

ABSTRACT

The acceptance and use of animal-assisted activities (AAA) and animal-assisted therapies (AAT) has greatly increased within the last 10 years. This article provides guidelines for program coordinators of volunteers who are considering including animal visitation in their facilities. The guidelines are designed to help coordinators evaluate the quality of a community AAA program and the type of training and certification appropriate for an AAA team.

Volunteers and Animal-Assisted Activity Programs

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INTRODUCTION

In the last 10 years, the use of companion animals in outreach and visiting programs has steadily increased in acceptance as a beneficial adjunct to a patient's care, particularly in long-term care facilities. Once commonly known as "pet therapy," the practice of animal visitation is now separated into the categories of animal-assisted therapy and animal-assisted activity.

Animal-assisted therapy (AAT) is delivered by a health service professional and is a goal-directed intervention in which an animal that meets specific criteria is an integral part of a treatment process (Hurt, 1996). AAT is usually conducted by paid professional staff who work with the facility to integrate their program into the residents' treatment goals.

Animal-assisted activity (AAA) is defined as the use of companion animals to provide opportunities for motivational, educational, recreational, and/or therapeutic benefits to enhance the quality of life. Animal-assisted activity is more common since less training is required of the human and animal team and is usually

provided by volunteers who bring their own pets to residential programs. This article will concentrate on AAA provided by volunteers in the community.

RESEARCH ON THE IMPACT OF ANIMAL-ASSISTED ACTIVITIES

Many residents of long-term care facilities enjoy observing and interacting with visiting pets. The pets do not merely serve as a source of entertainment and a break from the residents' daily routine, but may also provide emotional and physical benefits. Studies have shown that the use of companion animals increases patient responsiveness and that animals can act as a catalyst in assisting person-to-person communication (Brickel, 1979; Corson and Corson 1975, 1987). Corson and Corson noted that at first patients related exclusively to the visiting pet. Soon, however, the pets began to serve as "social links," encouraging the patients to interact with others in the facility. Savishinsky (1992) found the use of AAA in nursing homes encouraged people to reminisce and the animals became a point of departure to talk about other related topics. Robins, Sanders, and Cahill (1992) exam-

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ined the development of relationships among previously unacquainted persons and found that dogs facilitated contact, confidence, conversation, and confederation among such persons.

It is important to note that some have questioned whether it is the human volunteer, rather than the animal, who has the most impact on client change. In a study on the effects of visits by pets and people on nursing home residents (Hendy, 1987), results indicated residents had more positive reactions and behaviors when exposed only to a person than when they were exposed to a pet or a pet with a person. Savishinsky (1992) found that the social and sensory stimulation of the pets was often superseded in importance by interpersonal ties with the volunteers who brought them.

While it is not entirely clear that AAA is "superior" to human visitation alone, it is apparent that AAA can be a pleasant experience for the facilities' residents, as well as their staff. Moreover, volunteers enjoy bringing their trained pets to visit facilities and AAA may significantly enhance a volunteer's interest and willingness to volunteer.

WHAT DOES AN AAA TEAM DO ON A VISIT?

During an AAA visit the volunteer handler encourages people to pet and brush the animal, entertains them by having the animal do tricks or retrieve items, and provides human socialization through conversation and reminiscence. All of these actions can provide therapeutic benefits that may not be recognizable immediately. The simple act of petting a dog provides basic tactile stimulation. Brushing a dog or throwing a ball encourages physical use of the patient's arms. Even the act of reminiscing can stimulate memory and thought processes.

Residents of long-term care facilities may receive individual visits or participate in a group visit program. Some people enjoy both. An individual visit usually takes place in a resident's own room. The

focus in this type of visit is on the individual's needs and interests as they relate to the pet. Often the people who are scheduled for individual visits have had a pet in the past, or have expressed an interest in animals.

In a group visit, selected long-term care residents are brought into a central location such as the day activity room. A group visit stimulates not only interaction between the resident and the AAA team, but also among the residents. A group visit provides the volunteers with a mutual support system and gives new volunteers the opportunity to participate in an AAA program with other teams that are experienced in visitation.

TRAINING AND CERTIFICATION OF THE ANIMAL AND VOLUNTEER

There are many individuals who would like to volunteer to visit facilities with their pets. However, before the volunteers and their pets ever set foot in a facility, they need to be tested and trained to ensure their safety and that of the people they will be visiting.

