ABSTRACT

NIEFORTH, LEANNE OLIVIA. Nonverbal Turning Points as Breakthrough Moments in Equine Assisted Mental Health Sessions (Under the direction of Dr. Elizabeth Craig).

Experiencing trauma can lead to a variety of chronic and acute symptoms including post-traumatic stress disorder (PTSD), anxiety, depression, substance abuse, poor academic achievement and poor social skills. Given the variety of causes for trauma and the individualized subjective interpretation the trauma entails, generalized treatment is difficult and incorporating individualized treatment options is important for efficacy. Equine-assisted mental health (EAMH) is a team approach incorporating horses, clients, mental health professionals, and equine specialists. EAMH has been successful in treating those who have experienced trauma including, but not limited to, veterans and individuals with PTSD, at-risk youth, court involved youth, victims of sexual violence, and children who have been neglected. However, there are many different modalities, or practice styles, of EAMH across the United States and internationally. The viewpoints of these organizations with respect to the role of the horse and human differ by practice style, making it difficult to identify how and when therapeutic breakthrough moments occur consistently within the industry. The current study includes 19 semi-structured interviews with professionals (equine specialists or mental health professionals) who currently practice at least one of four different modalities of EAMH (EAGALA, TF-EAP, OK Corral or Eponaquest). Qualitative analysis suggests that breakthrough moments in therapy for those who have experienced trauma are facilitated by nonverbal turning points found in communication with horses. **Congruence, physical closeness, horse aggression symbolizes human abuse and unlocking physical and emotional movement** emerged as significant themes within the data. Implications for human-horse communication and trauma-informed care utilizing EAMH are discussed.
Nonverbal Turning Points as Breakthrough Moments in Equine Assisted Mental Health Sessions

by

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DEDICATION

To all beings 2-legged and 4-legged who experience the “magic” that occurs during interactions of humans and animals. May this work serve as a stepping stone to further understand the power and potential of these interactions for all beings.
BIOGRAPHY

Leanne Nieforth is a candidate for an MS in Communication at North Carolina State University. She is fascinated by the power of human-non-human animal interaction and is passionate about understanding what makes it so powerful. Most of her work focuses on the equine assisted mental health with a focus on the welfare and wellbeing of both the humans and horses involved. She strives to connect both research and practice in order to determine the most effective and ethical ways of facilitating the human horse connection.
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Thank you to all, both human and animal, who had a hand (or hoof) in supporting this project. Special thanks to my committee Dr. Elizabeth Craig, Dr. Jessica Jameson and Dr. Stephen Wiley. Thank you for believing in me, challenging me and supporting me over the last two years. No words can describe how this experience has shaped me as both a scholar and a person. I am forever grateful.
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CHAPTER 1

General Introduction

Equine-assisted mental health (EAMH) enables clients to interact with horses to develop interpersonal communication skills and to heal from previous transgressions in a non-threatening environment (Buck, Bean & Marco, 2017). This treatment facilitates connection between both horses and people by promoting authenticity and trust in the moment (Buck, Bean & Marco 2017). The current literature around EAMH focuses on the outcome of the intervention rather than the process by which it occurs. Understanding these processes might provide insight on the effectiveness of the EAMH overall and how it can be maximized to its highest potential as a therapy option for clients who have experienced trauma. These findings propose to contribute to the knowledge developed on best practices and to provide support for EAMH as an evidenced based model. This project seeks to examine the processes that occur in the session through the lens of communication thus extending communication theory beyond the traditional human-to-human interaction. This project aims to provide insight into the current literature surrounding EAMH and a proposed way of exploring the process further.

Equine Assisted Mental Health

Since the domestication of the horse more than 6000 years ago, humans and horses have worked together in many different contexts and have created a variety of roles for the relationship they have together. The ancient Greeks were one of the first to recognize the healing effects of horses and were known to use horseback riding to elevate the mood of individuals with incurable disease (Bizub, Joy & Davidson, 2003). While horses have historically helped with transportation, farming and warfare (Lobell & Powell, 2015), within the last 30 years they have been a part of more recreational activities and equine assisted therapies (Bizub, Joy & Davidson,
2003). Recently, there has been an increase of human-horse interaction research examining both traditional riding for recreation, therapeutic riding for those with disabilities, and human-horse interaction in healthcare settings. The field of equine-assisted mental health (EAMH) (which includes equine-assisted learning and equine-assisted therapy) is the fastest growing facet of the animal-assisted therapy industry today (Professional Association of Therapeutic Horsemanship, 2017).

In EAMH, horses are included as partners for the mental health professional and client. Research suggests that horses are a valuable choice for therapy partners because they provide immediate responses to the human’s intent and body language (Frewin & Gardiner, 2005) which is particularly effective for clients who have experienced interpersonal trauma and have not had success with more traditional types of talk therapy (Buck, Bean & Marco, 2017). Equine-assisted mental health has also been demonstrated to have better engagement and retention rates than traditional talk therapy (Lentini & Knox, 2015) because of the ability to connect with both a horse and another person.

Equine-assisted interventions have been shown to be successful for treating trauma within cohorts of individuals with PTSD (McCullough, 2011), foster care youth (Burgon, 2011), court involved youth (Hemingway, Meek & Hill, 2012), victims of sexual violence (Kemp, Signal, Botros, Taylor & Prentice, 2014), veterans (Lanning & Krenek, 2013), and young children (Lentini & Knox, 2015). There are many different modalities of EAMH across the United States and internationally. The viewpoints of these organizations differ on the role of the horse and human, making it difficult to identify how and when the therapeutic moments occur. There is not a consensus for best practices nor is there any agreement that EAMH is an evidence-based treatment model (Letini & Knox, 2015). This lack of agreement and understanding can
lead to conflict in creating clear standards and a central governing body for the industry. In the absence of these standards, the efficacy of EAMH remains questionable and access to the intervention is difficult (Morrison, 2007). Examining the communicative processes of EAMH across modalities will help identify the efficacy of the session (in terms of message content and outcome) without having to focus on the model itself, thus creating a foundation for establishing common standards.

Supportive Communication

Previous research on supportive communication was helpful as an initial guiding framework in conceptualizing this project. Supportive communication is defined as “verbal and nonverbal behaviors that are enacted with the primary intention of improving the psychological state of another person” (Jones & Bodie, 2014). Burleson and MacGeorge (2002) define it as, “verbal and nonverbal behavior produced with the intention of providing assistance to others perceived as needing that aid” (p.374). This type of communication helps to establish the link between social support and the wellbeing of an individual (Burleson, 2009). It is highly complex and is defined by the context within which it occurs, encompassing the message itself, the source and the recipient (Burleson, 2009). Message evaluations and message outcomes have been a focus of researchers as they strive to understand message features that differentiate effective supportive exchanges from unsupportive exchanges. The five different types of supportive communication include emotional support, esteem support, informational support, tangible aid and network support (Guerrero, Andersen & Afifi, 2017).

