

5-2013

# Effectiveness of Animal-Assisted Therapy: Therapists' Perspectives

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## Recommended Citation

Budahn, Nichole M., "Effectiveness of Animal-Assisted Therapy: Therapists' Perspectives" (2013). *Master of Social Work Clinical Research Papers*. Paper 159.  
[http://sophia.stkate.edu/msw\\_papers/159](http://sophia.stkate.edu/msw_papers/159)

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## Effectiveness of Animal-Assisted Therapy: Therapists' Perspectives

by

Nichole M. Budahn, B.S.W.

MSW Clinical Research Paper

The Clinical Research Project is a graduation requirement for MSW students at St. Catherine University/University of St. Thomas School of Social Work in St. Paul, Minnesota and is conducted within a nine-month time frame to demonstrate facility with basic social research methods. Students must independently conceptualize a research problem, formulate a research design that is approved by a research committee and the university Institutional Review Board, implement the project, and publicly present their findings. This project is neither a Master's thesis nor a dissertation.

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### Abstract

Animal-assisted therapy has frequently been used with children who have autism spectrum disorder. This study examined animal-assisted therapists' perceptions of effectiveness of animal-assisted therapy with children who have DSM-IV mental health diagnoses. The researcher recruited self-identified animal-assisted therapists using social media sites LinkedIn and Facebook. Two therapists completed the fourteen question qualitative survey in full. Three themes were found in this study; comfort, confidence, and benefits. While this study produced definite themes, more research needs to be conducted on animal-assisted therapy and children with DSM-IV mental health disorders. Very few studies have been conducted on the impacts of animal-assisted therapy with children who have a various DSM-IV mental health disorders.

### Acknowledgements

As a one-year advanced standing student I was worried that I would not have the chance to make meaningful relationships with my professors, but I was very wrong! I would like to thank all of the social work faculty and staff at St. Catherine University and the University of St. Thomas, especially Valandra and David Roseborough. Valandra, thank you! You eased my stress levels when you said, “It is your best effort in this moment.” Your flexibility and your support throughout the research process have greatly been appreciated. While I could have written this paper without you, I would not have wanted to. Your feedback has been valuable and I feel as though I wouldn’t have been as successful without you as my research chair.

I would also like to thank my committee members, Jennifer Gervais and Traci Thompson. Jennifer, without your knowledge of children’s mental health, my paper would have had some misleading and confusing information. Traci, it was delightful to work with you again, especially on a topic that you and I are so passionate about. Your support throughout my educational and professional journey has been extremely encouraging.

Mom, your continuous support in my education and in my academic writing has been overwhelming, and I could not have gotten to where I am without you. I am gracious for all of your help throughout the years, especially the many redirections you gave me when I had hours of homework in middle school. Dad, thank you for letting me pick your business mind while I encountered difficulties at my field placement this year. Thank you both for emphasizing the importance of Christian education when I was young because it greatly influenced my values, ethics, and career choice as an adult.

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## Introduction

### **Purpose Statement**

Children with mental health diagnoses face many more challenges than children without mental health diagnoses. When providing services for children with mental health disorders it is important to look at all factors influencing the well-being of each child. In social work practice this concept is known as the bio-psycho-social-spiritual perspective. Good holistic care accounts for each element in the bio-psycho-social-spiritual perspective during the assessment process, the therapeutic journey, and all interventions. This researcher is interested in therapists' perceptions of benefits yielded from animal-assisted therapy with children who have been diagnosed with a mental health disorder using the Diagnostic and Statistical Manual of Mental disorders, fourth edition (DSM-IV).

### **Definitions**

**Diagnostic and statistical manual of mental disorders, fourth edition (DSM-IV).** The DSM-IV contains numerous symptom lists to aide in the diagnosing process of a mental health disorder. This manual is separated into sixteen categories starting with disorders diagnosed in early infancy, childhood, or adolescence and ending with personality disorders. In addition to the different diagnostic categories the DSM-IV uses a multiaxial approach. This multiaxial approach includes the clinical disorder or the clinical concern, personality disorders and/or mental retardation, medical conditions, psychosocial and/or environmental issues, and a global scale of functioning score. The manual also provides decision trees which help practitioners differentiate between diagnoses that possess similarities.

**Animal-assisted therapy.** Pet Partners, formerly known as the Delta Society, is a professional animal-assisted therapy organization which states that animal-assisted therapy

...is a goal-directed intervention in which an animal meeting specific criteria is an integral part of the treatment process. Animal-assisted therapy is delivered and/or directed by health or human service providers working within the scope of their profession. Animal-assisted therapy is designed to promote improvement in human physical, social, emotional, or cognitive function. Animal-assisted therapy is provided in a variety of settings, and may be group or individual in nature (Pet Partners, 2012).

**Animal-assisted handler.** Most of the programs in the United States use volunteers who have trained their pets for animal-assisted therapy use. Some types of animals currently used in animal-assisted therapy are cats, chickens, horses, lizards, and dogs. The animal and volunteer are used with patients and health professionals. In this study the handlers themselves are human service professionals with the titles counselors, or psychologists.

