

# Amy's Story: An Existential-Integrative Equine-Facilitated Psychotherapy Approach to Anorexia Nervosa

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## Abstract

This article offers an existential-integrative framework to working with anorexia nervosa within an equine-facilitated psychotherapy setting. The discussion provides an overview of how existential-integrative theories can be blended into equine-facilitated psychotherapy and offers an existential-integrative perspective of anorexia nervosa. A case study illustrates the theories behind this blended approach in praxis.

## Keywords

existential-integrative, equine-facilitated psychotherapy, anorexia nervosa

## An Existential-Integrative Framework

Freedom is the perceived capacity for choice within the natural and self-imposed limitations of living. (Schneider, 2008, p. 35)

Existential-integrative (EI) psychotherapy aims to alleviate the constraints that people feel bound to in their lives and calls attention to the choices available to them. Schneider (2008) equates choice with freedom and asserts that the

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maximization of freedom is the core aim of EI therapy. With increased freedom, the potential arises to live authentically, leading to the development of a “self that truly reflects people’s tendency to actualize their human potential” (Polkinghorne, 2014, p. 90). Concomitantly, if self-actualization is the path to authentic living, then succumbing to external influences is seen as the road to an inauthentic life. Jacobsen (2007) states that living authentically means to live truthfully and “in accordance to one’s deep convictions, beliefs, values and goals” (p. 291). Inauthentic existence is when one becomes “moulded by external factors” (p. 291). Thus, authenticity becomes a process of self-creation where individuals must conceive of themselves internally and attempt to “transcend enculturation” (Miars, 2002, p. 221). Inauthenticity occurs when there is conflict with the givenness of our being-in-the-world. Additionally,

Authenticity, then, does not consist of rejection of the familiar world. It does not call for one to deny values, activities, associates, or any aspect of his life. Authenticity, indeed, must be approached more through alive participation in all of these. (Bugental, 1965, p. 34)

This active participation allows for an experiential liberation (Schneider, 2008) that encompasses a holistic engagement of being in the present moment. It is a full-bodied process where

clients are supported to “reoccupy” (e.g. embody) the parts of themselves that have been denied. The more that clients are able to reoccupy themselves, the more they are able to both access and express hitherto estranged dimensions of themselves, and it is these very dimensions that deepen people’s appreciation for life. (Bugental, 1965, p. 38)

This experiential liberation challenges the Cartesian duality of a mind–body split and the reliance on cognitive, rational, and logical interpretation of the lived experience and unifies the experience of being-in-the-world as a body-mind (Dychtwald, 1950). Living in an embodied way can thus be seen as

*gaining, through the vehicle of awareness, the capacity to feel the ambient physical sensations of unfettered energy and aliveness as they pulse through our bodies. It is here that mind and body, thought and feeling, psyche and spirit, are held together, welded in an undifferentiated unity of experience. (Levine, 1997, p. 279)*

This unified experience naturally incorporates both the intrapersonal and the interpersonal domain. EI psychotherapy is founded on the principles of the relational encounter and emphasizes the importance of the therapist’s

presence (Schneider & Krug, 2009; Yalom, 1980). Related to Buber's (1958) I-Thou philosophy, the authentic presence of the therapist invokes and motivates the client to become present in the encounter, leading to a new awakened experience of living for them in that moment (Schneider & Krug, 2009). An embodied way-of-being allows for authentic living.

## **An Existential-Integrative Approach to Equine-Facilitated Psychotherapy**

The inclusion of horses as part of the therapeutic encounter is a relatively new development in psychotherapy. There are differing approaches, belief systems, methods, and acronyms that describe and define what, how, and why this is a valuable process for different populations (Hallberg, 2008). Equine-facilitated psychotherapy (EFP) views the horse as a cofacilitator in the therapeutic encounter and emphasizes the innate wisdom of the horse and the power of an authentic other bearing witness (Rector, 2005) since horses live in the here-and-now and respond authentically to their environment in a naturally embodied way (Lac, Marble, & Boie, 2013). Sessions may include both a licensed mental health professional and an equine specialist, but the therapist can also be dually credentialed as the equine professional. The role of the therapist is to call attention to what they are witnessing together during this process to support the client in reaching a new awareness.