The dual process theory of supportive communication “aims to explain why messages and other elements of supportive interactions have the effects they do with particular others on specific occasions” (Burleson, 2009, p. 27). The ways in which people process messages and
their environments play a direct role in the message outcome of the communication (Bodie & Burleson, 2008). This dual process includes, a) a recipient’s motivation to process the message, and b) a person’s ability and willingness to process the message (Guerrero, Anderson & Afifi, 2017). Multiple studies have examined the outcomes of these processes as they pertain to physical health (Ruben, Blanch-Hartigan & Hall, 2017), mental health (MacGeorge, Samter & Gillihan, 2005), family interaction (High & Scharp, 2015) and personal relationship transgressions (Pederson & McLaren, 2017). Understanding the factors that affect the outcomes of a supportive communication message is important in determining contextually relevant support interventions. Multiple studies have examined social support in a psychotherapeutic setting, but not much is known about the communicative processes and messages of that interaction (Barker & Pistrang, 2002). Although supportive communication is helpful in framing the larger context of this study, the project required a narrower focus.

Communicated Narrative Sense Making

In the initial phases of conceptualizing this project, the dual process theory of supportive communication seemed to be an appropriate framework to examine support exchanges between the equine specialist, the mental health professional, the client and the horse. As I continued to develop my project, I realized that supportive communication was not the most appropriate conceptual lens. I then moved into a framework of communicated narrative sense making (Kellas & Kranstuber Horstman, 2015) with the goal of using the framework to identify how narratives created in sessions shaped outcomes.

The ability to consider interpersonal issues through a perspective other than one’s own plays an important role in relationship health. Communicated perspective-taking (CPT) is “the communication manifestation of putting oneself in another’s shoes and includes behaviors such
as agreement, attentiveness, coordination, positive tone, providing space for the other person to talk, and making relevant contributions to conversations” (Kellas & Kranstuber Horstman, 2015, p. 81). Communicated perspective taking has been linked to family cohesion, adaptability, functioning and identity cohesiveness (Kellas & Kranstuber Horstman, 2015). Effective perspective taking has been shown to help individuals reframe challenging situations (Horstman et al., 2016) and help them to see beyond themselves and take a new perspective. This benefits individual health due to the increased ability for sense-making within these conversations (Kellas, Trees, Schrodt, LeClair-Underberg & Willer, 2010). Perspective taking also cultivates respect for others and empathy which has positive effects on relational well-being (Lobchuck, 2006).

Perspective taking has a positive relationship with supportive communication (Burleson & MacGeorge, 2002) because it demonstrates care and understanding and when acknowledged, facilitates healthy dyadic coping mechanisms (Kellas, Willer & Trees, 2013; Bodenmann, 2005). In people who have experienced trauma, coping and emotional regulation skills have improved after working with horses (Johnson et al., 2018), but the mechanism by which they have improved is not known as most of the research on equine-assisted mental health is focused on outcomes not process. Kellas, Carr, Hortsman and Dilillo (2017) suggests that, “Interventions that encourage CPT will benefit families-and possibly other dyads- who face difficult issues” (p. 199). As the project continued, it became apparent that although narratives were created during sessions, something more important was occurring. Specifically, nonverbal turning points were present that were triggering behavioral changes for the client.

Therefore, this study examines nonverbal cues as meaningful communicative processes between clients and horses across and within the different modalities of EAMH. Understanding
these processes will enable the researcher to determine if there are commonalities across the industry that are independent of the modality being practiced and argue that EAMH is fundamentally a communication phenomenon.
CHAPTER 2

Introduction

Traumatic events and their aftermath are often unpredictable and not clearly defined, resulting in a variety of chronic and acute symptoms post trauma (Bisson, Cosgrove, Lewis & Robert, 2015). Repeated exposure to trauma leads to a greater likelihood of physical and mental health issues over a person’s lifespan (Buck, Bean, Marco, 2017), which could result in social and relational problems. Left untreated, these symptoms can cause disorders including, but not limited to, post-traumatic stress disorder (PTSD), anxiety, learning disabilities, substance abuse and depression (Bisson, Cosgrove, Lewis & Robert, 2015). Unresolved trauma symptoms can lead to poor academic achievement, financial stress and poor performance at work (Anda et al., 2006). Given that trauma is a subjective experience and varies based upon the traumatic event and resulting symptoms, treatment is difficult and the development of alternative treatments is vital (Boals, 2018; Cukor, Spitalnick, Difede, Rizzo & Rothbaum, 2009). One alternative treatment option is equine-assisted mental health (EAMH).

In recent years, there has been an increase in the use of equine-assisted activities (EAA) for clients who have experienced trauma. Hemingway, Meek and Hill (2015) found that working with horses in equine assisted mental health can help people develop interpersonal skills, temper control, understanding of others, and social competency skills. Johnson et al. (2018) found that coping and emotional regulation skills improved after working with horses. Equine assisted interventions have been shown to be successful for treating trauma in cohorts of individuals with PTSD (McCullough, 2011), foster care youth (Burgon, 2011), court involved youth (Hemingway, Meek & Hill, 2012), victims of sexual violence (Kemp, Signal, Botros, Taylor & Prentice, 2014), veterans (Lanning & Krenek, 2013), and young children (Lentini & Knox,
Equine assisted interventions help clients to overcome fears, accept new challenges, be present in the moment, focus, be hopeful, build confidence and increase self-esteem and assertiveness (Haylock & Cantril, 2006; Bizub, Joy & Davidson, 2003; Wilson, Buultjens, Monfres & Karimi, 2017).

More importantly equine-assisted mental health provides the opportunity for people who have experienced trauma to work alongside horses where nonverbal communication is primary. Therapists and equine specialists in EAMH focus on and facilitate the interpretation of nonverbal communication between the horse and human (Ford, 2013). Research has shown that people who have experienced trauma have deficits in nonverbal communication skills (Bowen & Nowicki, 2007). These deficits can negatively impact individual communication competencies and can affect relational and social outcomes (Philippot & Feldman, 1990). While any observer might understand that horses communicate through nonverbal communication, even researchers and practitioners find these moments difficult to describe. They agree that something powerful happens between horses and humans during EAMH. Hallberg (2017, p. 198), a prominent researcher on EAMH, says:

...I realized there was power in the horse-human relationship that far exceeded my knowledge and understanding. ...My life’s work from that time on has focused on helping to support and protect this industry- the horses, the patients and the magic that happens when humans and animals connect.

