"I WILL NEVER LEAVE A FALLEN COMRADE"

As part of the U.S. Military's Warrior Ethos, this statement holds a great deal of emotion and meaning for the men and women serving in our armed forces. More than 10,000 military personnel have returned from Iraq and Afghanistan severely wounded, putting a strain on the medical staff at military hospitals. In their struggle to meet the needs of their fallen comrades, some physicians and therapists have found a new resource: NARHA members. Here are the stories of three members who have found a way to serve those who serve our country.

NANCY WILLIS O'MEARA, PT, HPCS RIDE ON CENTER FOR KIDS (ROCK), GEORGETOWN, TX

In the summer of 2005, we received a phone call from 1st Sgt. Scott Sjule of the 1st Cavalry Division Horse Detachment of Ft. Hood in Killen, TX. The medical staff at nearby Brook Army Medical Center had asked him about placing injured soldiers on the Cavalry's horses for therapeutic benefits. Sgt. Sjule's first reaction was to call Ride On Center For Kids (ROCK). The Army likes to do things by the book and he remembered that ROCK was a NARHA Premier Accredited Center, so he requested our assistance. We were honored.

The goal of this pilot program was to offer equine assisted activities using their horses and soldiers, and document the benefits for the injured soldiers as well as the soldiers who volunteered. We saw ourselves as consultants to the 1st Cavalry, providing expertise and the instructors for the sessions.

Because the Horse Detachment is charged with preserving the traditions of our nation's mounted cavalry by performing demonstrations for military and civic ceremonies, their sol-

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ROCK

The soldiers started the sessions with two sidewalkers but progressed to minimal support by the last session.

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dier's are experienced horsemen. Many have also served in combat and are able to provide emotional support to the injured soldiers. Twelve soldiers came to ROCK for a four-hour training session for sidewalkers and horse handlers, and we chose three of their horses for further training. We then met with injured soldiers from Brook Army Medical Center (BAMC). All seven soldiers had amputations. By September we had all the pieces in place and we began the sessions at Ft. Sam Houston, which is near the hospital. The lesson plans progressed from two sidewalkers in the initial lessons to minimal support by the last of four sessions. We included basic horsemanship skills, football on the horse and some activities the 1st Cavalry

uses in its shows, such as passing the saber through rings.

"The first time I was nervous about it," said Dustin Hill, an Army sergeant who lost his right hand and all the fingers on his left hand when a suicide bomber attacked his Humvee. "I had all three guys around me and they were holding onto me and everything else. The second time, they were just walking with me. They weren't holding on. This time, I got rid of them all."

Furthering the Mission

NARHA members who would like to reach out to injured soldiers in their communities can use the experiences presented in this article to get started. All three NARHA members profiled here agree that lessons should be challenging.

"We need to find a way to make sure that they experience riding and therapy without the confines of the typical therapy setting," notes Lesley Shear. "They need and want to take chances and challenge themselves."

Mary Jo Beckman agrees: "They have been to war and do not need to be pampered. Make sure the riders know they are in charge. At certain times during the lessons, the riders were allowed to "fire" their leaders if they felt comfortable with the horses. They could also fire their sidewalkers; however, most did not.

Nancy Willis O'Meara also suggests contacting your local military base to see if they have a need for your center's services. "This program was a definite success," she says, "and could be implemented around the country wherever there are injured soldiers, adequately trained horses and additional soldiers who can be trained as horse handlers and sidewalkers." Mary Jo adds, "This soldier-tosoldier interaction is integral to the success of the program."

Jacqueline Tiley at NARHA has been designated the point of contact for wounded veterans who want to ride or military facilities that want to start equine assisted activities. Contact her at 1-800-369-7433 or jtiley@narha.org. We tested the soldiers before and after riding and they showed improvement in physical balance, gait and morale. Perhaps the most dynamic benefit came from the connection between the 1st Cavalry soldiers and the injured soldiers. Just months before, these young men were actively serving their unit in dangerous places. Now, suddenly they are accepting help from everyone around them—and most are women. It was very empowering to



A 1st Cavalry maneuver—passing a saber through rings.

have their fellow soldiers, many of whom have been to Iraq, walking next to them. The soldiers from Ft. Hood often state the Warriors Ethos, "I will never leave a fallen comrade." The true beauty and success of this program stemmed from the military horses and the soldiers helping their fellow comrades regain their equilibrium.

