Good Procedures and Favouring Factors in Therapeutic Riding

Author:

Giovanni VOLTOLIN, Giovanna RABBIA PICCOLO, Monica BISCARO, Doriana DE PERNA

In previous occasions we presented the analysis of our experience with the Integrated Vaulting (1), meant as activity which involves disabled young people and normal young people; particularly in the field of the global management of children affected by Down's Syndrome and children with Autistic Spectrum Disorders, aware of the limits of a qualitative analysis, we tried to relieve the utility of the intervention itself in the perceived improvement of the social abilities of the young people involved.

On this occasion we suggest an interpretation of our experience in the Therapeutic Riding in order to point out, after about twenty years and approximately one thousands hours of activity every year, the strong points which have allowed us to reach satisfactory results for the young people, for their families and for us, health workers, always keeping in mind the functional, relational recovery and the social inclusion.

A reflexion upon the work we have carried out is appropriate in order to share with the others the positive results, but at the same time it necessarily involves a critical revision of our own work, which on one side can relieve avenues for improvement and on the other side highlight organizational parameters one cannot go below, on pain of a unacceptable decay of the quality of the performances.

The Organizational Analysis is an interpretative approach of the experience born in the industrial field but which is then extended to the study of diversified professional human systems, up to involving those complex systems which deal with the sanitary and social management. In different words, the organizational analysis has passed from a socio-technical perspective, typical of the Anglo-Saxon world, to a more bio-psycho-social perspective. According to the latter, attention spreads from the techniques, from the organizations, from the structures to the motivations, to the personal experiences of the patient and of the health workers, to the quality of the relations in the care providing group (2).

It seems useful to distinctly suggest the operational strategies which have resulted useful in answering the needs of the protagonists of a certain process (Good Procedures) and the context conditions which have made it easier to reach the objectives of a system (Favouring Factors), nevertheless it must be said that the distinction between the two elements of this speech is often blurred and that both elements have influenced one another.

Good Procedures

Among the operational strategies that we have found useful we would like to point out:

• The presence of an initial thorough functional evaluation aimed at describing a profile of the child, which does not focus on the research of the defect or of the diagnostic criteria (other

professions' area of expertise) but focuses on the quest of the resources which, although reduced, the child has. From the census of the resources we were able to hypothesize the usefulness of an intervention of Therapeutic Riding and, once we had made an initial evaluation, we were then able to recognize the indicators of the process, make the potentially necessary changes in progress and eventually highlight the final result indicators by using comparable and reliable instruments.

- An appropriate allocation of economical and organizational resources has allowed us to put the entire experience into practice. It has guaranteed the strictly technical aspects in handling the session, the riding stable, the insurance in case of injuries and the transportation, but it has also made it possible for the organizers to offer moments of conviviality which are important on the psychosocial, familiar resilience and social integration front.
- An appropriate professional training of technical rating, of the health workers in the riding stable and of the Therapeutic Riding workers on all the professional levels. This strong point has become concrete in the choice of equestrian suggestions which were appropriate for the posture-motor skills of the child, from the riding technique to the choice of the horse or of the saddle, from the working periods to the music rhythms delivered at the same time.
- The relation dimension is then an important characteristic of all the good procedures, a relational ability which is widespread among the health workers, and which is the result of an initial training experience and of a sensitivity which has developed on-site, which may be neither definitive nor optimal, but it certainly is to be returned to and developed. All this has rendered the relational dimensions coherent in a project that follows two guidelines that we consider fundamental, which flow into the enhancement of the progresses (with the parallel shared endurance of the failures) and into the convinced support of the parent-child relationship. The definition of a limited number of emotionally available, reliable and stable reference figures has however favoured the construction of relational dynamics between the child and the figures themselves, which we can find in the verbal and nonverbal expressive activities of the children, but also in the almost complete absence of problematic behaviours while at the riding stables.
- The continuity between the experience at the riding stables and the school experience has been made possible by the trust the "strong" institution, the school, that is, has put into the Therapeutic Riding Workers. Their involvement in the periodical discussions about the Individualized Education Schedule was the first, fundamental and formal step, but it is also important for an environmental and integrated planning of the didactics. If, as Canegaro claims, a good procedure "leads to the reorganization of an institutional course which considers everyone", this point can be actually interpreted as an action/contribution of the child in difficulty to the School which "forces" the teachers to educational plans which take into account the extra-scholastic reality of the disabled, but also to his/her school mates who, being often invited to the riding stables and involved, can experience their mate's

activity in a position in which the usual asymmetry in their favour is reversed. We think that these two last facts can be considered examples of an inclusive educational style.

