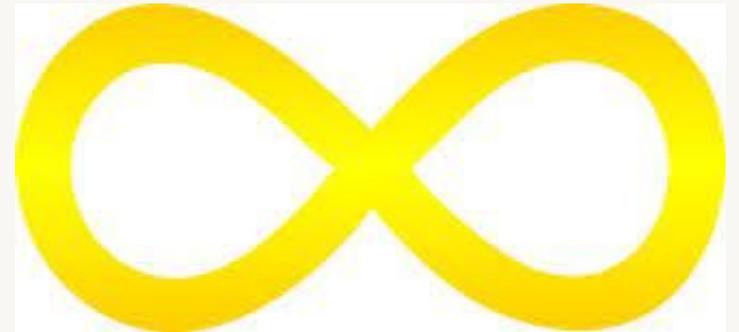


Autism Spectrum Disorder

A General Overview and
Considerations
for Equine Assisted Services



Terminology

There is a debate in the autism community over person-first (“person with autism”) language versus identity-first (“autistic person”).

Person-first language

- Many parents, individuals, and professionals feel that the “person/ people with autism” language is the most respectful way to refer to individuals on the autism spectrum.
- Believe this emphasizes the value of the person’s humanity. They do not consider autism to be part of an individual’s identity.
- Person-first terminology remains the preferred form in most clinical literature about autism

Identify-first language

- Many individuals view their autism is an integral part of their identity and personality, a part of their neurology, that cannot be separated. Saying “I’m autistic” is no different than saying “I’m nearsighted”.
- Believe that by saying a person “has autism” or is an individual “with autism” sounds as if autism is a disease or illness that needs to be cured.
- Stress that there is an autistic culture and identity

Terminology continued

Neurodivergent Terminology: Some individuals with ASD identify as neurodivergent.



- Refers to neurological conditions including ADHD, ASD, Tourette's syndrome, dyslexia, dyscalculia, and obsessive-compulsive disorder
- 20% of the population may be neurodivergent
- View these neurological conditions as natural variations in thought and behavior instead of as medical disorders which require treatment.
- “By autistic standards, the ‘normal’ brain is easily distractible, obsessively social, and suffers from a deficit of attention to detail and routine. Thus people on the spectrum experience the neurotypical world as relentlessly unpredictable and chaotic, perpetually turned up too loud, and full of people who have little respect for personal space.” –Steve Silberman, science journalist

Not sure which language to use?

Just ask! Ask about the individual's or family's preference for person-first or identify-first language.

“If you’ ve met one individual with autism, you’ ve met one individual with autism.”
–Stephen Shore

- Each person with ASD has a distinct set of strengths and challenges.
- The learning, thinking and problem–solving skills of people with ASD can range from gifted to severely challenged.
- Some people with ASD may require significant support in their daily lives while others may live independently.
- A person with ASD may be able to learn things in detail and remember information for long periods of time.
- People with ASD may be strong visual and auditory learners.
- An individual with ASD may excel in math, science, music or art.

To learn more about strengths and challenges, click here: <https://youtu.be/e12wwhdy4lo>





Equine Assisted Services

How have Equine Assisted Services helped? Follow this link to find out: <https://youtu.be/mIYI5FW-zo>

Benefits of EAS for Individuals with ASD

Many individuals with ASD experience the following when participating in EAS:

- Decreased anxiety and depression
- Decreased inattention and distractibility
- Decreased irritability
- Improved behavioral skills
- Increased sensory/cognitive awareness
- Increased social and language skills
- Increased motor coordination



PATH Intl. Precautions and Contraindications

- Autism Spectrum Disorders (ASD)/Pervasive Developmental Disorders (PDD)The Autism Spectrum encompasses several varied diagnosis. There are Autism, Asperger, PDD–NOS (Not Otherwise Specified) and two rare diagnoses: Rett syndrome and childhood disintegrative disorder.
- These syndromes are characterized by varying degrees of impairment in communication skills, social interactions and restricted, repetitive and/or stereotyped patterns of behavior.
- Additional problems that may accompany these syndromes include: therapies to address physical, cognitive, behavioral, communication and/or sensory disorders; behavior management plans; restrictive diets; dietary supplements; medication to address dysfunctions such as seizures, inattention, hyperactivity, behavior disorders, anxiety or depression. See topics such as Behavior Problems, Seizures, Medications, Rett Syndrome, Sensory Integrative Disorder and Communication Disorders for related issues.

