THE USE OF THERAPY DOGS WITH ADULT SUBSTANCE ABUSE CLIENTS
A Pilot Project

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In light of the benefits obtained through therapy dogs with children, in nursing homes and on mental health units, a pilot project was implemented to determine if the same results could be obtained with inpatient substance abuse clients. The primary goal, as with most animal assisted therapy, was to provide an activity which would be enjoyable and nurturing for the clients. Observations were made throughout the 12-week project to determine if there was potential for therapeutic benefit as well.

The activity took place at Seton Addictions Services in Troy, New York on the inpatient unit. This center, which embraces a holistic philosophy, contains both a biochemical detoxification section and a 26-day rehabilitation program. Although detoxification patients were not excluded, the unit’s physical layout lent itself more to participation by rehab patients and those are the results which are focused on this summary.

The three dogs brought to the unit were certified through Therapy Dogs International, Inc. Certification for dogs through this organization can be obtained only after the dog has passed strict temperament and behavioral testing and has been medically cleared by veterinary examination. All three dogs had been saved through rescue organizations and rehabilitated with a goal of service dog in mind. “Silk”, a greyhound rescued from the track, was a very gentle and calm dog who liked being fed by the clients. “Rose”, an orphan greyhound/pit bull mix rescued with her littermates from a neglectful background several years ago, was more interactive, shaking hands with the clients on command. “Alexis”, a full-blooded pit bull, was sick and carried many scars when rescued from a crack raid. She was a highly observant dog and the one most prone to jump in laps and lick faces. All had been obedience and agility trained.
The activity took place once weekly and was approximately an hour in length. The majority of the time two dogs were present. Activities included socialization, obedience work and guiding one of the dogs through a miniature agility course. Due to the highly structured schedule of the inpatient rehab there was some difficulty in obtaining a time suitable for all involved. The free period after lunch was finally selected and client participation was optional.

Since this was a new project, areas explored and observed were of a general nature. In addition to providing an enjoyable client activity, the authors hoped to determine if the use of animal-assisted therapy with substance abusers would help in identifying and intervening with self-defeating patterns in thoughts, actions and feelings, especially those that might contribute to relapse.

RESULTS:
A total of 56 clients (46 males, 10 females) were in the rehabilitation program during the 12 week project. “Active participation” was defined as physical/verbal interactions of greater than 5 minutes weekly for at least half of the client’s total weeks in treatment, and “passive participation” was defined as presence of the client with physical/verbal interactions of less than 5 minutes.

Sixty-four percent (28 men, 8 women) seemed to achieve the primary goal of actively participating in an event that provided some enjoyment or nurturing for them. Enjoyment was identified by observing client interactions with the dogs (i.e. petting, feeding, talking to, sitting close), positive statements made to staff and peers and questions indicating interest in the dogs’ histories and behaviors. An additional 13% (6 men, 1 woman) passively participated and 23% (12 men, 1 woman) chose not to participate on any level. Reasons for non-involvement included allergies, fear of dogs, not being an “animal person” and wanting to sleep (since the time slot conflicted with a rest period).

When the dogs were present, 56% of the participating clients seemed to interact spontaneously and ultimately revealed significant portions of their histories, especially as they related to violence, loss, self esteem, family dynamics and consequences of drug and alcohol use. This seems significant in light of the difficulties some substance abuse clients experience with trust, especially with those they perceive as “authority figures”.

Insight was gained into self-esteem and boundaries when the clients perceived “rejection” from a dog. Nineteen percent of the participating clients tended to withdraw if the dogs did not initially interact or respond when approached or that the dog didn’t like them and attempted to physically withdraw from the exercise. Intervention was provided by helping clients change body or vocal signals that “blocked” the dog, providing clearer and simpler verbal commands and identifying poor boundaries or unrealistic expectations (i.e. “rushing” the dog or expecting immediate bonding). In most cases, clients admitted that their reactions with the dogs mirrored
their expectations, behaviors and communication with people. This is extremely important since clients are recommended to attend 12-Step meetings and obtain new support networks in sobriety. Physical or emotional distancing can severely hamper the client’s ability in this area.

