

Equine Assisted Therapy with Children and Families: Exploring Connection after Loss and Trauma

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Objectives for the Presentation

- Participants will be able to identify at least three theoretical principles that can be incorporated in equine facilitated psychotherapy
- Participants will be identify at least two observation/activity techniques in the four areas of focus affirmation, affect regulation, attunement and attachment
- Participants will be able to identify at least three child-friendly ways to incorporate neurobiological principles in equine facilitated therapy.
- Participants will identify three ethical consideration for the horses welfare and well-being in clinical practice (recently discussed in presentation by Dr Mary Acri)
- Participants will rise up to make the field of equine facilitated therapy more diversive, inclusive and equitable for staff, clients and families.

Population Statistics for Children with Trauma and Loss

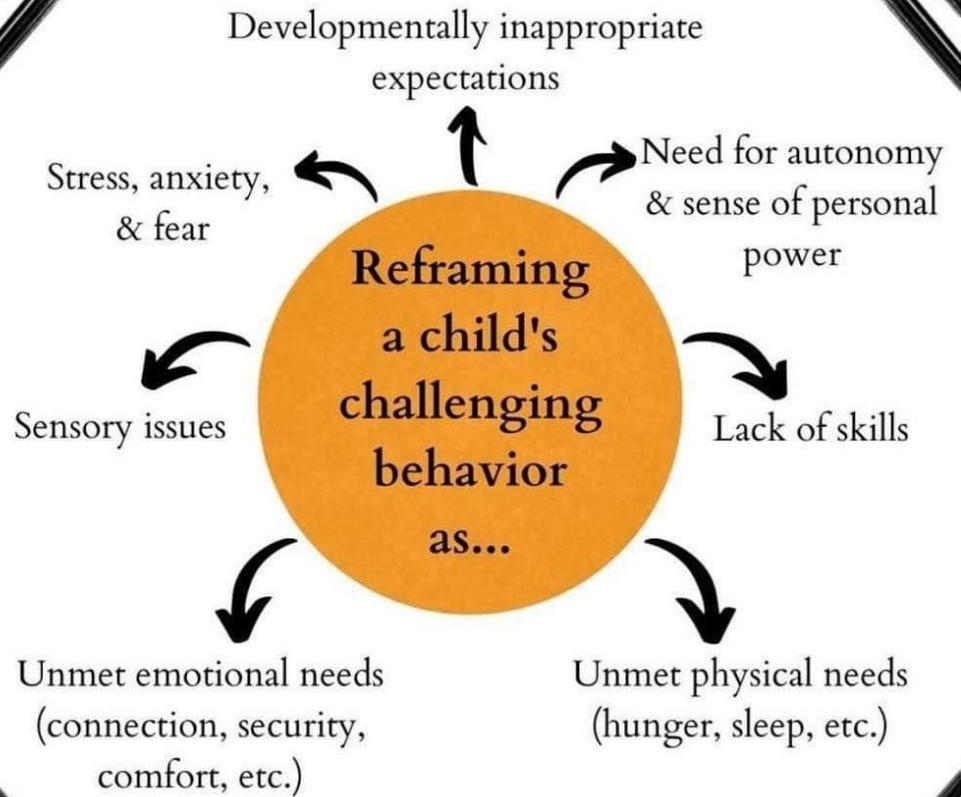
- 1 in 12 children in US will experience the death of a parent or sibling by the age of 12, 6 million children will be bereaved by age 18
- Childhood bereavement by age of 18: causes of death 30% birth conditions, 15.6% accidents 15% birth defects. Homicide 5%, suicide 4%
- Death of parent - causes of death 32% accidents, 11% heart disease, 10% cancer, 9% suicide , 5% homicide
- 15% to 43% of girls and 14% to 43% of boys live through at least one trauma, 3-15% of girls 1-6% boys develop PTSD
- 5.5 million experience some type of abuse - 65% neglect, 18% physical abuse, 10% sexual abuse

It all started when Noah was a baby.
He got taken away from his parents. He was
then taken to a puppy mill. He felt sad. When
he got a little older he didn't know how
to control himself. Now he is getting a little
bit better. We are trying to help him in some
different areas.



12 Core Concepts for Understanding Trauma Responses In Childhood (© UCLA-Duke University National Center for Child Traumatic Stress, 2010-2012)

- Traumatic experiences are inherently complex
- Trauma occurs within a broad context that includes children's personal characteristics, life experiences and current circumstances (intrinsic and extrinsic factors)
- Traumatic events often generate secondary adversities, life changes and distressing reminders in children's daily lives
- Children can exhibit a wide range of reactions
- Danger and safety are core concerns
- Traumatic experiences affect the family and caregiver systems
- Protective and promotive factors can reduce adverse impacts
- Trauma and post-trauma adversities can strongly influence development
- Developmental neurobiology underlies children's reactions to trauma
- Culture is closely interwoven in trauma experience, response and recovery
- Challenges to social contacts affect response and recovery
- Working with these children can evoke distress in providers



Equine Assisted Therapy with Mental Health Focus

- In early 1990's Greg Kersten created the words “equine assisted psychotherapy” and began his work in establishing firsts Equine Services, then EAGALA and then left and created OK Corral Series. Wrote first manual on equine assisted psychotherapy in 2005 and began training. Is not a clinician, but worked with at-risk youth
- Some founding principles : Pressure/Pain, Attention/At Ease, Re-Circle Process, Push/Pull, The NonVerbal Zone, the Relationship Zone
- Groundwork and mounted work
- Team of mental health professional and equine specialist, does not prohibit working alone

Equine Assisted Therapy with Mental Health Focus

- EAGALA founded by Greg Kersten and Lynn Thomas in 1999
- 500 programs worldwide as of 2019
- Solution focused therapy, team partnership necessary, groundwork only
- Horses have many characteristics that lend them to being effective agents of change including honesty, awareness and ability with nonverbal communication
- SPUD's Acronym : Shifts, Patterns (whether protective/fear-based and choose to keep or try something new) Unique, Discrepancies and 's - self-awareness and "my stuff"
- Horse as metaphor, very activity structured at first, changing focus
- Lynn Thomas co-founder went on to create Arenas for Change
- 2007, first PATH ESMHL workshop - international history for years started in 1969
- University of Denver School of Social Work- Institute for Human-Animal Connection
- HERD institute, "relational ethics, respect for diversity, equity and inclusion"
- International Institute of Animal Assisted Play Therapy™ Dr Rise van Fleet
- Equusoma, equine facilitated psychotherapy incorporating Somatic Experiencing (Scholte)

Equine Assisted Therapy - Mental Health History

- Natural Lifemanship founded in 2010, married couple met while she was an intern at one of Tim's programs. Tim Jobe was a founding member of EAGALA on the board, Bettina Certified in EAGALA and PATH as MH.
- NL is a process "that values personal growth as a foundation for supporting clients, and uses science based techniques and practices for forming deeper connections"
- What is a horse? A living mammal, a sentient being, a relational, herd animal; a horse is an individual
- What a horse is NOT - a tool or an instrument; a mirror or reflection of me; a metaphor; is not a deity, always perfect; is not a human or therapist

- 1.Improved sense of security/emotional safety
- 2.Stronger therapeutic alliance
- 3.Teaches empathy and encourages empathic responses
- 4.May increase sense of self-efficacy
- 5.Reduced symptoms of depression
- 6.Reduced symptoms of anxiety
- 7.Reduced cortisol levels
- 8.Increased levels of oxytocin and serotonin
- 9.Encourages sense of responsibility
- 10.Reduces loneliness
- 11.Provides comfort
- 12.A model for desirable behavior
- 13.Increase in mental capacity/mental stimulation
- 14.A behavioral reward/enjoyment
- 15.Emotional catalyst in therapy/breaks through resistance (UCLA Health, n.d.; Compitus, 2021b; Arluke et al., 1999)

