

Perception of hippotherapy professionals about their practice with the elderly

Percepção de profissionais de equoterapia sobre a prática com idosos

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Date of first submission: April 13, 2022 Last received: July 13, 2022

Accepted: September 30, 2022

Associate editor: Mariana Asmar Alencar Collares

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Abstract

Introduction: Riding therapy is a therapeutic method recently regulated in Brazil. Nevertheless, it has been studied for years, especially focusing on children and adolescents. Considering the growing number of elderly in the Brazilian population, investigations focusing on older people are increasingly necessary. Objective: To analyze the perceptions of equine therapy professionals about their practice with the elderly. Methods: This was a qualitative and cross-sectional research, in which the participants answered an online questionnaire, composed of demographic questions and questions related to horseback riding with the elderly. Data were analyzed using descriptive statistics and thematic content analysis. Results: Twenty-five professionals (23-57 years old), graduates, who had worked for at least two years with hippotherapy (mean = 6.64; standard deviation = 5.39 years) participated. This sample was composed mostly of female professionals (72%) and physical therapists (48%). Of the total, 60% reported having already assisted at least one elderly practitioner. Among those who had never worked with this public, 90% wished to do so. All professionals considered that horseback riding can be beneficial in old age, reducing depressive symptoms and promoting psychosocial (e.g., socializing) and physical (e.g., balance) variables. Despite the benefits, professionals mentioned challenges, such as difficulties of the practitioner (e.g., fear), problems with the workplace (e.g., lack of qualified staff), and low demand. Conclusion: Hippotherapy professionals consider riding therapy a method that contributes to improving biopsychosocial aspects of the elderly. However, they face challenges in this practice, hindering or preventing them from serving older people.

Keywords: Aged. Equine-assisted therapy. Patient care.

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Resumo

Introdução: A equoterapia é um método terapêutico recentemente regulamentado no Brasil. Não obstante, há anos já vem sendo estudado, sobretudo com foco em crianças e adolescentes. Considerando o aumento do número de idosos na população brasileira, investigações com enfoque em pessoas na velhice são cada vez mais necessárias. Objetivo: Analisar as percepções de profissionais de equoterapia sobre sua prática com idosos. Métodos: Trata-se de uma pesquisa qualitativa e transversal, em que os participantes responderam a um questionário online composto por questões demográficas e relacionadas à equoterapia com idosos. Os dados foram analisados por meio de estatística descritiva e da análise de conteúdo temática. Resultados: Participaram 25 profissionais (23-57 anos), graduados, que trabalhavam há pelo menos dois anos com equoterapia (média = 6,64; desvio padrão = 5,39 anos). Essa amostra foi composta majoritariamente por profissionais do sexo feminino (72%) e fisioterapeutas (48%). Do total, 60% relataram já terem atendido pelo menos um praticante idoso. Entre aqueles que nunca trabalharam com esse público, 90% desejam atendê-lo. Todos os profissionais consideram que a equoterapia pode ser benéfica na velhice, reduzindo sintomas depressivos e promovendo variáveis psicossociais (por ex., socialização) e físicas (por ex., equilíbrio). Apesar dos benefícios, os profissionais mencionaram desafios, como dificuldades do praticante (por ex., medo), do local de trabalho (por ex., falta de equipe qualificada) e baixa demanda. Conclusão: A equoterapia é considerada pelos participantes um método que contribui para melhorar aspectos biopsicossociais de idosos, porém estes profissionais enfrentam desafios na prática, dificultando ou impedindo que atendam pessoas na velhice.

Palavras-chave: Idoso. Terapia assistida por cavalos. Assistência ao paciente.