PATH Intl. Precautions and Contraindications continued

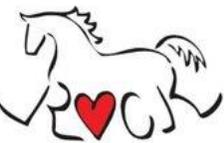
Precautions:

- *Wandering* – a participant may be at high risk for getting lost and may wander away from caregivers or staff. The participant may not consider him- or herself lost or may hide from those searching for him or her. Staff should be cautious to ensure adequate supervision is available.
- *Self-injurious behavior*
- *Poor safety awareness* may put the participant at increased risk during equine-assisted activities; participant may not respond to “no” or tone of voice.
- *Poor impulse control*–participant may run away from staff, may run into parking lot or field with horses or may spontaneously dismount during mounted activities.
- *Rigid adherence to routines* may make changes difficult. A different horse, instructor or volunteer team may cause a behavioral meltdown and may make EAA or EAT contraindicated that day.
- *Communication deficits*–be sure to understand how the participant communicates prior to EAAT; utilize the communication method that is familiar to the student.

PATH Intl. Precautions and Contraindications continued

Contraindication:

- The instructor/therapist is *unable to evaluate a participant's pain/distress level.*
- *Increasing self-injurious behavior* (before, during or after EAA or EAT)
- *Aggressive behavior* toward others or toward equine that is not managed through a behavioral plan
- *Behavioral meltdown* where participant is unable to be calmed prior to EAAT; EAA or EAT may resume on another day
- Participant *does not dress appropriately for the weather* in cases of extreme weather (e.g., winter in Maine and will not wear coat or gloves, Florida summer and participant will only wear thermal long sleeves and hooded coat). Participant may participate in EAA or EAT at other times of the year.
- Participant *refuses to wear a helmet.*
- Extreme *tactile defensiveness or gravitational insecurity* unless under direct treatment by a therapist with training in sensory integrative dysfunction



Initial Assessment



- Understand what the participant and their family hope to achieve through EAS and learn about the individual's life goals.
- Learn the methods the participant uses to communicate and use them during the lesson. Participants may need to use AAC devices, picture symbols or writing to communicate. If you are not familiar with the method the participant uses, the participant and their family can often teach you and direct you to helpful resources.
- If the participant has difficulty advocating for themselves, ask their family how they communicate wants, needs and pain. For individuals who cannot communicate pain, ask the family to check regularly after riding for skin pressure points.
- Ask about “triggers” and how the participant and family manages them.
- Ask about the strategies the participant uses for anxiety,
- Ask about sensory over-responsiveness, sensory under-responsiveness and sensory seeking behaviors.
- Ask about the participant's sensitivity to touch, smells,
- Have the participant try on a helmet to help determine sensitivity to wearing one. If needed, have the family slowly desensitize them at home by having them wear a bicycle helmet or a borrowed equestrian helmet.
- Work with the participant and the family to create a plan to follow in the case the participant becomes overloaded while at the facility.

Horse Selection

The horse should:

- be an appropriate height that takes into consideration the participant's size and enables the sidewalkers to support the participant as needed
- provide an active, choppy gait for increased vestibular and proprioceptive input to increase awareness and decrease distractibility
- provide movement that stimulates the participant to self-correct their position when off balance.
- provide a balanced, smooth gait for participants who may become overstimulated easily or who are fearful
- be non-responsive to excessive or impulsive movements and loud noises made by the participant
- respond calmly and timely to the participant's riding aids
- be able to stand still for longer periods if the participant needs extra time to feel at ease
- be a shorter horse with a wider base of support for a participant with gravitational insecurity or who feels unbalanced

Remember that sometimes a horse and participant may not make a good team although, in theory, they should. Be sure to problem-solve what may be causing this, such as too much or not enough movement, the horse's natural movement (lateral, rotational, anterior-posterior, vertical displacement, etc.) or the horse's natural body carriage.