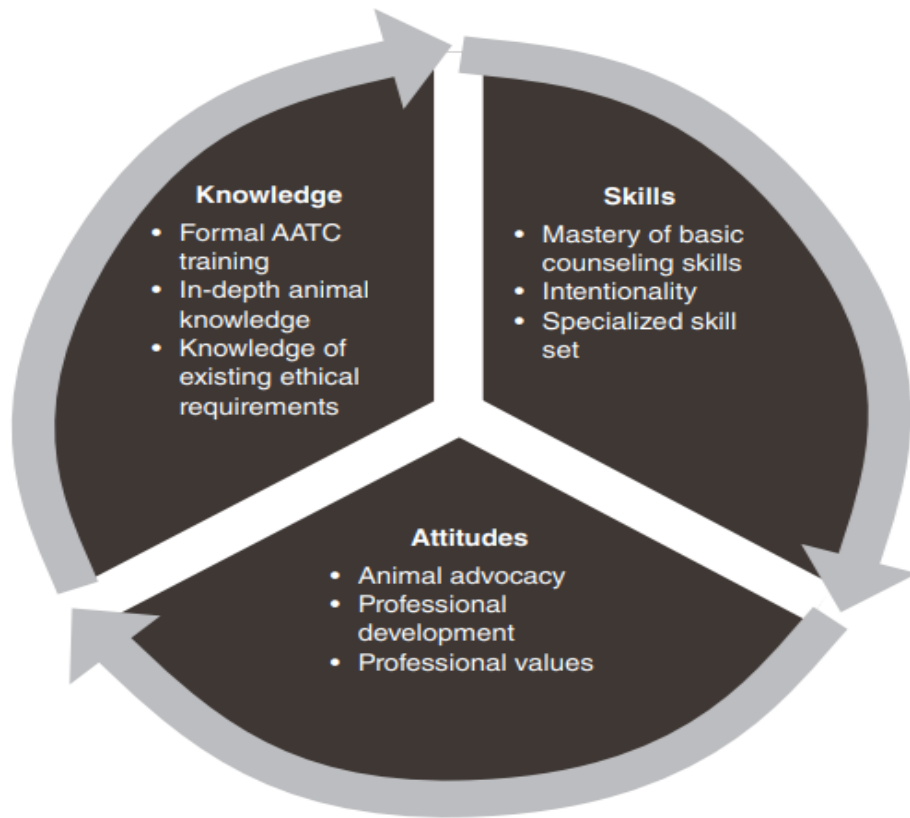


FIGURE 1

Animal-Assisted Therapy in Counseling (AATC) Competencies Framework

Note. Adapted from *Competencies in Animal Assisted Therapy in Counseling: A Qualitative Investigation of the Knowledge, Skills and Attitudes Required of Competent Animal Assisted Therapy Practitioners* (p. 66), by L. A. Stewart. Retrieved from: http://scholarworks.gsu.edu/cps_diss/100. Copyright 2014 by L. A. Stewart. Adapted with permission.

Trauma Informed Principles in Human-Animal interaction (Scholte, 2019, adapted Human-Equine)

Safety, Security and Safe Haven

Co-Regulation

Consent, Choice, Voice, Agency and Empowerment

Trust

Collaboration

Kindness and Compassion

Trauma Awareness and Scope of Practice



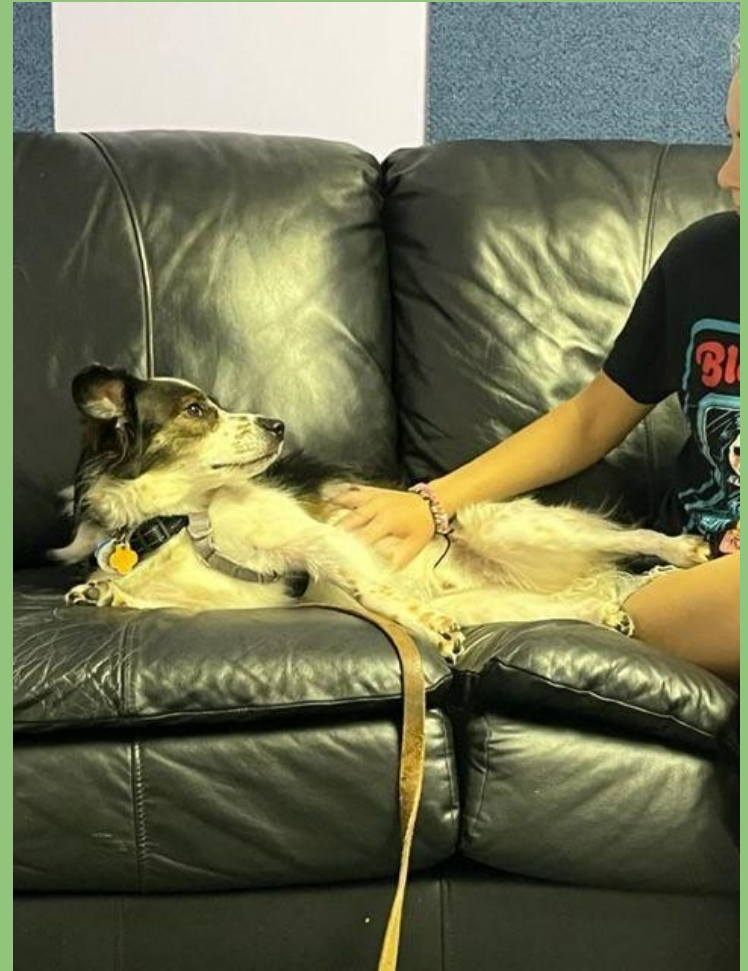
Animals with Self-hood and as Partners in Therapy

Animal selfhood vs anthropomorphic thinking

Animals experience subjectivity and memory - horses remember smiling faces, feel heart beats from a distance

Animals with a core sense of self

Animals with a sense of agency (Irvine, 2002) – initiation, perhaps ability to understand that they are the cause of certain actions

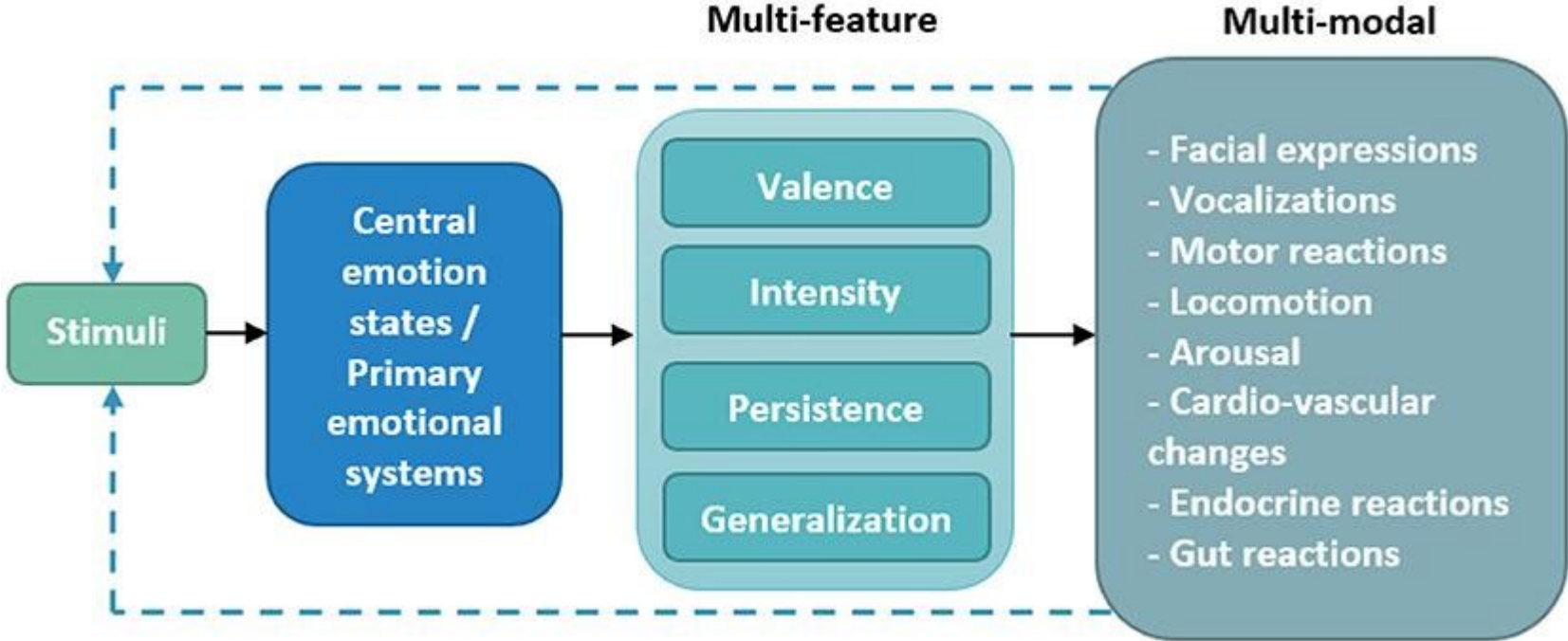


Horses as Therapy Partners

- Horses authentically connected to their nervous systems and body responses with ability to attend to very subtle environmental cues
- Fight, flight, freeze, run, collapse and dissociate
- Humans look to prey animals for evidence of environmental and personal safety
- Herd animals - look for feedback, cues and attachment