Introduction

Human-animal contact as a form of treatment and cure for humans has been used since antiquity. 1,2 Currently, several studies show that the presence of animals, whether with a therapeutic focus or simple playful contact, helps to improve mood, socializing and the practitioner's physical and psychological well-being. 3,4

One of the most used animals in animal-assisted therapy is the horse.⁴ Therapy with horses is referred to by various names, such as "physiotherapry based on

horse movements", "equine therapy", "physiotherapy and horse-assisted therapy", "therapeutic horseback riding", and "hippotherapy", among others.⁵ This hinders a standard in care, in the specialization of professionals, and in the advancement of research.⁶

This understanding has been present for at least a decade, when Craig et al.⁷ stated that scientific progress is hampered when there is no clear term to name different services. Thus, the authors emphasized the importance of having this terminology well described, so that the intervention is developed scientifically, with efficacy and confidence.

Wood and Fields⁵ also reinforce the need for professionals working with hippotherapy to develop a theory for training in the area. They point out that hippotherapy needs to be defined and presented to the public through practice and research, as a therapeutic tool that involves the movement of trained horses to promote benefits to the practitioner.⁵

In Brazil, the most used term is hippotherapy and refers to the practice of rehabilitation that uses the horse as a mediator, and can be applied to people of all ages.⁸ It works with the practitioner in a global way, stimulating body awareness, the development of balance and muscle tone, improved motor coordination, awareness, self-confidence and self-esteem.⁹ In addition to these aspects, it can be used as a complementary treatment for emotional difficulties, trauma and mental illness.⁵

Hippotherapy was recently regulated in Brazil through Law No. 13.830.¹⁰ However, for at least three decades, a non-profit civil entity of philanthropic, assistive and therapeutic nature called the National Association of Equine Therapy (ANDE-BRASIL), already contributed to publicizing this practice in a national context.

For ANDE-BRASIL,⁸ hippotherapy uses an interdisciplinary approach that involves the participation of health, education and riding professionals. Three professionals make up the minimum team of a hippotherapy center: a physiotherapist, a psychologist and a horseback riding professional. The service is preceded by a diagnosis, medical indication and/or evaluations by professionals in the areas of health or education, aiming to plan an individualized service.⁸

Although hippotherapy can be used with people from childhood to old age,⁸ many studies on this practice are conducted focusing on children and/or adolescents.¹¹ With this in mind, Matarazo¹² carried out a systematic review of the literature on hippotherapy with the elderly to find out the state of the art of these publications. Of

the 38 articles analyzed by the author, only 31.57% were performed exclusively with the elderly, and of these, 92.10% demonstrated benefits.¹² There is, therefore, a need for further studies on this complementary therapy with practitioners working with other phases of life, such as adults and older people.

In addition to efficacy studies, such as those analyzed by Matarazo, ¹² qualitative research has also been conducted on the perception of hippotherapy among practitioners with cerebral palsy, ¹³ caregivers, ¹⁴ undergraduate students ¹⁵ and psychologists. ¹⁶ Regarding the first study, the perception of practitioners with cerebral palsy or their parents about the effects of hippotherapy was investigated. ¹³ For this, 17 people aged between 4 and 63 years old participated in the study. The benefits of normalizing muscle tone, improving trunk and gait control, and increasing self-confidence and self-esteem were identified. ¹³

Similarly, Nunes and Caberlon¹⁴ also investigated the perceptions of parents (caregivers) of children with cerebral palsy about the treatment of their children with hippotherapy. It was observed that the participants recognized the biopsychosocial benefits of this practice for the children, and, when asked about what changes did they observe after the beginning of treatment, they reported a marked improvement in balance and trunk and neck control.¹⁴

Another study aimed to evaluate the perception and knowledge about hippotherapy among veterinary medicine students.¹⁵ The participants believed that hippotherapy provided many benefits to its practitioners, being indicated for autistic people or those with disabilities or with Down syndrome, so It appears that students had limited knowledge about the purpose and applicability of this practice.¹⁵

Wilson et al.¹⁶ examined the perspectives of psychologists working with equine-assisted psychotherapy on its benefits in adolescents with depression and/or anxiety. Participants identified a number of improvements in practitioners, such as increased confidence, self-esteem and assertiveness and improved emotional regulation and self-control.¹⁶

Once again, there was a focus on hippotherapy with children and adolescents, neglecting the other phases of life. To reduce, even if partially, this lack in scientific literature, especially in Brazil, this study brings a discussion about hippotherapy with elderly practitioners from the perception of professionals.

