Pets and the Elderly

The Therapeutic Bond

Odean Cusack
and
Elaine Smith

Pets and the Elderly

The Therapeutic Bond

Odean Cusack is a freelance journalist whose areas of specialty include animals and the environment. She has a B.A. in Psychology from The University of the State of New York and studied graduate Zoology at Temple University and Rutgers University.

Cusack's serious writing began in 1980 when she founded *Signature,* the Mensa special interest group concerned with animal rights and the environment, and functioned as editor and publisher of the group's newsletter "Signature News" which was widely distributed throughout the animal rights and welfare community. Currently, she is a contributing editor to *Agenda,* the newsmagazine of the Animal Rights Network. Her articles have appeared in such publications as *Omni, Orion Nature Quarterly, Pure-Bred Dogs American Kennel Gazette, Dog Fancy, Today's Animal Health, Woman's Day, Lady's Circle,* and *Guideposts* magazines, as well as Philadelphia-area and national newspapers.

A lifelong animal lover and pet owner, Cusack's current menagerie includes 5 dogs, 4 cats and 9 birds.

Elaine Smith, of Therapy Dogs International in New Jersey, has trained at St. Elizabeth's Hospital in New Jersey and the Royal College of Nursing in England. She owns, trains, and rehabilitates animals.

Pets and the Elderly

The Therapeutic Bond

Odean Cusack
Elaine Smith

Routledge
Taylor & Francis Group
LONDON AND NEW YORK

First published 1984 by Routledge

Published 2014 by Routledge
2 Park Square, Milton Park, Abingdon, Oxon OX14 4RN
711 Third Avenue, New York, NY 10017, USA

Routledge is an imprint of the Taylor & Francis Group, an informa business

ISBN: 978-1-315-80440-8 (eISBN)

Pets and the Elderly: The Therapeutic Bond has also been published as *Activities, Adaptation & Aging*, Volume 4, Numbers 2/3, January 1984.

Reprinted 2009 by Routledge

Library of Congress Cataloging in Publication Data

Cusack, Odean.
Pets and the elderly.

"Has also been published as Activities, adaptation & aging, volume 4, numbers 2/3, January 1984"—T.p. verso.
Bibliography: p.
Includes index.
1. Pets—Therapeutic use. 2. Aged—Rehabilitation.
I. Smith, Elaine. II. Title
RM931.A65C88 1984 615.8'515 83-26409
ISBN 0-86656-259-1

Pets and the Elderly
The Therapeutic Bond

Activities, Adaptation & Aging
Volume 4, Numbers 2/3

CONTENTS

Chapter 1: A Brief Introduction to Animal-Facilitated Therapy 1

Chapter 2: The Therapists' Casebook 5

Chapter 3: The Human/Animal Bond 33

Chapter 4: Training a Therapy Dog 51

Chapter 5: Implementing Animal Therapy in the Institution 75

Chapter 6: A Dog (or Cat) in Residence 107

Chapter 7: Program Suggestions for Animal-Facilitated Therapy 127

Chapter 8: Pet Visitation Programs 141

Chapter 9: Therapy Dogs in Action 153

Chapter 10: Animal-Facilitated Therapy in the Community 175

Chapter 11: Non-Canine Therapists 193

Chapter 12: Evaluating the Program 205

Bibliography and Selected Readings 211

Appendix I: Therapy Dogs International 215

Appendix II: Organizations Involved in Pet Therapy 223

Appendix III: Current Legislation 229

Appendix IV: JACOPIS Assessment Procedures 233

Index 249

Page Intentionally Left Blank

Pets and the Elderly

The Therapeutic Bond

Photo by Bob Barber.

