

Our four legged friends and what they can teach us: Improving the care and experience of Learning Disability Service Users within Inpatient Services

Author: Dr Julie Scheiner, Moore Ward, Goodmayes Hospital, Ilford, Essex IG3 8XJ

Juliescheiner@yahoo.co.uk 07958283811

Acknowledgements

The author would like to thank The Florence Nightingale Trust and the team on Moore Ward for their input



Abstract

This paper explored the comparatively new field of experiential psychology known as Equine Facilitated Psychotherapy (EFP) and working with clients with learning disabilities. According to EAGALA (Equine Assisted Growth and Learning Association), EFP is “an emerging field in which horses are used as a tool for emotional growth and learning. EFP is a collaboration between a licensed therapist and a horse professional. Because of its intensity and effectiveness, it is considered a short-term or brief approach” (EAGALA literature)

The research presented here consists of using EFP with 10 clients who have a diagnosis of learning disabilities and co-morbid presentations. The results demonstrated that there was a significant improvement on all of the domains of the Life Star after 6 weeks of therapy and there was a trend towards a reduction in psychological distress post therapy.

Keywords: Equine Facilitated Therapy, Animal-human interaction

Introduction

Why use animals in therapy?

For centuries animals have provided companionship and unconditional love. Florence Nightingale in her journals recorded the enjoyment she received from animals which also offered companionship to her patients. She noted the healing properties of animals and encouraged her patients to care for them as an aid to a speedy recovery (Stanley-Hermanss, 2002). Documentation of the use of animals in mental health treatment appears as early 1792 (Trivedi and Perl, 1994). Research has demonstrated positive results in the treatment of psychological and physical symptoms in various populations where pets are used as part of the therapy (Marr et al, 2000). Boucher and Will (1999) provide a complete historical overview of mental health interventions which have included animals. Research in the field such as Katcher et al (1983), demonstrated that “animals are able to produce ‘immediate physiological de-arousing states of relaxation’ simply by holding and keeping our attention and further studies concluded that animals are capable of providing people with a form of stress reducing or stress buffering social support” (McNicolas and Collis, 1995; Serpell, 1996; Siegel, 1990, cited in Fine 2006).

Why use equine assisted therapy

The main aim of the project is to utilise the benefits of equine facilitated therapy (EFT) to enable clients with a diagnosis of personality disorders, schizophrenia, autism and learning disabilities to lead happier and fuller lives.

Horses are also believed to offer themselves as connectors to nature. Jung believed that modern man’s disconnection from the natural world is “largely responsible for the pathological condition of contemporary culture” (Sabini, 2002). Furthermore, he argues that in primitive society where people may have been more intimately connected to their environment, “there was less evidence of conflict between consciousness, emotions and instinct”

It can be argued that a client’s relationship with a horse in EFP is rich with possibilities for creating metaphors for other relationships in their lives. Horses cannot dissemble; they respond directly and spontaneously so they act as mirrors and help people acknowledge the impact of their behaviour by observing the responses evoked in the horse. Interacting alongside a horse can be an illuminating experience because “from animals we cannot disguise our feelings. They respond to what is beneath the surface, our internal frame of reference” (Johnson, 2001 cited in Baugh, 2004). It has also been stated that “the ability of the horse to offer clear, immediate and uncomplicated feedback is one of the most powerful characteristics of equine assisted therapy” (Karol, 1999 cited in Baugh 2004).

Research studies have indicated excellent outcomes of EFP for many different client groups. (Bowers 2001; Bates, 2002, Christian 2005). Working with equines gives people experiencing challenge within their lives, the opportunity to engage in the natural world and learn a new skill with a beautiful and powerful animal whilst learning about themselves and the way they interact with the world.

Accounts of how EFP works and with who can be found in a number of studies. Rothe et al (2005) concluded that children using EFP developed a relationship by caring for the horse, deriving socialization, companionship and affection, thus promoting well-being and improvement in their lives. Williams (2004) suggested that caring for a horse translates into caring for oneself. Bates (2002) wrote that "self-esteem may be increased through a new found ability to positively influence another being, although needs for loyalty, trust and respect can be met through equine facilitated psychotherapy". Katcher and Wilson (1998) and Mallon (1992) suggest that when a horse is led by a child, the horse subordinates power to the child and the therapist can observe verbal and non-verbal communication. Work which is entirely dependent on non-verbal cues can also be incorporated into human relationships (Miller, 1984).