EFP is increasingly used as an alternative and/or adjunct form of treatment for clients who have otherwise not responded to traditional office-based therapies (Karol, 2007). Within EFP, there is an emphasis on the relational and embodied connection, touch, and movement such that

greater embodiment seems to be both an outcome of, and a necessity for, working effectively with horses. In addition to the influence of the horse's embodied state and large size, participants noted that the automatic, inherent, and necessary movements that emerge when clients interact with horses facilitate embodiment as well. (Ford, 2013, p. 103)

This process takes the client out of their left-brain thinking, extracting clients from their intrapersonal domain into a more mindful and interpersonal realm with their whole being (Hamilton, 2011).

The physicality also allowed for a very different type of subversion of problematic ways of being. The women learned to "speak" a novel relational language in their interactions with their horses, as they attuned to each other through their bodies in a kinetically articulated way. This enabled the interruption

of problematic corporeal habits at a muscular level, one that was felt before it was understood or discussable. (Sharpe, 2014, p. 142)

This echoes the attunement necessary to form attachment bonds and is part of the integrated body–mind healing when working in this way with horses (Shambo, 2013).

Including horses into the therapeutic space does not mean a negation of the therapist–client relationship. Instead, EFP “relies not only on the therapeutic relationship with the clinician, but is also fueled by the client’s compelling attachment to the therapeutic horse” (Karol, 2007, p. 77). This opportunity for nurturing a healthier attachment process can also be viewed through traditional attachment theory concept of “holding” (Winnicott, 1971). Bachi (2013) outlines three aspects of holding within EFP as the physical sensation of being held while on horseback, the natural setting within a horse barn providing a nonthreatening environment, and the acceptance and nonjudgmental nature of the horses. These three elements combine to offer clients “the provision of a secure base and a haven of safety through a holding environment” (p. 190) that is essential to secure attachment. In this way, horses provide a “warm, non-manipulative, nonjudgmental, companionship as well as essential comfort, and may offer an unconditional support system to individuals with psychological issues” (Johansen, Arfwedson Wang, Binder, & Malt, 2014, p. 329).

Furthermore, since horses bring themselves into each encounter authentically (Hamilton, 2011), they elicit the same authenticity from clients and the therapist.

It is impossible to hide one’s emotions, as they will appear through the horse’s behavior. In one way or another, if the individual does not express his or her true emotions or hides behind appearances, the horse will feel it and will reflect the inner feeling of the individual and will react with exact congruence to the perceived human feelings. (Chardonens, 2009, p. 327)

This process allows clients to experience in the present moment the live responses from the horse and make meaning from this without the fear of judgment. It also heightens the therapist’s awareness of his/her own authentic and embodied responses toward the clients.

An EI approach to EFP necessitates a creative synthesis of the two modalities and is conducted with individual clients, couples, families, or groups with the therapist being dually credentialed as mental health and equine professional (Smith, 2010). From an existential framework, this approach focuses on a phenomenological and experiential process as it unfolds in the here and now, and holds that the primary source of healing occurs in the relationships

between the client, horse, and therapist (Kirby, 2010). At its core is the concept of I-Thou relating (Buber, 1958) that emphasizes interconnectedness and dialogue, and is characterized by authentic meeting and the co-creation of a supportive and healing relationship, that enhances a sense of self (Hycner, 1990). While sessions are not riding lessons, mounted work can become part of the session (Lac, 2015). People familiar with horses know that they respond to the most subtle cues from the rider, and when a rider is disconnected from his/her own body, “the horse will express it behaviorally or actually even become locked up in his body” (Rector, as cited in Kohanov, 2001, p. 202). Based on the foundations of present-centered awareness, relational connectedness, and an embodied way of being, this approach has redefined and refined the importance of the bodymind (Lac & Walton, 2012). When in contact with horses, not only does one need to be highly attuned to their own bodymind process but also that of their equine partners.