Chapter 1

A Brief Introduction to Animal-Facilitated Therapy

Man and animals have interacted for as long as the two have coexisted on this planet. In fact, Dr. Leo Bustad, Dean of the College of Veterinary Medicine at Washington State University, says:

> Plants and animals in our environment are like parts of our body. If we eliminate them, we destroy part of ourselves. People must remain in contact with and relate to the environment throughout their lifetime to remain healthy. A strong people-animal-plant bond is critical to a healthy community.[1]

Certainly, our ancestors attributed healing, even magical, powers to the animals who shared the earth with them. In ancient Greece, for example, dogs licked the wounds of the sick because their tongues were believed to possess medicinal value.[2] More often, however, a part of the animal was presumed to offer the miraculous cure, and the living creature was often sacrificed for it. Even today the horn of the critically endangered rhino is pulverized to a fine powder and sold throughout the Orient as an aphrodisiac.

But until relatively recently, few in the medical community recognized the therapeutic value of association with the whole living animal. This is truly ironic, since most of us at some time in our lives have experienced the benefits of such a relationship.

Most of us can recall a time, probably as children, when the devoted companionship of a loyal dog or the contented purring of an affectionate cat gave us more comfort than the most modern tonics. In times of stress, the animal companion was the anchor whose unswerving attachment to us made all of life's burdens easier to bear. The animal fulfilled our needs in a way that no human could. As we matured, we thought our devotion to the pet was childish, doting, anthropomorphic, even silly; and we thought we alone had

such excessive attachment to our pets. Little did we realize at the time that association with our animals was actually healing our psychic and emotional wounds, revitalizing our strength to once again meet the harsher human-oriented world head-on.

Just as our pets helped us through our crises, so have the pets of millions of our forefathers. And therein is the true paradox: animal-facilitated therapy is the most modern of medicines, as new as the latest issue of a medical journal; yet it is as ancient as the art of healing itself dating back to that twilight time in prehistory when humans found that animals were not simply sources of food or competitors for prey, but friends and companions.

Although we do not know when the association first came about, we have some clues. In 1976, Simon Davis, of Hebrew University, uncovered a tomb of a human skeleton in northern Israel. The hand of the skeleton was clutching the remains of a puppy, indicating, according to Davis, that the relationship between the two was affectionate, rather than gastronomic. This poignant archaeological find is estimated to be some 12,000 years old.[3] As the first animal domesticated, the dog was not only man's earliest friend, but also his first therapist.

The origin of animal-facilitated therapy can be traced to the 18th century. The earliest cited use of animals as adjuncts to treatment was the York Retreat founded in 1792 by a Quaker merchant, William Tuke. In contrast to the asylums of the day which often employed brutal and harsh forms of treatment for the insane, the York Retreat emphasized positive, instead of punitive, means to control behavior. Animals were part of the living environment, and patients were encouraged to learn to care for them.[4] The York Retreat was the forerunner of positive reinforcement programs and is to this day considered a model in this form of treatment.[5]

Bethel, a wide-based treatment facility in Bielefield, West Germany, is appropriately called "an institution without walls." Founded in 1867, Bethel was established for epileptics, but later initiated treatment for other disorders as well. Currently, Bethel has over 5,000 employees and 5,000 patients, and, like the York Retreat, animals are an important part of the living environment. In addition to traditional pet animals, Bethel includes farm animals and a wild game park. Bethel has an equestrian program that is especially helpful to epileptics. Leo Bustad visited the institution in 1977 and attributes much of its success to its warm, home-like atmosphere. Bethel is in the fullest sense a community.[6,7]

The earliest formal use of animals as aids to therapy in the U.S. was in 1942 at the Pawling Army Air Force Convalescent Hospital in Pawling, New York. The patients, victims of fatigue as well as physical injury, primarily needed rest and relaxation, and the program encouraged them to work with various farm animals as well as engage in academic studies. The patients also interacted with reptiles and amphibians that resided in the forests nearby. Some of the patients organized frog jumping contests and turtle races which inspired a competitive spirit and provided an educational experience.[8]

