Staff Attitudes Regarding the Impact of a Therapy Dog Program on Military Behavioral Health Patients

Sara M. Brisson, BA[1]; Anthony H. Dekker, DO[2]*

ABSTRACT

Background: Human–animal interactions in the form of animal-assisted therapy (AAT) have become common in both civilian and military healthcare facilities. Evidence supports AAT as a beneficial therapeutic alternative for patients with physical disabilities and psychological disorders. Few studies have been conducted in the civilian healthcare setting to evaluate staff attitudes regarding the impact of an AAT program on behavioral health (BH) patients. To our knowledge, no research has examined staff attitudes on the impact and effectiveness of AAT on active-duty Servicemembers in a BH program at a military facility. **Methods:** At the completion of a year-long AAT dog program and after institutional review board exemption, an anonymous, six-question survey was used to examine staff attitudes (n = 29) regarding the impact and continuation of the program with military BH patients. **Results:** Most staff members (86%) believed the AAT dog program had a positive impact on the BH patients, including improved patient mood, greater patient relaxation, improved patient attitude toward therapy, and increased social interactions among patients. All the staff reported a desire to continue the program at the military facility. **Conclusion:** Most BH staff thought the year-long AAT dog program had a positive impact on patients. All staff supported continuation of the program.

KEYWORDS: *animal-assisted therapy; therapy dog; military; behavioral health; staff attitudes*

Introduction

The first documented civilian use of animal-assisted therapy (AAT) occurred in 1792, when the Quakers used farm animals as a therapeutic intervention for psychiatric patients in a mental health institution.[1] Over the past two decades, the use of human–animal interactions in therapy, education, and healthcare has markedly increased in the United States.[2] The therapeutic value of human–animal interactions, which includes AAT, animal-assisted activities, and general animal interactions, has been widely recognized and accepted because of the reported physiological, psychological, and social benefits.[2–5] Benefits include decreases in blood pressure and pulse[6,7]; decreases in stress, anxiety, depression, and other mood disorders[5,6,8]; and improved social interactions and relations.[2,5] In previous studies, individuals diagnosed with a severe mental illness reported their pets were their primary and most valued social support because their pets helped them manage their feelings, distract from their symptoms, and provided encouragement for daily activity.[9,10]

There is also a long history of AAT within US military healthcare facilities.[11] The US military first introduced the use of dogs as a therapeutic intervention with psychiatric patients in 1919 at St Elizabeth's Hospital in Washington, DC.[12] Since that time, the popularity of AAT in the military as a treatment intervention has continued to increase. The use of AAT is particularly common among physically injured Servicemembers and Servicemembers with psychological disorders, such as posttraumatic stress disorder.[11] Although there have been some similar studies that have evaluated the attitudes of mental health professionals toward the knowledge and use of AAT interventions in civilian[13] and military settings,[14] to our knowledge, there has been no previous research evaluating behavioral health (BH) staff attitudes regarding the impact of an AAT dog program on military patients with BH diagnoses. Moody et al.[15] evaluated attitudes about an AAT dog program on a civilian pediatric ward. The staff felt the program effectively distracted children from their illnesses, relaxed the children, and made the ward a genuinely happier place for the children and the staff.[15] There does not appear to be any similar research from military healthcare facilities. The purpose of this study was to determine the attitudes of BH staff members regarding the impact of an AAT dog program on military BH patients and whether the program should be continued.

Methods

After receiving institutional review board exemption, a highly trained therapy dog was introduced into a military BH inpatient and outpatient psychiatric unit in the summer of 2012. The service dog participated regularly in individual and group counseling sessions with active-duty Servicemembers as well as during recreational activities and activities of daily living (Figure 1). At the completion of 1 year of patient interaction with the therapy dog 2–3 days per week, an anonymous, six-question survey was administered to BH staff to determine attitudes regarding the impact of the program on the patients (Figure 2). The staff was able to express their assessment regarding the impact of the program as positive, negative, or neither. They also could choose one or more examples of eight possible positive effects or five possible negative effects, as

*Address correspondence to brisson@hartford.edu
[1]**Ms Brisson** was with Community House Mental Health Agency, Seattle, WA, and is currently with the Graduate Institute of Professional Psychology (GIPP), University of Hartford. [2]**Dr Dekker** is with Northern Arizona Veterans Administration Healthcare System, Prescott, AZ.