First, the animal needs to be temperament-tested to determine if its personality is appropriate for pet visitation. The volunteer and animal then need to be trained to work in crowded, noisy areas and become comfortable with different types of people, smells, and environments. A good AAA training program assists the potential AAA team by providing opportunities for the team to practice working in different situations. In addition, volunteers need to learn about the special needs of the different populations they may visit such as the chronic medically ill, developmentally delayed, or those with psychiatric disorders.

In programs operating under the nationally-recognized Delta Society guidelines, certification of a dog includes passing the Pet Partners Skills Test and an aptitude (temperament) test. The Delta Society has animal evaluators throughout the country who are certified to test the animals and ensure they meet the skills

test requirements. There are nine parts to the skills test that simulate scenarios the dog might face in a residential facility. The required skills for the dog range from sitting politely for petting to walking through a crowd and coming to its master when called. The animal must then pass the aptitude test that includes a non-aggressive reaction to being bumped, hugged tightly, or being faced by a yelling individual. The dog's veterinarian must provide an extensive medical history. Cats, rabbits, and other animals, being somewhat more difficult to train, have different skill requirements but still must pass the aptitude test and have a medical history provided.

Certification of the volunteer is multifaceted. The training focuses on a variety of different areas with a special focus on the communications aspect of the visit. Topics covered include preparing to visit a facility for the first time, health concerns, dog grooming, liability, visiting techniques, communication skills, and role play to simulate circumstances a volunteer might encounter during an actual visit.

Volunteers with animals need training in many of the same areas that other types of volunteers need. All volunteers need an orientation to the program and the facility they are to visit followed by pre-service training and on-the-job training (Novaratnam, 1986; Ilsey, 1990; Watson, 1993). Visits should be regularly monitored by the residential facility's program coordinator, as well as by a representative from the AAA certifying organization.

In addition to receiving general orientation and having their dogs evaluated and trained, it may be helpful for new volunteers to use a checklist similar to the one shown in the Appendix when making their first visits. Studies by Burch and Reiss (1987), Crowell, Anderson, Abel, and Sergio (1988), and Johnson and Fawcett (1994) suggest that the use of checklists providing task clarification will improve performance in health care settings and in human and customer service.

A small group study of the effects of training AAA volunteers visiting a long-term care facility indicated that a standardized training session offered in a group setting did not necessarily lead to the acquisition and transfer of critical communication skills (Harlock, 1996). More success was achieved through the use of individual instruction and feedback accompanied by a checklist. This type of training improved methods of communication and decreased the time necessary to teach effective communication techniques.

THE INTEGRATION OF LOCAL AND NATIONAL ORGANIZATIONS TO PROVIDE AAA

On any given day in Tallahassee, Florida, a volunteer team visits a local facility with his or her pet providing companionship and entertainment to the residents. Approximately 50 volunteer teams visit more than 25 different area facilities including nursing homes, day treatment programs, or group homes for the physically disabled. At the same time, there are more than 30 prospective volunteers on a waiting list for classes and certification. How did such a strong network of volunteers become established?

The volunteer teams operate under the guidance of the ComForT (Companions for Therapy) program which is affiliated with the Delta Society, a national organization that promotes the human and animal bond. Its Pet Partners program provides educational material, training programs, and certification of AAA and AAT teams. The ComForT program operates under the Delta Society's Pet Partners guidelines.

The strong infrastructure of the ComForT program has been built through the cooperation of several local agencies and some long-term volunteers willing to put in the time necessary to provide leadership for the organization. This collaborative effort has provided training, education, screening, certification, and placement of the volunteers who make up

the program.

The ComForT program has a volunteer director who is a veterinarian, and one paid, part-time coordinator who prepares mailouts, handles certification paperwork, contacts facilities, and schedules visits. ComForT is sponsored financially by the Northeast Florida Area Agency on Aging. The agency is responsible for the coordination and oversight of community services and elder program operations at the local level. It provides funding for the paid ComForT volunteer coordinator and her office space, mailing and newsletter costs, and any necessary workshop fees.

The ComForT program has volunteers with extensive experience in dog training and the human service field who provide free dog training classes and communication/orientation classes for prospective volunteers. The dog training classes last approximately 12 weeks and the volunteer training class is usually conducted in one seven-hour session. The classes prepare the dogs to pass the skills and aptitude tests and the handler to pass the Delta Society's Pet Partners Volunteer Review.

