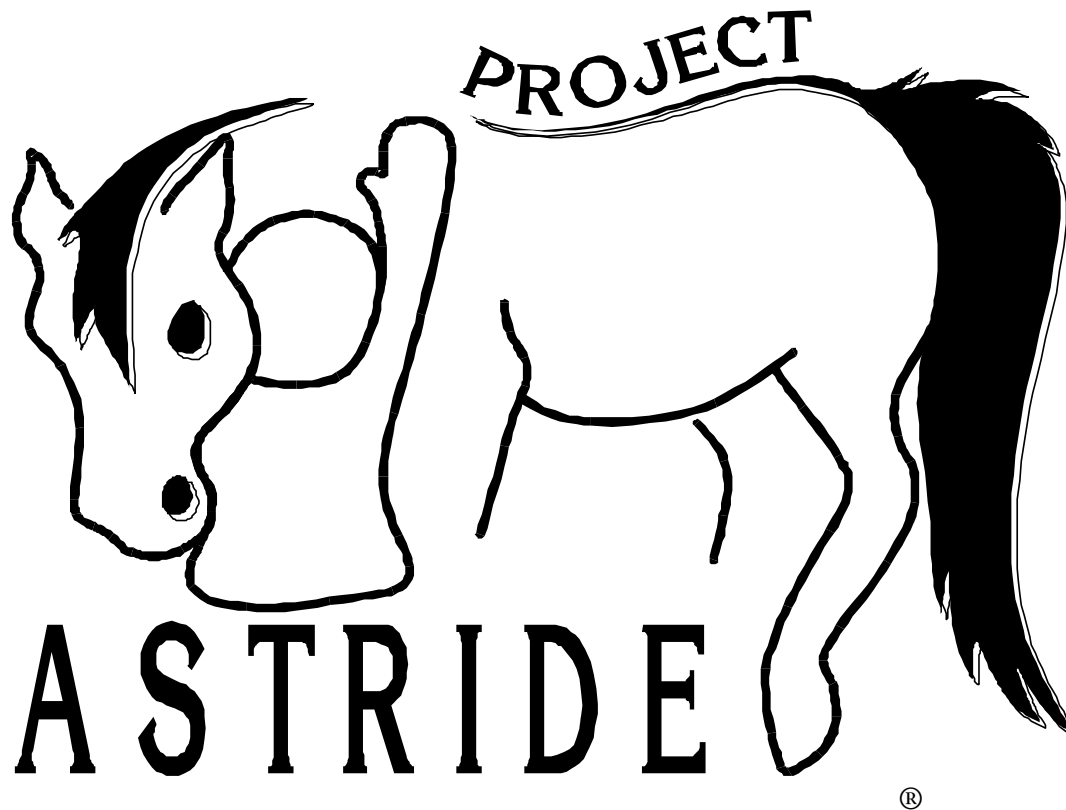


VOLUNTEER MANUAL



Adapted Specialized Training and Recreation Involving Disabled Equestrians

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Label Jars...Not People!

People with disabilities are, first and foremost, individuals with ability.

Understanding different types of disabilities can be useful in beginning to understand the challenges someone might face. But knowing about the challenge of a disability does not begin to tell you about the person. A person is not a label, a condition or a wheelchair. Your personal relationship with a person with a disability as an individual, the skills and resources you both have, will enable you to work and recreate together effectively.

Words are important. *Poorly chosen words can give a powerfully negative message.*

Avoid referring to someone's disability unless it is relevant to the task at hand.

Avoid using "normal" or "regular" to compare people with disabilities to others, as it implies the disability makes the person "abnormal" or "irregular".

Avoid using the common service terms of "client" or "patient". Rider (or participant) is a preferable term.

Names are the best labels! Use them freely except when preserving confidentiality.

M. Wise

3/95

ABOUT Project ASTRIDE

Project ASTRIDE (Adapted Specialized Training and Recreation Involving Disabled Equestrians) was founded in 1986 to provide a local resource for horseback riding therapy for individuals with disabilities. We are a Premiere NARHA Accredited Center, which offers therapeutic equine activities to adults and children with disabilities in an effort to meet participant's physical, mental and emotional needs. We have been fully accredited by the national organization North American Riding for the Handicapped Association (NARHA) since our beginning. Our instructors are certified and the entire staff (instructors included) are composed of volunteers who receive zero salary disbursement. Project ASTRIDE is a 501(c)3 non-profit and is registered with the Charities Division of the Minnesota Attorney General's Office.

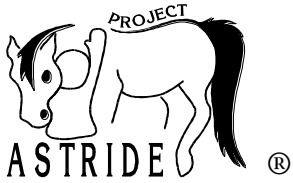
Through our riding program the horse and rider are truly a team. When astride the horse a rider feels, by way of their mount's quadruped gait transmitted into the rider's pelvis, the three-way motion of the human walking stride. Through passive experience many riders are assisted to move their muscles and skeletal structures in patterns that they and their therapists otherwise do not have a means to facilitate. Some insurance companies, physical therapists and the medical community have now begun to recognize horse therapy (hippotherapy) as a valuable addition to the physical therapy session. The repetitive motion and constant body heat of the horse encourage the rider's muscles to relax, physical structure to align and to become more responsive in general. In our ground class participants learn about care, grooming and ground handling skills. Most of our participants have never had the opportunity to be "in control." To control an animal much larger than themselves is an empowering experience! Participants gain skills that many of their peers do not have while building their self-esteem. Because of interaction with volunteers, other participants and the horses, many participants learn to develop social skills and friendships that extend beyond their horsemanship experiences.

HOW WE WORK

Project ASTRIDE provides participants with disabilities a trained horse, adaptive tack, and a team of volunteers (a certified riding instructor, horse leader and up to two side walkers). Participants fill out required paperwork and attend an Orientation. The orientation familiarizes the participant and their caregiver/family with the facility and staff. The participant is assessed by the instructor(s) for equipment, horse and volunteer needs. Goals are determined.

Riders currently participate in 1 hour classes consisting of ½ hour grooming and tacking and ½ hour riding. Riders participate in 1 class weekly for 8 weeks. Ground classes consist of 1 hour classes. Participants spend ½ hour learning care and grooming skills followed by ½ hour leading and ground handling skills.

ALL volunteers must attend mandatory volunteer training. They must meet the eligibility requirements set forth in the volunteer manual. Only those with previous horse experience who attend and successfully complete leader training may be a horse leader.



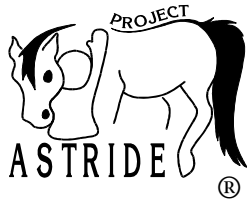
ADAPTED SPECIALIZED TRAINING AND RECREATION
INVOLVING DISABLED EQUESTRIANS

VOLUNTEER

1. **Age:** 16 years of age or older
2. **Reliability:** Regular attendance insures that each participant gets his/her turn and that the program tasks are completed promptly.
3. **Punctuality:** Prompt insures each participant his/her full lesson and the associated enjoyment.
4. **Physical Fitness:** We care about your well-being and safety, too, and ask that you be in good health and know your limits. Walking/running in deep sand is required for all classes.
5. **Sensible and Comfortable Clothing:** Loose clothing and a flat-soled, secured shoe or boots are important for your comfort and safety in the deep sand footing of the arenas.
6. **Alertness and Anticipation:** Awareness of subtle signs, as well as major changes, insures better feedback to the rider and the instructor. Be prepared for the unexpected to happen.
7. **Empathy:** Sensitivity and caring for participants (not pity) enhances the recreational and therapeutic benefits of the program.
8. **Horse Sense:** Knowledge of horses is an advantage, although you can be an excellent volunteer with little previous horse experience.
9. **Patience:** Participants need the time and opportunity to independently follow the instructions given by you and the instructor. If the participant has difficulty, demonstrate the task and then let the participant try again.
10. **Common Sense:** Common sense is your best guide in working with participants. If you are ever in doubt, ask the instructor.
11. **Confidentiality:** Respect all information given to you to assist a participant, which shall remain private and confidential.
12. **Use of Drugs and Alcohol is Prohibited** and is grounds for immediate dismissal.
13. **Inappropriate Advances** toward participants are unacceptable and will be grounds for immediate dismissal. (Volunteers ARE NOT to assist participants in bathrooms; ask parents or caregivers to assist the participant.)
14. **Abuse** of animals, participants, staff, and other volunteers will not be permitted and is grounds for immediate dismissal.

Remember that each person with a disability...

- ... is a totally unique person, despite the label applied by their disability;*
- ... is a person first, and an individual with a disability last;*
- ... has the same right as anyone to fail, to fall, to cry;*
- ... must be allowed to find his or her own manner of doing things; and*
- ... has limitless potential for becoming not what we desire, but what they desire.*



Project ASTRIDE DISMISSAL POLICY

Project ASTRIDE is committed to providing a safe, therapeutic equine experience. To assure the rights of all participants and volunteers are protected, the following actions by participants, family members, visitors or volunteers are considered contrary to the goals of Project ASTRIDE. Persons exhibiting these behaviors may be asked to leave the activity site and/or be dismissed from the program.

- Violating the data privacy rights of any participant.
- Any use of mood-altering chemicals unless prescribed by a physician.
- Deliberate and repeated use of language that can be considered offensive.
- Inappropriate physical contact.
- Sexual, racial or unethical harassment of any participant or volunteer.
- Action or conduct that may disrupt the classes, or cause a safety concern as determined by the instructor(s).
- Theft of Project ASTRIDE or Avon Hills Paints and Quarterhorses property.
- Gross negligence or willful mis-conduct causing damage or abuse to Project ASTRIDE or Avon Hills Paints and Quarterhorses property. Including, but not limited to, climbing on horse statues, windmills or grain bins.
- Abuse of horses, volunteers, or participants.
- Smoking on the activity site premises.
- Bringing pets and dogs, except Service Dogs, to the facility.
- Deliberate carelessness or negligence in the performance of volunteer duties.
- Engaging in deception, fraud, or misrepresentation of ones role in Project ASTRIDE.

POLICY FOR ABSENCES AND TARDINESS

Without your generosity many of our participants would not be able to be involved in their scheduled and prepaid equine activity. Volunteers **must** be responsible for their scheduled shifts. If participants are unable to attend or the weather causes cancellation of any classes you will be notified by phone as early as possible, at the location you specify on your volunteer application.

