Dog-Assisted Interventions in Mental Health Rehabilitation

Muros, Tiina

2010 Otaniemi
Dog-Assisted Interventions In Mental Health Rehabilitation

Tiina Muros
Social Services
Thesis
April, 2010
Laurea University of Applied Sciences
Abstract
Laurea Otaniemi
Social Services

Tiina Muros

Dog-Assisted Interventions in mental health rehabilitation

Year  2010  Pages  25

The topic of this Bachelor’s Thesis is Dog-Assisted Interventions in mental health rehabilitation. It was carried out as a practice-based thesis work with a working life partner. The purpose of the thesis was to activate young mental rehabilitation clients by using calming, motivating and refreshing effects of dogs.

The work was implemented as two programs on CaringTV and it belongs to the Safe Home project, which is a research and development project 2009-2011 of Laurea University of Applied Sciences. The aim of the Safe Home project is to produce interactive programs through CaringTV. The Technological solution of CaringTV is based on video negotiation technique, where interaction happens through television or computer.

A target group was limited by the Safe Home project and it consisted of young adults who were in the mental health rehabilitation program and also clients of ASPA, Foundation of Housing Services. ASPA promotes independent living for disables and mental health rehabilitation client’s. The group members were interviewed and selected through another project of Laurea University of Applied Sciences.

The programs were based on Dog-Assisted Interventions, where the dog, five year old terrier bitch, was acting as a thread through the programs by working with given tasks. Discussion with the participators was inspired by the dog and for example expressive behavior of the dog was used for interpreting participators’ own feelings.

Assessment of the programs was based on actualization of the aims that were set and feedback from the participators. Even though the participators wished to have the dog visiting to them at live, all the feedback was encouraging and the participators showed interest toward this kind of activity on CaringTV.

Keywords: Mental health rehabilitation, dog-assisted activity, dog-assisted therapy, dog-assisted intervention
Table of contents

1 Introduction ..................................................................................................4
2 Backgrounds ..................................................................................................5
   2.1 Personal aim and interest .................................................................5
   2.2 Connection to the project .................................................................5
3 Mental health and rehabilitation ...............................................................6
   3.1 Psychiatric disability vs. mental health ..............................................6
   3.2 Rehabilitation in Finland .................................................................7
   3.3 Group rehabilitation .........................................................................8
   3.4 Empowerment in the client work .....................................................9
4 Human-animal bonding ..............................................................................10
   4.1 History ..............................................................................................10
   4.2 Previous studies ...............................................................................11
5 Definitions and models for the animal-assisted interventions .........................11
   5.1 AAT - Animal-Assisted Therapy ..................................................12
   5.2 AAA - Animal-Assisted Activity ..................................................12
6 Dog as an assistant ...................................................................................13
   6.1 Health benefits ...............................................................................13
   6.2 Requirements of the dog .................................................................14
   6.3 Ethical issues and risk management when working with the dog ..............15
7 Purpose and objectives of the practice-based thesis work ................................15
8 Implementation on the CaringTV ...............................................................16
   8.1 Forming a group ..............................................................................17
   8.2 Objectives for the programs ............................................................18
   8.3 Program 1 ......................................................................................18
   8.4 Program 2 ......................................................................................19
9 Discussions ..................................................................................................21
   9.1 Permissions and ethical issues ..........................................................21
   9.2 Evaluation .......................................................................................21
   9.3 Continuation ....................................................................................23
References ....................................................................................................24
1 Introduction

A dog and human have been together for 100 000 years. The dogs have guarded sheep, driven cattle, found supper for human, protected children, led a blind, comforted in sickness, fought in a war, and provided an entertainment and companionship (Morgan 2004, 1). The dogs have assisted people in different ways during the centuries.

By having a life-long experience of dogs and seeing good influence of them keeping up the daily routines and social activities, it is easy to assume that most people would get support for mental and physical well-being from dogs. It is estimated that there are 600 000 dogs in Finland (Suomen Kennelliitto 2009). According to the amount of the dogs, many people do get something of having dogs as a part of their lives.

Animal-assisted interventions are recognized as part of the treatment programs in some level, but there are still more possibilities for these kind of activities. The terminology has been attempted to standardized, but there are still work to get terms, definitions and practices formalized (Kruger & Serpell 2006, 33). Models of animal-assisted therapy and animal-assisted activity are presented in this Bachelor’s Thesis with examples.

The Bachelor’s Thesis is under the Safe Home project, which is research and development project 2009-2011 of Laurea University of Applied Sciences. The aim of the project is to broadcast interactive programs and other e-services via CaringTV (Safe Home 2010). The target group is limited by the project and it consists of young adults who are in the mental health rehabilitation program.

Mental health rehabilitation is nowadays often carried out in group. Development of the society and a concept of social welfare have shaped mental health rehabilitation as it is today. Even more than 17 % of Finnish people have some mental disorder, but what is mental health, and what is mental disability? These questions and facts that should be acknowledge with mental health rehabilitation groups are presented in this Bachelor’s Thesis.