Learning disabilities as a research area

In 2011, Emerson et al estimated the number of people in the UK with a diagnosed learning disability in England was approximately 1,191,000 people and this includes

- 286,000 children (180,000 boys, 106,000 girls) age 0-17;
- 905,000 adults aged 18+ (530,000 men and 375,000 women), of whom 189,000

(21%) are known to learning disabilities services.

Hollins & Sinason (2000) admit that they cannot conduct a systematic review of the use of psychological therapies in people with learning disabilities because there is insufficient published literature. They report that there are few outcome studies.

The difficulties of working with clients with learning disabilities

The presence of a learning disability inevitably affects psychological development and personality through various bio-psychosocial mechanisms, and rates of psychopathology are reportedly high among people with learning disabilities. Traditional treatments for psychological problems in people with learning disabilities have tended towards behavioural management, skills training and medication (Royal College of Psychiatrists London 2004)

The provision of psychotherapy for people with learning disabilities needs to address not only common mental health problems and emotional needs in this population, but also the very particular issues of impairment and disability (Royal College of Psychiatrists London 2004). There is a common need among those working with people with learning disabilities for a core understanding of basic psychotherapeutic principles. At present, this is sparsely and inconsistently provided.

There are very few studies that consider the views of people with learning disabilities about talking therapies. MacDonald et al (2003) carried out a study to investigate the effectiveness of psychological therapy for people with learning disabilities. Their study concluded that "a recurring positive theme was that psychotherapy created an opportunity for the participants to express

themselves in a supportive environment, and that participants seemed to feel included and valued in the group. The most negative theme seemed to relate to the participants' desire to avoid emotional pain, which they had found to increase in various ways during many group sessions".

Roth & Fonagy (1996) examined the issue of treatment choices for different conditions in their book "What Works for Whom". Since then, the evidence base for treatment choice in psychological therapies and counselling has been elaborated on by the Department of Health (2001b) in its publication Guidelines for Treatment Choice in Psychological Therapies and Counselling. People with learning disabilities experience similar disorders to the general population, and there is a known vulnerability to mental illness and psychological problems. Although treatment choices for these conditions were not specifically considered for people with learning disabilities, no evidence was presented that psychological therapies do not work for this client group.

The final summary statement in the Roth & Fonagy (1996) review emphasised that 'there is considerable variability in the outcome of psychotherapy, even from relatively homogeneous treatments'. Given the complex nature of providing treatment for the problems experienced by people with learning disabilities, the implications are that more research needs to be done with people with learning disabilities on both process and outcome. In addition, training and supervision are of importance given that one of the conclusions of the review is that 'therapeutic expertise rather than experience is an important predictor of the establishment of a productive treatment alliance (which is probably the single best predictor of outcome outside of client and therapeutic orientation factors)'. Some of the more specialist expertise needed for effective psychotherapy for people with learning disabilities will therefore be in establishing a productive treatment alliance through the development of an effective 'language' and therapeutic context.

Equine therapy and learning disabilities

In terms of learning disabilities, much of the work that has been conducted focuses on therapeutic riding or riding for the disabled which is markedly different to equine therapy. The difference is that the equine therapy focuses on the relationship between client and equine whilst riding for the disabled focuses on the therapeutic benefits of horse riding.

There is a dearth of evidence at present of the effectiveness of using equine therapy for adults with learning disabilities and associated mental health problems. Although some health providers such as the NHS argue that equine therapy can be expensive and time consuming, Mann and Williams (2002) dispute this argument as does Scheiner (2011). Both researchers found that more progress was made in a shorter time and in the longer term became more cost effective. Scheiner (2011) concluded from her research that "equine therapy is a short term therapy with long term benefits".