Little has been done to conceptually understand these breakthroughs as communicative. The current study seeks to describe these “magic” moments as communicative nonverbal processes that occur between humans and horses during EAMH sessions.
Literature Review

Equine-Assisted Mental Health

Since the domestication of the horse more than 6000 years ago, humans and horses have worked together in many different roles and/or relationships. The ancient Greeks were one of the first to recognize the healing effects of horses and were known to use horseback riding to elevate the mood of individuals with incurable disease (Bizub, Joy & Davidson, 2003). While horses have historically helped with transportation, farming and warfare (Lobell & Powell, 2015), within the last 30 years equine assisted therapies have become more common (Bizub, Joy & Davidson, 2003). Recently, there has been an increase of human-horse interaction research examining both traditional riding for recreation, therapeutic riding for those with disabilities, and human-horse interaction in psychotherapy settings (Hallberg, 2017).

The field of equine-assisted psychotherapy (EAP) (one component of equine-assisted mental health) is the fastest growing facet of the animal assisted therapy industry today (Professional Association of Therapeutic Horsemanship, 2017). In equine-assisted interventions, horses are typically considered as team members with the practitioners and clients. There are many different organizations that have created modalities of equine assisted activities across the United States and internationally, each one having their own perspective on how these activities should be delivered. The four models included within this study are Equine Assisted Growth and Learning Association (EAGALA), OK Corral, Trauma-focused Equine Assisted Psychotherapy (TF-EAP) and Eponaquest. The EAGALA model is a team approach (i.e., mental health professional, equine specialist, horses and clients) where horses are utilized because they are large, powerful, prey animals that live in herds and have distinct personalities for solution focused treatment (EAGALA, 2018). OK Corral is another model of EAP centered around the
concept of using “natural horse and herd behavior as a model for human mental and emotional health” (OK Corral, 2019). Principles of pressure/pain, attention/at-ease, recircle process, push/pull and the nonverbal zones of the horse are used in eight exercises to assist clients in developing healthy relationships and communication skills. Natural Lifemanship’s Trauma-Focused Equine Assisted Psychotherapy (TF-EAP) is another model which combines the neurobiology of trauma and identification of relationship patterns, practice and reformation of new behaviors and formation of new relationships to accomplish therapeutic outcomes (Natural Lifemanship, 2019). Finally, Eponaquest “employs horses in teaching people leadership, assertiveness, personal empowerment, relationship, intuition and emotional fitness skills” (Eponaquest, 2019). This program uses tools such as an emotional message chart, the false self/authentic self paradigm, the body scan, and a boundary handout to assist in treatment (Eponaquest, 2019). Although some models are traditional psychotherapy with a licensed professional and others are more focused on well-being and general life skills, there are some central tenets across them all. These tenets include a focus on natural horse behaviors and the positive impact that observing and interacting with horses has on the client’s mental health and emotional well-being.

This type of intervention is particularly effective for individuals who have experienced trauma and who have not had success with talk therapy (Buck, Bean & Marco, 2017). Equine-assisted therapy has been demonstrated to have better engagement and retention than talk therapy alone (Lentini & Knox, 2015) because of the ability for the individual to receive and interpret communicative feedback from a horse and other people. Working with the horses removes the focus of the session from the client to the interaction between the horse and client, creating a
more comfortable environment (Wilson et al., 2017) to explore healthy and unhealthy nonverbal communication patterns.

**Horse and Human Communication**

While the literature on equine-assisted interventions is quite expansive (Hallberg, 2017), little is known about the communicative processes. The effectiveness of equine-assisted mental health could be due to the fact that the interaction between human and horse is communicative in nature. For example, horses are able to communicate with humans through their body language and facial expressions (Brandt, 2004). Malavasi and Huber (2016) suggested that horses and humans have referential communication and that horses can switch from visual to tactile signals if necessary, for clarity for their human partner. These communicative exchanges provide humans with an opportunity to create a shared language with a horse and challenge ideas of relating with others.

Nonverbal communication, gestures, kinesics, vocalics, facial expressions, body movements, gaze and physical appearance make up much of our daily interactions. It is often “well practiced and operates in a semi-automatic, unmonitored fashion” (Burgoon, Guerrero, & Manusov, 2011, p. 240). More importantly, these well ingrained patterns can be helpful or hurtful dependent upon the context in which they are used. Research suggests a person’s ability to understand nonverbal cues influences their social competence (Hodgins & Belch, 2000; Philippot & Feldman, 1990) therefore affecting their mental health (Nowicki & Duke, 1992; Nowicki & Carton, 1997). Depressed individuals (Prkachin, Craig, Papageorgis & Reith, 1977) and individuals with attachment insecurity exhibit deficits in nonverbal communicative behavior (Noller, 2005). In addition, Bowen and Nowicki (2007) found that children who were victims of maltreatment had deficits in decoding nonverbal communication. Therefore, awareness of one’s
own patterns of nonverbal cues are critical in managing his/her interpersonal relationships (Burgoon, Guerrero, & Manusov, 2011). Working alongside the horses provides a unique opportunity for clients to work on this awareness and the nonverbal communication deficits that stem from unhealthy relating.

Horses are a valuable choice for therapy team members because they provide immediate responses to the human’s intent and nonverbal body language (Earles, Vernon & Yetz, 2015; Frewin & Gardiner, 2005). These nonverbal cues encourage the client to challenge past relational schemas, interrupt unhealthy patterns and provide a space for new schemas to be created through observing and interpreting horse behavior. Buck, Bean and Marco (2017) explain that horses are able “to provide honest feedback free of ego, bias, or agenda, allowing individuals to be more receptive to the exploration and acceptance of the sensation” (p. 395). In a session, a horse may not move at all, move away, move towards, bite, kick or throw their head to communicate their needs. From a communication perspective, this honest feedback might be considered congruent communication, or “the accurate matching of experience and awareness” (Rogers, 1961, p. 282). This is important for trauma survivors as they often experience incongruent communication from humans (e.g., abuser says I love you, then physically harms them) and then express incongruent communication themselves (e.g., I’m fine, when they have been physically harmed). Nonverbal congruent communication from the horses brings awareness to these congruent and incongruent communication patterns from the client through the process of identifying and responding to nonverbal turning points.

Nonverbal Turning Points

Turning points, or perceived significant moments in relationships that trigger change within relationships, can have varying impacts on relational health and well-being (Baxter &
Bullis, 1986; Yoshimura, 2017). Turning points can predict future relational direction and explain meanings created within relationships thus giving significant insight into relational patterns (Yoshimura, 2017). Research on turning points originally focused on romantic relationships (Baxter & Bullis, 1986, Bullis, Clark & Sline, 1993) but recently has taken a general look at interpersonal relationships with an increasing number of studies on friendships (Becker, Johnson, Craig, Gilchrist, Haigh & Lane, 2009; Johnson, Wittenberg, Villagran, Mazur & Villagran, 2003), teacher/student relationships, and organizational teams (Wang, 2014; Bullis & Bach, 1989). Turning points will often influence levels of intimacy, positive regard (Bullis et al., 1993), the degree of closeness (Guerrero, Anderson & Afifi, 2014).