The choice for this age group is justified above all for two reasons. First, aging is a process that causes various bodily changes, such as weakening of muscle and bone tone, postural changes, changes in protective reflexes, stiffening of the joints, reduction of body mobility, modification of balance and gait, and increased risk of falling, where there is greater probability of death. ^{17,18} In addition to these, aging and old age are also marked by important psychological and social changes. ¹⁹

The second reason refers to the age profile of the Brazilian population, which is changing. There is a sharp increase in the number of elderly people, so that the estimate for 2030 is that people aged 60 years or older will make up the majority.²⁰

Thus, based on the context presented, main aim of this study was examine the perception of hippotherapy professionals about their practice with the elderly. Specifically, it was aimed to know the training of professionals, their experience with practitioners in old age, the demands of elderly people who seek this type of treatment, the benefits and challenges they identify in working with older people and interest in continuing to serve (or start to serve) this group of people.

Methods

This was a cross-sectional, exploratory study, with a quantitative and qualitative design, carried out from information collected with Brazilian hippotherapy professionals. It was approved by the Research Ethics Committee (CEP) of the Catholic University of Brasília (CAAE: 39650820.8.0000.0029).

Participants

The sample of this study was obtained by convenience and was composed of hippotherapy professionals. The inclusion criteria were having a college degree and working for at least two years with hippotherapy in Brazil. It is believed that these criteria contributed to the participants having some experience with this practice on a national level.

Not answering the questionnaire completely or completing it after the deadline provided were exclusion criteria. We chose not to restrict participation to a single king of training, as the hippotherapy team is made up of professionals from different areas of knowledge.

Considering the inclusion and exclusion criteria, only one of the respondents was not included in the study, as he had been working with hippotherapy for only one year. The final sample of this study consisted of 25 professionals.

Instruments

This study was carried out using a semi-structured questionnaire that we developed, and it was answered online, through the Google Forms platform.

The instrument initially contained an informed consent form, and after accepting to participate, the professional accessed the questionnaire. It was divided into two parts: sample characterization and perception of hippotherapy with the elderly.

In the first section, demographic information was collected, including age, sex, professional training, time working with hippotherapy and the region of the country in which it was practices. The second part was composed of questions encompassing, for example, the experience of the hippotherapy professional with the elderly, the demands, benefits and challenges perceived in applying this practice in older people. If the participant had never cared for the elderly, the questions involved their perceptions about, for example, benefits and challenges that they believe exist in treating this group of patients.

Procedure

After approval by the CEP, the dissemination of the study began. Initially, it took place through the our social network and later through the "snowball" strategy, in which the responding professionals shared the investigation's electronic address with other potential participants. Data collection took place during the month of December 2020. To reach the final sample size, the saturation sampling strategy was adopted; that is, we stopped recruiting new participants when we felt that there was repetition in the data.²¹

Analysis of data

Quantitative data were analyzed using descriptive statistics such as mean (M), standard deviation (SD), percentage and frequency (f). Qualitative data were handled using Bardin's thematic content analysis.²²

For content analysis, a pre-analysis of the participants' responses was initially carried out, followed by the exploration of the material and the treatment of the results, which occurred through establishing percentages, frequencies, inferences and interpretation. Thus, the thematic categories identified would be discussed qualitatively and quantitatively.

Results

Characterization of participants

Twenty-five professionals (P1 to P25) participated in this study. They were between 23 and 57 years old (M = 40.32; SD = 8.95), and mean working time with hippotherapy was 6.64 years (SD = 5.39; 2-24 years). Most participants were female (72%; n = 18), physical therapist (48%; n = 12) and worked in the South (24%) or Southeast (40%) region of Brazil (Table 1).