### **Significance of Study**

Mental health concerns can erupt at any age. In Minnesota, it is predicted that one in five children and adults have a mental health disorder (Minnesota Department of Human Services, 2012). It is estimated that over ninety-one thousand children in Minnesota need mental health services for mental health disorders. Researchers predict that 5% of preschoolers and 9% of school-age children have a diagnosis which greatly impairs functioning in multiple aspects of a child's life (MN Department of Human



Services, 2012). Previous studies have shown that children and adolescents with severe mental health disorders have an increased risk of high school dropout, entering the juvenile justice system, and struggling with substance abuse problems than their peers who do not have mental health issues (MN Department of Human Services, 2012).

### **Importance to Social Work**

The social work profession utilizes the bio-psycho-social-spiritual approach to inform various stages of practice. Social workers should stay informed about all available treatments due to their commitment to clients and their ethical obligation of competence. If social workers fail to provide interventions that contain all areas of the bio-psycho-social-spiritual model they limit the holistic success of their clients. The National Association of Social Work states that the primary responsibility of social workers is the wellbeing of their client (Code of Ethics, 2008). Social workers support clients' right for self determination except in specific situations where there is a safety risk toward the individual client or others. The Code of Ethics (2008) continues by stating that social workers should remain current in professional practice and literature by critically examining topics and knowledge that relate to social work in addition to continuing education requirements.

Caregivers, teachers, and other individuals that care for children with mental health diagnoses often feel hopeless and helpless. According to Ogilvie, Morant, and Goodwin (2005) caregiving for people with schizophrenia, dementia, or unipolar depression significantly impacts multiple areas of the caregiver's life. The caregiver's beliefs of the disease in addition to previous exposure to the mental health system strongly impact caregiver burden. Caregiver burden often leads to increased levels of

stress, negatively impacts the caregiver's health, and causes more worry (Murphy, Christian, Caplin, & Young, 2006; Ogilvie et al., 2005).

The behavior of youth with mental health disorders can become disruptive, overwhelming, and stressful. After an extended period of time caregivers and other supportive adults sometimes feel that all options have diminished after children have been expelled from multiple schools and/or discharged from several mental health settings, but this is not the case. Yes, the school or treatment center may not have worked for that child, but there are other interventions that could help. Animals are not widely used in hospitals or treatment centers when in fact they may be an extremely helpful intervention for children.

### Literature Review

Animals have long served as companions to humans; in recent decades researchers have started to study the human-animal relationship in greater detail. This literature review begins by providing a brief history of the human-animal bond, the role of animal companions, and physical and emotional health benefits. Animal-assisted therapy will be explained as well as the different practice settings where it is utilized. Finally, studies using animal-assisted therapy to treat children and adolescents with mental health disorders will also be discussed.

### **Human-Animal Bond**

**History of human-animal bond.** According to archeological evidence humans and animals have lived side by side since 12,000 BCE. In fact, ancient peoples lived with domesticated wolves and were often buried with them, showing the strength of their relationship (Serpell, 2000; Serpell, 2011). Five thousand years later people viewed dogs

as guardians and equal partners in hunting and fishing (Serpell, 2000). Various cultures have believed that all living creatures have an invisible soul and should be respected. The Inuit people believed that hunted animals came back in the form of ghosts to seek revenge from humans (Serpell, 2000). This belief led the Inuit people to treat all animals with care and respect.

Even before ancient Egyptians began idolizing animals, earlier cultures were doing so. The Egyptians were one of the first populations to think of animals as companions. The importance of pets to the Egyptians was shown through long periods of mourning for their pet dogs and extent individuals went to in order to embalm and mummify their dogs, so they could join them in the afterlife (Walsh, 2009a). In the middle ages animals were believed to have supernatural qualities and the practice of keeping animals for companionship diminished. Instead owners kept animals that possessed supernatural means to protect themselves from other people (Serpell, 2000). This view of animals as supernatural shifted in the late seventeenth century; animals were acknowledged for their nurturing relationships and purebred cats and dogs were popular among royal families in China and Japan (Serpell, 2000; Walsh, 2009a).

**Importance placed on companion animals.** Clearly, animals have played a crucial part in society for thousands of years. Today over 62% of households have pets and the majority of people consider their pets to be family (American Pet Products Association, Inc., 2012). Pets have many different roles and functions within the family system and society. Animal companions are often extraordinarily loyal to children, older adults, and people with disabilities (Yorke, 2010). Specifically companion animals encourage children to form an interactive relationship that fosters affection, security,

trust, and higher self-esteem (Walsh, 2009b; Yorke, 2010). In recent years the importance of companion animals has increased perhaps due to fewer children living with both biological parents. A study conducted by Bodsworth and Coleman (2001) found that children in single-parent families bond with pets at a higher level than children in two-parent families. These companion animals have been found to reduce fearfulness, loneliness, and boredom in children while building a strong attachment like that of a sibling or best friend (Turner, 2005).

**Health benefits of companion animals.** The benefits of companion animals are disputable. Several researchers studied the relationship between animals and the cardiovascular effects on humans finding positive results while others have not. Parslow and Jorm (2003) do not agree that there is a relationship between pet ownership and good cardiovascular health. Instead, they found that pet owners had higher diastolic blood pressure than non-pet owners.

While Parslow and Jorm found information pointing that there is not a positive relationship between pet ownership and good cardiovascular health Friedmann, Katcher, Lynch, and Thomas found the opposite to be true. In 1980 Friedmann et al. studied ninety-two patients who were discharged from a coronary care unit to analyze the impact that pet ownership had on survival. Within one year of discharge fourteen patients died and eleven of those patients did not have animals. After adjusting for physical factors the researchers found that social affiliation and companionship which pet owners had were important health benefits.