Human-Animal Interaction Model



Panksepp 7 Emotional Shared States Human-Animal Bond (One Health)

- Seeking - equine sniffing the ground, in HAI child wanting to engage
- Panic/Grief - activation of “separation distress” - horse vocalization, child seeing out support person or therapy animal “dragon wings’ story
- Care - activation of caregiving center - nurturance, mutual grooming - story of family interacting with horses mutually grooming
- Play - strengthens social learning and connection “horses playing tag”
- Lust - seductive behaviors in human or animal (horse offering for butt rub as activating for child with trauma history)
- Rage - activation of anger - fight response
- Fear - protect against predators/ reduced response to pain

Panksepp, J. (1998). *Affective Neuroscience: The Foundations of Human and Animal Emotions*. New York, NY: Oxford University Press.

Neurobiology considerations in equine-human therapy partnership

- Dr Bruce Perry ; “ beginning the recovery process for relational neglect can start with animals”
- Dr Siegel’s brain-based attachment theory and how interactions with horses can be approached with sense of wonder/curiosity
- Horses are spontaneous and instinctual and provide an opportunity for families to consider premeditated thoughts, conflicted emotional states and role behavior patterns



Theoretical Considerations in AAI

Bowlby/Ainsworth : secure base and safe haven - attachment considerations. “Attachment systems are malleable- they can be shaped” (Robyn Gobbel)

Kellert & Wilson (1993) - biophilia hypothesis - an innate connection and affiliation with animals

Vygotsky: the importance of social interactions, culturally sensitive, zone of proximal distancing (a skill just out of reach but more knowledgeable other support to master skill) and scaffolding (building on skills and the “more knowledgeable other” fades support)

Perry (2008) dysregulation leads to struggles with self-soothing, resilience tied to the development of healthy relationships; reason, relate, regulate: neurosequential model of care - “relational elements are evocate (and I would add visceral) cues

Seigel (2012 -2021) 4 S’s - Safe, Seen, Secure and Soothed and SIFT : Helping children pay attention to sensations, images, feelings and thoughts ; Connect and Redirect, Name it to Retame it, play can lead to integration

Porges (2011-2015) – Polyvagal theory- connections with emotional and autonomic response, animals may decrease HPA axis and reduce fight/flight response, social engagement leads to emotional regulation

Geller and Porges(2014) - ***mutual relational presence*** “that promotes relational depth, safety and therapeutic change” in Parish-Plass & Pfeiffer chapter in Transforming Trauma ed Tedeschi & Jenkins (2019)

A Relational Psychodynamic Perspective (Santostefano, 2004)

- The child makes sense of developmental struggles through the mind-body matrix (an intricate network that includes nervous system, immune system and emotional body). Developmental negotiations of representing, enacting and revising / “the therapist should avoid interpretation and discussing instead focusing on registering and conveying with bodily expressions, “a visceral” understanding of the children’s unformulated emotional/traumatic experience. ‘I feel what you feel show me more” “horse exhale “
- Body image schemas - these early body- based meanings are projected (Johnson, 1987) in interactions . The enactments in therapy/life may include posture, gestures, rhythm of movement, dialogue, touch perceptions, facial expression, images and fantasies . (Jack made a grimace Anicare story)
- a broken link between experiencing the me-self (tactile/kinesthetic self) and the observing I-self (perceiving, interpreting , knowing) HAI/nature and therapeutic alliance as bonding ...
- Trauma impacts the child’s matrix of embodied life metaphors and leads to impasse in self-reflexive functioning the observing-self (social roles)

Sensorimotor Psychotherapy (Ogden 2008)

SMP is a prelude to cognitive and emotional processing , directly treats the body helpful with dissociation, frozen states, emotional reactivity, flat affect and hyperarousal

It is not an end to itself as suggested in Levine's Somatic Experiencing – integrates cognitive and emotional processing

SMP is a method for facilitating the processing of sensorimotor reactions to trauma and for resolving the destructive effects of these reactions on cognitive and emotional experiences.



SMP Therapist Guidelines

Bottom up processing is kinesthetic and is initiated by sensorimotor and emotional realms that precede thought hence AAI very beneficial here as connection in action

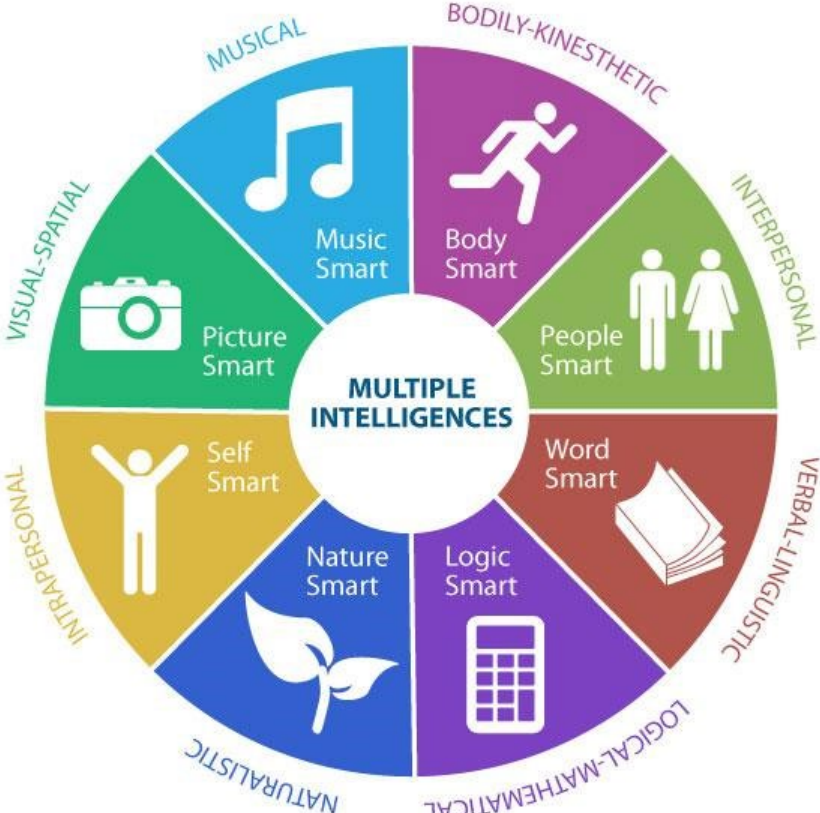
In SMT the discharge of energy in trauma is integrated not discharged – interactive work in HAI is perfect

Therapist and equine as “auxiliary cortex”, horses head down, grazing “he knows how to nurture himself”

Regulate affective and sensorimotor states through development of Social-emotional sensing through therapeutic relationship/partner with animals

Teach client to self-regulate by tracking and articulating sm processes - HAI for practice Mindfully track sequential physical movements and sensations associated with unassimilated sensorimotor reactions such as motor impulses, muscle tension, trembling, and micro movements such as posture, heart rate and breathing.