Nonverbal turning points can act as significant “triggers for change” (Docan-Morgan, Manusov & Harvey, 2013, p. 11). Eye behavior, facial expressions, touch and vocal cues have been shown to lead to relational, perceptual, affective and behavioral changes for individuals (Docan-Morgan, Manusov & Harvey, 2013). These changes can be positive or negative and provide significant insight into the meanings created within the relationship (Yoshimura, 2017). Applying this framework to horse and human communication could provide meaningful identification of nonverbal communication moments that prompt breakthroughs in the client’s awareness. Additionally, this awareness could prompt self and relational reflection, the opportunity to support healthy communication patterns and disrupt unhealthy relating.

In summary, equine-assisted mental health is a vital alternative intervention for treating trauma. The research suggests that this intervention offers a unique opportunity to provide care for individuals who have experienced trauma but have not had success with traditional talk therapy. Although much is known about the benefits and outcomes of the interactions within equine assisted mental health sessions, describing the importance of communication from horses
as breakthrough moments needs further investigation. This study seeks to describe the presence of nonverbal communication during breakthrough moments in equine assisted mental health by answering the following research question.

**RQ:** What nonverbal turning points found within communication between clients and horses facilitate breakthrough moments in equine-assisted mental health treatment?

**Methods**

**Participants**

Participants in this study include 19 practitioners (nine mental health professionals and 10 equine specialists) who are currently providing equine-assisted mental health. Interviewees typically practiced EAMH at a farm that primarily offered equine-assisted mental interventions rather than traditional horse services. A few of the facilities also offered traditional non-mental health equine services (i.e., horse boarding, therapeutic riding, or traditional horseback riding lessons). Typical sessions described by practitioners of equine-assisted mental health included at least one client, at least one practitioner and at least one horse. Sessions took place in a variety of locations including large pastures, small paddocks, stalls, round pens, standard dressage size arenas and very large arenas both covered and uncovered, indoor and outdoor. Practitioners in this study described clients as having experienced some type of T(t)rauma and resulting effects of post-traumatic stress (PTS or PTSD). Some of the mental health professionals were licensed clinical psychologists or therapists \((n = 3)\) others were certified life coaches \((n = 2)\) and some were educators/trained counselors \((n = 4)\). All of the participants were female with an average age of 51.57 years old \((SD = 9.85\), range was 26-71 years old\). A majority of the participants reported being non-Hispanic white or euro-American \((n = 15)\) while the others reported to be mixed \((n=1)\), German \((n=1)\), South African Caucasian \((n=1)\) and white with Hispanic heritage.
Participants represented seven US states (Alaska, Virginia, Utah, North Carolina, Wisconsin, Massachusetts, and Georgia) and seven different countries (United States, Italy, Canada, South Africa, Germany, Sweden, and New Zealand).

The average time participants spent working in the equine-assisted mental health industry was 9.9 years ($SD = 6.02$, range was 6 months-21 years) and 73.68% of participants reported practicing multiple modalities of equine assisted activities within their practice. Eighty five percent of participants had a bachelor’s degree or higher (one participant had a PhD, two had Professional degrees and six had master’s degrees). Five participants reported using a single modality in their work, whereas 14 participants reported mixing multiple modalities together. Twenty-six percent of participants were trained in TF-EAP, 73% had training in EAGALA, 26% had PATH international training, 10.5% were trained in OK Corral, 36% had training in Eponaquest and 42% had additional training in other modalities (Equine Relationship Therapy, Equine Alchemy, Equine Masters Multidisciplinary Approach, Gestalt Equine Psychotherapy and Psychodynamic Equine Assisted Trauma therapy). Every participant had completed a wide variety and large number of trainings but did not necessarily meet criteria for full certification from the governing body of each modality. Five participants were not certified in any modality, seven participants were certified in one modality, six participants were certified in two modalities and one participant was certified in three modalities.

Procedures

IRB approval was secured through the researcher’s university. Participants were recruited for this study through gatekeepers at major modalities of equine assisted interventions practiced in the United States as well as through a snowball sampling technique within the researcher’s network. The researcher emailed the administrative teams of the major modalities (as found on
their websites and/or social media accounts) and explained the research project asking if they would be interested in participating by connecting her to farms that are practicing their model. Semi-structured, in-depth interviews were conducted with each participant either over the phone or via Skype at a time convenient for the participant. Before the interview, each participant was given an informed consent form and was asked to determine whether they would like to participate. Each interview was audio recorded with permission from the participant. Interview questions pertained to how the practitioners deliver equine assisted interventions (specifically related to mental health and well-being) to their clients and how they (and their partners, both horse and human) communicate to their clients during the sessions (see Appendix A). Questions encouraged the participants to share stories regarding their experiences in sessions with clients and horses. Each interview was transcribed within 48 hours of the interview to determine if any themes were emerging or if any questions needed to be clarified or added to the interview protocol prior to the next participant. Preliminary data analysis began during transcriptions and continued until theoretical saturation was met (Glaser & Strauss, 1967). Before the interviews, a short demographics questionnaire was administered to obtain the role, training, certification, age, race, and number of years practicing equine assisted activities. The data collected through this survey was analyzed after all the interviews had been completed.

Data Analysis

Once transcribed, the researcher employed a grounded theory approach where she reviewed the interview transcripts and used the constant comparative method in data analysis. The researcher followed the method presented by Corbin and Strauss (2008) who suggest qualitative data analysis “involves interacting with data (analysis) using techniques such as asking questions about the data, making comparisons between data, and so on, and in doing so,
deriving concepts to stand for those data, then developing those concepts in terms of their properties and dimensions” (p.66). This began with the process of open coding. During this time, the researcher read through the interview transcripts many times to determine the categories and patterns that emerged from the data. Preliminary analysis lead to defining exemplars of data (Lindlof & Taylor, 2017) that described breakthrough moments in the therapy sessions. These excerpts were pulled into a separate document and again analyzed to see what categories emerged from the data. At this point, a second coder was invited and the two coders engaged in discussion in order to further define and develop the categories (Lindlof & Taylor, 2017). After much discussion, the coders resolved any disagreements regarding the placement of data into categories. The researcher went back to the transcripts and data was coded into the agreed upon categories. Here, the researcher engaged in integration and dimensionalization through axial coding to refine the categories (Lindlof & Taylor, 2017). Once “theoretical saturation” (Glaser & Strauss, 1967) was reached, member checks were completed with members of the EAMH community that were not a part of the original interview group. Theoretical saturation occurred when no more categories emerged from the data. These equine specialists and mental health professionals agreed that the categories captured their experiences as practitioners. After member checking, categories were finalized and presented in the results section. All names presented are pseudonyms.

