Rebound Therapy Outcome Measures Toolkit

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What is Rebound Therapy?

By the founder - Eddy Anderson

“So what on earth is Rebound Therapy?”

In one sense that is a slightly inaccurate question, for the true value of Rebound Therapy lies in the fact that part of what occurs is not "on earth". The essential value of the process is that, for a brief moment, ‘earth’ is left behind, and a new freedom is found in controlled movement away from gravity’s straitjacket, in a sort of relaxed 'poetry of motion' available to all, irrespective of any disability.

The phrase ‘Rebound Therapy’ was coined by the founder, Eddy Anderson MCSP, Cert Ed, in 1969 to describe his specific model of use of trampolines in providing alternative opportunities for movement, therapeutic exercise and recreation for people with a wide range of special needs. Participants range from mild to severe physical disabilities and from mild to profound and multiple learning disabilities, including dual sensory impairment and autistic spectrum.

Rebound Therapy is used to facilitate movement, promote balance, promote an increase or decrease in muscle tone, promote relaxation, promote sensory integration, improve fitness and exercise tolerance, and to improve communication skills.

It is popular in special needs schools and is becoming increasingly popular in mainstream schools with a special needs unit; partly because the trampoline is a piece of apparatus that virtually all people, regardless of their abilities, can access, benefit from and enjoy.

In addition to the benefits listed above, Rebound Therapy is an ideal vehicle for cross curricular teaching activity; with the potential for teaching such things as numeracy, colour recognition, positioning (left, right, backwards, forwards, clockwise and anticlockwise), communication, social awareness and consideration of others.

The unique properties of the trampoline offer ample opportunities for everybody to enhance movement patterns. The work is intrinsically motivating and enjoyable and returns high value in therapeutic terms for the time and the effort involved.

Benefit is enhanced considerably when the operator achieves the skill to create variable patterns of movement in harmony with the needs of the user. The two then share the surface of the trampoline, with the operator adjusting the effect of weight and speed in order to ensure smooth transitions between the phases of movement undertaken.

The fact that the activity is so enjoyable can enable it to be used as a motivational aid to learn. Many teachers also report increased concentration and willingness to learn in the classroom following a Rebound session.

The principles of Rebound Therapy form the basis of all gymnastic movement and are therefore a logical and advisable starting point for all trampoline coach training – even for those who have no intention of teaching people with disabilities.

That sums it up in essence, but let us examine the trampoline and its properties in more detail:

Physical Properties of the Trampoline

1) Unique, three-fold effect on body organs, systems and muscles
   A) weight increases and decreases to the point of weightlessness
   B) there is acceleration from stillness to varying speeds
   C) there is deceleration from varying speeds to stillness