

**Therapeutic Riding National Professional Committee
At the Israel National Equestrian Federation (IEF)
2008-2019**

Rules and Guidelines for EAS practice

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A. Introduction

1. Aims and goals

The "Rules and Guidelines" document aims to promote safe, ethical, and professional therapeutic riding for the benefit of patients, instructors, volunteers, and stable managers. It also sets clear standards for implementation and oversight.

These rules serve as general guidelines and ethical standards for activity centers. The absence of a specific provision in these rules does not exempt the activity center from its obligations.

2. Definitions

- **Activity Center/Ranch** – A facility where therapeutic riding takes place. The term "activity center/ranch" in any section of this document also refers to its professional staff and management.
- **Program** – A set of activities offered by the activity center for horseback riding for individuals with special needs.
- **Client/rider/participant** – An individual who applies or is referred to a therapeutic riding program to achieve predefined therapeutic goals. Participation in riding activities requires instruction by a certified therapeutic riding instructor.
- **The Committee** – The professional committee for therapeutic riding within the Israeli National Equestrian Federation (2008-2019)
- **Therapeutic Riding Coordinator at the Ranch** – A therapeutic riding instructor appointed as the professional supervisor of the activity center. The coordinator must have at least five years of experience in the field and a minimum of 1,500 hours of experience in therapeutic riding instruction. The role includes maintaining high professional and ethical standards, overseeing activities, and providing professional guidance to employed instructors.
- **Instructor for Therapeutic Riding** – A person aged 21 or older with a certification in therapeutic riding instruction, a riding instructor certificate, and a valid first-aid certification.
- **Volunteer** – A person working at the center without any compensation. The volunteer has been interviewed by the coordinator and deemed suitable for the role. They have undergone training related to their responsibilities and safety regulations at the ranch.

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B. Rules and Guidelines

Clients, Volunteers, and Staff

1. The activity centers respect the rights, dignity, and well-being of every individual.
2. The activity centers will always operate with concern for the physical, mental, and
 - The activity center will maintain the confidentiality of personal and medical information.
3. The activity center will be aware of the special needs and requirements of participants and will follow safety regulations for their protection.
4. The activity center will serve riders without discrimination based on race, community, gender, religion, belief, nationality, or sexual orientation.
5. The activity center will accept clients for therapeutic riding only if the necessary infrastructure, equipment, and expertise are available. The coordinator is responsible for ensuring compliance with this requirement.
6. The management of the activity center will adhere to proper administrative procedures and operate according to standard administrative practices in Israel.
7. Volunteers:
 - A volunteer is someone who donates their time, experience, or skills toward a defined purpose without expecting any compensation.
 - Volunteers must be at least 14 years old.
 - Volunteers will be aware of their responsibilities, respect confidentiality, and adhere to the ethical standards of the center.
 - Volunteers will undergo structured training, including a learning period and practical experience under the supervision of an experienced volunteer.
 - The screening process includes a personal interview with the professional coordinator of the ranch, who will approve the volunteer's participation.
 - A physical or mental limitation does not automatically disqualify a volunteer. However, specific cases require the coordinator's approval to ensure that the volunteer's participation does not pose a risk to themselves or the program participants.
 - Volunteers are not responsible for managing activities at the ranch, even if they participate in them. The responsibility lies with the employed instructors and professional supervisors.
 - The activity center must report on the use of volunteers to the insurance provider and obtain specific coverage for this matter.

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Horses and welfare

The Welfare of the Horse Must Be Our Top Priority

Horses must be treated with care and respect—not merely viewing them as “partners,” but truly treating them as such. Ensuring the physical and emotional well-being of the horses is a fundamental value woven into every aspect of the program.

We believe that maintaining high standards of equine welfare requires not only knowledge and motivation, but also a strong foundation of experience.

Therefore, EAS practitioners must be skilled and experienced equestrians.

