to do our part in getting the word out.”

Conclusion

From the findings reported by the parents, the following conclusions were reached:

1. Parents in this study indicated that before there child became involved in the therapeutic riding program they were not aware of the benefits of the program. Perhaps given the benefits that therapeutic riding offers, more advertising of such programs should be done.

2. Parents indicated that great improvements have occurred in relation to the child’s social and academic development, particularly with the development of personal responsibility. With the aforementioned factor in mind perhaps therapeutic riding should be explored by more families given the perceived benefits for their child’s overall development.
3. Parents stated that they would like to see therapeutic riding incorporated as apart of the public school curriculum, however, given the limited budgets that schools face, and the liability issues of having such a program, they do not see it as a reality. As more students become involved in the program nationally, and the educational benefits are clearly shown through more research, maybe schools will be more willing to incorporate it into their curriculum and seek external funding.

**Recommendations**

Several recommendations are made based on the findings from parent interviews and from information retrieved from the research literature. These recommendations are suggested in an attempt to increase awareness of the importance of therapeutic riding and to establish some form of dialogue referencing the importance of therapeutic riding to the parents and the benefits it would produce for the child’s quality of life.

1. Perhaps public school systems should seek external funding through nonprofit and corporate sponsorships in order to provide therapeutic riding as a curriculum option for children with disabilities.

2. Experimental research should perhaps be conducted in order to provide quantitative data that could be utilized as a basis to support the incorporation of therapeutic riding into the public school curriculum.

3. More advertising of the benefits of therapeutic riding should be advertised by individuals in the profession if programs of its type are to have wider appeal to audiences nationally.

**Recommendations for Further Study**

Based on responses presented to the researcher by participants, this study left some questions unanswered and raised several additional questions, suggesting the following topics for additional research:

1. The study should be replicated in different regions of the country to see if the impact of therapeutic riding on children with disabilities is similar to the results found in this study.

2. Future researchers would be well advised to consider life history research when duplicating studies of this magnitude, keeping in mind that true research is very time-consuming but extremely beneficial.

3. Future research studies should include an interview of the physical/occupational therapists of the children under analysis.
4. Additional research should be conducted to include a larger sample of the population of past students who have been involved in therapeutic riding programs and now have reached adulthood. The research should incorporate a national directory to include names and addresses of past students and parents who are willing to be a spokesperson for therapeutic riding.

5. Future researchers would be advised to look at the school systems to study how and what it would take to make therapeutic riding a part of the state’s public school curriculum, so that these types of programs can reach out and be beneficial to more children with disabilities.

6. Additional research should be conducted to document the day-to-day operation of the therapeutic riding centers within each state. This study should reveal what it takes to keep these centers in operation and components needed to keep the therapeutic riding center of high quality.

**Implications**

Based on the findings and conclusions presented by the parents, the researcher is led to present the following implications that are beneficial to individuals:

1. Documents in this study presented the fact that supports the use of therapeutic riding for improving a child’s physical well-being.

2. This study has shown the parents wanted therapeutic riding as a part of the state public school curriculum.

3. Research within this study has shown parents a strong need for groups of professional educators, families, and community agencies working together to build effective learning environments.

4. The research also reflects the need of the aforementioned to find ways to find funding for these programs so the quality of the programs can progress to higher levels.
References