In the 1960s however, the work of psychiatrist Boris Levinson suggested that the use of animals as adjuncts to traditional therapy was only beginning to be explored. As with many great discoveries, Levinson's pioneering work began quite by accident in 1953 with a shaggy dog named Jingles. The dog was with Levinson in the office when a mother and child arrived unexpectedly for an appointment that was not scheduled till many hours later. The young patient's interaction with the dog eventually aided in his recovery.[9]

The work of Sam and Elizabeth O'Leary Corson in the 1970s also came about serendipitously when the team was researching dog behavior at Ohio State University. The kennels were in earshot of the adolescent ward, and the patients there, hearing the dogs bark, broke their self-imposed silence and asked if they might be allowed to play with the animals. Corson selected the patients that were the most withdrawn and the least communicative and studied the effects of interacting with the dogs on them. Forty-seven of 50 participants showed improvement; many eventually left the hospital.[10]

The Corsons extended their work at the Castle Nursing Home in Millersburg, Ohio, and obtained similar results. Interaction with the animals promoted self-reliance and increased responsibility among the patients, many of whom had previously been almost entirely unmotivated in those areas. The animals also facilitated social interaction between the residents themselves and residents and the staff.[11]

In 1970, Philadelphia psychologist Ethel Wolff prepared a survey for the American Humane Association and reported that 48% of the institutions she surveyed used animals in some capacity.[12] In 1972 Boris Levinson surveyed New York state psychologists and found that half of those questioned were engaged in some manner of pet-facilitated therapy.[13] Journalist Phil Arkow, whose overview volume of pet therapy is now in its 3rd edition, remarked that in 1977 he knew of only 15 humane societies utilizing animal therapy

programs and eight U.S. university research projects investigating them. In his revised edition, he references 75 humane society programs, 44 academic projects, and numerous miscellaneous programs.[14] The actual number is probably much higher. Correspondence from members of Therapy Dogs International, a worldwide volunteer organization of trained dogs and their owners, indicates many dog clubs and similar organizations are involved in these projects also.

Most significant is the growing recognition of the human/animal bond in the scientific and academic community. Although the formal research in the field is just beginning, it has already generated a growing body of evidence that suggests that animals make people happier, healthier, and more sociable. Pets facilitate our recovery from illness and may even promote longevity. They enrich our lives in numerous ways just by being their own furry, feathered, or finned selves. In short, animals make us better people. The benefits of companion animal association are available to everyone; for the elderly, however, they have special value.

REFERENCES

1. Bustad, Leo, K. *Animals, Aging and the Aged.* University of Minnesota Press, Minneapolis, 1980.
2. Ibid.
3. Miller, Harry. "Cro-Magnon's Best Friend." *Dog World,* April 1979, 24.
4. Bustad, Leo K. op. cit.
5. McCulloch, Michael J. "Pet Facilitated Psychotherapy," address delivered at the International Conference on the Human/Companion Animal Bond, October 5-7, 1981, Philadelphia, PA.
6. Bustad, Leo K. "Bethel—An Institution Without Walls." *The Latham Letter,* Winter 1981-82.
7. Film: "Bethel—An Institution Without Walls." Available from the Latham Foundation.
8. Bustad, Leo K. *Animals, Aging and the Aged.*
9. Editorial. "Dogs, Other Pets, Used to Treat Emotionally Ailing." *The Times Herald,* November 8, 1979.
10. Ibid.
11. Ibid.
12. Wolff, Ethel. "A Survey of the Use of Animals in Psychotherapy in the United States." *American Humane Association Report,* 1970.
13. Editorial. op. cit.
14. Arkow, Phil. *"Pet Therapy": A Study of the Use of Companion Animals in Selected Therapies.* The Humane Society of the Pikes Peak Region, 3rd edition, August 1982.

Chapter 2

The Therapists' Casebook

To date research studies conducted specifically to determine the value of animals to the elderly fall into three categories: out-patient/ in-residence pets, pet visitation programs in institutions, and pets as in-residence mascots in geriatric facilities. This chapter will review several representative studies.