This is a practice-based Bachelor’s Thesis, which produces two interactive programs for mental rehabilitation clients in CaringTV. A purpose of the thesis is to activate and motivate the clients by using calming and refreshing effects of the dogs and perceive if dogs could be seen as a part of the rehabilitation program in the future. The production needs good background work and it is implemented with a working life partner.
2 Backgrounds

2.1 Personal aim and interest

The author of The Bachelor’s Thesis has worked with mental health rehabilitation clients in Sweden and in Finland during the year 2008. Since 2009 the author has been connected to dog-assisted interventions by her work and is also a member of a work group, which is bringing a therapy dog (vårdhund) model from Sweden to develop and support dog-assisted therapy in Finland. The author has also been involved with Nordic cooperation of dog-assisted activities and therapy through her work. Personal aim for The Bachelor’s Thesis was to get practical experience of dogs with mental rehabilitation clients and develop previous experiences.

2.2 Connection to the project

The project, Safe Home (Turvallinen koti) is a part of the new wellbeing service concept of Laurea University of Applied Sciences. Financier for the Safe Home project is The European Regional Development Fund (ERDF). Innovative electric services utilizing new technology are included in the concept. The project is implemented through Living Lab-model together with universities, municipalities, enterprises and the third sector workers. The project supports wellbeing and daily living for those who need different kinds of guidance and counseling services. The aim is to support daily activities and self management, involvement, activeness, vitality, communality and a feeling of being safe. For the client the concept offers a diverse channel to get professional support as well as peer support. A nature of the concept is empowering and interactive. (Safe Home 2009.)

Mental rehabilitation clients are one of the groups under the Safe Home project. They were the target group for the thesis. The group was offered to have a possibility to participate in two programs implemented as a part of this Bachelor’s Thesis. Empowerment and interactivity were held as a baseline through the programs.
3 Mental health and rehabilitation

3.1 Psychiatric disability vs. mental health

An individual has psychiatric disability when he cannot function and cope with the demands of modern life. Disability is an inability to take care of self, participate in social activities or manage at work as the way it is socially expected (Pratt 1999, 12.)

World Health Organization (2009) defines mental health: “Mental health is not just the absence of mental disorder. It is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.”

According to Toivio and Nordling (2009, 84) a concept of mental health is divers and defining it is difficult. Some of the several factors that are affecting mental health are inheritance, early interaction, life experiences, relationships and social network. Even though the inheritance has an important role, conclusions cannot be done according to it. Researchers have shown that mental illness of parent or parents is a risk factor for the child to become mentally ill. This risk factor could be minimized by beneficial growth circumstances.

The most feared mental illness is schizophrenia. Other recognized mental disorders are for example depressive disorders and manic depressive disorders. Substance abuse problems, developmental disorders, severe learning disorders and chronic physical illnesses are other serious maladies that people experiencing severe mental illnesses often have as well. (Pratt 1999, 9.) In this Bachelor’s Thesis it was not meaningful to go into any deeper levels of psychiatric illnesses or assess available treatments for them, because medical records of the clients were not known and the information was not relevant for the programs.

The symptoms of the mental illnesses are often classified into positive and negative symptoms. Hallucinations and delusions are positive symptoms as they come within the disease. A social withdrawal and an inability to experience pleasure are negative symptoms as the individual loses them because of the disease. (Pratt 1999, 10.)

In these days mental health is often seen as a changing resource, which is renewed or worn in different stages of life. Good mental health is seen as something worth aiming at achieving. It is connected to ability to survive in life. Mental health is not determined only by individual’s features or genes. Researchers have found many factors effecting positively the mental health, but also risk factors. Both positive and negative factors can be connected to the individual as well as the surroundings (Toivio & Nordling 2009, 308).
Over 17% of all Finnish people have some mental disorder (Vähäkylä 2006, 14). With young people percentage is 15-25 and often they are girls who have mental disorder (Väestöliitto 2009). Adolescence is critical time in many ways. Biological changes are showing in physical growth and sexual maturation. Psychological experiencing of self is strongly depended on how the person is experiencing his/herself physically. Major changes in social, cognitive and emotional development are happening. The changes are leading toward adulthood. Adolescence is characterized by crises of relationships, identity and ideological. (Toivio & Nordling 2009, 157.)

3.2 Rehabilitation in Finland

Rehabilitation is something that happens in daily life, every day and it could be affected by own actions (Koskisuu 2004, 31). Rehabilitation is defined in many ways in different times and by different organizations (Toivio & Nordling 2009, 279).

According to Rissanen (1991) rehabilitation developed in Finland after the Second World War. Nowadays rehabilitation is more often implemented in groups. Development of the society and a concept of social welfare have led into this. Group activity started to shape already in the 1980’s; more experiences were gained during the 90’s when there was more need for rehabilitation. (Niemistö 2004, 27.) Finnish Central Association for Mental Health organizes annually dozens of rehabilitation courses which are financed by The Social Insurance Institution and Slot Machine Association (Mielenterveyden keskusliitto ry, 2009).

Clients who are living in supported housing and group homes follow rehabilitation program which consists of different activities which can be based on music, physical exercises, games or discussions about diets. According to experiences of the author of The Bachelor’s Thesis the clients are not always motivated participating, because they do not necessarily find the activities interesting or useful.

The rehabilitation client often feels insecure to be left on his own. He is afraid of the symptoms getting worse. The rehabilitation program should aim at helping the person to believe that life is not controlled only by the illness, fortune or other people. Missions for rehabilitation are to promote individuals ability to rehabilitate, to support the client to achieve his own objectives (Koskisuu 2004, 15, 30.)