- If you are going to be unavoidably tardy please contact the volunteer coordinator immediately.
- If you know you will be unable to attend a scheduled class for which you are scheduled you **MUST** find your own replacement. This includes illnesses! A volunteer list will be provided at the first class of each session.
- If you have a last minute injury, illness or accident please call the scheduled instructor on their cell phone and leave a message. **This is for last minute emergencies only, Please!**
- Repeated absences (without finding a replacement) for scheduled shifts may be grounds for dismissal.
- **PLEASE REMEMBER your rider counts on YOU being a part of their weekly team.**

PROGRESSION OF ACTIVITIES TO BE COMPLETED BY VOLUNTEERS

1. Sign in and pick up your name tag 15 minutes before class is to begin.
 2. Check the volunteer/participant assignment board to determine what participant, horse, tack, hard hat and special equipment are to be used that day. Assist in setting up arena if needed.
 3. Make sure specified tack and a grooming kit are next to the horse to which you are assigned.
 4. Watch for and greet your participant. Make sure they get a name tag and put on their assigned hard hat prior to grooming.
 5. Encourage your participant to begin grooming, allow time for independence. Provide direction through verbal cues and hand-over-hand demonstration as necessary.
 6. Encourage your participant to begin tacking. Again, allow time for independence. Verify their saddle has the required safety stirrups and any specified adapted tack. Verify horse has a halter under its bridle on which to attach a lead.
 7. Encourage the participant to walk their horse to the mounting ramp or arena as directed by the instructor. Leaders should shield the participant from potentially harmful horse contact.
 8. Wait for directives and assistance from the instructor before mounting. Conversing about the horse as you wait may help a participant focus on the equine experience.
 9. Assist in the safe mounting of the participant as directed by the instructor.
- FOR SPECIFIC DESCRIPTIONS OF YOUR DUTIES WHILE THE PARTICIPANT IS MOUNTED REFER TO THE SECTIONS IN THE VOLUNTEER PACKET LABELED THE ROLE OF THE LEADER AND EFFECTIVE SIDEWALKING. Pages 11-12***
10. Wait for the instructor to dismount your participant at the end of the class.
 11. Encourage your participant to walk the horse out of the arena. Shield as in # 7. Return to the original cross-ties in the grooming area.
 12. ***IF TIME ALLOWS***, encourage the participant to un-tack the horse. Allow time for independence. With time constraints of consecutive classes this step often is not possible.
 13. Assist your participant with the removal of their hard hat. Make sure participant is in the care of the person responsible for transporting them home.
 14. Say good-bye to your participant.
 15. Greet your next participant (if applicable) and repeat steps # 4 - 13.
 16. Assist in replacing tack, teaching tools and other equipment into the ASTRIDE tack stall.
HORSES MAY BE RETURNED TO PADDOCK AREAS ONLY BY PERSONNEL ASSIGNED BY STABLE MANAGEMENT OR INSTRUCTOR.
 17. Help to sweep and do general clean-up of aisles and barn areas used by ASTRIDE.
 18. Meet with the instructor in the lounge after class(es), share success stories and give your input on the lesson. If unable to meet with the instructor please leave comments on "Participant Input Forms".
 19. Leave your name tag, sign out on the volunteer log sheets and total your daily hours.



**Project ASTRIDE & AVON HILLS PAINTS AND
QUARTERHORSES BARN RULES**

- **ABSOLUTELY NO SMOKING** permitted anywhere on stable premises.
- **ABSOLUTELY NO ALCOHOL** permitted anywhere on stable premises.
- **ABSOLUTELY NO USE OF MOOD-ALTERING CHEMICALS** unless prescribed by a physician.
- **DIRECT SUPERVISION** is required for **ALL** children and participants either by their parents or accompanying staff.
- **ABSOLUTELY NO ONE** is allowed in stable tack room, pastures, paddocks, stalls or office.
- **NO PETTING** of horses in stalls is allowed as fingers can be bitten! We do however encourage you to look. **DO NOT** pet any horses over the fence as there are stallions.
- **SPECTATORS MUST** stay in designated observation areas during grooming, tacking and riding. **PLEASE NOTE** - the aisles become very congested during grooming so we respectfully request you wait in the lounge or riding observation areas.
- **STAY WITHIN 100-FOOT** proximity of stable.
- **ABSOLUTELY NO CLIMBING** on machinery, fencing, horse statues, windmills, grain bins or equipment will be tolerated.
- **NO ACCESS IS GRANTED** to house, kennel, out buildings, pastures or fields. These areas are off limits to **ALL** participants, their families and friends, staff and volunteers.
- **NO Dogs** or pets are allowed on property without owner's specific permission.
- **RESPECT** this facility, its personnel and rules as you wish to be respected.

**WE APPRECIATE THAT YOU HAVE TAKEN THE TIME TO READ THESE RULES AND BECOME FAMILIAR WITH THEM. PLEASE INSURE ANYONE WHO ACCOMPANYS YOU TO AN ACTIVITY IS AWARE OF THESE BARN RULES.
THANK-YOU!**

The staff of Project ASTRIDE & Avon Hills Paints and Quarterhorses



Project ASTRIDE SAFETY AND CONDUCT

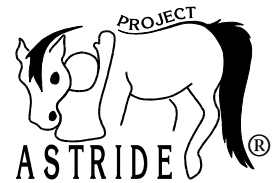
- All volunteers must complete a Project ASTRIDE volunteer training
 - Volunteers must turn in completed yearly paperwork, signed and dated.
 - Volunteer Application
 - Liability Release
 - Photo Release
 - Confidentiality Policy
 - Emergency Medical Release
 - Dismissal Policy
 - Always take responsibility for your participant's safety and whereabouts once they're in your care.
 - Know the emergency action plans.
 - Always demonstrate good horse handling and care techniques. Remember you are being copied by others and by many participants!
 - Report any unusual horse behaviors to the instructor prior to the mounting of your participant or immediately upon discovery.
 - Report broken or damaged tack to the riding instructor prior to being used.
 - Stay only in designated areas. Only designated individuals or volunteers may enter paddock and pasture areas.
 - Enclosed footwear is required.
 - Pants are the preferred attire. Avoid dangling jewelry.
 - Leaders are responsible for horses and sidewalkers are responsible for the participant.
- No matter what!!!***
- Volunteers must follow barn rules and conduct themselves in an appropriate fashion.
 - Make sure your participant wears a hard hat, their saddle has the required safety stirrups and any specified adapted tack. Verify horse has a halter under its bridle for attaching a lead.
 - Require appropriate behavior from your participant while respecting them.



The Human First Aid kit is located in the Tack room with a Red Cross on it. It is located on the top shelf on the back wall. This kit contains supplies to be used in many emergency situations. Non-latex gloves are located on the shelf over the toilet for anyone to use in emergency and non-emergency situations.

In the event of an injury or emergency a report MUST be made to the Class Instructor. An occurrence report should be filed if possible BEFORE leaving the premises. A report MUST be filed with a center representative NO LATER than 24 hours after the occurrence. You should expect to receive at least one follow-up call from center personnel for any event where an Occurrence Report is filed.

EMERGENCY PROCEDURES



FIRE

Remain calm and use a matter of fact voice. Dismount as per instructor's directions. Sidewalkers will escort participants to nearest exit. **ALL** participants, volunteers and family/caretakers will meet in the North East corner of the parking, closest to the driveway. A final head count will be taken by the class instructor. Leaders untack in parking lot outside gate to upper pasture, and release horses into that pasture.

TORNADO

Remain calm and use a matter of fact voice. Dismount as per instructor's directions. Sidewalkers will escort participants into back of wash stall. Leaders should put horses into stall area if time allows. Avoid windows, doors and downed power lines.

POWER OUTAGE

Remain calm and use a matter of fact voice. **DO NOT** dismount participants. Leaders stop horses and assume a halt position. Quietly reassure participant while listening for instructor directions until power is restored. Power outage during the grooming phase: Sidewalker should place participant on the wall safely away from the horse until power is restored.

MEDICAL EMERGENCY

Remain calm and use a matter of fact voice. Leaders stop horses and assume halt position. Quietly reassure your participant while listening for instructor directions. Stay with your participant and allow instructor to handle the emergency.

IF YOU ARE DESIGNATED TO CALL 911:

Call from phone located in entry area. In case of a barn fire use the house phone. **STAY ON THE PHONE** until emergency personnel arrive or you are told to hang up. Remain calm. Give your name, location, the nature of the emergency and directions to the facility. Request no sirens for rider and horse safety.

DIRECTIONS:

Address: 32553 County Road 50, Avon, MN
Highway 75 West out of St Cloud to I-94. Take the Avon exit and go left to Co Rd 50. Follow Co Rd 50 as it turns to the right and go 8/10 of a mile past the turn. Avon Hills Paints and Quarterhorses is located on the right at the top of the hill. Look for stone pillars with an archway labeled "Avon Hills".

General Procedures for Handling Body Fluids/ Injuries/First Aid

The following guidelines are meant to provide simple and effective precautions against the transmission of disease for all persons potentially exposed to the blood or body fluids of any other person(s).

Good hygiene practices should be used when handling body fluids or blood to prevent the spread of disease and infectious agents. All situations, no matter what bacteria or virus is present, should be treated the same.

Contact with body fluids presents a low risk of infection with a variety of germs. In general, however, the risk is very low and dependent on a variety of factors, including the type of fluid with which contact is made and the type of contact made with it. Use disposable equipment whenever possible.

- Ensure that your First Aid kit is accessible during program activity hours. (Tack stall)
- Direct skin contact with body fluids should be avoided. Disposable gloves are recommended when direct contact with body fluid is anticipated.
- Hands should be washed as soon as possible after any body fluid contact is made, with or without gloves. Hands should be washed for a minimum of 15-20 seconds with soap and warm water. Antiseptic towelettes should be used in the absence of running water.
- Encourage the person to self manage their own injury whenever possible through the use of paper towels and/or pressure to bleeding wounds or bloody noses.
- Place soiled towels or towelettes in a lined waste container. Urge the participant to do as much of this as possible. (This may not always be a practical solution).
- If practical, remove soiled clothing and place in a closed plastic bag for laundering.
- If you have an open wound on your hand, use gloves to handle or clean blood or body fluids. Wash your hands when you are finished.
- All persons with oozing lesions or weeping dermatitis should refrain from direct contact with others until the condition resolves.
- A disinfectant should be used to clean surfaces contaminated with body fluids.

