8.5 DISTÂNCIAS MENORES... MAIORES COMPORTAMENTOS ATIVOS? - ASSOCIAÇÃO DO FATOR DISTÂNCIA COM OS MODOS DE DESLOCAMENTO DE CRIANÇAS À ESCOLA .................................................................................................................................................. 179
8.6 PREVALENCIA DE COMPORTAMENTO SEDENTÁRIO EM ESTUDANTES DE 11 A 16 ANOS DE IDADE, DE CÁCERES – ESPANHA .................................................................................................................. 187
8.7 HIPERTENSÃO ARTERIAL, OBESIDADE GERAL E ABDOMINAL EM ESTUDANTES DA ESPANHA ................................................................................................................................. 192
8.8 PERCEÇÃO DA SAÚDE DE ADOLESCENTES DO NORTE DE PORTUGAL: RELAÇÃO COM A ALIMENTAÇÃO, ATIVIDADE FÍSICA E LAZER SEDENTÁRIO ...... 197

9 MULTICULTURALISM AND CHILDREN WITH SPECIAL NEEDS .................................................................................................................. 207
9.1 UNIFIED SPORTS – A CHANCE FOR SOCIAL INCLUSION THROUGH SPORT? ...... 208
9.2 PROPOSTA DE SISTEMA MUNICIPAL DE ESPORTES DE CURITIBA (SIMESP) ...... 214

10 SPORTMANAGEMENT ........................................................................................................................................................................... 217
10.1 “OLYMPIASTADION MÜNCHEN” AND “ENGENHÃO”: 1972 AND 2016 OLYMPIC GAMES’ INVESTMENTS AND LEGACY OF OLYMPIC STADIUMS .......................................................................................... 218
10.2 A COMPARATIVE ANALYSIS OF UNIVERSITIES’ SPORTS ASSOCIATIONS IN SOUTH AFRICA AND KENYA ........................................................................................................................................ 224
10.3 O PERFIL MOTIVACIONAL DE PRATICANTES DE TÊNIS E FUTSAL EM UM PROJETO SOCIAL BRASILEIRO ........................................................................................................................................ 229

11 SPORTS PSYCHOLOGY: SPORTS PHYSICAL ACTIVITY AND LEISURE ........................................................................................................... 237
11.1 TALKING TO GOD AND TALKING TO SELF AMONG MUSLIM ATHLETES .......... 238
11.2 ANTHROPOMETRIC AND PHYSICAL PERFORMANCE CHARACTERISTICS OF PROFESSIONAL HANDBALL PLAYERS: INFLUENCE OF PLAYING POSITION ................................................................. 247
11.3 EPISTEMOLOGIAS, HERMENÊUTICA E FORMAÇÃO DE PROFESSORES: REFLEXÕES PARA O CAMPO DA EDUCAÇÃO FÍSICA ................................................................................................................. 254
11.4 SOBREDOTAÇÃO EM CONTEXTO ESCOLAR E FAMILIAR: ENTRECruzando OLHAES ................................................................................................................................. 261
11.5 METODOLOGIAS E ESTRATÉGIAS DE ENSINO NOS JOGOS DESPORTIVOS COLETIVOS NA AULA DE EDUCAÇÃO FÍSICA .............................................................................................................................. 270
11.6 POSSIBILITIES AND CHALLENGES FOR THE SCHOOL NOWADAYS: DIGITAL NATIVE STUDENTS ................................................................................................................................................. 279
11.7 FORMAÇÃO, PROFISSÃO, CONHECIMENTO E DESENVOLVIMENTO VARIÁVEIS DA IDENTIDADE ................................................................................................................................. 285