9. Horses used for therapeutic riding must be in good health, well-trained, and have a suitable temperament.
10. A therapeutic riding horse must be at least six years old. In special cases, the coordinator may approve exceptions based on the horse’s breed, temperament, physical condition, and level of training.
11. Horses will be selected based on health, conformation, and temperament and will undergo specific training for working with individuals with special needs.
12. The activity center will not use lame horses or those suffering from balance issues or poor health.
13. Stallions (uncastrated male horses) may not be used.
14. The activity center will ensure the dignity and well-being of the horses, and any other animals involved in the program.
15. The activity center will use horses in accordance with their abilities and consider their physical limitations.
16. The activity center is responsible for matching each horse to an appropriate rider, as this is crucial for the success of therapy and the horse welfare (for instance, weight limitation)
17. It is essential to understand that certain limitations do not necessarily make a horse unsuitable for therapeutic riding as long as the instructor is aware of them and can avoid risky situations. However, factors outside the instructor’s control—such as human movement, noisy environments, or the presence of wheelchairs—must be considered. In general, therapeutic riding horses should have a calm disposition, be desensitized to environmental stimuli, and trust humans.
18. Horses should be able to stand quietly and be accustomed to the equipment used.
19. If the program involves individuals requiring a lift to mount the horse, the horses used must be well-trained for this procedure and able to stand calmly while the rider is mounted.

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20. Horses should be as accustomed as possible to sudden or involuntary movements by participants. However, as they are living beings, absolute predictability cannot be guaranteed.
21. Horses must undergo veterinary checks and receive tetanus, influenza, and rabies vaccinations at least once a year. It is also recommended to consider biannual herpes vaccinations to prevent disruptions due to disease outbreaks.
22. The activity center will conduct regular training sessions for the horses to maintain their physical and mental health and to uphold the highest standards when working with individuals with disabilities.
23. Activity centers renting or using horses that do not belong to them must comply with the same procedures and ensure proper care for these horses.
24. Horses participating in the program:
 - Will not work more than four hours per day.
 - Will engage in a maximum of two hours of intensive riding per day.
 - Will not work for more than two consecutive hours.
 - Will receive at least one full day of rest per week.
25. The management of the activity center must provide horses with shelter, clean and adequate drinking water, and nutrition according to veterinary recommendations.
26. If horses are kept in stalls, the stalls must be well-ventilated and free of objects that could endanger the horse's health.

The Activity Center

27. The activity center must comply with all the requirements of the authorities and government ministries, such as the Tax Authority, National Insurance Institute, Ministry of Agriculture, Animal Protection Law, emergency safety regulations, Home Front Command, etc.
28. The activity center will instruct employees and volunteers on safety procedures within the center and emergency behavior guidelines.
29. The center must have an accessible and adapted entrance for participants in the program and designated parking spaces for people with disabilities.
30. The center must be equipped with restrooms adapted for program participants.
31. The center must have a functioning and available telephone line and device.
32. The center must be equipped with first aid kits for both humans and animals.
33. A sign containing information about the center's rules and regulations will be placed in an accessible location for all participants and their families.

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- 34. An emergency vehicle must always be available at the activity center.
- 35. The activity center must keep its premises free of abandoned or hazardous objects, particularly in the riding arena area.
- 36. The center must be equipped with enough properly maintained fire extinguishers, positioned according to fire department regulations.
- 37. The center must maintain cleanliness and hygiene in all its facilities. The premises must be organized and free of unnecessary waste.

Insurance

- 38. The center must arrange appropriate insurance coverage for its legal liability regarding its operations.
- 39. The recommended minimum coverage and its scope: Third-party liability and professional liability insurance with a coverage limit of at least 4 million ILS, and employer liability insurance with a coverage limit of at least 20 million ILS.
- 40. The professional liability insurance must cover both the direct liability of each instructor and the vicarious liability of the center.
- 41. If there are horses at the center that do not belong to it, third-party insurance must be in place to cover the owners' liability, ensuring they are protected against lawsuits.
- 42. The insurance policy must be extended to cover the center for actions and omissions of the horse owners, including a waiver of the right of subrogation against them.
- 43. It is recommended to have additional property insurance and insurance for death, theft, and medical treatments for horses.
- 44. It is advisable to have personal accident insurance for riders to ensure compensation in case of injury, even if the center is not found negligent.
- 45. The center must comply with all the insurance company's policy conditions.
- 46. It is mandatory to consult with an insurance agent, preferably one specializing in equestrian centers, to tailor the insurance coverage to each client based on their needs, activities, and unique circumstances.