In addition, the researcher has ethnographic data from her own experience (7 years) as an equine specialist in EAMH. She is trained in three different modalities (OK Corral, PATH International, and TF-EAP). She has experience working with a variety of client types, including those with PTSD. In previous projects related to EAMH, the researcher has also incorporated participant observation. These experiences inform the perspective of this project.
Results

When clients engage or disengage with their emotions, practitioners describe horses responding through their nonverbal communication noting, “everything about them [the horses] is communication”; “they communicate all the time with their entire being.” Equine assisted mental health sessions are communicatively significant nonverbal communications, in the form of nonverbal turning points. These nonverbal turning points are identified by categories of physical closeness, congruence (congruent communication and incongruent communication), unlocking the physical and emotional movement, and horse aggression symbolizing human abuse.

Physical Closeness

Physical closeness was referenced as the horse both physically touching the client as well as physically creating a certain environment conducive to the client’s needs. In some cases, physical closeness was initiated by the horse and in others it was initiated by the client or the practitioner. Lynn explained a session where she was working with a young woman who was having severe relationship difficulties and asked her to complete some obstacles that were set up in the arena with her horse. After trying multiple times, it became clear that emotionally the young woman was in such a place that she was not able to complete any of the obstacles on her own. The horse literally had to carry her through. Lynn explains:

‘I can’t do this, it’s too overwhelming, these obstacles are too big.’ … I (Lynn) said, ‘you can stop doing this by yourself. You are allowed to have help. So, you tell me where to go and Maserati [horse] will carry you.’ Maserati carried her through the obstacles and we processed what it was like to have help.
Prior to this experience, the client had trouble asking for help. After experiencing the feelings associated with the supportive physical closeness from Maserati, she began seeking help through a 12-step program, which she had previously refused to do.

Another practitioner, Liz, explained a session where the horses physically held a space for her client who had experienced sexual abuse and was anxious around horses. Liz shares:

She went out there [into the field] and just stood between two horses … you could sense that the energy shifted and changed and she became grounded and quiet… she said, ‘that was the first time in my life I’ve ever felt physically safe.’

The horses created a supportive physical environment where the client was able to feel the sensation of being truly safe for the first time. Standing in between two very large creatures (i.e., some horses are close to 1200 pounds) created a calm environment for the client to be present within the moment.

Alicia, an equine specialist, shares a turning point where a client’s previous trauma and struggles with her daughter were triggered when she was grooming and physically touching the horse, “A woman was grooming and she was brushing the horse’s tail and literally fell apart… Her 16-year-old daughter had tried to commit suicide and the combing of the horse’s tail reminded her of her daughter’s hair.” In this experience, the horse emotionally supported the client through allowing grooming and physical contact to occur while the therapist processed the trauma of her daughter’s suicide attempt with her.

**Congruence: Incongruent and Congruent Communication**

With the horse’s sensitivity to human intentions, practitioners pay special attention to how the horse’s behavior reflects or does not reflect something important about the client. One
way that practitioners identify client breakthroughs is when horses move and respond in ways that match the client’s emotions (i.e., congruence). Catherine, an equine specialist, explains:

If the client is anxious and the horse is dancing around and also appears anxious… I can help the client become aware of their feelings and their anxiety and help them to feel their feet on the ground and to be more present in their surroundings… then the client witnesses the horse relax and does the same thing… drops its head, licks and chews to release all that anxiety and tension. It is immediate feedback for the client to see how their emotions and attitudes actually have an effect.

Another practitioner, Alex, explains a situation where a young girl fell apart emotionally during a grooming session and the horse became really upset, congruent to her behavior. She said:

He was just feeding off her emotions, so we [the equine specialist and therapist] let him [horse] go and wander around … she [client] just kind of fell apart and the therapist stepped in to guide her through that… the horse on his own came back and joined the session … he was doing everything he could to get away from the client… then as things were calming down with the client, he did come back and join us… went right up and was nuzzling her and accepting any love she had for him.

In this example, the congruence occurred as the client built up and later diffused her anxiety. The horse visually demonstrated the felt emotion by exhibiting signs of distress, physically leaving the situation, and then returning when the anxiety was diffused and the client was calm and present.

Other practitioners also described a similar situation. In one instance, a client was processing anger she felt regarding her depression and the horses seemed to visually match and illustrate that anger. One equine specialist said:
The three horses we had in [the arena], they all usually get along fine...as soon as she [client] brought up that anger, the two big ones pinned back their ears and ... they started running in circles and chasing each other... it was the perfect ‘well do you see anything out there that looks like anger?’... once she talked about that they calmed right down and were fine.

Instead of the therapist simply telling the client she needed to work on her anger issues, the client was shown how that anger affected others when a group of horses start fighting in the arena. Understanding the behavior of the horses helped the client to understand her own emotions through maintaining congruent communication and visually demonstrating how her anger affected them.

Horses use similar behaviors to reflect incongruence in the client. For example, horses respond in ways that display a mismatch of the client’s behavior and current emotional state by a) displaying behaviors that are atypical of the horse (e.g., horse that is typically calm, but is running or bucking) or b) displaying the opposite of what the client visibly displays (e.g., the client is calm, but the horse is running or bucking), Kim, an equine specialist explains:

If they [client] are presenting on the outside as calm and everything is fine... the horses definitely communicate to me that everything is not fine. They will not be close to somebody that is upset on the inside. So, there is a lot of moving away, a lot of prancing... like they can sense that there is something wrong even though the person is telling us, ‘I'm fine, I’m fine, I’m fine.’

One practitioner described that her clients arrived at the session eerily quiet and calm. Michelle explains, “I brought in two horses that are normally super calm...they just started running non-stop... come to find out, the kids just had a really scary interaction with their father and they
were super fragile.” In this case, the horses’ atypical behavior communicated a need for immediate therapeutic intervention. Although the kids appeared to be calm and quiet on the outside, their emotions told a different story.

These examples demonstrate important nonverbal turning points that can influence a client’s awareness and a practitioner’s assessment of the needs of the client. The horses’ responses brought an incongruent emotion and behavior from the client to life. Horses do respond to the residual emotions that clients have after a scary interaction with a parent. They also respond by not going near someone who is upset.

**Unlocking Physical and Emotional Movement**

Within sessions, clients and horses get stuck, emotionally and physically. This does not look like effective therapy to a common observer, but for clients this lack of movement is meaningful communication. Horses appear unwilling to move in order to communicate a need to their human partners. Alexa, an equine specialist, explains a session where a client was working on her ability to commit to completing tasks and was asked to move the horse a few steps forward. Alexa states, “She could not get the horse to move forward, so she got behind the horse and pushed… from the tail.” In this situation, the physical lack of movement, as a nonverbal turning point, brought awareness to a pattern that facilitated the client’s behavioral and perceptual change.

Julia, a mental health professional, explains another example where lack of movement sparks reflection of behavior and perceptions:

I find that for women who are stuck either with some specific place in their recovery or stuck trying to get other people into recovery-the horses will literally get stuck-
refuse to move… when they [clients] speak their truth… the horse always starts to walk again.