The benefits of EFP can be observed in the following quote

"Counsellors observe interaction, how the client develops relationships, body language, communication, unconscious behavioural patterns and learnt behaviours. The horses alone help clients access their feelings and behavioural issues with immediacy and at a deeper level. The focus of all Equine Assisted Therapies is not riding or horsemanship. In fact 95 % takes place on the ground. The focus involves setting up activities involving the horses which will require the client or

group to apply certain skills. Non-verbal communication, assertiveness, creative thinking and problem-solving, leadership, work, taking responsibility, teamwork and relationships, confidence and attitude, are several examples" (cited in <http://www.leap-etc.co.uk/index.php> and <http://www.eagala.org.uk/>)

Why use equine therapy with clients presenting with learning disabilities

One of the most difficult client groups to engage therapeutically is clients with learning disabilities (<http://www.learningdisabilities.org.uk/our-work/changing-service-delivery/improving-access-psychological-therapies/>). More importantly where clients find it difficult to engage in talking therapies such as those with learning disabilities, may benefit from working with "another" i.e. an animal that is also nonverbal. At present as observed earlier there is an identified need for clients with learning disabilities to engage in therapy that is provided within a supportive environment.

Evidence provided states that equine therapy may be used as an adjunct to existing talking therapies (Scheiner, 2011). One of the most important aspects of equine therapy is the equine's ability to read non-verbal cues which for clients presenting with learning disabilities is an important aspect. As therapists, although we are trained to notice the non-verbal cues clients display, equines ability to reflect and "be with" clients offers an alternative way of working especially for those clients who may feel disempowered and have difficulty having their needs met within conventional forms of therapy. Research by Scheiner, (2011) already demonstrates that equine therapy works on a number of different levels and for clients with learning disabilities may enable them within these different levels.

Resonance

Resonance is a participative process in which both equine and client are actively involved. An equine acts as a reflector and possibly amplifier of the client's energy and feelings. The process of resonating is seen in an equine's movements, and although it has its origins as lifesaving sensitivity, it presents itself in all the non-verbal communications within the herd. Equine body language can be observed when clients enter the field in the way the horses' ears move with the slightest sounds, the way their bodies turn to enable them to tune into the energy surrounding them within their environment.

Since energy exchange is an important part of understanding human-equine relationships; it is helpful to consider writers such as Schore (1994) who have explored the relationship between attachment styles, the therapeutic relationship and energy exchanges. Schore asserts that "the communication between clients and their therapists is derived from somato-sensory cues that the therapist, like a 'good enough mother', interprets and then provides the correct intervention required by the client at that time". In line with psychoanalytic theory, Schore argues that the healing that transpires between client and therapist is primarily unconscious and he focuses on the non-verbal experiences of therapist and client and how the relationship is used to regulate affect (eg Schore, 2000). For clients with learning disabilities the healing aspects of equine therapy may be explained in this way.

Empathy

Empathic resonating is a process that is reliant on the therapist being able to read subtle bodily reactions from their clients. Equines by their nature are very much in tune with this ability, due in part to their being prey animals. Their success at being able to read a client's energy fits with Schore's (2003) concept of the non-verbal aspects of therapy. The limbic system within humans fully equips us to be in touch with our emotions, and equines within the therapeutic frame are able to reflect our emotions back to us. The theory of resonating adds value to the literature available on the success of equine therapy and goes some way to explaining how and why it works.

The Therapeutic Relationship

The essence of any therapy lies in the therapist's ability to establish a therapeutic relationship with the client (Welch & Gonzalez, 1999, cited in Baugh, 2004). At the heart of every therapeutic relationship remains an 'intensely human, personal and essentially unique encounter' (Rogers, 1957). In EFP both the therapist and the equine(s) contribute to this encounter which can lead to a deeper understanding of the client's inner world. Experience has shown that equines can add an alternative vector to the therapeutic dynamic, especially where difficulties arise; offering some 'time out', leaving the client with the horses, almost inevitably leads to conflict resolution in the therapeutic relationship. In other therapies impasses may take weeks or months to be acknowledged by the client but, with an equine's intuitive non-verbal reflective process, resolution can be achieved much faster than in the consulting room. EFP tends to be effective for those clients who are stuck or in need of a boost to their current therapy but can also help at every stage of healing. Equines work well in therapy as they have the ability to enable humans to be back in touch with those parts of ourselves that have been 'disabled' – to put humans back in touch with their instinctive selves, Scheiner (2011)

Aims of the study

The aim of this study was to investigate the usage of EFP as an alternative to traditional talking therapy and to observe whether there would be a change in psychological distress obtained via the outcome measures used.