12 TEACHER TRAINING .............................................................................................................................................................................................. 295
12.1 “EFFECT OF USING BRAINSTORMING METHOD ON DEVELOPING SOME CREATIV ABILITIES FOR HANDBALL PLAYERS IN COMPETITIONS .............................................................................. 296
12.2 A EDUCAÇÃO FÍSICA NO CURRÍCULO ESCOLAR – ESPAÇO E TEMPO DE FORMAÇÃO DE UMA CULTURA PARA O TEMPO DO NÃO TRABALHO. REFLEXOS PRELIMINARES ........................................................................................................................................... 304
12.3 IDENTIFICAR E PREVENIR O BULLYING DESDE O PRÉ-ESCOLAR ................................................................................................................................................................................................. 310
12.4 “ATENDIMENTO PRESTADO À CRIANÇAS E ADOLESCENTES VITIMAS DE VIOLÊNCIA INTRAFAILMAR SEXUAL SOB A ÓTICA DOS PROFISSIONAIS DO CENTRO DE REFERÊNCIA ESPECIALIZADO DE ASSISTÊNCIA SOCIAL (CREAS) ................................................................................................................................................................................................. 318
12.5 DESENGAJAMENTO MORAL EM AULAS DE EDUCAÇÃO FÍSICA ................................................................................................................................................................................................. 322
12.6 VIOLENÇA IN THE INTIMACY OF THE COUNTRYSIDE ADOLESCENTS ACCORDING TO COMPLEXITY ................................................................................................................................................. 330

13 VIOLENCE AND BULLYING ................................................................................................................................................................................................. 335
13.1 AVALIAÇÃO DAS ATIVIDADES DE ENRIQUECIMENTO CURRICULAR DAS ESCOLAS DE UM CONCELHO DO NORTE DE PORTUGAL .................................................................................................................................................. 336
13.2 JOGO EDUCATIVO DE PREVENÇÃO AO USO E ABUSO DE DROGAS PARA ADOLESCENTES “TÔ LIMPO” ................................................................................................................................................................................................. 346
| 13.3 | CULTURA DE ESCUTA E COMPETÊNCIAS PROFISSIONAIS: UM ESTUDO NA FORMAÇÃO DE PROFESSORES | 357 |
| 13.4 | AS ATITUDES DOS ALUNOS EM RELAÇÃO À EDUCAÇÃO FÍSICA | 366 |
| 14 | FURTHER TOPICS | 373 |
| 14.1 | THE ACTN3 R577X POLYMORPHISM IS ASSOCIATION WITH (LONG – SHORT) DISTANCE FOR SWIMMERS | 374 |
| 14.2 | “ANALYTIC STUDY OF ROCKET SPLIT TECHNIQUE FOR WORLD CLASS SYNCHRONIZED SWIMMING ATHLETE” | 380 |
| 14.3 | TREINAMENTO MENTAL APLICADO A COBRANÇAS DE FALTA NO FUTBOL DE CAMPO | 391 |
| 14.4 | EFEITO LÚCIFER NO FUTEBOL: UM ANÁLISE DA VIOLÊNCIA ENTRE TORCIDAS ORGANIZADAS | 404 |
| 14.5 | BASKETBALL GAMES ANALYSIS OF WORLD CUP FOR YOUTH BASKETBALL U-19: A NEW METHOD | 414 |
8.4 RIDING AND EQUINE ASSISTED ACTIVITIES AND THERAPIES IN THE PORTUGUESE CONTEXT

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8.4.1 Keywords
Riding, Equine assisted activities and therapies, Rural tourism, Riding centers

8.4.2 Introduction and aim
The use of the horse in our country predates the formation of Portugal itself, and came from military use, agriculture and shows, evolving along with Man. In Portugal, riding became a discipline of education and health promotion since 1748, moment when the first schools of riding were formed, which today are called as Riding Centers (RC).

The aim was to know the Portuguese network of RC and assess its available services.

8.4.3 Methodology
It was a transversal study following a predominantly quantitative methodology. The sample included all the Portuguese RC, being obtained through two lists of the Portuguese Equestrian Federation, two online magazines of the specialty and a social network, reaching a total of 271 RC. 198 of these RC meet the selection criteria (to be in operation and having public service, have at least one available way of contact, and accept to participate in the study). For data collection a questionnaire was carried out and validated specifically for the purpose of this study. Questionnaires administration took place between September 2015 and January 2016, and was done by e-mail. The results were statistically analyzed.

