

Sacred Mirror: Using Horses, Mindfulness, & Metaphor to Heal

Thursday, April 27th, 2017

8:00 AM - 5:00 PM

Investment: \$150

Lunch Provided

Location: STARS Riding Center

33148 K-22, SIOUX CITY, IOWA 51108

PH: 712-239-5042

Attire: Please dress accordingly as we will be both inside and outside for portions of this training, as well as closed toe shoes!

Join Jackie Paulson, Licensed Mental Health Counselor & Registered Yoga Teacher alongside of Julie Dorn from the STARS program on a collaborative journey into the intimate and transformative power of the HORSE-HUMAN CONNECTION.

This Full Day Training designed for both personal interest and professional inquiry will thread mindfulness and metaphor to express the transformative power of utilizing horses in the healing process. Research has shown that horses can enhance the relationship with oneself; resulting in a deeper connection with others and the world around us. Because horses are fully present and without an agenda or judgment, they invite us to be the same, and that is where the deepest and most effective work transpires. This is what motivates our interwoven experience for this training that will blend lecture, discussion and experiential work with the horses.

Among many other benefits for both personal healing and professional use in the helping fields, horses can significantly increase relationship building/therapeutic rapport, efficiency of learning and overall insight of the self and client. Equine Assisted Programs offer a refreshing approach to healing and transformation. Now more than ever, mindfulness is taking the lead in the helping and healing field. Bring in the use of these beautiful animals to your personal journey and watch the dynamic process of change and growth exponentially deepen. For helping professionals, Increase client retention without burnout and experience a more meaningful journey of using horses as a tool for physical, emotional and spiritual growth.

8 CEU Hours Available for Mental Health Counselors

(visit www.scstars.org for learning objectives)

Registration Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone _____

Email: _____

Dietary Needs: _____

Additional Comments or Needs: _____

Please mail this completed form with payment to STARS, 33148 K-22, Sioux City, IA 51108
Payment can be made to STARS