With regard to professional background, only one participant (4%) stated that he had not taken a training, specialization or similar course in hippotherapy (Table 1). Of the 24 professionals who participated in some training or similar, 79.17% (n = 19) stated that one of the contents covered was about the practice with the elderly (Table 1). Just over half (60%; n = 15) of the participants reported having worked with practitioners aged 60 or over (Table 1). However, three of them (20%) reported seeing only one elderly person. the others (n = 12; 80%) between one and about 50 elderly people.

Demands, benefits and challenges: perception of professionals who had already assisted elderly people

Professionals were asked to report, based on their perceptions, the demands of the elderly patients they had already attended. Among the ten categories indicated, the most frequent were: sequelae of cerebrovascular accident (CVA) (40%; f = 6); Parkinson's disease (13.33%; f = 2); and anxiety disorder (13.33%; f = 2) (Table 2).

When asked about the benefits they identify in the elderly who undergo hippotherapy, professionals more often reported improvement in socializing (33.33%; f = 5), balance (33.33%; f = 5) and self-esteem (26.67%; f = 4). However, benefits such as improved gait, mobility and quality of life, reduction of depressive symptoms and greater autonomy were also mentioned (Table 2).

Table 1 - Characterization of professionals who participated in the study (n = 25)

Variables	n (%)
Sex	
Female	18 (72.0)
Male	7 (28.0)
Training	
Physiotherapy	12 (48.0)
Psychology	4 (16.0)
Pedagogy	3 (12.0)
Agricultural sciences	1 (4.0)
Law	1 (4.0)
Physical education	1 (4.0)
Phonoaudiology	1 (4.0)
Animal husbandry	1 (4.0)
Psychology and pedagogy	1 (4.0)
Place of practice	
Rio Grande do Sul	5 (20.0)
São Paulo	4 (16.0)
Rio de Janeiro	3 (12.0)
Minas Gerais	3 (12.0)
Paraná	2 (8.0)
Federal District	2 (8.0)
Goiás	2 (8.0)
Bahia	1 (4.0)
Santa Catarina	1 (4.0)
Rio Grande do Norte	1 (4.0)
Mato Grosso	1 (4.0)
Have you done any training, specialization or related course on hippotherapy?	
Yes	24 (96.0)
No	1 (4.0)
Was hipportherapy with elderly practitioners addressed in this course? (n = 24)	
Yes	19 (79.2)
No	5 (20.8)
In your practice with hippotherapy, have you already assisted elderly practitioners?	
Yes	15 (60.0)
No	10 (40.0)

Yes. Because this therapy manages to overcome limits, rebuild self-esteem and promote a better way of aging with the prevention of diseases. In addition to the bodily benefits. (P16)

Table 2 - Demands, benefits and challenges perceived by hippotherapy professionals who have treated the elderly (n = 15)

Variables	Frequency (%)
Demands	
Stroke sequelae	6 (40.00)
Parkinson's disease	2 (13.33)
Anxiety disorder	2 (13.33)
Alzheimer's dementia	1 (6.67)
Diabetes	1 (6.67)
Balance deficit	1 (6.67)
Dementia	1 (6.67)
Amputation	1 (6.67)
Multiple sclerosis	1 (6.67)
Spinal cord injury	1 (6.67)
Benefits	
Improvement in socializing	5 (33.33)
Improvement in balance	5 (33.33)
Improvement in self-esteem	4 (26.67)
Improvement in self-confidence	3 (20.00)
Improved gait	2 (13.33)
Improved mobility	2 (13.33)
Improvement in quality of life	2 (13.33)
Greater autonomy	1 (6.67)
Reduction in depressive symptoms	1 (6.67)
Challenges	-
Practitioners' motor limitations	4 (26.67)
Insecurity of elderly when riding a horse or doing some exercises on it	3 (20.01)
Fear of falling by practitioners	2 (13.33)
Resistance to some proposed activities	1 (6.67)
Physical structure of the place, not adapted for the elderly	1 (6.67)