8.4.4 Results
We obtained 190 responses verifying that the districts of Lisbon and Oporto have the highest number of RC, in opposition with the district of Guarda (0). The RC offer three categories of services: Horse riding (184), Rural Tourism (114) and Equine Assisted Activities and Therapies (EAAT) (78). The more frequently offered riding modalities are dressage (n=160), vaulting (159) and jumping (123).
Concerning with EAAT we verified that 21 of the 78 RC do not provide it for own resources, but through agreements they establish with institutions and schools.

8.4.5 Conclusion
The RC have a heterogeneous distribution but are present in almost all municipalities of Portugal, being the less provided services the EAAT.

8.4.6 Introduction and Objectives
The origin of the equine species comes from the Eocene period, about 60 million years ago. But the interaction of man with horse took place, according to what is known through the cave paintings found in Lascaux (France), Santander (Spain) and Foz Coa (Portugal) at approximately 17,000 years BC, and according to the same, primitive man used the herds of wild horses as a food source (Fundação Coa Parque, 2016).

The first people to domesticate horses, for later use as a means of transport were probably the nomadic tribes who inhabited the immediate vicinity of Black and Caspian seas in Eurasia, about 4200 BC (Edwards, 2006). In seeking a greater role on this species, the first bridle were developed (in twisted rawhide) accessory that regardless of the changes suffered, is still used today in riding. It is through this and other subsequent adjustments (like the use of stirrups that may help balance), that the horse has become the most effective means of transportation.

This efficiency has allowed its subsequent use for the first time in the Middle East as a means of conquest and maintenance of large empires. Recognized the importance of the horse, the same began to be fed by hand and being performed a reproductive selection, obtaining stronger, faster and larger horse. This artificial selection was to meet the requirements associated with war, transport as well as sport in major circuses of Greece (Edwards, 2006). From this period, and the use of the horse as a beast of war, comes as we typically mount from the left side. These warriors carried heavy swords on their left hip, so it was easier to swing the leg right over the horse.
These and other principles were studied and systematically trained as a means of improving the performance of their cavalry, and they were compiled in a book by Xenophon (430-350 BC), parts of which still exist and are valid today (Edwards, 2006).

In the same period, Hippocrates (458-370 BC) is the first to recognize the benefits of riding in health promotion, nonetheless many more were to make their contribution (Batista, Anastasius, & Sudmann, 2015).

However it is only in 1735 that is thought to have been born the first riding school (Spanish Riding School), inaugurated by Charles VI (Karl von Habsburg, Roman-German emperor), Vienna (Austria).

Portugal, in 1748, follows the same example and forms the Portuguese School of Equestrian Art. Being such schools, and all who are dedicated to the teaching of equestrians, called Riding Centers (RC).

In short, despite the records of the existence of horses in Portugal come from prehistoric period and the existence of RC in Portugal is centuries-old, little is known about the services offered by RC. It is for this reason, we aim to know the RC network and assess the services available to them.

8.4.7 Methodology

The study was transversal following a predominantly quantitative methodology where we use the survey to make collection of data. This method has great flexibility at the level of the internal structure and the information collection means, and its main limitation is the return of questionnaires (Boni & Lent, 2005).

The questionnaire was built based on prior identification of objectives and their operationalization through issues including the variables measured. Subsequently, and after completing the questionnaire by 28 responsible or RC owners (hereafter referred as RC), selected randomly and following the Gil methodology (Gil, 2002), we validate this instrument with recourse to a phone interview, which provided data for changes present in the final version. This version includes the existence of three groups of questions, as provided in Table No. 1. The questionnaires took place between September 2015 to January 2016, by email, and were considered the existence of three selection criteria: be in operation and public service, have at least a means of contact available and accept to participate in the study.

The sample was composed of all Portuguese RC, and was obtained by two listings of the Portuguese Equestrian Federation (FEP, 2015), two online magazines of the specialty (Equisport, 2015; online Riding, 2015) and social networking (Facebook, 2015), for a total of 271 CH.

After verifying a discrepancy on the contacts of RC, we constitute four lists based on contact means available. We obtained with email 157 RC, from web address 11 RC, from facebook 27 RC, and with telephone 48 RC.