Equipment

- 47. All equipment must be in good working condition, well-maintained, and clean.
- 48. The therapeutic riding equipment at the activity center must meet European or American safety standards.
- 49. The center must be equipped with suitable gear for all types of riders participating in the program.
- 50. The equipment must be appropriately sized for the rider's dimensions and abilities.

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51. The equipment must also be properly fitted to the specific horse.
52. Equipment must be properly stored in a suitable place. Training equipment should be readily available during activities.
53. The activity center must use only equipment that meets the needs of the participants to ensure safety and maintain the quality of the program.

Bridles

- Every horse must wear a bridle while working.
- It is prohibited to work with only a stable halter.
- A bridle may be used with or without a bit, provided the horse is accustomed to it.
- Only a qualified authority or head instructor may decide if a horse can work with a work halter without a bit.
- Reins may be attached to a stable halter only if the horse is led by an assistant instructor or volunteer.

Safety Instructions

55. Safety stirrups must be used unless a qualified authority has granted an exception. The instructor must ensure that the rider's foot size matches the safety stirrups.
56. Riding outside the arena is recommended only with ground guidance and under the supervision of a certified instructor. The professional authority may approve unguided outdoor riding only when accompanied by a mounted instructor.
57. Riders and staff must wear safety-appropriate clothing for the activity.
58. Closed-toe shoes must be worn in the presence of horses.
59. Open reins must not be used unless a qualified authority has specifically approved it as an exception, for example, for advanced-level riders. If open reins are used, the professional authority must ensure that the rider can handle them as required in advanced equestrian sports.
60. The instructor must always be present in the riding arena when riders are there, whether mounted or unmounted.
61. The instructor must maintain visual contact with the riders and horses throughout the lesson.
62. The **Back Riding** method must not be used without specific professional certification.
63. Equipment from Vaulting sport is commonly used in therapeutic riding. However, it is important to distinguish that **Vaulting** is a recognized sport and not therapeutic riding. Therefore, we will avoid using terminology from this sport. Instead, we will refer to the use of a blanket and girth/belt with handles.

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Helmet Guidelines:

- **Safety Standard:** Israel does not have an official standard for riding helmets; therefore, European and American standards are used.

Until 2016, the recognized standards were **BSEN1384** and **PASO15**.

Since 2016, the recognized standards are:

- **American Standard:** ASTM/SEI Certified*
<https://www.astm.org/Standards/F1163.htm>
- **European Standard :** CE VG1*
<https://horse.co.za/understanding-helmet-standards/>
- Helmets must be in good condition and meet either the European or American standard.
- Improper helmet use or incorrect fitting may result in severe injuries in case of a fall.
- A safety helmet is one of the most critical pieces of equipment. Proper helmet fit is essential and is the responsibility of the activity center, not the rider. The head plays a crucial role in stability; thus, an ill-fitting helmet may cause balance issues.
- Helmets that are too large pose a safety risk and cause discomfort; they may slip, obstruct vision, or fall off.
- Helmets must be worn before mounting and remain on until after dismounting, following the instructor's guidance.
- At the discretion of the professional authority, in specific cases, riders may be permitted to ride without a helmet under strict conditions, provided they are accompanied by a leader and side walkers. Helmet-free riding is allowed only if the insurance policy explicitly covers this scenario.