Many clients seemed to perceive pets as a part of the family when discussing pets in their lives also revealed family information as well. Twenty-two percent revealed information related to loss, emotional or physical abandonment, value systems, and life decisions made based upon significant events. Much of this intertwined with their addictions (i.e. reasons for initially starting to drink or use drugs, feelings underneath the drugs/alcohol, losses as a result of addiction). Two women revealed that current threats by significant others against their pets were being used to “get even” for perceived alternative safe shelter for the pet was obtained and the insight seemed to strengthen the client’s commitment to the staff’s continuing care recommendations. Thus, opportunity existed to identify unhealthy coping mechanisms and to educate and guide toward new choices and behaviors. Hopefully this reduces the likelihood that alcohol or drugs would continue to be a way of dealing with feelings and life events.

When Alexis, the pit bull, was present it seemed that a higher degree of disclosure on violence occurred, including perpetrated and witnessed cruelty to animals. This would not be surprising since pit bulls are one of the breeds commonly abused and tortured in the drug community for dog fighting and guard dog purposes. Nineteen percent of the participating clients (7 men) shared incidents of violence against animals including street fighting, use of weapons, gang activities, domestic violence, child abuse and retaliatory activities. These disclosures gave key information on thought processes regarding anger management, need for power and control, self image and peer relations. Although too extensive for resolution in a 26-day rehab program, awareness of these issues is important for long-term treatment planning and selection of continuing care environment as all could interfere with a client’s ability to maintain a substance-free lifestyle and network of sober support.

Thirty percent of the participating clients (11 males) revealed active (22%) or passive (8%) perpetration of cruelty to animals. (Active was defined as directly harming the animal; passive was defined as witnessing acts of harm with no attempt to help the animal either during or after the act). Six of the episodes related to training pit bulls for fighting or guard purposes and all of the “passive” acts fell into this category. Five of the six had primary diagnoses of cocaine/crack dependence and one was opiate dependent. Incidents described included hanging, beating, starving and fighting. Notably, all six initially described the episodes in a “proud” manner, demonstrated no empathy or remorse and frequently described the pit bull as a “power” dog which could only be “controlled” by certain knowledgeable and skilled people. However, there seemed to be some change with exposure to Alexis and general education. Over time, four of the six men seemed to interact more spontaneously with her and reduced their recounting of episodes of cruel treatment of animals.

The other five men who related acts of cruelty to animals were all in the “active
perpetration” category and had primary diagnoses of alcohol or opiate dependence. Acts described included beating, decapitation, animal sacrifice and unidentified torture resulting in an animal’s death. Three had difficulty sharing their acts which seemed to indicate some degree of shame or remorse. All five seemed reserved when physically interacting with the dogs. Of the 11 men who admitted involvement with cruelty to animals, 64% had a history of sexual or physical abuse in childhood. Eighty-two percent had a history of violence as adults, many with criminal records that reflected this. Acts of violence included assaultive behaviors, domestic violence, child abuse and homicide. This extremely high percentage of violence associated with the combination of cruelty to animals, alcohol/drug use and history of childhood abuse seems to merit further investigation as these results cannot be seen as definitive.

SUMMARY:

This pilot project seemed to be enjoyable for clients, dogs and staff. Preliminary results seem to indicate that the use of animal assisted therapy with adult substance abusing clients is beneficial, allowing for increased opportunities to obtain client background and history, gain insight into thought, emotional and behavioral patterns, identifying unhealthy coping mechanisms and educate/guide toward new choices and behaviors. All of these are important factors when helping clients structure a lifestyle and support system geared toward abstinence from alcohol and drugs.

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*Authors comments

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