The data were analyzed primarily through the frequency analysis with using the SPSS 21, and through bibliographic revision.

8.4.8 Results

Of the 271 interviewed RC, we obtained the participation of 190, and of those who met the inclusion criteria, only eight did not respond. However, we found that 73 of the interviewed did not meet the selection criteria, 65 are not in operation and public service, 3 for not having at least one contact means available, and 5 for not accepting to participate in the study (Table No. 2).

8.4.9 Distribution

Portugal, at the level of administrative division, is divided since 1976 into 18 districts and two insular autonomous regions (Madeira and Azores). Its population is 10,555,853 inhabitants, with heterogeneous distribution, showing a higher population density in coastal areas (National Statistics Institute, IP, 2011).

In terms of distribution of RC in Portugal we verify that Lisbon, Oporto and Faro are the districts with
the highest number of RC, as opposed to Guarda district where we did not found any RC. And that only in the districts of Lisbon and Oporto there is a relationship in the distribution of RC by the number of inhabitants (see Table No. 3).

8.4.9.1  Legal framework
The RC provides three categories of services, being: Sports Modalities, Rural Tourism (RT) and Equine Assisted Activities and Therapies (EAAT).

The legal framework for sports is of the jurisdiction of Portuguese Institute of Sport and Youth, IP (Decree-Law No. 98/2011 of 21 September), in collaboration with the Portuguese Equestrian Federation as a public utility entity that represents all equestrian sport in Portugal and possess the objective of the federative framework on RC and respective athletes, promoting and supporting licensing of its facilities and activities and tutelary of their functioning (FEP, 2016). Of all the RC who were questioned, 184 have some sport, and of these 154 are federated.

Regarding the RT, and specifically to the Equestrian Tourism, its jurisdiction is the responsibility of “Turismo de Portugal, IP”, integrated identity in the Ministry of Economy with promotion objectives, recovery and sustainability of tourist activities (Decree-Law No. 108 / 2009 of 15 May). Of the 190 interviewed RC, 114 perform Equestrian Tourism, but only 17 are registered in RNAAT (RNAAT, 2016).

Finally, and in relation to the EAAT they do not have jurisdiction in Portugal. Of the 190 interviewed, 78 have this therapy.

8.4.9.2  Sport modalities
We consider in Portugal as the first approach to riding the initial vaulting, and the existence of seven sports: jumping, dressage, working equitation, horseball, vaulting, driving and para-equestrian dressage

Initial vaulting, as a method of initiation to riding, has as main objectives, acquire balance, agility and good horse stance, while developing self-confidence, ability allowing you to be laidback and relaxed to natural horse movements. At the same time, acquires specific rules of conduct in this context, encourages the enjoyment for horses and acquire and apply management techniques (Perdigão, Quartim, & Santos, 2006). It is found that 159 RC use the vaulting technique as initiation to riding.

Jumping is an equestrian sport competition, in which the assembly (horse / rider) is assessed through an obstacle course, to be carried out without faults and where the horse must demonstrate an attitude of power, compliance and speed together with the knight's skill (FEP, 2016). In Portugal there are 123 RC with this mode.

Dressage is recognized as the basis of all riding, requiring a perfect connection between horse and rider. Dressage tests have several difficulty levels that correspond to the level of education and ability of the horse and athlete and therefore have different requirements and can range from regional competitions to the Olympic Games (FEP, 2016). This modality, regardless of the level it is performed, is practiced in 160 RC.

In turn, the para-equestrian dressage follows the same principles of dressage, assuming adjustments to the level of the material used, thus allowing athletes with disabilities to compete on an equal basis with other athletes in the form of dressage (Wolf, 2003). In Portugal, it is observed that 59 RC have this type.

The Working Equitation is an equestrian sport based on traditional riding of each country, maintaining and preserving their different traditions, particularly at use of costume and trappings, with the particularity of the athlete only use one hand while riding (FEP, 2016). It is observed that in Portugal, 41 RC have this type.