When asked if they wanted to continue caring for the elderly, most professionals (n = 14; 93.33%) answered yes. The following are two examples of reports made by the participants when complementing their statement:

Yes. It has a good evolution! (P6)

It is noteworthy that one participant (6.67%; P10) stated that he did not want to continue working with elderly practitioners, since the focus of his workplace was children. Among the challenges faced in caring for the elderly through hippotherapy, the professionals mentioned the motor limitation of practitioners (26.67%;

f = 4) and the insecurity of the elderly when riding the horse or performing some exercise on it (20.01%; f = 3) (Table 2).

Benefits and challenges: perception of professionals who do not care for the elderly

As mentioned earlier, 40% (n = 10) of the sample stated that they had not seen elderly at the time of the research. When asked about the reason for not working with the elderly, four (40%) said they work in centers for the care of children and/or adolescents, and one (10%) reported that the lack of medical indications reflects the lack of elderly patients where they work. The other five (50%) participants reported that there was no demand for hippotherapy by these individuals, as can be seen in the following report:

An elderly person who wanted to practice hippotherapy never came up. I believe that the lack of knowledge of this possibility by both health professionals and society ends up creating an image that hippotherapy is for children and that the elderly will not be able to ride a horse. (P7)

Among the ten professionals who did not see elderly, nine (90%) reported interest in working with older people. The reasons listed were, in summary, the fact that the practice is an alternative therapy for advanced-age people, which can contribute to improving quality of life and help in the recovery of physical and psychological illnesses.

Only one participant (P14) stated that he did not want to have elderly patients, as he did not consider horseback riding a safe activity. Nevertheless, he added that he considers working on the ground safe.

Despite not having cared for the elderly, these professionals reported benefits that hippotherapy can promote in older people. The most frequent were improvement in socializing (70%; f = 7), in psychological and physical aspects (60%; f = 6) and in self-esteem (50%; f = 5) (Table 3).

When asked about the challenges they consider existing in the practice of hippotherapy with the elderly, most professionals mentioned the difficulty in commuting (40%; f = 4), acceptance/prejudice (40%; f = 4) and safety (30%; f = 3) (Table 3). Some of the participants' reports that exemplify the perception of the challenges for them are:

Lack of qualified staff, high costs for maintaining animals and adequate equipment, difficulty for families to take the elderly to therapy. (P1).

The main challenge I believe would be to overcome the barrier of prejudice. (P7)

Show that it is a therapy for all ages and not just for people with disabilities. (P18)

Table 3 - Benefits and challenges perceived by hippotherapy professionals who did not care for the elderly (n = 10)

Variables	Frequency (%)
Benefits	
Improvement in socializing	7 (70)
Psychological and physical aspects	6 (60)
Self-esteem	5 (50)
Balance	4 (40)
Memory	3 (30)
Muscle strengthening	2 (20)
Autonomy	1 (10)
Quality of life	1 (10)
Activities of daily living	1 (10)
Challenges	•
Moving difficulty	4 (40)
Acceptance and prejudice	4 (40)
Safety	3 (30)
Maintenance costs for horses	2 (20)
Environment/location	2 (20)
Lack of qualified staff	1 (10)
Mounting	1 (10)

Discussion

Hippotherapy is an interdisciplinary approach that involves health, education and horseback riding professionals, as represented in the diversity of training of the participants in this study.⁸ It should be noted that in addition to the riding professional, some in the health area are part of the minimum team necessary for a hippotherapy center.⁸ This may explain, albeit partially, the fact that approximately 70% of the sample is made up of health professionals, such as physiotherapists, psychologists, speech therapists and physical education teachers.

With regard to deepening in hippotherapy, almost all participants said they had done so. Nevertheless, in about 20% of background training, practice with the elderly was not addressed. Although this was an apparently good result, since almost 80% of the courses contemplated old age, it is worrying, especially nowadays, when there is a marked aging of the population.

