



Contents lists available at ScienceDirect

Complementary Therapies in Clinical Practice

journal homepage: www.elsevier.com/locate/ctcp

Attitudes to and beliefs about animal assisted therapy for children with disabilities



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ARTICLE INFO

Article history:

Received 15 November 2016

Accepted 21 November 2016

Keywords:

Animal-assisted therapy

Canine-assisted therapy

Paediatric disability

Cerebral palsy

Autism spectrum disorder

Acquired brain injury

ABSTRACT

Objectives: This study assessed the attitudes and beliefs surrounding animal-assisted therapy (AAT) for the rehabilitation of children with disabilities at the Royal Children's Hospital (RCH), focusing specifically on cerebral palsy (CP), autism spectrum disorder (ASD) and acquired brain injury (ABI). This was an initial step to inform future AAT research and to understand the feasibility of interventions.

Design/Setting/Outcome measures: An online survey asking participants their opinions about the inclusion of AAT, and potential barriers to its introduction in a tertiary hospital setting was advertised on the RCH Intranet from 3 March 2015 to 3 April 2015.

Results: A total of 128 participants responded to the survey request, from a range of specialties and departments. Almost all survey respondents reported that animal-assisted therapy would be helpful in the physical or behavioral management of children affected by CP (98%), ASD (99%) and ABI (96%), and 98% of survey respondents supported the inclusion of AAT in the RCH. Ninety-two percent recommended AAT in the inpatient setting and 52% of the respondents suggest that it should be administered as a pre-determined program with set activities. Additionally, qualitative responses provided suggestions that AAT should be used to provide comfort in high stress environments such as prior to medical and surgical procedures.

Conclusions: The majority of staff are supportive of the inclusion of AAT in the RCH, indicating more research is needed to establish whether AAT is acceptable to children and families as part of their care.

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1. Introduction

The therapeutic benefits of an animal have been recognized since the 1700s, where farm and domestic animals were utilized in psychiatric treatment facilities [1]. Archaeologists suggest that the mutualistic relationship between canines and human beings has extended over 140,000 years [2]. Today, canines have a well-established role in society not only as a household pet, but also in

the police force, military and in healthcare [2].

Animal assisted therapy's¹ (AAT) scientific basis stems from the field of anthrozoology, also known as human-animal interaction (HAI). HAI involves research exploring the mutualistic human-animal relationship, and how it influences physical and psychosocial wellbeing. The theory behind HAI is that animals are a source of non-judgmental support and can facilitate social interaction [3]. The majority of available literature on AAT for CP and ASD features horse therapy, known as hippotherapy, with other studies published about canine- and dolphin-assisted therapy [7–15]. However, evidence of effectiveness is limited. Furthermore, there is little literature assessing the role of AAT following acquired brain injuries (ABI).

AAT falls under the overarching field of animal-assisted activities, involving structured therapeutic interventions with clearly defined objectives [4]. Research has described the merits and safety

Abbreviations: AAT, Animal-assisted therapy; ABI, Acquired Brain Injury; ASD, Autism Spectrum Disorder; CAT, Canine-assisted therapy; CP, Cerebral Palsy; HAI, Human-animal interaction; RCH, Royal Children's Hospital; REDCap, Research Electronic Data Capture.

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of AAT for autism spectrum disorder (ASD) and cerebral palsy (CP) [3,5–7]. In the area of paediatric disability, there are reports that animals can positively influence human emotion and cognition, and enable more meaningful clinical interactions for patients [4]. Grandgeorge et al. [5] and Solomon [2] believe that canines have a unique ability to bridge the communicative gap often seen in children with disabilities [16]. Berry et al. [17] adds that animals can act as social catalysts, as they possess a unique ability to elicit pro-social behaviors. It has also been suggested that AAT may have a role in the reduction of sense of isolation and hence, serve as a valuable adjunctive therapy for children with developmental and psychiatric disorders [4,18,19]. However, many of the current studies are not sufficiently well designed to be at low risk of bias. Furthermore, limited research has been done toward the development of guidelines for a beneficial AAT regime in a tertiary hospital setting.

As an initial step toward understanding the possible role of AAT in a tertiary children's hospital and the likely acceptance of a hospital based clinical trial, the attitudes, beliefs and concerns surrounding AAT need to be known. This study surveyed staff at a tertiary children's hospital about their awareness of AAT, their understanding of the methods used and the evidence available, and any potential barriers they perceived to canine-assisted therapy (CAT) for paediatric rehabilitation. Three highly prevalent paediatric disabilities, CP, ASD and ABI were the focus of the study.

