

Research Update is published by the Butler Center for Research to share significant scientific findings from the field of addiction treatment research.

Animal-Assisted Therapy for Substance Use Disorders

Service animals have played a significant role in modern health care practices, and therapy animals have begun to emerge as a popular addition to conventional psychotherapy for mental and behavioral health treatment. While animal-assisted therapy (AAT) is generally well regarded among patients, scientists have long been interested in its impact on patient well-being and outcomes following treatment for a variety of conditions, including treatment for substance use disorders.

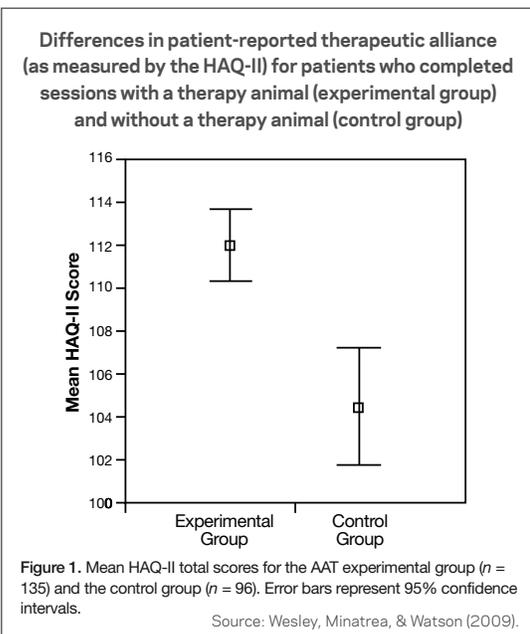
Treating Substance Use Disorders With Animal-Assisted Therapy

AAT is not an independent modality but is instead a therapeutic technique that is used alongside an established evidence-based practice in order to maximize the benefits of treatment.¹ AAT offers a vast array of applications to meet patient needs for a variety of conditions—they include equine/riding therapy to assist with balance and minimizing aggression, using observation and identification of animals as part of cognitive rehabilitation, and training service animals to assist patients with specific tasks in their daily routines.¹

For psychotherapy applications, including treatment sessions for substance use disorders (SUDs), a trained therapy animal is generally included in individual and group therapy sessions, and patients are able to interact with the animal as the session is conducted.^{1,2} The inclusion of AAT with evidence-based practices has had marked success with a number of populations in improving outcomes among patients. Studies have found that AAT is significantly effective with adult SUD patients in residential treatment programs,² individuals mandated to substance abuse treatment as part of the criminal justice system,³ and adolescents/young adults in inpatient and day treatment settings.⁴

How Does Animal-Assisted Therapy Improve Outcomes?

The inclusion of therapy animals in evidence-based treatment practices provides a number of therapeutic benefits that explain its success in improving patient outcomes. In treatment for SUDs, therapy animals improve therapeutic alliance and general regard for the treatment environment, in addition to reducing patient anxiety about receiving treatment, both of which have been found to increase patient adherence to their recommended treatment plan.



Therapeutic alliance refers to the quality of the interpersonal relationship formed between a patient and therapist, and it has been shown in several studies to significantly impact the likelihood of sobriety following an SUD treatment intervention, as patients are much more likely to complete their treatment plan as recommended when they share positive therapeutic alliance with the therapist.² Therapeutic alliance is a complex aspect of therapy and includes various elements, including a shared understanding of the goals and

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Willow, an Australian Labradoodle, began working as a therapy dog at Hazelden Betty Ford Foundation's Plymouth treatment site on June 5, 2014. She is present in grief groups and some Step groups, as well as in various workshops. Many clients have commented on how much Willow helps them feel more at home while in treatment, and numerous family members have reported that their loved one agreed to come to Hazelden Betty Ford Foundation for treatment once they found out that there was a dog in the building.

Nala is a certified facility dog, who contributes greatly to the mission of treating those individuals and their families suffering from addiction at Hazelden's Springbrook campus in Newberg, Oregon. Nala attends patient staffing meetings, individual sessions, and a variety of groups and lectures to help provide support for our patients dealing with the grief, anxiety, depression, and many other feelings that can arise in early recovery.

Irish came to the Betty Ford Center in Rancho Mirage, California, as an AAT dog in May 2009. An Irish setter, Irish completed his training at the American Kennel Club and passed the Canine Good Citizen Test, while also completing training with the Foundation for Pet Therapy. Irish was recognized as a certified pet therapy dog in May 2009. He attends small groups, lectures, private therapy sessions, meditation groups, and patient wellness sessions.