Tack Selection

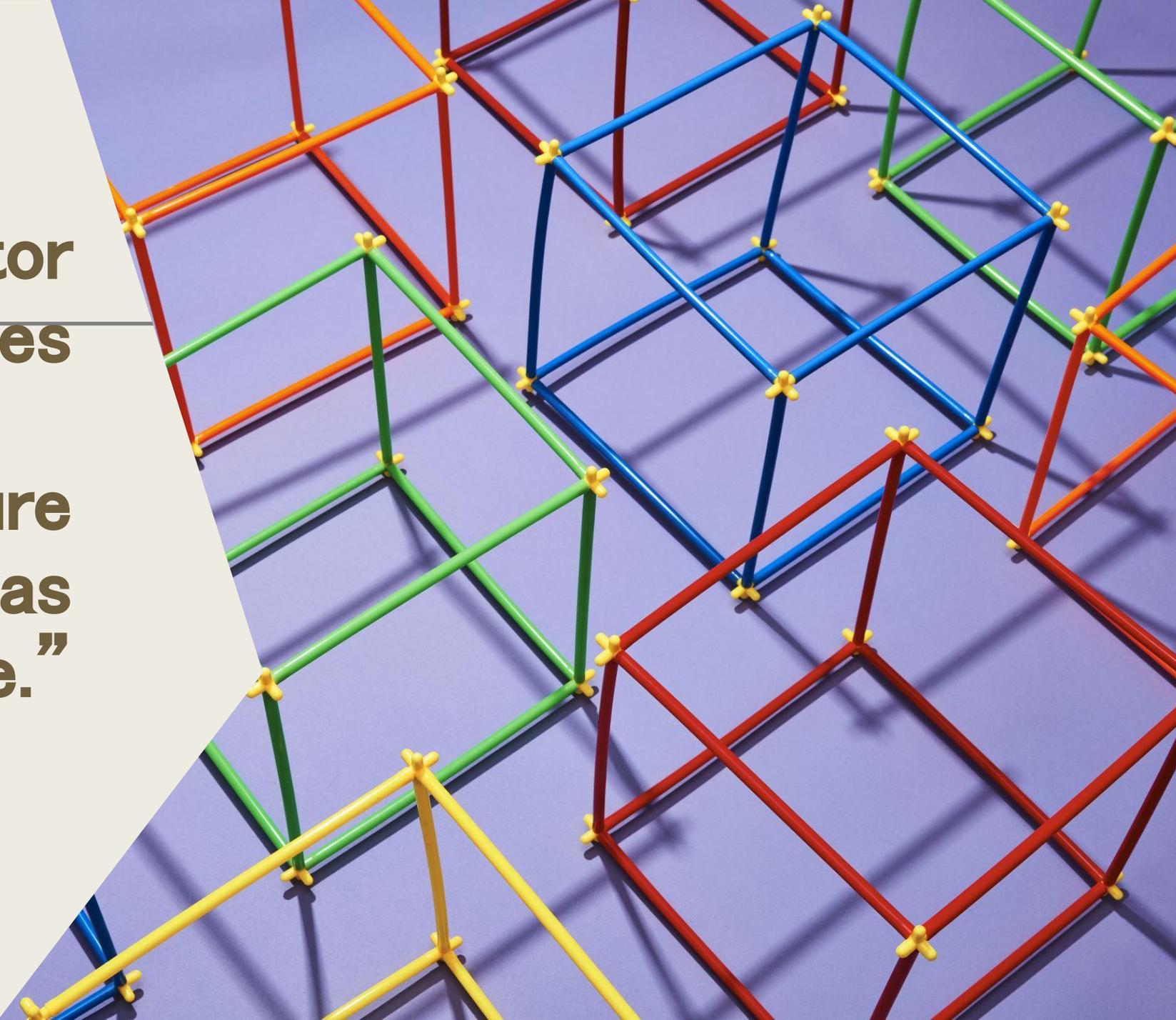
Tack:

- The choice of saddles, surcingles, etc. will be determined by the participant's size, age, need for support and skill development.
- Reins—may choose to use a sidepull, jumping hackamore or reins attached to the halter if the participant makes excessive or impulsive movements
- Rainbow reins help the rider identify correct hand placement
- Rubberized reins may be offensive to participants who have tactile sensitivity or defensiveness
- For participants with gravitational insecurity, provide stirrups and use a supportive saddle.



Instructor Strategies

**“I created structure
where there was
none.”**



Instructor Strategies – Pre-Lesson

Communication during the Lesson:

- *Use the communication methods the participant utilizes during the lesson. For those who need to use AAC devices or picture symbols, plan how they will be incorporated without causing a safety concern*
- Check-in with the participant and the family prior to or at the start of each lesson. Ask how the participant's day has been and ask if there have been any recent changes (such as medication, schedule, etc.).



