Using Child-Centered Play Therapy 
Tenets to Train Volunteers in a 
Therapeutic Riding Program

Susan M. Rugari, PhD, RN, CNS 
rugari@tarleton.edu
Julie E. Merriman, PhD, LPC-S, NCC, RPT-S 
merriman@tarleton.edu
Allison M. Stewart PsyD, Licensed Psychologist 
astewart@tarleton.edu
David A. Snyder, PhD 
snyder@tarleton.edu

Goals for PATH Intl. Conference Friday, 11/8/13, 10:45 a.m.-12:15 p.m.
- Describe TREAT Riding.
- Present the research project.
- Identify lessons learned by the researchers.

Background
- Therapeutic riding is an example of an equine-assisted activity in which a rider with special needs (such as a disability) experiences horseback riding.
- The rider is accompanied by volunteers:
  - Someone leading the horse (the leader)
  - 1 to 2 sidewalkers on one or both sides of the horse at the rider’s legs to support the rider if necessary

Empirical Literature
- Studies indicate that therapeutic riding can have a positive impact on an individual’s social and emotional functioning including
  - Increased social skills
  - Enhanced self-esteem, and
  - Improved emotional well-being.
- The literature also promotes testimonials and anecdotal evidence regarding the mental health benefits of TR for riders.

Problem
- No studies were found focused on the role the volunteers play in promoting the mental health of the rider.
Tarleton Equine Assisted Therapeutic Riding (TREAT Riding)

- Established in 1995
- Purpose was to provide:
  - training and experience for students who desired to work in the therapeutic horseback riding industry and
  - Therapeutic riding opportunities for special needs individuals in the local community.
- Students serve in TREAT Riding in the roles of leader and sidewalker

Theoretical Approach

- **Play therapy** is the systematic use of a theoretical model to establish an interpersonal process wherein trained play therapists use the therapeutic powers of play to help clients prevent or resolve psychosocial difficulties and achieve optimal growth and development (Association for Play Therapy)
- Licensed mental health practitioners and a master’s level counseling intern trained students who would be functioning as volunteers during TR activities with special needs individuals.
- Volunteers were trained in Child-Centered Play Therapy Tenets to facilitate appropriate interaction with the riders.
- Students were expected to apply behaviors demonstrating the overall goals of the tenets when accompanying each rider.
- Tenets apply to children and adults which comprise the TREAT Riding rider population.

8 Tenets (adapted from Axline, 1947)

- Volunteer develops a warm and friendly relationship with the rider.
- Volunteer accepts the rider as she or he is.
- Volunteer establishes a feeling of permission in the relationship so that the rider feels free to express his or her feelings completely.
- Volunteer is alert to recognize the feelings the rider is expressing and reflects these feelings back in such a manner that the rider gains insight into his/her behavior.
- Volunteer maintains a deep respect for the rider’s ability to solve his/her problems and gives the rider the opportunity to do so. The responsibility to make choices and to institute change is the rider’s.
- Volunteer does not attempt to direct the rider’s actions or conversations in any manner. The rider leads the way, the volunteer follows.
- Volunteer does not hurry the TR experience along. It is a gradual process and must be recognized as such by the volunteer.
Volunteer only establishes those limitations necessary to anchor the TR experience to the world of reality and to make the rider aware of his/her responsibility in the relationship.

**Purpose**

Two fold:

- To describe self-confidence levels and basic skills-based behaviors of volunteers who are responding to riders during therapeutic riding sessions at a therapeutic riding center in rural Texas and
- Further the development of the Child-Centered Play Therapy TREAT Basic Skills-Based Behaviors instrument.

**Research Design, Sample, Setting**

- One group pretest-posttest design
- Sample was a convenience sample of students enrolled in ANSC 330 Basic Equine Assisted Therapy
- Setting was the equine center at a university in central Texas

**Human Subject Protection**

- Institutional Review Board (IRB) approval was obtained prior to data collection
- Students signed informed consent at the start of the study

**Instruments: VAS**

- **VAS to measure self-confidence**

Please indicate below by making a horizontal line (right to left) across the vertical line (up and down), the amount of confidence you feel at this moment to relate and respond to the rider.

The most confidence possible

No confidence
Instruments: CCPT TREAT Basic Skills Based Behaviors

- Child-Centered Play Therapy TREAT Basic Skills-Based Behaviors
  - Needed an instrument to clarify the behaviors associated with applying CCPT tenets specific for TR
  - Instrument does not exist
  - Researchers developed an instrument guided by the Play Therapy Skills Checklist (Ray, 2004) to measure the overall presentation of the desired behavior by the volunteers with the riders.
  - In this study, the CCPT TREAT Basic Skills-Based Behaviors underwent further development.