When the client engages in the therapeutic process, the horse engages and moves forward, when they disengage, the horse stops and appears to be stuck. The inability to move these very large animals prompts the client and practitioner to consider alternatives to the situation at hand, whether that be the situation with the horse or the situation in their everyday life.

Samantha, a mental health professional, explains a situation where a young boy was empowered through an experience where his horse would not move.

One little boy decided he couldn’t do it at all… he was like ‘there’s nothing I can do to make this horse move’… he just sat for 30 minutes… when he finally got up and did what the equine specialist had encouraged him to do everything worked… he learned that if he tries to do it the right way he can see a positive result.

Hannah, an equine specialist, explains a group therapy session where a young girl was attempting to ask her horse to follow her. The young girl waited 10 minutes for the horse to begin following. Hannah explains, “We [the practitioners and other group members] were all like ‘whoa… you are really patient’… you should have seen her face. It was something she did not know about herself.” The lack of movement from the horse created an experience where the client could uncover a trait that she did not know she had allowing an opportunity for significant personal growth.

Being stuck can also spark a reflection of ingrained patterns in a client’s life. Rachel, an equine specialist, shares an experience she had with a client who happened to be a talented horse trainer. The task was for the client to halter the horse and ask the horse to move. She said:
It took her [the client] 45 minutes to walk 16 steps… She was trying everything she could… after 45 minutes she started crying… she said this is not what I would have done as a child… when I was a child, I did things differently.

This client experienced difficulty in haltering and moving this horse, yet it enabled the client to reflect on her own relationship patterns in meaningful ways. Specifically, this lack of movement enabled the client to visually see and practically experience an issue with the way she had been doing things over the years. In the past, she would have moved to aggression with the horse and forced him to move. This experience created an opportunity for her to try new communication methods that changed old patterns of relating.

**Horse Aggression Symbolizes Human Abuse**

Horses performed aggressive acts (e.g., lunging, biting, kicking) towards the client; however, unlike congruence (i.e., the horse reflects the client’s emotional state), the horse’s aggression was representational of an aggressive experience in the client’s life. In all cases, the aggression displayed by the horse reflected domestic violence or abuse the client was experiencing. Nicole, an equine specialist, shared an experience she had with a female client who had undergone abuse throughout her entire life. She described a session, saying:

I drew a stick figure in the sand in the outdoor arena … I put a bucket of sweet feed on the stick person. I said the stick figure represents you and you need to protect yourself and keep him [a draft horse] off of you. Sweet feed is crack for horses, so this big guy was circling around moving closer and closer… eventually he just knocked her down to get to the sweet feed. She got up and she patted him and said, ‘that’s ok, it’s alright.’ The therapist said, ‘why is that ok?’ She responded, ‘Well, I am not unconscious and I am not bleeding.’
The horse’s aggression in this situation simulated the abuse that this woman had experienced throughout her life and her typical response to this abuse. Fortunately, this turning point enabled the woman to recognize the aggression as abuse and transfer this new awareness to relationships in her own life. Claire explains a similar situation she experienced with a client that kept returning to her abuser after EAMH treatment. She notes:

Pocha [the horse] appeared to be very complacent and was walking with her very nicely and doing a very nice job….Suddenly Pocha lunged at her and she [client] threw the lead rope and ran out of the ring screaming ‘I’m gonna leave him, I’m gonna leave him, that’s exactly what he does, he gets really nice and then he does it.’”

Pocha’s aggression mirrored the aggression of the abuser and created an environment where the client was able to have clarity in what she should do in regard to that toxic relationship. Katie, an equine specialist, explains another session with a woman who had a gun put to her head by her significant other:

One of the horses… became her abuser … he exhibited behavior that is totally out of the norm for him… Just going at her and being mean … he was just being really aggressive and I was like ok, this is not this horse, normally he is ‘Mr. Chill.’ He was biting, pushy, walking on top of her… it was really kind of out of control.

In both of these examples, the aggression displayed by the horses aimed at the clients was representational of aggression the client was experiencing in their daily lives. All of the horses mentioned in these situations were not trained to be aggressive and were not aggressive in most of their interactions with people. Just the opposite, they were all horses that were used in EAMH sessions on a regular basis. One of them was also a very skilled therapeutic riding horse who was described by Katie as “one of my best horses, not a thing bothers him.” She shared how the horse
went back to his usual self once the client left the property, demonstrating that it was indeed a response to the client’s situation rather than a bad horse.

**Discussion**

More than half (close to 65%) of interpersonal communication is nonverbal (Burgoon, 1985), making the ability to decode and interpret nonverbal messages crucial for emotional and social health and well-being. Individuals who have experienced trauma have a particularly difficult time decoding nonverbal messages (Bowen & Nowicki, 2007). Consequently, developing nonverbal communication competencies is important in trauma interventions. This study explored how congruence behaviors, horse behaviors unlocking physical and emotional movement, physical closeness, and horse aggression symbolizing human abuse in EAMH facilitated breakthroughs in the treatment of trauma. Turning points elicited perceptual and behavioral changes for the client either in the moment in which they occurred or at a later time when the client encountered a similar issue in his or her daily life. In general, turning points prompted client awareness of their nonverbal decoding assets and deficits. This awareness created a moment where clients learned to pay attention to and appropriately decode nonverbal communication of interaction partners. It is important to note that for practitioners, the identification of nonverbal turning points can ensure effective facilitation regardless of the modality of EAMH being practiced. The four nonverbal turning points described within this study were present and applicable regardless of the modality (or conglomeration of modalities).

More specifically, congruence from the horse is key to EAMH. Congruence has long been discussed in a therapy setting (in multiple modalities of talk therapy including Gestalt, Rogerian, Human-centered therapy), especially in regard to the facilitation by the therapist themselves (Greenberg & Geller, 2001). Lietaer (1993) explained congruence as both the ability
to be mindful of one’s own experience and the willingness to communicate that experience to interaction partners. Rogers (1961) explained that congruence enables trust and communication between individuals. Here, in addition to the therapists, horses demonstrated congruence during EAMH sessions; however, with human therapists, these behaviors had been viewed by clients as manipulative or strategic due to a general distrust of humans. With horses, client’s perceived congruence as authentic because of the natural horse to horse communication styles (Ford, 2013). The predictability of the horse’s responses as consistently authentic built trust within the interaction. The only time a horse did not reflect congruence/lack of congruence to the client was when they were responding to something else in their environment. If their focus was on something other than the environment, the situation still offered an opportunity for the client to learn nonverbal behavior competencies regarding how to appropriately maintain attention, another valuable experience. Once confirmed by the practitioner that the nonverbal cue was a reflection of congruence of the client, the client focused on learning how to distinguish and interpret nonverbal cues from the horses that demonstrated congruent communication or incongruent communication. Understanding these cues acted as a mechanism for behavioral and/or perception changes and led to improved interpersonal and intra-personal communication patterns.