The partnership with Fort Hood was so meaningful. It made the sacrifice of our soldiers much more personal. We are pleased to have been asked to consult again with the 1st Cavalry, this time as they work in partnership with the Ft. Hood Hospital Physical Therapy Program.

Nancy Willis O'Meara, PT, HPCS, has been the Executive Director of a therapeutic riding program for the past eight years, and a practicing physical therapist for the past 21 years.

LESLEY SHEAR CIRCLE OF HOPE THERAPEUTIC RIDING (CHTR), BARNESVILLE, MD

Mike Benesch, a member of our board of directors, had the idea to reach out to the injured soldiers at Walter Reed Army Medical Center in Washington, DC. We knew it would be difficult to get military personnel to recognize this program as therapeutic so we proposed a recreational program. We touched on riding, grooming, roping, and introduction to various types of horses and breeds. If our pilot program was deemed successful, it was our hope to then have the soldiers out on a regular basis for therapy sessions.

In February and March 2006, about 20 soldiers with amputations came to our center over a three-week period. Mr. Harvey Naranjo of the Occupational Therapy Amputee Section at Walter Reed said the horseback riding serves as a recreational outlet and helps with other problems. "This is a good rehabilitation tool," he said. "It strengthens their hips and core muscles. They are learning their balance. It builds their confidence to try something new."

We saw many benefits for the soldiers, including:

- leaving the hospital atmosphere
- practicing the occupational therapy skills of transferring, balance, coordination and body awareness



Soldiers were greeted by CHTR's Miniature Horses.



Roping was one of many activities offered by CHTR.

- understanding they could accomplish what they tried
- improving on their sense of self
- promoting an idea of a future with possibilities
- learning new skills—roping, grooming and riding

The riding sessions were not a totally new experience for 24-year-old Ryan Kules. He was a trail rider in Arizona before he went to Iraq. A platoon leader there, he lost his left leg and right arm when a roadside bomb exploded and threw him from his vehicle. His driver and gunner were killed instantly. Mr. Kules was in a coma for three weeks, but every time he awoke he said he knew he had lost a leg and an arm. His other arm and leg were both broken. "I had no limbs that

> worked until about a month ago," he said. After his ride on a large draft horse, he said, "I knew what to expect. It went well. I really enjoyed it. It helps with strength and balance and it's always good to be positive in an emotional sense."

Natasha McKinnon, 23, of Ohio, was wounded when she was a passenger in a vehicle hit by a roadside bomb. She lost her left leg below the knee. An animal lover, she was surprised she could ride a horse. "Once they showed me how to properly hold the horse's saddle, I relaxed and it was enjoyable," she said. "The rhythm of the horse was good and I had a blast throughout the whole course. I felt like I was an amateur rider."

I was pleased with the success of our pilot program and we are now working with Bethesda Naval Hospital. It was wonderful to see the willingness of the participants to try anything. We

need to remember these soldiers experienced war. Getting on a horse and riding (with missing limbs) is nothing compared to what they have been through.

Lesley Shear is Co-founder, Executive Director and Head Instructor at Circle of Hope Therapeutic Riding. She was an instructor at the National Center for Therapeutic Riding for six years before co-founding Circle of Hope. She currently holds the position of Chair Person of the Accreditation Committee. Lesley has been teaching therapeutic riding for over 16 years.

The Gazette of Gaithersburg, MD, contributed to this report.