- The ethic and steadily pursued choice to pay extreme attention to the well-being of the horse, implicitly considered a co-actor of the experience and not a simple and common animated instrument.
- The custom of using a wide range of video documentation concerning the sessions is a good procedure, since it appears as the most efficient instrument to detect the variations of the clinical picture and the suggestion characteristics of the intervention, as happens, however in many other rehabilitative activities (3, 4). A connected procedure, as positive and however due, was the realization of a Programmatic Plan on the Safety of the Private Data, according to the in force law.

Favouring Factors

- The activity we have accomplished is rather demanding and it could not have taken place without an appropriate support and without the institutional investment (both financial and image-related). During these years the care providing team and the patients have shared the feeling of being approved and supported by the technical personnel of the several authorities in the equestrian field (the FISE The Italian Federation for Equestrian Sports, the CIP The Italian Paralympic Committee, The LAPO Association, the University...) and by the local political and administrative Authorities; such a feeling is considered necessary to motivate the sanitary management of difficult clinical, chronic or complex cases like the ones we have dealt with.
- The presence in the riding stables of disabled riders who have achieved several sport results, has contributed to the positive media exposure both of the riding stables and of the activities that we have carried out.
- The synergy between the different institutions represents another favouring factor. As a matter of fact, our experience is the result of the collaboration between the local political institutions (The Valle d'Aosta Autonomous Region Administration, the Health and Social Policies Department, and the Local Administration in Nus), the Valle d'Aosta Local Health Authority and the social private (the A.V.R.E.S. onlus the Valle d'Aosta Amateur Sport Association for Sport Therapeutic Riding). All of these components have made efforts to support the specific project.
- The Regional Administration has defined a convention with the Therapeutic Riding workers in order to assure the necessary funding and keep most of the delivered services free of charge.
- The Local Health Department has taken charge of the health evaluations of start up and management and considers them as common ambulatory activities.
- The A.V.R.E.S. onlus the Valle d'Aosta Amateur Sport Association for Sport Therapeutic Riding, has not only been organizing and following the health workers' activity, but it has

also allowed a timetable and professional integration flexibility which were necessary in order to answer the patients' numerous requests. The social private, in our case, does not appear as an extra value due to its inferior costs, but also and especially because it employs original abilities, skills and working patterns (5).

Eventually, the project was carried out in the riding stables in Nus (AO): a comfortable, clean and welcoming structure, free of architectural barriers. The spaces are appropriate and obviously permit riding but also educational and recreational activities, on the background of beautiful mountain scenery, with a medieval castle: one has to admit that the pleasant context also helps reach the best results ("looks aren't everything, but they help"!).

Conclusions

The illustrated experience has been obviously chosen because the strong points prevail, but we are aware of the limits of our intervention and of the huge margins of improvement. As a matter of fact, criticism includes:

- The actual limitation of the resources has to favour the scientifically more qualified interventions because of the tendency to carry out activities which are recognized as more efficient by the International guide lines, and Therapeutic Riding is not among them. The health workers commit to integrating themselves in research projects.
- The technical Continuous Training must be returned to and developed, recognized and financed, since it is an important element of the professional service
- The change or at least the positive feedback of the patients and their families goes hand in hand with that of the workers and qualifies the working style of the group. Therefore, a reflection upon the relational dynamics seems advisable, which leads to the necessity to program further meetings of reflection and supervision.
- Finally, we find that we should further develop the aspects that have to do with the integration with the patients who do not have psycho-physical problems and attend the riding stables, in order to encourage sport activities.

We reckon, as a conclusion, that we have exposed some elements which characterize the organization of our work, they include technical aspects but also psycho-social aspects, as is essential in our field of interest; these elements themselves, in the future, could be useful as quality parameters, to improve but also to "defend" in the unfortunately likely hypothesis of a resource restriction.

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