Gardiner's Multiple Intelligences Model



Van Fleet (2017) Core Competencies in Animal Assisted Play Therapy

General Therapy Skills

Play Therapy

Animal Behavior

Animal Handling

Split Attention

Facilitation of human-animal interactions

Ethics and welfare

Relationship

Van Fleet (2017) Directive Applications of AAT

Self efficacy

Attachment and Relationship

Empathy

Self regulation

Specific Problem Resolution

Attentional and Behavior Difficulties

Anxiety Reduction

Trauma-informed care is based on core elements of positive developmental and therapeutic experiences

Knowledge of the neurobiology of trauma informed professional practice

Rhythm in therapeutic alliance, horse, MH, ES and horse with “pinging”

Relationship is the vehicle for change, tertiary relationship in the human-animal bond, in equine work following EAGALA principles there are 4 relationships happening simultaneously

Relational (safe)

Relevant (developmentally-matched)

Repetitive (patterned)

Rewarding (pleasurable)

Rhythmic (resonant with neural patterns)

Respectful (child, family, culture)

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A diagram showing two human head silhouettes facing each other. The left silhouette is red and contains text describing the left brain. The right silhouette is dark blue and contains text describing the right brain. The two silhouettes overlap in the center.

Left Brain*
Logical
Sequential
Rational
Analytical
Objective
Looks at parts

Right Brain
Random
Intuitive
Holistic
Synthesizing
Subjective
Looks at wholes

LEFT BRAIN versus RIGHT BRAIN ENGAGEMENT IN

The Right Brain

PROCEDURAL MEMORY

Expressing and experiencing feelings

Awareness of body sensations

Role-Playing

Metaphor and Analogies

Visualizations

Relaxation Techniques

BEING IN THE HERE AND NOW

Tone of voice

Facial expressions

Gestures, posture

Autobiographical memory

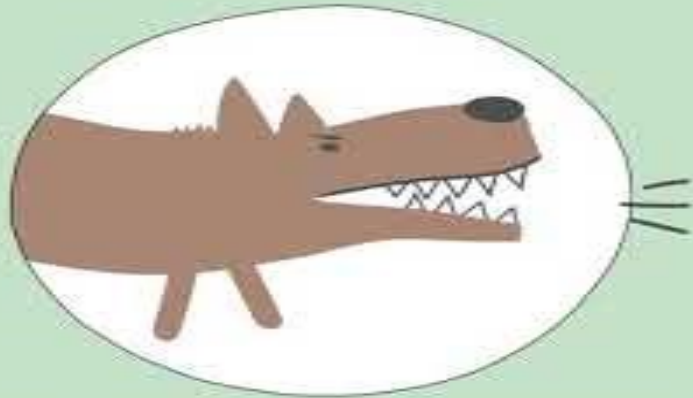
Establish successful therapeutic relationship

Attunement

Sense of Safety

Unconscious communication

Animal Themed Brain Education



FIGHT FREEZE FLEE

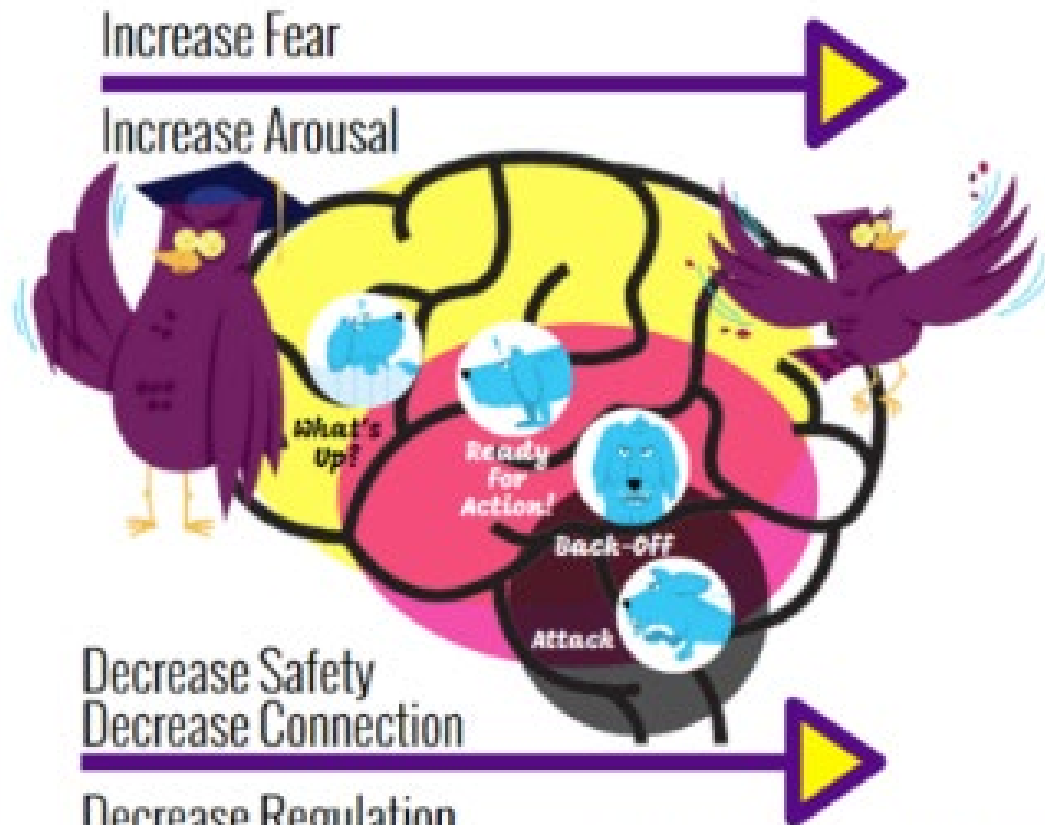
Protection Brain

watch dog

Not safe!!!

Fight/Flight

Sympathetic Arousal



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*based on Dr. Bruce Perry's State Dependent Functioning

Possum Brain (Dissociation Continuum*)

