

THERAPEUTIC RIDING AND YOU
AN EVALUATION OF HOW A LOCAL THERAPEUTIC RIDING PROGRAM
AFFECTS THE LIVES OF RIDERS

**A Project presented to the
Master of Public Health Program
Lakehead University**

**In Partial Fulfillment
of the Requirements for the
Degree of Master of Public Health
(Health Studies)**

**By
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THERAPEUTIC RIDING AND YOU

An evaluation of how a local therapeutic riding program affects the lives of riders

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The purpose of the study was to determine how the Thunder Bay Therapeutic Riding Association impacts the lives of the riders; to determine what aspects of the program are most important to the riders; and to provide the participants a chance to give feedback about the program. There were 129 questionnaires sent out to riders, parents/caregivers and volunteers who had participated in the therapeutic riding program the previous year. Questionnaires were completed and returned by 12 riders, 15 parents/caregivers, and 22 volunteers. The questionnaires were made up of close-ended and open-ended questions. A focus group was also conducted to supplement the findings of the questionnaires. There was one rider, one parent, and one volunteer participant in the focus group. The study investigated four domains of life: physical well-being; social well-being; development and activity; and emotional well-being. The results indicated that the therapeutic riding program has a positive effect on all of these four domains. The greatest effects of the program appear to be in the areas of emotional and social well-being. This was seen in that the program provides a positive and uplifting experience; provides social benefits to riders; and supplies a sense of accomplishment, independence and empowerment. The two most important aspects of the program are the horses and the volunteers. The program could be improved by having more consistency with the volunteers and equipment; by having individual goals and a progression of skills for each rider; and by giving more instruction and information to the volunteers. Overall, the program is commended by many of the individuals involved and has been both enjoyable and beneficial. Limitations to the study include that it involved a small number of participants, that it involved a small number of rider participants, and that only people involved in the program during the previous riding season were invited to participate.

INTRODUCTION

Therapeutic riding programs offer horseback riding to people with a variety of physical and mental disabilities in order to enhance their quality of life (NARHA, 2005; Scott, 2005). The program in Thunder Bay, Ontario is offered by the Thunder Bay Therapeutic Riding Association (TBTRA). The program, which has been in existence since 1990, operates twice a week and has riders register for eight 45-minutes sessions (TBTRA, 2005). Up until the present there has only been anecdotal evidence of the effects of this program on its riders; therefore there were three purposes to this study:

1. To determine whether or not the TBTRA program has a positive impact on the lives of the riders;
2. To determine what components of the program are most valued by the riders; and,
3. To give a chance for riders, parents/caregivers, and volunteers to give feedback about the program.

Therapeutic Riding

Therapeutic riding, a form of equine assisted therapy, has been in practice in Canada since 1962 (Scott, 2005). Equine assisted therapy is an umbrella term used for “interaction between special needs individuals and horses” (Scott, p. xi). Equine assisted therapy can be divided into three main categories: hippotherapy, equine facilitated

psychotherapy (EFP), and recreational riding. Hippotherapy is “administered by licensed physiotherapists, occupational therapists, speech-language pathologists or assistants who have been trained in the principles of hippotherapy” and refers to “the use of the horse’s movement as a treatment tool to improve neuromuscular function” (Scott, p. 5). EFP is administered by mental health professionals and refers to “a form of experiential psychotherapy that includes, but is not limited to, equine activities such as handling, grooming, lunging, riding, driving, and vaulting” (Scott, p. 6). Recreational riding uses the teaching of horsemanship skills in order to provide physical and emotional stimulation and enhance quality of life (Scott). For the purposes of this paper, the term therapeutic riding will be defined as the recreational riding category of equine assisted therapy.

Therapeutic riding programs offer horseback riding to people with a variety of physical and mental disabilities including muscular dystrophy; cerebral palsy; visual impairment; Down syndrome and other intellectual disabilities; autism; multiple sclerosis; spina bifida; emotional disabilities; brain injuries; spinal cord injuries; amputations; learning disabilities; attention deficit disorder; deafness; and cardiovascular accident/stroke (NARHA, 2005).

There are currently over seventy centres registered with the Canadian Therapeutic Riding Association (CanTRA) that offer various forms of equine assisted therapy. The majority of the centres offer hippotherapy or recreational riding. For example, of the seventy-one member centres of the Canadian Therapeutic Riding Association, 12 programs offer a

hippotherapy component, 68 offer recreational riding, and 3 offer other services (CanTRA, 2006). In addition to programs registered with CanTRA, there are also programs operating independently, such as the program in Thunder Bay, Ontario.

Evaluations of therapeutic riding and hippotherapy programs have reported a variety of benefits: improvement in physical function including gross motor function, balance, posture, strength and overall health (Cherng, Liao, Leung, & Hwang, 2004; Graham, 1999; Wiger 2003; Would, 1998); improvement of social, communication, and behavioural skills (Ionatamishvili, Tsverava, Loriya, Sheshaberidze, & Rukhadze, 2004; Leitao, 2003; Macauley & Gutierrez, 2004; Wiger, 2003); and improvements in self-confidence, self-image, and self-esteem (Burgon, 2003; Bizub, Joy, & Davidson, 2003; Farias-Tomaszewski, Jenkins, & Keller, 2001; Graham, 1999).

However, many of the evaluations have lacked strong research methodology. In a review of articles published in *The Scientific and Educational Journal of Therapeutic Riding* from 1997-2003, MacKinnon (2005) found significant deficiencies in the research related to equine assisted therapy. There have been many reports of observed benefits to participants in therapeutic riding and hippotherapy programs, but these observations are not reflected in statistical results (Pauw, 2000). The positive effects reported by those involved in therapeutic riding and hippotherapy programs may be clinically meaningful, but are often undetected by statistical tests. The two main challenges to conducting research in the field are small sample sizes and difficulties obtaining a control group. These challenges are likely caused by a high degree of heterogeneity among participants

(Pauw); and because of these challenges, it has been difficult to demonstrate results using rigorous scientific studies.

Development of the Study Design

Most of the empirical data that have been gathered regarding therapeutic riding and hippotherapy programs have focused on physical and neuromuscular variables and not on psychosocial factors (Kaiser, Spence, Lavergne & Vander Bosch, 2004). There also seems to be a lack of reports of the effects of therapeutic riding from the perspective of the riders (MacKinnon & Ferreira, 2002; Debusse, Chandler & Gibb, 2005). One objective of this study was to gather input from those most directly involved in the program in order to understand the meaning of therapeutic riding in the lives of the riders.

The current study operated under the assumption that riders, parents/caregivers, and volunteers can all give reliable reports about the effects of therapeutic riding. This assumption was made based on the fact that these individuals are either directly affected by therapeutic riding; directly involved in the lives of the riders; or directly involved in the riding program. The researcher also assumed that, by using a variety of methods of gathering data, a reliable collection and interpretation could be made. The data were collected by means of questionnaires and a focus group. Participants included volunteers, parents/caregivers, and riders involved in the TBTRA program during the previous riding season. The questionnaires, containing both closed and open-ended questions, were

distributed by mail. After the completed questionnaires were returned, a focus group was conducted in order to expand on the information gathered using the questionnaires.

Studies of a similar design have been used before in therapeutic riding research.

MacKinnon and Ferreira (2002) conducted a study where they used open-ended and close-ended questions to explore the meaning of therapeutic riding for 7 children with cerebral palsy. They asked yes or no questions for the closed part of their study. They divided the questions into three categories of concepts reported as valuable in the literature they reviewed: social interaction, personal accomplishment, and sport.

Young and Bracher (2005c) also conducted a study using a questionnaire with open and closed questions to gather input from professionals using horsemastership as a therapeutic and educational tool. Young and Bracher asked closed questions that covered four categories of benefits: physical, psychological, educational, and social. Each category was investigated using a variety of questions in the closed portion of their questionnaire. The participants were asked to score statements about benefits of horsemastership by circling strongly agree, agree, disagree, or strongly disagree. The closed questions in the current study were developed based on a consideration of the questions asked by Young and Bracher. They were also developed based on a consideration of various methods of defining and investigating quality of life.

Quality of Life

There is a wide variety of definitions and tools used in the assessment of quality of life. One thing that is generally agreed upon is that quality of life is multidimensional and is affected by different aspects of an individual's life. Therefore, different areas of a person's life must be investigated in order to get an accurate idea of one's quality of life.

Felce and Perry (1995) examined a wide variety of quality of life definitions and assessment tools and summarized the common categories into five domains: physical well-being, material well-being, social well-being, development and activity, and emotional well-being. They defined quality of life as “an overall general well-being that comprises objective descriptors and subjective evaluations of the five domains... all weighted by a personal set of values” (pp. 60-62). There have been reports of benefits from therapeutic riding that fall into all of the domains mentioned by Felce and Perry, excluding the domain of material well-being. This study has attempted to provide a subjective evaluation of the effects of therapeutic riding on the other four domains (physical well-being; social well-being; development and activity; and emotional well-being).

Focus Groups

A focus group was conducted as part of this study, in order to supplement the data collected in the questionnaires. Focus groups are “a way to better understand how people feel or think about an issue, product, or service” (Krueger & Casey, 2000, p. 4). They are planned discussions that take place in a non-threatening environment in order to obtain perceptions about a specific subject. Focus groups take place in a comfortable setting and involve people with common characteristics. Because of this relaxed atmosphere, they promote the disclosure of more information about what participants think and feel about a subject. Participants in a focus group are influenced by each other and less so by the researcher (Krueger & Casey).

METHOD

Procedure

Approval was obtained from the Research Ethics Board through Lakehead University before beginning the data collection. Permission was obtained from the Thunder Bay Therapeutic Riding Association to invite riders, parents/caregivers, and volunteers to participate in the study. Data were collected through the form of questionnaires, distributed in the mail (see Appendices A, B & C), and a focus group following the detailed process from Krueger and Casey (2000).

Participants

The population of potential participants included 2 independent riders, 40 child or dependent riders, 36 parents/caregivers, 23 adult volunteers and 28 volunteers under the age of 18. All volunteers, riders, and rider parents/caregivers who had participated in the local therapeutic riding program during 2006 were invited to participate in the study. Volunteers who were members of the TBTRA Board of Directors were not included. There were 129 potential participants who received a cover letter, consent form, invitation to participate in the focus group and questionnaire in the mail (see Appendices A, B, C, & D). The questionnaires were numerically coded so that responses could be categorized but kept anonymous. Two written reminders were mailed out to all potential

participants. Reminders were sent both before and after the date requested for the return of the completed questionnaires.

Instruments

The questionnaires took approximately 20-25 minutes to complete. There were four separate questionnaires: two for riders and one each for parents/caregivers and volunteers (See Appendix C). The independent rider questionnaire was comparable to the parent and volunteer questionnaires. The other rider participants received questionnaires that were shortened and simplified. All questionnaires asked about the impact of the program on the lives of the riders. Parents/caregivers were asked to assist the riders in completing the questionnaire if necessary. The questionnaires were developed by the author based on a combination of the following:

1. The four domains of quality of life proposed by Felce and Perry (1995);
2. The questions asked by Young and Bracher (2005); and,
3. An understanding of the elements of the local therapeutic riding program.

The questionnaires comprised both close and open-ended questions. There were two sets of close-ended questions. One set evaluated the effects of the program on different aspects of the riders' lives and the other evaluated the importance of different components of the program.

The different components of the program that were evaluated were (a) the farm; (b) the volunteers; (c) the horses; (d) the other animals (dogs, cats, etc.); (e) the bonfire; (f) learning horseback riding skills; (g) playing games; (h) riding in the field; (i) getting some exercise; (j) the tea, coffee, pop and cookies; and (k) the other riders and parents. Participants were also given a chance to list other components of the program that they thought were valuable.

In the open-ended questions, participants were given a chance to comment on what part of the program riders liked the most; comment on what part of the program riders disliked; suggest potential improvements to the program; share why they were no longer planning to participate in the program, if that was the case; and make any additional comments.

Participants interested in being part of the focus group were asked to contact the researcher. Written consent was obtained at the time of the focus group (see Appendix A). The purpose of the focus group was to expand on and gain a better understanding of the information received in the questionnaires, especially the responses to the open-ended questions. The focus group took approximately one and a half hours to conduct and three participants, the researcher, and the academic advisor were in attendance. The names of the participants were kept confidential and are not reported in the final results/discussion of this study. The researcher conducted the focus group based on structured questions prepared beforehand (see Appendix E), using guidelines from Krueger and Casey (2000),

but there was also ample opportunity for participants to discuss topics that were important to them.

Following the focus group the data were transcribed and the transcript was mailed to each of the three participants. This process was implemented in order to give participants a chance to expand on or clarify anything they had said. None of the participants chose to make any clarifications to the transcripts.

Data Analysis

SPSS (version 15.0) was used to do correlation statistics and a frequency analysis from the responses to the closed questions. Means for each question were also calculated by giving a numerical value to each response ranging from one to four. A value of one indicated a less favourable response while a value of four indicated a more favourable response. For example, if a participant chose **Strongly Agree** for the statement “Participating in the therapeutic riding program increases riders’ self confidence,” a value of four was assigned. If a participant chose **Strongly Agree** for the statement “Participating in the therapeutic riding program worsens riders’ overall quality of life,” a value of one would have been assigned. For the first section of the questionnaire, participants were asked how much they agreed with statements about therapeutic riding. Two of the questions in this section were repeated with the exact wording. Some of the questions were repeated in the form of a negatively worded counterpart question. The

second section of the closed questions asked participants to rate the importance of different aspects of the riding program.