Instructor Strategies

Use a positive voice and offer acknowledgement for all efforts

Use short, clear, concrete phrases, prompts and visual aids

Supplement spoken directions and cues with visual supports and kinesthetic aids

Repeated instructions can lead to overload

Give the participant time to process instructions

Be alert to any communication attempts

Key Reminders



The Approach

Try not to force or coerce

Build a positive relationship with expectations and follow through

It is helpful to keep in mind that the only things we can truly control are:

- Ourselves and our responses
- The environment and situation
- What we teach the participant

If we want to see a change in a rider's behavior, we need to make a change in one or more of these factors.

How do we perceive behavior?

What is our initial assumption about the behavior?

- They always do that; it's not going to change.
- It's so frustrating, they're just so bad.
- I don't know why they do that.

Ask yourself "What, When & Why"

- What is happening?
- When is the behavior happening?
- Why is the behavior happening?
- It is important to understand the motivation behind the behavior.

Understand your strengths as an instructor.

- What are we comfortable handling?
- How do we respond in different situations?

Instructor Strategies continued

For sensory seeking behaviors and those who are under-responsive:

- Provide “heavy work” before mounting, such as carrying a saddle, pushing a wheelbarrow, carrying grooming buckets or rolling a barrel, to help increase focus and attention
- Provide with sensory input such as an early trot, stop/starts, transitions and change of directions

Participants who demonstrate sensory seeking behaviors will need close supervision to maintain safety.

For participants who have difficulty with transitions, use visual schedules to inform them of planned activities. Visual schedules can utilize words, photographs, picture symbols or real objects.

Planning

The most important part of behavior management is prevention. Undesired behaviors can be prevented much of the time with careful observation and planning.

However, it is important to have an established action plan when behaviors are not able to be prevented.

Instructor Strategies continued

For participants who have auditory defensiveness—remove the offensive sound, provide sound deafening earphones when appropriate, provide simple, one step directions and check if there is an echo in the arena.

For participants who have tactile sensitivity, avoid light touch, provide deep pressure as appropriate, and adapt equipment as needed (such as using smooth reins instead of textured reins).

For participants who can be aggressive, be proactive—establish rules and ensure the participant and the parent understand the consequences. Follow through with the consequences being firm but not angry. If the participant is intentionally abusive to the horse or a team member, end the mounted part of the lesson immediately. Teach empathy for the horse as part of your lessons.

Always look at what the behavior may be communicating. Behavior is communication.

The ABC's of Behavior Management

Antecedent

- What's happening before the behavior?

Behavior

- The behavior is the action the instructor witnesses.

Consequence

- The resulting consequence is the action that immediately follows a behavior. The outcome is going to be the reinforcer in the situation. If an instructor lacks consistency or provides the incorrect consequence, the problem behavior can be further reinforced for the participant who will correlate their behavior with the instructor's resulting outcome.
- The responses of volunteers, other riders and equines are also consequences of the participant's behavior.

What is the function of the behavior? Why is it happening?

Cause and Effect

A behavior will persist because it fulfills the individual's needs in one way or another.

If instructors attempt to change unwanted behavior without understanding the underlying function, they may inadvertently reward the undesirable action.

Lesson Planning

- Create defined cause and effect relationships so it is very clear that the participant's action caused the horse's reaction
- Do not use too many pieces of equipment in the arena. A busy arena can be distracting.
- Teach to all learning styles. Some participants may need to be shown what to do.
- Aim to achieve at least 1 objective each session
- Progress participants from 1 step instructions to multiple step instructions
- Use task analysis and focus on the motor planning of the task
- Teach a progression of skills so the participant can be or feel "in control". This will help their ability to focus, improve their follow-through skills and foster a positive self-image.
- Simplify steps or redirect a participant that becomes frustrated. Focus on what they did that was positive.
- Praise accomplishments
- Review horse safety regularly

Instructor Strategies continued

Volunteer Training:

- Train volunteers to encourage, be attentive, redirect the participant and support boundaries.
- Have only one volunteer interact and communicate
- Ensure the volunteers understand the participant's need for or avoidance of touch..



Reframe your Communication

"You did this last time."

"This is hard. Let's try it a different way to see if it helps you."

"It's frustrating when we can't remember things. Let's think of some new ways to work on this."

"You have to stop that or else you can't ride."

"I need you to sit up and hold your reins."