ComForT volunteers visit facilities individually with their pets or as part of an organized group visit. Several times a month ComForT arranges a specific day and time when the animals will visit local long-term care and assisted living facilities as a group. Each month there is a theme the volunteers incorporate into costuming their dogs and use as an ice-breaker when first interacting with the residents. For example, "hats" may be the theme during a spring month. Occasionally the volunteers plan skits around the theme. During the month of February, a Valentine's Day skit portrayed a wedding ceremony in which the dogs dressed up as members of a wedding party.

The ComForT volunteer coordinator calls the volunteers each month to schedule the days and times of the visits. The group visits have been well received by both residents and staff at the facilities and have received a great deal of media

attention that has strengthened the popularity of the program.

ComForT volunteers visit long-term care facilities as well as those serving the developmentally disabled. They also work with children who suffer from serious medical or emotional problems. Before group or individual visits are made to a facility, the ComForT volunteer coordinator meets with the facility's program coordinator to discuss the proposed visit. At that time, the staff person is given information about the ComForT program and can also let the ComForT representative know of any limitations or requirements at the facility. If individual visitation is arranged, the facility's program coordinator is asked to provide the AAA team with information about the facility, its sign-in requirements, and introduce the team to the facility's staff before beginning the visit. This additional attention to individual visitation is provided since these visits are not typically supervised by the ComForT volunteer coordinator on a continuing basis.

WHY DO SOME FACILITIES SAY NO TO AAA?

Even though there is a growing acceptance of animal-assisted activity, there are some facilities that are reluctant to have animal visitation due to health, liability, or safety issues or the belief that the animals may not behave appropriately in the facility. A major concern is the transmission of disease, particularly when residents have compromised immune systems. Programs fear there may be accidents associated with the animal visits such as animal bites or skin abrasions. Some may be concerned about dog hair because of allergies and hygiene. Some residents, as well as staff, are afraid of dogs and facility program coordinators may not be sure if it is appropriate to expose staff and residents to them.

Despite these concerns, research has shown there are very few diseases that can be transmitted from dogs or cats to humans. To minimize the chance of ill-

ness, a certified AAA program has all animals evaluated by a veterinarian to ensure they are current on their shots and are in good health. Volunteers learn basic health care for their pets, how to minimize shedding, and reduce the opportunities for skin scratches. Animals are bathed, brushed, and have their nails trimmed on a regular basis. A certified AAA program screens out any animal showing signs of aggression by putting each animal through a rigorous temperament test that simulates "worst" possible conditions.

The animal/handler teams have a greater responsibility than individuals who participate in other types of volunteer activities. In addition to being perceptive to the emotions and state of mind of those they are visiting, they also have the responsibility of ensuring the welfare of their animals and being able to "read" their animal's behavior. It is important for the volunteers to be aware of their animals at all times to ensure the animals' safety and comfort, and the safety of the persons they are visiting.

DETERMINING IF AAA WOULD BE BENEFICIAL TO YOUR PROGRAM

AAA can be beneficial to many different populations with vastly different needs. AAA is particularly desirable for any program in which people experience loneliness or alienation because it provides structured, non-judgmental interactions for them with the animal. Patients who are experiencing pain can have a few minutes when pain is in the background while they interact with the pet.

Animal-assisted activities can further the specific goals of clients. For example, AAA can be used with stroke patients who are working on improving their speech by encouraging them to give the visiting dog commands such as "sit," "down," or "come." This exercise gives clients a chance to practice speaking as well as providing motivation to improve pronunciation so the dog can understand their speech.

In short, AAA can be useful to most residential treatment programs. The degree to which the program can benefit the residents is in part related to how much the residential program has integrated AAA into its facility. The extent to which the volunteers have been prepared to visit the facility also plays a major role.

WHAT SHOULD YOU LOOK FOR IN AN AAA PROGRAM?

At a minimum, a facility program coordinator should ensure that any organization sending visitation teams into a facility has screened and certified the animals, provided basic training to the volunteer, and dealt with liability issues. The coordinator should be assured the AAA team has some understanding and interest in working with the population of the facility. The AAA program should ensure the facility's staff knows what the team will do at the facility, including standard operating procedures and safety precautions. A schedule for visitation should be arranged and a visiting time agreed upon. The facility's program coordinator can play a big role in the AAA program's success by informing volunteers about special needs and specific patients or clients the facility would like the volunteer team to visit. Before the first AAA visit, the facility program coordinator should hold a meeting to inform staff about the purpose of the AAA program, encourage them to talk with the visiting team, and address any concerns staff may have about the visits.