In order to test for validity, the responses to the positively worded statements and their negatively worded counterparts were correlated. The relationship between the responses to these pairs of statements was analyzed using Kendall's tau tests, which are nonparametric. Nonparametric statistical tests were chosen because of a lack of normal distribution in the results. The trends of the responses to the negatively and positively worded questions were also compared in order to determine validity.

The responses to the open-ended questions and the focus group transcripts were both analyzed for thematic content using long-table analysis (Krueger & Casey, 2000).

RESULTS AND DISCUSSION

Description of Participants

There were 49 completed questionnaires returned representing a 38% return rate. Twenty-two volunteer; fifteen parent/caregiver; one independent rider; and eleven child/dependant rider questionnaires were returned. There were 17 riders represented in the study. The youngest rider participant was 6 years old and the oldest rider participants were in between the ages of 26 and 40. All but one of the parent/caregiver questionnaires was completed by parents; therefore the parent/caregiver responses will be labeled with the word parent from this point forward. Riders, parents, and volunteers of all ages participated in the study. The largest proportion (36%) of volunteer participants was under the age of 18 and most (76%) of the riders were under the age of 14. The majority of the questionnaires were completed by or representing females and most of the participants had been involved in the program for less than five years. See Tables 1 & 2.

Table 1

Description of Volunteer Participants

	<u>Age category (years)</u>					<u>Sex</u>		<u>Number of years involved</u>			
	<18	16-25	26-40	41-55	>55	Male	Female	1	2-4	5-10	>10
Number of Participants	8	5	5	3	1	5	17	15	6	0	1

Table 2

Description of Riders Represented in the Study

	<u>Age category (years)</u>					<u>Sex</u>		<u>Number of years involved</u>			
	6-9	10-13	14-19	20-25	>25	Male	Female	1	2-4	5-10	>10
Number of Participants	6	6	1	1	3	4	13	4	6	3	4

All but three of the seventeen riders represented in the study plan to continue with the therapeutic riding program. Twelve (57%) of the twenty-one volunteers indicated that they plan to continue participating in the program.

Closed Questions

Section One—Thinking About Therapeutic Riding, How Much Do You Agree With the Following Statements? Participating in the Therapeutic Riding Program...

In this section, participants were asked to indicate how much they agreed or disagreed with statements about the effects of therapeutic riding. Respondents could select **Strongly Disagree**; **Disagree**; **Agree**; or **Strongly Agree**. For the positively worded statements, the responses were

rated so that: **Strongly Disagree = 1, Disagree = 2, Agree = 3, Strongly Agree = 4.** For the negatively worded statements, the responses were rated, in reverse, so that: **Strongly Disagree = 4, Disagree = 3, Agree = 2, Strongly Agree = 1.** For the independent rider, parent, and volunteer questionnaires, 17 questions had a 100% response rate; 13 questions had a 97% response rate; and 4 questions had a 95 % response rate. The questions regarding dysfunctional movement patterns, reflexes, and self discipline had a response rate between 87 and 88 %. The dependent rider questionnaires had a 100% response for all of Section One except for the question regarding whether or not participating in therapeutic riding makes riders want to try other new things: there was one response missing from this section. Four statements, regarding making riders more comfortable around people; making riders more shy; decreasing riders' interest in life; and improving coordination, were accidentally omitted from some of the questionnaires so no comparison between volunteers, rider, and parents could be made. Many participants expressed confusion regarding the statements about dysfunctional movement patterns and the responses were not consistent. Because of the lack of clarity regarding this question, the results about dysfunctional movement patterns are not reported.

Parent, Volunteer, and Independent Rider Responses

Positively worded questions.

The five highest ranking statements were the ones asking about improving self-confidence, providing pleasure, putting riders in high spirits, increasing social experience, and improving concentration (see Figure 1). Participants gave the statements regarding the ten following areas of life a mean ranking equal to or greater than 3.5: (a) providing pleasure; (b) self-confidence;

(c) putting riders in high spirits; (d) overall quality of life; (e) social enjoyment; (f) coordination; (g) learning new skills; (h) strengthening muscles; (i) providing social experiences; and (j) improving concentration.

The two highest scoring statements were those regarding self confidence and giving pleasure. The study by Young and Bracher (2005) agrees with these results, in that the highest scoring statements in their closed questions regarded the same effects.

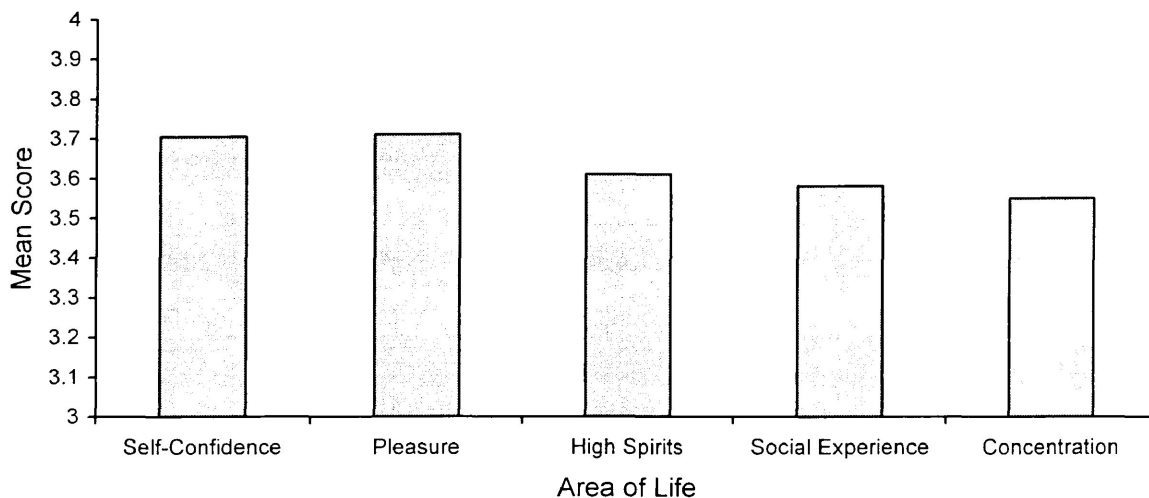


Figure 1. Top five mean scores for Section One, indicating how much participants agreed that therapeutic riding had an effect on a given area of the riders' life. Responses are from independent rider, parent, and volunteer participants.

The questions about increasing trust, improving self-image, increasing motivation to achieve, and making riders more comfortable around people had a mean score under 3.5, but did not receive any responses in the **Disagree** or **Strongly Agree** categories.

The statements in the first section that had a less positive response were: “Participating in the therapeutic riding program... increases emotional control; makes reflexes faster; improves respiration and circulation;” and “helps riders make friends” (see Figure 2). These statements had the smallest mean scores; received only a few **Strongly Agree** responses; mostly **Agree** responses; and some **Disagree** responses. There was only one **Strongly Disagree** response to the positively worded questions. It was in response to the statement: “Participating in therapeutic riding helps riders make friends.” There was only one participant that responded in this way, while many others reported strongly about the social benefits, both in the close-ended and open-ended questions. The difference in response from the one participant may have been due to confusion in reading the question and overlooking whether the question was worded positively or negatively.

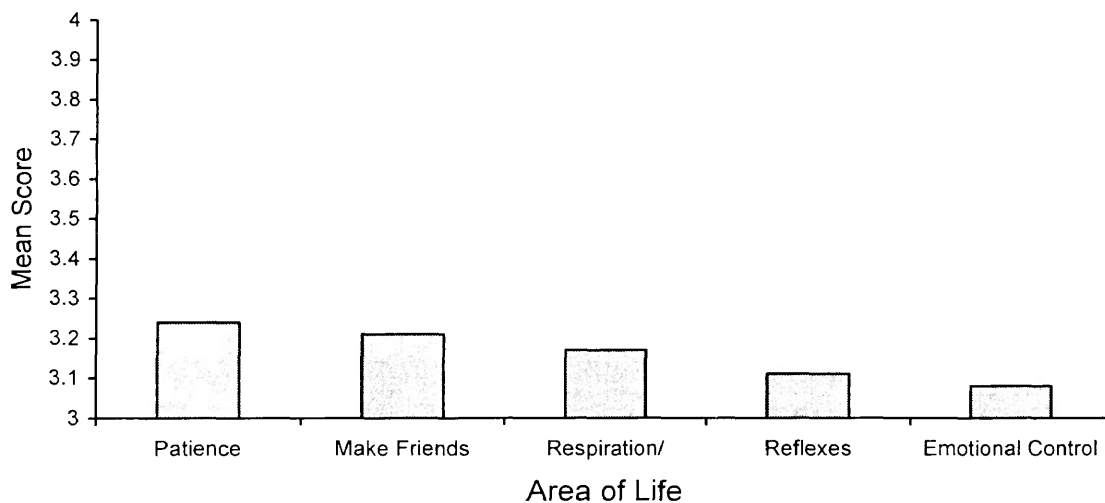


Figure 2. Bottom five mean scores for Section One, indicating how much participants agreed that therapeutic riding had an effect on a given area of the riders’ life. Responses are from independent rider, parent, and volunteer participants.

Most of the statements in the first section of the questionnaire received similar responses from parents and volunteers, but some of them differed (see Figures 3 – 8). Parent participants tended to give more positive responses than volunteers. This was especially seen in the areas of visual/spatial perception; uplifting the spirit of the riders and giving them pleasure; social factors; increasing trust; improving self image; and improving self discipline. Parents are more involved and invested in the lives of the riders. Therefore, perhaps they are more likely than volunteers to see, report and be impressed by positive effects.

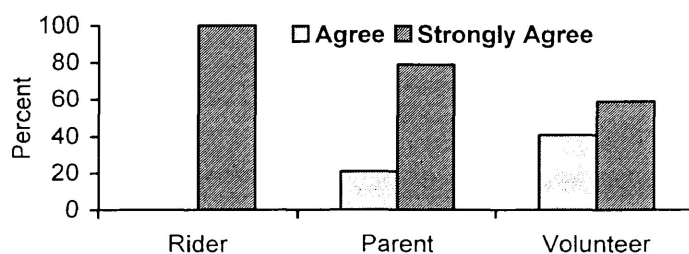


Figure 3. Percentages of independent rider, parent and volunteer participants responding in each category to the statement “Participating in the therapeutic riding program **improves self confidence.**” A similar pattern of responses was found for statements regarding **giving pleasure, improving quality of life, and helping to learn new things.**

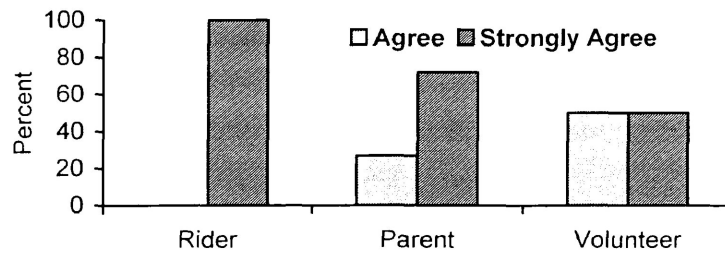


Figure 4. Percentages of independent rider, parent and volunteer participants responding in each category to the statement “Participating in the therapeutic riding program **provides social enjoyment.**” A similar pattern of responses was found for statements regarding **putting riders in high spirits, increasing social experiences, increasing trust, and improving self-image.**

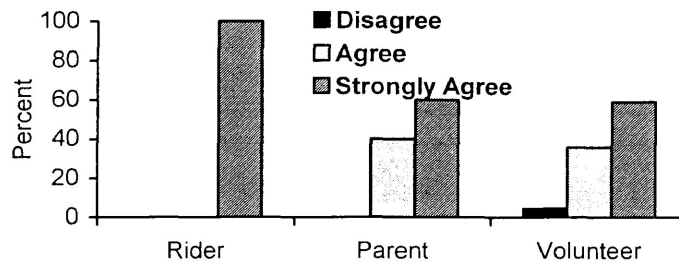


Figure 5. Percentages of independent rider, parent and volunteer participants responding in each category to the statement “Participating in the therapeutic riding program **strengthens muscles.**” A similar pattern of responses was found for statements regarding **improving concentration and increasing flexibility.**

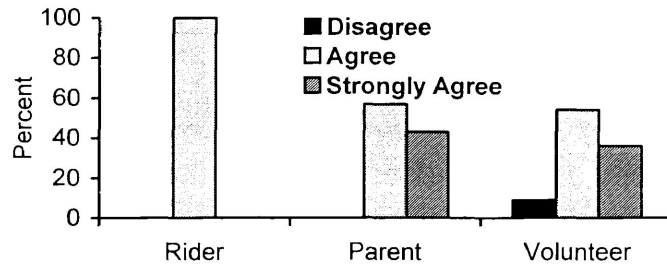


Figure 6. Percentages of independent rider, parent and volunteer participants responding in each category to the statement “Participating in the therapeutic riding program **makes riders more healthy.**”

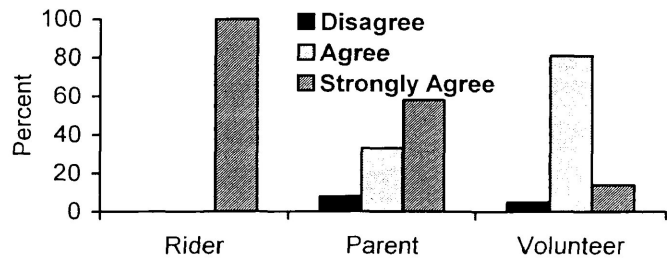


Figure 7. Percentages of independent rider, parent and volunteer participants responding in each category to the statement “Participating in the therapeutic riding program **improves self-discipline.**” A similar pattern of responses was found for statements regarding **improving visual/spatial perception** and **making reflexes faster.**

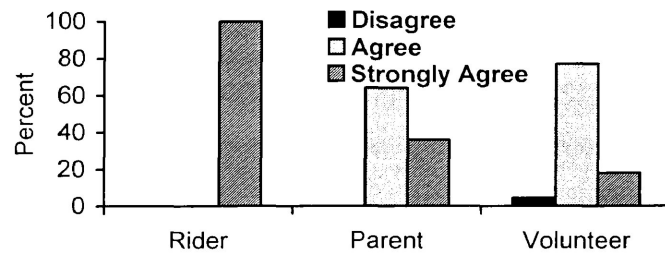


Figure 8. Percentages of independent rider, parent and volunteer participants responding in each category to the statement “Participating in the therapeutic riding program **develops patience.**” A similar pattern of responses was found for statements regarding **increasing motivation to achieve, improving risk-taking abilities, helping make friends, improving respiration and circulation, and improving emotional control.**

Negatively worded questions.