CCPT TREAT Basic Skills Based Behaviors

**Non-Verbal Communication:**
- Body language was open
- Appeared interested versus preoccupied
- Was relaxed/comfortable

**Verbal Communication:**
- Matched tone/expression congruently with the rider (for example, not being overly animated)
- Matched tone of voice congruently with your responses (that is, tone of voice was congruent with behaviors to convey genuineness)
- Tracked behavior of the rider (stated what was seen or observed)
- Reflected content (paraphrased what was heard from the rider without judgment)
- Reflected feelings (stated the feelings expressed by the rider)
- Facilitated decision making by the rider when possible
- Facilitated/encouraged/recognized creativity/spontaneity by the rider
- Encouraged self-esteem building of the rider
- Facilitated relationship between you and the rider
- Gave succinct/interactive responses (was brief in your words)
- Matched rate of responses to energy level of rider (pace of verbal responses was set by the rider)
- Set limits
Feedback about items (listed as behaviors) on this instrument:

- Are there any items you do not understand? If so, please circle.
- Is there an item you would change? If so, please write in the change to the item.
- Would you delete any item(s)? If so, please mark through the item.
- Would you add any item(s)? If so, please write here and continue on the back.
- For the last day of using this instrument: Does the instrument reflect ALL that was taught about Child Centered Play Therapy Tenets?

**Instruments: Journal Entries**

- Journal entries were collected weekly from the students (subjects) reporting their experience in implementing each tenet.

**Data Collection**

- Week 1
  - Explained research project to students
  - Obtained written consent
  - Students now subjects completed the Demographic Data Sheet and VAS (pre)

- Weeks 2-8
  - Mondays
    - Subjects implemented previous week’s tenet when working with riders
    - Mental Health Practitioners (MHPs) observed subjects and made notes
    - Following the session with riders, the MHPs and Intern taught the next tenet, demonstrated it for the subjects, and answered questions. Subjects return demonstrated the skill.
  - Wednesdays
    - Subjects implemented tenet taught on Monday
    - MHP observed subjects and made notes, answered subjects’ questions, and provided feedback
    - Following the session with riders, subjects completed the CCPT TREAT Basic Skills-Based Behaviors instrument
    - Subjects asked to journal before class starts on Monday about their experience in implementing this tenet

- Week 9
  - Subjects completed VAS (post)
  - MHP researchers and Intern debriefed and processed the experience with the subjects
Results: Demographic Data

- N = 22
- Age
- Gender
- Ethnic Background
- Horse Experience
- Experience with Children
- Completed College Courses in Child Development or Education

Results: VAS

- VAS
  - Pre VAS $\bar{x} = 61.82$ (SD = 22.19)
  - Post VAS $\bar{x} = 86.07$ (SD = 7.38)

- Paired sample t-test
  - $t = -5.85_{(21)}, p < .00$

Results: Scores reported on Instrument

- Self-reported scores for the behavior listed on the CCPT TREAT Basic Skills-Based Behaviors
  - 0 = behavior not present
  - 1 = behavior minimally present
  - 2 = behavior consistently present
- Many 2’s reported, some 1’s and few 0’s
- For “Tracked the behavior of the rider,” frequently reported a 1

Results: Qualitative Data reported on Instrument

- Appear to not understand:
  - the behaviors as written on the instrument
    - Example: couldn’t discern reflecting a feeling vs. tracking a behavior
  - matching tone and expression congruently with the rider
    - Note: researcher didn’t observe what the volunteer said they were doing
- matching tone of voice with responses
  - Example: the volunteer didn’t understand it was their tone of voice and their responses not the rider’s
- What the word “content” means
- Struggled with reflecting feelings of the rider
  - Example: the volunteer talked about themselves (some boundary issues)
- Comfortable with their body language
  - Example: being open
- Expressed genuine interest for the rider

Results: Journal Entries
- Noticed personal boundaries issues reflected in what volunteers wrote in their journal entries.
- Volunteers looked to rider for self-validation.
- Reflected a desire to help and understand the rider.
- They were honest about how hard these behaviors/skills are.
- Tried hard to implement what researchers were asking them to do.
- Reflected in their writing some statements the researcher made to them showing they were listening.
  - Example: volunteers were told they were not there to be the riders’ teachers.

Discussion
- The feedback from the volunteers showed the researchers the need to refine the language on the instrument describing the behaviors.
- Too much focus on the volunteer to rider with almost no focus on rider to horse.
- Exhibited not being trained in mental health concepts.
- Exhibited lay person counseling skills (Ronnstad & Skovolt)

Conclusions
Lessons Learned

- **Timing of the study**
  - The study began 1/3 of the way into the semester.
  - This means the volunteers had already worked with the riders for several weeks.

- **Time and process for teaching**
  - More classroom time in general at the beginning of the semester to focus on mental health concepts is needed.
  - On the day volunteers are working with riders, they need classroom time prior to preparing the horses and working with the riders so not distracted or exhausted.
  - Need classroom time with more didactic strategies to deliver cognitive information.

- **Curriculum**
  - Volunteers provided data for researchers to use to improve the curriculum.
  - Need a vocabulary list!
  - Add more role modeling to the curriculum that includes a horse.

Implications & Recommendations for Future Research

- This is a way to educate volunteers through relationship to attend to the rider to enhance the rider’s therapeutic experience.

- Future research includes modifying the instrument, curriculum, changing the timing of the study, and modifying the time and process for teaching, then running the study again.

Questions?