Horseball is a team game, carried out by two teams of four players each. The objective of the game is to score goal after the team possesses the ball, accomplish three steps between three different players, without the ball be intercepted by the opposing team. Currently eight countries actively participate in the development of Horseball: Austria, Belgium, Spain, France, Italy, Portugal and the United Kingdom (FEP, 2016). However, only 10 RC offer this modality to its customers.
Vaulting or also called Voltige is an equestrian discipline that encompasses the rhythmic and acrobatic gymnastics and is performed on the horse's back (FEP, 2016). In Portugal, this mode is only present in 13 RC.

Finally, driving is an equestrian sport team. In which the horse should show freedom, ease, harmony and regularity of movements during the journey to be undertaken, leaving to the rider show driving skills and command of his team (FEP, 2016). In Portugal, it is observed that 33 of those surveyed develop this sport.

8.4.9.3 Rural Tourism
It is part of the offer of rural tourism the Adventure Tourism, Ecotourism, Nature Tourism, Rural Tourism, Agritourism, Sports Tourism and Equestrian Tourism. These activities have in common the fact that they are developed in the country, where in addition to accommodation and catering, it is essential to consider the multiple quality services (Vareiro, 2007). Pimenta (2015), states that guided sightseeing, horse riding and hiking trails rails are the activities with highest demand by tourists. Among the surveyed RC, 114 were found to have this service.

8.4.9.4 Equine Assisted Activities and Therapies
Equine Assisted Activities and Therapies (EAAT) are a complementary therapy that uses the horse as a mean in an interdisciplinary approach in the areas of riding, education and health (Niehues & Niehues, 2014). Using a set of reeducation techniques which acts to overcome sensory damage, motor, cognitive and behavioral through recreational and sporting activities, which facilitate the practitioner’s cooperation (Munaretto, 2006), and where the horse acts as kinesiotherapeutic agent, process facilitator, teaching and learning, and as agent of inclusion and social reintegration. This therapy can be applied to persons of any age suffering from physical or mental disability, even if they never had any contact with the animal (Bastani & Travassos, 2013). We found that in 78 RC there is this complementary therapy, of which 21 RC choose to make available their space to an institution or school, leaving to them the responsibility of hiring a technician with expertise in EAAT. 48 RC have their own EAAT technician and 9 RC collaborate in simultaneous with their own technician and with the institutions technician in cooperation.

8.4.9.5 Distribution
With the objective to verify the distribution of the different equestrians modalities, we consider the existence of eight regions: North Coast (made up of the municipalities of Viana do Castelo, Braga, Aveiro and Oporto), Northern Interior (comprised by the municipalities of Bragança and Vila Real), Viseu (made up of the districts of Viseu and Guarda), Central (made up of the districts of Leiria, Coimbra and Castelo Branco), Lisbon and Vale do Tejo (comprising the municipalities of Santarém, Lisbon and Setúbal), Alentejo (comprised by the municipalities of Portalegre, Évora and Beja), Algarve (constituted solely by the municipality of Faro) and Islands (which comprises the autonomous region of Madeira and the Azores).

Initial vaulting, dressage, para equestrian dressage and EAAT are available in RC, in all regions of Portugal. Initial vaulting and dressage are the most common modalities in RC. Regarding the modality of jumping we verify that North Coast and the Algarve are the regions with the highest number of RC that offer this modality. Dressage is the equestrian sport more practiced in Lisbon and Vale do Tejo. In what concerns the para equestrian dressage it appears that the North Coast region is the region where this modality is more widespread.

Regarding rural tourism, it is found that Lisbon and Vale do Tejo, North Coast, Algarve and Center are, respectively, the regions with higher offer of this service. It is observed, in contrast, the absence of this service in Viseu.

Finally, regarding EAAT it turns the North Coast, Lisbon, Vale do Tejo and the Algarve are the regions, respectively, with the highest number of RC that have this therapy. In contrast, in the region of the Islands, of 10 RC, only 2 develop EAAT (Table No. 4).