OUT-PATIENT IN-RESIDENCE PETS

Mugford and M'Comisky: Elderly Pensioners[1]

An early and now classic study which evaluated the therapeutic effects of pet animals on an out-patient population was conducted in Hull, East Yorkshire, England in 1975 by R. A. Mugford and J. G. M'Comisky. The researchers selected 30 elderly pensioners ranging in age from 75 to 81. Two groups were given budgerigars (parakeets) which were selected as the therapeutic animal because of their ease of care and adaptability to most home environments, and two groups were given begonias. A final control group received neither flora nor fauna. An additional factor, television, was considered as the researchers theorized that a pet may be less important to television owners since this does provide interaction with society as a whole and thus could affect the patient's evaluation of his/her loneliness. At the onset of the study, a 30-item questionnaire which measured attitudes towards self and others as well as the physical and psychological environment was administered to all the participants.

Throughout the course of the five-month study, the pensioners were visited by social workers, and at the conclusion of the time frame, the questionnaire was again administered.

Overall evaluation showed budgie ownership had a positive effect: the twelve individuals who had received the birds showed

marked improvement, especially in areas that concerned attitudes towards other people and their own psychological health. The presence or absence of television made no statistical difference. The birds became an important subject of the pensioners' conversations and enhanced their social lives with friends and neighbors. All the recipients immediately gave their colorful new friends endearing names and insisted on taking full responsibility for the care of their charges. Many bought toys for the birds and one recipient built an elaborate playground. Many trained the birds to leave the cages. One elderly woman taught her clever pet to recite the names of neighborhood children; as a result she had frequent young and enthusiastic visitors. A follow-up a year and half later revealed that the recipients still had the pets and were taking good care of them.

Susanne Robb: Elderly Veterans[2]

Between 1980 and 1982, Susanne Robb, Associate Chief, Nursing Service for Research at the Veterans Administration Medical Center in Pittsburgh, Pennsylvania, surveyed a randomly selected sample of veteran clients receiving home health care through the Center. Total sample size was 56 including 26 pet owners and 30 non-pet owners. "This study was undertaken," she says, "to extend systematic efforts to explore the possibility that association with companion animals enhances human coping ability as manifested in selected indices of physical and psychosocial health." The measured variables were morale, social interaction, mental status, psychological symptoms, ability to perform physical and instrumental activities of daily living, number of diseases, number of medications, and control. These particular variables were selected, she explains, because they had (1) been mentioned in the anecdotal accounts as benefits associated with companion animal association, (2) had not been studied previously in this context, and (3) could be measured using previously developed criteria.

Upon analysis of the data, Robb found that there was no significant difference in the health-related variables between the pet and non-pet group. She conjectured that the strength of the pet-owner bond might be an important factor and re-assessed the data after dividing the sample into high-bond and low-bond clients. High-bond pet owners were those who selected pets when asked: "Do you prefer pets or people?" and high-bond non-pet owners were those who answered yes to the question: "Do you wish you owned a

pet?'' Once again, she found no significant differences between the groups.

Robb suggests several reasons why this study did not corroborate earlier findings: a virtually all-male sample, difficulty of definition of variables, oversimplification of the alleged relationship between association with companion animals and human health benefits, etc., and indicates some direction for future research. She also suggests:

> Perhaps in living with companion animals on a day-to-day basis, in the absence of crises, no measurable impact exists. When events threaten or result in loss of contact between people and their animals or serve to restore contact after a period of separation or loss, however, this may be the time when measurable impacts occur.

Ory and Goldberg: Pet Possession and Well-Being in Elderly Women[3,4]

Marcia G. Ory, medical sociologist at the National Institute on Aging, Bethesda, Maryland, and epidemiologist Evelyn L. Goldberg, of the Johns Hopkins University, Baltimore, Maryland, are currently exploring the role of pets in the life of the elderly as part of a larger five-year study of social factors affecting the health of older women.