For some time researchers tried to figure out if pets cause humans to live healthier or if healthy people have pets. The answer is possibly both. Research conducted

in Germany and Australia yielded results stating that pet ownership and good health is causal and corrective (Headley & Grabka, 2007). The researchers also noted that pets have many different benefits for owners such as companionship, a conversation starter, and relaxation causing a decrease in blood pressure, exercise motivation, and strengthened immune system. Petting an animal that a person has formed a bond with has significant health benefits; when petting a dog blood pressure decreases to a level lower than that of a casual conversation or reading out loud (Nagengast, Baun, Megel, & Leibowitz. 1997; Walsh, 2009b). Allen, Blascovich, and Mendes (2002), add to previous research by noting the significance of pet presence compared to human presence of a sibling or close friend in reducing the cardiovascular effects of stress.

Not only does the presence of companion animals decrease cholesterol levels, blood pressure, and stress they also promote a better immune system (Friedmann, Barker, & Allen 2011; Headey, 1999; Walsh, 2009a; Wild, 2012). The presence of companion animals is associated with increased production of specific neuro-chemicals in humans that are associated with relaxation. During adolescence companion animals are friends that provide attention and love when parents are not able and assist adolescents in distancing themselves from their parent or other primary caregiver (Turner, 2005). While studies have not shown conclusive support that pet owners are healthier than non pet owners, pet owners expressed that their animal increased their quality of life through companionship, reducing depression, and increasing calmness while providing them with a sense of purpose (Wells, 2009). No matter what the age of the pet, owners of companion animals have a greater sense of purpose, security, belonging, family, and self-identity. Pets can also motivate their older owners to engage in daily activities like

exercising and socializing with others (Batson, McCabe, Baun, & Wilson, 1998; Walsh, 2009b).

### **Animal-Assisted Therapy**

Animal-assisted therapy is under the umbrella of animal-assisted activities. There are specific objectives to animal-assisted therapy, whereas the guidelines for animal-assisted activities and animal-assisted interventions are more flexible. Before differentiating terms it is important to understand how animal-assisted therapy originated and evolved throughout time.

**History of animal-assisted therapy.** The human-animal bond has been displayed since 12,000 BCE, but it wasn't until the 1700s that the relationship was considered positive and beneficial for humans (Thompson, 2005). In 1792 the New York Retreat, a mental asylum in England, was the first to use animals as a therapeutic agent (Altschiller, 2011; Serpell, 2011; Thompson, 2005). The New York Retreat incorporated a variety of small animals into their establishment as a way for patients to think about others and interact peacefully. Samuel Tuke, the grandson of founder William Tuke, wrote

...with a number of animals; such as rabbits, sea-gulls, hawks, and poultry. These creatures are generally very familiar with the patients; and it is believed they are not only the means of innocent pleasure; but that the intercourse with them, sometimes tends to awaken the social and benevolent feelings. (Altschiller, 2011, p. 3-4)

Around forty years later the British Charity Commissioners recommended that mental asylums include sheep, hares, monkeys, and other social animals after seeing the

horrible conditions of several institutions (Altschiller, 2011). In 1867, a German treatment center that specialized in treating people with epilepsy recognized the benefits of animals for humans and added pets to their therapeutic team. This treatment center later went on to care for people with various physical and mental disorders and continued using pets in their program. As the medical model continued to get more attention animal-assisted therapy was pushed to the side. Florence Nightingale, a British nurse, continued to advocate for animal companionship telling readers of her book, *Notes on Nursing*, the health benefits small pet animals have on those whom are sick (Altschiller, 2011).

Animal-assisted therapy was first documented in the United States in 1944 at the Pawling Army Air Force Convalescent Hospital in New York (Altschiller, 2011). Farm animals like horses, chickens, and cows were part of the treatment plan for the soldiers who were hurt in battle and/or suffering from psychological trauma. No scientific evidence was collected to evaluate if the use of animals produced a significant difference in recovery and the program ended after only one year (Altschiller, 2011). In 1961 Boris Levinson presented his article about pet therapy at the American Psychological Association meeting and his article was printed in the *Mental Hygiene* journal. Levinson's article was written after he found a severely impaired boy talking to "Jingles" his dog, when they had been left alone for a few minutes (Primm, 1999; Serpell, 2000; Sherpell, 2011; Thompson, 2005). This was significant because Levinson was not able to get the child to talk in previous sessions.

As animal-assisted therapy became increasingly popular among practitioners and studies suggested that animals bring beneficial results to humans the Delta Foundation

was formed in 1977. The goal of the Delta Foundation was to continue researching the human-animal bond and its effectiveness as a therapeutic tool (Altschiller, 2011). The Delta Foundation changed its name to the Delta Society and published the first handbook for animal-assisted activities and animal-assisted therapy in 1996. Today the Delta Society is known as Pet Partners and explains the requirements animal companions must possess in order to be involved in animal-assisted therapy and has created universal definitions for important words used in animal assisted therapy.