Good interaction with the mental rehabilitation client and offering psychosocial support, beside the medication, are essential parts of the treatment. It is also essential to survey the client’s life situation, support the client to commit to the medication and assess productivity of the rehabilitation. (Hentinen, 2009, 96.)
Very often the rehabilitation client is having services from more than one system. Because of this, responsibility of implementing the rehabilitation is divided. Different organizations might have conflicting ideas what are the objectives and possibilities for the client and their own commission in the client’s rehabilitation. For the client’s best interest it is important to co-operate and create an entity (Toivio & Nordling 2009, 279.)

3.3 Group rehabilitation

According to Koskisuu groups have always been used in the mental health rehabilitation. It has been thought that groups are supporting the goals of rehabilitation by giving possibilities for mirroring client’s own experiences. Still, with activity groups it is good to remember that the use of activities does not make the group a rehabilitation group. Goals for the group could be different or the used activity is not rehabilitative for all participators. Goals for the activity group as well as goals for the individual participator are key factors when defining whether the group is rehabilitative or not. (Koskisuu 2004, 169.)

There are always external and internal terms regulating the actions of the group. By considering these terms the spirit and productiveness can be affected. The external terms are surrounding factors and a basic task. Internal terms are related to the group members. Any group which makes a group has a purpose. The purpose is a wider concept than an objective or the basic task, since it is the one that defines why the group exists. (Niemistö 2004, 34.)

 Supervised groups usually have two objectives, even though both of them would not have been recognized. The group needs to act according to the purpose and also look after its own cohesiveness. Awareness of the objective (basic task) is a baseline for reasonable group working. If the group members are not aware of the objectives, they will not be motivated to act in the group. (Niemistö 2004, 35, 37.)

Content of the group rehabilitation should be consistent and logical, but on the other hand some variety should be included. Pure lecturing could cause frustration. Themes that support rehabilitation could be used. The themes could be such as controlling stress, social skills, exercising, health and well-being. (Koskisuu 2004, 174.) Periodization of the group should be well considered. Many therapy groups are gathering regularly. For the group members this kind of regular gathering always at the same time helps adapting the group as part of the life. (Niemistö 2004, 55.)

According to Niemistö (2004, 58-59) smaller groups are helping individuals to stand out. There are also better chances for the group to act unified. Group members are evaluating smaller groups more positively than bigger groups. When the group size is growing fewer members are
actively participating. Niemistö describes small groups as active, personal and like-minded where participating is even and there is a possibility for independency.

Korpelainen (1998) describes interaction in the groups important in growth and achieving the objectives. When a person agrees for interaction, he gives himself and others a chance to meet. Finding own inner resources and energy gives a great joy in the group. When a person is becoming more familiar with himself, he is more open to think what he can give to the others, Korpelainen continues. (Ryhmän voima ja viisaus 1998, 105, 107).

It is good to remember that when the worker is guiding the group, he does not know how other person should live. The tutor of the group should not take a responsibility of changing the participators live. Instead, the tutor’s responsible action is passing his knowledge, skills, support and hope to the group. The participators should not give advices to each other either. Sometimes listening is difficult, but because everyone wants to be heard it is possible to take listening as one of the goals in the group. Participators are easily changing the topic for something else that was originally planned to discuss. An aberration is normal, but it does not mean that the original topic will be forgotten. Good guiding is to lead the discussion back to the theme. (Koskisuu 2004, 172.)

3.4 Empowerment in the client work

Empowerment is a process, which comes inside of the individual, as Peavy (2006) describes. It is essential to believe in clients’ possibilities. Nearly all people who are seeking help are creative and active and they have ability to find solutions for their problems. (Mönkkönen 2007).

According to Siitonen (1999), baseline for empowerment is that the person knows him/her self what is good for him or her. Main idea of empowerment is inner feeling of power, which increases in interaction, where the ability to feel self-valuable is supported (Hentinen, Iija & Mattila 2009, 105). The process of empowerment could be considered successful, if people develop as independent and self-sufficient by increasing personal and social strength. At the same time they have increasing trust toward co-operation and mutual independence states Heikkilä and Heikkilä (2005). (Hentinen 2009, 107.)

It appears to be typical for the mental health rehabilitation clients that they have weak ideas about their own management of their lives. They don’t trust their capability to control or they don’t recognize consequences of the actions. The person can experience being controlled by the forces from outside or by their illnesses. When ideas of management and expectations for capability are positive, they lead to increasing motivation and willingness to try with more ambition. (Koskisuu 2004, 14-15.)
4 Human-animal bonding

“The pet practitioner does little but be itself, and has the client’s trust well before the client trusts the human therapist.” (Chandler 2005, 6.)

According to the Aristotelian thinking a human is an animal and strong bond between humans and animals is ability to experience. This bond supports identifying to animals; we are able to feel empathy toward them. Animal’s ability to experience makes their problems real to us and as we need to help other people, we also need to help animals. We need animals in order to grow as humans. Ability to understand and respect animals and their difference is part of a sense refining practice. Our well-being is depended on other animal’s well-being: the whole nature is society in which we are depended on each other. (Aaltola 2004, 165.)

