

## **More than Just Friends**

Ever since our Iron Age ancestors bonded with domestic animals, dogs and horses have made valuable contributions to the human experience. In Europe, during the early years

of the 20<sup>th</sup> century, these relationships entered a new and vital phase when "man's best friend," the dog, received training to serve as a guide for soldiers blinded in combat. The concept was introduced into the United States in 1929 and expanded in 1974 when the dog's special qualities made him the perfect skilled companion for people with a wide range of disabilities. In 1952, following a crippling bout with polio, Danish equestrian rider Liz Hartel demonstrated the therapeutic effects of the horse when she won a silver medal in dressage

at the Helsinki Olympic Games. Since those pioneering days, dogs, horses, and other animals have helped people with disabilities improve and enhance their lives, as you will see in these two extraordinary stories.

## Tara and Dylan by Patricia

Because of significant GI problems, my 24-year old daughter, Tara, has been schooled at home, causing her social skills and ability to have friends to suffer. This problem plagued us until one night a few years ago, while watching public television, I came upon a program about companion dogs and their miraculous relationship to people with disabilities. Amazingly, they seemed to have the ability to solve many socialization issues. It appeared to be just what I was searching for!

In Tara's case, we would have to overcome a number of issues. Tara has always exhibited tactile defensiveness, a strong will, and shown a seemingly endless number of personal spacing and environment controlling rules, which she stringently enforces. Physically, Tara walks, but has a very unsteady gait, tires easily, and, in public, uses a wheelchair for positioning and safety. In spite of how all of these aspects of Tara's personality and physical barriers would seem to work against us, I nevertheless scheduled an intake interview with Canine Companions for Independence (CCI). I was determined to explore any and all avenues that would enhance her day-to-day experiences.

After the interview we were informed that we would be accepted into the program when an appropriate opening became available. We were required to go through an intensive two- week training, which entailed our going to the CCI Northeast Region facility. The training was exhausting and extensive but very necessary to properly develop canine handling skills. For the last eight days of the training we worked with Dylan, a majestic Golden Retriever, who would become Tara's skilled companion dog.

Initially, Tara was reluctant to go near Dylan and gave him a lot of leeway when they came in close proximity. I became apprehensive about how Dylan would break down Tara's natural defensiveness. Within approximately one week, and for reasons we cannot explain, Dylan proved to be exempt from all of Tara's personal, spacing and





controlling behaviors. For example, for many years, one of Tara's rules was that no one was permitted to sit next to her on our living room loveseat. If you violated this rule, Tara would push you until you got up. Well, Dylan jumps on the loveseat many times during the day and, while lying next to Tara, puts his paw and head on her lap while she pats his fur. It almost seems as if Tara's hand was molded to fit the top of Dylan's head!

Dylan serves as a magnet to children and, because of his outgoing personality, is able to positively affect the manner in which Tara is viewed. When they stop to visit, we explain that Dylan is Tara's dog and they will have to ask her if they can pet Dylan. They now view Tara not as a person with a disability but rather as a young lady with a terrific dog. By Tara's expression, she communicates that it is OK to pet Dylan and visit with us. The positive vibes created by these visits is something that Tara can feel. In many instances, even when children do not stop, the stares are replaced by smiles and an appreciation of Tara and Dylan's special friendship.

We were also able to quickly realize Dylan's potential to serve as an "assistant" to physical and occupational therapists. Contractures of the elbows and kyphosis of the spine have been the focus of Tara's therapists for many years. While working on Tara's fine motor skills, we devised a technique where we would place objects, such as pegs, on Dylan's collar and vest. Utilizing Dylan's various commands, we are able to position him so Tara can readily reach and stretch for the objects. These stretching exercises are difficult for Tara, but she can more readily accept the challenge because Dylan is creating a relaxing and entertaining environment. We had long ago discovered that Tara loves to ride her tricycle and incorporated this into her occupational and physical therapies. During this activity, Dylan happily strides next to Tara and makes it obvious he is thrilled to be such an important part of her therapy. Thanks to Dylan, these therapy sessions are unique and innovative and have resulted in Tara making great strides toward her goals.