2. Methods

2.1. Participants

Participants of this study included staff of the RCH, Melbourne, Australia. The RCH is an approximately 300 bed tertiary level hospital with 12 inpatient rehabilitation beds and one of the busiest emergency departments in Australia. The participants were recruited through an online bulletin notice accessible exclusively to RCH staff via the RCH intranet. All staff were eligible, including executive and administrative staff, clinicians, students and allied health professionals. An important objective was to ensure that the participant selection incorporated a cross-section of relevant professionals that may have an impact on AAT research and implementation in the hospital.

3. Materials

The survey design, data collection and management was done via the REDCap (Research Electronic Data Capture) program hosted at the University of Melbourne [20]. REDCap is a secure, web-based application designed to support data capture for research studies [21].

3.1. Procedure

The online survey questions and options for non-free text answers were constructed based on results from a literature review on CAT for children with disabilities, as well as feedback, during a pilot phase from experts in the field of paediatric rehabilitation, developmental disability and AAT. During the pilot phase, the time to complete the survey was approximately 7–10 min. The survey consisted of six sections, namely participant details; understanding of AAT for specified conditions; attitudes towards AAT for physical and behavioral problems associated with ASD, CP or ABI; opinion on the inclusion of AAT in a tertiary children's hospital; opinion on potential barriers to AAT in a tertiary hospital setting and finally, participant suggestions and feedback (Appendix). A participant information statement was included in the survey with consent

obtained prior to participant completion. The RCH Human Research Ethics Committee provided approval for this project January 2015.

An invitation to participate in the survey, alongside an online link to the survey on REDCap, was advertised daily onto the RCH bulletin for a month, from 3 March 2015 to 3 April 2015. Additionally, RCH staff from the rehabilitation and developmental medicine departments, as well as the RCH executive team, were encouraged via email to participate in the survey.

All quantitative data was analyzed using IBM Statistical Package for the Social Sciences software version 22.0. Additionally, qualitative data from free-text answers in the survey were categorized and the main themes identified.

4. Results

4.1. Participant details

The survey was completed by 128 participants, most of whom were nurses (55%) followed by medical staff (10%), administrative staff (6%) and researchers (6%) (Table 1). The participants were staff from a diverse range of specialties and wards; including neonatology, adolescent medicine and rehabilitation. The largest specialty represented was rehabilitation medicine, with 9% of respondents. There was a high level of experience amongst the participants, with 63% in their field for 10 years or more.

4.2. Understanding, attitudes and beliefs about AAT

Table 2 displays the understanding, attitudes and beliefs of the participants regarding AAT. Eighty-eight percent of participants had heard about AAT; but around half of these reported that they had limited knowledge about the therapy. Most survey respondents reported that they believe that there is a scientific basis behind AAT.

When questioned about their personal encounters with AAT for CP, ASD and ABI, most participants had seen the use of a dog, but observations of horse therapy, dolphin therapy and other pet-assisted therapy were also reported. An evaluation of the participant's views about AAT revealed that none of the participants were against the practice of AAT. Furthermore, almost all of survey respondents were of the opinion that AAT will be helpful in the physical or behavioral management of children affected by CP (98%), ASD (99%) and ABI (96%).

A qualitative question about the aspects of management, that AAT could assist in, identified several main themes. For CP, the most frequent themes were to assist movement and function, and emotional support. It was suggested that a canine would assist with physical rehabilitation including gait control, encouraging movement and the training of high-level functional skills in addition to improving coordination and muscle building. For both ASD and ABI, it was reported that AAT could be used to assist with emotion regulation and to act as a calming agent, aiding in behavioral management and diverting aggression. Themes that were common to all three conditions were the use of AAT for companionship; improved mood, morale and motivation; and facilitation of social interaction and communication. One participant raised the need to exercise caution when using AAT for a child with a recent ABI, due to the fragility of the child's physical and mental state in early stages of recovery.

4.3. Inclusion of AAT in a tertiary children's hospital

Nearly all (98%) survey respondents supported the inclusion of AAT at RCH (Table 3). As shown, just over 50% of the respondents reported that AAT should be administered as a set regime, described as a specific time frame and planned activity with the

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