4.1 History

Anthrozoology studies interaction between human and animal. It includes all interaction but the main focus is in positive sides such as animal promoting healthier life for human and therapeutic effects of animals. In early studies the strong psychological and emotional affection between people and pets was identified. It got a term “human-animal bond”. The term was actually noticed in Scotland in 1979 even it was already used before by Konrad Lorenz and Boris Levinson (Wikipedia 2010).

Scientists have studied the use of animals in treating psychological disorders since the early twentieth century. Boris Levinson, an American child psychiatrist, was the first to write seriously and extensively about pet therapy in 1964. He saw the dog as an ice-breaker and softening the children’s defenses and providing a focus for communication (Star Life Services, 2010).

According to the Levinson’s study in 1970 animal could have a great influence on child’s life if there is a lack of caring and emotional security in the family (Viialainen 2004). Sigmund Freud found similarities between animals and young children as they are ruled by basic biological functions (Serpell, 2006, 13).

By Levinson’s (1972) words “One of the chief reasons for man’s present difficulties is his inability to come to terms with his inner self and to harmonize his culture with his membership in the world of nature. Rational man has become alienated from himself by refusing to face his irrational self, his own past as personified by animals. (Serpell 2006, 14.)
The healing power of human-animal interactions has also been an active component of Green Chimneys Children Services in US for several decades. Former dairy farm was first operating as a boarding and day school and summer camp and it was designed to be a place where children and animals could grow up together (Mallon 2006, 151). Later on the school specialized in the care of children with emotional, behavioral, social and learning challenges. The school is promoting a philosophy of dignity and worth for all living things by providing care for animals and nature (Green Chimneys Children’s Services, 2010).

4.2 Previous studies

Kihlström-Lehtonen (2009), Jyväskylä University, studied how dogs influence occupational well-being. She collected data from companion dog handlers of The Finnish Kennel Club. According to her study, dogs gave a reason to wake up on difficult mornings and carry on through the day. Participants felt great responsibility to look after the dog and for that also to look after themselves. Dogs were experienced as comforting in difficult times. The conclusion of the study was that dogs have implications for occupational therapy interventions.

Dog participating in child welfare is studied in Turku University of Applied Sciences by Kallio and Rintamaa (2008). The study examined three animal-assisted working methods, where a dog was participating in child welfare. Even if animal-assisted working methods are not suited for all clients, many positive effects were found; working with the dog is giving experiences of succeeding and joy, which increase the level of self-confidence of children. Dogs are also easing interaction between people.

5 Definitions and models for the animal-assisted interventions

When using search engines in the Internet, various results were shown, for example for the word therapy dog, as well as in Finnish as English. It is common that activity is called as therapy even though it does not correspond to description of therapy. Katcher (1984) states that: “It should not be concluded that any event that is enjoyed by the patients is a kind of therapy.” Despite of the long history the field is struggling to define itself (Kruger & Serpell 2006, 22, 33.)
5.1 AAT - Animal-Assisted Therapy

Animal-assisted therapy is an intervention with a goal. The animal is essential part of the treatment program. AAT is always provided by professional with specialized expertise. There are specific criteria for the animal as well. AAT includes specific goals for each individuals and the progress is measured (Kruger & Serpell 2006, 23).

There is not unified activity of AAT in Finland yet. There is previously mentioned work group, which is founding an association of AAT based on Swedish model. Vårdhund skolan in Sweden is working in the field of AAT actively and it is accepted there very well. In 2008 The Swedish Inheritance Fund decided to give financial support to AAT in Sweden. The grant is approximately one million US dollar and it is for a three-year project. In the same year thirty-one participants got their diplomas after the first AAT course in Sweden. Before leaving an application form for the grant, great background work was made, a part of it in United States in 2006. There it was seen the powerful health effects of dogs and garden therapy used by trained teams and based on a well structured set of policies and procedures (Vårdhund skolan 2009).

The model in United States is from Delta Society, which is a human-services organization dedicated to improving people’s health and well-being (Delta Society, 2009). The Swedish model has got an inspiration for their written material from Delta Society, which is adapted to the Swedish conditions. This is how Vårdhund skolan got started. A lot of cooperation is also done with a number of organizations, both those devoted to different groups of patients and those working with dogs. Other important contacts have been taken with scientists from universities interested in doing research on the effects of AAT.

With the project money, people from Vårdhund skolan set the first Nordic meeting in Uppsala, Sweden, in May 2009. Participants there were from Norway, Finland and from Sweden naturally (Vårdhund skolan 2009).

5.2 AAA - Animal-Assisted Activity

Animal-assisted activity provides possibilities to improve quality of life by motivating, recreating and educating with therapeutic benefits. AAA can take place in different environments by specially trained professionals, paraprofessionals, or volunteer in association with animals that meet specific criteria. Treatment goals or detailed notes for the activity are not needed. The visits are spontaneous (Kruger & Serpell 2006, 23).
AAA is commonly used in Finland and there are few different groups offering services of AAA. The biggest and widest spread activity group is Kaverikoirat, The Companion Dogs. It is a registered brand in Finland, and it belongs to The Finnish Kennel Club. Activity started in 2001, when the first course was run. Basic idea is to bring some joy and experiences to the clients. This activity is not considered therapeutic, because dog owners are not professionals in this activity.