In addition to demographic change,²³ training in hippotherapy that does not address the practice with older people can influence the professionals' perception of practitioners at this stage. One of the participants in this study (P14) is an example; he did a training in hippotherapy that did not include old age and who reported not finding riding safe for the elderly but believed "ground work" was acceptable. This shows a lack of knowledge of research on interventions with the elderly, as well as the breadth of possibilities in therapy with horses. Hippotherapy includes several modalities, not only riding. In Equine Assisted Learning (EAL), for example, the process is carried out entirely on the ground, with the participation of the horse.²⁴ Nevertheless, as in other phases of life, safety measures must always be adopted so that any risks are minimized. In addition, professionals should be aware of contraindications to the practice of hippotherapy, regardless of age, such as hip dislocation and subluxation, osteoporosis, epilepsy and excessive fear, among others.8

This lack in the training of hippotherapy professionals can also result in a lower quality of care available to the elderly or a low offer of the practice for this age group. In relation to this aspect, we found that 40% of professionals have never seen practitioners aged 60 years or older. In general, it is possible that the fact that they saw few or no elderly people in hippotherapy is related to, among other factors, the lack of knowledge about the practice with the elderly. This can be promoted by society itself, which, having reduced knowledge, seeks less for this complementary therapy; by health professionals, who, having access to few national studies on the practice with the elderly, 12 and sometimes with low methodological quality, make fewer referrals; and by workplaces, which may focus on people from other age groups. This aspect can be illustrated by the report of one of the participants (P12), who stated that he no longer provides care to older people, since the focus of the center where he works is children.

It is noteworthy, however, that none of the professionals mentioned working in a center that focused on

the elderly. This reality experienced by the participants is also observed in studies in the literature. Of the 20 articles on hippotherapy retrieved by Zamo and Trentini, ²⁵ only three contained elderly participants, and of the 78 articles retrieved by Wood e Fields, ⁵ only six.

Research and practice in hippotherapy, especially in Brazil, therefore, seem to emphasize the first two phases of life, especially childhood. It is possible that the focus on this stage of development is an a priori objective of the hippotherapy center or a consequence of the greater demand for care by this group. The lack of knowledge of this practice with the elderly and the low dissemination of its results can cause a lower demand, fewer referrals to hippotherapy centers and higher prices, as can be seen in the report of one of the professionals:

[...] the greatest demand in the city/state where I am is for ASD children (autistic spectrum disorder) and long-stay institutions (hospices) are not so interested in diversifying the forms of care, due to the financial situation of the elderly, which makes it a difficulty for them, since the practice of hippotherapy is a therapy with a high cost. (P15)

When guestioned about the demands of elderly people they had seen, it is observed that the results obtained in this investigation are in line with those of Matarazo.¹² The author found, through a systematic review of the literature on hippotherapy with the elderly, that patients with CVA sequelae, multiple sclerosis, post-traumatic stress disorder (PTSD), balance deficit, Alzheimer's or other dementia and spinal cord injury have made up samples of investigations in this area. It is noteworthy that, of these, only PTSD was not mentioned as a demand by the participants of this study. Nevertheless, it should be noted that in previous editions of the Diagnostic and Statistical Manual of Mental Disorders (DSM), PTSD was part of the group of anxiety disorders.²⁶ Thus, it is possible that some of the participants in this study referred to PTSD as an anxiety disorder.

As for the benefits perceived by the professionals, both by those who have cared for the elderly and by those who have not yet had this experience, there is an improvement in balance, quality of life, autonomy, self-esteem and socializing. In general, they are in line with those found by Matarazo.¹² In that review, the author found that the most analyzed variables were balance,

gait, PTSD symptoms, quality of life, physical and general well-being, depression and anxiety, with more than 90% of studies showing improvement in these variables after therapy with horses.