The power of unlocking physical and emotional movement within the client was an important finding. First, when a horse got stuck and refused to move, practitioners encouraged clients to try different techniques and thought processes to achieve their desired goal. In doing so, space was created where the client could be vulnerable and try out new solutions to a problem that they encountered. For example, if the client wished to move forward, but their nonverbal cues said otherwise (e.g., anxiety held in the body, stiffness, inattention), the horse did not move
unless the nonverbal behavior changed and clearly communicated to the horse that the goal was
to move forward. If the horse continued to be unwilling to move, it forced the client to develop
additional solutions and persevere through a challenge. Second, as the client kept trying, they
received both verbal and nonverbal support from the practitioners. Individuals who have
experienced trauma often do not have strong support networks. The experience of being
supported through new and vulnerable experiences of problem solving and committing things
that were tough disrupted unhealthy patterns of communication. Clients interpreted, responded
and used nonverbal communication to physically and emotionally move forward in their lives.
Prior to these experiences, clients did not believe that they had the ability to do certain things,
but when they experienced these nonverbal turning point with the horses (e.g., a horse finally
taking a step forward with them) and support from professionals, they were able to adopt new
experiences and narratives for relating.

Physical closeness built assets for nonverbal decoding through establishing safety (both
physically and emotionally). Multiple practitioners mentioned the client’s ability to ground and
focus on learning and growth when they experienced physical closeness with the horses. Physical
closeness with the horse demonstrated communication with the clients that helped them to
identify the meaning behind certain nonverbal cues. For example, there was a difference between
a horse pushing into a client versus calmly standing beside the client providing appropriate
physical closeness. The ability for the client to understand the difference was important in how
the client accepted physical closeness and touch in sessions and other personal relationships. A
similar concept in talk therapy is presence, or, “being fully in the moment and directly
encountering all aspects of experience with one’s whole being… from a grounded and centered
position within oneself” (Greenberg & Geller, 2001, p.159). Therapeutic presence in talk therapy
originates from the therapist in that they are intentionally open and sensitive to the client’s needs during the session. Equine assisted mental health adds a unique piece to therapeutic presence where horses establish presence through physical closeness or touch. Touch, which can be inappropriate in many human-to-human therapy contexts, is appropriate for horse-human interaction. Much of the research indicates the importance of touch in healing from trauma because touch is the basis for secure attachment as well as one of the first learned modes of communicating our needs (Elbrecht & Antcliff, 2014). This therapy context combined both presence and touch through physical closeness, bringing clarity and consistency to nonverbal patterns within the interaction. Clarity and consistency created safety for exploring, supporting, challenging, and changing communication and behavioral patterns.

A horse’s display of aggression provided an avenue for practitioners to address unhealthy patterns of communication, but it is also a situation where safety could quickly become an issue. Horses are very large animals and could easily harm a client. In all examples shared by practitioners, the aggression never escalated to a place of harming the client, in fact, many practitioners commented on how maintaining safety was at the forefront of their minds throughout the sessions. It was very clear that practitioners had utmost regard for the ability and reliability of their horses in maintaining safety for the client even if large feedback (e.g., a kick, a rear, a push) occurred that was targeted at the client. In every situation of aggression, the reaction of the horse (their nonverbal communication) was completely trusted and was not questioned by practitioners, even if the behavior was out of the ordinary for the individual horse or downright dangerous. Aggression from the horses was reframed by the practitioners as representational aggression of abuse or violence. That it occurred somewhere else in the client’s life as a representation of an unsafe relationship the client maintained outside of the therapy context.
Instead of these aggressive behaviors being labeled and dismissed as a dangerous situation, it was discussed as a situation that was safer than the actual abuse that was occurring for the client. The situation with the horse, although borderline dangerous, was occurring in a controlled environment where the session could be halted or redirected at the discretion of the practitioners. Focusing on the interpretation of nonverbal behaviors in the trauma represented by the horse created the opportunity for clients to build skills that could protect them in their everyday lives. The accumulation of these skills led to perception changes that encouraged the clients to make behavior changes in their everyday life. Some left abusive marriages, others stopped partaking in dangerous habits.

Equine-assisted mental health offers opportunities for nonverbal communication not as prominent in traditional therapy. The presence of the horses created opportunities for clients to focus on nonverbal turning points which improved their ability to decode nonverbal communication. Decreasing the nonverbal deficits increased communication competency which is directly linked to rewarding and satisfying communication (Rubin, Martin, Bruning & Powers, 1993) as well as self-compassion and hope for the future (Umphrey & Sherblom, 2018). When individuals experience trauma, communication with others is challenging and self-compassion and hope are difficult. Working alongside horses in EAMH provides a mechanism for improving communication and improvements in relational and social health outcomes.

**Limitations and Future Directions**

Although four major modalities were represented in this study, not all existing modalities were mentioned. Future studies need a larger and more diverse sample. Also, multiple participants practiced a conglomeration of multiple modalities making it difficult to determine how the modalities themselves were influencing the processes and outcomes. Future studies
should compare processes across modalities or further explore the idea that utilizing multiple modalities could be effective as described by the participants in this study.

Findings from this study explain situations where nonverbal turning points prompt significant perceptual and behavioral changes for the clients, the actual implementation of those changes were not monitored. Future studies should interview clients and well as practitioners to determine what (if any) nonverbal skills are being applied to the clients lives outside of the therapy session.

Lastly, all of the participants in the study were female. Gender studies of the horse/human relationship have shown that the horse industry is equally open to men and women yet gender separation still exists. Namely, women dominate the amateur levels of equestrianism while men outnumber women at the professional levels (Birke & Brandt, 2009). One participant mentioned having a male therapist as a partner, but the rest worked alongside female practitioners. Further studies on the influence of gender in this section of the horse industry could provide additional insight into efficacy and processes.

Conclusion

In summary, this study presents nonverbal turning points as a mechanism behind the breakthrough moments in EAMH. These breakthrough moments have previously been described as “magic” with no clear understanding as to what was happening. The findings presented here offer four categories of nonverbal cues that led to nonverbal turning points that triggered these breakthrough moments for participants: congruence, physical closeness, horse aggression as a symbol for human abuse and unlocking physical and emotional movement. These turning points guided the clients to develop the awareness and the additional skills to have significant perceptual and behavioral changes that influenced relational health and well-being.
CHAPTER 3

Over the past five years, my research interests have been focused on the communicative processes of equine-assisted psychotherapy (EAP). As both a researcher and practitioner of EAP, understanding the processes in the context of establishing EAP as an evidence-based treatment for trauma has captivated my interest. The establishment of EAP as an evidenced based intervention has been a challenge within the industry because of the wide variety of practice modalities and absence of a central governing body that regulates the industry. I was interested in comparing and contrasting communication practices (horse-human and human-human) across the modalities to find central tenets that could potentially act as industry standards. However; as I spent more time in the literature, it seemed as though the most relevant literature was that of supportive communication which led me to my initial research question of “What supportive communication processes and messages (verbal and nonverbal), if any, are communicated by the equine specialist and/or mental health professional and/or horse across the different modalities of EAP?” In order to answer this question, I planned to interview practitioners who practiced a variety of modalities of EAP and would ask them questions about how they as practitioners and their horses were offering supportive communication to the clients.

