GENERAL SUGGESTIONS:

KEEP A CONSISTENT WAY OF WORKING

RESPECT THE RULES

GRADUALLY AND STEP BY STEP TRY TO MAKE THE EXERCISE CHOSEN: DO NOT PROPOSE TOO DIFFICULT EXERCISES TO THE CHILDREN

TRY TO END A WORKING SESSION ASKING THE CHILDREN AN EXERCISE THAT WE ARE SURE THEY WILL MANAGE TO DO (ALWAYS WORKING IN ORDER TO INCREASE SELF-CONFIDENCE OF THE CHILDREN)

ASK EVERY RIDER AN ANSWER: ACTION/REACTION – VERBAL, LIGHT CONTRACTION OF THE HAND, PELVIS MOVEMENT, TOUCH, CARESS (F.E.: WHILE STARTING WALK): STIMULATION AND CODIFICATION OF LANGUAGE IS VERY IMPORTANT TO ACHIEVE CHILDREN, HORSES AND STAFF GOALS

CHECK SAFE GETTING ON/OFF THE HORSE FOR CHILDREN AND STAFF

CHILDREN CAN NOT ABSOLUTELY RIDE WITH ORTHOPEDIC BRACES, GUARDS, SUPPORTS: IT IS DANGEROUS !!! IF YOU CAN'T REMOVE ORTHOPEDIC SUPPORTS, DO NOT USE STIRRUPS.

EXERCISES FOR ABLE-BODIED OR SOFT PSYCHOMOTOR RETARDATION RIDERS

1) Small ball on plastic cone: catch the ball and move it from a plastic cone to another. This exercise should be done at the beginning with a not moving horse and then with a walking horse

2) Exercise with closed eyes: gymnastics exercises on horse and riding exercises (turn, stop, walk)

3) Teaching the children how to manage a horse when they are not riding: they could be learn how to manage a horse during the exercises of other children, keeping a lunge (rope) in their hand, so that they can join and share with the rider the exercises proposed by the therapist. This could also help the therapist's work. Be very safety with this activity.

4) Vaulting exercises: moving a leg from left/right side of the horse to the other one (called "world tour exercise"), kneeling on the saddle, "prince exercise", "flag exercise", "half flag exercise", "walking and trotting mount/dismount". Choose appropriate exercises according with the children conditions and taking care of the horse acceptance.

5) Mug + bamboo canes fixed to the ground: catching a mug from a bamboo cane and moving it from another one (stop, walk, trot)

6) Mounted course: create with the children a course and build it: circles, small paths, corners, fences on the ground. Riding horse by two hands and by one hand with a small ball/baton, exchanging ball/baton with workmate

7) Hand Ball: passing a ball 1,2,3.

   1: stop

   2: walk

   3: trot or back to the front riding

8) Gymnastic exercises and alternate/separate works: (right/left/upper body/lower body) in order to achieve coordination development and laterality

9) With younger riders: to help them with gym-exercises tell them a story (for example: how a tree grows, leaves movements, crown getting bigger) in order to simulate the above movements with their arms (valid exercises for soft psychomotor retardation children and other mental pathologies)

10) In order to get a better "idea of space", create some letters with associated animals (f.e. letter D with a painted dog) and put them on the path (create visual reference points) where the children ride

PATHOLOGIES

DOWN SYNDROME: AVOID TO TROT!!! Except in case of having certainty of no contraindication about stability and solidity of the cervical section declared by a medical certificate and diagnostic test !!! Verify heart problems that could cause weariness

EPILECTIC CRISIS: (different pathologies): always verify if epilectic crisis are under control and stabilized, even with medicines, for at least two years. Otherwise avoid to ride.

CEREBRAL PALSY OR GENETIC SYNDROMES:

Even in case of: impossibility for the rider to keep an upright position, flabbiness, muscle convulsion Myoclonic, CHILDREN CAN RIDE HORSES!!! (obviously 2-3 operators are needed: one to look for the horse and two will work with the rider)

AUTISM AND SCHIZOPHRENIA or PATHOLOGIES WITH STRONG STEREOTYPES:

TRY TO AVOID: narrow circles/spaces/tracks (f.e.: narrowing fences on the ground)

TRY TO AVOID: repetitive actions (f.e.: do not exaggerate with repetitive actions while grooming the horse; change exercises – ask for attention)

TRY TO AVOID: too long waiting time, but try to improve riders' ability of standing long waiting time

PSYCOMOTHOR RETARDATION:

PAY ATTENTION IN ASKING: attention to the riders' reactions (DO NOT EXAGGERATE IN ORDER TO AVOID OPPOSITIVE BEHAVIOURS)

BE WELCOMING, IN THE MEANTIME DETERMINED WHILE ASKING AN EXERCISE T THE CHILDREN

RESPECT THE RULES

WORK ON SELF-CONFIDENCE