Most of the negatively worded questions were answered with **Disagree** or **Strongly Disagree**. The statements “Participating in the therapeutic riding program ... worsens self discipline; makes riders less comfortable around people;” and “increases dysfunctional movement patterns” received some **Agrees**.

Nonparametric correlation analyses were conducted to compare the responses to the positively worded statements with their negative counterpart. None of the paired statements had a perfect correlation; however, nine out of twelve correlated significantly. These correlation coefficients ranged from 0.325 to 0.666 (see Table 2). The same correlations were conducted to compare the responses to the questions that were repeated

in the questionnaire with exact wording. Significant correlations for these two sets of repeated questions were found, with coefficients of $r = (p < .01) 0.618$ and $(p < .01) 0.670$.

Table 3
Correlations between responses to positively and negatively worded statements

Topic of statement	Correlation coefficient (r)
Motivation to achieve	0.666**
Patience	0.632**
High Spirits	0.558**
Coordination	0.548*
Skills	0.528**
Comfort around people	0.444*
Concentration	0.408**
Self Discipline	0.348*
Risk taking ability	0.325*
Self image	0.245
Health	0.134
Quality of life	0.085

Note. The nonparametric statistical test, Kendall's tau, was used to calculate correlation coefficient. Statements asked about the effects of therapeutic riding on different areas of riders' lives.

* $p < .05$ (1 tailed). ** $p < .01$ (1 tailed).

In general, participants gave a higher rating to negatively worded statements. That is, participants were more likely to strongly disagree that the therapeutic riding had a negative impact on the riders than they were to strongly agree that the program had a positive impact. When overall trends are compared, the responses to the negatively

worded questions followed a similar pattern to those of the positively worded questions. The negatively worded questions that scored in the top half of the means also scored in the top half of the means for their counterpart positively worded questions in five out of seven cases. The exceptions were the responses for the statements about improving the riders' self image and making the rider more healthy. All of the negatively worded questions that scored in the bottom half of the means, also scored in the bottom half of the means for their positive counterparts.

Child/Dependent Rider Participant Responses

The scoring of responses for the dependent rider questionnaires was the same for volunteer, parent and independent rider questionnaires. The three highest mean scores were for the statements "Participating in the therapeutic riding program... makes me happy; makes my life better;" and "teaches me about riding horses." The lowest mean scores were for the statements "Participating in the therapeutic riding program...makes me want to try new things" and "makes me less shy." See Figure 9.

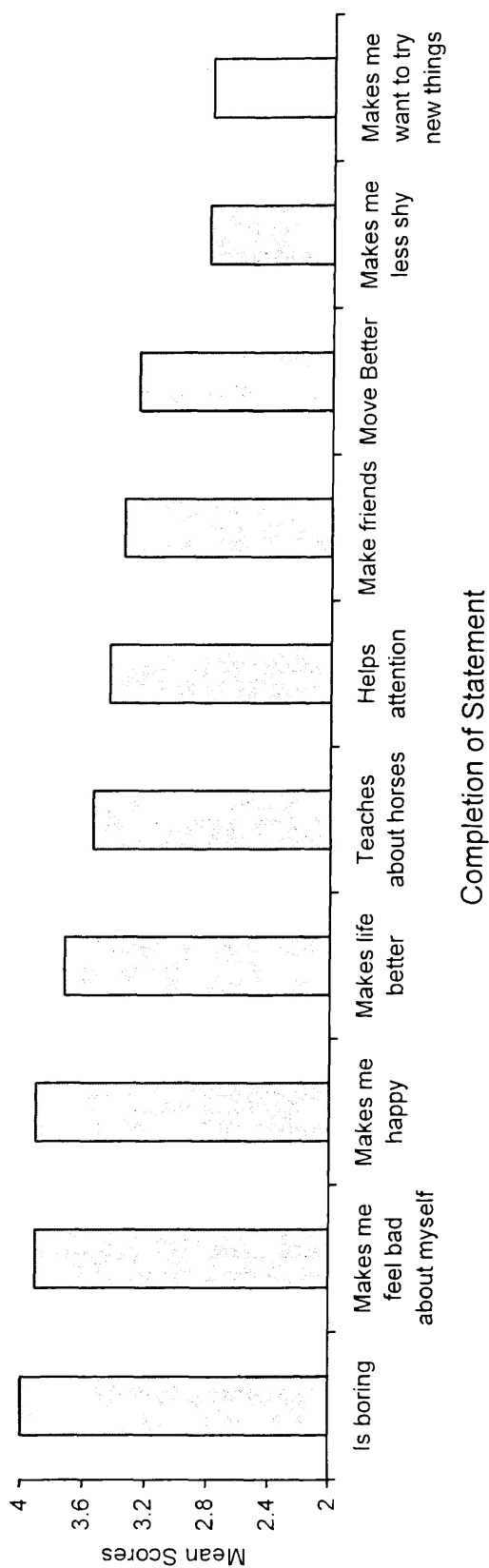


Figure 9. Mean scores for Section One, child/dependent rider participants, indicating how much participants agreed with different completions of the statement “Participating in therapeutic riding...”

There was more variety in the responses from the child/dependent riders, namely in that responses of **Strongly Disagree** to statements about positive effects of the program were more prevalent. The statements that therapeutic riding makes riders less shy; and makes riders want to try other new things were the two questions that received **Strongly Disagree** responses. The statements “Participating in the therapeutic riding program...makes me happy” and “makes my life better” received the most positive response. The statement that therapeutic riding helps riders to pay attention did not receive any negative responses, but received more **Agrees** than **Strongly Agrees**, and therefore a lower mean score. None of the riders agreed that “Participating in the therapeutic riding program is boring” (see Figures 10 – 14).

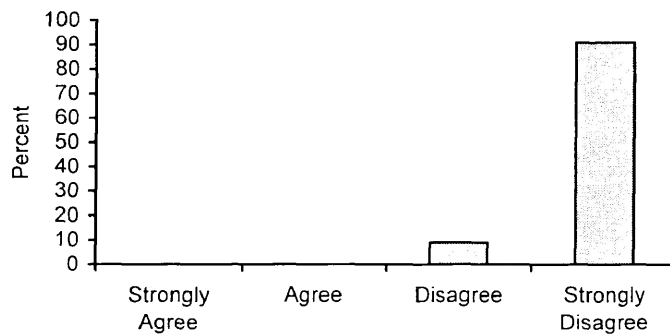
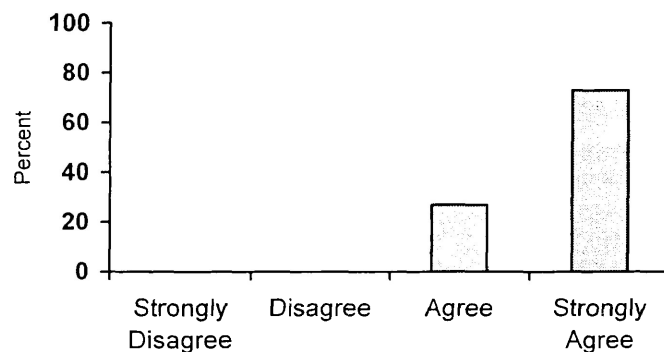


Figure 10. Percentages of child/dependent riders responding in each category to the statement “Therapeutic riding makes me **feel bad about myself.**” A similar pattern of responses was found for the statement “Therapeutic riding **is boring.**”



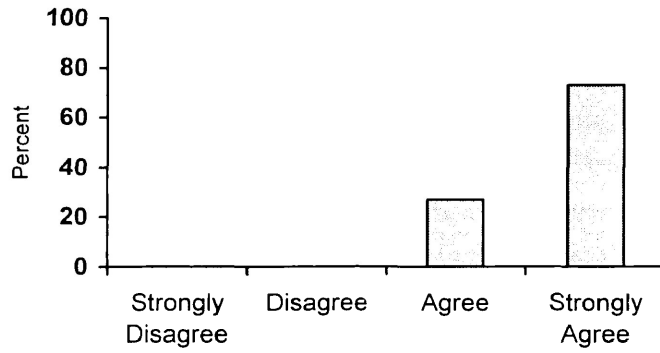


Figure 11. Percentages of child/dependent riders responding in each category to the statement “Therapeutic riding **makes my life better.**” A similar pattern of responses was found for the statement “Therapeutic riding **makes me happy.**”

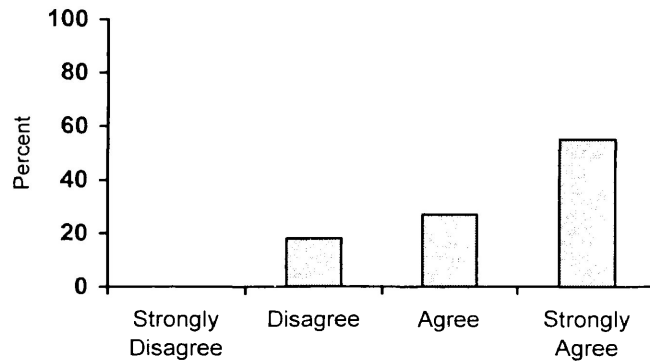


Figure 12. Percentages of child/dependent riders responding in each category to the statement “Therapeutic riding **gives me a chance to make new friends.**” A similar pattern of responses was found for the statement “Therapeutic riding **teaches me about riding horses.**”

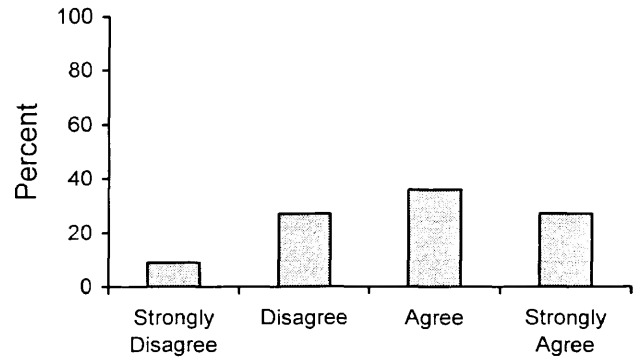


Figure 13. Percentages of child/dependent riders responding in each category to the statement “Therapeutic riding **makes me less shy.**” A similar pattern of responses was found for statements “Therapeutic riding **makes me want to try other new things;**” and “**...helps me move better.**”

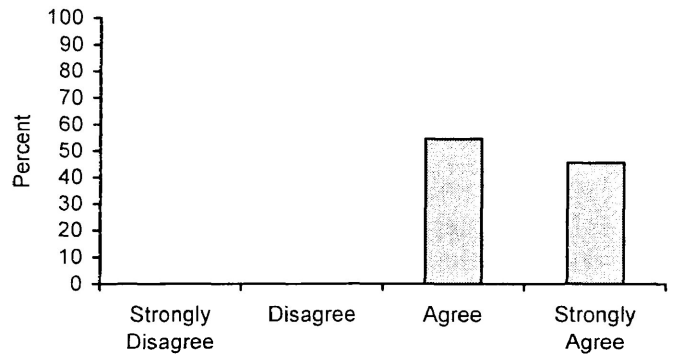


Figure 14. Percentages of child/dependent riders responding in each category to the statement “Therapeutic riding **helps me pay attention.**”

The responses from the child/dependent riders in the closed questions indicate that the program is very valuable to them and that it does have a positive impact on their lives. The trends from rider questionnaires were similar to those of parents and volunteers. This result might be largely due to the fact that many parents helped their children to complete the questionnaires, or even acted as their respondent.

Section Two: "How Important Are These Things About Therapeutic Riding?"

This section asked participants how valuable they thought different aspects of the program are to riders. The choices for this section were **Not Important at All; Slightly Important; Moderately Important; and Very Important**. The responses were rated so that: **Not Important at All = 1, Slightly Important = 2, Moderately Important = 3, Very Important = 4**. The questions were the same for all of the participants. The response rates ranged from 88 to 96%. The lowest response rate was for the question about the importance of the horses. The questions about the volunteers, other animals, and other people had the highest response rates. Six additional items were suggested as aspects of the program that participants might think were important. These items were: the drive out to the farm; seeing the facial expressions on all the kids' faces; extra lessons that are available; the swing at the side of the yard; the pancake breakfast fundraisers; and having good, functional bathroom facilities.

The aspects of the program that had the highest mean responses were the horses, the volunteers, and getting some exercise. The aspects that had the lowest mean scores were the bonfire, food, and the other animals (see Figure 15). The horses, volunteers, and field were rated by all respondents as either **Moderately Important or Very Important**.