Based on Dr. Bruce Perry's State Dependent Functioning

alert

La La Land



Avoidance

alarm

Trickster



Compliance Robotic

fear

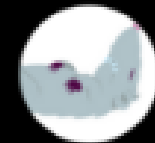
Shut Down



Shut-Down

terror

Play Dead



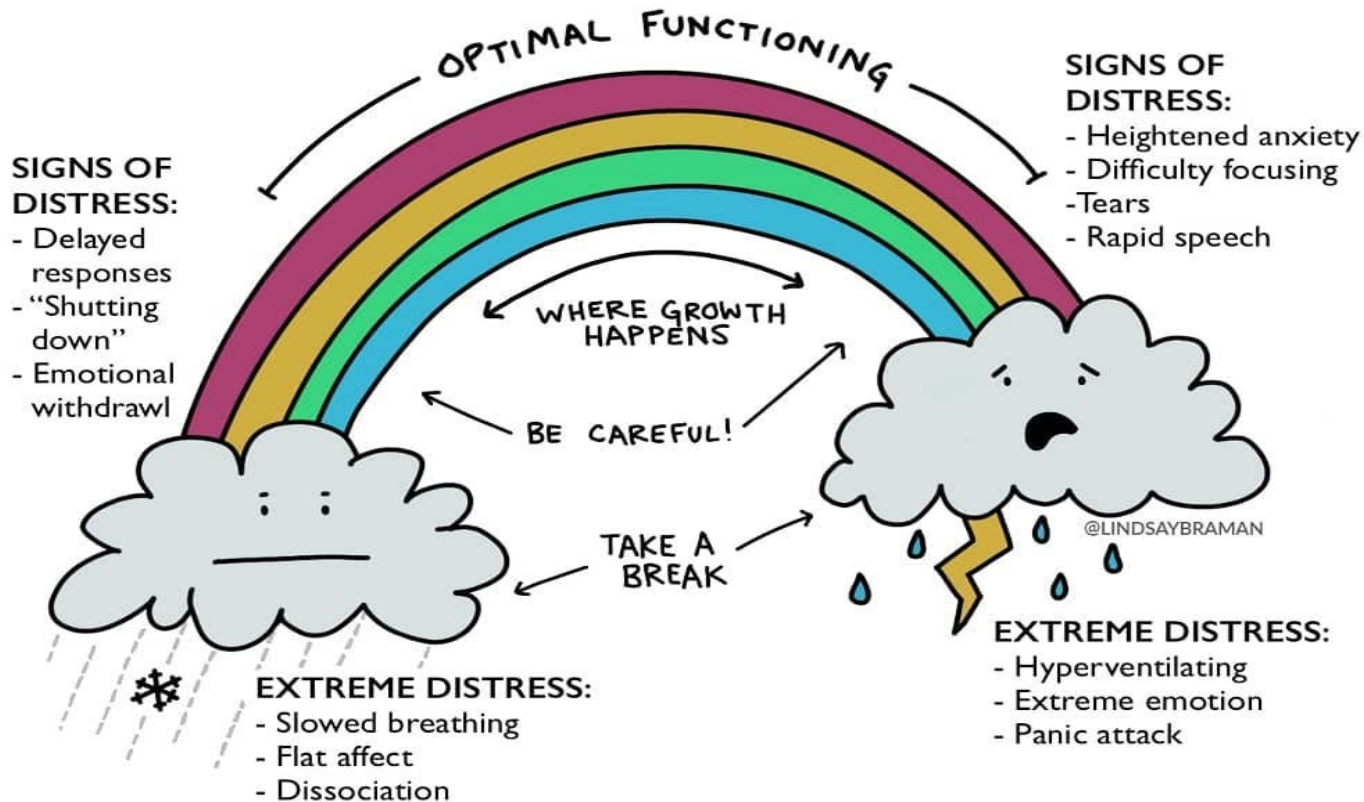
Non-Responsive Fainting

Based on Dr. Bruce Perry's State Dependent Functioning

Possum Images Copyright © 2022 Robyn Gobbel

WINDOW OF TOLERANCE

(IN RAINBOW FORM!)



How does this present in HAI - in animals and humans

In the body

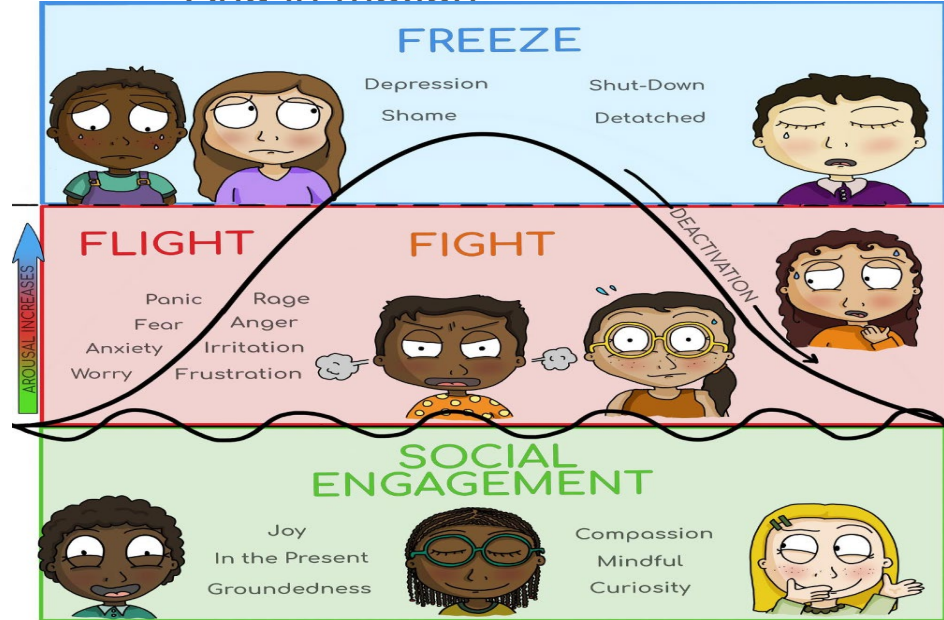
Fight Or Flight

When we encounter something scary or dangerous our bodies try to be helpful by getting us ready to **fight** or **run away**. This **fight-or-flight** reaction might make you feel strong feelings in your body and mind.



- Feeling dizzy
- Breathe quickly
- Feeling hot or sweaty
- Body or muscles feel tight
- Want to get out, run away, or hide
- Get cross or short-tempered
- Feeling scared or nervous
- 'Butterflies' in my tummy
- Legs shake

And in motion



Window of Tolerance

Hyperarousal



Point of overwhelm



@creative.clinical.psychologist

Regulation

Optimal
(window of tolerance)

Escalation trigger



Feeling OK

©Juliet Young

Hypoarousal



Comfort and something sweet

Case Example

Hyperaroused/excitability to see horses

Regulated feeding the horse hay, listening to rhythm of chewing

Hypoaroused with any conversation, climbed into dad's lap

Freeze when horse turned head quickly when tractor went by

Totally collapse, non verbal, curling up into herself, reluctant to be touched

MH went for obvious state "are you cold?"

Wrapped in a blanket by dad - went into heated space

Drew with crayons her

THE STRESS RESPONSE IN KIDS

FIGHT

Yelling, Screaming,
Using Mean Words

Hitting, Kicking, Biting,
Throwing, Punching

Blaming, Deflecting
Responsibility, Defensive

Demanding,
Controlling

"Oppositional",
"Defiant", "Noncompliant"