## **Amy's<sup>1</sup> Story**

The day before Amy's first session with me was traumatic. I had only just started working at the therapeutic equine facility the week before, and was partnering with an outpatient eating disorders clinic that had started referring clients to me there. The night before our first session, three horses in the herd were randomly attacked. A teenage boy had slashed the horses with a machete leaving deep gashes across their hindquarters. Thankfully, the injuries were not fatal and the veterinarian was able to attend to the wounds and administer some painkillers. Less than 24 hours after the attack, the horses were back in their paddock grazing, while the human staff members were still reeling in shock.

Amy had been referred to me by the clinic, newly released from her latest stint in residential care for the treatment of anorexia nervosa. At 16 years old, Amy had already been battling this disorder for 4 years, had been in and out of residential care, and was severely depressed and actively self-harming. Her primary therapist at the clinic had been working with her for 2 years and thought that an equine-facilitated approach might ease her jaded attitude toward traditional office-based therapies. Amy had been exposed to cognitive-behavioral, dialectical-behavioral, psychodrama, art, and nutritional therapies, in individual, group, and family settings. Nothing seemed to break through enough for her to be able to sustain her recovery. From an EI approach, my focus in working with Amy was to introduce her to a more experiential process in an attempt to connect with her on an embodied level.

Amy arrived at the facility on a hot Virginia summer's day wearing a thick long sleeved top. As we walked into the paddock where the horses

were grazing, I noticed her pulling at the ends of her sleeves. Her eyes were downcast and her breathing was shallow, but she fixed a smile on her face in answer to every question I asked. The horses were at the opposite end of the paddock, about a hundred feet away from where we stood, when she noticed their injuries. I told her what had happened the day before as she stood rooted to the spot, transfixed by their scars, but still continuing to pull her sleeves down over her hands.

VL: I notice how you're pulling your sleeves over your hands.

Amy: Yeah, it's a bad habit I have. I feel self-conscious of my scars.

Amy pauses and squints at the horses still grazing in the distance; I wait to see what meaning she is making from seeing their scars.

VL: What do you see?

Amy: They don't seem to care about their scars. They don't seem to be paying any attention to us either.

VL: No, they don't seem to. Would you like to get their attention?

Amy ponders for a moment before taking a couple of steps toward the horses and stops.

Amy: I don't want to force them to be friends with me, but I do want them to notice that I'm here.

VL: How would you like to get them to notice you?

Amy begins to roll her sleeves up and slowly extends her arms, palms facing upward, toward the horses. As she does this, the three injured horses raised their heads, stop grazing, and begin to move toward us. The rest of the herd remained at a distance and continued to graze. Amy stood still with her arms outreached, with her scars on display on her forearms, as one by one the horses come toward her. They take it in turn to sniff her arms before moving over to make space for the next horse to do the same. When all three horses had greeted her, they remained standing around her, waiting attentively. Amy began to cry softly. As she cried, one of the horses stepped forward and rested her head on Amy's shoulder. Throwing her arms around the horse, Amy began to sob. As she cried, the horse leaned into her, and I encouraged Amy to lean in and feel the embodied sensation of the horse supporting her full weight. I paid attention to her breathing, and raised her awareness to it by encouraging her to breathe in synch with the horse. Throughout this encounter, the other two injured horses remained by her side.

As Amy began to pet the horse closest to her, she explained that she spends most of her time trying to hide her scars, her pain, and her eating disorder, not just to everyone else around her but also to herself; that this process, in her words, “is eating [her] up inside”; and every time she feels that she might have made a connection with someone, that person ends up leaving because her anorexia is too much for him/her to bear witness to. Amy longed to “just be herself” with people. The horses had accepted her without question and stayed with her in her pain. This embodied experience of support and acceptance, over time, allowed her to recognize for herself how she abandons her own existence through self-harming and anorexic behaviors, and was something that we returned to as we continued to work together.