Paid staff from the facility should always be available to the AAA team. When visiting private rooms in nursing homes, residents often have requests the volunteers may need to refer to the staff. Staff can also let volunteer teams know of any special requests for a visit or can be of help if the volunteer encounters any difficulties.

Inviting the AAA team to special facility events such as holiday parties or volunteer recognition events helps integrate the volunteer team into the facility's recre-

ational program. By making the visiting teams feel wanted and valued, the likelihood of a successful partnership between the volunteer and the residential program is strengthened.

CONCLUSION

The integration of an AAA team into a residential facility need be no more difficult than the orientation of other volunteers who serve in a facility's program. However, the specialized training of AAA volunteers and their animals by a reputable therapy dog program is crucial due to liability, safety, and animal behavior issues.

Since the animals serve as a catalyst for person-to-person communication, the animal handlers often experience less difficulty than other volunteers do in developing a relationship with the people they are visiting. Once an animal visiting program is established, it can become the highlight of a resident's week. When both the volunteer and the resident look forward to the animal's visit, it becomes a pleasurable experience that provides the resident a bridge to the outside world.

AUTHOR'S NOTE

In the United States there are regional and national organizations that offer evaluations and certification of handlers and their dogs (and sometimes other animals). Although these organizations vary slightly, their goals in general are to screen, train, provide education to the handlers, and/or certify potential therapy animals. These groups also provide primary or secondary liability insurance to the handlers.

Local volunteer organizations can work with national programs to provide training, supervision, and certification of AAA teams and then coordinate and match volunteers with a facility that wants animal visitation for its residents. Facilities without an organized program in their communities can encourage potential volunteers to contact one of the national organizations that provide training and certification. National programs offer

training for potential volunteers through regional workshops, tests by mail, or certification by an approved tester who lives in the vicinity. Most regional and national organizations maintain a list of all authorized trainers and testers for their organization.

Two well-recognized national organizations that train volunteers and their animals in animal-assisted activity (AAA) are:

Delta Society's Pet Partners Program
89 Perimeter Road, East
Renton, WA 98055
(800) 869-6898

E-mail: deltasociety@cis.compuserve.com
Website: www.deltasociety.org

Therapy Dogs, Inc.
P. O. Box 2786
Cheyenne, WY 82003
(307) 638-3223
E-mail: therapydoginc@juno.com

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APPENDIX

AAA VOLUNTEERS' COMMUNICATION CHECKLIST FOR VISITS

OPENING THE VISIT

- Make eye contact.
- Smile at resident
- Greet resident.
- If no or minimal response, repeat eye contact, smile, and greeting.

INTRODUCTION OF DOG TO RESIDENT

- Bring dog close to resident.
- Approach from the front. If resident is in bed, come alongside as much as possible in order to face resident.
- Approach slowly, not with quick, jerky movements.
- Avoid standing over resident.
- Ensure dog is at resident's waist level or below (small dogs on lap or bed or paws up).
- Ask resident if s/he wants to pet, touch, or brush dog.
- If resident says no or shows fear, do not force dog on resident.
- If resident does not reach hand out or appears tentative, demonstrate dog is friendly by petting it.
- After demonstrating petting, again encourage reluctant resident to pet dog.
- Provide praise or make a positive statement about the resident's interaction with the dog.
- If resident is too rough, demonstrate proper touch.

VOLUNTEER/RESIDENT INTERACTION

- Encourage resident to talk or ask questions about the visiting dog or pets in general. Do not wait for resident to bring up subject.
- If resident doesn't respond to questions, continue encouraging resident to touch dog.
- If no interest is shown, move on to closing the visit.
- Encourage resident to reminisce about topics other than pets.
- Use nonverbal encouragement (facial expressions, body language).
- Use active listening techniques (paraphrase what patient has already said, make nonjudgmental responses).
- Respond to resident's questions or comments when possible.
- Have the dog do a trick or routine at an appropriate time during the visit.
- Tell a story about the dog.

CLOSING THE VISIT

- Tell resident s/he enjoyed visit and thank resident for allowing the visit.
- Terminate the visit tactfully when resident urges you to stay.
- Tell resident when next visit will be made (approximately).
- Tell resident good-bye. This may be done "through" the dog.