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## Research round-up ★ Having a pet can be good for your mental health according to various research reports, Alan Simpson reports

## Pets win prizes

arion has touched on the therapeutic benefits of animals on psychiatric wards. So, is there any evidence for the effectiveness of pampered pooches on psychiatric wards? Are there randomised-controlled trials extolling the virtues of rabbits in reducing relapse?

There appear to be three ways that people with mental health problems reap the benefits of interacting with animals, aside from simply enjoying the social and emotional benefits of having a pet (Lipton 2001). First, in animal-assisted activities, therapists, trained volunteers and their pets visit people in prisons, nursing homes and psychiatric hospitals. Second, in animal-assisted therapy, therapists use a variety of pets in therapy sessions to help patients meet specific treatment goals, such as increased social interaction and decreased aggression. Third, as mentioned by Marion, psychiatric service dogs are trained to perform specific tasks that mitigate the negative effects of the person's mental illness.

Hooker et al (2002) provides a succinct history of pet therapy in a variety of healthcare settings. Starting out from incidental use, pet therapy is now an evidence-based activity incorporated into many healthcare programmes. The use of animals in therapy was documented as early as 1792 by William Tuke at the York Retreat in England and dogs have been used therapeutically with psychiatric patients in the USA since 1919. Research into pet-assisted therapy started out in England over 40 years ago.

In the 1960s and 70s, Dr Boris Levinson, a US child psychiatrist, began to research the use of animals in his therapy with children. This expanded to include adolescents and adults in inpatient psychiatric settings and later to nursing homes for older people, all with reported benefits to the physical, psychological and social status of patients.

In the 1980s, nursing literature began to explore the positive impacts of pet therapy on patients, family and staff, and to discuss tips on initiating pet therapy, selecting suitable animals, avoiding possible hazards --- and overcoming bureaucratic obstacles! Guidelines and protocols now exist to prevent the transfer of diseases from animals (zoonosis) and address other concerns.

Researchers report the beneficial impacts of pets on blood pressure, survival rates from heart attacks and angina, and on painful procedures and home visits for sick children. In hospice settings the presence of pets improves patient-relative interactions. Caring for pets by older people appears to be associated with improved self-care, health and an increase in daily living activities.

In psychiatry, pet therapy has been found to reduce anxiety in people with a wide range of diagnoses and to aid communication. In the UK, dogs and horses are being used to help people with addictions and eating disorders. The presence of dogs on an adolescent unit improved outcomes by providing unconditional acceptance and reducing the stigma associated with admission to a psychiatric setting.

Cusak's (1988) book, 'Pets and Mental Health', provides numerous examples of pets being used therapeutically. Dogs and birds come out particularly well. Dogs offer people affection, play and acceptance. They are particularly good for people who find it difficult to develop trusting relationships as dogs do not judge, correct, punish, offer unsolicited advice or give off non-verbal signs of dislike. Tactile interactions can provide much needed closeness and warmth and the attachment that has often been lost or damaged in human relationships. Rough play with a dog can provide an outlet for built-up tensions.

A dog also responds to being loved, groomed, walked and cared for and provides a boost to self-esteem that comes from taking increased responsibility for another. Taking a dog for a walk provides fresh air, exercise and stimulates chats with dog-walkers and others out and about in the neighbourhood.

High-maintenance pets may be less attractive than those requiring minimal effort. For this reason, Cusak suggests that birds such as parrots, mynah birds, parakeets and cockatiels, may be ideal ward pets. As well as looking attractive they may sing, learn to talk, develop tricks and interact whilst requiring very little in the way of upkeep. None other than Florence Nightingale recognised the therapeutic value of pets and was an early advocate of birds in nursing care and had a close relationship with her pet owl, Athena (Hooker et al 2002).

There is also increasing evidence that nurses involved in petassisted therapy programmes report feeling more positive, cheerful and motivated, and experience less stress (Rossetti et al 2008).

Therapists working with an animal may seem less threatening and so allow the patient to open up more. Just as the therapist can seem more human, so the patient with the pet is seen as less 'sick' and more treatable, inspiring optimism amongst staff and encouraging conversation beyond the patient-professional role (Cural 1989). This greater a positive great

(Cusak 1988). This creates a positive cycle with the patient being treated in ways that promote recovery.

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