As part of Dylan's training, he learned in excess of 50 commands, most of which relate to working with Tara both in and out of her wheelchair. When Tara flings her spoon, kicks off her sneaker or drops one of her toys, a brief series of commands instructs Dylan to pick them up and place them on her lap. Dylan is at his happiest when working with Tara, but it is obvious that his attentiveness and love of Tara are traits that were not taught but evolved because of their special bond. When Tara is not feeling well, Dylan will spend hours lying next to her while she rests or sleeps.

Dylan is truly Tara's gentle and loyal friend. His intuitive knowledge of how to respond to Tara and her needs is without a doubt the result of his desire to please her. The happiness I feel just watching them scooting around the apartment together, mesmerizing the neighborhood kids, or sharing quiet time is possible only because of Dylan's calm demeanor and desire to show his love for Tara each and every day. To learn more about CCI, or to find a center in your region, contact them at: P.O. Box 446





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## Frankie and Bart by Elaine Mele, MPT, Pegasus Therapeutic Riding

I met Frankie Leone in the fall of 2000 when he was seven. He was my first client with CdLS and was also one of my first hippotherapy clients. While practicing as a physical therapist for a number of years, I was drawn to the use of the horse as a treatment tool. Besides the mental and emotional benefits that occur between an animal and a human, hippotherapy (from the Greek hippos for horse) has many physical and cognitive effects as well. These include increasing trunk strength, improving posture, coordination, motor planning, timing and control of muscle movements, improved respiration, mental processing, sound production, balance and improvements in muscle tone and gait (just to name a few).

Having had no experience with CdLS, I had no idea what to expect from my encounter with the Frankie's family. Even in my limited experience, I had found that what was presented on paper often changed once a client interacted with a horse. My goal for the evaluation was to see how Frankie transitioned to the horse, evaluate his safety during the session, determine how much support/physical assistance he would need and discuss a treatment plan and goals with his mother, Susan.

Well, the first session did not go as planned. To someone who has limited movement experience and who is dependent on outside assistance for the majority of his/her mobility, riding a horse can be overwhelming. Frankie was placed on a fleece blanket held down by a surcingle (a broad band fastened around the body of the horse). The fleece is used to enable a closer connection to the horse and allow a more direct transmission of movement from horse to rider. Frankie was very anxious with the whole process. It took two people to keep him on the horse, as he intermittently would throw his small but strong frame into a full extension pattern. In addition, his head control was limited, which is a safety concern. After the initial session, I had doubts as to whether this would be an appropriate activity for Frankie. To be honest, I also had doubts about my level of experience and my ability to successfully and safely work with Frankie. But Susan would not let me back down; her persistence in fighting for what is best for her son, as well as my faith in our special therapy pony, Bart, pushed me ahead.

My initial goals for Frankie were simple and obvious: to demonstrate trunk and head control while sitting on a moving surface and promote relaxation so Frankie could benefit from the rhythmical, symmetrical gait of the horse. To my delight, Frankie began to show improvement over the first few sessions. He and Bart developed a special bond. Bart was patient, as Frankie learned to move with, instead of against, him. This in turn made Frankie more comfortable and less anxious. Frankie shared his first giggle with us early on and has not stopped since.





Since then Frankie's hippotherapy goals have expanded to include improving motor planning and control (i.e., he moves from sitting forward to sitting backward facing the horse's tail, then returns to forward again), improving trunk rotation, balance reactions and establishing a consistent communication system. Functionally, I wanted all these to carry over into greater independence in walking, which he has gradually achieved.

Over the course of two years, I have tried numerous techniques during treatment sessions, such as placing Frankie in various positions (i.e. riding sideways, backwards, lying down), along with changes in speed and/or direction of the horse. It was a lot of trial and error, but Frankie clearly let me know his preferences.

It has become a big joke among staff that Frankie now runs our therapy sessions. Personally, I am glad to "hand over the reins" and let him exert some independence. He has earned it by working hard and providing immense joy and satisfaction to those who work with him.

Since this writing, Bart, the therapy pony, has "retired," but Elaine Mele can still be found at Pegasus Therapeutic Riding in Connecticut, working with Frankie and other children with disabilities. Pegasus is affiliated with North American Riding for the Handicapped Association (NARHA), a national non-profit organization that promotes the benefit of the horse for individuals with physical, emotional and learning disabilities.

For more information on NARHA and their programs, or to find a facility near you, contact them at:

P.O. Box 33150 Denver, CO 80233 1-800-369-RIDE (7433) www.narha.org