A comparison of how riders, parents, and volunteers responded to each aspect of the program can be seen in Figures 16-23. The responses from parents, riders, and

volunteers were generally the same. The most evident differences were seen in the questions about the importance of riding in the field; the other people; the other animals; the food; and the bonfire. The findings suggest that riders and parents find riding in the field to be more important than the volunteers perceive. The findings also suggest that the bonfire, other farm animals and food are more important to the riders than the volunteers and parents would report. Riders and volunteers indicated that other people (i.e. other riders and their parents/caregivers) were more important than the parents thought they were.

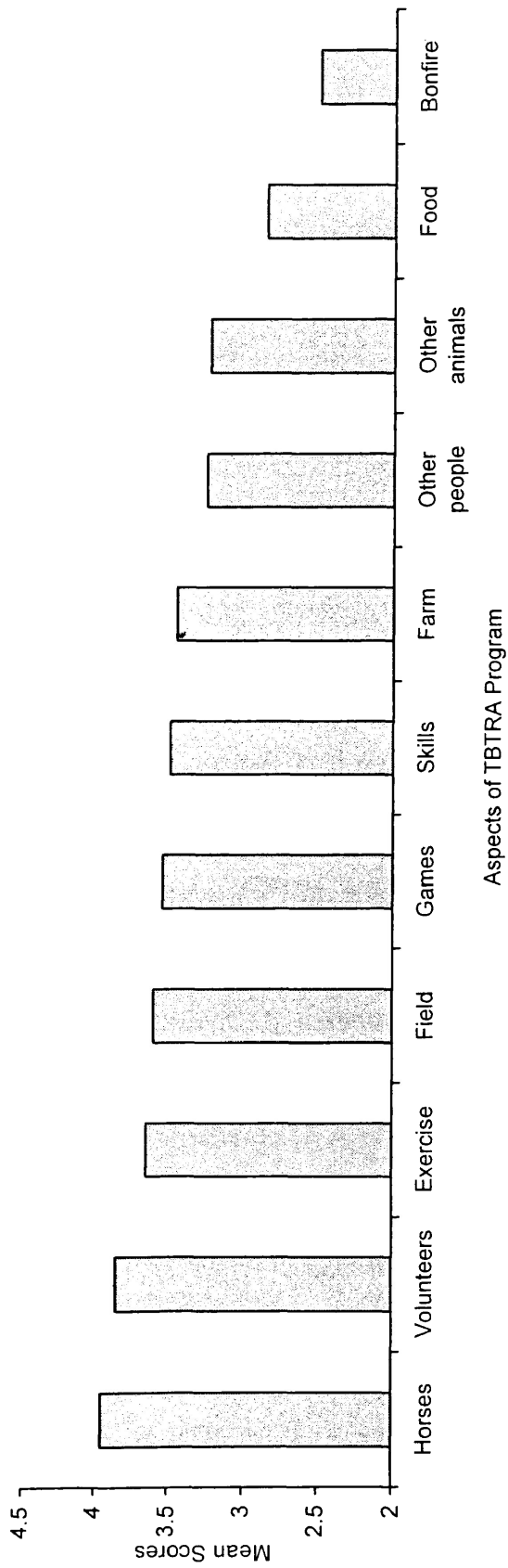


Figure 15. Mean scores for Section Two, indicating how important each aspect of the program is to the riders. Responses from riders, parents, and volunteers included.

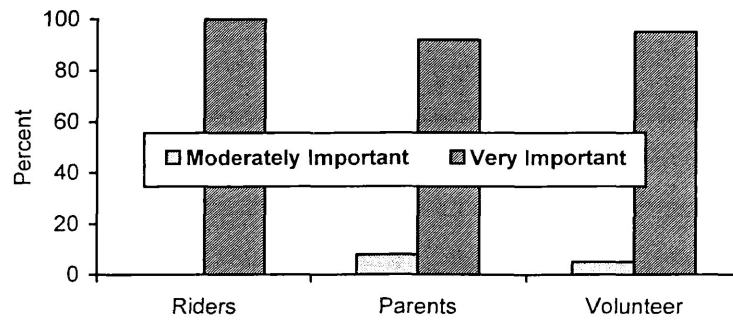


Figure 16. Comparing responses of riders, parents and volunteers concerning the importance of the **horses** to the therapeutic riding program. A similar pattern of responses was found for the importance of **volunteers**.

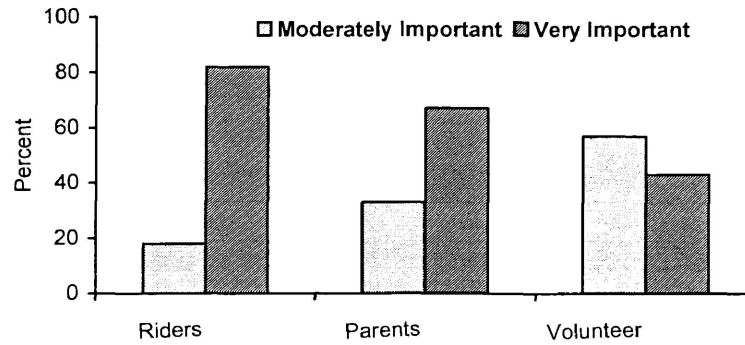


Figure 17. Comparing responses of riders, parents and volunteers concerning the importance of the **field** to the therapeutic riding program.

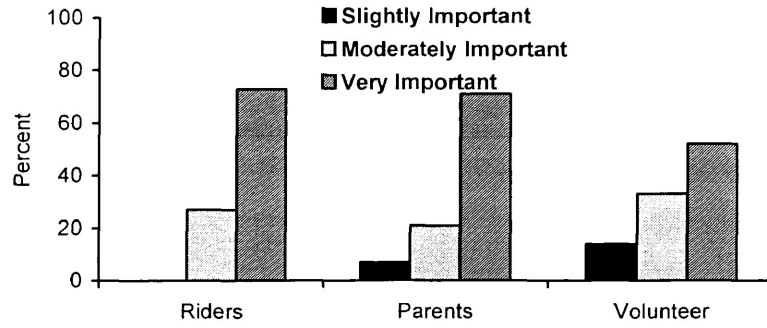


Figure 18. Comparing responses of riders, parents and volunteers concerning the importance of the **games** to the therapeutic riding program. A similar pattern of responses for the importance of **exercise** and **learning horseback riding skills**.

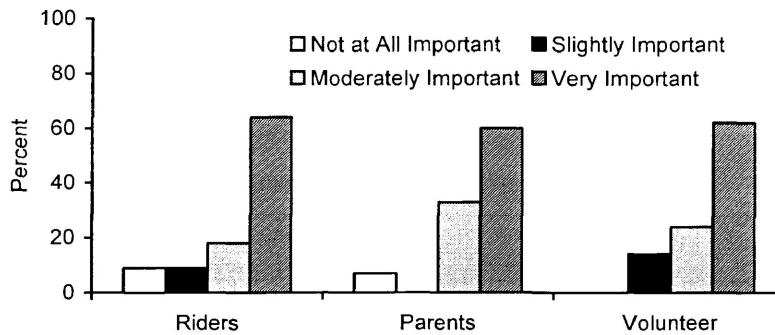


Figure 19. Comparing responses of riders, parents and volunteers concerning the importance of the **farm** to the therapeutic riding program.

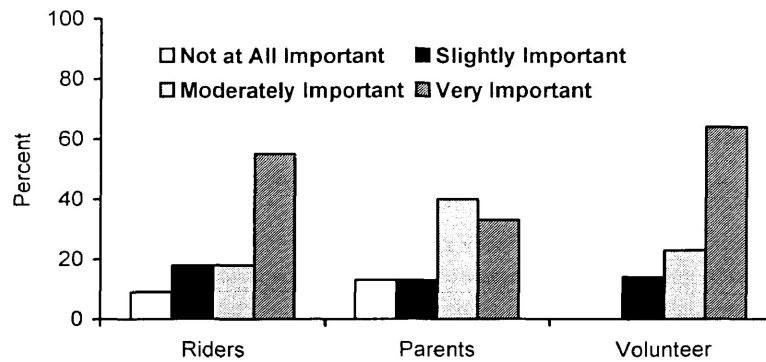


Figure 20. Comparing responses of riders, parents and volunteers concerning the importance of the **other people** at the therapeutic riding program.

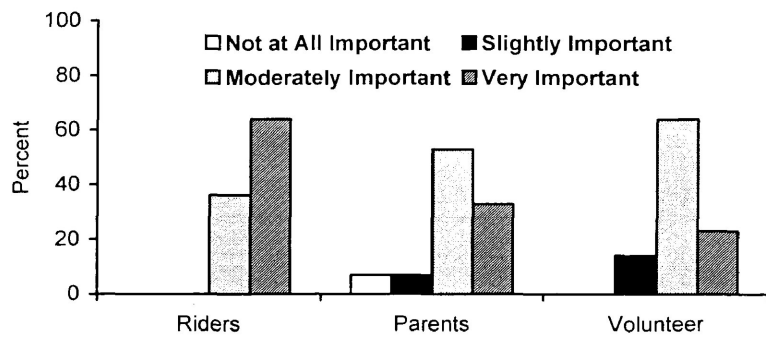


Figure 21. Comparing responses of riders, parents and volunteers concerning the importance of the **other animals** to the therapeutic riding program.

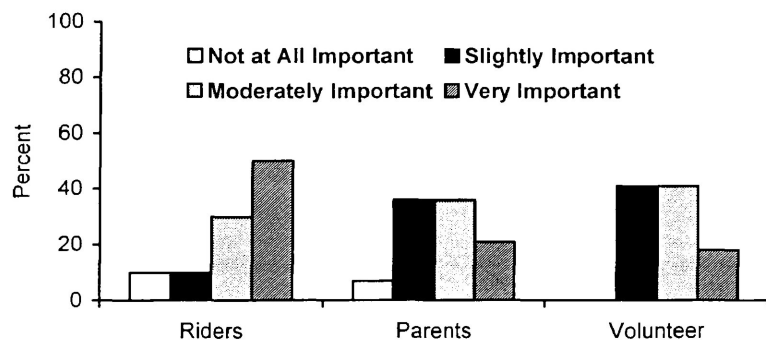


Figure 22. Comparing responses of riders, parents and volunteers concerning the importance of the **food** to the therapeutic riding program.

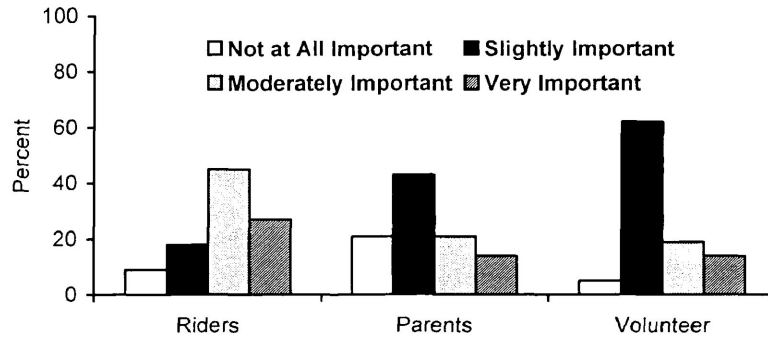


Figure 23. Comparing responses of riders, parents and volunteers concerning the importance of the **bonfire** to the therapeutic riding program.

Open-ended Questions

The long-table approach (Krueger & Casey, 2000) was used to analyze the open-ended question responses for thematic content. The themes that emerged in response to each individual question are reported below.

Question: "What Do the Riders Like Most About the Therapeutic Riding Program?"

All of the parent questionnaires had a response to this question. The question was left blank by one volunteer and two rider participants.

Social Benefits

Responses from all three groups (riders, parents, and volunteers) included many comments about the horses, horseback riding, and the social opportunities afforded by the program. The positive and encouraging environment was also mentioned.

Freedom and Independence

The aspect of freedom, control, or something to be proud of was mentioned quite a few times by both the parents and the volunteers. For example, one volunteer responded to the question with, “The feeling of freedom compared to their everyday lives.”

Furthermore, a parent responded to the question with, “Being independent on the horse. Feeling like she is in control of something.”

Environment/Animals

All three groups also made comments about being outside and the food that is available, although these comments were not as frequent as the ones about social benefits and horses. There were some comments made by the riders and by the volunteers about the enjoyment of playing games. One rider and volunteer also commented on enjoying the yard/farm. Volunteers and parents often mentioned the value of being around animals. Some made specific mention of the non-horse animals. One volunteer and parent also commented on the field that the riders spend time in while they are on the horse. A rider and parent each commented that they like “just being there.”

Physical Function

A rider and a volunteer each commented on the physical benefit that they receive from therapeutic riding. The rider commented that it improves coordination. The volunteer wrote that “for people in wheelchairs [the program] allows them to stretch out and feel more comfortable.” A rider confirmed this by writing that she enjoys doing the stretches.

Activity and Learning

A couple of the parents mentioned that they think that riders like the chance to try something new. Other comments made by parents included that their child likes riding with a saddle; playing on the swing; participating because it is a fun activity; and that their child likes it because he can be on something that is moving. Other comments made by the riders include that they enjoy the outing and sitting by the fire. A couple of volunteers made mention of the fact that the riders like “having a weekly routine” and that it “gives them something to look forward to during the week.”

Question: “What Do the Riders Dislike About the Therapeutic Riding Program?”

Positive Comments

The most common answer given by the riders and the volunteers was “nothing, ” or “I don’t know.” or “N/A,” or a blank (4 blanks for parents, 2 blanks for riders, and 2 blanks for volunteers). The same sort of responses were also given by the parents, but not with the same frequency. Another frequent response that was made by all three groups of participants was that the riding time and season was not long enough or often enough.