The Companion Dog activity in Finland is totally based on voluntary work. The volunteer dog owners need to have an interest to delight client groups. The client groups are children, disabled and elderly people. The volunteers are trained for the activity in the weekend course, which is supplied by The Finnish Kennel Club and nowadays run by the author of this Bachelor’s Thesis.

6 Dog as an assistant

6.1 Health benefits

According to Hart (2006, 80-86) psychosocial benefit that animal companionship provides is meaningful. Animals are companion for loneliness and depression. They are socializing and motivating, and they have calming effects. Loneliness, lack of companionship, depression, and lack of social support are major risk factors that can impede a person’s well-being. Even increasing likelihood of suicide is one of the risk factor. People having companionship with animals are less depressive and lonely. Animals have a socializing effect; people who do not necessarily respond verbally to conversation might speak to their animals. Very often animals are also offering a topic to the conversation and there are stories about them to share. Animals are motivating people to take walks and for outdoor life. They are also motivating their owners for volunteer work. They want to share their animals with others who enjoy them. (Hart 2006, 80-86.) This is how The Companion Dog activity is working.

When sharing ideas and experiences in Therapy Dog work group, motivating effects of dogs are standing out; children with special needs are concentrating when there is a dog working with them and in physiotherapy a client is motivated using his hands when there is a dog to touch (Therapy Dog work group 2009).

According to Steed and Smith (2002) there are several studies where AAA is practiced with residential geriatric patients with positive results. The patients have decreased blood pressure and heart rate, decreased depression, and increased life satisfaction (Chandler 2005, 21). Even though amount of the researches is still small, but growing, they support an idea
that individual Animal-Assisted Therapy is reducing stress. There is also evidence that effects of animals are beneficial on human health, particularly for cardiovascular health (Friedmann & Tsai 2006, 113).

Good results are also got when experimenting AAT with psychiatric patients. The group consisted of patients having mental illness diagnosis of schizophrenia, bipolar disorder, unspecific psychosis, or depression. During the experimental time the group had animals visiting every day for the entire group time. The visiting animals were dogs, rabbits, ferrets, and guinea pigs. The patients were not required to interact directly with the animals, but they had a chance to observe or interact with them. It was also possible to hold them, pet them and play with them. By the fourth week of AAT, the patients were notably more interactive with other patients, were more sociable and helpful with others, and were more active and responsive to surroundings. (Chandler 2005, 23.)

6.2 Requirements of the dog

It is estimated that there are 600 000 dogs in Finland. 450 000 of them are purebred. (Suomen Kennelliitto 2009) It is obvious that not all of the dogs are suitable for dog-assisted interventions. There are few hundred different breeds. Some of them are more likely to make a good dog for the work than others, but in the end it is individual’s qualities that matter, and the most suitable dog can be purebred or mix of different breeds.

According to Chandler (2005, 28) a dog which has the right temperament for therapy work is affectionate, friendly, and sociable with persons of all ages and ethnicities and both genders. It must tolerate high levels of noise and activity. The dog must not be aggressive toward other dogs, and it is most helpful if the dog is friendly toward other dogs as well. The dog must be relatively calm. It is imperative the dog to be obedient and easy to control. A therapy dog needs to be comfortable with traveling in a car. It must be comfortable when visiting unfamiliar places and greeting unfamiliar persons. And the most important, the dog needs to have a fairly good tolerance to stress. Aggressive or fearful dogs are not appropriate for therapy work. Dogs that bark continuously are also not appropriate for therapy work.

The Companion Dog activity of the Finnish Kennel Club is open for all family dogs; healthy and over two years old. A background of the dogs should be known and they are expected to have a certain amount of life experience. They need to enjoy being with people and take contact without being told to do so. It is also important that the dogs are well taken care of, clean and pleasant to touch. (Suomen Kennelliitto 2009)
6.3 Ethical issues and risk management when working with the dog

When working in the field of animal-assisted interventions, a connection between handler and the dog must work well. The handler needs to be able to trust the dog in all circumstances and the other way around. The dogs are highly dependent upon humans for protection and care. According to Chandler, people who participate in animal assistance programs are usually aware of animal welfare and animals rights. Still, some troubling cases in U.S. were reported. (Chandler 2005, 70.)

In the therapy dog work group it was once discussed that for example in elderly residential care animals are sometimes living with the clients, not just visiting there. This might be fine when animals are such like fishes or birds, but cats and especially dogs need to have their own person, who is responsible for them. Same person should observe appearance and behavior of the animal every day in order to notice possible differences (Therapy dog work group 2009). This is the safest for the animal as well as for the clients.

In the training courses for the Companion Dog owners, participators are warned to be very aware what is happening around during the visits and to notice if there are for example medicines on the floor that the dog could swallow. It is possible that clients do not have a sense of the things which could be harmful for the dogs. They don’t necessarily always have an idea how much force it is possible to use. The dog handler is responsible to look after the dog and protect the dog all the time (Suomen Kennelliitto 2009).

On the other hand there are risks for the clients as well. As mentioned earlier, it is very important to be critical when choosing a dog for therapy or activity and take good care of the dog as well. Still, a large dog might knock a client down for example. Other kind of risk for a client is to become attached to the dog. Grief and loss issues are then risk factors, when service is terminated (Chandler 2005, 8).