**Animal-Assisted Therapy versus Activities.** Animal-assisted therapy is an example of an animal-assisted activity, but animal-assisted activities are not an example of animal-assisted therapy. The phrase animal-assisted activities applies to a larger amount of situations compared to animal-assisted therapy. Pet Partners, along with other researchers, agrees that animal assisted-activities provide the opportunity for human-animal interaction for the purposes of education and recreation. A nursing home employee bringing their dog to work once a month for the older adults to pet is an example of animal-assisted activities; this activity does not have treatment goals. A licensed marriage and family therapist who has a young child talk to a cat the way he would talk to his sibling during conflict is an example of animal-assisted therapy. The cat is used in the role play to help the boy work toward his goal of assertive communication in sibling conflict. Besides having treatment goals in animal-assisted therapy a health/human professional is usually the handler of the animal and plays an active role in the session (Altschiller, 2011; Griffin, McCune, Maholmes, & Hurley, 2011).



**Various therapeutic settings.** Animal-assisted therapists have been used in a variety of places with a wide range of age groups. This section will explain different programs in assorted settings. In addition to discussing animal-assisted activities, animal-assisted therapy will also be explored.

***Programs for the older adults.*** As people in the United States have lived longer the demand for elder care has increased. People who are elderly often face more severe physical and psychological problems like hip transplants, bereavement of spouse and friends, and depression from not being able to do the things they used to enjoy. In the 1970s two researchers from the Ohio State University studied dog interaction with elderly persons and found that they were more self-reliant when interacting with dogs (Altschiller, 2011). This study lead other researchers to study the benefits that animal assisted activities and therapy would bring to the elderly population. Anthropologist Ashley Montagu discovered that the elderly benefit emotionally and physically from touching and feeling an animal (1971). It is well known that the number of people approaching retirement age in the next twenty-five years will more than double and it is crucial that programs are available that promote longevity and happiness in elderly persons. Dogs are not the only animals that help promote pro-social behavior and reduce agitation in the elderly. Cats, birds, and fish are also used in nursing homes and rehabilitation centers.

***Programs in prison.*** The first successful prison-based animal therapy program occurred in 1975 at the Lima State Hospital for the Criminally Insane in Ohio (Altschiller, 2011). The social worker at the hospital noticed a positive improvement of the inmates who interacted with the animals and took care of them. Later, a yearlong

study was conducted and results showed that there were fewer incidents of suicide and less medication usage amongst the inmates whose pod had animals than inmates whose pods did not have animals (Altschiller, 2011). At this time there are several programs where the inmates train cats, dogs, and horses to be companion/service animals (Granger & Kogan, 2000). Some of the various programs are Pets as Therapy, People-Love-Animals, Working with Southeastern Guide Dogs, Inc., Animals in the Military Helping Individuals, and Wild Horse Inmate Program. Many people predicted that the inmates' would provide low quality animal training, but the exact opposite was true. Prison based animal programs produce positive benefits for inmates by giving them a sense of purpose and animals that would otherwise get sent to shelters are trained as companion or service animals (Altschiller, 2011; Granger & Kogan, 2000).

*Programs in health care.* Health care facilities are using animal-assisted therapy programs in acute and long-term care settings. Many nursing homes/rehabilitation centers welcome cats, dogs, and birds into their facilities. In recent years assisted living facilities have established "pet-inclusive communities" encouraging residents to bring their pets with them. Animals have many benefits such as decreasing loneliness and depression. In a 1993 study medical personnel found that when an animal was brought to sixteen homebound patients' residences the blood pressure and the pulse lowered after an appointment with the therapist's dog present (Harris, Rinehart, & Gerstman). Within long-term care settings researchers have observed positive benefits of animal assisted therapy including increased interaction with other residents as well as staff in the centers/facilities (Johnson, R., 2011). Edwards and Beck (2002) found that older adults

in an Alzheimer's unit had an increase in weight gain and food intake when looking at fish during mealtime.

*Programs for children with cognitive, physical, and psychological disorders.*

Animal-assisted therapy has helped children and adolescents with various diagnoses in many different ways. In 1998 counselors were relieved after a therapy dog helped withdrawn students calm down and return to a sense of normalcy after a school shooting occurred killing four people at Thurston High School in Ohio (Altschiller, 2011). The results of animals in classrooms have shown that children are initially fearful, then trustful, and then their two realities join as one. Animals of all sorts have given children comfort and therapeutic calming (Gee, 2011). Schools across the country have started to participate in READ, a program designed for elementary students to face their fear of reading with the help of a therapy dog (Intermountain Therapy Animals, 2012). Therapy dogs have also been extremely helpful for children with autism spectrum disorder. The North Star Foundation is one agency that has helped families train, care, and strengthen the relationship between dog and human in order to help children with autism.

Dogs are not the only animal that can assist children and adolescents. Horses are frequently used with children who have autism and children with physical disabilities such as cerebral palsy. There are different types of therapeutic approaches that use horses: hippotherapy, equine facilitated psychotherapy, and therapeutic horseback riding. Hippotherapy is a physical, occupational, or speech therapy treatment which uses equine movement to achieve functional outcomes (Altschiller, 2011). Equine facilitated psychotherapy is an interactive process where a licensed mental health practitioner and a client address psychotherapy goals through the use of a suitable horse. Therapeutic

horseback riding, an equine-assisted activity, contributes positively to cognitive, physical, emotional and social well-being of people with disabilities and positively affects other areas of life like therapy, education, and recreation (Professional Association of Therapeutic Horsemanship International, 2012).