Moving Towards What
Feels Threatening

Irritable, Angry,
Furious, Offended
Aggressive

FLIGHT

Wanting to Escape,
Running Away

Unfocused, Hard
to Pay Attention

Fidgeting, Restlessness,
Hyperactive

Preoccupied, Busy with
Everything But the Thing

Procrastinating, Avoidant,
Ignores the Situation

Moving Away From What
Feel Threatening

Anxious, Panicked
Scared, Worried,
Overwhelmed

FREEZE

Shutting Down,
Mind Goes Blank

Urge to Hide,
Isolates Self

Verbally Unresponsive,
Says, "I don't know" a lot

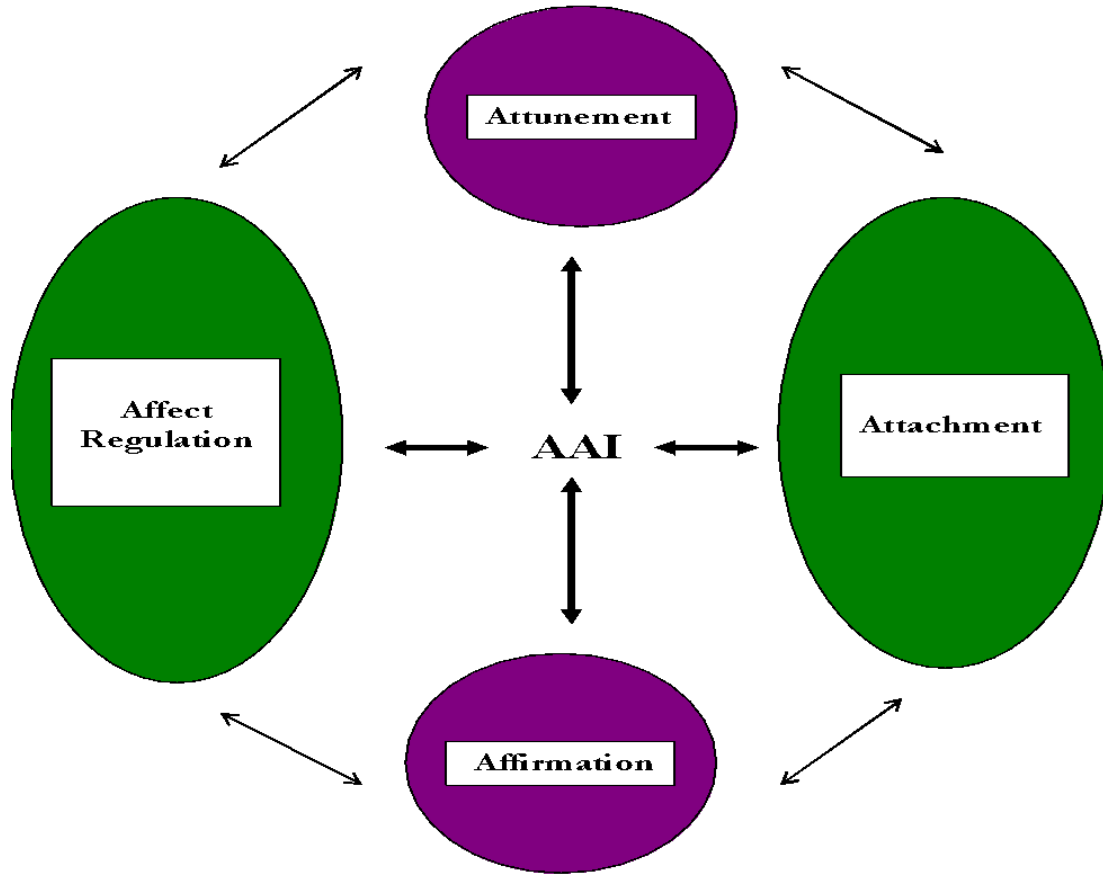
Difficulty with
Completing Tasks

Zoned Out,
Daydreaming

Unable to Move,
Feeling Stuck

Depressed, Numb,
Bored/Apathetic,
Helpless

Nicoll Model for Animal Assisted Interventions in Therapy



Equine Activities for Attunement

- Observation/Attunement/Intersubjectively synchronized- gesture, facial expression, tone
- Post-it Notes Exercises
- Grooming/touch/heart rate
- Normalization/use of play therapy friendly neurobiology informed tools (Gobbel brain base, Siegel “flipped their lid”) children seeing prey response
- Proximity and space
- Ekholm-Frye Phase I in EFP - Stabilization and Moving toward Sense of Safety - understanding orienting and appraisal (Ekholm- Fry in Tedeschi & Jenkins , 2019) - walking behind a horse
- One big sandtray in ring/paddock all worldview (Arenas for Change use of narrative to understand relationship and connect)
- Somatic awareness/ feeling the “pinging” of energy when connected and distant



Case consideration : Child with trauma by sibling



Horses Inspire Curriculum - Session 1 Attunement

SESSION 1 EXAMPLE :

Observation of horses turned out in a herd.

Beginning discussion of the impact of environment, sensory issues, likes/dislikes of animal behavior – focus on relationship, not the problem – “focus on the donut not the hole” Focus on strengths in the horses relationships, don’t need to name family strengths per say, but can gently encourage as play is the language of children and provides opportunities for sharing feelings, thoughts and wishes. For example, Mom observed horse snort and walk away “she was annoyed” -her 11 year old son who “doesn’t like his animals at home” shared “I’m going to build a big house on the hill so I can see all the horses playing”. Therapist asked “on what hill” and Dad said “tell me about your house” and Mom “ your grandfather would love it here”. ES said “ the horses would be happy you lived here”. Again, lots of strengths shared here, but in a child’s language including the horses Using Default Mode Network - inner world and social relationships which leads to empathy



“When we focus on building connection and having healthy boundaries, the need to set boundaries will lessen” (Schultz-Jobe & Jobe)

SETTING BOUNDARIES

Disrupts/damages connection

“you can’t”

Ultimatums

Punishment

Controlling others

Setting boundaries may be necessary for safety - but it can still damage connection

HAVING BOUNDARIES

Maintains connection

“I need”

Do-overs

Modeling/Teaching

Controlling self

A connected relationship is built on both attachment and detachment (rapprochement)

Hughes (1998)/Natural Lifemanship Guidelines for Attachment

Accepting

Affective Attunement

Curious

Eye contact - look, aware of site
distance for safety

Empathic

Holding - touch

Loving

Reciprocity – the dance of
proximity and space

Playful

Rituals – brush, feed

Active engagement

Paradoxical reactions – use of
humor/ change it up/do overs

Mutual Attunement

Presence

In AAT – “you’d never know he is
barrel racer, as so calm”

Cooperation by choice

Equine Therapy interactions/clinical considerations for attachment

Grooming - bilateral stimulation; Equine EMDR

Nurturing Activities - giving hay, making/using toys for connection

In connection and observation there can be a collision and reworking of past attachment relationships loss and struggles- HAI as “counter-complementary attachment proximity strategies” (Parish-Plass, page 119, Mallinckrodt,2000) ie disorganized attachment to consenting connection. So a pushy horse may allow a child in dorsal vagal to activate into a window of tolerance or “too much”

Corrective Emotional Experiences in HAI with horses “that was then this was now”, “Sweetie was the victim and now she kicks ass” to “I was a victim and NOW I AM A WARRIOR!”

Feeling worthy of being loved - secure base/safe haven, reciprocity - “stable moments”

Clearer reading of congruence and incongruence in attachments styles and connections from “Joey always does that.... To today with the rain on the roof he is more activated”

Emotional safety - social engagement system online (polyvagal theory) seen in herd dynamics “getting comfort”

Rupture/Repair; “attachment adaptations are brilliant and attachment can change” (Gobbel)

PACE - playfulness, acceptance, curiosity, empathy (Golding & Hughes, 2012)



EMBODIMENT THROUGH THE LENS OF POLYVAGAL THEORY



DIALOGUE
SHARING A THOUGHT PROCESS

COMMUNICATE SHARED CUES

HEALING IS POSSIBLE
CUES OF SAFETY
DEVELOPING A DIFFERENT NARRATIVE

NO ACCOUNTABILITY VULNERABILITY

RATHER! MAKE IT A SHARED JOURNEY OF DISCOVERY

TRAUMA

BEING DEFENSIVE



CLOSING DOWN
PURPOSE = SURVIVAL
OFTEN SEEING DANGER WHERE THERE IS NONE



TRUST
BEING HELD

RECIPROCITY
SHARED EXPERIENCE
CONNECTING WITH EACH OTHER

EVALUATION



THERE'S SURELY SOMETHING WRONG WITH ME...