Waiting and Cancellation

The parents and riders both commented that they do not enjoy waiting to get on the horse. The volunteers also commented on this, but added also that they do not like waiting during the week for their next ride and that they do not like getting off the horse at the

end of each session. One rider and a couple of parents wrote that they do not like when the ride is cancelled.

Program Organization

Volunteers and parents mentioned that inconsistency troubles the riders. Inconsistency with the volunteers, horses, and starting time were all mentioned. Extreme weather was also mentioned by volunteers and parents as something unpleasant. A couple of volunteers also mentioned that some of the riders do not like the mounting process. A parent mentioned that the busy transitions between rides was hard for his/her child.

Limitations

Volunteers also commented that riders might not like some of the restrictions of the program, such as staying in an enclosed area and a limited amount of riding skills that they are able to learn.

Individual Concerns

A few of the volunteers mentioned that some of the riders do not enjoy being challenged by the games and exercises. Some other comments made by volunteers included that the riders sometimes do not like riding when they are first new to the program or when they are not feeling well; and that for some of the riders the session is too long. One rider commented that he/she did not like dogs. Some riders and parents commented about how they dislike the bugs. One rider and parent also commented that the child does not like the helmets.

Question: "How Could the Program Be Improved?"

Some comments that were made in response to the question, "Do you have another comments that you would like to make about the program?", were suggestions for how the program could be improved. Those responses are included here.

The most common response to this question, by riders, parents, and volunteers, was a blank (2 parents, 5 riders, and 3 volunteers left this question blank), or N/A, or even a general commendation of the program. Another comment that was frequently made by all three groups (although not as strongly by the volunteers) was that it would be great if the rides could be longer, more often and for a longer season of the year.

Cost

A rider and a couple of parents commented that it would be helpful if there were more sponsorship options available to help pay for the riding.

Skill Development

Parents and volunteers both commented that the program could be improved by having the riders progress more in their riding skills/abilities. Parents and volunteers also commented that the program could be improved by offering more instruction and information to the volunteers. Some parents suggested having the riders do more exercises while on the horse.

Program Organization

Many volunteers suggested that the riding lessons need to be more specific to the individual riders' needs and that it would be better if there was consistency with the volunteers. Some volunteers also suggested giving more freedom to the riders (as much as is safe) and giving them more opportunities (i.e. helping to take care of the horse or going for a ride in the woods). Other suggestions made by volunteers were to have more interaction between the volunteers and riders; to have more structure during the lessons; to introduce paid positions; to give feedback to parents; and to have more games. Other suggestions that were made by parents were having an introductory program for new riders; having more time between rides so that the transition time is less congested, and having a play area for the children while they are not riding. Some of the other comments made by the riders included that they would like going faster; having more horses; and having white horses.

Question: "If You Are Not Planning to Participate in the Therapeutic Riding Program Again, Please Share Why."

One parent responded to this question and shared that they withdrew from the program because of a decrease in organization; an inconsistency with volunteers and an inconsistency with start times. All of these components were causing a great amount of anxiety for the child.

Nine volunteers reported that they would not be returning to volunteer for the program. The most frequent reason was that they were moving away from the area. Many volunteers also gave the reason that they had too many other time commitments or that they would be out of town for the summer. A rider and some volunteers stated that a reason they may not continue with the program was the difficulty in getting transportation out to the farm.

Question: "Do You Have Any Other Comments that You Would Like to Make About the Program?"

There were two comments made by parents and five comments made by volunteers that were suggestions of improvement for the program. These responses were included in the results for the question "How could the program be improved?"

Three parents, seven riders, and seven volunteers had no response to this question. One additional rider simply wrote "No" in the space provided.

Positive Experience

Many participants commented that being involved in the program is a positive experience. One parent wrote that they would have signed their child up sooner, but was unaware that the program existed. A rider wrote that "it is awesome!"

Social Benefits

Comments were made about the social benefits of the program; appreciation of the volunteers; and how riders look forward to seeing the horses and animals. One rider commented that “volunteers are nice to [her].”

Benefits to Siblings and Volunteers

A couple of parents also wrote that it has been good for the riders’ siblings as well as the riders. Volunteers expressed their enjoyment of the program and how much they learn from the experience.

Physical Function

One parent commented, “The program is great. It helps my daughter lots with balance, walking, etc.” A few parents gave specific statements about how the program is beneficial to their children. For example, one parent wrote:

We strongly believe a lot of our child’s success and accomplishments are due to therapeutic riding. It has given our child the strength and control of her muscles to make it possible to sit, stand and walk. Before riding our child had very little balance, it has developed through riding. We started in a wheelchair, then a walker and now she walks on her own.

Empowerment and Accomplishment

A few parents wrote that the program has given their children a sense of accomplishment, or an opportunity to succeed. Other comments made by volunteers include that it is good that there are different options for places to ride and that the confidence of both the riders and the volunteers is increased by participating in the program.

The social benefits of therapeutic riding were reported more strongly in the open-ended questions when compared with the results of the closed question analysis. The responses to the open-ended questions indicate that the social aspects of the program are very valuable to the riders. Perhaps, the reason for the disparity between the results is that for some riders the social aspect is not very important at all, but for others it is a very important feature.

Focus Group

There were three participants in the focus group. One participant was an independent rider, one participant was a parent of a child rider, and one participant was an adult volunteer. The parent participant's child had been participating in the therapeutic riding program for three years prior to the focus group. The rider participant had been participating in the program for over ten years and had been involved with the Board of Directors for a couple of years as well. The volunteer participant had been involved with the program for approximately twelve years.

The focus group was filled with many reports of positive experiences with the TBTRA. The two main reoccurring themes during the focus group were the social benefits of participating in the therapeutic riding program; and the confidence gained by riders. Apart from these main themes, there were comments about other benefits of therapeutic riding; suggestions for how the program could be improved; and an assortment of new ideas that the program could try.

Social Benefits of Therapeutic Riding

The social benefits that are a result of participating in the therapeutic riding program came up many times throughout the course of the discussion. Hearing about the social benefits reported by other therapeutic riding programs was part of one participant's reason for enrolling her child. The socializing that takes place was reported by all participants as a benefit of the program. The positive atmosphere at the riding program was also reported as a benefit of the program. Appreciation for the volunteers was frequently expressed and their commitment was commended in light of the amount of effort that is required to sustain the program.

The parent participant reported that the first time her child spoke was when she told the horse to "walk on." "Honestly I didn't think that she was...words were going to come. And remember she would just have her head down all the time. She was not social....And (now) she interacts. And it's all from therapeutic riding" (parent participant).

“Honestly I didn’t think that she was...words were going to come. And remember she would just have her head down all the time. She was not social....And (now) she interacts. And it’s all from therapeutic riding” (parent participant).

Connection with the horse was also mentioned. This is seen particularly in the effect that the death of a horse has on the riders. “It’s hard to explain. When you get on them they know who it is and they know—it’s like a connection that’s—it’s like an unconditional connection or some unique connection” (rider participant).

The social benefits of the program are not just for the riders. The volunteer reported how much he enjoys the people. The parent participant emphasized how beneficial it has been for her to have a chance to socialize and be supported by other parents of children with disabilities.

The emphasis on the social benefits of the program during the focus group was similar to the responses to the open-ended questions. Surprisingly, the importance of the horses was not mentioned on its own during the discussion, without the researcher asking specifically about them. Once the question was asked directly, a lengthy discussion about the connection between the horses and the riders took place. During the discussion, the evidence that was given to demonstrate that there is a meaningful connection with the horses was the impact that takes place when one of the horses dies.

The Confidence Gained Through Learning a Skill

The confidence gained from participating in therapeutic riding was mentioned many times throughout the focus group. It was most often linked with the opportunity to learn about horseback riding. For the rider, great pride is taken in learning a skill, especially one that many able-bodied people are unable to do, or afraid to try. For the parent, it seems to have given her child a source of empowerment.

“That’s one aspect that she holds really as an important thing for her because any dealing with a horse she has—you can see it in her eyes—it’s an “Oh, I know about that.” She has that look in her eye” (parent participant).

The rider reported that being able to ride a horse has given her the confidence that she can do anything:

“The horseback riding has changed my life because now I know I’m doing something that most people would be terrified to do and I can do it. And so that makes me believe that I can do anything” (rider participant).

Along with the mention of similar concepts in the open-ended results, the focus group discussion confirms the high score for the statement about self-confidence in the close-ended portion of the questionnaire. The talk about empowerment and achievement during the focus group was most often linked with knowing about horses or learning a challenging skill. The value of learning about horseback riding was not strongly

emphasized in the questionnaires results, but it may be a valuable component because of the confidence it instills.

Physical Benefits of Therapeutic Riding

Hearing about the physical benefits of therapeutic riding was part of the reason that the parent participant decided to enroll her child. The rider participant reported that it is beneficial for her to get some exercise and that it motivates her to stay more fit when she is not riding.

Other Comments About the Benefits of the Program

It was commented that therapeutic riding is a source of enjoyment and a chance to be outside. The animals and the snacks are also mentioned as a source of enjoyment. Other comments included that it is good to ride a horse; it is good to be simply riding on something; and it teaches people to have respect for animals. The rider commented that “There’s lots of benefits. And I guess you just feel like you’re not in a wheelchair. You don’t feel like you’re disabled when you’re on a horse.”

The volunteer commented that it is a source of relief and relaxation for the parents. He also reported that it is good to see something positive happening in society; that it is a humbling experience to be helping people with disabilities; and that he has learned about

horses through his involvement. He also reported that it is neat to see animals serving a purpose.

Suggestions for Improvement to the Program

The group discussed how the program could facilitate more learning if there were goals developed for each rider so that they could progress in their riding skills throughout the year. It was suggested that the goals need to be sensitive and specific to each rider's ability, so that the experience is still enjoyable. Consistency with the volunteers and equipment was also mentioned as important in learning. It might not be crucial for all of the riders, but many would benefit from an increase in consistency.

The group discussed having some sort of entertainment, in order to facilitate more social interaction while the participants are waiting. It was suggested that some groups from the community could provide this.

The opportunity to work with the horses on the ground; do some grooming; or lead the horses was discussed as a means of deepening the bond between the riders and horses. Perhaps a horse could be set aside for this purpose. The group also reported that it would be neat if the riders could see inside the barn.

Other comments about improvements to the program included having longer rides and having the option of riding on a different night of the week.

Other Thoughts and Ideas for the Program

Winter Riding Activity

A discussion took place about the idea of having a riding activity during the winter. It was thought that since it is not practical to have the entire program going on throughout the year, mainly because of the weather, it might be a good idea to try something on a weekend afternoon. Riders could experience riding in the snow.

Having a Celebration

The idea of hosting some sort of celebration was discussed. The program will soon be reaching its 20th anniversary and there have also been a lot of finishing touches done on the arena since it first opened. These could be a couple of reasons for having a celebration, which would be a lot of fun and good public exposure.

Public Exposure

Public exposure for the program came up through two avenues. It was suggested that if the program hosted another celebration, then this would bring public exposure for the organization and that would be good. Also, the parent participant related that she was not aware that the program existed before calling a program in Toronto and hearing about it from that source.

Miscellaneous

Having extra private lessons outside of the therapeutic riding program has been beneficial for the parent participant's child.

A comment was made that demonstrates a particular challenge found in serving people with disabilities: sometimes there is more going on with the riders than you might be able to see from the outside.

The rider participant indicated that it would be nice to have more horses and that she has always wanted to ride on a white horse. She also expressed that transportation to the farm has been a challenge for her in participating in the program. One thing that has been really helpful for her is that she has had sponsors to help pay for the cost of riding.

The rider had an experience of falling off during one of the rides. There was a discussion about this and she commented that she learned from the experience and that she knows that most people who ride horses have fallen off at some point. Finally, the suggestion of trying out a horse driving component was also made.

Overall Thematic Analysis

The themes presented here are the ones that seemed to be most strongly emphasized by the participants and pertain to the original purposes of the study which were to:

- 1) Determine whether or not the TBTRA program has a positive impact on lives of the riders;
- 2) Determine what components of the program are most valued by the participants; and,
- 3) Give a chance for riders, parents/caregivers, and volunteers to give feedback about the program.

Impact on the Lives of Riders

The abundance of positive responses to close-ended questions, along with a large number of commendations for the program in the open-ended questions and focus group give an indication that the TBTRA program has a positive impact on the lives of the riders. The impact is seen in all four of the domains of quality of life that were investigated: physical well-being; social well-being; development and activity; and emotional well-being.

These results agree with the study by Young and Bracher (2005), who also found positive effects in all four areas.

Emotional Well-Being

Throughout the study, the greatest emphasis was seen in the effect of therapeutic riding on emotional well-being. This was seen most often in two ways: the self confidence and empowerment that results from participating in the program; and the overall pleasure that

results from participating in the program. The statements about therapeutic riding increasing the self confidence of the riders received the most positive response in the closed questions. In the open-ended questions of the questionnaire, many parents and volunteers commented about the fact that the program gives riders a sense of control, empowerment, and independence. The study by Young and Bracher (2005) agrees with these findings in that their results indicated that therapeutic riding increases the self-confidence of the riders.

Development and Activity

The learning that takes place at the TBTRA program was not strongly emphasized in the results of the questionnaire; however, the focus group discussion presented the impact on self-confidence and empowerment as being linked to the fact that the riders learn a challenging skill. It may be that horseback riding is particularly effective at increasing self confidence because it is an activity that involves a certain amount of challenge and risk, giving the riders a sense of accomplishment and pride in doing something that many people do not do...regardless of their abilities. McKinnon and Ferreira (2002) discovered that riders valued the personal accomplishment of therapeutic riding, which included a sense of control, independence, having a challenge and mastering a skill.

