

THERAPEUTICAL RIDING AND ITS BENEFITS IN PSYCHOPATHOLOGY

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ABSTRACT

The literature available in Brazil is too scarce to explain the complexity of the method that utilizes horses as therapeutic agents in psychotherapeutic interventions. The present study aims to contextualize the theory of therapeutic equitation and its benefits in psychopathology found in German literature with the practice of equotherapy developed in Brazil. Therapeutic riding acts in a different manner for each clinical condition of psychopathology, having a multifocal character that considers the diagnosis, planning of strategies, as well as the prognosis. In the setting with the horse, it is possible to register the role that the animal plays for practicers in the elaboration of certain conflicts. During the therapeutic riding process, the therapist encounters space to describe the psychopathological phenomena observed in relation to the practicer with the horse and, as the practicer acquires internal resources to recognize and elaborate them, progress is occurring, making the changes and benefits visible to the practicers. The setting of therapeutic riding is preceded by a detailed investigation of expectations, complaints and the practicer's requests to the therapist. The present study shows the need for more publications on the therapeutic riding method in psychopathologies since its efficiency has been proven in Brazil and the results are in accordance with German literature. In Brazil, the utilization of horses as therapeutic agents has increased significantly in recent years. However, there are still no courses offering specialization in the area of therapeutic riding with emphasis on the formation of professionals to attend psychopathological practicers.

Keywords: equotherapy, therapeutic riding, psychopathology, benefits, settings

INTRODUCTION

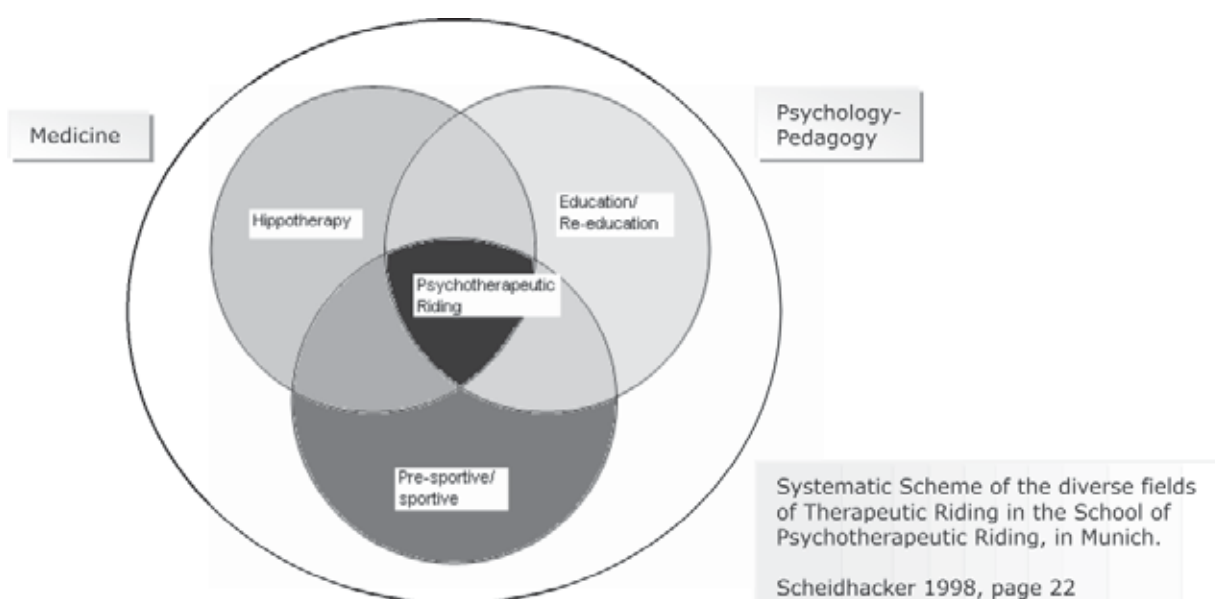
The interest of psychologists in the utilization of horses in psychotherapeutical interventions grows year after year. However, the literature available in Brazil is still too scarce to explain the complexity of this method, its possibilities and limitations.