The U.S. EPA (Environmental Protection Agency) should register the disinfectant for use as a disinfectant. Bleach water in a ratio of 10 parts water to 1 part chlorine bleach may be used in an emergency in the absence of a registered disinfectant.

The term body fluid may include blood, semen, drainage from scrapes and cuts, feces, urine, vomit, respiratory secretions (i.e. runny nose) and saliva.

Adapted in part from the American Federation of Teachers and MacNeil Environmental, Inc.

The Role of the Leader

By Susan F. Tucker

One of the most challenging duties that can be assigned to a volunteer is that of leader. A leader's first responsibility is the horse but he must also consider the sidewalkers, making sure there is enough room along the fence and around obstacles for them to pass.

An effective leader pays close attention to the rider's needs as well as to where the horse is going. This reinforces the rider's attempts to control the horse. However, you should not execute an instruction for the rider before he has time to process the information and make an effort to comply. Sometimes it may be appropriate to walk into the corner and stand until the student figures out what to do.

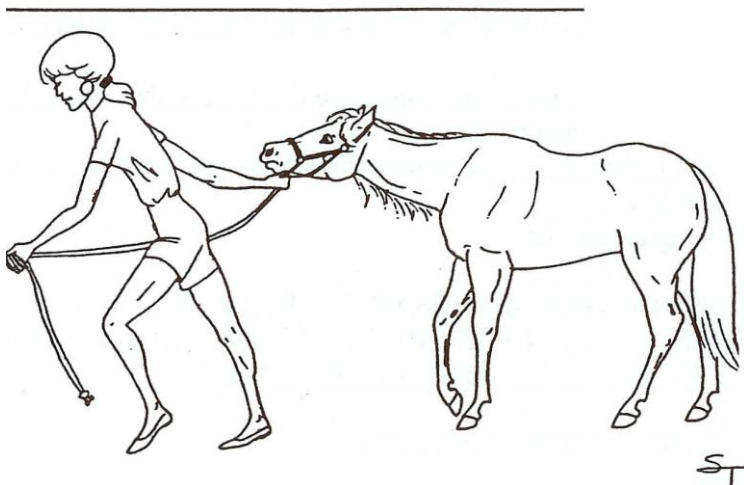


Figure A

Avoid the temptation to talk to the rider or sidewalkers. A rider may get confused by too much input and not know who's in charge. (Instructors often make terrible leaders because they can't keep their mouths shut!) **Figure A** depicts a few faults common among leaders. Here is a leader grimly marching along head down, one hand on the lead snap, the other inside the coiled end of the rope - dragging a strung-out horse. In a battle with a horse, you lose. You must get the horse to cooperate. Walk along side the horse, about even with his eye. This helps keep him in a proper frame, which is more beneficial for everyone.

Figure B

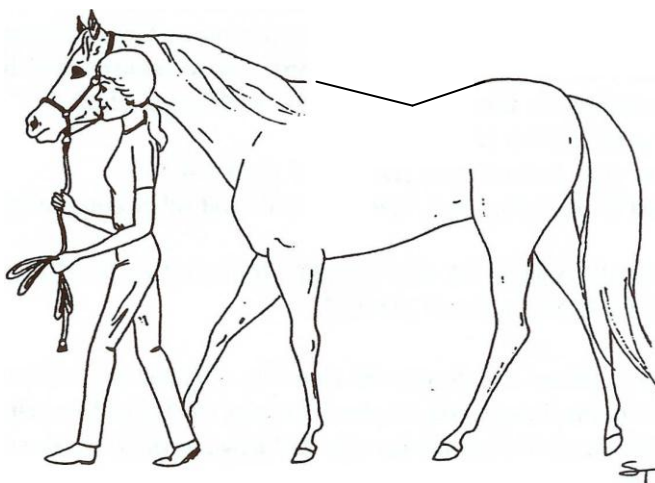
Talk to the horse; most of them know whoa, walk and trot, or can learn the words. Watch where you're going and what's happening around you. Do not walk backward to look at the rider. It's dangerous for everyone and the horse isn't eager to follow someone who can't see where he is going.

Figure B shows the correct position for leaders. The lead shank is held with the right hand 6 to 12 inches from the snap, allowing free motion of the horse's head. This is more therapeutic to the rider and less irritating to the horse. The tail end of the lead should be looped in a figure-eight in the left hand to avoid tripping on it. Never coil the rope around your hand. That could end a close relationship with your fingers!

Use short tugs rather than a steady pull to keep a lazy horse moving. The horse can set himself against a steady pull, but tugs keep him awake. Move out, about 1,000 steps per 15 minutes, to provide the most therapeutic benefit.

When you halt for more than a few seconds, stand in front of the horse with your hands on the halter's cheek pieces (if the horse permits), or loosely hold the lead or reins. Standing in front is a psychological barrier for the horse and he will stand more quietly than if he has an easy chance to move out. If you like your thumbs, don't put them through the snaffle or halter rings.

If the worst happens and there is an accident, stay with the horse.



There are other people to care for a fallen rider. The situation could easily become more dangerous if there are loose horses running around the arena. Move your horse as far from the fallen student as possible and keep calm. Listen for the instructor's directions.

These suggestions can help you control your horse, be a good aide to a rider and be a valuable assistant to an instructor. You will provide real therapeutic input to your rider, as well as make it safe for him to have fun riding.

Effective Sidewalking

By Susan Tucker and Molly Lingua,, RFT

Sidewalkers usually get the most hands-on duties in therapeutic riding. They are directly responsible for the rider. As such, they have the capability to either enhance or detract from the lesson. In the arena, the sidewalker should help the student focus his attention on the instructor. Try to avoid unnecessary talking with either the rider or other volunteers. Too much input from too many directions is very confusing to anyone, and to riders, who already have perceptual problems, it can be overwhelming. If two sidewalkers are working with one student, one should be the designated talker.

When the instructor gives a direction, allow your student plenty of time to process it. If the instructor says "Turn to the right, toward me," and the student seems confused, gently tap the right hand and say, "Right," to reinforce the command. You will get to know the riders and learn when they need help and when they're just not paying attention.

It's important to maintain a position by the rider's knee. Being too far forward or back will make it very difficult to assist with instructions or provide security if the horse should trip or shy.

There are two ways to hold onto the **unbalanced rider** without interfering. The most commonly used is the arm-over-the-thigh hold. The sidewalker grips the front of the saddle (flap or pommel depending on the horse's size) with the hand closest to the rider. Then the fleshy part of the forearm rests gently on the rider's thigh. Be careful that the elbow doesn't accidentally dig into the rider's leg.

Sometimes pressure on the thigh can increase or cause muscle spasticity, especially for riders with cerebral palsy. In this case, the therapeutic hold may be used. Here, the leg is held at the joints,

usually the knee or ankle. Check with the instructor or therapist for the best way to assist. In the (unlikely) event of an emergency, the arm-over-the thigh hold is the most secure.

Avoid wrapping an arm around the rider's waist. It is tempting, especially when walking beside a pony with a young or small rider, but it can offer too much and uneven support. At times, it can even pull the rider off balance and make riding more difficult. Encourage your student to use his own trunk muscles to the best of his abilities.

If the instructor chooses to use a transfer belt on your rider, be very careful not to pull down or push up on it. As your arm tires it's hard to avoid this, so rather than grip the handle firmly, just touch your thumb and finger together around it. This puts you in position to assist the rider if needed, but you will neither give unneeded support nor pull him off balance. When you are ready for relief for your arm, ask the leader to move into the center to stop. Then trade sides, one at a time, with the other sidewalker. If the rider has serious balance problems that warrant a transfer belt, two sidewalkers should be used.

During exercises, pay attention to the student. Sometimes volunteers forget that the riders are to do the exercises and the sidewalkers are to reinforce and assist. The same applies to games. **Don't get so competitive that your rider doesn't get to use his skills because you do it for him in an effort to win.**

The ultimate goal for therapeutic riding is to encourage the rider to stretch and grow. You are at his side, so help the instructor to challenge him to the best of his ability.

Project ASTRIDE's philosophy is to use the least amount of physical holds on a participant while maintaining their safety.



Safety Belts

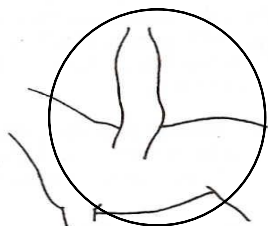
At one time in therapeutic riding, each new rider received a belt to wear during a lesson. The original purpose of the belt was to have something for the volunteer to grab (instead of the rider's clothing) in case of emergency or to help stabilize a rider with poor balance.

However, we have discovered how detrimental the weight of a volunteer's arm can be when it is attached to a belt. Therefore, try to wean your riders away from belts whenever possible. If the rider feels more secure with the belt on, instruct the sidewalker to use it only in emergencies.

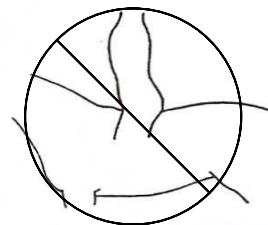
Replacing the safety belt is the "arm-over-the-thigh" hold. The sidewalker grips the front of the saddle (flap or pommel depending on the horse's size) with the hand closest to the rider. The forearm rests gently on the rider's thigh. The sidewalker should be careful that his elbow doesn't accidentally dig into the rider's leg.