Anorexia nervosa can be conceptualized as the ultimate in existential inauthenticity, where the constraints on being are so rigid that it results in the starving of oneself of existence itself, perhaps in an effort to mask the terror of being more visible in the world. In this process, the EI therapist is faced with witnessing a slow and deliberate extinction of life and the welcome of bodily death. Questions that may arise in this process include the following: What aspect of his/her life does the client want to end; what makes living an impossible choice; and what does it feel like on an embodied level to be conflicted about living or dying? These questions may invoke the actuality of experiences for clients (Schneider, 2008) who have become numb to their destructive process, or they may act as metaphors for clients to rest their experiences on (Duker & Slade, 2003). There is a paradox within this dilemma in the client’s own feelings of worthlessness that drives the client toward thinness, believing that once thinness is achieved, he or she would be worthy to live, love, and survive. Yet it is in the client’s striving for that same thinness that will potentially cause death.

Amy’s journey continued with a focus on her felt sense of being “too much” for those around her. She was literally making herself smaller to confront this existential fear. This smallness can be conceptualized through Schneider’s (2008) constrictive/expansive continuum, where Amy constricted not just her fear but also all sensations of living. Over several months, we worked with the horses by being on the ground and on horseback as she began to “reoccupy” (Schneider, 2008) her sense of herself. This approach included experimenting with mindfully grooming the horse while paying attention to her breathing; leading the horse around the arena while focusing on her physical sense of boundaries; energetically connecting to a horse “at liberty” (i.e., without being attached to a lead rope), resulting in the horse following her every move around the arena; and lying bareback, spine to spine with the horse, and feeling herself being fully supported. This last experiment was exceptionally challenging for Amy, as it required her to trust

that she was not too heavy a burden for her horse to carry, both literally and figuratively. She had chosen to work with one of the smaller horses, who also happened to be the one who had initially supported her crying in the first session, and she was worried that she would be too heavy for her. Processing this dilemma in the moment with Amy allowed her to feel the experiential liberation of trusting herself and her horse enough, while staying connected in their relationship, and opened her up to the possibility of living more fully.

I had been working with Amy for a year when my husband's job necessitated our relocation to Ohio. Amy had been making steady progress and the multidisciplinary team at the eating disorders clinic had been preparing to discharge her. Our final session was marked by a celebratory trail ride through the woods as we reviewed her progress. Amy spoke of her growing confidence in taking up more space in the world, and becoming more visible in her relationships with others. Her ability to take charge and lead her horse and steer through obstacles on the trail ride was a testament to her progress. The trail ride was something that she had always yearned for but had not felt confident enough to do. So I felt great pride in witnessing her confidence and empowered spirit.

Living with anorexia nervosa is a lonely existence. Social engagements, which often involve communal eating, are fraught with anxiety and purposefully avoided (Duker & Slade, 2003). Amy had become isolated from her peers and family, further confirming her view of herself as unworthy of attention (Granek, 2007). In the world of social media, this existential isolation is increasingly overcome by seeking out pro-anorexia support groups to find "thinspiration" (Williamson, 2014) that results in peer pressure like no other. This is the process through which Amy rapidly attached to and created her anorexic identity, where the awareness for the need to belong and relate to like-minded others catapulted her back into her relapse, time and again. From an EI perspective, it was here that I most needed to rely on my own ability to stay present and available for connection within the relationship with Amy. In true existential tradition through Buber's (1958) I-Thou approach to relating, I viewed her illness as an illness of her "relations with the world" (Friedman, 2014, p. 454). For Amy, as an individual suffering from anorexia, her relationship with the world, and herself, was through her way of being with (out) food, such that her

ability to restrict food has become not just the difference between being good or being bad, being a success or a failure. It has become the difference between being and not being. It has become [her] solution to being at all. (Duker & Slade, 2003, p. 134)

A year after our move to Ohio, I returned to Virginia to deliver a workshop at the equine facility. The director at the eating disorders clinic heard that I



would be in town and asked if I would have a session with Amy, who was back in treatment with her.