In the bibliographic survey performed, little research in the area of therapeutic riding was found in our country and what is available is restricted to the benefits of persons diagnosed as autistic or mentally deficient. References to psychotherapeutic works using horses in the treatment of schizophrenia, bipolar disorder, depressive disorder, anxiety disorder and other psychopathological disorders were not found, as was the case for registers regarding planning and therapeutic strategies for the method that uses horses as psychotherapeutic agents.

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References regarding the prerequisites for the psychologist, staff and horses used in the therapy were also not encountered.

Germany, however, has a tradition of more than twenty years in this area, which has generated numerous publications. The German studies show that each riding program has its specific indication in Medicine, Psychology, Pedagogy and sports and must be understood within an actuation in which a field of inter-relationship and common interest exists. Therapeutic riding is located in this field and permeates all of the programs that attend patients (called practicers) presenting some type of psychopathology. The indications of each program are utilized in therapeutic equitation, correlated to the phases of the patient's illness.



In Germany, the denomination of this field of inter-relationship was given by Dr. Michaela Scheidhacker as "*Psychoherapeutisches Reiten*"- "Psychotherapeutic Riding". In Brazil, however, this nomenclature has not been discussed. Therefore, in this work, the term 'therapeutic riding' represents the 'psychotherapeutic riding' suggested by the German author.

Dr. Michaela Scheidhacker is also the founder of the School of Psychotherapeutic riding, in Munich. This school performs its work in conjunction with the "*Bezirkskrankenhaus Haar-BKH*" psychiatric hospital, in Munich, where therapeutic riding services are provided for psychiatric patients, and research and courses have been carried out for nearly two decades. Psychotherapeutic actuation with horses has grown each year and, for this reason, the "Specific Group for Work with Horses in Psychotherapy" ("*Fachgruppe Arbeit mit dem Pferd in der Psychotherapie – FAPP*"), was founded in Germany in 2001, and is also recognized by the German Association for Therapeutic Riding, "*Deutsches Kuratorium für Therapeutisches Reiten e.V. – DKThR*".

The present study seeks to put the theory of therapeutic riding and its benefits in psychopathology found in German literature into context with the practice of the equotherapy developed in Brazil.

In Brazil, Dr. Gabriele Brigitte Walter has contributed to the divulgation of the complexity of the possible interventions of the psychic aspects in a therapeutic Setting with horses. In the courses that she offers at the Rancho GG Foundation, Center for Training, Research and Teaching of Equotherapy, she has been pointing out for years the benefits of therapeutic riding in cases of psychopathologies. As a researcher, psychologist, physical therapist and riding instructor, Dr. Walter possesses significant knowledge and experience in the field of therapeutic riding, contributing to the fundamentals of psychotherapeutic interventions in the work with horses in our country.

The interventions made in therapeutic riding have a multifocal character, taking into consideration the diagnosis, strategy planning and prognosis. However, a specific psychological approach is not discussed for this psychotherapeutic method that utilizes horses. According to Scheidhacker (1998), page 16, *“Psychoterapeutische Ansätze gehen über von dem Körper - und bewegungstherapeutischen Gesichtspunkten über erzieherische Maßnahmen bis hin zu verhaltenstherapeutischen, tiefenpsychologischen und analytischen behandlungsform”*. (The psychotherapeutic references utilized possess aspects of the therapies dedicated to the body and the movement, cognitive and behavioral therapies, as well as psychoanalytic therapies or the so-called deep psychotherapies).

Therapeutic riding acts differently for each clinical condition of the psychopathology. The mentally retarded practicers are bearers of cerebral lesions and many times do not have sufficient cognition for the self-reflection proposed in conventional psychotherapeutic therapies. However, in the therapy proposed with horses, actuations involving aspects of learning, sports activities and social reinserction are possible and are also utilized in equotherapy in Brazil.

The chemically dependent practicers do not initially present cerebral lesions, but frequently manifest personality disorders and relationship difficulties and, in these cases, have a tendency toward self-image distortions, inferiority complex and the desire to regress to primary stages. In the therapeutic proposal, the horse acts as an element that makes the reinforcement of the fragilized personality possible, proportioning equilibrium in the person's narcissistic aspects since the practicer projects on the horse his desire for possession, benefited by the animal's dignity and beauty.