Monthly payment
Monthly payment of sport modalities was obtained by taking into account a student who performs initial vaulting, benefiting of a lesson per week and without its own horse, or in case of tickets, the price for the four lessons. Although we did not have the answer or the same does not apply in 65 RC, the monthly payment more practiced in 98 RC is between 30 to 60 euros. And the second most practiced in 18 RC varies between 60 to 90 euros (Table No. 5).
In the case of rural tourism, and considering the characteristics of this activity, to be sporadic, include periods of higher and lower demand in some cases may be seasonal, and consider different values depending on the route and its durability, we couldn’t consider its value.

Finally, regarding EAAT, and considering the value of therapeutic fees for individual customers who benefit of one session per week, or in the case of tickets, a set of four tickets, we obtained response of 65 RC. We note that the RC where we got no response, 112 do not have this service. It is thus apparent that the value of the most practiced monthly in 46 RC is 30 to 60 euros. And the second, practiced in 10 RC, is less than 30 euros (according to Table No. 5).

Table 5: Value of payments by customers, in sports and therapeutic services

<table>
<thead>
<tr>
<th>Monthly payment</th>
<th>Up to 30 €</th>
<th>30 a 60 €</th>
<th>60 a 90 €</th>
<th>Higher 90 €</th>
<th>Indefined</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sports</td>
<td>9</td>
<td>98</td>
<td>18</td>
<td>0</td>
<td>65</td>
<td>190</td>
</tr>
<tr>
<td>Terapeutic</td>
<td>10</td>
<td>46</td>
<td>5</td>
<td>4</td>
<td>125</td>
<td>190</td>
</tr>
</tbody>
</table>

8.4.10 Conclusion

Of the 271 CH surveyed, 73 did not fit in this study, being the most significant criteria for exclusion found in 65 surveyed, the RC are not in operation and public service. These data may be due to economic recession felt in Portugal in recent years. Nonetheless we do not have enough data to make a statement. Of the remaining 198 RC, which met the criteria for participation, we just could not get the participation of 8 RC. Data that concern the study a high representation of the reality of RC in Portugal, and therefore the results can be generalized in this context.

RC have a heterogeneous distribution, but are present in almost all regions of Portugal, with the exception of Guarda where have not been found RC. In turn, the regions with a higher representatively of RC are Lisbon (38), Oporto (21) and Faro (19), data suggest that the distribution of the RC does not follow the same distribution of the Portuguese population. This data point to cultural differences in the population of different regions of Portugal.

Globally, there are three types of services offered in RC. The sports are the most available service, present in 123 CH. Followed by rural tourism available on 114 RC. And finally, it was verified that 78 RC have EAAT, however, only 48 RC offer directly this service, with the remaining 21 RC renting its facilities and means to schools and / or institutions.

In terms of distribution of services made available by the RC, we found differences in the various regions of Portugal. The EAAT, initiation vaulting, dressage and para-equestrian dressage are the only services available in all regions of Portugal. Jumping is not available only in Northern Interior. Similarly it appears that rural tourism, and the modalities of working equitation, vaulting, and driving just are not available in the region of Viseu. In contrast, Horseball is the equestrian sport less practiced, with the same available only in the region of Lisbon and Vale do Tejo, Central and North Coast.

Also we verified the legal framework of the services provided by the RC, and with the exception of EAAT, are regulated by the Portuguese State agencies. At the level of equestrians modalities 154 RC are duly registered in the Equestrian Federation. Regarding rural tourism we have found that only 17 RC are registered in Turismo de Portugal, however, we highlight that is an ongoing action by this agency, in which and by offering special conditions, it is intended that the RC regularize their situation. It is observed also that these data are consistent with Batista, Anastacio and Sudmann (2015).

Finally it turns out that there are no differences among the monthly payment of sporting, and therapy services in the more frequent value. However, in relation to the second more frequent monthly payment, it was found that the same at sporting level is between 60 and 90 euro, while the value of the monthly treatment is below 30 euros. These data may indicate, on one hand to a humanitarian service by RC, or may point out to the devaluation of the EAAT as a complementary therapy.

However we note that we did not find any studies that addressed this issue so we cannot compare the data obtained.