According to Wibelinger and Silveira, hippotherapy is an important complementary treatment for people in old age, as the horse's movement stimulates the vestibular system, body awareness, concentration and balance, preventing falls and functional disabilities and providing well-being to the elderly. This method also helps to improve lower limb muscle strength, balance and gait.²⁷

In addition to the benefits, the difficulties perceived by professionals in working with older people were also investigated. In general, they can be grouped into two categories: the elderly and the workplace. Regarding the first, it is subdivided into two, that is, physical difficulties (motor limitation) and psychological difficulties (insecure about riding and fear of falling). To deal with these obstacles, it is understood that quality training in hippotherapy and knowledge in gerontology are essential. Furthermore, the performance of a cohesive interdisciplinary team can contribute to managing physical and psychological challenges. It must be borne in mind that hippotherapy is a practice where care is individualized, so riding and exercises will be proposed according to the individual's demands and possibilities.8 In addition, the team of mediators is trained to maintain the safety of the practitioners. With regard to the second category, that is, challenges involving the workplace, it is emphasized that it is essential that hippotherapy centers have adequate physical structure to assist elderly practitioners, if this is one of their target audiences.

Unlike professionals who have already treated the elderly, those who have never worked with practitioners of that age listed challenges that go beyond the two mentioned categories, especially with regard to the difficulty of transporting the elderly to the hippotherapy centers and the existing prejudice about the practice with the elderly. With regard to the first aspect, it is known that, many times, the elderly depend on third parties to transport them to other places. Thus, the importance of caregivers' commitment to follow-up to the therapy site is reinforced; otherwise, treatment may be abandoned. This is a reality experienced not only with practitioners in old age. Nunes and Caberlon, ¹⁴ for example, warn about the importance of professionals paying attention

to caregivers of children with cerebral palsy, as they are usually responsible for the continuity of treatment.

With regard to prejudice, it is possible that it stems from a stigmatized understanding of animal-assisted therapies and those related to age as well, that is, age bias. One of the participants (P18) stated about the need for hippotherapy to be understood as a method that can be used for different ages not just for people with disabilities. This report is in line with the results of Rocha et al.¹⁵ Of the 248 students investigated, just over 67% believed that the main indication for this therapy is autistic people, people with disabilities and those with Down syndrome. Only three (1.21%) responded that hippotherapy could be applied to all people, and 16.13% did not know how to answer, while 15.32% did not respond.¹⁵

One of the ways to minimize prejudice about hippotherapy, especially with the elderly, is through the mass dissemination of research results on this practice, raising awareness among professionals, society in general and government officials. Currently, it is a favorable time for this, since hippotherapy was regularly used in 2019 as a therapeutic practice.¹⁰

Despite the contributions of this study, perhaps the only national study that assesses the perception of professionals about hippotherapy with the elderly, it has limitations. It is mentioned, for example, the small size of the sample, the fact that it was obtained by convenience and the more active participation of physiotherapists, mostly from two regions of Brazil.

Conclusion

In general, the participants of this study consider hippotherapy a practice that can bring biopsychosocial benefits to elderly practitioners, such as those who suffer from CVA sequelae, dementia and anxiety disorders, for example. However, this does not prevent challenges and difficulties from existing. Examples are aspects involving the elderly, the work team, the hippotherapy centers and the supply and demand for the service with this group. It should also be noted that most of the sample wants to work with the elderly, but not all courses in hippotherapy that they took addressed this practice in old age. This can contribute to increase the difficulties experienced and, eventually, reduce the desire and dissemination of work with the elderly.

It is hoped that this study will stimulate the development of other investigations involving the theme of hippotherapy in the elderly and the dissemination of this theme to society in general, health professionals, governments and managers. Only with scientific knowledge about this practice can prejudices be undone, referrals made and decisions made about its application

Authors' contributions

JBM was responsible for data collection, analysis and interpretation and writing the manuscript, and ERF, for the design of the project, interpretation of the data and critical review of the content. Both authors approved the final version of the article.

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