''The purpose of the study,'' explain Ory and Goldberg, ''is to examine the role of pet ownership as an independent predictor of perceived happiness in the elderly.'' Interviews were conducted with 1,073 white married women aged 65-75 living in Maryland of whom 388 were pet owners. The women in the study were predominantly non-urban and lived in a household of at least two persons. Although health status and mobility varied among the sample, the criteria for the study excluded the very sick or the institutionalized. Pet owners were also asked to indicate their degree of attachment on a five-point scale (from ''very attached'' to ''not at all attached''). To measure the subject's subjective evaluation of her psychological well-being, these investigators chose ''perceived happiness'' as assessed by Gurin's measure of overall happiness, a single item that asks: ''Taken all together, . . . would you say you are very happy, pretty happy, or not too happy.''

Upon analysis of the data, Ory and Goldberg found that:

> Controlling for sociodemographic, health status, and social interaction factors, the simple presence of pets in the household was not related to happiness. However, further analyses revealed that the relationship between pet ownership and happiness was complex, dependent upon the nature of the animal-human interaction as well as the social context in which the women lived.

"While attached pet owners were not very different from non-pet owners, women who reported being unattached to their pets were the most likely to be unhappy," explain the researchers.

> There is partial support for the hypothesis that persons who are unattached to their pets are also less likely to be involved in close relationships with their spouses. These findings can lead to the speculation that certain women are less likely to have attachments, either with humans or with pets.

Ory and Goldberg also found that pet ownership among women from higher socioeconomic backgrounds was associated with greater happiness; in women from lower socioeconomic backgrounds, pet ownership was associated with unhappiness, suggesting that " . . . the meaning of pet ownership is different for different segments of the population."

Some other interesting findings concerning pet ownership emerged from this study. Elderly people, on the whole, are less likely to own pets than the general population; but the majority of those who do are very attached to the animal(s). Most (73%) of the pet-owners interviewed described themselves as very attached to their pets.

PET VISITATION STUDIES

A Wine Bottle, Plant, and Puppy[5]

Prior to her survey of elderly veterans, Susanne Robb, along with Michele Boyd and Carole Lee Pristach, registered nurses at the Veterans Administration Medical Center in Pittsburgh, Pennsylvania, conducted a study at that facility to determine the effectiveness of certain objects as catalysts for social behavior.

Elaine Smith and Therapy Dog Phila and Friends. Photo courtesy of Therapy Dogs International.

Robb hypothesized that the degree of animation, that is, faculty for life or motion, of an object would have a direct correlation to that object's ability to impact social change. She selected a wine bottle, an inanimate object that could however be an interesting visual stimulus for her population of elderly male alcoholic patients; a flowering plant, alive but not capable of motion; and a caged puppy to represent full animation.

The three objects were introduced into the environment, the dayroom of one unit of the hospital, one at a time, each for a ninety-minute period on two separate days. Subjects (who varied according to who entered the room) were observed for the following social behaviors: verbalization, smile, look (toward the object), eyes open, and leans-toward-stimulus. The subjects were all chronically ill, predominantly aged residents in a long-term care facility.

Robb reports:

> Of the three stimulus items, the caged puppy produced the most dramatic increase in social behavior. This effect is not surprising since a puppy offers love and unconditional acceptance in addition to stimulating multiple senses—smell, touch, vision, hearing. The perpetual, infantile, innocent dependence of a friendly dog may inspire a natural tendency on the part of humans to offer support and protection, even when the humans appear to have withdrawn from reality.

Although the purpose of the study was only to ascertain the effect of the stimuli on social behavior, several points of interest arose during the puppy phase of the project. "Verbalization became more conversational in nature," reports Robb.

> The one word remarks and inappropriate comments that characterized the other study phases were much less evident. Two clients who routinely uttered repetitive, monotonous, illogical and undirected statements stopped their inappropriate remarks in the presence of the puppy. The puppy served as a social catalyst. Clients talked about kinds of dogs they had owned previously. Many wanted to know if they could pet the puppy (they were allowed to do so after the project ended); some clients offered suggestions as to how to quiet the puppy when it barked. None of the hostile behaviors observed during other phases of the study were evident when the puppy was present.