OUR BODY PERCEIVES IT AS A THREAT

BLOCKS CREATIVITY

TAKE A DEEP BREATH
EXTEND THE DURATION OF YOUR PHRASES



EMBODIMENT → UNFOLDING OF WHAT IT MEANS TO BE HUMAN



SAUNA-CULTURE

HEALERS SUPER-REGULATORS
BEING A COMPASSIONATE WITNESS WITHOUT WANTING TO FIX

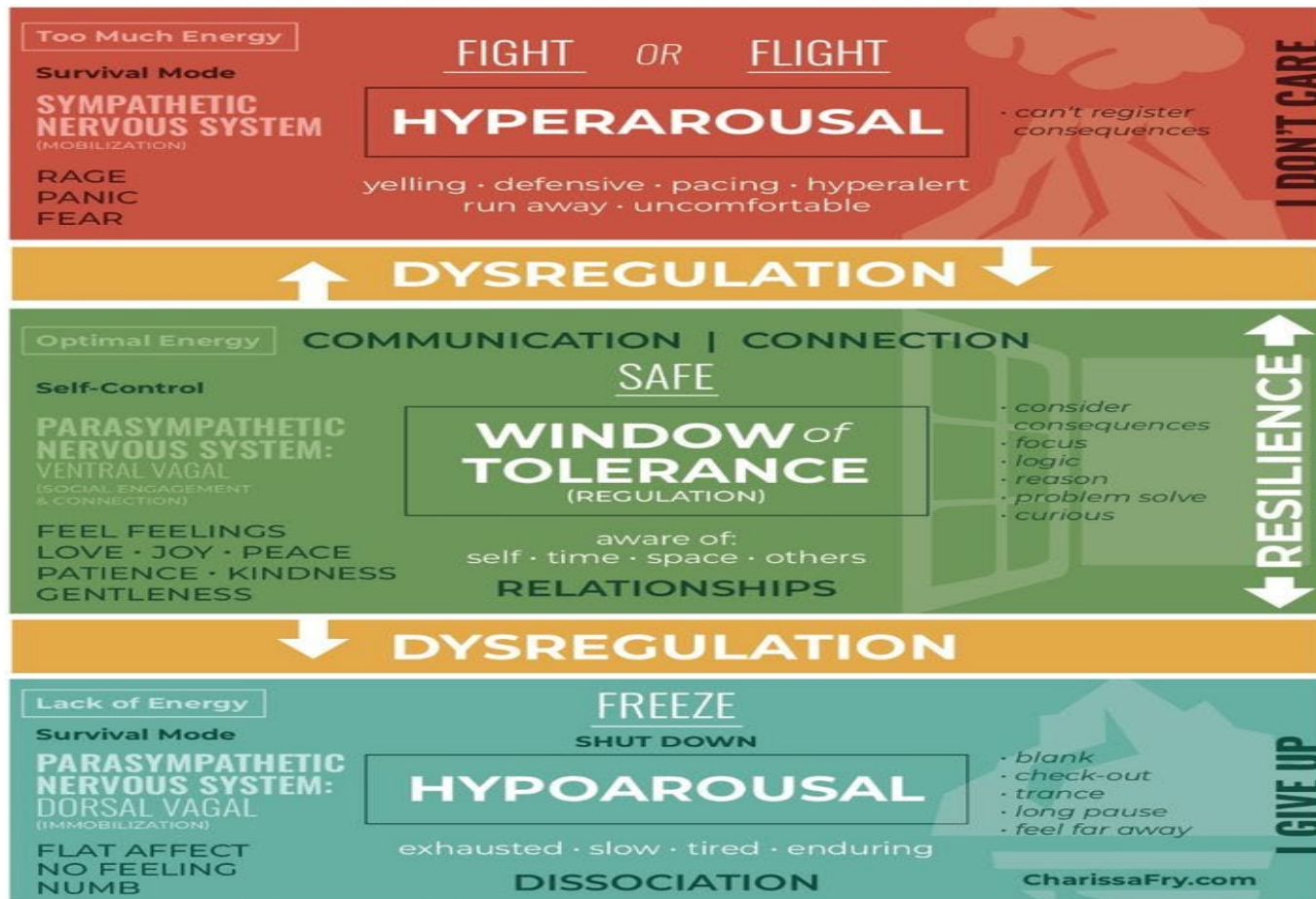
FEELING SUPPORTING LISTENING SAFE & HEARD
THEIR PRESENCE MAKES SPACE FOR OTHERS

BEING CAUTIOUS → PLAYFUL CURIOSITY

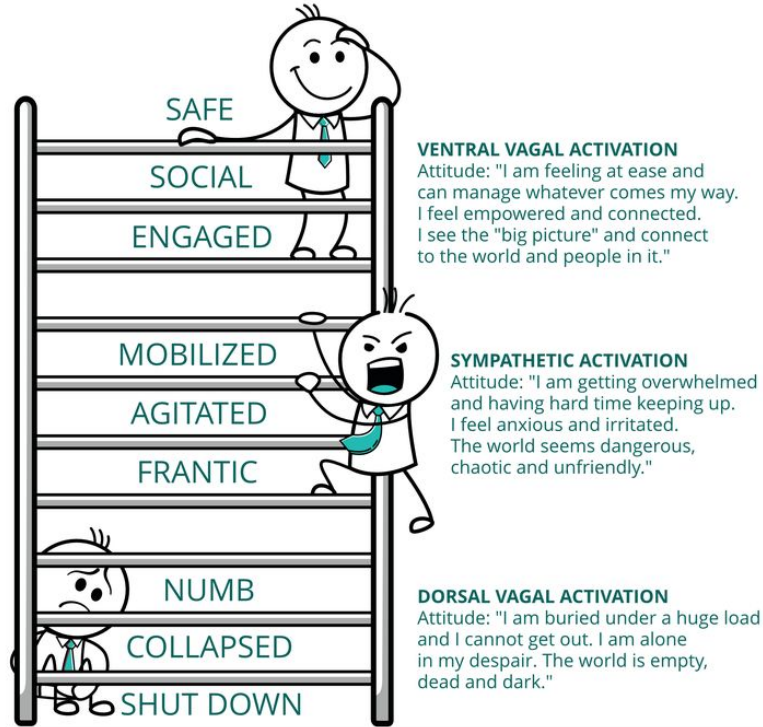
SOCIAL ENGAGEMENT SYSTEM
OUR BODIES WANT TO TRUST, SHARE & CONNECT

DISSOCIATION AS AN ADAPTIVE FUNCTION

POLYVAGAL THEORY



AUTONOMIC NERVOUS SYSTEM AS A LADDER



Adapted from *The Polyvagal Theory in Therapy* by Deb Dana

Arousal levels

The autonomic nervous system -
orienting to environment -
pinging, my stuff, clients stuff, ES
stuff, child's stuff, herd mates
stuff, environmental stuff

(animals as prey and
fight/flight/flee/collapse/dissociate)

In trauma children in high arousal
coping with sounds, smells, and
intrusive images

Understanding optimal arousal
zone (Porges)

Partnering with Social
Engagement system (HAI to help
with awareness of BP, breathing –
use of play stethoscope, music,
feeling heartbeat)

Gently guide equine-child
relationships capacity to move
within comfortable window of
tolerance (bilateral stimulation)



Flexible

Social Engagement

Safe

Joyful

Focused

Curious

Empathetic

Calm

Interested

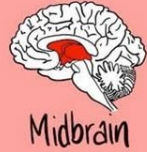
Mindful

Playful

Happy

Creative

-Trigger-



Flight & Fight



move away from threat

move towards threat

Panicked

Fearful

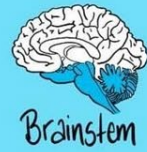
Worried

Furious

Nervous

Frustrated

Angry



Depressed

Freeze

collapse / immobilize from threat

Shameful

Trapped

Stuck

Sad

shut down

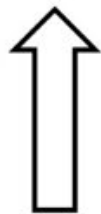
Helpless



Adapted from the work of Polyagal Institute
Revelations in Education
Created From the Work of Dr. Stephen Porges & Deb Dana

THE WINDOW OF TOLERANCE

Zone of
Hyperarousal



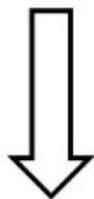
- Fight/Flight (sympathetic nervous system activated)
- Anxiety, anger, impulsivity, reactivity, threatened
- Can't effectively connect with others

Window of
Tolerance



- Present, engaged, alert (ventral vagal)
- Access to creativity and problem solving
- Connected – Safe & Social

Zone of
Hypoarousal



- Freeze (dorsal vagal)
- Numb, shut down, protective path of last resort
- Disconnected from self and others, can't act

Equine Assisted Psychotherapy for Affect Regulation

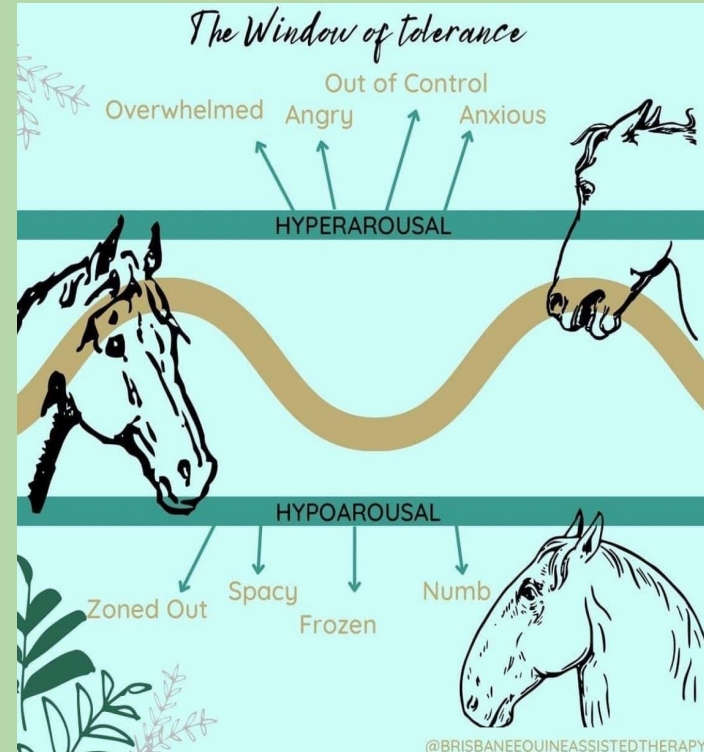
- **“Introception is the underlying regulator of all emotional experiences” (Dr Mona Delahooke) the foundation of physical, psychological, and social development in our bodies and allows us the ability to recognize stimulus that is originating from within the body, so use of mindfulness breathing, co-regulated breathing with horse, five sense exercise, grounding techniques, lead rope exercise (Amanda Martin, Ph D,2023); drumming Natural Lifemanship**
- **Equine psychotherapy with MH/ES and equine partner as the auxiliary cortex - The 9 functions of the prefrontal cortex : regulation of body – SNS-PNS balance, attuned communication, felt sense of other’s experience, regulations of emotions, response flexibility - pause, options, evaluate options, appropriate decisions, empathy, insight- self-awareness, fear extinction (GABA fibers to amygdala), intuition - deep knowing without logic and morality- behaviors based on empathy and what is just - here interactive activities free leading joined up “ Jax chose to be near me because I’m calm” from a boy discharged the day before for 6 day psychiatric hospitalization; “I want Sweetie to do this, but she is interested in grazing, let’s do that. POWER OF THE SILENCE PAUSE so critical in affect regulation, intuition often unappreciated at time in traditional mental health, but listening in practice and connection to “gut responses”. ” . Fear extinction - example of horse charging the gate : teen with self-stimulation after but then screamed “ I am a warrior” and processed how this experienced helped integrate her sexual abuse**