MARY JO BECKMAN ASSISTING THE CAISSON PLATOON, 3RD U.S. INFANTRY, FT. MYER, VA

In 1997, I saw a presentation at the International Therapeutic Riding Congress in Denver about how therapeutic riding was used to help Vietnam War veterans. Mary Woolverton, past NARHA president, was working at Fitzsimmons Hospital in the 1960's and brought her horses to the hospital for the soldiers with amputations to ride. This talk planted a seed in me for using the Army's Caisson Platoon horses for injured soldiers. These horses and soldiers are responsible for providing military honors in Arlington Cemetery for

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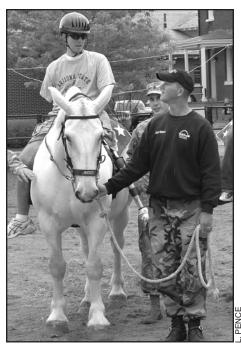
their fallen comrades. As a Navy retiree and a NARHA Instructor, it seemed a perfect match to link the military with therapeutic riding. In 1999, I proposed using the Caisson horses for military children with disabilities, but it was not accepted.

Last fall, I read about ROCK's program in Texas. Armed with their information, I approached the Caisson Platoon at Ft. Myer, VA. The base veterinarian was excited and stated, "How wonderful it would be for the men and horses who honor people who have died to be able to do something for the living." The Platoon Leader was less enthusiastic since he had already heard numerous requests to use the horses. As far as he was concerned, this was just one more.

The windfall came in December when I had lunch with Larry Pence, Command Sergeant Major, U.S. Army, Retired, who is the husband of a riding partner of mine. He enthusiastically embraced the concept for the Caisson Platoon and envisioned this program for all wounded Army personnel. He contacted the 1st Cavalry in Texas and put together a briefing



NARHA Member Mary Jo Beckman helps a soldier mount a Caisson Platoon horse.



The camaraderie between the riders and sidewalkers, both soldiers, was important to the program's success.

with videos. With his contacts, doors opened in the Pentagon, including that of the Sergeant Major of the Army. It was powerful to have the video of the soldiers riding in Texas.

In March, permission was given for a pilot program. At our first meeting with the Caisson Platoon, we discussed horse and equipment requirements. Soldiers constructed a ramp, the Platoon's horse trainers prepared four horses, and Platoon members were trained as leaders and sidewalkers. At the same time, Walter Reed Army Medical Center personnel agreed to provide riders.

Four lessons were held in May and June for six Army soldiers and one Air Force airman with amputations. Because the hospital considered the lessons an "activity," they were optional, resulting in three soldiers riding three times and the others riding one time. A Walter Reed Hospital Occupational Therapist accompanied the soldiers and gave them balance tests before and after each ride to document the benefits of the session.

Lesson strategies were designed to keep the horses moving in order to

work the riders' bodies, teach horsemanship skills where achievement could be documented and have fun. Throwing and catching a ball while walking was a fun activity while working on balance stability. Riders succeeded at steering through poles, trotting in straight lines, riding figure eights and serpentines and drill team maneuvers. For one lesson, three barrels were placed in a race pattern. In a show of their competitive natures, some soldiers wanted to be timed to see if they were faster compared to the other riders.

The program sold itself to the Caisson Platoon, the wounded veterans and hospital staff. Because of the balance tests, physical benefits for each rider were proven. An increase in morale was noted. The riders liked being active on a military base instead of observing parades or giving tours. They enjoyed the interactions with fellow soldiers, some of whom had been in Iraq or Afghanistan. As one of the riders, SPC Max Ramsey, stated: "My personal take on it is that I like the fact of having the Army taking care of its own. That makes a big difference and it enhances camaraderie not just with other soldiers but with the horse, which is a dynamic that few get to enjoy, even with two good legs and arms."

It was an honor and privilege to work with the horses and soldiers at the Caisson Platoon and the injured veterans. The pilot program was so successful that Walter Reed Army Medical Center has taken responsibility for the program and has assigned individuals to attend riding as a therapy. Our first lesson was on September 11th.

Mary Jo Beckman is a NARHA Advanced Certified Riding Instructor, NARHA Driving Instructor, Lead Faculty/Evaluator for Registered Instructor On-site Workshop/ Certifications, Lead Visitor for Accreditation Visits and member of the Driving Committee.

Max Ramsey's quote and photos were provided by Larry Pence.