Social Well-Being

The social well-being of riders is also effected by therapeutic riding, although evidence of this was not consistent throughout the study. Many people made comments about the social benefits of therapeutic riding in both the open-ended questions and the focus

group, but the same emphasis was not seen in the results of the close-ended questions. Volunteers were rated as being a highly important aspect of the program and they play a very significant role in the social aspect of therapeutic riding. Perhaps some participants strongly value this aspect of the program while others value it very little. This would be a reasonable suggestion given the diversity of individuals involved in the program. The participants in the study by MacKinnon and Ferreira (2002) ranked the social aspects of the program (including interaction with peers, volunteers, and horses) as being of top importance. Their participant group consisted of children with cerebral palsy and was therefore a lot more homogeneous, possibly accounting for the different emphasis on social benefits. Young and Bracher (2005) also found social benefits relating to therapeutic riding; however these benefits were less emphasized than ones pertaining to physical well-being and or other aspects of emotional well-being such as increased patience and emotional control. This difference might be due to the fact that the majority of their participants were professional therapists and perhaps involved in programs with more of an emphasis on meeting physical and psychological goals.

Physical Well-being

The impact of therapeutic riding on the physical well-being of riders was reported, but to a lesser degree than social and emotional well-being. The impact on physical well-being was reported in terms of muscle strengthening, improvement in coordination, a chance to exercise, and increasing motivation to exercise. The method of study may have been more conducive to the reporting of impacts on social and emotional well-being, because it is easier to observe these effects without measuring them directly. The nature of the

study was one where participants were asked to share their perception of the value of the program based on their own observations.

Components Most Valued by the Riders

The most important components of the riding program are the horses and the volunteers. This is seen in that the horses and volunteers got the most positive response in the close-ended questions and were mentioned frequently in the responses to the open-ended questions. Furthermore, the value of the horses was discussed during the focus group and social benefit (which comes mainly through interaction with volunteers) was stated as one of the most obvious benefits to participating in therapeutic riding.

Feedback About the Program

Increased Organization

Introducing a greater level of organization to the program would be a means of providing an even better experience for riders. Specific ways that more organization could be introduced would be in having more consistency with volunteers, equipment, loading time, and transitions between riders. The suggestion of more consistency with volunteers and equipment came up in the open-ended responses as well as in the focus group. Change and irregularity were mentioned as sources of anxiety and discomfort for some of the riders. In providing a service to people with disabilities, there are often many unseen factors affecting their experience. Having as many elements as possible remain

consistent can help to assure a positive result. The loading time and waiting to mount were both mentioned as something that riders do not enjoy. The busy time of transition was also specifically mentioned. Having a more regular routine before and between rides could help decrease stress on the riders and help them to be more relaxed as their riding session begins.

More Individual Attention

The therapeutic riding program is very commendable in that it is able to provide a meaningful service to people with a wide range of ages, abilities, needs. However, this quality about the program does present unique challenges in that the needs of the riders are so diverse. For example, most of the participants reported an extremely positive experience with the program, while one young rider experienced a lot of anxiety. While it is impossible to accommodate every individual rider, some effort could be made to tailor the riding sessions to more effectively meet the specific needs of the riders. The importance of having goals geared toward characteristics and abilities of individual riders was recurrent in the open-ended results and the focus group. Progressive lesson plans for each rider were suggested as a means to increase the amount of learning that takes place. It was also suggested that the lesson plans would need to be rider specific. Many requests were made, by volunteers and parents, for more training, information, and instruction leading up to the riding sessions. A more thorough and rider specific training procedure as well as the development of individual lesson plans would increase the value of the experience for both riders and volunteers.

Accessibility

The theme of transportation out to the farm came up as a challenge for both riders and volunteers. This is a particularly challenging issue for a therapeutic riding program that desires to make its services available to everyone while its rural nature inhibits individuals from participating.

Non-Riding Activities

Several suggestions were made about having activities set up for when the riders are not on the horses. They included having a play area, entertainment, tours through the barn, and a horse/pony to groom.

Public exposure

Some comments were made regarding the public exposure of the program. One parent would have registered her daughter sooner if she had been aware of the program and another parent was not aware of the program until contacting a therapeutic riding group in Southern Ontario. Perhaps a public exposure campaign would bring more potential participants and supporters to the program.

Cost

Sponsorship also came up in more than one component of the study. This is very beneficial to the riders and some could benefit from further financial aid.

Limitations and Recommendations for Further Research

The results might have been more reflective of the program if information from earlier seasons was used and if more people who had left the program were included. Another weakness of the study is that many participants had only been involved in the program for one year. Also, it would have been good to have had more rider and parent participants. The results cannot be generalized to all participants in the TBTRA program or to participants in other therapeutic riding programs; however they do offer meaningful considerations and insights. These insights may be useful for the TBTRA program itself, for other therapeutic riding programs, and for the development of future studies.

Focus groups usually involve five to ten people (Krueger & Casey, 2000) and the current study only involved three. It was good that the focus group had one rider, one parent and one volunteer participant and that each category of participant was represented.

However, the focus group would have been enhanced if there had been more people participating. A small group gives everyone more opportunity to share, but the information is drawn from a smaller pool of representatives and is therefore less indicative of the whole population of TBTRA participants. The rider who participated in the focus group was the only independent rider participating in the entire study; other dependent riders may have had different experiences or other things to say. Ideally, there would have been more than one focus group conducted so that the results from each discussion could be compared.

A standardized system of measurement for the impact of therapeutic riding programs on the lives of the riders would be a beneficial addition to research in the field. The measurement tool would be most effective if it were simple, easy to administer, and broad enough to be applicable for a wide variety of riders. The results of the correlation tests between the positively and negatively worded questions, along with the high response rate for the close-ended section, indicate that the questionnaire used in this study was relatively effective for data collection. Further development of this questionnaire may be useful in future and could be used in creating a standardized measurement tool. A composite score from the close-ended questions could also be calculated as an indicator of the effect of a therapeutic riding program on quality of life.

An idea for further study would be to investigate the impact that the program has on the volunteers. Some volunteers commented on the benefits they have received from being involved in the program and it would be interesting to investigate this further. Although the study attempted to gain as much input from child/dependent riders as possible, many of the child/dependent rider responses in the questionnaires were given by parents speaking on behalf of the rider. More input from riders themselves would also be valuable to the field of therapeutic riding.

CONCLUSION

The value of the Thunder Bay Therapeutic Riding Association program to the lives of its riders has been established in this study. The most evidence was seen in regards to improving emotional and social well-being. The program provides a positive, uplifting experience; gives participants a sense of accomplishment, independence, and empowerment; and provides opportunity for meaningful socialization. Of all the aspects of the program, the horses and the volunteers are the most crucial. Overall, the TBTRA is commended by volunteers, parents, and riders as a source of great enjoyment and benefit to those involved, however, some organizational adjustments would enable it to serve its clients even more effectively. These adjustments include: increasing consistency of volunteers and equipment, having individual goals and a progression of skills for each riders, and giving more instruction to the volunteers.

Although the results of the study are from a small number of participants and only one therapeutic riding centre, they nonetheless supplement previous research and provide significant considerations for other therapeutic riding programs and future studies. Furthermore, the findings demonstrate the impact of therapeutic riding and provide insight that can be used as an aid in the continuation and enhancement of the therapeutic riding services offered in Thunder Bay.

CONCLUSION

The value of the Thunder Bay Therapeutic Riding Association program to the lives of its riders has been established in this study. The most evidence was seen in regards to improving emotional and social well-being. The program provides a positive, uplifting experience; gives participants a sense of accomplishment, independence, and empowerment; and provides opportunity for meaningful socialization. Of all the aspects of the program, the horses and the volunteers are the most crucial. Overall, the TBTRA is commended by volunteers, parents, and riders as a source of great enjoyment and benefit to those involved, however, some organizational adjustments would enable it to serve its clients even more effectively. These adjustments include: increasing consistency of volunteers and equipment, having individual goals and a progression of skills for each riders, and giving more instruction to the volunteers.

Although the results of the study are from a small number of participants and only one therapeutic riding centre, they nonetheless supplement previous research and provide significant considerations for other therapeutic riding programs and future studies. Furthermore, the findings demonstrate the impact of therapeutic riding and provide insight that can be used as an aid in the continuation and enhancement of the therapeutic riding services offered in Thunder Bay.

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APPENDIX A -- Consent Forms

Consent Form

Therapeutic Riding and You

**Focus Group
Friday, June 22, 2007, 7-9pm
Chapters Book Store, Thunder Bay**

I understand the following:

1. I am a volunteer and free to withdraw my participation at any time.
2. I am free to not answer any question that I do not wish to answer.
3. The input that I provide will be confidential and will be stored at Lakehead University's School of Kinesiology for seven years.
4. There is no more risk of physical or psychological harm than would be involved in my regular daily activities.
5. I will receive a summary of the project if I check off the box underneath my signature on this page or if I later request it during the length of the study.
7. The discussion that takes place during the focus group will be audio-recorded and later transcribed for the purpose of data analysis.
8. A copy of the transcript from the focus group will be forwarded to me and I will have a chance to make edits and add comments if the words do not clearly reflect my thoughts and views.
9. Quotes of my words from the focus group may be included in the final copy of the paper, but my name will not be included.
10. My participation in this study will not negatively affect the service provided to me from the Thunder Bay Therapeutic Riding Association.

Name of Participant

Signature of Participant

Date

I wish to receive a summary of the results of this study following completion of this study

Amy Silliman
(807) 768-5848
aksillim@lakeheadu.ca

Jane Taylor, Ph.D.,
Associate Professor, School of Kinesiology
(807) 343-8752
jane.taylor@lakeheadu.ca

Rider Consent Form

Therapeutic Riding and You

Please return this form along with your completed questionnaire. Consent forms will be stored separately from the returned questionnaires, so that your responses will be kept confidential.

I have read and understood the enclosed letter to potential participants and agree to participate in the study.

I understand the following:

- 3. I am a volunteer and free to withdraw my participation at any time.
- 4. I am free to not answer any question that I do not wish to answer.
- 3. The input that I provide will be confidential and will be stored at Lakehead University's School of Kinesiology for seven years.
- 5. There is no more risk of physical or psychological harm than would be involved in my regular daily activities.
- 5. I will receive a summary of the project if I check off the box underneath my signature on this page or if I later request it during the length of the study.
- 6. In addition to completing a questionnaire, I may choose to be involved in a focus group.
- 7. Focus groups will be audio-recorded for the purpose of data analysis.
- 8. My participation in this study will not negatively affect the service provided to me from the Thunder Bay Therapeutic Riding Association.

Name of Participant Signature of Participant Date

For Participants under the age of 18:

Name of Parent/Guardian Signature of Parent/Guardian Date

I wish to receive a summary of the results of this study following completion of this study

Amy Silliman
(807) 768-5848
aksillim@lakeheadu.ca

Jane Taylor, Ph.D.,
Associate Professor, School of Kinesiology
jane.taylor@lakeheadu.ca

Therapeutic Riding and You Rider and Volunteer Consent Form

Please return this form along with your completed questionnaire. Consent forms will be stored separately from the returned questionnaires, so that your responses will be kept confidential.

I have read and understood the enclosed letter to potential participants and agree to participate in the study.

I understand the following:

1. I am a volunteer and free to withdraw my participation at any time.
2. I am free to not answer any question that I do not wish to answer.
3. The input that I provide will be confidential and will be stored at Lakehead University's School of Kinesiology for seven years.
4. There is no more risk of physical or psychological harm than would be involved in my regular daily activities.
5. I will receive a summary of the project if I check off the box underneath my signature on this page or if I later request it during the length of the study.
6. In addition to completing a questionnaire, I may choose to be involved in a focus group.
7. Focus groups will be audio-recorded for the purpose of data analysis.
8. My participation in this study will not negatively affect the service provided to me from the Thunder Bay Therapeutic Riding Association.

Signature of Participant

Date

For Participants under the age of 18:

Signature of Parent/Guardian

Date

I wish to receive a summary of the results of this study following completion of this study

Amy Silliman
(807) 768-5848
aksillim@lakeheadu.ca

Jane Taylor, Ph.D.,
Associate Professor, School of Kinesiology
jane.taylor@lakeheadu.ca

Volunteer and Adult Rider Cover Letter

Therapeutic Riding and You

May 4, 2007

Dear participant,

My name is Amy Silliman and I am studying the impact of therapeutic riding on the quality of life of riders for my masters of public health at Lakehead University. Various benefits to participating in a therapeutic riding program have been reported and I would like to gain a more thorough understanding of how therapeutic riding affects the riders. It is also my hope that the project will provide valuable input to the Thunder Bay Therapeutic Riding Association from your perspective.

The study is made up of two components:

- Questionnaires distributed to riders, parents/caregivers, and volunteers, included with this letter
- Focus groups made up of riders, parents/caregivers, and volunteers who have completed the questionnaire

If you have participated in the Thunder Bay Therapeutic Riding Association program in any way (e.g. Rider, parent, caregiver, volunteer) during the last five years, you can be part of this study. If you would like to participate in the study, please sign the enclosed form and complete the enclosed questionnaire. The questionnaire will take approximately 20-25 minutes of your time. Please mail questionnaire back to me using the envelope provided **BEFORE FRIDAY, MAY 25, 2007.**

Once you have completed the questionnaire, you are also invited to participate in an additional part of the study by being part of a focus group. The focus group will last for approximately 2 hours and will consist of a group of

riders/parents/volunteers discussing their experiences with therapeutic riding. There will be a facilitator present to help encourage discussion and ask for input about specific areas of the program. The focus groups will be audio recorded for the purpose of analysing the data.

