COLLABORATION ISSUE
PATH Intl. Community Connections
Rehab Hospital Collaborates With Center
Hospice Teams Up With Horses
Therapeutic Driving Builds Car Driving Skills
Hospice Teams Up...16

Vermont Venture...28

Rehab Hospital Collaborates...32

Features

16 Hospice Teams Up With Horses
An equine-facilitated psychotherapy program helps grieving children and adults heal from the loss of a close family member. By Lisa Renae Nelson and Laura Strom

22 PATH Intl. Community Connections
This members-only social networking site is opening up new networking opportunities as it re-invents the way members are able to connect with one another. By Leif Hallberg

28 Vermont Venture
How four centers collaborated to form Vermont PATH Intl. Equine Services for Heroes to better serve veterans throughout the state. By Liz Claud

32 Rehab Hospital Collaborates With Center
A groundwork program for participants with spinal cord injuries promotes physical and emotional healing. By Terry Chase

38 Cart Driving Builds Car Driving Skills
Learn how therapeutic driving students can transfer their skills to motor vehicle operation and how centers can partner with driver educators and vocational rehab counselors. By Susan Grant

On the Cover
The grand prize winner in the adult category for the 2011 PATH Intl. Photo Contest was sent in by Rocky Mountain College. The leader, Hollis Edwards, is working with volunteer J.J. Barney and rider Andrew Atkinson.

Departments

2 President’s Letter
3 CEO’s Letter
4 Region Contacts
5 PATH Intl. Donors
6 Newly Certified Instructors
7 Accredited Centers
8 About Insurance: Collaborating With Other Agencies By Debi DeTurk Peloso
10 News Briefs
12 Inspiring Stories: Making Love Visible By Marge Tautkus Gunnar
46 PATHways: 2012 Standards Manual Changes
50 Press Box
51 Classified Ads
52 A Great Idea: A Win-Win County-Center Partnership By Karen Karvonen
54 Book Ends
56 Calendar of Events

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In 2008, Sutter Care at Home in San Mateo, CA, partnered with the National Center for Equine Facilitated Therapy (NCEFT) in Woodside, CA, to provide a daylong equine-facilitated psychotherapy (EFP) session for children grieving losses of a close family member. At the children’s Horses & Healing Workshop, volunteer therapists from NCEFT helped the children learn to groom, touch and safely interact with the horses. As they began to bond, volunteers introduced the children to riding by first teaching them verbal commands as they led them slowly around the ring and then quickening the pace in response to the children’s commands and comfort level.

Eventually, the children were brought into a side-by-side position with each other, and the leader played “Simon says” using a powerful variation of the childhood game so the children could express their feelings. The commands included sitting sideways and then backwards on the horse, laying supine and then laying forward and thanking the horse. At the very end, Simon asked the children to whisper a secret to the horse about their loved one who died and share something important with the horse. The first session was so powerful.

During an equine-facilitated psychotherapy grief session for adults at NCEFT, participants decorated and wrote prayers and messages to their deceased loved ones on ribbons they then tied on the horses’ manes.
in creating a magical healing intervention for bereaved children that Sutter Care at Home (formerly Sutter Visiting Nurses Association & Hospice) and NCEFT have completed six workshops to date. Losses have involved one or both parents, grandparents and siblings and included suicides and ambiguous losses such as disappearances. Participants have ranged from four to 17 years old. About 20 percent of attendees had lost someone while they were in Sutter’s hospice care; the balance came from the community (referrals from other professionals, agencies, schools, Craig’s List, etc.)

The program was the brainchild of Jennifer Wilson, a Licensed Marriage and Family Therapist (LMFT) at Sutter Care at Home. After hearing about a program at a hospice in the Midwest that relied on the therapeutic power of horses, she approached NCEFT Executive Director Gari Merendino, who was delighted with her idea. Soon, with the help of a person who volunteered at both places, Wilson wrote a grant and a successful collaboration was born.

Grief in Children

Merendino saw that grieving children are a very unique type of special needs child. “When the children came to NCEFT, each was dealing with their own personal loss and trying to make things normal again,” Merendino said. “It helped me realize how we can make a difference in the lives of others even when we are not providing hippotherapy or therapeutic riding. The Sutter experience has opened our eyes to other opportunities to make a difference through our wonderful therapy horses, dedicated staff and volunteers—a difference that comes one individual at a time.”

Children, especially those under the age of five, are particularly vulnerable to the stress of grief because of the developmental stage of their brain. The pre-frontal cortex is not fully developed. Traumatic memories can be trapped in the limbic system, which stores emotion and memory. A University of Stanford study documented that trauma to children changes the size and shape of the hippocampus and can interfere with memory (Landou, 2009). In addition, grief is revisited with each new developmental milestone a child reaches. For instance, a child may wish the parent could see him or her graduate/win this award/go to the prom, etc.