> Invasion of personal space had frequently triggered verbal arguments and physical violence between clients. When the puppy was present, invasion of personal space increased as clients moved to get closer to the puppy, but no hostility resulted.

Robb's Pilot Study of Pet-Dog Therapy[6]

In 1981 Susanne Robb began a feasibility study

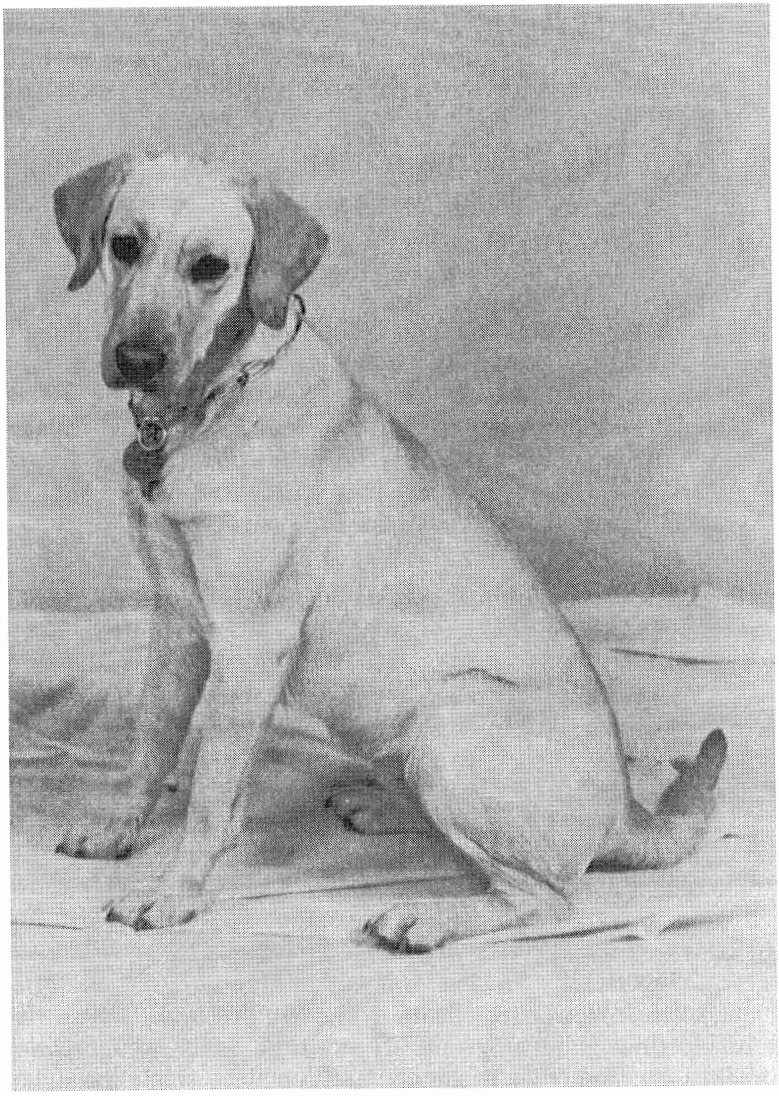
> to identify effects of close contact with companion dogs on oriented, male residents receiving long-term care in a Veterans Administration facility. Effects considered were psychosocial symptoms, depression, hopelessness, morale, cathectic investment, loneliness, psychosocial functioning, activity, medication usage, physical injuries (caused by the dog) and zoonoses (transmitted from dogs to patients).

Additionally, Robb's study was designed to examine the cost/benefit of pet-dog therapy and to ascertain the perceptions of nurses on dogs in a facility.