Methodology

Participants were recruited from both community and inpatient settings.

Inclusion criteria

The participants chosen for this study had mild or moderate learning disability and co-morbid presentations of either schizophrenia, autism and personality disorder. Participants were either currently patients on a psychiatric ward for people with learning disabilities or had recently been discharged. There were no exclusion criteria for this study. Clients could self refer for this study or be nominated by those working with them in the community and on the inpatient unit.

The main difficulty with recruiting clients to this type of project was not only the fear that clients experienced when asked to join the course but also fear of the unknown which caused some discomfort. There was initially a high drop out rate for this project but all clients participation was

voluntary and they were assured that they could drop out of the project at any time. Once all clients had consented to the project and had signed up, at no time during their participation did clients drop out.

Table 1: demographic and clinical characteristics of the participants

Client profile

Client profile	Diagnosis
Group One	
Female 54	Mild LD, personality disorder
Female 44	Mild LD, personality disorder
Male 22	Mild LD, personality disorder
Group Two	
Male 21	Moderate LD, autistic
Male 44	Mild LD, Schizophrenia
Male 36	Moderate LD, Schizophrenia
Female 26	Mild LD, personality disorder
Female 36	Mild LD, personality disorder
Female 58	Milde LD, Schizophrenia

Table 1: demographic and clinical characyeristics of the participants

Intervention

Equine therapy was given to two groups of participants (see table 1). Both groups received six sessions of up to two hours equine therapy. Each group worked with the researcher and a colleague. This was in line with the EAGALA model of having a mental health professional and equine specialist to facilitate the sessions. The programs devised for each group were pilot studies as this type of work has not been carried out and therefore the researcher had to redefine the training in order that both groups would benefit from the input. All participants prior to joining the equine therapy groups were asked to focus on one main issue they felt they had difficulties with and the majority of the clients reported that confidence was an issue. The researcher felt that although confidence proved to be a difficult aspect for clients to deal with, that the usage of equine therapy would help alleviate some of these difficulties as well as provide the participants with practical skills.

The six session program was made up of initially helping the participants get used to being around horses. None of the participants had been in close proximity to horses and therefore this was seen

as positively encouraging them and the horses to get used to each other. This also encouraged clients to begin thinking about their idea of confidence as well as allowing the equines to “meet” the clients they would be working with. The following sessions also focused on using the equines for specific goal orientated tasks to help participants to understand how to ask for the equines to carry out specific tasks. In order to undertake this, they had to use non-verbal communication in order to “ask” the equines to carry out specific goals. The aim of the sessions were to help clients with confidence in asking equines to carry out tasks but also to enable and encourage them to ask for support by working in groups, in pairs and individually. This not only provided an educational component in terms of working together but also helped them with learning to work with an animal which may translate into working with other people supporting clients whether it be at home, in a community setting or in an educational setting.

Outcome measures

Both groups were assessed on two outcome measures that have been developed for use in people with learning disabilities and have good validity and reliability (CORE LD and the Life star). The scores were obtained for both pre and post therapy. The Life star (MacKeith, 2011) looks at attitudes and behaviours in relation to ten different domains of a client’s life such as their health, living skills and communication and assesses changes over time. An increase in the score indicates an improvement towards achieving their goals. The CORE LD is a 14 item self- report measure of psychological distress comprising items relating to anxiety, depression and trauma, rated on a three point Likert scale (Brooks et al, 2014). Higher scores indicate more psychological distress. Participants were also asked to provide feedback about the therapy.

Analysis

Scores on the outcome measures were compared using paired t tests to identify whether there were significant differences pre and post therapy.