Animal-assisted therapy is used in a variety of settings with children and adolescents. Recently, animal-assisted therapy has been recognized in the fields of nursing, medicine, and psychotherapy. Medical and mental health professionals have found that animals help build rapport with children and are complementary co-therapists (Prothmann & Fine, 2000). Children with mental health disorders that include psychosis were greatly affected by animal-assisted therapy. Researchers studied children in the hospital with chronic psychosis and found patients felt safer and more relaxed when animals were present. Children who had animals in their group therapy sessions interacted more than groups where the animals were not present (Beck, Seraydarian, & Hunter, 1986).

Another study conducted by Barker and Dawson (1998) investigated whether children with severe mental health disorders would respond with more positive results with animal-assisted therapy or conventional relaxation methods. Children with affective disorders were the only group that had a statistical decrease in anxiety among the children in the conventional relaxation method group. Furthermore, animal-assisted therapy has been found to be successful in treating acute and chronic psychosis (Barker & Dawson, 1998; Prothmann & Fine, 2000). Children with severe mental health disorders often have positive results with medication, but that does little for the social aspect. When suffering from a severe mental health disorder children usually lose their interest in interacting

with others. Animal-assisted therapy usually works extremely well because the animal serves as a way to rebuild friendships (Prothmann & Fine, 2000).

**Limitations to animal-assisted therapy.** Many people believe that animal-assisted therapy is not fair to the animal, and in some instances those people are correct. If handlers are not attuned to their animal it can endure an unnecessary amount of stress (Serpell, Coppinger, & Fine, 2000). If animals are stressed out they cannot facilitate therapy to their full potential the same way a therapist does not perform well when sick or tired. Most people are aware of the physical needs that caring for an animal, but alert handlers are also aware of the animal's social and behavioral needs in addition to physical needs, developmental milestones, training methods, and the ability to achieve realistic goals (Serpell, Coppinger, & Fine, 2000). Handlers should give their animals an adequate amount of time between sessions to take care of biological needs and clear his or her mind. Handlers need to consider stages of development when working with their animal and give them goals which are realistic and age appropriate.

As animals became a more significant intervention in children's mental health treatment researchers began to examine the relationship between mental health disorders and childhood animal abuse. Schaefer, Hays, and Steiner (2007) received information from 174 therapists about their experiences with clients and their client's history of animal abuse in the last five years. 28% of therapists reported that client's had witnessed animal abuse issues outside of the therapeutic relationship and one in five of those cases the child was the perpetrator. In cases where children have been abusive toward animals' in the past animal-assisted therapy may not be the best intervention strategy. Safety

should always be the handler's number one priority, whether that is the child's safety, the animal's safety, or their own safety.

### **Research Question**

This researcher believes that animals can be quite comforting and that animals most likely aid in developing the therapeutic relationship. This researcher was interested in what unique differences animal-assisted therapy yield in children who have mental health diagnoses. The researcher hoped to answer the following question through this research study, "How does animal-assisted therapy help children who have a mental health disorder?"

### Conceptual Framework

### **Reflexivity Statement**

This researcher became interested in the effects of animal-assisted therapy in children with DSM-IV diagnoses after writing a paper regarding animal-assisted therapy and children with autism spectrum disorder. Originally the researcher was interested in how to incorporate pets and other objects that bring sentimental value to people who have to seek residential treatment for substance abuse or mental health issues. A few weeks later the researcher started to intern as a therapist at a mental health day treatment program with children ages five to eighteen. Many of the children at the day treatment center spoke highly of their pets, which made the researcher wonder if these children would react positively to animal-assisted therapy.

In addition to the positive remarks the children had of their pets the researcher has seen how difficult it can be for children and adolescents to relax and get comfortable. When a child or adolescent is not comfortable it is impossible to talk about family

conflicts, past abuse, and other personal issues. The researcher has seen the positive response children have to activities that include creativity and physical exertion and became curious how they would react to an animal as part of their therapeutic treatment. In the researcher's opinion children with mental health diagnoses may have a greater chance of getting their therapeutic needs addressed when animal-assisted therapy is used in conjunction with conventional therapeutic interventions and/or prescription medication, as part of a holistic treatment process.

### **Ecological Perspective**

The conceptual framework for this study was based on the ecological perspective. In the 1970s caseworkers often visited family members, employers, neighbors, and others to gather information about clients (Germain, 1973). It was common to ignore the biological and social environments along with aspects like culture and religion (Marson, n.d.). The ecological perspective examines and focuses on the relationship, interactions and exchanges between the individual and the environment (Cox, 1992). Johnson and Rhodes (2005) note the following four constructs: adaptation, goodness-of-fit, niche and habitat when explaining Germain's ecological perspective.

These constructs are a way to analyze how the individual interacts with his or her environment. Adaptation is a process an individual experiences to adjust to his or her environment thus meeting his or her need for comfort (Johnson & Rhodes, 2005). Goodness-of-fit speaks to the degree which needs of the individual are met with available resources. Niche is a concept used to describe where the individual fits into the hierarchy of life and an individual's habitat is made up of specific places where he or she lives, works, and socializes in (Johnson & Rhodes, 2005). Using the ecological framework the

researcher was interested in the relationship between children who were diagnosed with mental health disorders and how they interacted with their environment.

## Methodology

### **Research Design**

This researcher conducted a qualitative study. The participants, self-identified animal-assisted therapists, were asked to complete a survey about the effects of the therapy on children younger than eighteen who were diagnosed with mental health disorders. A survey process was used to extract rich detail from participants while reducing the strong emotional response that is probable in face-to-face interviews.