The design involved seven four-week observation periods and three study groups (control, experimental/no-pet, and experimental/pet, based on subjects' interactions with the dogs). The treatment consisted of 12 companion dogs and 22 volunteer dog handlers. Subjects were residents who lived on two study floors who agreed to participate in the study and who met the criteria (oriented, not confused; aged 50 or older; male; no known allergy to dogs).

Robb's results found no significant difference between the three groups which she attributes to the baseline mental state of the subjects. "Opportunity for the companion dog program to effect changes was somewhat restricted by the fact that initial scores were favorable (indicating only mild to moderate levels of depression, hopelessness, and other problems) and remained stable throughout the study."

Nursing personnel, however, reported that disoriented and confused individuals appeared to benefit from the dogs' visits. "The nature of the benefit was usually some overt action or behavioral expression that had seldom, if ever, been seen before the dogs came," explained Robb.



Therapy Dog Nessie. Photo by Bob Barber.

Examples included the engagement of residents in appropriate rather than inappropriate conversations, residents reaching out to hold or pet the dogs (when they had not reached out for other people or objects), smiling, and attentiveness to the dogs' movements for comparatively long periods of time.

Additionally, the nurses' perception of dogs in health facilities changed from "generally neutral" to "generally favorable." They continued, however, to doubt that use of pet-dog therapy would result in a reduced workload.

Perhaps most importantly, no zoonoic diseases or dog-related injuries occurred among residents or staff. Also, no negative effects on the dogs were reported.

Some of the implications from the study, concluded Robb, are:

1. Therapeutic benefits are probably not as obvious or common to large numbers of residents as proponents of companion dog programs believe.
2. Risks of adverse/untoward reactions to the presence of dogs on the part of residents and others are probably much lower than opponents of this intervention believe.
3. Precautionary measures taken for this program to ensure safety were probably more stringent than necessary.
4. Models chosen for companion dog programs need to match the kinds of residents who are expected to benefit.
5. Caution needs to be exercised in assigning work for companion dog programs to nursing personnel.
6. Companion dog programs that are evaluated need to take place for longer than six weeks.

Domestic Animal Visitation as Therapy for Adult Home Residents[7]

Gloria M. Francis, Professor of Psychiatric Mental Health Nursing at Virginia Commonwealth University, along with Jean Turner, an instructor in psychiatric mental health nursing, and doctoral student Suzanne Johnson, conducted a study to determine the value of domestic animal visitation to semi-institutionalized elderly living in group homes.

The settings were two adult homes in which the residents were chronic mentally ill persons who had been discharged from psychiatric facilities. "The sample profile for the experimental home was

a 72-year-old, white female who had been at the home 39 months. The control group profile was a 76-year-old, white female who had been in residence for 47 months. There were, however, blacks and men in both samples," explained the researchers.

The treatment consisted of eight puppies or kittens and four handlers who spent three hours at the experimental home once a week for eight weeks. The residents gathered in the large foyer. Puppies were handed to those who asked for them or reached out for them, or they were placed on the floor to play with each other and balls. The control group had weekly human visitors only. Each group was pre-and post-tested for eight variables: health self-concept, life satisfaction, psychologic well-being, social competence and interest, personal neatness, psychosocial and mental function, and depression.

The results indicated a dramatic difference between the two groups. The residents who had interacted with the puppies improved in six out of eight areas measured. The only two areas that were not impacted were personal neatness and health self-concept. Nothing happened to the control group. Although they had human visitors, it appeared to cause little interest. One resident remarked matter-of-factly: "People come and go."

The researchers are not surprised by their findings.

> It has been fairly well documented that animals are therapeutically effective with various populations. What then is the point? The point is perhaps the simplicity and the inexpensiveness of an apparent successful therapeutic mode. This program could be instituted entirely by volunteers from outside an institution, or possibly by lesser-paid, non-professionals from within. The effected, measured variables . . . could be said to be indications of quality of life. If one accepts this, the study has shown that a simplistic, inexpensive "treatment modality," something long-term institutions could implement almost immediately, can significantly improve psychosocial function, hence "quality of life."