The benefits of practicers diagnosed as psychotic, or borderline, suffering from delirium and frequent hallucinations, are justified by the fact that these patients are requested to establish contacts and new relations with the horse, obtaining an improvement in corporal perception. Scheidhacker 1998, page 14, *“Konkrete Lerninhalte bei der Pflege der Pferde fördern zielgerechtes denken und Handeln.”* (Concrete Learning in the handling of the horse stimulates objective thoughts and actions).

The horse may signify an object of projection or a means of catharsis for the practicers, in which nervous excitement and tensions can be eliminated. The practicers who, by “confessing themselves” to the horse, go through an affectionate discharge, with tears and anger, may feel a certain momentaneous relief. In the setting with the horse, it is possible to register the role that the horse plays for the practicers in the elaboration of certain conflicts.

The following is the account of one of the cases attended by the author of this work – E.A.P., a 43-year old practicer with a CID-10, F31.4 diagnosis – Affectionate bipolar disorder, current episode mixed, agitated by the session, cried for more than half an hour, hugging and kissing

a mare: "I love you, I love you...you are my reason to exist...". "You are marvelous, you are marvelous, it is you who understands me... you understand me... thank you, thank you". The therapist watched this situation from a distance and the practitioner silently left the mare, thanking the therapist for the time she had to be alone with the horse.

According to Dalgalarrrondo (2000), page 154, in the case of depressive disorders, alterations of the image or corporal scheme may occur. "The depressed person lives his body as something heavy, slow, difficult, a source of suffering and not of pleasure. The person feels weak, exhausted, and unable to face the demands of life". As in grave conditions of anxiety, the practitioners feel their body is compressed, asphyxiated, with corporal depersonalization and the sensation that their body is entering in collapse or becoming disorganized. In these cases, the horse's tridimensional movement stimulates an adequate corporal perception in the practitioner, constantly seeking equilibrium. This search for equilibrium is not restricted to the practitioner's physical aspects but is inherently connected to the self-perception of "*I want*" and "*I can*", Gäng (2003), page 75.

In a case of an adult with a CID-10, F32.2 diagnosis, it was possible to observe grave depressive episodes without psychotic symptoms, a significant improvement after three months of therapeutic equitation, when the practitioner managed to conduct the horse autonomously, riding at gait over an obstacle without height. This activity, aside from the physical demand, provided a symbolic representation, making the practitioner feel capable, overcoming pre-established, irrational beliefs.

Neurosis is treated in psychotherapy when internal conflicts begin to have relevance and reduce the subject's productivity and manifestation of enthusiasm for everyday life. Neurotic practitioners frequently possess a corporal experience related to a sentiment of inferiority or castration. According to Dalgalarrrondo (2000), page 75, "The neurotic feels his body as impotent, weak and sick. Corporally, he feels like a child or an old person." Horseback riding, in these cases, contributes to the decrease of defense mechanisms, acting directly on corporal perception. By the sway of the horse, the person is mobilized to the emotional, cognitive and physical levels, collaborating with the acquisition of the capacity to assume responsibility over himself.

Therapeutic riding offers a space in which the practitioner can recognize his competences, without pressure and demand for productivity. This is relevant for the majority of psychiatric patients since many have been inactive professionally for some time. According to Gäng (2003), page 74, "Trotz intensiver Therapieversuche und medikamentöse Behandlung ist der Patient Häufig in seiner Krankheit gefangen" (Even with intensive therapy and medicinal accompaniment, the psychiatric practitioner is frequently caught up in the symptoms of his psychopathology) and has little capacity to relate with others in a satisfactory manner. The lack of effective communication in these patients generates aggressiveness, insecurity and fears. Here, the horse permits a new form of communication.