The Diagnostic and Statistical Manual of Mental Disorders (DSM-TR-IV) states that a person can be diagnosed with bereavement for up to two months after the death of a close loved one; there is no mention of grief in children (APA, 2000, p. 740). After two months, a new diagnosis is needed, such as depression. This is in sharp contrast to many indigenous cultures, which understand that a full year is needed for mourning along with community rituals. The year brings anniversaries, birthdays, holidays—and on all of those occasions the loved one is grieved in their conspicuous absence.

Many people are familiar with the stages of grief developed by Dr. Elizabeth Kübler-Ross: denial, anger, bargaining, depression and finally acceptance (Kübler-Ross, 1969, p. 285). The trouble with this theory is that people do not seem to move through it step-by-step. One minute a person may feel a sense of acceptance about the loss, and then suddenly when the holidays loom and the loved one is not there, the person may move back into anger.

The latest research reported in Time Magazine by psychologist Janice Genevro on the quality of grief service “…increasingly indicates that grief is not a series of steps that ultimately deposit us at a psychological finish line but rather a grab bag of symptoms that come and go and, eventually, simply lift” (Konigsberg, 2011).

William Worden’s theory of grieving, which is embraced by Sutter Care at Home, sees grief as a series of tasks or milestones we must achieve.
Called the “Four Tasks of Mourning” (Worden, 2002, p. 27), it includes:

1. Accepting the reality of loss; we have to acknowledge that our loved one has really died.
2. Experiencing the pain or emotional aspects of loss.
3. Adjusting to an environment in which the deceased is missing and having to change the way a person does things.
4. Relocating the person within one’s life and finding a ritual or ways to memorialize them. A person still has a relationship with the deceased, and it is the counselor’s role to encourage people to talk aloud with the deceased as a way of accomplishing this task.

Worden says that these tasks apply to everyone, but with children we need to take into account their cognitive, social and developmental stage (1996, p. 12). Children around four to five years old often have magical thinking and may believe they caused the death. A child might say or think, “You’re so mean because you won’t let me have that toy. I wish you would die!” Then if the parent or loved one does die, the child may feel tremendous guilt and pain. Younger children, whose coping skills are less well developed than an older child, may find it much more difficult to adjust to the new environment without the deceased. For instance, if mommy always read a story at bedtime, and now she is not there, this can be incredibly painful.

Children’s Healing Workshop

The goal for the children was to touch on each of the four tasks of mourning in a four-hour Saturday workshop with the therapy horses at NCEFT. The children arrived at 10:45 a.m. Parents and/or guardians were encouraged to leave their child if he or she would permit the separation, and if not, they found ways to stay in the background. A picnic lunch was immediately served in a large group of trees with participants sitting in a circle. A game helped people learn each other’s names.

After lunch the children went into a private space, in this case a Native American tepee, with the leader and an assistant. The leader explained how each child was there for a special reason that not all children share. She told them that having lost a loved one was a bond they all had in common, and on this day they would do some sharing about their special person, ride horses and create an art project as a memorial for their loved one.

The children were encouraged to share as much or as little as they wanted and were told that helpers (bereavement counselor volunteers) would be willing to listen to whatever they wanted to say throughout the day. Research shows that bereaved children are greatly helped by safe, structured group settings in which they realize that they are not alone in their experience. The group size was limited to six to eight children, and the ratio of adult helpers was one-to-one to be sure someone was available for every child.

Using a talking stick, the group first shared who had died (Worden’s first task). Next they talked about something they enjoyed doing with their person (Worden’s second task). Finally, they shared what they missed about their loved one (Worden’s third task).

The children received instruction about how they would interact with the therapy horses and were placed in one of three groups that rotated through activities. One group groomed and rode the horses; one played with goats and the third one worked on decorating a horseshoe as a memorial (Worden’s fourth task) with glue, feathers, paint and glitter and alphabet beads for spelling out the name of their loved one.

Sue Hobart, MA, the youth bereavement coordinator at Sutter Care at Home who took over the program when Jennifer Wilson left, says, “Horses have a magical attraction for children. They are capable of addressing the spiritual aspect of grief without children needing to verbalize it.” She feels it is a natural way for children to experience the kinesthetic
aspectsofgriefbecausechildrenare aware that horses are sensitive to human emotion through physical connection. In addition to suggesting the children talk with each other at the workshop, she also suggested they whisper a secret into the horse’s ear. In this way, the horse becomes a safe witness who cannot possibly expose their secret.

In the closing circle, Hobart played a game with the children in which they passed a button on a string and made a wish. Many children wished for everyone to feel better. One boy who lost both parents said, “May everyone experience healing in your grief.” At the end of the day he expressed his gratitude by saying, “Thank you so much for making this day. This is a really special experience.”

