

# Animal-Facilitated Therapy Program

## Outcomes from Caring Canines, a program for patients and staff on an inpatient surgical oncology unit

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**BACKGROUND:** Animal-facilitated therapy (AFT) is a complementary medicine intervention. To the authors' knowledge, no study has investigated the benefits of an AFT program in an adult surgical oncology setting.

**OBJECTIVES:** The purpose of this study is to assess the effects of an AFT program on patients and staff on a surgical oncology unit.

**METHODS:** A quasiexperimental design was used for the patient group, and a pre-/post-test design was used for the staff group. The intervention involved the AFT program being fully integrated on a surgical inpatient unit. Outcomes included patient-reported symptoms and quality-of-life (QOL) outcomes for patients, as well as professional QOL for staff.

**FINDINGS:** QOL indicators improved for all patients, and the level of energy at follow-up was significantly higher in the AFT group after adjusting for baseline. For staff, compassion satisfaction was high and burnout was low.

### KEYWORDS

animal-facilitated therapy; professional quality of life; patient outcomes

### DIGITAL OBJECT IDENTIFIER

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**ANIMAL-FACILITATED THERAPY (AFT) IS THE USE OF TRAINED ANIMALS** for the therapeutic, motivational, or educational benefit of patients. AFT with dogs involves a visit by a volunteer (called the dog's handler) and the volunteer's dog that has been trained and tested for temperament and obedience. A visit by a therapy dog typically lasts about 10–15 minutes, with the patient interacting with the therapy dog while the dog is supervised by the handler.

AFT has been associated with positive effects in many studies (Palley, O'Rourke, & Niemi, 2010; Phung et al., 2017). Comprehensive literature reviews and a meta-analysis found treatment effects in symptoms for patients with autism and medical and behavioral disorders and patients with depression (Matuszek, 2010; Nimer & Lundahl, 2007; Souter & Miller, 2007). AFT has been documented to produce objective and subjective health changes in patients (Barker, Knisely, McCain, & Best, 2005; Charnetski, Riggers, & Brennan, 2004; Marcus et al., 2013).

Psychological variables are often the primary outcome of AFT studies. Pain, fatigue, stress, and mood were studied in patients with chronic pain who received AFT compared with a control group of similar patients who did not receive a visit. Each symptom significantly improved in the AFT group but not in the control group (Marcus et al., 2012). A study of patients hospitalized on an inpatient mental health unit by Nepps, Stewart, and Bruckno (2014) identified significant decreases in depression, anxiety, pain, and pulse after an AFT program, compared to patients in a more traditional stress management group. A study at a large Midwestern hospital identified that patients reported decreased pain, anxiety, and fatigue scores across nine adult inpatient departments following AFT (Phung et al., 2017).

A study of infection rates before and after an AFT program on an inpatient unit found no change in infections, microorganisms, or contagious diseases with the introduction of dogs to a hospital setting (Caprilli & Messeri, 2006). Hospital policies regarding screening and medical clearance for volunteer dogs minimize risks. Although the risks of AFT are minimal, it is important to recognize that not all patients are suitable for this therapy.

A growing body of evidence supports the use of AFT as a complement to cancer treatment. AFT has been beneficial in reducing anxiety and