7 Purpose and objectives of the practice-based thesis work

Purpose of the thesis was to activate and motivate the clients by using calming and refreshing effects of dogs. There were two programs and both of them had their own objectives. The purpose was the same. The dog were introduced in the beginning and had an important role when building the group belonging. The work needed a good background work, which included some information about mental health problems, mental health rehabilitation in Finland and dog-assisted interventions. Earlier studies about the topic were researched even though there were not too many of them.
The Bachelor’s Thesis is practice-based thesis work and it consisted of two parts; report and activity. Very often in the practice-based thesis works the practice part is also written such as manual or guidebook (Vilkka 2004, 65). In this case the practice consisted of two produced programs. The report consisted of theoretical backgrounds from literature and descriptions of the programs.

With practice-based thesis the data and information gathering should be carefully considered. Otherwise there is a risk that the work will get too wide. When organizing events, possibilities for choice making and solutions should be described in the thesis report (Vilkka 2004, 55-56). The programs in this thesis were considered as events. During the programs the author was leading discussion and also handling the dog. Information, which was received from the clients, was written down after the programs as it was remembered. The programs were described and evaluated in the thesis report.

Evaluation in research based and practice-based thesis works should be different from each others, because the nature of the works is different. In practice-based thesis work it is good to collect some feedback in order to avoid subjective evaluation. Other essential objects in evaluation are how the work is implemented and how the process is reported. (Vilkka 2004, 154-159)

8 Implementation on the CaringTV

The practical part of the thesis is implemented on the Caring TV. The technological solution was based on video negotiation technique, where interaction happened through television. The clients were from social-, healthcare and from third sector. The services were for supporting living at home and coping in daily life. (Safe Home, 2010.)

The dog for the programs was chosen of two choices. The fact that the programs were implemented on TV, not face to face, was crucial. It was considered that activeness of the dog was important, social skills as interest toward unfamiliar people were not as relevant as they would have been in case the programs would have been run in face to face. It was considered that active dog was interesting to watch and would participate on the given tasks with more enthusiasm. The chosen dog was five years old Welsh Terrier bitch.
8.1 Forming a group

The group consisted of seven to nine young (from 18 to 30 years old) adults, who were in the mental rehabilitation program. They were living on their own by supported housing. The group gathered together twice a week so the members of the group knew each other beforehand. On CaringTV they had been once before and it was still on pilot stage with the group. According to the plan they were on CaringTV twice a month during spring 2010.

The group was collected according to interviews and all group members were from Kouvola Foundation of Housing Services. The interviews were done by other Laurea students and by another project of CaringTV and the author did not have a chance for choice making with the group forming. All the information that was given to the author beforehand was general information of the group members. It was known that some of them had very difficult problems in their backgrounds. Anyhow, the author had a chance to meet the group two weeks before program 1, when the group had their first meeting on the CaringTV with two physiotherapist students.

Expectations of the group members were collected when they were interviewed for the project by other Laurea students. All in all there were five categories of expectations. Taking care of self was category which was divided in two parts; nutrition (healthy, diverse and low-carbohydrate nutrition) and home (medication, first-aid, cleanness). Other categories were healthy living (exercising, stretching, quality of sleep), coping in daily living (what is difficult and how to get over with it) and free time. The last category was free time, and there the group members hoped to get art therapy, film evaluation, and also a program of animals.

CaringTV is co-operating with ASPA, Foundation of Housing Services, where the group members, mental rehabilitation clients, were from. ASPA promotes independent living for disables and mental health rehabilitation client’s. In Kouvola, where the group members were living, the activity of ASPA started in 2001. (Asumispalvelusäätiö ASPA, 2010.)

Service of ASPA consists of house calls, telephone support, and group activities at business days. Joint group activity is important part of Kouvola’s ASPA services. It supports residential skills and hobbies and also stimulates daily routines and gives a chance for peer support. By doing and sharing things together social skills and ability to take responsibility will be developed. (Asumispalvelusäätiö ASPA, 2010.)
8.2 Objectives for the programs

Because of the limited time and a nature of the work, there were only two produced programs. General goal for the both programs that were produced was building well-working dialog in interactive and authentic situation. This goal was chosen, because assessment was based on the discussion and participators experiences. It was also hoped to find out if and how dogs could be part of the rehabilitation program on the CaringTV in the future. Both programs were assessed afterwards by using their own aims and general goals. Feedback was asked after the both programs. Objectives were measured according to the feedback and by success of discussion. Success was measured according to activeness and shown interest.

8.3 Program 1

The aim for the first program was to catch an interest of the clients and make them share their experiences and ideas openly. By empowering the group it was hoped to motivate the members. An open atmosphere was important.

There were nine participators in program 1. The main focus was on presentations, where the topic and the dog were meant to bring together. Participator’s previous experiences with dogs were asked and it was emphasized that previous experiences were not needed, open minded attitude was enough. Only two of the participators told that they had some experiences of dogs. One had met an aggressive dog, but he did not bring any negative feelings up to the conversation.