"We are going to work together to solve this problem."

"Nothing works with this rider."

"I am working really hard to help this participant, but I need more support to find other solutions."

"Calm down."

"Let's take a break for a minute and then we can try it again."

"It looks like your body needs to move right now. Let's practice some posting."

"It looks like you might be feeling _____."

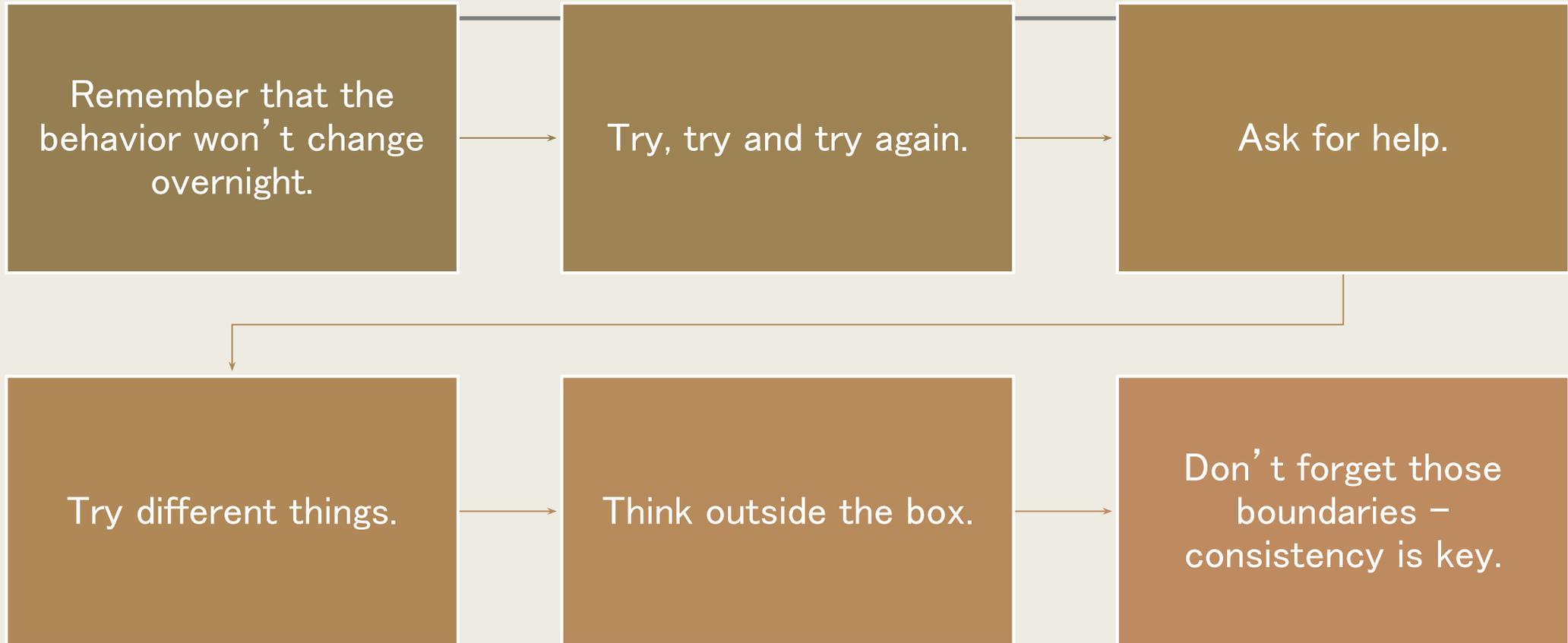
"Why are you starting before I've told you the directions?"

"Stop. First listen to all the directions, then you can try it."

"This rider doesn't want to learn to _____."

"There are some things interfering with this rider learning. Let me think about other ways I can teach her."

Finally, it's a process...



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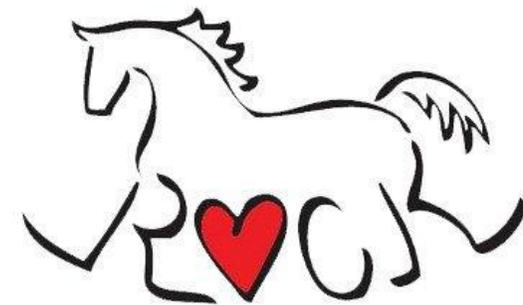
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Healing Thru Horses



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