The input that you provide will be coded and your name will not appear in any reporting of the results. Upon completion of the study, all information will be securely stored at Lakehead University's School of Kinesiology in the office of Dr. Jane Taylor for seven years. A summary of the results of this study will be made available to you at your request upon completion of the project. This research has been approved by the Lakehead University Research Ethics Board, which may be contacted at 343-8283.

Your participation in this study is voluntary and you are free to withdraw at any time. You may also choose not to answer any question included in the questionnaire. Your choice about whether or not to participate will in no way affect the service offered you from the Thunder Bay Therapeutic Riding Association. The organization will not be informed about who participated in the study and will not be given any names of participants when the results are presented.

If you have any questions, please feel free to contact me, Amy Silliman at:

(807) 768-5848

or aksillim@lakeheadu.ca

or my advisor, Dr. Jane Taylor at jane.taylor@lakeheadu.ca.

Sincerely,

Amy Silliman

Parent and Child Rider Cover Letter

Therapeutic Riding and You

May 4, 2007

Dear participant(s),

My name is Amy Silliman and I am studying the impact of therapeutic riding on the quality of life of riders for my masters of public health at Lakehead University. Various benefits to participating in a therapeutic riding program have been reported and I would like to gain a more thorough understanding of how therapeutic riding affects you. It is also my hope that the project will provide valuable input to the Thunder Bay Therapeutic Riding Association from your perspective.

The study is made up of two components:

- Questionnaires distributed to riders, parents/caregivers, and volunteers, included with this letter
- Focus groups made up of riders, parents/caregivers, and volunteers who have completed the questionnaire

If you have participated in the Thunder Bay Therapeutic Riding Association program in any way (e.g. Rider, parent, caregiver, volunteer) during the last five years, you can be part of this study. If you would like to participate in the study, please sign the enclosed form(s) and complete the enclosed questionnaire(s). There is one questionnaire for riders and one questionnaire for parents/caregivers. If a rider needs help with completing the questionnaire, I would ask that parents/caregivers, please give any necessary assistance. Each questionnaire will take approximately 20-25 minutes of your time. Please mail questionnaires back to me using the enclosed envelope **BEFORE FRIDAY, MAY 25, 2007.**

Once you have completed the questionnaire, you are also invited to participate in an additional part of the study by being part of a focus group. The focus group will last for approximately 2 hours and will consist of a group of

riders/parents/volunteers discussing their experiences with therapeutic riding. There will be a facilitator present to help encourage discussion and ask for input about specific areas of the program. The focus groups will be audio recorded for the purpose of analysing the data.

The input that you provide will be coded and your name will not appear in any reporting of the results. Upon completion of the study, all information will be securely stored at Lakehead University's School of Kinesiology in the office of Dr. Jane Taylor for seven years. A summary of the results of this study will be made available to you at your request upon completion of the project. This research has been approved by the Lakehead University Research Ethics Board, which may be contacted at 343-8283.

Your participation in this study is voluntary and you are free to withdraw at any time. You may also choose not to answer any question included in the questionnaire. Your choice about whether or not to participate will in no way affect the service offered you from the Thunder Bay Therapeutic Riding Association. The organization will not be informed about who participated in the study and will not be given any names of participants when the results are presented.

If you have any questions, please feel free to contact me, Amy Silliman at:

(807) 768-5848

or aksillim@lakeheadu.ca

or my advisor, Dr. Jane Taylor at jane.taylor@lakeheadu.ca.

Sincerely,

Amy Silliman

APPENDIX C-- Questionnaires

Independent Rider Questionnaire

Rider# 010

Therapeutic Riding and You.

Master of Public Health, Lakehead University Research Project

Researcher: Amy Silliman

Academic Advisor: Dr. Jane Taylor

1. Thinking about therapeutic riding, **how much do you agree with the following statements?**

Circle **only one** of the responses (Strongly agree, Agree, Disagree, Strongly Disagree) for each statement:

Participating in the therapeutic riding program...

1. Worsens my self-image	Strongly Agree	Agree	Disagree	Strongly Disagree
2. Improves visual/spatial perception	Strongly Agree	Agree	Disagree	Strongly Disagree
3. Helps me meet people	Strongly Agree	Agree	Disagree	Strongly Disagree
4. Makes me sad or depressed	Strongly Agree	Agree	Disagree	Strongly Disagree
5. Improves emotional control	Strongly Agree	Agree	Disagree	Strongly Disagree
6. Decreases dysfunctional movement patterns	Strongly Agree	Agree	Disagree	Strongly Disagree
7. Makes me more healthy	Strongly Agree	Agree	Disagree	Strongly Disagree
8. Improves my overall quality of life	Strongly Agree	Agree	Disagree	Strongly Disagree
9. Makes me want to try new things	Strongly Agree	Agree	Disagree	Strongly Disagree
10. Improves my self confidence	Strongly Agree	Agree	Disagree	Strongly Disagree
11. Worsens my self-discipline	Strongly Agree	Agree	Disagree	Strongly Disagree
12. Worsens my concentration	Strongly Agree	Agree	Disagree	Strongly Disagree
13. Puts me in high spirits	Strongly Agree	Agree	Disagree	Strongly Disagree
14. Improves my self confidence	Strongly Agree	Agree	Disagree	Strongly Disagree
15. Provides social enjoyment	Strongly Agree	Agree	Disagree	Strongly Disagree
16. Strengthens muscles	Strongly Agree	Agree	Disagree	Strongly Disagree
17. Increases trust	Strongly Agree	Agree	Disagree	Strongly Disagree
18. Gives riders pleasure	Strongly Agree	Agree	Disagree	Strongly Disagree
19. Increases social experiences	Strongly Agree	Agree	Disagree	Strongly Disagree

Continued from previous page.

Thinking about therapeutic riding, how much do you agree with the following statements?

Circle *only one* of the responses (Strongly agree, Agree, Disagree, Strongly Disagree) for each statement:

Participating in the therapeutic riding program...

20. Develops patience	Strongly Agree	Agree	Disagree	Strongly Disagree
21. Worsens my overall quality of life	Strongly Agree	Agree	Disagree	Strongly Disagree
22. Improves my self-image	Strongly Agree	Agree	Disagree	Strongly Disagree
23. Makes me less comfortable around people	Strongly Agree	Agree	Disagree	Strongly Disagree
24. Improves respiration and circulation	Strongly Agree	Agree	Disagree	Strongly Disagree
25. Teaches me new skills	Strongly Agree	Agree	Disagree	Strongly Disagree
26. Makes me more comfortable around other people	Strongly Agree	Agree	Disagree	Strongly Disagree
27. Decreases my motivation to achieve	Strongly Agree	Agree	Disagree	Strongly Disagree
28. Improves my self-discipline	Strongly Agree	Agree	Disagree	Strongly Disagree
29. Increases dysfunctional movement patterns	Strongly Agree	Agree	Disagree	Strongly Disagree
30. Increases my motivation to achieve	Strongly Agree	Agree	Disagree	Strongly Disagree
31. Worsens coordination	Strongly Agree	Agree	Disagree	Strongly Disagree
32. Reduces patience	Strongly Agree	Agree	Disagree	Strongly Disagree
33. Makes me less healthy	Strongly Agree	Agree	Disagree	Strongly Disagree
34. Does not teach me anything new	Strongly Agree	Agree	Disagree	Strongly Disagree
36. Makes me less likely to try new things	Strongly Agree	Agree	Disagree	Strongly Disagree
37. Improves my concentration	Strongly Agree	Agree	Disagree	Strongly Disagree
38. Makes my reflexes faster	Strongly Agree	Agree	Disagree	Strongly Disagree
39. Puts me in high spirits	Strongly Agree	Agree	Disagree	Strongly Disagree
40. Increases flexibility	Strongly Agree	Agree	Disagree	Strongly Disagree

2. What do you like most about the program?

3. What do you dislike about the program?

4. How could the program be improved?

5. Please indicate how important each of the following aspects of the therapeutic riding program is to you by **circling only one of the choices** (Not important at all, Only slightly important, Moderately important, Very important)

1. The Farm	Not important at all	Slightly important	Moderately Important	Very important
2. The Volunteers	Not important at all	Slightly important	Moderately Important	Very important
3. The Horses	Not important at all	Slightly important	Moderately Important	Very important
4. The Other Animals (dogs, cats, etc.)	Not important at all	Slightly important	Moderately Important	Very important
5. The Bonfire	Not important at all	Slightly important	Moderately Important	Very important
6. Learning Horseback Riding Skills	Not important at all	Slightly important	Moderately Important	Very important
7. Playing Games	Not important at all	Slightly important	Moderately Important	Very important
8. Riding in the Field	Not important at all	Slightly important	Moderately Important	Very important
9. Getting some Exercise	Not important at all	Slightly important	Moderately Important	Very important
10. The Tea, Coffee, Pop and Cookies	Not important at all	Slightly important	Moderately Important	Very important
11. The Other Riders and Parents	Not important at all	Slightly important	Moderately Important	Very important
12. Other (Please describe)	Not important at all	Slightly important	Moderately Important	Very important

6. How old are you? **Circle One**
18-25 years 26-40 years 41-55 years Over 55 years

7. Are you: Male or Female?
(Please circle)

8. How long have you been participating in the therapeutic riding program? **Circle one.**
1 year 2-4 years 5-10 years Greater than 10 years

9. Do you plan on registering for another session of therapeutic riding? **Circle one.**
Yes No

10. If you do not plan on registering for another session of therapeutic riding, please share why.

11. Do you have any other comments about the program that you would like to make?

Thank you for your participation in this study.

Please use the enclosed envelope to mail the completed questionnaire, along with the signed consent form (see attached) back to Amy Silliman, on or before FRIDAY, MAY 25, 2007.

Dependant Rider Questionnaire

Rider # 015

Therapeutic Riding and You.

Master of Public Health, Lakehead University Research Project

Researcher: Amy Silliman

Academic Advisor: Dr. Jane Taylor

1. Thinking about therapeutic riding, **how much do you agree with the following statements?**

Circle **only one** of the responses (Strongly agree, Agree, Disagree, Strongly Disagree) for each statement:

Participating in the therapeutic riding program...

1. Is boring	Strongly Agree	Agree	Disagree	Strongly Disagree
2. Makes me happy	Strongly Agree	Agree	Disagree	Strongly Disagree
3. Gives me a chance to make friends	Strongly Agree	Agree	Disagree	Strongly Disagree
4. Makes me less shy	Strongly Agree	Agree	Disagree	Strongly Disagree
5. Helps me move better	Strongly Agree	Agree	Disagree	Strongly Disagree
6. Makes me feel bad about myself	Strongly Agree	Agree	Disagree	Strongly Disagree
7. Makes my life better	Strongly Agree	Agree	Disagree	Strongly Disagree
8. Helps me to pay attention	Strongly Agree	Agree	Disagree	Strongly Disagree
9. Teaches me about riding horses	Strongly Agree	Agree	Disagree	Strongly Disagree
10. Makes me want to try other new things	Strongly Agree	Agree	Disagree	Strongly Disagree

2. What do you like most about the program?

3. What don't you like about the program?

4. How could the program be better?

5. How important are these things about therapeutic riding?

Circle one of the choices (Not important at all, slightly important, Moderately important, Very important) for each thing.

1. The Farm	Not important at all	Slightly important	Moderately Important	Very important
2. The Volunteers	Not important at all	Slightly important	Moderately Important	Very important
3. The Horses	Not important at all	Slightly important	Moderately Important	Very important
4. The Other Animals (dogs, cats, etc.)	Not important at all	Slightly important	Moderately Important	Very important
5. The Bonfire	Not important at all	Slightly important	Moderately Important	Very important
6. Learning Horseback Riding Skills	Not important at all	Slightly important	Moderately Important	Very important
7. Playing Games	Not important at all	Slightly important	Moderately Important	Very important
8. Riding in the Field	Not important at all	Slightly important	Moderately Important	Very important
9. Getting some Exercise	Not important at all	Slightly important	Moderately Important	Very important
10. The Tea, Coffee, Pop and Cookies	Not important at all	Slightly important	Moderately Important	Very important
11. The Other Riders and Parents	Not important at all	Slightly important	Moderately Important	Very important
12. Other (Please describe)	Not important at all	Slightly important	Moderately Important	Very important

6. Do you want to do more therapeutic riding?

Yes

No

7. If you do not want to do more therapeutic riding, please share why.

8. Do you have anything else you would like to say about therapeutic riding?

9. For parents/caregivers:

Did you provide your child/the rider with any assistance in filling out the questionnaire? **Circle One.**

Yes

No

If Yes, please describe the assistance that you gave your child/the rider.

Thank you for your participation in this study.

Please use the enclosed envelope to mail the completed questionnaire back to Amy Silliman, on or before FRIDAY, MAY 25, 2007.

Parent/Caregiver Questionnaire

Parent/Caregiver # 080

Therapeutic Riding and You.

Master of Public Health, Lakehead University Research Project

Researcher: Amy Silliman

Academic Advisor: Dr. Jane Taylor

1. Thinking about therapeutic riding, **how much do you agree with the following statements?**

Circle *only one* of the responses (Strongly agree, Agree, Disagree, Strongly Disagree) for each statement:

Participating in the therapeutic riding program...