Mary Thompson and Therapy Dog Misty[8,9]

Mary Thompson, a registered nurse and therapist, is also the owner of a therapy dog, a Golden Retriever named Misty. Thompson and colleagues conducted a study at the Coatesville Veterans

Administration Medical Center to examine the parameters of behavior change that may occur in psychiatric patients and to establish guidelines for implementation and operation of pet-facilitated therapy in institutions.

After careful screening, 20 subjects were selected ranging in age from 40 to 60 years of age; the group was randomly subdivided into a control group who would not interact with the animals and an experimental group who were assigned to a 6-week, 18-session pet-facilitated therapy program. The 45-minute sessions included instruction on animal care and handling, petting and playing with the pets, as well as group discussion involving animals. In addition to Thompson's therapy dog, other dogs and cats, puppies, kittens, parakeets, and guinea pigs were used. Overall results indicated that subjects with moderate functional impairment improved significantly over both the control subjects and pet therapy subjects on extremes of the range (low impairment and high impairment), suggesting to the researchers that subject selection for pet therapy programs is extremely important.

However, as in many of the studies described, there was dramatic improvement in one patient. Thompson describes her experience:

> During my three years of working as a gerontological clinical nurse specialist at a large Veterans Administration Medical Center, one of my major goals was to help to improve the quality of the lives of the geriatric patients. Unfortunately, there never were, nor will there ever be, enough humans available for this purpose, especially in large institutions. However, I have always had a deep interest in and love of animals and therefore, I decided to enlist the assistance of my furred friends in striving to achieve my goal.
>
> Author Gladys Taber summarizes well the difference pets can make in her following statement: "When everything goes wrong with human relationships, which happens at times, there is comfort and restorative power in the soft muzzle laid gently on your lap, an ecstatic tail wagging, or a small head rubbing against your neck while a purr-song says, "How absolutely wonderful you are."[10]
>
> This has been borne out so often in the patient population (many with long-term psychiatric problems) with whom I was associated. During the pet therapy research project upon which another nurse, a psychologist, and I embarked prior to

establishing regular pet therapy groups and ward mascots, we found one elderly patient, Mr. S, who had been extremely regressed on a locked ward, and who had shown no interest in anyone or anything, suddenly taking an active interest in the animals which were introduced to him in a group setting. After several group sessions, Mr. S asked if he could assist more directly with the pets and was given the task of taking care of the pets prior to and after the group sessions. During this same time, Mr. S. began to show improvement in other areas such as communication skills and personal hygiene. By the time the six week research project had terminated, Mr. S had shown so much improvement that he was transferred to an open ward and even became a messenger for the ward. In this instance, Mr. S's involvement with the dogs and the other animals had served as a catalyst for transforming him from an uncommunicative, regressed patient to a responsible, alert human being.

This was the most dramatic change that was seen in any given patient; however, there were many other instances where my dog, a trained Therapy Dog (and member of Therapy Dogs International), and the other pets that were employed helped to brighten a patient's day and bring a smile to many faces. One patient in particular was extremely uncommunicative—uttering only a yes or no response—unless he saw my Golden Retriever Misty. He would then become very congenial and, at times, tearful as he would talk about the hunting dog that had been so dear to him in the past. Another patient, a blind man, seemed to receive his sole gratification from food—until he met Misty. He actually got down on the floor with her, put his arms around her, and buried his face in her neck as she gently washed his face and ears. Many "normal" people are repelled by my dog's desire to express her affection by licking; however, the geriatric patients to whom she has been introduced have all appeared to crave affection and have been quite pleased by her manner of expressing it.

It is true that pet therapy is not effective with everyone, just as other forms of therapy are not effective with everyone, but how sad if we don't at least give it a try; it we don't discover all the Mr. S's out there who can become a new person, or at least a happier person, with the aid of a devoted four-legged friend.