Figure 1 *Therapy dog with behavioral health staff member.*

Figure 2 *Survey given to behavioral health staff.*

1. During your time as a staff member in Behavioral Health, have you observed the therapy dog, Nathan, interacting with patients?
   - ☐ Yes
   - ☐ No

2. Were your observations:
   - ☐ Frequent
   - ☐ Occasional
   - ☐ Rare/never

3. If you observed interactions of the therapy dog with the patients, do you feel the effect on the patient was:
   - ☐ Positive
   - ☐ Negative
   - ☐ Both
   - ☐ Neither

4. A positive effect on the patient that you have observed includes (check all that apply):
   - ☐ Patient is more talkative
   - ☐ Patient is more cooperative
   - ☐ Patient is more relaxed
   - ☐ Patient has improved mood
   - ☐ Patient has improved attitude
   - ☐ Patient has increased social interaction
   - ☐ Patient is more open
   - ☐ Patient is more distracted from their illness
   - ☐ Other

5. A negative effect on the patient that you have observed includes (check all that apply):
   - ☐ Patient is fearful of the dog
   - ☐ Patient is avoiding/ignoring the dog
   - ☐ Patient is demonstrating hostility toward the dog
   - ☐ Patient is more tense or uncomfortable
   - ☐ Patient is experiencing an increase in allergies/asthma symptoms
   - ☐ Other

6. In regard to the future of the Behavioral Health animal assisted therapy program, would you recommend:
   - ☐ Continuation
   - ☐ Continuation and expansion
   - ☐ Discontinuation
   - ☐ Other

well as write in other observations. Criteria for participation in the survey included (1) employed as a BH staff member and (2) having observed patients in the presence and absence of the therapy dog. Twenty-nine BH staff members participated in the survey, including psychiatrists, psychologists, nurses, social workers, and front desk staff.

Results

Survey results indicated 86% (n = 25) of BH staff identified an overall positive impact of the AAT dog program on patients. The survey results also revealed that 72% (n = 21) of staff identified improved patient mood; 69% (n = 20) identified patients as more relaxed; 66% (n = 19) identified improved patient attitude toward their therapy; and 55% (n = 16) identified increased social interactions among patients. Additionally, 7% (n = 2) observed patients avoiding or ignoring the dog, and 3% (n = 1) observed patients as more tense or uncomfortable around the dog (Table 1). Interestingly, 100% (n = 29) of the BH staff reported a desire to continue the AAT dog program at the military facility.

Table 1 *Staff Observations (N = 29) of the Impact of an Animal-Assisted Therapy Dog Program on Behavioral Health Patients*

Observed Impact	No. (%)
Positive	
Improved mood	21 (72)
More relaxed	20 (69)
Increased positive attitude	19 (66)
More social	16 (55)
More talkative	15 (52)
More distracted from disorder	11 (38)
More open	9 (31)
Negative	
Avoiding the dog	2 (7)
More tense	1 (3)

Discussion

The purpose of this study was to determine the attitudes of BH staff members regarding the impact of a year-long AAT dog program on active-duty BH patients and whether the program should be continued. Results indicated that most BH staff identified an overall positive impact of the AAT dog program on patients and the staff was unanimous in their desire to continue the program at the military hospital.

Previous research has found that AAT programs have positive effects on individuals with physical and/or psychological disorders.[2,3] The results of our study support these findings and shed light on the observable impact of AAT on Servicemembers by BH specialists. It is particularly important to note that even though 10% (n = 3) of the staff reported a negative impact of the program on the patients, all the staff expressed the desire to continue the program. Although there were some observed negative responses, the benefits of the program overall may outweigh potential negative affects. These findings provide support for military healthcare facilities that are considering an AAT dog program with BH patients and also provide support for military facilities wishing to continue an AAT dog program.

Limitations of this study include a small sample size; lack of detailed information about staff exposure to the patients and dog; no information on staff biases toward the program, such as a fear or dislike of dogs; and lack of detailed information

about the number of survey participants in each BH occupational category.

Conclusion

This study assessed BH staff attitudes regarding the impact of a year-long AAT dog program on active-duty Servicemembers with BH diagnoses. Results indicated the staff attitudes about the impact of the program on the BH patients were overwhelming positive, with most staff observing a positive impact on the patients and unanimously supporting the continuation of the program. Overall, this study provides support for the initiation and/or continuation of AAT dog programs at military hospitals for BH patients.

Disclosures

The authors have nothing to disclose.

Author Contributions

S.M.B. and A.H.D. designed the study, performed data analysis and interpretation of the work, and provided a critical revision of the article. S.M.B. collected the data and drafted the article. Both authors gave final approval of the version to be published.

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