After the presentation the dog started to yawn by having a funny sound, like a cat meowing. From dog’s side it was a sign of not being totally relaxed, but it caused laughing and gave the author a chance to tell a story of dog yawning in other situation, where it was comical. Laughing together gave a feeling of group belonging and the group members started to ask some questions of the dog like how does the dog’s coat feels like. This was a question that was meant to be asked later on from the group and it was important question since the participators had no chance to touch the dog. Touching is important part of dog-assisted interventions and interaction with dogs. This showed that participators were imagining how it feels to touch the dog.

The group chose an activating toy that was given to the dog. This task was to empower the participators by giving them a chance to choose. Another reason for the task was to give the participators and the dog a common experience. While the dog was working there was not that much conversation - everybody was concentrating on watching the dog.
It was asked from the group if they could think different ways how dogs could be useful for people. The author told about sheep dogs she had just seen herding and dogs that are working at the Customs as an example. The idea was to get the participators to think if they could benefit of the dog-assisted activities. Without leading the discussion in that direction the participators mention that dog can be hugged and dog owners need to take the dog out for a walk, which is good for the owner as well. Psychological and physical benefits of the dogs were noticed.

During the program there were some technical problems; time to time it was difficult to hear and several times it was spoken at the same time since there were some delays with the sound. Beside of that the program did run smoothly. Feedback from the group was received even before it was asked. The participators mentioned it was nice to have the dog on the program. They wished the dog to do some tricks next time.

There were discussion during the program and according to the answers the participators were really thinking about the topic. They also asked questions, which showed they had an interest. Several times ideas that were meant to be discussed came up from the participators before the author took them up. The feedback was all just positive and came directly from the group before asked. The group also presented ideas for the next time, which showed interest.

8.4 Program 2

Program 2 was aiming at getting the discussion on a deeper level to find if and how dog-assisted activities could be utilized with the mental health rehabilitation clients on the CaringTV. The program 2 is also aiming at giving the group members a feeling of connection between them and the dog.

Nine participators attended in Program two. Program 2 started by presentations and asking participators to say an adjective which first came to their mind when thinking about a dog. The adjectives the group members used were: can be scratched (rapsutettava), likes to get affection (helvyydenkipeä), cute (söpö), nice (kiva), tailed (hännällinen), sweet (suloinen), happy (iloinen), faithfull (uskollinen), and lively (vilkas). The author reminded the group that the adjective does not need to be positive, because people might have and are different experiences of the dogs.

The participators were asked if they had new experiences with dogs after the program 1. One of the participators had met a dog on the street and he told how the dog was licking his hand and was jumping toward him. He described it happily.
After the first program the group wished the dog to do some tricks. Instead of just showing the tricks the author wanted the group to be part of the learning process. In this case it was used a clicker, which was already familiar with the dog. A clicker is a mechanical device, which can be used to mark the desirable behavior of the dog. Before using the clicker the dog needs to associate the sound with a reward. This was first explained. The author showed how the dog could be taught to touch an item with her paw. The item in this case was a flyswatter. The author explained how more complicated and challenging tricks could be built on this basic skill. This part raised questions about dogs learning skills. One participator told that he had been wondering how guide dogs are trained and that this activity helped him to understand. This task was done in two parts, because the author wanted to give a little break for the dog. The group was interacting actively during the task.

The author showed nine different pictures of the dogs using different kind of expressive behavior. The pictures were not explained beforehand. The participators were given a task to choose a picture that would describe their feelings at that moment. Aggressive looking dog was said to describe the feeling one participator had in the morning. Calmly lying dog was chosen and a participator explained he had been exercising three days and now felt tired. Other chosen pictures were described as feeling cozy, playful, listening. Some of the pictures were more difficult to interpret, partly because they were difficult to perceive because of technical reasons or the expressive behavior of the dog was not that familiar with the participators. These pictures were then explained by the author. The purpose of the task was to help the participators to empathize and also share their feelings.

It was asked if and how the participators would see the dog as assisting in the rehabilitation. One given example from the participator was that if a person is suffering, a happy dog is affecting the mood. The human-animal bond was mentioned.

In the end, before asking for feedback, the group had a chance to choose a reward for the dog of two choices. The author wanted the participators to be involved in the process until the end. The dog was given the toy and she started to play with it actively and she was not staying in front of the cameras all the time. As during the program, the participators immediately asked to call the dog back so that they could see her. A visual presence of the dog was experienced important.

Feedback from program 2 was asked in the end. Once again it was very positive; “was nice to watch the training, seeing how to act with the dog, animals are therapeutic, made feeling good, affected the mood, altruistic, friendly, feeling good…” The participators wished the dog coming to visit them. It was obvious that the dog was hoped to be present there at live with the clients, not only through TV. One of the participators mentioned that it was refreshing to watch the dog on the TV screen.
When assessing program 2, it is necessary to notice that discussion could have been in deeper level and more ideas how the participators could benefit of the dogs on CaringTV could have been hoped. On the other hand the activity part was seen as relevant to inspire the minds. Thirty minutes was challenging short.

The group was actively interacting during the program. This time some of the questions were asked from each participator. More of them commentated during the program. This gives an idea that it is good to give everyone a turn to say something and this might make it easier for them to participate in the discussion later on as well.

9 Discussions

9.1 Permissions and ethical issues

Permission to run the programs as part of the thesis is acquired through the CaringTV project and separate permission for these particular programs will not be needed.