Mounted Rider Postural Alignment

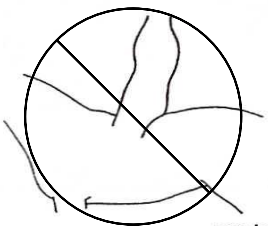
Neutral Pelvis
Correct Alignment



Anterior Pelvic Tilt



Posterior Pelvic Tilt
(Sacral Sitting)



Exercises

The Benefits

The benefits of exercises in a therapeutic riding program include stretching muscles, enhancing flexibility, improving balance, developing strength and relaxing and limbering areas of the body. Here are some important points:

- 1) At the halt, The leader must stand in front of the horse facing the rider. The sidewalkers must be attentive to the rider and assist as necessary and as directed.
- 2) Do no harm. Make sure that exercises are not harmful to the rider and do not aggravate his condition.
- 3) Set exercise goals for each rider. Goals should be designed with the rider's specific needs in mind.
- 4) Exercises should address the whole body, not just the arms and upper torso.
- 5) Exercises can be performed during movement, not only at the halt. Advance from doing an exercise at the halt to doing it at the walk and so on.
- 6) Make exercises progressive. Break an exercise down into interesting components, adding a new component, until the whole exercise can be performed with good results.
- 7) Quality of movement is an important factor in any exercise. It is not enough that Johnny circled his arms. Were his arms in as normal a position as possible for him? Were the circles as good as he could make them? Was the movement beneficial for him? Did the exercise challenge him to stretch just beyond his present level?
- 8) Allow sufficient time for the rider to process the instruction and act on what has been asked of them.
- 9) Volunteer assistants should be trained to help riders perform exercises correctly. Show volunteers how to facilitate each movement so the student understands and can feel his body move properly.
- 10) Be creative. You can bet that if you are bored doing an exercise, your student is bored too! Create something fun!

Helmet Fit

Consider:

What if the helmet is sitting too far back on the rider's head?

- What if the helmet is pushed to one side with the brim off center?
- What if the helmet covers the rider's eyes?
- What if the helmet is too big or too snug?
- Or, what about the rider who is irritated by the chin strap?

As a therapeutic riding instructor, you have surely observed a rider in one or more of these situations. You may have, at one time or another, been confronted with the problem of fitting a helmet to a differently shaped head. It is important to understand that the posture and balance of your student will be directly affected by the fit of the helmet.

To better understand how an ill-fitting helmet can affect balance, get a helmet and a horse and do these steps:

- 1) Put the helmet on, sliding it into position from back to front. Let it sit on the back of your head. Proceed, first at a walk and then at a sitting trot, around the ring. How do you feel?
- 2) Now pull the helmet too far forward, so the front of the helmet is resting on your eyebrows. Again, walk and trot. How does that feel?
- 3) Try tipping your helmet to the left or right and walk and trot. Notice what happens to your seat bones in the saddle. Is your weight evenly distributed? Do you feel in balance?
- 4) Now hold the brim of your helmet in one hand and twist the whole hat so it is off center. What does that do to your feeling of good body alignment?
- 5) Next, try all of the above with a helmet that is too small and that you have had to squeeze onto your head. Comfortable? How about your balance and posture now?
- 6) And the helmet that is too large? How does that feel to you, especially at the sitting trot?
- 7) Finally, review all of the above blindfolded (with a leader). The blindfolds will allow you to concentrate even more.

A properly fitted helmet should be snug. When introducing a helmet to a rider, have the rider wear it for few minutes to be sure it isn't so snug that it gives him a headache. After five minutes, remove the helmet. If there are marks on the rider's forehead, try the next larger size. Some helmets come with spacers-pieces of foam with sticky or hook-and-loop tape backs, which aid in fit.

The well-fitted helmet should stay on the head when harnessed without rocking or moving. Have the rider bend down at the waist and shake his head. With the manufacturer's suggested adjustments, the helmet should feel secure to the rider.

Some helmets have inside suspensions- four pieces of woven tape joined by a string, or a piece of cloth with draw lace fed through a tunnel of fabric. This adjusts how close the hat will sit to the top of the rider's head. Don't count on this feature for protection. It is intended to raise the helmet above the ears. If you use the suspension for comfort, you will need to adjust it every time you use the helmet.

If the helmet has laces at the back of the neck, check them frequently. This feature is designed to keep the cap from coming down in front and breaking the nose if the rider is hit from behind.

Try these fitting steps with your next session of students:

- 1) Place helmet on the head sliding it front to back. Allow it to rest so there are two fingers between the eyebrows and the edge of the helmet.
- 2) Make sure the helmet is centered correctly and fasten the chin strap. Depending on the recommendation of the manufacturer, the chin strap can be worn on the point of the chin, or under the jawbone. Just be sure it's tight so the helmet won't slip off in a fall.



TOO FAR FORWARD



TOO FAR BACK



BRIM TWISTED TO ONE SIDE



TIPPED TOO FAR TO THE RIGHT



PROPERLY FITTED

Posture and Movement

The Rider's Normal Response to the Horse's Movement



With Each Step

- 1) As the horse's trunk laterally flexes the rider is experiencing trunk rotation.
- 2) As the horse is rotating the rider's trunk is laterally flexing.
- 3) The rider's center of gravity shifts forward, backwards, up and down and side to side.

Tempo/Speed

Military cadence is 120 steps/minute or 3-1/2 miles/hour. The average adult individual walks at 105 steps/minute or 3 miles/hour. A large horse produces 60-90 hind leg foot falls per minute. A pony produces 115-130 hind leg foot falls per minute. . . A disabled individual walks at a slower speed and can thus adjust to the slow, rhythmical movement of a horse better than that of a pony.

When Circling to the Right

First response-rider's trunk shortens on the right and lengthens on the left, (increased weight bearing on the left).

Second response-posture adjusts to be symmetrical with weight slightly to the right.

Position of the Rider

By Lorrie Renker and Martha Biery

All riders strive toward the "ideal" riding position. It should be no different for riders with

disabilities. Instructors often appear afraid to make position corrections. Not all your riders will be able to achieve the ideal position, but that doesn't mean you shouldn't try. The rider's position has little to do with looking good and everything to do with being in balance and moving in harmony with the horse. The better the body alignment the better the therapeutic benefits.

The best way to evaluate the rider's position on the horse is to step back and view the rider from all angles. The rider may look great from the side but could be off center when viewed from behind. Don't be afraid to make corrections. Here are some common problems to look for:

- 1) When viewed from behind, the rider should sit as straight as possible (**Figure A**)
Many riders will sit to one side and then have to make corrections in the rest of the body to maintain balance. When this happens, one foot will appear lower than the other. **Figure B** shows a rider with the left foot lower, the pelvis leaning to the left, and the upper body correcting to the right. **Figure C** shows just the opposite-the right foot lower, the pelvis leaning to the right, and the upper body correcting to the left. This position does not help the rider strengthen muscles evenly. Correcting this position usually requires aligning the rider's base (get the butt square in the saddle).

- 2) When viewed from the side, the rider should sit as straight as possible (**Figure D**). We often see riders in the "sofa seat" or "C" curve (**Figure E**). Often the rider will sit up if asked. Sometimes the position will reflect the rider's posture off the horse. Encouraging elongation of the leg usually improves the posture. To achieve a better position, it may be necessary to evaluate the saddle. Is the saddle level on the horse so that it will encourage a good position? Just placing a bounce pad or lollipop under the saddle does not insure a level saddle. Often the weight of the rider compresses the pad completely, resulting in a backward sloping saddle. It is literally impossible

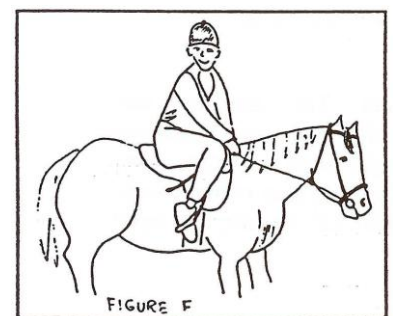
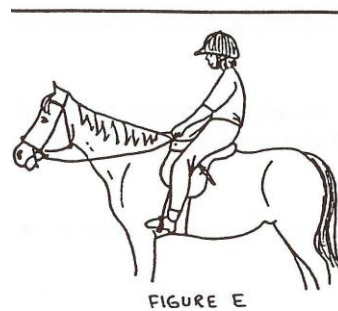
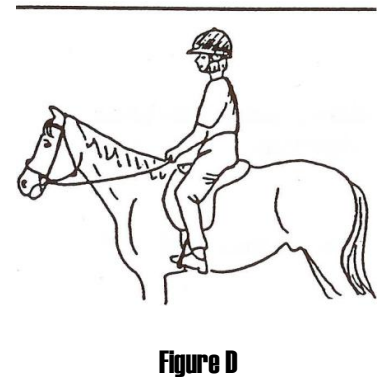
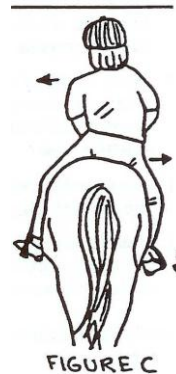
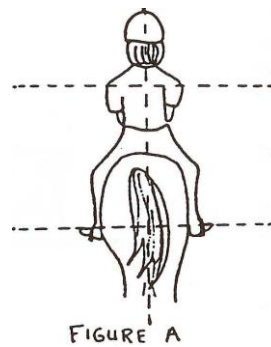
to keep the leg positioned under the rider's pelvis in these circumstances. Use of a foam pad with more density will help. Ideally, the saddle should be fitted correctly to the horse and the rider.

3) Figure F shows a rider with a toe down and the leg pinched up. This could indicate a rider with tight adductor muscles, an extreme forward-seat saddle or stirrups that are too short. The rider should be encouraged to lengthen his leg. This could be achieved by having him ride without stirrups or trying a different style of saddle.

The important thing to remember is to constantly evaluate the rider's position. Consider all factors, such as disability limitations, posture off the horse and equipment used. Then work toward improving the rider's position.

General Exercise Principles

- 1) Exercises performed on horse back encourage balance and suppleness that permits the student to follow the horse's movements at all paces. Exercises help develop independent use of individual parts of the body resulting in the student achieving a better seat and greater control of the horse.
- 2) Exercises are developed to improve flexibility, strength, endurance and posture as well as to prepare the body and mind for the lesson activities or to learn a new skill
- 3) Perform all new exercises at the halt then progress to the walk once the student can perform them correctly.
- 4) Perform movements slowly during the learning phase and watch for the effect on posture and position in the saddle.
- 5) Encourage rhythm and fluidity of movement
- 6) Keep in mind the student's abilities and limitations.
- 7) Give the student time to perform the exercises correctly.
- 8) Encourage quality of movement not just half-hearted attempts by the student
- 9) Assist student as needed using visual cues (demonstration), verbal cues or tactile (touch) cues.



UNDERSTANDING HORSE BEHAVIOR

EQUINE SENSES

When developing relationships and working with horses, communication is key. It is critical to provide a safe environment in a therapeutic riding setting. Beginning a process of understanding the horse senses, instincts and implications is a step in predicting behaviors, managing risks and increasing positive relationships.