During the research process, I moved away from the supportive communication framework (Burleson & MacGeorge, 2002) and adopted communicated narrative sense-making (Koenig Kellas & Kranstuberg Horstman, 2015). I recognized that the narratives created during sessions were the basis of the idea of supportive communication that appeared at the surface. After I completed the interviews focused on examining the narratives described by practitioners, the communicated narrative sense-making (CNSM) framework required a different data set than I had acquired. It required data that was focused on the dyad before, during and after the
breakthrough moments in therapy from both the client’s perspective and the practitioner’s perspective. Although it did not work for the current data set, CNSM led me to focus on the breakthrough moments that happened in therapy which after additional analysis, moved me into the realm of nonverbal communication, more specifically how non-verbal communication from the horse facilitated turning points for the clients. This framework was a much better fit for the data as it clearly identified nonverbal cues that practitioners mentioned as significant contributors to breakthroughs for clients and the therapy team.

The next challenge that I came across was in identifying distinct categories of nonverbal turning points that appeared within the data. I went through weeks of coding, weeks of long discussions with my committee chair and going back to the data countless times to revise and further analyze. My initial categories had some significant overlap, and I struggled to delineate between them. Balancing my background in the Communication literature and my background as a practitioner seemed to be both extremely helpful and extremely difficult to manage at the same time. As I learned to oscillate between the perspectives that I had, I talked with other practitioners and communication scholars to gauge my accuracy in both perspectives which helped to sort things out. After inductively reviewing the data and the literature over and over again, both from a research and practitioner perspective, I came to the four categories that currently stand within the paper.

Although difficult, this process was a fantastic experience for me both as a scholar and as a practitioner. I very much enjoyed learning about perspectives of EAMH from around the world and the opportunity to ground those perspectives of practice into theory. I often keep my practitioner hat and my researcher hat separate (it is easier that way) but this project provided the space to challenge me to marry them. In doing so, I gained a deeper understanding of how the
process I facilitate works and how new applications of the theory behind it could improve efficacy. I also enjoyed delving into the Communication literature and applying traditional human-human concepts to the human-animal dyad. This paper applies a traditional communication framework to the human-animal dyad, but it does not fully encompass what is happening within sessions. The interactions that occur within EAMH between all parties (client, horse, equine specialist and mental health professional) are complex and multilayered. Future studies should include an embodied approach that considers the histories that all (client, horse, equine specialist and mental health professional) bring to a session. Specifically, how those histories effect interactions both in terms of personal experiences and the societal structures that frame those experiences. Horses communicate in ways that go beyond the current tenets used to describe human communication. They communicate through traditional nonverbal cues (i.e.-facial expressions, proxemics, etc.), but can also communicate through physiological mechanisms (e.g., heart rate variability), intention and a multitude of other ways. Further exploration could extend our current understanding of human communication theory and perhaps introduce new ways of understanding human-human, human-nonhuman, and environmental communication.

Additional research in this area could focus on two distinct issues, both communication-based. The first being the importance of the horse, and the second being how understanding communicative processes within EAMH can establish the intervention as an evidence-based model for the treatment of trauma. First of all, horse welfare should be a key concern in the EAMH intervention. The communication between horse and client defines the process and the outcome of the breakthroughs in EAMH. As practitioners, maintenance of the horse’s overall welfare and well-being is crucial in providing the best services to the client.
Typically, horse welfare is seen as dependent on the horse’s physical care; however, less understood yet more important, is the shared language between equine specialist and therapy horse. For example, Nieforth & Craig (2017) propose that high levels of equine well-being in therapeutic settings can be maintained with the development of a relationship between equine specialist and the horse. As the equine specialist and horse work together over time, a relationship forms where they understand each other’s literal and contextual communication patterns. Understanding these patterns enables the equine specialist to relay the nonverbal message to the therapist and/or client to facilitate meaningful communication between the team members in order to maintain high standards of relational health across the team (Nieorth & Craig, 2017). Additional research on communication processes, messages, and symbols embedded in the maintenance of these relationships might shed further light on the welfare and well-being for all members of the therapy team and will be important in establishing and maintaining the efficacy of EAMH.

Second, future research should also focus on continuing to establish EAMH as an evidence-based model. This paper found that the “magic” of EAMH is a describable communication process that takes place through nonverbal turning points regardless of the modality (or conglomeration of modalities) being practiced. Currently, there is not a consensus for best practices within the industry nor is there any agreement that EAMH is an evidence-based treatment model (Letini & Knox, 2015). This lack of agreement and understanding leads to conflict in creating clear standards. In the absence of these standards, the efficacy of EAMH remains questionable to the general public and insurance companies do not have reimbursement codes for animal assisted interventions (Morrison, 2007) making it less accessible to populations that would benefit from participating. Understanding additional mechanisms that exists across all
modalities could help to create standards for the industry thus making it more well-known and accessible as an intervention for individuals who have experienced trauma.

This work is relevant to academic and practitioner audiences. The list below provides a brief look at the outlets I will consider for conference submission and publication.

Potential Journal/Conference Outlets:

- NCA 2019
- Journal of Applied Communication
- Communication Quarterly
- Health Communication
- Journal of Nonverbal Behavior
- Journal of Creativity in Mental Health
- Anthrozoos
- Journal of Human-Animal Studies
REFERENCES


APPENDIX
Appendix A

Interview Questions

It says here that you are a [mental health professional and/or Equine Specialist]. Can you tell me more about that?

In general, can you describe the types of issues related to mental health that you might see during a session?

Is this treatment, in your experience, more or less useful for a particular age group or mental health issue?

Can you tell me a little about how the session is focused?
   a. Who chooses what the session will be about?
   b. Could you describe potential goals for the session?

Can you describe the physical environment that the session takes place in?

Can you describe who is typically present in the session?

In your opinion, what is the purpose of each individual/equine in the session? In other words, what role should they fulfill?

What does a typical session look like for you? Walk me through.

What does an atypical session look like for you? Walk me through.

How does the way you talk during a session affect the outcome?
   a. Does your tone play a role?

How does what you say (or do not say) during a session affect the outcome of the session?

In your opinion, do you think that the horses communicate during sessions?
   a. What are specific things that you notice they do to communicate?

In general, what role does communication play in the session?