According to Walter (2004), page 76, "the union can be such that the horse is perceived as a very close companion, even as a prolongation of the body, a body that agitates, a companion of fantasies and insanities, perhaps allowing the horseman the discovery of himself." The horse is frank and authentic in its relationship with others, efficiently reflecting the practitioner's inadequacy, but without punishment or judgment. This makes it possible for the therapist, through the horse, to identify the mechanisms of the practitioner's psychopathology

as well as his psychodynamic functioning. This is possible because, in the relationship with the horse, the practicer reproduces his limitations such as, for example, difficulties in establishing new bonds, aggressive attitudes, the lack of decision making, among others. . *“Der Therapeut fungiert als Bindelgied zur Realität und als Mittler zwischen Pferd und Patient.”* (The therapist acts as a link to reality and as a mediator between horse and practicer). Gäng (2003), page 75.

During the process of therapeutic riding, the therapist encounters space to describe psychopathological phenomena observed in relation to the practicer with the horse and, as the therapist acquires internal resources to recognize and elaborate them, progress continues, making the changes and benefits to the practicers visible. According to Scheidhacker (1998), page 17, *“Das Pferd allein bringt noch keine Änderung und keine Heilung”*. (The horse alone does not bring about changes or cures). The signification of the triple dynamics of the horse, practicer and therapist is necessary. From this signification, the practicer may have the necessary insights, contributing to his improvement.

The therapeutic strategies vary according to the situations and to the psychopathological aspects of each practicer and should not be understood as necessarily sequential. They may be utilized in a varied manner in one same session. In the literature, examples are found that suggest the strategies of therapeutic riding with the horses at liberty, where each person identifies himself in a subjective manner with the most diverse characteristics of the animals, of their gaits and their group phenomena. The horse appears as an object of identification in which the practicer projects his psychic demands.

The handling of the animals, such as basic care with feeding, cleanliness and correct saddling, stimulates the approximation and even the complex processes of work. Using this strategy, the practicers can overcome their fear of entering into contact with others, and also develop new practical capacities. The activities of animal handling provide concrete situations involving new abilities, positive actions and concrete thoughts in psychiatric patients.

Riding the horse using just the blanket provides greater physical contact for the practicer and an awareness of his own body due to the horse's rhythmic movement, making it possible to liberate repressed emotions such as, for example, non-manifested aggressions that cause rigidity and tensions in the practicer. Here, the variation of several horses with different gaits stimulates a positive perception of the practicer's own body.

Autonomous horseback riding goes through the stages of circling to independent riding on a saddle or blanket. This strategy stimulates capacities such as decision-making, autonomy in subjective aspects and in the structuring of the practicer's ego. Riding outside, in the countryside, stimulates the will and joy of living, thus motivating psychiatric practicers to face new challenges and to develop personal maturity.

It can be affirmed that in therapeutic riding the possibilities of the strategies are numerous. However, the professional must possess specific knowledge of the psychopathology and psychodynamics. The German authors also refer to the importance of the psychologists who utilize horses in psychotherapeutic interventions having a solid formation in their specific area, as well as knowledge of horse ethology and advanced horsemanship.

Thus, the horses utilized in therapeutic riding need specific training after each day of work, guaranteeing their physical and mental health. The author Scheidhacker (2005), page 117,

affirms that "...das Pferd als Reit-und Therapiepferd ist auf seinen Ausbilder angewiesen," (the horse that is utilized in sports or therapy necessarily depends on its trainer). A disunited horse transmits tension and insecurity to the practicer, a young and instable horse transmits the need to be led and the sick horse requests protection and care. The preparation of each horse is the responsibility of the therapist-equestrian, not the practicer.

The need to assure a rigorous contact in therapeutic riding is great, thus guaranteeing the success of the treatment without exposing the practicer to unnecessary risks. this setting is preceded by a detailed investigation of the expectations, complaints and practicer requests to the therapist. Many times the therapeutic setting is confounded with riding classes and, unfortunately, we can see in practice that even professionals confound the sport with the therapeutic proposal. "The setting is under the continuous threat of being disparaged by both the patient and the analyst due to the impact of constant and multiple pressures of all kinds." Zimerman (1999), page 301.