Anecdotal support for the effects Willow, Nala, and Irish have had on therapeutic alliance has been overwhelmingly positive, and their impact on patients and their outcomes have made them valuable members of Hazelden Betty Ford Foundation's clinical team.

QUESTIONS AND CONTROVERSIES

Question: What if a patient is afraid of the type of animal being used in AAT? Or what if they have allergies to the animal?

Response: AAT has demonstrated a number of therapeutic benefits for SUD treatment; however, it is not a universally effective treatment for all patients. Before using AAT with a patient, it is the counselor's responsibility to assess appropriateness of the intervention in the specific case and environment. If a patient is afraid of or allergic to the animal, or if they display aggressive tendencies that may potentially be dangerous to the therapy animal, then AAT is not recommended.

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activities for each session and the emotional bond between the patient and therapist.⁵ The strongest predictor of the quality of therapeutic alliance is the patient's level of motivation at admission,⁵ although therapeutic alliance can also be significantly impacted by demographic and personality characteristics of the patient and therapist, as well as the level of similarity between patients' and therapists' backgrounds and attitudes.^{2,6} The inclusion of therapy animals during sessions often creates a platform for initial verbal communication between patient and therapist regarding shared positive attitudes about the animal, which can accelerate the development of a positive interpersonal relationship and improve therapeutic alliance in early sessions.² Research has also found that patients tend to trust therapy animals significantly sooner than therapists in a new treatment environment, and therapists are trusted sooner as a result of their affiliation with the therapy animal.⁷

Outside of the benefits to the patient-therapist relationship, AAT offers a number of benefits directly to patients. The anxiety and feelings of discomfort associated with the therapeutic environment can negatively impact the outcomes of SUD treatment, as anxiety has been found to correlate significantly with patient relapse.⁸ Therapy animals have been found to significantly reduce patients' physiological symptoms of anxiety during sessions.^{9,10} AAT also provides the opportunity for the use of therapeutic touch for reducing patient anxiety and distress. Therapists are generally unable to use physical contact with the patient as an opportunity to provide support or reassurance, as it can easily be perceived as inappropriate; however, patients experiencing anxiety or distress may benefit a great deal from the nurturing feeling gained from gentle contact.⁷ Therapy animals provide a patient-initiated opportunity for physical contact in the form of petting or even hugging the animal, which provides the therapeutic benefit of touch without the threat of discomfort.⁷

Best Practices for Using Animal-Assisted Therapy

While AAT provides a multitude of benefits for patients receiving treatment for SUDs, it is not universally appropriate for all patients, treatment settings, or therapeutic situations. A practitioner who is considering the use of AAT must be able to follow best practices in doing so. In her handbook, *Animal-Assisted Therapy in Counseling* (2005), Cynthia K. Chandler outlines five critical AAT competencies for counselors: (1) orchestrating a therapy animal to enact appropriate behaviors and comply with appropriate commands; (2) evaluating a facility or counseling environment for appropriateness of AAT; (3) networking with facility and program staff regarding the intent and activities of therapy animals working in a facility; (4) following facility and program policies and procedures regarding the practice of AAT and establish policies and procedures where none exist; and (5) evaluating client appropriateness for participation in AAT.⁷ While it is expected that therapy animals are well trained, the counselor is responsible for ensuring that the animal maintains proper behavior, while also watching out for patient and animal safety and well-being.^{1,7} Similarly, before initiating AAT, the counselor must assess the appropriateness of the patient for AAT sessions; patients with animal phobias, highly aggressive patients, and patients with allergies may be threatened by, or pose a threat to, the therapy animal.⁷

Summary

For many people, the interaction with a therapy animal while undergoing treatment for SUDs can transform the therapeutic environment in a positive way, improve rapport with counselors, reduce anxiety, and increase the odds of a successful recovery once treatment is completed. Practitioners may find that the inclusion of AAT to existing evidence-based practices may be a welcome improvement to many patients' treatment plans, although it is critical that AAT core competencies and best practices are observed in order to ensure a safe and positive experience for all.

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HOW TO USE THIS INFORMATION

Counselors: Incorporating AAT into your SUD practice requires a great deal of planning and preparation. Consult with your facility and a clinician who has experience with AAT in order to develop a clear plan for finding and training an animal, establishing the necessary policies, and determining specific guidelines for how and when to use the animal in your treatment plans.

Patients: If you are interested in AAT, do some research on which local treatment programs offer AAT as part of their therapy sessions, as this is not generally something that many facilities are able to provide for various reasons.

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