SMELL:

The horse's sense of smell is thought to be very acute and it allows him to recognize other horses and people. Smell also enables the horse to evaluate situations.

Implications:

- Allow horses the opportunity to become familiar with new objects and their environment by smelling.
- It is recommended that treats are not carried in your pocket since horses may desire to go after them.
- Volunteers should be discouraged from eating or having food in the arena.

HEARING:

The horse's sense of hearing is also thought to be very acute. The horse may also combine their sense of hearing and sight to become more familiar with new or alerting sounds. "Hearing and not seeing" is often the cause of the fright/flight response. Note the position of the horse's ears (*pictures following article*). Forward ears communicate attentiveness and interest. Ears that are laid back often communicate that they are upset and/or showing aggression towards another horse or person.

Implications:

- Horses are wary when they hear something but do not see it. If your horse is acting nervous, talk to him in a quiet and calm voice for reassurance.
- Avoid shouting or using a loud voice. This can be frightening to a horse.
- Watch your horse's ears for increased communication. Stiffly pricked ears indicate interest. Drooping ears indicate relaxation, inattentiveness (easily startled), exhaustion or illness. Flattened ears indicate anger, threat or fear. Ears flicking back and forth indicate attentiveness or interest.

SIGHT:

The horse's eyes are set on either side of the head; there is good peripheral (lateral) vision, but poorer frontal vision. A horse focuses on objects by raising and lowering its head. The horse's visual memory is very accurate. Horses are thought to see quite well in the dark, due to the large size of their eyes. There is still controversy as to whether or not horses see in color.

Implications:

- The horse may notice if something in the arena or out on a trail is different. Allow the horse an opportunity to look at new objects. Introduce new props that the horse may be unfamiliar with.
- The horse has better peripheral vision; consider a slightly looser rein, enabling him to move his head when taking a look at objects.
- Although the horse has good peripheral vision, consider their two blind spots: directly in front and directly behind. The best place to approach a horse is at his shoulder. It may startle him if you approach from behind or directly in front. The horse may be unable to see around the mouth area, which is a safety consideration when hand feeding.

TOUCH:

Touch is used as a means of communication between horses and between horses and people. Horses are sensitive to soft or rough touch with a person's hands or legs.

Implications:

- Handlers should treat the horses gently but firmly.
- Each horse has sensitive areas, and it is important to be familiar with them (i.e. flank and belly areas).
- Watch participant leg position. Riders may need appropriate assistance to reduce a "clothes pin" effect with their legs. Ask the instructor/therapist what is the best handling technique.
- Horses will often touch or paw at unfamiliar objects. For example, a horse may paw at a bridge or ground pole before crossing over it.

TASTE:

Taste is closely linked with the sense of smell and helps the horse to distinguish palatable foods and other objects.

Implications:

- Taste is closely linked with smell and touch; therefore, a horse may lick or nibble while becoming familiar with objects and people. Be careful, as this could lead to possible biting.

SIXTH SENSE:

Horses do have a "sixth sense" when evaluating the disposition of those around him. Horses can be hypersensitive in detecting the moods of their handlers and riders. A good therapy horse is chosen for their sensitive response to the rider. At times there may exist a personality conflict between handlers and horses. It is important to the instructor/therapist to know if you're having a difficult time relating or getting along with a particular horse.

THE HORSE'S LIFESTYLE:

In addition to understanding the horse's sixth senses, we need to appreciate and increase our awareness of the horse's lifestyle. This will assist us in responding appropriately to his reactions to situations.

FLIGHT AS A NATURAL INSTINCT:

Horses would rather turn and run away from danger than face and fight it.

Implications:

- At a sudden movement or noise, the horse might try to flee. Speak to the horse calmly.
- A frightened horse that is tied up or being held tightly might try to escape by pulling back. Relax your hold or untie him quickly and usually he will relax. Be sure not to stand directly behind the horse.
- If flight is not possible, the horse could either turn to kick out or face the problem and rear, especially in a tight area like the stall. A halter with a lead rope may assist with maintaining control while working around the horse in a stall.
- If a horse appears to be frightened or fearful (note the position of the horse's ears in pictures following article), it may be helpful to allow a more experienced horse to lead.
- Most horses chosen to work in a therapeutic riding setting have less of an instinct to flee. The horse may look to you for reassurance. It is helpful if the volunteer remains calm and talks to the horse in a soothing voice.

HERD ANIMAL:

Horses like to stay together in a herd or group with one or two horses dominant, with a pecking order amongst the rest.

Implications:

- Be aware that a horse may not like being alone. This is a consideration when horses are leaving the arena or a horse loses sight of the others while on a trail ride.
- Be aware that if the horse in front of a line is trotting or cantering, the horse that is following may also attempt to trot or canter.
- If one horse spooks at something, the surrounding horses may also be affected.
- For safety, it is recommended to keep at least one horse's length between horses when riding within a group in order to respect the horse's space and pecking order.

Being aware of horse behavior is one of the best safety precautions that can be used in your facility. Knowing how to read your horse can prevent an accident and increase the quality of your "mutual" relationship.

Reference: RDA (Please note additions and modifications have been made to the original content. Original format of subtitles remains the same).

Appendices included:

- A - Notes on each of the Cranleigh RDA Horses from Jean Stenning - Stable Manager, Cranleigh RDA
- B - Notes from physiotherapists about helping with learning and physical disabilities
- C - Some Basic School Figures
- D - Horse with tack for RDA (From RDA Test 3)
- E - Basic Points of the Horse (From RDA Test 3)

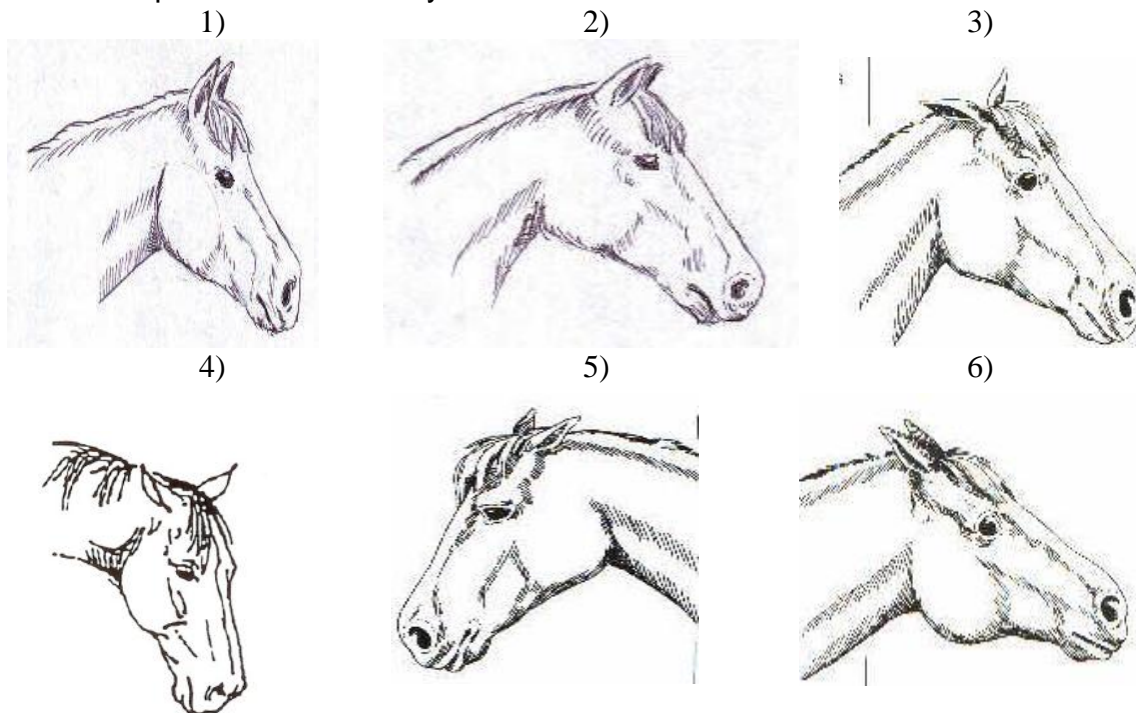
Volunteer Manual for NARHA Centers, Rev. 10/00

Reading a Horse's Ears

A horse's ears speak loudly about his emotions. They show us where a horse's attention and also are an indicators of potentially dangerous behavior soon to come.

Ears show many things:

1. Both ears pricked forward and relaxed means a horse is interested in something.
2. Both ears pricked forward and an arched neck indicates the horse may panic.
3. One ear forward and one aside or backwards means that they are relaxed and listening or watching something ahead and to something to the side or behind them. Ears that swivel frequently may indicate the horse is becoming nervous or worried.
4. Both ears slightly drooped and facing outward is a sign that the horse is extremely relaxed. Possibly even sleeping. Use a quiet voice when approaching in order to avoid spooking the horse into wakefulness.
5. Both ears back means they are alert to something behind them. It may indicate a concern so approach with a quiet voice and with caution.
6. Both ears pinned back and flattened against their neck indicates extreme danger to you or another horse. Be prepared to encounter a kick or bite if this occurs. Stay well out of the horse's reach. Often this can be seen in a pasture, especially over hay. It is a mechanism to keep other horses away.

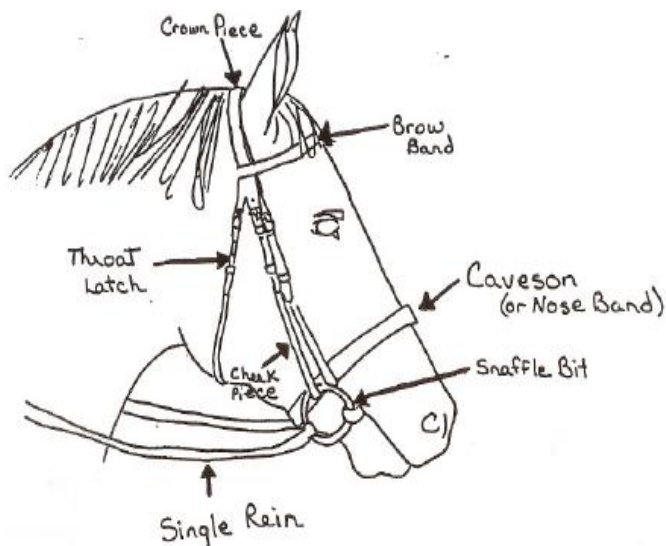


Watching a horse's tail is also an indicator of horse behavior.