### **Sample and Recruitment**

The researcher recruited fourteen animal-assisted therapists on the social media sites LinkedIn and Facebook. The researcher recruited therapists by posting a public message (see appendix A) that included information about the study and the informed consent form (see appendix B) in different animal-assisted group discussions and on organizational pages. As long as the animal-assisted therapists were currently practicing or have practiced animal-assisted therapy within North America in the last five years they met the criteria to participate in this study.

### **Data Collection**

The researcher used the program Qualtrics to administer the survey to participants (Qualtrics, Provo, UT). Participants were asked if they understood the informed consent form and wished to continue. If the participant did not understand the informed consent form they were invited to contact the researcher, the researcher's



faculty chair or the St. Catherine University Institutional Review Board Chairperson.

The participants had the opportunity to end the survey process at any time.

### **Data Instrument**

The researcher created a survey to elicit responses from therapists about the effects of animal-assisted therapy with children that were diagnosed with mental health diagnoses. This survey (see appendix C) contained approximately eleven questions; three of those questions were demographic in nature. Open-ended questions were used to provoke vivid detail about the positive and negative effects therapists observed in children with mental health diagnoses after animal-assisted therapy.

### **Data Analysis**

Berg and Lune (2012) stated, “Content analysis is a careful, detailed, systematic examination and interpretation of a particular body of material in an effort to identify patterns, themes, biases, and meanings” (p. 349). After the surveys were completed this researcher proceeded to analyze the content. The researcher did this through the grounded theory coding process. Monette, Sullivan, and DeJong (2011), described grounded-theory by saying, “...they let meaning, concepts, and theories emerge from the raw data rather than being imposed by the researcher” (p. 225). The coding process utilized the rule of threes described by Berg and Lune, which suggested that a code must appear three times in order to be a theme (2012). Partner coding was utilized for reliability purposes. The researcher and the researcher’s partner explored themes together at the end of data analysis.

### **Protection of Human Subjects**

Whenever humans are involved in research their rights need to be protected. This researcher included an informed consent document on the social media site of recruitment as well as the program Qualtrics (Qualtrics, Provo, UT). The informed consent document included background information of the study, procedures, and risks and benefits of the study. The informed consent document went on to explain procedures to ensure confidentiality, the voluntary nature of the study, and contact information for the participants to reach the researcher if any questions arise (see appendix B).

The researcher used no identifying information when compiling data in order to maintain client confidentiality. In fact, the researcher used the anonymity function on Qualtrics to protect the identity of the participants (Qualtrics, Provo, UT). The anonymity function prevented the researcher from knowing the e-mail address of participants. The raw data was kept on a password protected computer and was destroyed after the data were analyzed and the results were written.

### **Findings**

Fourteen respondents accessed the survey on Qualtrics, which sought to answer the researcher's question: "How does animal-assisted therapy help children who have a mental health disorder?". Three respondents met the criteria to participate in the research study, yet only two completed the survey in its entirety. One of the respondents was a licensed professional counselor and had been using animal-assisted therapy since 2011. The other respondent was a registered psychologist with eleven years of experience who has taken animal-assisted therapy courses. Both practitioners saw children with numerous mental health disorders such as fetal alcohol syndrome, attention deficit

hyperactivity disorder, depression, anxiety, autism, post traumatic stress disorder, and disorders that were more explosive in nature like reactive attachment disorder, conduct disorder, and oppositional defiance disorder.

### Themes

The data yielded three large themes. Each large theme had two subthemes and quotations that supported those subthemes. The first theme revealed in the data was animal-assisted therapy provided clients with comfort.

**Comfort.** Animal assisted therapy provided clients with comfort in two different ways. Therapists reported that clients were more open to participating in the therapeutic process and motivated to continue making treatment progress when animals were present. Animal-assisted therapy also promoted client comfort, which helped clients to work through trauma rather than shutting down (Table 1). The next theme the researcher discovered was related to confidence.

**Table 1. Comfort**

Dominant Theme	Subthemes
Comfort	A. Clients were more open to participating B. Clients worked through trauma
<b>Supporting Quotes</b>	
<p>A: “[The client] openly engaged in the therapeutic process...”</p> <p>“[The animal] allows for [assistance in making] healthy attachment[s]”</p> <p>“AAT is often a feel good therapy with children but also aids in building rapport with children that do not want to participate in therapy.”</p> <p><b>B:</b> “[AAT] provides natural moments for processing of trauma (whether verbal or non verbal)...”</p> <p>“Client disclosed to dog past abuse. Client tells dog “secrets” about his feelings. He then does the same with a stuffed dog at home.</p> <p>[The client was able to] overcome his intense emotions and not shut down but rather work through his issues.</p>	

**Confidence.** Animal-assisted therapy positively influenced clients' confidence in their skill-set. Therapists saw an increase in self-esteem from their clients and viewed animals as positive reinforcement for their clients. While the animals helped increase self esteem and build on clients skill set, the animals also helped clients' problem solve and understand the depth of their skills (Table 2). The final theme reported by therapists was benefits in their clients.

