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HIPPOTHERAPY: HOW BENEFICIAL EQUINE-BASED THERAPY METHODS ARE UNFAIRLY EXCLUDED FROM A CHILD'S FREE AND APPROPRIATE PUBLIC EDUCATION UNDER THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT

Equine (/full-blog?category=Equine), Impact! (/full-blog?category=Impact%21)

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Mention horses, and horse racing undoubtedly first crosses one's mind. With the rich history of horse racing in Kentucky, namely at Keeneland and Churchill Downs, racing is often considered a horse's main utility. However, with the rise of children with disabilities benefiting from horse-based therapy – namely, "hippotherapy" – an entirely different equine service has evolved.[i]

Hippotherapy is a physical, occupational, or speech therapy treatment strategy that utilizes equine movement to improve balance and posture, amongst other issues.[ii] Children with numerous types of disabilities have found hippotherapy beneficial, including, but not limited to, children with Attention Deficit Disorders, Autism, Cerebral Palsy, Multiple Sclerosis, Muscular Dystrophy, and Scoliosis.[iii] However, school districts have generally refused to provide hippotherapy to children with disabilities as a part of their Free and Appropriate Public Education (FAPE) under the Individuals with Disabilities Education Act (IDEA).[iv]

Under the IDEA, public school districts must provide children with disabilities with a FAPE, most commonly accomplished through the development of an Individualized Education Plan (IEP).^[v] An IEP is essentially a “plan of action,” created by a team of individuals who are players in the child’s education, including parents, teachers, and therapists.^[vi] Although all signs point towards the use of hippotherapy for children with varying disabilities in a child’s IEP, the Supreme Court of the United States’ interpretation of IDEA does not technically require school districts to provide a therapy as beneficial as hippotherapy so long as they are providing other services to children with disabilities that confer “some meaningful benefit” to the child’s overall education.^[vii] Therefore, as long as schools are providing a service that has generated even a little improvement in the child’s educational progress, school districts are not required to provide a different therapy method that is preferred by both the student and parents, even if the preferred therapy method would potentially confer greater benefit upon the child.^[viii]



(<http://healingstridesofva.org/hippotherapy-story.html>)

Schools have been unwilling to include hippotherapy in a child’s IEP, likely, but speculatively speaking, because the therapy is unconventional, community-based, and thought to be expensive for the schools to provide.^[ix] However, hippotherapy is offered for as low as \$80 to \$115 per session, a price comparable to private speech and physical therapy services.^[x] The issue in getting hippotherapy into children with disabilities’ IEPs is the standard set forth by the Supreme Court of the United States in interpreting what is meant by a FAPE under IDEA: that an IEP must only confer some meaningful benefit upon a child, rather than maximize a child’s potential.^[xi] This standard – a floor, rather than a ceiling - was set in the historic case of *Rowley*.^[xii] Until this floor has shifted to a higher standard, school districts have no incentive to provide services above and beyond what may “somewhat” benefit a child. Therefore, hippotherapy remains a therapy method that is inaccessible to many children who may greatly benefit, albeit a therapy method that can still be advocated for in the school system.

[i] See generally *Why Use Horses In Therapy?*, The Children’s TherAplay Foundation, Inc., <http://www.childrenstheraplay.org/why-use-a-horse-as-a-tool-in-therapy> (last visited Feb. 29, 2016).

[ii] *EAAT Definitions*, Prof. Ass’n of Therapeutic Horsemanship Int’l, <http://www.pathintl.org/27-resources/general/193-caat-definitions> (last visited Feb. 29, 2016).

[iii] *Hippotherapy*, Three Gaits, Inc., <http://www.3gaits.org/hippotherapy.htm> (last visited Feb. 29, 2016).

[iv] See *K.C. ex rel. Her Parents v. Nazareth Area Sch. Dist.*, 806 F. Supp. 2d 806, 818 (E.D. Pa. 2011) (ruling that equine therapy was not required as a part of a child with brain damage and Prader-Willi Syndrome’s Free and Appropriate Public Education although the child had improved “immensely” from the therapy, as evident from the testimony of her instructor indicating that the child had experienced significant improvements in balance, coordination, self-esteem, and ability to take instruction in a positive manner); 20 U.S.C. § 1400 (2011).

[v] *Topic: Individualized Education Plan (IEP)*, U.S. Department of Educ.: Off. of Special Educ. Programs, <http://idea.ed.gov/explore/view/p/,root,dynamic,TopicalBrief,10> (last visited Feb. 29, 2016).

[vi] Lisa Küpper (<http://www.readingrockets.org/articles/by-author/61986>) & Jean Kohanck, *The IEP Team Members*, Reading Rockets, <http://www.readingrockets.org/article/iep-team-members> (last visited Mar. 1, 2016).

[vii] See *Bd. Of Educ. v. Rowley*, 458 U.S. 176, 200 (1982) (concluding that a child with a hearing impairment’s IEP was deemed adequate because it conferred some meaningful benefit on the child rather than the maximum benefit possible).

[viii] *Ser. M.M. v. Sch. Bd.*, 437 F.3d 1085, 1103 (11th Cir. 2006) (denying a child with hearing impairments' parent's a right to choose the therapy method deemed most beneficial to their child because an alternate form of therapy was adequate).

[ix] *Ser. e.g., Erickson v. Albuquerque Pub. Sch.*, 199 F.3d 1116, 1119, 1122 (10th Cir. 1999) (upholding the District Court's determination that hippotherapy was *not* a necessary and therefore discontinued form of occupational therapy for a child with bipolar disorder and learning disabilities who required occupational therapy per his Individual Education Plan (IEP)); *see also* Natalie D. v. State Dept. of Health Care Services, 159 Cal. Rptr. 3d 497 (Cal. Cr. App. 2013) (failing to find that hippotherapy was a medically necessary treatment for a child with cerebral palsy and arthrogryposis, as severe congenital orthopedic disorder involving a general stiffness of joints).

[x] *See How much do therapies cost for your child with special needs?*, Love That Max (Dec. 11, 2013), <http://www.lovethatmax.com/2013/12/how-much-do-your-childs-therapies-cost.html>.

[xi] *Rowley*, 458 U.S. at 200.

[xii] *See Rowley*, 458 U.S. at 200.

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