Results

Ten participants completed the study. There were no drop outs. The clients were assessed on two measures – CORE LD and the Life Star. The measures were taken both for pre and post equine therapy and demonstrate that overall there was a significant difference in the effectiveness of equine therapy as an intervention on all of domains of the Life Star. However, there was no significant difference pre and post therapy on the CORE-LD but there was a trend towards an improvement in the scores post therapy

	Mean 1* (pre-test)	Mean2** (post-test)	Mean diff	P value	Sign (0.05)2 tail
Your Health	5.75	8.37	2.62	0.03	Yes
How spend time	6.75	8.875	2.125	0.04	Yes
Being	6.5	9	2.5	0.03	Yes

Responsible					
Being safe	6.25	8.375	2.125	0.07	Yes
Money and Letters	4.75	7.625	2.875	0.05	Yes
Living Skills	4.5	8.125	3.625	0.01	Yes
Communication	5	7.25	2.25	0.02	Yes
Feeling Good	5.87	8.625	2.75	0.01	Yes
People you know	4.875	8.125	3.25	0.01	Yes
Mental health and other conditions	4.625	7.75	3.125	0.01	Yes
Core total	12.625	8	4.625	0.07	No

N=10

In addition quotes from participants of equine therapy were provided: The following quotes were taken from the client groups participating in the equine therapy.

“Being with the horses has made me forget the difficult things in my life and the things that have made me sad” (Client GP)

“I have felt that I have learnt so much and love being with the horses” (client WD)

“Initially I was really scared about being around the horses but now I feel really comfortable” (Client YK)

“I was also really scared and have never been around horses but I feel that I have learnt so much like learning about what they eat, what they like, why they are running around and jumping like they are, I love them” (Client PG)

“I have really learnt so much about myself and have loved working with Murphy” (Client TH)

Discussion

The results of this paper demonstrate clearly the positive outcomes of EFP on people with learning disabilities. The experience of EFP can be seen in previous studies but this study is a pilot study and early results demonstrate that clients with learning disabilities may benefit from EFP. None of the clients in this study were receiving any other talking therapies before or after this intervention, further adding both qualitative and quantitative data in support of EFP.

Previous research has also demonstrated the effectiveness of using animal assisted therapies (Trivedi and Perl, 1994) as well as the usage of EFP (Bowers 2001; Bates, 2002, Christian 2005). Research has also indicated that not only engaging therapeutically with clients with learning disabilities is difficult but that traditional treatments for psychological problems in people with

learning disabilities have tended towards behavioural management, skills training and medication (Royal College of Psychiatrists London 2004)

This research is pivotal given that those with learning disabilities tend to be an overlooked client group. Certainly working with this client group therapeutically presents with its own challenges, in that the broad spectrum of intellectual impairment requires therapists and multi-disciplinary teams to think, work and formulate therapeutically with clients who often present as wide ranging on the spectrum but whom also tend to present with several diagnoses.

Furthermore given the dearth of research focusing on clients with learning disabilities, therapeutic effectiveness and positive outcomes, working with equines provides a unique opportunity to explore previously unexplored areas. Working with equines provides clients with a “safe” haven whereby they are able to freely express themselves. By using the process of EFP clients may be able to process difficult feelings without having to verbalise their thoughts. At the same time the process between client and equine allows for a more healing experience where traditional talking therapies may not succeed as well.

Previous research (Scheiner, 2011) demonstrated the effectiveness of EFP with different client groups and research suggests that EFP is a short term therapy with long term benefits. Furthermore EFP works at a number of different levels which may be more conducive to work with clients who have learning disabilities. The three levels EFP works on include

- Resonance
- Empathy
- Therapeutic relationship

There are parallels that can be drawn from these three processes to further understand the relationship between equine and client but perhaps more so for clients who have difficulties in expressing themselves in conventional therapy. Resonance is a process whereby both client and equine are actively engaged in relationship with each other. The client and equine are both responding to each other using non-verbal somatic gestures. Both empathy and empathic resonance are significant for both equine and client. These further non-verbal aspects of the therapeutic encounter may be extremely useful for clients to “surrender” themselves to the process of therapy when words are not enough to express the feeling of acceptance and understanding. Lastly the therapeutic relationship is vital to the formation of any therapeutic alliance with a successful outcome. With these three aspects in place, EFP may be a successful encounter for clients to experience the benefits of equine therapy.

Strengths and limitations of the project

One of the strengths of the study is that the sample was comprised of a group of individuals who were quite complex and had been hospitalised. Previous studies have not been conducted in this particular sample group. The therapist was highly skilled in delivering the intervention and was not only a trained Psychologist but also an equine trained therapist.