**Table 2. Confidence**

Dominant Themes	Subthemes
Confidence	A. Increase in self-esteem B. Engaged in problem-solving, understood skills
<b>Supporting Quotes</b>	
<p><b>A:</b> <i>"[The animal was] encouraging and reinforcing their strengths and successes with the animals repetition. [Clients are] repeatedly working with the animals in the same manner to learn new [skills]."</i></p> <p><i>"[The dog] helped with self-esteem..."</i></p> <p><i>"[I] have seen many clients grow in self esteem and confidence due to being able to perform a task due to learning through repetition..."</i></p> <p><b>B:</b> <i>"[Animal-assisted therapy] helped with self-esteem, sustaining attention, and problem solving."</i></p> <p><i>"Some improvement on self-esteem. Training [the] therapy dog was a challenge and he occasionally was frustrated"</i></p> <p><i>"Often, it is the first time they [clients] understand the depth of their skills when they learn to work effectively with the animals."</i></p>	

**Benefits.** Therapists reported a decrease in symptoms as well as the severity of those symptoms as clients engaged in animal-assisted therapy. One therapist was working with a client who had post traumatic stress disorder (PTSD). This therapist noted the child was exhibiting a decrease in PTSD symptoms. Both therapists listed that their clients were better able to communicate after sessions of animal-assisted therapy and showed improvement in multiple areas (Table 3).

**Table 3. Benefits**

<b>Dominant Theme</b>	<b>Subthemes</b>
Benefits	A. Decrease in symptoms B. Therapists reported multiple improvements
<b>Supporting Quotes</b>	
<p><b>A:</b> <i>“Child is reducing PTSD symptoms.”</i></p> <p><i>“[He showed a] decrease in his explosive rage behavior [and his] success at school [increased].”</i></p> <p><i>“He has had some improvement on behaviors outside of therapy.”</i></p> <p><b>B:</b> <i>“[The client is] able to communicate his feelings, ask for help, overcome his intense emotions...”</i></p> <p><i>“[The client] stopped AWOLing [and] finished grade 9 in school...”</i></p> <p><i>“Improves self-esteem, sustaining attention, problem-solving, empathy, helping others, support, practice role playing, communication, aids rapport with therapist (referring to the benefits of AAT in client cases).”</i></p>	

### Discussion

The first time animal-assisted therapy was utilized in the United States it was used with soldiers who faced psychological trauma, yet at that time no scientific data was collected (Altschiller, 2011). Interestingly one of the therapists who participated in the survey noted that a client with Post Traumatic Stress Disorder had a decrease in symptoms during the animal-assisted therapy process. The same therapist stated her client felt comfortable disclosing past abuse to the dog and then would do the same with a stuffed animal dog at home. Animal-assisted therapy allows clients to feel comfortable talking about difficult issues with another person due to the presence of the animal.

A study conducted by Walsh (2009b) and Yorke (2010) found that children easily form relationships with animals and those interactive relationship foster trust, security, and higher self-esteem. Similarly therapists reported that animals helped clients develop more self-esteem and understand the significance of everyday skills. One of the therapists

listed multiple benefits of animal assisted therapy including an increase in attention span, problem solving skills, and self esteem.

Past research has shown that animal assisted activities promote pro-social behavior in older adults. This study showed that children with mental health disorders were better able to communicate with others. One therapist stated that her client was able to express his feelings, ask for help and work through overwhelming emotions with the use of animal-assisted therapy. A different client stopped running away and was able to finish school likely due to multiple breakthroughs in therapy.

### **Implications for Social Work Practice**

Both therapists used therapeutic approaches with animal-assisted therapy. Animal-assisted therapy does not replace traditional therapy modalities because they are often included in the therapist's framework. If therapists are not using a therapeutic approach, and are just using the presence of the animal as therapy this should not be considered therapy. This researcher believes that animal-assisted therapy should be utilized more as research has shown that the therapeutic relationship is the strongest motivator for change that therapists can control, and animals have been shown to strengthen the rapport of the therapist and the client (Asay & Lambert, 1999).

### **Implications for Research**

While this study produced definite themes, more research needs to be conducted on animal-assisted therapy and children with DSM-IV mental health disorders. The sample size in this study was extremely small, and future studies should include more respondents. In the future it would be interesting to conduct interviews with the children participating in therapy to hear what their experience is like in therapy with an animal

present. The researcher thinks it would be valuable to interview family members, as well as professionals like teachers, paraprofessionals, and case managers who work with the child and have the opportunity to observe behavioral changes throughout the child's time in therapy. Again the researcher would include the therapists conducting the therapy session in the research study.

This researcher would like to conduct future research comparing the effectiveness of animal-assisted therapy with a CBT framework to traditional CBT. The researcher is not necessarily interested in CBT, but rather would like to know if animal-assisted therapy with a therapeutic framework is more effective than the therapeutic framework by itself. The researcher is most interested in the comparison of animal-assisted therapy with a CBT framework compared to psychodynamic therapy. The researcher is interested in this comparison due to the strong emphasis on relationship in psychodynamic therapy and the relationship component that an animal provides.

### **Limitations and Strengths**

This study certainly has limitations. The first limitation was the recruitment style. The researcher did not have a way to ensure numerous animal-assisted therapists would respond. There was not a national list serve for the researcher to use to contact possible respondents. As a result the researcher used the social media sites LinkedIn and Facebook to access animal-assisted therapy organizations. While social media sites are becoming increasingly popular it may have eliminated responses from experienced animal-assisted therapists who have developed caseloads have the need to advertise or do not advertise their services on those sites. Other animal-assisted therapists may have chosen not to use social media sites for professional use, have utilized different sites, or

do not use social media. Ultimately social media sites may have limited the sample pool more than the researcher expected.