The author had a chance to meet the group members in CaringTV after their first program held by other students of Laurea and present herself and the coming programs briefly beforehand. Before each program the thesis work is presented with its objectives, and the group members can choose if they still want to participate or not.

The names of the group members are asked, but they are not written down in any formal documents. If the group member has not signed the permission for CaringTV, she/he can participate without telling the name and showing the faces.

9.2 Evaluation

Feedback was asked directly after the programs, but also several weeks after the programs from the project worker in case some feedback was given afterwards. According to the project worker some feedback of the Dog-Assisted programs was received from the supervisors of the group. The programs were liked, waited and thanked. Actual meeting between the project workers and the supervisors of the mental rehabilitation clients was scheduled, but possible feedback from the meeting will not be on time for this thesis report. All in all the clients had found CaringTV as a positive surprise even though there was some strong prejudice beforehand. (CaringTV, 2010)
All the feedback of the dog-assisted programs on CaringTV was positive, which would show that this type of activities and services could be useful in the future. It is still presumable that all the participators did not share their ideas openly, or that the participators felt that they were obligated to be polite in new situation. More than two programs would have given more reliable result of the participators’ experiences.

A challenge for the program planning was the time, because the situation was living. In case of technical problems, thirty minutes runs quickly. On the other hand in both times some of the group members started to yawn before ending even though they were participating actively. An interactive program needs focusing.

Some technical problems appeared such as losing a sound. The sound was also delayed all along, which made discussions less smooth. From the pictures that were shown during the program 2 were a bit difficult for the participators to see. This problem could have been avoided by planning technical issues together with the project worker. All in all both programs were instructive and with an experience it would be possible to develop the content and the technique.

Other challenges in this case were that handling the dog and keeping up the discussion were done by the same person. Assessment happened afterwards and it was written as it was remembered. Short discussion after the programs and some notes from the project worker were found helpful. Trustworthiness of the results would have been stronger in case there would have been more programs to evaluate, notes would have been written through the programs and there would have been more time to collect written feedback as well. Experiences of this thesis could be seen as directional.

The programs had a clear theme which was supportive for rehabilitation. The objectives were also very well acknowledged and the discussion stayed in the theme throughout the programs. The group gathered at the same time on the same weekday. With this group small group’s positive sides were showing; the group were like-minded and personal. Individuals had a chance to stand out. The experience with the group supported very well the theoretical framework of The Bachelor’s Thesis.

The programs were planned with activities where the dog was involved through the program. Only the existence of the dog was not the point, but the role and tasks of the dog were as a thread the programs were built on as it was planned. Both programs could be described interactive and discussion was on the topic during the programs. All in all the purpose and objectives were met. A thing to change was to add at least one more program in order to get more reliable results and some rhythm and continuation.
According to the information that was obtained during this practice based thesis work, the mental rehabilitation clients are open to receive these kinds of services, where dog-assisted interventions are used through CaringTV. Although the participators expressed their wish to have the dog visiting there live, and very important part of the benefits of the dogs such as touching and petting was not possible, the dog-assisted interventions on CaringTV could motivate the clients when measuring it with the interest they showed through the programs. In the future it would be interesting to study difference between having a dog present in authentic situation and using dog-assisted interventions through television.

The pictures of dog’s expressive behavior seemed well working opening for the participators own feelings. The author of this Bachelor’s Thesis found this technique helpful and useful. It could be developed and varied more in the future. Dogs could also be used as mirroring the participators feelings - especially if there were more programs and situations would get more familiar. Throughout the programs the dog was there to motivate the participators to talk and all the activities that were given to the dog were shared experiences. Also these activities could be varied in the future. CaringTV is easy to reach and does not stress the dog as much as face to face meetings. Stress level of the dog could be influenced by regulating the activities.
References

Aaltola E., 2004, Eläinten moraalinen arvo, Finland, Vastapaino


Green Chimneys Children’s Services http://www.greenchimneys.org (viewed 04/2010)


Hentinen K., Iija A., Mattila E., 2009, Kuuntele minua - mielenterveyden käytännön mene-
telmätä, Finland, Tammi

Kallio S., Rintamaa J., 2008, Dog participating in child welfare, Turku University Applied Sci-
ences

Kihlström-Lehtonen H., 2009, Me and my dog - How dogs influence on occupational well-
being, Jyväskylä University

Koskisuu J., 2004, Eri teitä perille – mitä mielenterveyskuntoutus on?, Finland, Edita


Mönkkönen K., 2007, Vuorovaikutus Dialoginen asiakastö, Finland, Edita

Niemistö R., 2004, Ryhmän luovuus ja kehitysehdot, Finland, University of Helsinki


Ryhmän voima ja viisaus, 1998, Finland, Gummerrus Kirjapaino Oy Jyväskylä


(viewed 09/2009)

Suomen Kennelliitto ry, http://www.kennelliitto.fi/FI/koirakaverikoira/etusivu.htm (viewed
09/2009)

Therapy Dog work group, meetings 2009, Finland

Toivio T., Nordling E., 2009, Mielenterveyden psykologia, Finland, Edita


Vilkka H., Airaksinen T., 2004, Toiminnallinen opinnäytetö, Finland, Tammi

Vårdhund skolan, 2009, Nordic Meeting in Uppsala, Sweden

Vähäkylä L., 2006, Hoidossa vai heitteillä?, Finland, Minerva