The Riding Arena ("Arena")

65. The arena must be of suitable size for the activity, fenced, and have a sandy or equivalent surface of at least **7-10 cm** depth. The surface must be even and level. The arena's size and shape are crucial criteria for the program's quality and the center's professionalism. The professional authority will only approve activities in safe arenas of appropriate dimensions for individual or group riding. It is important to note that using arenas that are too small or too narrow contradicts safety and professional standards.
66. The safety fence must be **1.2 meters high**.
67. Support points in a covered arena must be located outside the riding area.
68. The arena must be free of hazardous objects and areas used for equipment storage.

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69. The arena must be situated in a location with minimal disturbances.
70. If activities extend beyond daylight hours, the arena must have a lighting system that illuminates the entire area without leaving shadowed corners.
71. It is recommended that the arena be equipped with a watering system to keep the surface moist, allowing horses to move comfortably.
72. If multiple instructors or lessons take place simultaneously, the arena must be divided into zones using soft markers such as poles or cones. Any separators used must not pose a safety hazard.
73. If the arena is divided into zones, each instructor must ensure that their riders remain within their designated area.
74. If there is no separate entrance for each zone, any instructor crossing another's area must first notify and receive permission from the other instructor to ensure safety.
75. The arena's sides must be long enough to allow the horse and rider to balance from one corner to another, considering the horse's size and the rider's limitations.

Guidelines for Mounting and Dismounting Areas

76. The mounting/dismounting areas must be free of any obstructions.
77. The mounting areas must include suitable ramps for mounting patients onto the horse.
78. Guidelines for Ramp Construction:
 - The ramp must be built in a way that allows a wheelchair-bound rider to reach the upper platform independently.
 - The standard dimensions for constructing a ramp are as follows:
 - The upper platform must be at least **120x120 cm**.
 - The upper platform must be enclosed with a safety railing on both sides where there is no passage.
 - The surface must be **non-slip**.
79. If the program includes therapy for individuals requiring an elevator, the mounting/dismounting area must include an elevator facility built by the manufacturer or according to their instructions. The elevator must meet international safety standards.
80. The ground surface where mounting and dismounting take place must be **soft (such as sandy soil) or covered with rubber or a non-slip surface**.

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Guidelines for Instructors

81. A therapeutic riding instructor must be certified in **both therapeutic riding and general riding** (teaching, Western, Olympic, or coaching).
82. During the first two years after certification, the instructor will receive guidance and work under the supervision of a professional authority.
83. The instructor must work according to a pre-written **therapeutic plan**, striving to achieve treatment goals set in collaboration with the referring party. The goals should be **functional, measurable whenever possible**, and regularly updated based on the rider's progress. The instructor is required to provide reports (see Section 12).
84. The instructor must hold a **valid first-aid certificate**, ensuring its renewal through refresher courses every two years.
85. The instructor must be able to control horses **both on the ground and while riding**.
86. The instructor must possess skills such as **lunging (with and without a rider) and overall horse care**.
87. The instructor must be able to **interpret horse behavior**.
88. The instructor must be capable of **selecting appropriate equipment** for each rider and **training volunteers** for each lesson.
89. Instructors must wear **appropriate riding attire** (closed shoes, long pants, and a shirt), behave professionally, and be able to communicate effectively with patients and their families.
90. Instructors must regularly participate in **team meetings** to discuss therapeutic aspects and instructional challenges with the professional supervisor.
91. The riding center will **encourage instructors to consult with the professional supervisor** on professional matters.
92. Instructors must participate in **training sessions, workshops, and conferences** as per committee guidelines. Registration as a **certified therapeutic riding instructor in Israel** depends on adherence to these guidelines.

Professional Ethics

The professional ethics code sets out guiding principles reflecting the values of the profession and defining the responsibilities of instructors in their work. The ethical guidelines include:

- The instructor must serve as **a role model in both behavior and language**, using empowering and positive speech.
- An instructor must provide **30 days' notice before leaving**, ensuring a proper and professional farewell process.