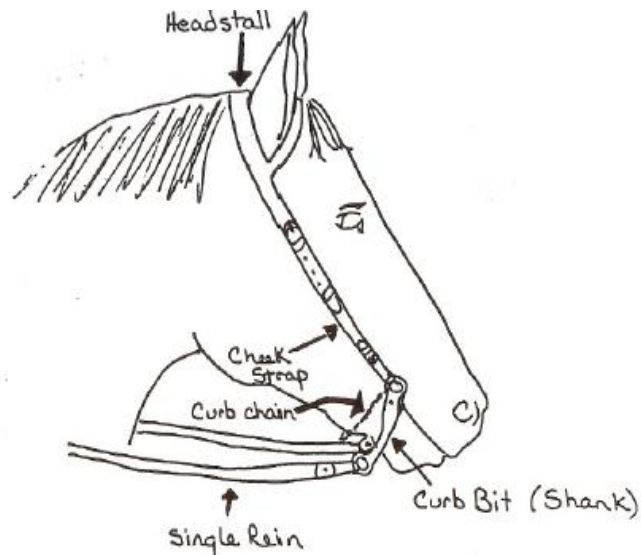
- A rapidly swishing tail may indicate flies, ticks or a concern about something behind them. **BE ALERT!**
- A tail pinned tightly may indicate panic, a coming kick or bolt! **BE ALERT!**
- If a horse swings their head like a pendulum and/or has a tight wrinkled lip. **BE ALERT!**

**MAKE SURE TO REMOVE PARTICIPANT FROM THESE SITUATIONS IMMEDIATELY!
NOTIFY THE INSTRUCTOR OF THESE BEHAVIORS PROMPTLY!**

ENGLISH SNAFFLE BRIDLE

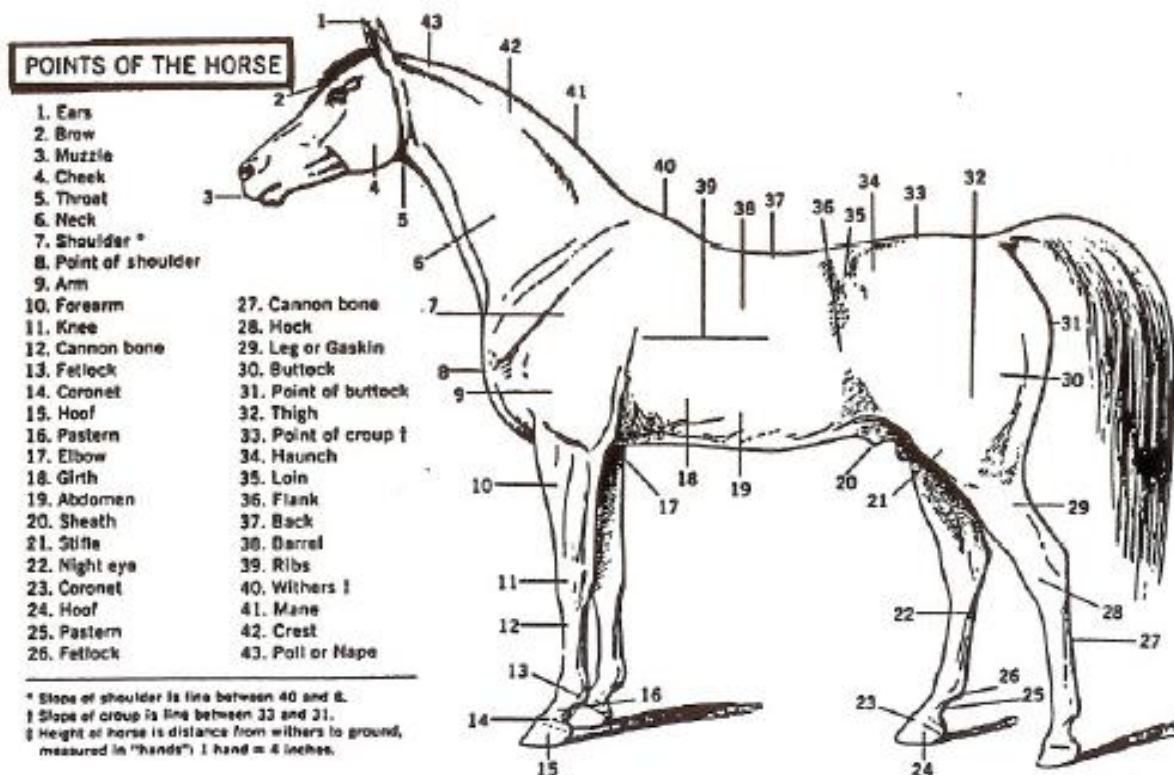


WESTERN CURB BRIDLE

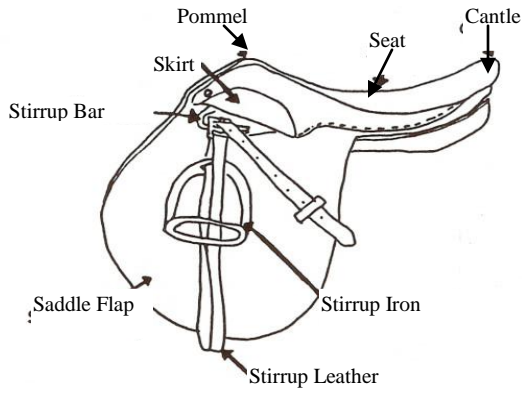


Nosebands are typically not used as the halters remain on under the horse's bridle for safety purposes.

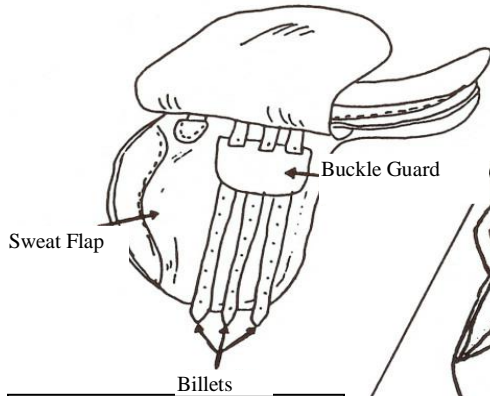
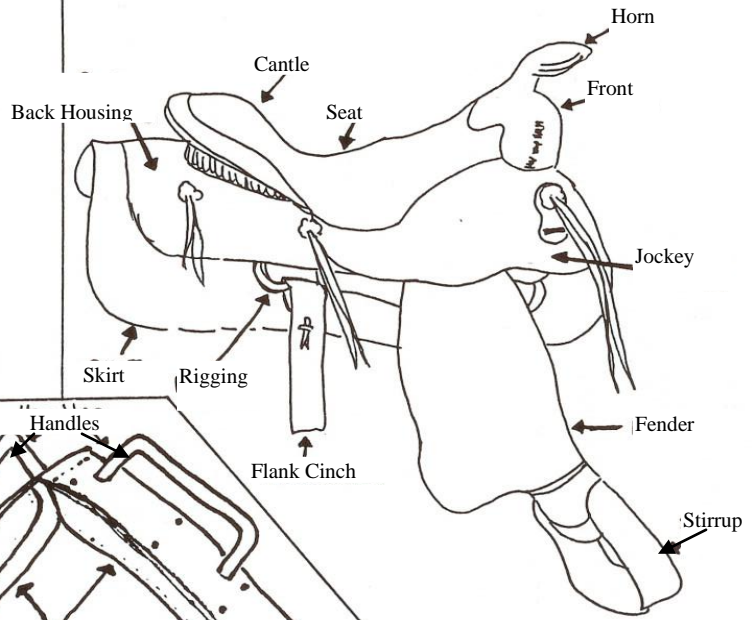
A variety of reins are used in Project ASTRIDE. We use multi-colored reins (Rainbow reins), Red and Blue reins (Red on the right, Blue on the left), Ladder reins (for one handed use) and Loop reins (for a better grasp).



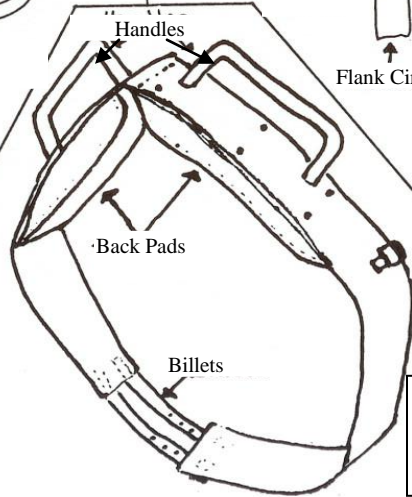
Knowing the general parts of a horse and its tack may aid you during "dead" times in classes or grooming to challenge and educate your student about additional aspects of their equine friend.



