Paw(sitive) Purpose

By: Morgan Starkweather, Kasey Levin, Sarah O'Hagen, and Carrie Lorber

Background

Significant research exists describing the various benefits individuals experience due to the relationship between animals and humans. While the effects of both animals and occupational therapy (OT) have been researched separately, little evidence-based research exists around the role of animal assisted therapy (AAT) in OT intervention. Such isolated research has demonstrated the benefits of each regarding individuals' quality of life. Animal Assisted Intervention (AAI) has been described as the structured and goal directed implementation of participation in occupation, in conjunction with a living animal (Marcus et al., 2013). AAT has been shown to benefit innumerable factors such as stress, anxiety, depression, mood, and countless other psychological, physiological, and emotional variables which we know play an integral part in recovery (Tsai, Friedmann & Thomas, 2010). This case study illustrates the integral role OTs can serve in AAT.

Methods

Our client is seen for 45-minute, weekly OT sessions in the Pediatric OT clinic at Ithaca College. A multidisciplinary approach is used by OT students to incorporate "Guiding Eyes for the Blind" (GEB) guide dogs in training to promote independence, communication, quality of life, and social participation, while motivating the client to participate in therapy.

Our client was recently matched with an autism assistance dog, through the organization Good Dog Autism Companions. To prepare for the arrival of his service dog, the client participates in AAI that focuses on necessary skills needed to care and interact with his dog. Therapeutic activities used throughout the session include walking (using an adapted leash created by the student practitioners), feeding, brushing, playing, and donning the dog's "working" vest. The primary goal of therapy is to have the client engage in functional tasks while constantly attending to the dog's leash. He practices activities requiring bilateral coordination of hands, such as pressing elevator buttons, opening doors, holding hands, and communicating via sign language, while holding the leash.

Results

AAI has provided opportunities for the client to practice and gain skills necessary to promote his independence, help care for his service dog, and engage in meaningful occupations. His ability to functionally ambulate through the community while continually attending to the dog leash has significantly increased over the past year. Currently, the client walks with the dog through an environment containing distractions, for approximately 100 yards without dropping the leash, compared to one year ago when he dropped the leash after walking 20 feet. The client continues to hold the leash during bilateral tasks, including boarding elevators, pressing elevator buttons, opening accessible doors, and holding his caretaker's hand. Last year, he dropped the

leash within the first 10 seconds of a social interaction. Currently, he participates in social interactions with people for approximately 1-minute before requiring verbal or visual cuing to continue to hold the leash. Session documentation reflects significant improvement upon the client's focus and ability to attend to multiple stimuli at once; both necessary skills to promote his independence in functional mobility and social activities. The use of AAT during sessions has prompted spontaneous communication, verbal and signage, from the client. He appears to be more motivated during therapy, as noted by his increased attention to therapeutic activities and decrease in re-direction and verbal cues noted throughout sessions.

Conclusion

The use of AAT in pediatric OT can be used as both a means to achieve intervention goals and as the overall goal of therapy. The use of service dogs in training during OT sessions has promoted our client's overall independence and quality of life by improving his fine motor control, gross motor control, socialization, and motivation. The use of highly motivating extrinsic factors, such as dogs, during therapy elicits increased independence and engagement of the client in the therapy process. By establishing a cross-campus connection and partnership with GEB at IC, OT student practitioners have been able to holistically support our client's needs. The skills addressed in the clinic have readied our client to prepare to care for, interact with, and safely ambulate with his future autism assistance dog. Our unique work with our client and the benefits using AAI during therapy has been recognized by the board of directors of Good Dog Autism.

References

- The IAHAIO Definitions for Animal-Assisted Intervention and Guidelines for Wellness of Animals Involved. (2015). *Handbook on Animal-Assisted Therapy*, 415-418. doi:10.1016/b978-0-12-801292-5.15001-1
- Tsai, C., Friedmann, E., & Thomas, S. A. (2010). The effect of animal-assisted therapy on stress responses in hospitalized children. *Anthrozoös*, 23, 245-258.

doi:10.2752/175303710X12750451258977