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- The instructor must hand over **all relevant information** to the professional authority or the next instructor.
- Every instructor will undergo **appropriate training and certification** and be **mentored** for the first two years, with regular participation in workshops and clinics.
- **The rider's well-being is the top priority** and should guide all decisions during lessons.
- The instructor is responsible for maintaining the **rider's privacy and confidentiality**, even after therapy ends, unless the rider engages in a criminal act or poses a danger to themselves or others.
- The instructor **must not require riders to perform actions that are illegal or unethical**.
- The instructor **must not engage in any sexual contact or relationship** with riders.
- The instructor must treat trainees **with respect and dignity**.
- The instructor must **respect the rider's right to hold values, attitudes, and opinions different from their own**.
- The instructor must **accurately present their qualifications, expertise, and experience**.
- The instructor must obtain **the consent of their clients (past or present) before disclosing their names or any identifying information**.
- The instructor must **ensure they are ethically comfortable** with their actions. If uncertainty arises, the instructor should **consult a professional authority**.
- The instructor must **honor all agreements and commitments**.
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- The instructor must act with **integrity, fairness, and honesty** toward their professional colleagues.
- The instructor must **speak truthfully and avoid misleading others**.
- An instructor should **only conduct a lesson when they are fully confident in their ability to serve the rider safely and effectively**.
- The instructor must strive for **continuous professional growth and improvement**.
- The instructor must exercise **clear professional judgment and always prioritize safety**.
- **Mobile phones must not be used during lessons**, except in exceptional cases approved by the coordinator.

Guidelines for practice

94. The decision to allow **therapeutic riding is based on a risk-benefit assessment**.
95. **Safety is always the top priority**.

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96. A rider is classified as **therapeutic** if there has been a **clear request for therapeutic riding** from them or their responsible guardian, regardless of funding source (e.g., healthcare provider) or riding level.
97. Transition from therapeutic riding to **sports riding** occurs when the rider or their guardian requests it, receives approval from the professional supervisors at the stable, and completes a sports riding registration form.
98. In **therapeutic riding, riding skills are tools for achieving therapeutic goals**—riding proficiency is not the goal in itself.
99. Registering a **therapeutic rider for national competitions** must align with their therapeutic goals.
100. **Instructors must conduct a safety check before riders mount.** This includes inspecting the equipment (such as belly straps) and the riding arena.
101. **Mounting and dismounting are under the sole responsibility and supervision of the instructor.**
102. Instructors must understand **the rider's limitations, choose appropriate techniques, and be aware of their medical condition.**
103. **Lessons should be challenging,** creating a positive and encouraging atmosphere to achieve therapeutic goals.
104. The instructor must **control the horses and adapt the exercises to the rider's level.**
105. Lessons should be **assisted by trained staff (volunteers or other instructors).** The number of assistants is determined based on **professional assessment and actual rider needs.**

Absolute Contraindications to Therapeutic Riding:

(Therapeutic riding is not allowed under these conditions.)

- Acute illnesses
- Acute pain
- Advanced stages of certain diseases (e.g., arthritis, multiple sclerosis)
- Severe osteoporosis
- Certain spinal conditions (e.g., acute disc herniation)
- Scoliosis (Grade 3 and above, curvature over 49°)
- Spinal fixation
- Hip dislocation or high risk of dislocation

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- Down syndrome with **atlantoaxial instability** (before age three, riding is only allowed with specific medical approval and X-ray confirmation of stability)
- Lack of head/neck control
- Post-surgical recovery (typically a **three-month restriction**, but depends on the surgery—requires medical consultation)
- Brittle bones
- Pressure sores
- Blood clotting disorders (e.g., hemophilia)
- Uncontrolled epilepsy (at least one seizure in the past six months)
- Severe balance disorders (e.g., vertigo)
- Extreme underweight
- Severe asthma
- Severe allergies to elements in the horse's environment
- Photosensitivity due to medications
- Acute psychotic conditions
- Acute suicide risk
- Severe, uncontrollable anxiety.