One of the limitations of the study is the small sample size and the lack of a control group and therefore it is not clear whether the benefits observed during the therapy were directly related to the intervention and not to other factors.

Conclusion

This pilot study was born out of the notion that traditional talking therapies for those clients with learning disabilities may not have always benefitted them. Previous studies have demonstrated the effectiveness of EFP on different client groups. This study has demonstrated that EFP may be effective for clients with learning disabilities but further research in the form of a randomised controlled trial is required. EFP could also be used as a possible adjunct for traditional talking therapies.

References

- Bates, A., (2002) Of patients & horses: Equine facilitated psychotherapy. *Journal of Psychosocial Nursing and Mental Health Services* , 40(5): 16-24.
- Baugh, L. S, (2004) *Equine assisted therapy: Striving for balance in a new form of psychotherapy.* Carpinteria, CA: Pacifica Graduate Institute
- Bowers, M. J. & MacDonald, P.M., (2001) The effectiveness of equine facilitated psychotherapy with at risk adolescents. A pilot study. *Journal of Psychology and Behavioural Sciences*, 15: 62-76
- Brooks, M., Davies, S., & Twigg, E (2013). A measure for feelings-using inclusive research to develop a tool for evaluating psychological therapy (Clinical Outcome In Routine Evaluation-Learning Disability). *British Journal of Learning Disability*; 41: 320-329
- Charmaz, K., (2006) *Constructing grounded theory: A practical guide to qualitative analysis.* London: Sage Publications.
- Christian, J., (2005) All creatures great and small: utilising equine-assisted therapy to treat eating disorders. *Journal of Psychology and Christianity* 24(1): 65-67
- Folse, E.,(1994) Animal assisted therapy and oppression in adult college students. *Anthrozoos A Multidisciplinary Journal of The Interactions of People & Animals* VII: 188-194
- Hollins, S. & Sinason, V. (2000) *Psychotherapy, learning disabilities and trauma: new perspectives.* *British Journal of Psychiatry*, 176, 32-36.

Johnson, R (2001) Relationship with animals as a component of the healing process. A study of child abuse survivors. Unpublished doctoral thesis. Cincinnati, OH: Union Institute Graduate College

Jung, C.G and Sabini, M. (2002) The Earth has a soul: C.G Jung writings on nature, technology and modern life. Berkeley California: North Atlantic books

Karol, J.M. (1999) A psychotherapeutic riding program: an existential theatre for learning. Unpublished doctoral thesis Antioch New England graduate School, Keene. NH.

Kohanov, L. (2001) The tao of equus. Novato, CA: New World Library.

MacKeith J (2011). The development of the Outcomes Star: A Participatory Approach to Assessment and outcome measurement. Housing Care and Support, 14: 98-106

Mallon, G.P. (1992) Utilisation of animals as therapeutic adjunct to with children and youth: a review of the literature. Child and Youth Case Forums, 21: 53-67

Rogers, C. (1957) The necessary and sufficient conditions of therapeutic personality change. Journal of Consulting Psychology, 21(2): 95-103

Rothe, E. (2005) From kids and horses. Equine facilitated psychotherapy for children. International Journal of Clinical Health Psychology 5(2): 373-383

Sabini, S (2002) The Earth has soul: The nature writings of C. G. Jung. Berkeley California: North Atlantic books

Scheiner, J (2011) <http://www.contemporarypsychotherapy.org/volume-5-no-1-spring-2013/spirite-equus/>

Schore, A. N (1994) Affect regulation and the origin of the self: the neurobiology of human development. Mahwah: New Jersey: Erlbaum

Schore, A. N (2000) The self organisation of the right brain and the neurobiology of emotional development. In M.D Lewis & Granic, I, Emotion, development and self organisation. New York: Cambridge University Press

Schore, A. N (2003) Affect dysregulation and the disorders of the self. New York: Guilford press

Strauss, A & Corbin, J (1990) Basics of qualitative research, grounded theory procedures and techniques. London: Sage

Williams, C. (2004) Equine facilitated therapy benefits students and children. Holistic Nursing Practice, 18: 32-35

Wilson, C. C & Turner, D. C (1998) Companion animals in human health. Thousand Oaks: Sage publications