1. Worsens self-image	Strongly Agree	Agree	Disagree	Strongly Disagree
2. Improves visual/spatial perception	Strongly Agree	Agree	Disagree	Strongly Disagree
3. Helps my child/the rider to make friends	Strongly Agree	Agree	Disagree	Strongly Disagree
4. Makes my child/the rider sad or depressed	Strongly Agree	Agree	Disagree	Strongly Disagree
5. Improves emotional control	Strongly Agree	Agree	Disagree	Strongly Disagree
6. Decreases dysfunctional movement patterns	Strongly Agree	Agree	Disagree	Strongly Disagree
7. Makes my child/the rider feel more healthy	Strongly Agree	Agree	Disagree	Strongly Disagree
8. Improves my child/the rider's overall quality of life	Strongly Agree	Agree	Disagree	Strongly Disagree
9. Improves risk-taking abilities	Strongly Agree	Agree	Disagree	Strongly Disagree
10. Improves self confidence	Strongly Agree	Agree	Disagree	Strongly Disagree
11. Worsens self-discipline	Strongly Agree	Agree	Disagree	Strongly Disagree
12. Worsens concentration	Strongly Agree	Agree	Disagree	Strongly Disagree
13. Puts my child/the rider in high spirits	Strongly Agree	Agree	Disagree	Strongly Disagree
14. Improves self confidence	Strongly Agree	Agree	Disagree	Strongly Disagree
15. Provides social enjoyment for my child/the rider	Strongly Agree	Agree	Disagree	Strongly Disagree
16. Strengthens muscles	Strongly Agree	Agree	Disagree	Strongly Disagree
17. Increases trust	Strongly Agree	Agree	Disagree	Strongly Disagree
18. Gives pleasure	Strongly Agree	Agree	Disagree	Strongly Disagree
19. Increases social experiences for my child/the rider	Strongly Agree	Agree	Disagree	Strongly Disagree

Continued from previous page.

Thinking about therapeutic riding, **how much do you agree with the following statements?**

Circle *only one* of the responses (Strongly agree, Agree, Disagree, Strongly Disagree) for each statement:

Participating in the therapeutic riding program...

20. Develops patience	Strongly Agree	Agree	Disagree	Strongly Disagree
21. Worsens my child's/the rider's overall quality of life	Strongly Agree	Agree	Disagree	Strongly Disagree
22. Improves self-image	Strongly Agree	Agree	Disagree	Strongly Disagree
23. Makes my child/the rider less comfortable around people	Strongly Agree	Agree	Disagree	Strongly Disagree
24. Improves respiration and circulation	Strongly Agree	Agree	Disagree	Strongly Disagree
25. Helps my child/the rider to learn new things	Strongly Agree	Agree	Disagree	Strongly Disagree
26. Makes my child/the rider more shy	Strongly Agree	Agree	Disagree	Strongly Disagree
27. Decreases motivation to achieve	Strongly Agree	Agree	Disagree	Strongly Disagree
28. Improves self-discipline	Strongly Agree	Agree	Disagree	Strongly Disagree
29. Increases dysfunctional movement patterns	Strongly Agree	Agree	Disagree	Strongly Disagree
30. Increases motivation to achieve	Strongly Agree	Agree	Disagree	Strongly Disagree
31. Worsens coordination	Strongly Agree	Agree	Disagree	Strongly Disagree
32. Decreases the child's/the rider's interest in his/her own life	Strongly Agree	Agree	Disagree	Strongly Disagree
33. Makes my child/the rider feel less healthy	Strongly Agree	Agree	Disagree	Strongly Disagree
34. Does not teach my child any new things	Strongly Agree	Agree	Disagree	Strongly Disagree
42. Reduces patience	Strongly Agree	Agree	Disagree	Strongly Disagree
36. Improves coordination	Strongly Agree	Agree	Disagree	Strongly Disagree
37. Improves concentration	Strongly Agree	Agree	Disagree	Strongly Disagree
38. Makes reflexes faster	Strongly Agree	Agree	Disagree	Strongly Disagree
39. Puts my child/the rider in high spirits	Strongly Agree	Agree	Disagree	Strongly Disagree
40. Increases my child/the rider's flexibility	Strongly Agree	Agree	Disagree	Strongly Disagree
41. Worsens risk taking abilities	Strongly Agree	Agree	Disagree	Strongly Disagree

2. What do you think your child/the rider likes most about the program?

3. What do you think your child/the rider dislikes about the program?

4. How could the program be improved?

5. Please indicate how important you think each of the following aspects of the therapeutic riding program is to your child/the rider by **circling only one of the choices** (Not important at all, Only slightly important, Moderately important, Very important)

1. The Farm	Not important at all	Slightly important	Moderately Important	Very important
2. The Volunteers	Not important at all	Slightly important	Moderately Important	Very important
3. The Horses	Not important at all	Slightly important	Moderately Important	Very important
4. The Other Animals (dogs, cats, etc.)	Not important at all	Slightly important	Moderately Important	Very important
5. The Bonfire	Not important at all	Slightly important	Moderately Important	Very important
6. Learning Horseback Riding Skills	Not important at all	Slightly important	Moderately Important	Very important
7. Playing Games	Not important at all	Slightly important	Moderately Important	Very important
8. Riding in the Field	Not important at all	Slightly important	Moderately Important	Very important
9. Getting some Exercise	Not important at all	Slightly important	Moderately Important	Very important
10. The Tea, Coffee, Pop and Cookies	Not important at all	Slightly important	Moderately Important	Very important
11. The Other Riders and Parents	Not important at all	Slightly important	Moderately Important	Very important
12. Other (Please describe)	Not important at all	Slightly important	Moderately Important	Very important

6. How old is your child/the rider? _____

7. Is your child/the rider (**Please Circle**) Male or Female?

8. How long has your child/the rider been participating in the therapeutic riding program? **Circle one.**

1 year 2-4 years 5-10 years Greater than 10 years

9. Do you plan on registering your child/the rider for another session of therapeutic riding? **Circle one.**

Yes No

10. If you do not plan on registering your child/the rider for another session of therapeutic riding, please share why.

11. Do you have any other comments about the program that you would like to make?

Thank you for your participation in this study.

Please use the enclosed envelope to mail the completed questionnaire, along with the signed consent form (see attached) back to Amy Silliman, on or before FRIDAY, MAY 25, 2007.

Volunteer Questionnaire

Volunteer# 134

Therapeutic Riding and You

Master of Public Health, Lakehead University Research Project

Researcher: Amy Silliman

Academic Advisor: Dr. Jane Taylor

1. Thinking about therapeutic riding, **how much do you agree with the following statements?**

Circle *only one* of the responses (Strongly agree, Agree, Disagree, Strongly Disagree) for each statement:

Participating in the therapeutic riding program...

1. Worsens riders' self-image	Strongly Agree	Agree	Disagree	Strongly Disagree
2. Improves riders' visual/spatial perception	Strongly Agree	Agree	Disagree	Strongly Disagree
3. Helps riders make friends	Strongly Agree	Agree	Disagree	Strongly Disagree
4. Makes riders sad or depressed	Strongly Agree	Agree	Disagree	Strongly Disagree
5. Improves riders' emotional control	Strongly Agree	Agree	Disagree	Strongly Disagree
6. Decreases riders' dysfunctional movement patterns	Strongly Agree	Agree	Disagree	Strongly Disagree
7. Makes the riders more healthy	Strongly Agree	Agree	Disagree	Strongly Disagree
8. Improves the overall Quality of life of the riders	Strongly Agree	Agree	Disagree	Strongly Disagree
9. Improves riders' risk-taking abilities	Strongly Agree	Agree	Disagree	Strongly Disagree
10. Improves riders' self confidence	Strongly Agree	Agree	Disagree	Strongly Disagree
11. Worsens riders' self-discipline	Strongly Agree	Agree	Disagree	Strongly Disagree
12. Worsens riders' concentration	Strongly Agree	Agree	Disagree	Strongly Disagree
13. Puts riders in high spirits	Strongly Agree	Agree	Disagree	Strongly Disagree
14. Improves riders' self confidence	Strongly Agree	Agree	Disagree	Strongly Disagree
15. Provides riders with social enjoyment	Strongly Agree	Agree	Disagree	Strongly Disagree
16. Strengthens riders' muscles	Strongly Agree	Agree	Disagree	Strongly Disagree
17. Increases riders' trust	Strongly Agree	Agree	Disagree	Strongly Disagree
18. Gives riders pleasure	Strongly Agree	Agree	Disagree	Strongly Disagree
19. Increases riders' social experiences	Strongly Agree	Agree	Disagree	Strongly Disagree

Continued from previous page.

Thinking about therapeutic riding, **how much do you agree with the following statements?**

Circle **only one** of the responses (Strongly agree, Agree, Disagree, Strongly Disagree) for each statement:

Participating in the therapeutic riding program...

20. Develops patience in riders	Strongly Agree	Agree	Disagree	Strongly Disagree
21. Worsens the riders' overall quality of life	Strongly Agree	Agree	Disagree	Strongly Disagree
22. Improves riders' self-image	Strongly Agree	Agree	Disagree	Strongly Disagree
23. Makes riders more comfortable around people	Strongly Agree	Agree	Disagree	Strongly Disagree
24. Improves riders' respiration and circulation	Strongly Agree	Agree	Disagree	Strongly Disagree
25. Teaches riders new skills	Strongly Agree	Agree	Disagree	Strongly Disagree
27. Makes riders less comfortable around people	Strongly Agree	Agree	Disagree	Strongly Disagree
27. Decreases riders' motivation to achieve	Strongly Agree	Agree	Disagree	Strongly Disagree
28. Improves riders' self-discipline	Strongly Agree	Agree	Disagree	Strongly Disagree
29. Increases riders' dysfunctional movement patterns	Strongly Agree	Agree	Disagree	Strongly Disagree
30. Increases riders' motivation to achieve	Strongly Agree	Agree	Disagree	Strongly Disagree
31. Worsens riders' coordination	Strongly Agree	Agree	Disagree	Strongly Disagree
32. Reduces patience in riders	Strongly Agree	Agree	Disagree	Strongly Disagree
33. Makes riders less healthy	Strongly Agree	Agree	Disagree	Strongly Disagree
34. Does not teach riders anything new	Strongly Agree	Agree	Disagree	Strongly Disagree
36. Worsens riders' risk taking abilities	Strongly Agree	Agree	Disagree	Strongly Disagree
37. Improves riders' concentration	Strongly Agree	Agree	Disagree	Strongly Disagree
38. Makes riders' reflexes faster	Strongly Agree	Agree	Disagree	Strongly Disagree
39. Puts riders in high spirits	Strongly Agree	Agree	Disagree	Strongly Disagree
40. Increases riders' flexibility	Strongly Agree	Agree	Disagree	Strongly Disagree

2. What do you think riders like most about the program?

3. What do you think riders dislike about the program?

4. How could the program be improved?

5. Please indicate how important you think each of the following aspects of the therapeutic riding program is to the riders by **circling only one of the choices** (Not important at all, Only slightly important, Moderately important, Very important)

1. The Farm	Not important at all	Slightly important	Moderately Important	Very important
2. The Volunteers	Not important at all	Slightly important	Moderately Important	Very important
3. The Horses	Not important at all	Slightly important	Moderately Important	Very important
4. The Other Animals (dogs, cats, etc.)	Not important at all	Slightly important	Moderately Important	Very important
5. The Bonfire	Not important at all	Slightly important	Moderately Important	Very important
6. Learning Horseback Riding Skills	Not important at all	Slightly important	Moderately Important	Very important
7. Playing Games	Not important at all	Slightly important	Moderately Important	Very important
8. Riding in the Field	Not important at all	Slightly important	Moderately Important	Very important
9. Getting some Exercise	Not important at all	Slightly important	Moderately Important	Very important
10. The Tea, Coffee, Pop and Cookies	Not important at all	Slightly important	Moderately Important	Very important
11. The Other Riders and Parents	Not important at all	Slightly important	Moderately Important	Very important
12. Other (Please describe)	Not important at all	Slightly important	Moderately Important	Very important

6. How old are you? **Circle One**

Under 18 years 18-25 years 26-40 years 41-55 years Over 55 years

7. Are you: Male or Female?

(Please circle)

8. How long have you been volunteering for the therapeutic riding program? **Circle one.**

1 year 2-4 years 5-10 years Greater than 10 years

9. Do you plan on volunteering for another season of therapeutic riding? **Circle one.**

Yes

No

10. If you do not plan on volunteering for another season of therapeutic riding, please share why.

11. Do you have any other comments about the program that you would like to make?

Thank you for your participation in this study.

Please use the enclosed envelope to mail the completed questionnaire, along with the signed consent form (see attached) back to Amy Silliman, on or before FRIDAY, MAY 25, 2007.

APPENDIX D -- Invitation to Participate in Focus Group

FOCUS GROUP PARTICIPATION

If you are interested in participating in a focus group as an additional part of this study, **please call or e-mail Amy Silliman at:**

768-5848 or

aksillim@lakeheadu.ca.

PLEASE CALL OR E-MAIL BEFORE TUESDAY, MAY 22, 2007.

Participating in a focus group would take approximately 2 hours of your time, plus travel. The focus groups will be held in a public and accessible location (e.g. A meeting room at Chapter's bookstore).

APPENDIX E -- Focus Group Questions

1. What is your name and how long have you been involved with therapeutic riding?
2. What motivated you to first become involved in therapeutic riding?
3. What are the benefits of therapeutic riding?
4. Is there any way that the program could facilitate more social interaction?
5. Is there any way that the program could facilitate more learning?
6. Is there a bond with the horses? Are the horses important?
7. Is there any way that the program could facilitate more of a bond with the horses?
8. Is there any other way that the program could be improved?
9. How has therapeutic riding changed your life?
10. Do you have any other comments that you would like to make?