The second limitation in this study was the sample size. Only fourteen respondents opened the survey and out of those fourteen respondents only three chose to complete the survey. One of the respondents did not finish the survey, which made it invalid. The two respondents who completed the entire survey had many differences including nation of origin, years of experience, and animal-assisted therapy training.

Finally, the researcher created the data instrument which means underlying biases may be present. The researcher may have inadvertently led participants to answer in a specific way without being aware of doing so. The researcher was not able to pilot the data instrument due to time restraints. Respondents may have perceived questions differently than the researcher intended, leading to answers the researcher did not predict.

While there were many weaknesses in this study there were also strengths. To the researcher's knowledge there are only two or three studies that look at the use of animal-assisted therapy with children who have DSM-IV mental health diagnoses besides Autism Spectrum Disorder. In the studies that have been conducted most are centered on the results parents have seen in their children. This study is unique because it focuses on the therapists' perspectives of their clients' progress throughout the therapeutic process.



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Appendix A  
**SOCIAL MEDIA NOTICE**

**ATTENTION: ANIMAL ASSISTED THERAPISTS!**

**Would you like to contribute to the profession that you are passionate about? I am looking for animal-assisted therapists who work within the mental health field to take a survey. The survey is titled, “Effectiveness of Animal-Assisted Therapy: Therapists’ Perspectives.” The informed consent form is attached below for review.**

Appendix B  
**Effectiveness of Animal-Assisted Therapy: Therapists' Perspectives  
INFORMATION AND CONSENT FORM**

**Introduction:**

You are invited to participate in a research study investigating therapists' views of the results animal-assisted therapy has on children/adolescents with mental health disorders. This study is being conducted by Nichole M. Budahn, BSW, a graduate student at St. Catherine University/University of St. Thomas under the supervision of Dr. Valandra, a faculty member in the School of Social Work. You were selected as a possible participant in this research because you belong to an animal-assisted therapy group on Facebook and/or LinkedIn. Please read this form and ask questions before you agree to be in the study.

**Background Information:**

The purpose of this study is to understand the effects of animal-assisted therapy on children who have been diagnosed with mental health disorders through the perspective of the therapists providing the treatment. Approximately 50 people will be recruited by this researcher in hopes that at least 10 will respond.

**Procedures:**

If you decide to participate, you will be asked to provide the researcher with an email address, consent to the research terms, and complete a survey. The survey could take anywhere from twenty minutes to sixty minutes.

**Risks and Benefits of being in the study:**

Through the use of Qualtrics and privacy methods this researcher has reduced risks related to confidentiality. Specific memories related to animal-assisted therapy may surface during the survey, which have the possibility to provoke emotional responses. If participants feel they cannot complete the survey due to emotional responses they are free to stop at any time.

While there are not any direct benefits of being in this study there are benefits of this study such as contributing to professional literature.

**Confidentiality:**

The information yielded from this research study will be presented as aggregate results. The program this researcher will use keeps the information unidentifiable. All reports and/or publications will use generic terms i.e. Participant A.

The data yielded from the survey will only be accessible by me and my faculty advisor through my personalized Qualtrics account. I will keep the printed research results in a locked file cabinet within my home and only I will have access to the records while I work on this project. I will have a research assistant assist me in coding the data, but will ask the research assistant to give me the information after each coding session. This



project will be completed by May 25, 2013 and all original reports will be destroyed by this date.

**Voluntary nature of the study:**

Participation in this research study is voluntary. Your decision whether or not to participate will not affect your future relations with St. Catherine University, the University of St. Thomas, or the School of Social Work in any way. If you decide to participate, you are free to stop at any time without affecting these relationships.

**Contacts and questions:**

If you have any questions, please feel free to contact me, Nichole Budahn, at (651) 895-3966. You may ask questions now, or if you have any additional questions later, feel free to call me or my faculty advisor, Valandra at 651-690-6709. We both are happy to answer any questions you may have. If you have other questions or concerns regarding the study and would like to talk to someone other than the researcher(s), you may also contact Dr. John Schmitt, Chair of the St. Catherine University Institutional Review Board, at (651) 690-7739.

You may keep a copy of this form for your records.

**By continuing with this survey you are stating that you understand the terms above and consent to them.**

Appendix C  
**SURVEY QUESTIONS**

**Demographic Information**

1. Have you conducted animal-assisted therapy in the last five years?
2. In the last five years, which states and countries have you conducted animal-assisted therapy in?
3. List the years of experience you have facilitating animal-assisted therapy and any relevant certifications.

**Questions pertaining to Research Question**

1. What mental health diagnoses do the children have that you facilitate animal-assisted therapy with?
2. Pick two or three children and describe their level of functioning and struggles they encountered before participating in animal-assisted therapy.
3. Describe three behavioral interventions you prefer to use in animal-assisted therapy and a positive client experience related to one of the interventions.
4. Describe the theoretical framework(s) that guide(s) your treatment approach regarding animal-assisted therapy.
5. What changes have you seen in children diagnosed with mental health disorders from initial sessions to ending sessions?
6. What are the limitations of using animal-assisted therapy with children who have mental health diagnoses where symptoms are manifested in behaviors? (i.e. A child with reactive attachment disorder may throw a tantrum that consists of throwing things, screaming loudly, slamming doors, etc.)
7. How does animal-assisted therapy specifically help children with DSM-IV diagnoses?
8. Describe the best method or combination of methods to treat children with mental health disorders?