Equine psychotherapy in Affect regulation

- Equine therapy (horse, space, proximity) as a co-regulator, “horse as a tuning fork” (Scholte 2019) and reading/responding and reacting to experience of coherence or not - Horse calms and settles and client settles with grooming (family example) ; horse head up heightened response and playful and client remembers a time they played and felt safe - incongruence, client with disorganized attachment with some aggression “I’ll get the horse to walk with me” - and horse backs away with quick somatic awareness with therapeutic support to take a breathe, do body screening, try again- it is in the “failures” and challenges that AF is “felt and processed” - rupture/repair
- Understanding activation/deactivation cycles in the human-equine interaction within or just out of windows of tolerance(story of Joey in the indoor during a storm “I got this”)
- Faux windows of tolerance (Kain and Terrell,2018) - Looks one way, maybe another - appeasement (lifting and dragging foot - all the ways it can be seen)

Horses Inspire - Session 3 and/or 4 Affect Regulation

- Dad-child session, in paddock with Jax who is head shy - curriculum suggestion halter and lead - recognized “faux window of tolerance” looks like “he would do it” (appeasement) “but he doesn’t like it”
- Both decide Jax “doesn’t like it”, so “we won’t do it and “first time alone without friend so he looks nervous”
- Did free walk and Jax joined up and they went threw goal “we worked together to get it done”
- Notices at end of session Jax muscles tensed up, head high “that is exactly how I feel before I explode” - dad amazed as “he never identified somatic/verbal awareness in 5 years of therapy”



Equine Considerations in Affirmation

- Let the child name the success/repair/meaning making or narrative - “NO saying GOOD JOB”
- Narrative techniques of “noticing” and “wondering” allows the child to have their own experience with the horse
- Self-efficacy (van Fleet, 2017) and problem solving skills
- Integration of other therapeutic modalities for self-expression (journaling, art, cards - love Therapets, Superhero cards, Debra Dana polyvagal cards and charts etc)
- Honors their own unique ideas, ways of connecting with the horse and solving challenges in interactive therapy



Dr Ricky Greenwald's Fairy Tale Phase Model in Trauma

1. Evaluation - learning client's strengths, resources, trauma/loss history, life situation and presenting problem
2. Identification and enhancement of client's goal and motivation
3. Trauma-informed case formulation
4. Stabilization, potentially including case management, parent-training, problem-solving and strategic avoidance of high risk situations
5. Identification and enhancement of coping and affect tolerance skills
6. Resolution (maybe too strong a word I would include integration and somatic processing) of trauma and loss memories
7. Consolidation of gains
8. Anticipation of future challenges (consider here Vygotsky's scaffolding concepts, as well as normalization of neurobiology understanding and somatic processing of triggers, flooding, disassociation responses)

Horses Inspire 6 Session EFP Program for Children and Families

Phase oriented approach that encompasses the principles of trauma-informed practice that can help families

- To pay attention to present-moment body experiences, as well as the ability to verbalize affective experiences
- To help integrate information from the body to the brain and back to the body
- To invite action-oriented experiences such as touch, grooming and activities in the ring to cope with somatic experiences such as affective dysregulations and hyper-arousal
- To encourage meaning making of past experiences from present moment body experiences (Ogden, 2006)
- To increase the ability to express empathy through interactive/observational activities with a horse
- To promote experiences of empowerment and teamwork through interactions with a large horse in a ring (co-leading, obstacle course)
- To enhance an increased sense of hopefulness in handling life stressors as a result of increased knowledge and normalizing responses to life stressors (autonomic ladder, prey response)

Polyvagal therapy/Play Therapy/EFP

- Parents and children can learn how to intentionally stimulate the ventral vagus to regulate the physiological response to the visceral perception of a lack of safety (neuroception) -breath, sigh, belly breath
- Experiential therapy may help children and families to find a neuroception of safety to access previously unrecognized or unprocessed internal feelings
- Playing together can build empathic relationship - taking turns, shift from internal state of vigilance to a state of enjoyment as ventral vagus responses are stimulated
- Family play allows for co-regulation

Clinical Themes to Explore in Interactive Activities with Children and Families

- Movement/proximity/sensory
- Building trust
- Attunement and presence/present awareness
- Attachment - connection, disruptions and repair
- Affective Regulation - self-regulation, equine regulation, co-regulation
- Discipline/boundary setting
- Play and present moment experiences
- Nonverbal communication and increasing awareness of evocative cues (ie, eye rolling, arms crossed, etc)
- Practice new behavior and creative problem solving
- Emotional Congruence/incongruence

Horses Inspire : First known Phase-based Trauma Informed Parent-Child Curriculum incorporating Polyvagal theory/Play Therapy/EFP (Soul Friends, 2021)

- Parents and children can learn how to intentionally stimulate the ventral vagus nerve to regulate the physiological response to the visceral perception of a lack of safety/risk (neuroception) -breath, sigh, belly breath - in interactions with horses like co-regulated grooming.
- Experiential therapy may help children families to find a neuroception of safety to access previously unrecognized or unprocessed internal feelings - horses in motion (horses playing tag), horses nurturing self (hay)
- Playing together can build empathic relationship - taking turns, shift from internal state of vigilance to a state of enjoyment as ventral vagus responses are stimulated (free leading horse through goal - “you go first”)
- Family play allows for co-regulation and connection- Parent-Child Relationship Therapy (Bratton & Landreth, 2020) tips - “ focus on the donut, not the hole - focus on relationship NOT the problem, BE a thermostat not a thermometer - RESPOND rather than REACT

Clinical Considerations in EFP in Military/Veteran Parent-Child Relationship

- Increase engagement and motivation of parent-child relationship
- EFP may help families that are not verbally gifted, may encourage to be less analytical and intellectual and inspire new relational patterns
- Awareness of personal boundaries, effect of posture, demeanor and effect on others
- Emotional contagion
- Recognize survival states and move out of safety to fight, flight, shut down
- Once recognized can move to self or co-regulation in equine assisted therapy connection
- Observation of animal managing internal physiological states = animal's actions as a barometer of stress/connection

Veteran/Military Families Considerations..

- PTSD symptom of “attention bias toward threat” can greatly impact parenting particularly with concerns regarding child and the veteran feeling unworthy and detaching from the connection
- PTSD symptomatology often leads to increase in anger and aggression in parenting
- Parents with PTSD and depressive symptomatology had an increased likelihood of reporting children as “acting afraid or not being warm”
- This may lead to withdrawal from the parent-child attachment and avoidance of participation in children’s activities
- PTSD depressive symptoms impact family engagement, family dynamics and attachment - in one study 171% more likely to report behavioral and emotional challenges in their children

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