WESTERN SADDLE

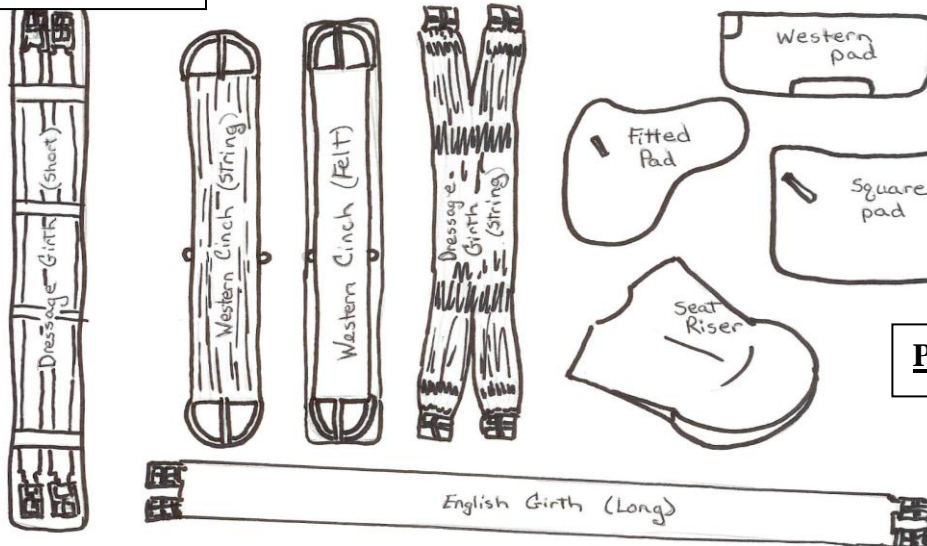


ENGLISH SADDLE



VAULTING SURCINGLE

GIRTHS & CINCHES



PADS

GLOSSARY OF EQUINE TERMINOLOGY

Aids/ Queues-	Signals the rider gives to the horse to control speed and directions a.) Natural Aids/Queues: legs, seat, weight, hands, voice b.) Artificial Aids/Queues: whip, spurs, martingale
Bend-	Refers to the horse shaping his body slightly to the curve of a circle or turn; the horse “bends” his body around the rider’s leg.
Change of rein/ direction-	To reverse direction.
Driving aids/ queues-	The combination of seat and legs used to ask the horse to go forward.
Figure eight-	Riding two connecting circles
Flexion-	Bending of the horse’s neck and body with relaxation of the jaw in response to directional aids.
Forehand-	The front section of the horse; forelegs, shoulder, neck, and head.
Free walk-	A walk on a “loose rein” (long rein) which allows the horse to stretch its neck.
Gait-	The horse’s way of going. Paces; walk, trot, pace, lope, canter, gallop.
Haunches-	The hindquarters of a horse.
Horse length-	The suggested distance between horses (eight feet).
Inside leg-	The leg on the inside of the arena (or) the bend of the horse.
Jog-	A slow trot in western riding.
Leg yielding-	Moving the horse sideways and forward, predominantly with one’s leg.
Lengthening of stride-	Increasing the length of the stride within a set frame.
Near side-	The left side of the horse.
Off side-	The right side of the horse.
On the bit-	When the horse willingly accepts contact with the bit. The face is almost vertical, neck slightly arched with a light contact maintained.
Outside leg-	The rider’s leg on the outside of the arena or turn (bend, circle).
Posting-	“Rising trot” the rising and descending of the rider with the rhythm of the trot.
Schooling figures-	Movements performed to train the horse and rider. I.E. Circles, ½ circles etc.
Sitting trot-	The rider sits deeper in the saddle and maintains a soft contact with the saddle.
Serpentine-	Series of ½ circles and straight lines crossing the arena a number of times.
Shortening of stride-	Decreasing the length of the stride within a set frame.
Stride-	One complete pattern of the footfalls of all four feet.
Track right-	Riding with the right rein to the inside of the arena.
Track left-	Riding with the left rein on the inside of the arena.
Transition-	To change gaits or changing the stride length within the gait.

This glossary is intended to familiarize our volunteers with equine terminology commonly used in a riding lesson.

GLOSSARY OF PHYSICAL & COGNITIVE DISABILITIES

The following are brief, non-medical descriptions of some disabilities and conditions of participants that one might encounter in a therapeutic riding setting. This is not intended as a comprehensive explanation of a specific disability. Rather, it is a general overview with an explanation of how therapeutic riding can be beneficial.

Arthritis

Inflammatory disease of the joints.

Types: Osteo, rheumatoid and juvenile rheumatoid.

Characteristics: Pain; lack of mobility; deformity; loss of strength.

Benefits (of therapeutic riding): Gentle rhythmic movement to promote joint mobility and relieve pain.

Autism

A self-centered mental state from which reality tends to be excluded.

Characteristics: Unresponsiveness to the presence of others; withdrawal from physical contact; severely delayed and disordered language; self-stimulating behaviors; unusual or special fears; insensitivity to pain; unawareness of real dangers; hyperactive; passive; unusual behaviors such as melling/tasting/licking/mouthing all objects; ritualistic behaviors; developmentally delayed; unusual response to sounds; clumsiness; social withdrawal; resistance to change.

Benefits: Interaction in a group setting stimulates interest away from self and toward others and the horses. Postural and verbal stimulation.

Cerebral Palsy

Brain damage occurring before, at, or shortly after birth. It is a non-progressive motor disorder.

Types and Characteristics:

Spastic - hypertonicity with hyperactive stretch reflexes, muscle imbalances and equilibrium. Increased startle reflex and other pathological reflexes.

Athetoid - extensor muscle tension, worm-like movements, abnormal posturing and slow and deliberate speech.

Ataxic- poor balance, difficulty with quick, fine movements and are often described as having a "rag doll" appearance.

Benefits: Normalization of tone, stimulation of postural and balance mechanisms, muscle strengthening and perceptual motor coordination.

Associated Problems: Seizures; hearing defects; visual defects; general sensory impairment; perceptual problems; communication problems; mental retardation; emotional disturbance; learning disabilities.

Cerebral Vascular Accident - Stroke (CVA)

Hemorrhage in brain, which causes varying degrees of functional impairment.

Characteristics: Flaccid or spastic paralysis of arm and leg on same side of body. May impair mentation, speech, sight, balance, coordination and strength.

Benefits: Promotes symmetry, stimulates balance, posture, motor planning, speech and socialization.

Developmental Disabilities (DD)

A general term applied to children functioning two or more years below grade level.

Characteristics: Varied, but can include slow physical, motor and social development.

Benefits: Provides arena for success, opportunity for sport and recreation, stimulates body awareness.

Down Syndrome

Condition in which a person is born with an extra chromosome, resulting in mental retardation and developmental delay.

Characteristics: Broad flat face, slanted eyes, neck and hands are often broad and short. Usually hypotonic, have hypermobile joints and tend to be short and slightly overweight. Prone to respiratory infections.

Benefits: Riding improves expressive and receptive language skills, gross and fine motor skills, balance, posture, muscle tone and coordination.

Emotional Disabilities

A congenital or acquired syndrome often compounded by learning and/or physical disabilities incorporating numerous other pathologies.

Characteristics: Trouble coping with everyday life situations and interpersonal relations. Behaviors such as short attention span, avoidance, aggression, autism, paranoia or schizophrenia may be exhibited.

Benefits: Increases feelings of self-confidence and self-awareness, and provides appropriate social outlet.

Epilepsy

Abnormal electrical activity of the brain marked by seizures with altered consciousness.

Types and Characteristics:

Petite Mal: Brief loss of consciousness with loss of postural tone. May have jerky movements or a blank expression.

Grand Mal: Loss of consciousness and postural tone. Usually preceded by an aura. (Note: An active seizure disorder is a contraindication for horseback riding).

Hearing Impairment

Congenital or acquired hearing loss varying from mild to profound.

Characteristics: Communication difficulties - may use lip reading, finger spelling (manual alphabet) or sign language. Often phase out and have attention deficits.

Benefits: Stimulates self-confidence, balance, posture and coordination. It also provides appropriate social outlets and interactions.

Learning Disabilities (LD)

Catch-all phrase given to individuals who have problems processing, sequencing and problem solving, but who appear to have otherwise normal intelligence skills.

Characteristics: Short attention span, easily frustrated, immature.

Benefits: Effects depend upon the particular disorder. Stimulates attention span, group skills, cooperation, language skills, posture and coordination.

Mental Retardation (MR)

Lack of ability to learn and perform at "normal" and acceptable levels. Degree of retardation is referred to as educable, trainable, severe or profoundly retarded.

Characteristics: Developmentally delayed in all areas. Short attention span.

Benefits: Stimulates group activity skills, coordination, balance, posture, gross and fine motor skills and hand-eye coordination. Provides a structured learning environment.

Multiple Sclerosis (MS)

Progressive neurological disease with degeneration of spinal column tracts, resulting in scar formation.

Characteristics: Most commonly occurs in the 20 to 40-year-old range. It is progressive with periods of exacerbation and remissions. Fatigues easily. Symptoms include weakness, visual impairment, fatigue, loss of coordination and emotional sensitivity.

Benefits: Maintains and strengthens weak muscles and provides opportunities for emotional therapy.

Associated Problems: Visual impairment, emotional liability, and impaired bowel and bladder function.

Muscular Dystrophy (MD)

Deficiency in muscle nutrition with degeneration of skeletal muscle. Hereditary disease that mainly affects males.

Characteristics: Progressive muscular weakness, fatigues easily, sensitive to temperature extremes.

Benefits: Provides opportunity for group activity, may show progressive loss of strength, stimulates postural and trunk alignment, and allows movement free of assistive devices.

Associated Problems: Lordosis, respiratory infection.

Polio

Infectious viral disease.

Characteristics: Flaccid paralysis, atrophy of skeletal muscle, often with deformity.

Benefits: Strengthens non-paralyzed muscles, stimulates posture.

Scoliosis

Lateral curve of the spine with a C or S curve with rotary component.

Characteristics: Postural asymmetry. May wear scoliosis jacket stabilization or have had surgery. (Fusion, rods)

Benefits: Stimulates postural symmetry. Strengthens trunk muscles. (Note: severe scoliosis is a contraindication for therapeutic riding).

Spina Bifida

Congenital failure of vertebral arch closure with resultant damage to spinal cord.

Characteristics: Varying degrees of paralysis of the lower limbs coupled with sensory loss.

Problems: Infection, lordosis, scoliosis and hip dislocations.

Benefits: Stimulates posture and balance, improves muscle strength and self image.

Associated Problems: Hydrocephalus, incontinence, urinary tract infection, lordosis, scoliosis and hip dislocations.

Spinal Cord Injury (SCI)

Trauma to the spinal cord resulting in a loss of neurological function.

Characteristics: Paralysis of muscles below the level of injury - can be flaccid or spastic. Fatigue, sensory loss and pressure sores.

Benefits: Stimulates posture and balance, strengthens trunk muscles, is an option for sports participation and recreation.

Traumatic Brain Injury (TBI)

Accidental injury to the head resulting in intra-cranial bleeding with death of brain cells.

Characteristics: Gross and fine motor skills deficits. Often have impaired memory, speech, balance and/or vision. May have psychological effects.

Benefits: Stimulates balance, posture, gross and fine motor skills, speech and perceptual skills.