I watched Amy get out of the car, shoulders slumped forward, head lowered and eyes downcast, and wondered what had happened to her to trigger another relapse into the destructive cycle of anorexia. Amy stood before me feeling defeated and angry with herself and the world, believing that no one cared enough to notice her struggles. She was angry with me for leaving her a year ago. Now her friends had all left for college and she did not want to admit to them that she was feeling left behind, so had withdrawn from any contact with them. Even her primary therapist had left the clinic, leaving her to start anew with someone else whom she did not feel a connection with. She felt utterly abandoned and alone. Everything had changed and everyone else had moved on; even this herd of horses that she had felt so connected to previously had now doubled in size with new members since we had last worked together, and thus felt unfamiliar to her.

As we stood in the paddock, Amy began to describe her sense of futility, collapsing in on herself as she spoke. What began as a litany of reasons why she was unworthy of attention soon turned into her acknowledging the despair she was feeling in her isolation. She was convinced that once “out of sight, out of mind.”

As she began to describe her fears, one by one, all six of the original herd members that she had worked with previously began to make their way over to us from the other side of the paddock where they had been grazing. One by one, they stood before her, sniffed, bowed their heads, and then stepped to one side to make room for the next. One by one, they greeted her and presented themselves to be available to work with her, connect with her, and be a shoulder to lean on for her. They stood in a circle facing her, waiting patiently. I asked her if she had noticed that all her old friends had come to greet her. She was uncertain and told me that the horses had come to see me and their presence had nothing to do with her. Quietly, I stepped away from them all until I was about 30 feet away, trusting that the horses would stay with her. As Amy reached out to each horse and greeted them in turn, her eyes shone with tears as she breathed in a new reality where she could begin to believe that she mattered, that she had an impact on those around her, and that she was not alone.

In their attempt to find meaning in their way of being in the world, clients with anorexia position their ability to restrict food intake as their moral compass and the sole measure of personal meaning (Duker & Slade, 2003). This is dialectical to their feelings of insignificance and the lack of value that they place on their life, so much so that they are willing to starve to death. Against this backdrop of existential nothingness of being, clients often present to the

external world a competitive and perfectionistic persona. Thinness and the ability to restrict food becomes the greatest prize as this “achievement was the key to being loved . . . and the way to feel like they had value and self-worth” (Granek, 2007, p. 377), and becoming someone of meaning and purpose. For the EI therapist, supporting the client to begin to articulate something from a place of nothingness is indeed a difficult task, but a task that is crucial in the recovery process for the client. To walk with another into the darkness without a guiding light takes courage and conviction, but it is this commitment to the process that allows clients to begin to become aware of what they may be keeping hidden from the world and themselves. Their not knowing and lack of sense of self is often confused by the rules and expectations that they have absorbed from their environment. Sifting through these introjections and raising awareness of how they censor their own innate senses and intuition can support clients into owning more of their process and feelings outside of the anorexia bubble within which they live, and thus, opening the door for their authenticity to emerge (Duker & Slade, 2003).

## **Conclusion**

Amy’s story demonstrates the power of equine-facilitated therapy when approached from an EI psychotherapy framework. Holding the space for the potential for Amy’s re-occupation of herself, my presence provided a sense of safety, both emotionally and physically around the horses, as she explored ways in which to increase her own presence in the world. The authenticity of the horses, their presence, and their ability to bear witness to her pain, anguish, and despair, allowed Amy to find her place in the herd in an embodied way. This sense of belonging alleviated some of her constricted ways of being in the world and enabled her to feel that she is of significance in the world.

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