As the workshop closed, more snacks were served and NCEFT presented gold medals to each participant to honor their participation. At 2:30 p.m. parents returned to pick up their children.

Stephanie Amsden, MSW, a long-time bereavement program coordinator who participated in the activities, had this advice for other agencies considering such partnerships:

• Secure funding.
• Find a reputable facility to host the workshop.
• Include a counselor skilled in EFP on the team.
• Have plenty of trained volunteers.
• Bring easy, fun food for lunch and snacks.

Adult Grief Session

After a second workshop for grieving children in which Wilson noticed that the parents were looking longingly at the horses, she said, “I realized that the program could be equally successful with adults and decided to adapt the workshop to have adults experience the magic of the horses.”

Lisa Renae Nelson, LMFT, who has a private EFP practice and volunteers at NCEFT, co-facilitated the first Adults, Horses and Healing Workshop. The focus was to allow participants to explore their grief to the level they felt comfortable, while they engaged in different equine activities. Some individuals initially expressed trepidation being around the horses, but near the end of this healing day, everyone was comfortable touching and interacting with them.

Horses seem to uncannily reflect back much of what is going on within a person. Frequently, interacting with a horse allows one a window into one’s own inner psyche. It is often easier to “hear” and accept lessons learned from our equine partners than from a fellow human. The equine activities of the day were chosen to aid participants in exploring their feelings of grief and loss while finding a unique path to healing.

The initial activity was reflective work, first developed by Barbara Rector of Adventures in Awareness and a former manager at NCEFT (Rector, 2011). The individual stands silently in front of a horse; there is no physical contact. If one is open to listening in that space of quietude, wisdom and insight are frequently experienced. One person reported, “I saw my husband’s eyes looking back at me.” Another said, with tears in her eyes, “The horse looked so sad.”

Richard Newton, equine TTTouch practitioner, taught participants how to perform TTTouch, a form of calming bodywork, on the horses, on themselves and with each other to aid in alleviating negative emotions and stress (Tellington, 2011).

In another activity, participants had to navigate a horse through an obstacle course in the arena with the added challenge of horse treats strewn throughout the course (EAGALA, 2011). Inevitably, the horse would stop at the treats despite each person’s efforts to complete the course uninterrupted. Each response was unique as they struggled, then accomplished leading the horse away from the treats to finish the course.

This activity is rife with metaphor. After the last person completed the course, the group explored how each participant’s grief mirrored their arena
experience. One participant remarked, “...it gives a visual example of the grief battles in everyday life and the temptations that hold us back from being truly alive.” Grief is a powerful force that can hijack emotions, thoughts and functionality. Participants were able to see and discuss how grief often detours their path in life. They explored learning to accept grief as a natural process on their journey while not giving it the power to derail their life.

One of the most moving activities at the end of the adult’s workshop is the “Ribbons in the Wind” (Dawson, 2007, p. 78). Other cultures believe in sending spiritual prayers and messages via the wind, e.g., prayer flags in Buddhism. Participants meaningfully decorated and wrote prayers and messages to their deceased loved ones on ribbons. Silence enveloped all who were there, and a sacred space was naturally created. They then tied the ribbons onto the manes and tails of the horses, who were led beside a gate outside a beautiful pasture with hills, grass and trees. In tandem, the horses ran up the hill and disappeared in the wind, releasing the prayers and messages to loved ones as the horses ran up the hill and disappeared into a grove of trees.

Participants were invited to share their experiences. Many spoke about personal insights and finding ways to express and release levels of grief that were interfering with their lives. They shared how the horses and equine activities provided a key touchstone in their healing from grief. Often, people need companionship and strength from others to walk the path of grief. One woman wrote, “My loved ones are gone and I need to be strong so I can live my life and learn to live with my memory instead of hiding in a corner.”

Those who know horses acknowledge this hard-to-define healing element they hold. The marriage of grief counseling and EFP is a fairly new and exciting concept for mental health practitioners. Hopefully, this relationship will continue to grow as the equine-assisted activities and therapies community reaches out to social service agencies and therapists introduce appropriate equine-facilitated healing methods within the profession.

Connecting with a horse in the midst of life’s storms can bring healing and hope in a unique and profound way. Horses are natural healers, especially when we humans share the reins.

References


Lisa Renae Nelson, MA, LMFT, the social skills program director at NCEFT, has been offering equine-assisted activities at NCEFT since 2008. She also practices EFP at DreamPower in San Martin, CA, and in her own EFP practice, Tanglewood Center, in Woodside, CA. She can be reached at LRNelsonMFT@gmail.com. Laura C. Strom, MS, LMFT, a bereavement counselor volunteer for Sutter Care at Home in San Mateo, CA, specializes in issues of disabilities and trauma. She can be reached at LCStrom@gmail.com.