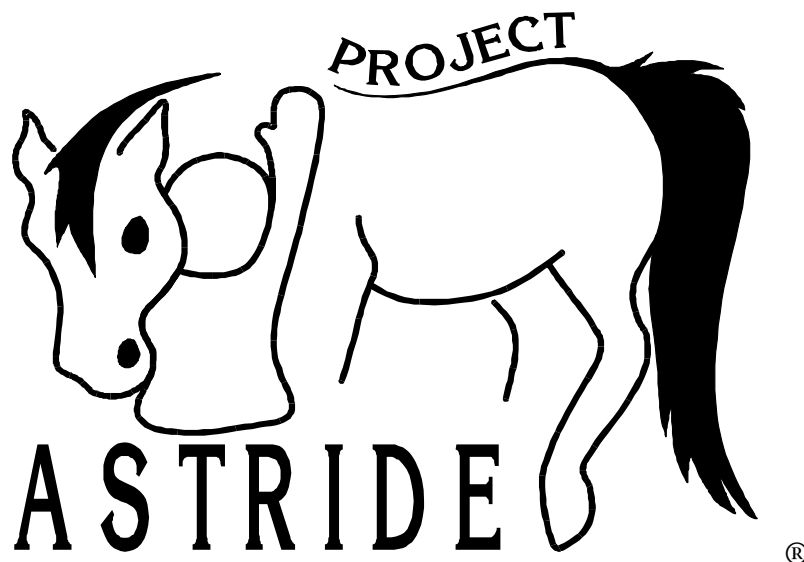
Visual Impairment

Moderate to total loss of sight.

Characteristics: Insecure posture, lack of visual memory, anterior center of gravity, fearfulness, and developmental delay.

Benefits: Stimulates spatial awareness, proprioception, posture and coordination. Equine activities provide social outlet, structured risk taking and freedom of movement.

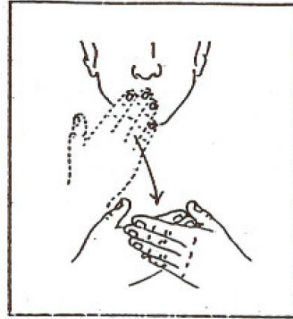
**Thank-you for the time, dedication and sincerity
you offer to the field of Therapeutic Riding!
Take time to become familiar with Center
information provided to you!
It can make a difference!**



SIGN LANGUAGE



you're welcome



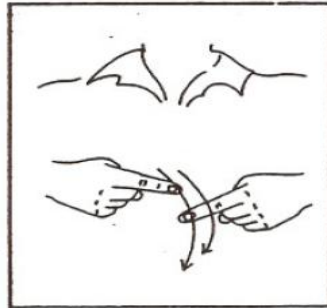
good



thank you



stop



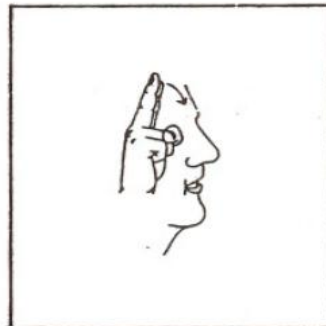
go



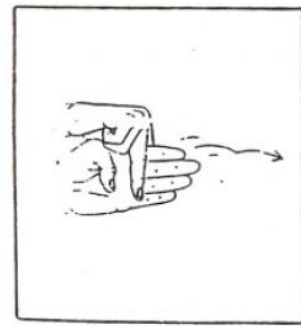
understand



toilet



horse



horseback riding

These are VERY basic signs for rudimentary communication with a hearing impaired participant. Visit <http://www.dhs.state.mn.us/ECS/dhhs/contactus.htm> to contact your local hearing services to learn more.

Or visit <http://www.masterstech-home.com/ASLDict.html> for some more signs.

Tips for better communication:

Face the participant and make eye contact before attempting communication.

If appropriate first ask the participant the best way to get their attention. A light touch on the arm or leg will often get their attention.

Many hearing impaired participants can read lips if you speak normally.

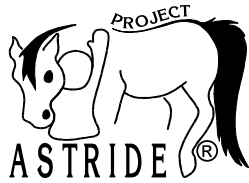
Consult with the parent or caregiver for a participant's "special" signs.

Be concise and to the point when being lip read so that the participant can focus on performing the task given.

Model the behavior visually so the participant can mimic you.

101 WAYS TO BECOME A MORE EFFECTIVE VOLUNTEER!

- Treat riders and horses kindly but firmly.
 - Give instructor feedback about the rider at appropriate times.
 - Do not mistreat or abuse horses or riders.
 - Consider safety first at all times!
 - Assist your rider in maintaining the order of activity, the horse's spacing, and positions of hands and body when necessary.
 - Remain calm in an emergency and remember your job(s).
 - Praise should be given equivalent to the deed accomplished.
 - Smiles say a thousand words...only louder!
 - Acknowledge the efforts of your rider.
 - Consult instructor/staff in praise techniques for each rider.
 - Allowing riders to feel upset helps them accept their feelings.
 - Do not hang or rest on horse, rider, fencing or rails.
 - Always inform a rider before touching them.
 - Wear sensible clothing and shoes.
 - Minimize the distractions for riders who are easily distracted.
 - First ask the rider to do the task independently, then assist.
 - Ensure a rider's feet are out of stirrups prior to dismounting.
 - At first, offer support at the trot.
 - Always encourage the rider to thank the horse.
 - Maximize, not minimize, your rider's capabilities.
 - If you're afraid or apprehensive the horse will know it.
 - Do not talk through your rider...talk to your rider.
 - Support your team, don't criticize or make fun of others.
 - Encourage teamwork.
 - Re latch all doors and gates behind you.
 - If you're not sure...don't be afraid to **ask questions!**
 - Notify an instructor immediately if a horse is acting oddly.
 - The riding instructor is in charge of all riding emergencies.
 - Never approach an unsuspecting horse from the rear.
 - Never walk under a horse's neck.
 - Be familiar with your center's emergency procedure(s).
 - Contact the instructor re all mishaps and their circumstances.
 - Stay attentive to the horse, rider, instructor and situation.
 - If you are unable to understand a rider ask for assistance.
 - Never hand feed the horses.
 - Park in designated areas.
 - Be reliable, everyone is depending on you to do your part.
 - Be courteous and respect each person's needs.
 - Promptness and reliability are key to a program's success.
 - Greet your rider upon arrival & acknowledge their departure.
 - Notify a volunteer organizer ASAP of scheduling conflicts.
 - Maintain a professional but friendly relationship with a rider.
 - Your genuine friendship and empathy are appreciated.
 - Do not prejudge a person's abilities.
 - Remain calm in any emergency or stressful situation.
 - Weakness in the rider's neck and trunk require precaution.
 - Give verbal cues prior to change for the visually challenged.
 - Remember that smoke may irritate the sensitive rider.
 - Make new friends while being of assistance to others.
 - Make reference to the person first not the disability.
 - To further understand a rider, try to observe them. The eyes, mouth, face and body movements are all key communicators.
 - Accept each individual as they are and respect each person's individual needs.
 - Listen to & help the rider focus on the instructor's directions.
 - Respect everyone's right to confidentiality.
 - Know and respect your center's policies.
 - Encourage the rider to be as independent as possible.
 - Allow a rider to fail as well as succeed.
 - Bring your positive energy not your problems to the rider.
 - Be attentive to the instructor. Keep talking to a minimum.
 - Allow the riders efforts to succeed in games, not yours.
 - Allow the rider ample time to process a direction.
 - Help maintain a safe and welcoming environment.
 - Never wrap a lead around your hand, butterfly wrap the excess.
 - Check clothing under rider's legs to make sure it's not binding.
 - Be conscientious about dress and personal hygiene.
 - Remain calm and avoid rushing.
 - Offer physical support only when needed.
 - Be willing to learn and participate in center educational programs.
 - Supervise riders when away from their caregiver or parents.
 - Don't suffer through a personality clash. Ask to be reassigned.
 - Treat one another as you would like to be treated.
 - Never become so relaxed or distracted as to forget your rider.
 - If using a safety belt, don't pull your rider off balance.
 - Allow riders to share their lives and friendship without prying.
 - Return things to the spot where you found them.
 - Use a halter and a lead line when going to and from stabling areas.
 - If something is broken or needs fixing, let someone know.
 - If a horse is lame or injured tell an instructor immediately.
 - If a rider has fallen never move them. Defer to the instructor.
 - Pet a horse on the neck or shoulder not on their face.
 - Always clean up after yourself & put away your personal items.
 - Any form of injury to yourself or others must be reported
 - Pay attention to how you move and know your physical limits.
 - When lifting use your legs not your back.
 - Do not run or make loud noises around horses.
 - Be aware of the phone and first aid kit location(s).
 - Do not bring pets, children or others without prior permission.
 - Respect your co-workers and their responsibilities.
 - Sign or check in and out every time you volunteer.
 - Check your schedule and get a nametag upon your arrival.
 - Choose your words carefully, they can impact others lives.
 - Call in advance if ill or unable to report for your assignment.
- Patience + Praise = Success & Results
- Be attentive to signs of rider fatigue and frustration.
 - Be sincere in the offer of services.
 - Do not force a rider's body parts into desired positions.
 - Alert the instructor immediately if a seizure takes place.
 - Be sober and drug free whenever you volunteer.
 - Enjoy the pleasure in helping in an assisted riding experience.
 - Share knowledge and experiences with others.
 - Maintain the dignity and integrity of the Center's service.



PROGRAM STAFF DIRECTORY 2011

INSTRUCTORS:

Clare Palmquist, Certified Advanced NARHA Instructor
 Laurel Theis, Certified Registered NAHRA Instructor
 Alice Sue Becker, Certified Registered NAHRA Instructor
 Shellie Kremers, Certified Registered NAHRA Instructor

VOLUNTEER COORDINATOR:

Marti Marrinan
 Email: martiastride@yahoo.com Phone (320) 255-9652

HORSE CARE AND FACILITY OWNERS:

Rick and Marlys Backes

Project ASTRIDE Board Members 2011	
Gwen Marshall (President)	Linda Baune
Linda Peterson (Vice President)	Chris Shorba
Dr. Greg Schlosser (Treasuer)	Anita Hollenhorst
Shellie Kremers (Secretary)	Laurel Theis
Clare Palmquist (Program Director)	Alice Sue Becker

Procedures for:

Volunteer grievances on scheduling and policy should be directed to the volunteer coordinator. In the event that you feel unable to share your concerns with this person comments should be directed to a riding instructor.

Volunteer input on participants, see “Progression of Activities” pg. 7