Conditions Requiring Medical Clearance and Special Consideration:

- Pain
- Risk of blood clots
- Heart disease
- Respiratory diseases
- Diabetes
- Young or elderly age
- Underweight/overweight
- Post-surgery conditions
- Epilepsy (allowed if seizure-free for **six months** and with **neurologist approval**)
- Moderate balance disorders
- Medications affecting alertness
- Any deterioration in physical or mental health

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- Unstable medical conditions

Group Sessions

Definition: A group consists of 3–4 participants on their horses.

108. The decision to integrate a therapeutic rider into a group is made solely based on professional considerations. It is determined by the potential benefit to the rider and the advancement of therapeutic goals.

109. Group composition is based on professional criteria, considering riding level, functional ability, age, and the synergistic potential of the group.

110. Group riding is suitable for participants with a similar riding level.

Registration and Documentation

111. Each patient will have a personal file containing all therapeutic documents, a medical certificate approving their ability to ride or a doctor's referral for therapeutic riding, a registration form, an intake summary, an observation summary from the initial sessions, an individual treatment plan, and progress report cards.

112. The registration form will include the patient's personal details and must be signed by them. If the patient is a minor or legally incapacitated, the form must be signed by a parent or legal guardian.

113. The registration form will include a clause requiring the patient/parent/legal guardian to inform the center of any changes in the patient's health condition.

114. Every patient must provide a doctor's approval for riding before starting the activity. This approval is valid for one year only. (It is uncommon for most centers to require annual renewal, though it seems reasonable... Adi).

115. Patient files will be stored securely and accessible only to authorized personnel.

116. Instructors must document each lesson on a report card.

117. Instructors will write periodic summary reports, including an assessment of progress and recommendations for continued treatment. The therapeutic goals will be reassessed in these reports.

118. Instructors will write a final report upon the completion of each therapeutic process.

Media and Communication

119. The activity center will present itself fairly in the media regarding its activities and in relation to other centers.

120. Photographing riders is only permitted with written consent from the rider or their parent/legal guardian.

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121. The center's staff will not disclose confidential information in the media or otherwise.

122. The activity center will share new information about therapeutic riding with other centers through a designated committee that will distribute the information.

123. The center commits to reporting any unethical, illegal, or unprofessional behavior to the committee.

Emergency Situations

An emergency is defined as an unusual event that endangers the people and/or animals present at the activity center. Emergencies require immediate action by the center's management, staff, and volunteers. Examples of emergencies include natural disasters, human-made incidents, fire outbreaks, riding accidents, etc.

124. The activity center will be equipped with all necessary resources to handle emergencies as detailed in Section 4.

125. First Aid Guidelines for Humans:

- The center's instructors and professional staff will be trained in first aid and must hold a valid first aid certification as outlined in Section 7.
- Additionally, the center's management is responsible for training and instructing volunteers in emergency procedures.

126. First Aid Guidelines for Horses:

- In an emergency, immediate action can save a horse's life.
- Preparing and maintaining a first aid kit for horses must be standard practice in every activity center.
- Emergency contact numbers and access to veterinary services must always be clearly visible.

C. Glossary of Terms

Back Riding – This is a situation where a TR Instructor/Therapist from the activity center sits behind the rider on the horse. To ensure safety during the exercise, the TR/Therapist must be able to hold the rider, so they sit at a 90-degree angle to the horse's back. The patient's head should not be higher than the therapist's chest. The horse must be equipped with a bridle and reins for emergency situations.

The **Back Riding** method is risky for both the rider and the therapist and should only be performed with extreme caution to ensure rider safety. It must be conducted with a volunteer or additional instructor leading the horse and two trained side walkers walking alongside.

Certification for **Back Riding (BR)** will be granted as an additional qualification following completion of the therapeutic riding instructor training program.

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Para-Equestrian Riding – Rules and guidelines for this discipline can be found in the FEI rulebook.

D. References

- Dr Anita Shkedi
- NARHA Standards 2009
- *Therapeutic Riding Strategies for Instruction* – Author and Publisher: Barbara Teichmann Engel
- Animal Protection Law, passed by the Israeli Knesset in November 1994.