As in conventional therapies, the therapist must have self-knowledge and know the reasons for which he wishes to work with horses in their setting. "Immer wieder hört man, das Pferde uns etwas geben, das unserer Seele gut tut." (We can always hear that the horse gives us something that is good for our soul) (Witter, 1998, page 186). However, there is the risk that the method with horses be utilized by the therapist for self-satisfaction and his own needs, giving false success to the practicer in favor of the professional.

Therefore, the criteria are numerous for the conventional psychotherapeutic professional to be efficient in the method that utilizes horses. The author Scheidhacker refers to the self-knowledge of the therapist as indispensable, also including the knowledge of his own representations in relation to the horse. This relationship between the therapist and the horse undergoes changes over time in which the therapist matures in relation to his reasons for wanting to utilize the horse for his psychotherapeutic work. In this signification, the horse is no longer an object of pleasure and really becomes the co-therapist and facilitator of the professional.

In the school of Psychotherapeutic Riding, in Munich, study groups do not analyze the practicers' phenomena exclusively but also the actuation of the therapist, reflecting on how he comprehends the relation of the practicer with the horse. For this work, Dr. Scheidacker uses all of the theoretic fundamentation of the Balint method. These courses have proved to be very effective since they are not restricted to theoretical explanations but instead promote self-knowledge and reflections on the part of the therapists in their practice of psychotherapy with horses.

CONCLUSION

The present study showed the need for more publications on the method of therapeutic riding in psychopathologies since its efficiency has been verified in Brazil through its use with practicers which in accordance with the German literature. Therefore, there is the need for translation of the references utilized in this research so that other Brazilian professionals who are not fluent in the German language can have access to this knowledge. This research illustrated the variety of strategies possible in the intervention with practicers and their psychopathologies, utilizing the horse as the main therapeutic agent. For each

specific demand, therapeutic riding can bring benefits in the causes and symptoms of the psychopathologies, constituting an exclusive or complementary method, depending on each case.

The setting with the horse must be rigorously established for each of the practitioners' demands and may be used for individuals or groups. The therapist himself must have profound knowledge of the psychopathology, psychodynamics, therapeutic riding and of equitation as well as self-knowledge of the horse's representations.

In Brazil, the utilization of horses as therapeutic agents has increased significantly in the last ten years and the National Association of Equotherapy of Brazil (ANDE –Brazil) has greatly contributed to the normatization and quality control of this method. However, there still are no courses offering specialization in the area of therapeutic riding with emphasis on the formation of the professionals in attending psychopathological practitioners.

BIBLIOGRAPHIC REFERENCES

ORGANIZAÇÃO PANAMERICANA DA SAÚDE – OPAS E ORGANIZAÇÃO MUNDIAL DE SAÚDE-OMS: **CID-10/Classificação Estatística Internacional de Doenças e Problemas Relacionados à Saúde**; 10^a ed., Volume 1., 2003, Editora da Universidade de São Paulo-USP

DALGALARRONDO. P: **Psicopatologia e Semiologia dos Transtornos Mentais**, 2000, Porto Alegre, Artes Médicas.

FAAP: **Psychotherapie mit dem Pferd, Beiträge aus der Praxis**, 2005, Warendorf, DKThR FN-Verlag

GÄNG. M: **Reittherapie**, 2003, Ernst Reinhard, GmbH & Co KG, Verlag München

GÄNG. M: **Heilpädagogisches Reiten und Voltieren**, 2004, Ernst Reinhard, GmbH & Co KG, Verlag München

SCHEIDHACKER. M: **>>Ich träumte von einem weisen Schimmel, der mir den Weg zeigte...<<, 10 Jahre Therapeutisches Reiten im Bezirkskrankenhaus Haar**, 1998, BKH Haar

WITTER R.F: **Horse Power, Lebensenergie und Erfolg durch die Kraft der Pferde**, 2001, by Müller Rüschlikon Verlags AG, Cham

WALTER. G.B: **Apostilha Curso de Formação em Equoterapia**, 2004, Fundação Rancho GG, Centro de Treinamento, Pesquisa e Ensino de Equoterapia.

ZIMERMAN D.E.: **Fundamentos Psicanalíticos, teoria, técnica e clínica**, 1999, Editora Artes Médicas Sul Ltda., Porto Alegre