Elders’ Care and Animals: Developing a Sustainable Model for Change

Ione Maria Rojas
2015
This report would not have happened without the encouragement and support of many, many people. I am hugely grateful to all those who gave me their time and opened their homes and workplaces to me. Considering the vulnerable nature of this work, it was heartwarming to see how trusting people were in sharing themselves and their stories with me. I would like to thank all those I met along the way and give particular thanks to the following organisations and individuals.

### ACKNOWLEDGEMENTS

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<td>ASPCA: Moira Mahaney</td>
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### GLOSSARY

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<th>AAA</th>
<th>Animal-Assisted Activities</th>
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<td>AAE</td>
<td>Animal-Assisted Education</td>
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<td>AAI</td>
<td>Animal-Assisted Interventions</td>
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<td>AAP</td>
<td>Animal-Assisted Psychotherapy</td>
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<td>AAT</td>
<td>Animal-Assisted Therapy</td>
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<td>ADHD</td>
<td>Attention Deficit Hyperactivity Disorder</td>
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<td>Dialysis</td>
<td>A procedure diverting blood to a machine to remove waste and excess fluid when the kidneys aren’t working</td>
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<td>Green Care</td>
<td>The wider field of all nature-based therapies</td>
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<td>HAI 2015</td>
<td>Human-Animal Interaction Conference 2015, held at Green Chimneys</td>
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<td>ISAZ</td>
<td>International Society for Anthrozoology</td>
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<td>IAHAIO</td>
<td>International Association of Human-Animal Interaction Organisations</td>
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<tr>
<td>Knesset</td>
<td>The legislative branch of the Israeli government</td>
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<td>PATH</td>
<td>Professional Association of Therapeutic Horsemanship International</td>
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<td>PTSD</td>
<td>Post-Traumatic Stress Disorder</td>
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<td>READ</td>
<td>Reading Education Assistance Dogs</td>
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<td>ReCHAI</td>
<td>Research Center for Human-Animal Interaction</td>
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<td>SCAS</td>
<td>Society for Companion Animal Studies</td>
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<td>LCSW</td>
<td>Licensed Clinical Social Worker</td>
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INTRODUCTION

‘We are part of a great turning point in human history, a point at which humans realize and honour the healing and transformative powers of animals and nature.’
> Sy Montgomery, Author and Naturalist

EXECUTIVE SUMMARY

In 2015 I travelled to the USA, Israel and Palestine to visit 32 projects working with animals and nature in therapeutic settings. My aim was to discover:

What role do animals play in improving quality of life for humans?

How could this benefit elders in residential care in the UK?

Major findings were that:

• Whether actively working with or just being alongside them, having contact with animals has physical, emotional, cognitive and social benefits.
• Animal-assisted interventions can bolster the healing process, leading to quicker recovery times after physical or emotional trauma and an improved experience of care.
• Animals are a social catalyst. They draw together people and communities, allowing us to build relationships and networks that we may otherwise struggle with. AAI is therefore a powerful means of unlocking social isolation.
• The presence of animals transforms an environment; it softens and ‘rewilds’ clinical and institutional settings and the people living or working in them. This has the potential to change the face of care.
• Whilst incorporating AAI into care plans could lead to significant changes in healthcare, it must be done properly and not as a ‘quick fix’. Appropriate planning, training and evaluation are essential.
• The successful programmes always started with a leap of faith. We need to take a similar leap in the UK.

The key recommendation of this report is that regular and consistent AAI programmes need to be incorporated into the provision of elders’ healthcare in the UK, including having animals living onsite in residential homes. The key recommendations for doing so are:

• Research: There are already a huge amount of organisations working in this field. They have the knowledge and experience to inform best practice.
• Focus: The most successful projects know exactly what they want to achieve and why, understand their strengths and limitations, and are specific about what they do.
• Collaborate: We need to start working together across sectors if we want to instigate change. That means pooling talent, experience and resources for the best possible outcomes.
BACKGROUND

In 2012 I started volunteering at Stepney City Farm, a green oasis in the heart of London’s East End. A newcomer to London and the infinite urban sprawl, the Farm quickly became a haven for me. Noticing the seasons change, working with animals and the conversations around birth, growth and death that naturally followed, it was the perfect antidote to the mindless rushing and sensory overload of the capital.

Around the same time I was delivering art workshops in local residential homes and day care centres. Having witnessed my grandfather’s experience of dementia, I was keen to explore new ways of engaging with our elders when verbal communication fails us. I was struck by the distinct lack of nature and green spaces within residential homes and founded Furry Tales in 2013 as a way of addressing this. I hoped that by taking an element of the Farm to those who cannot make it to us we could reawaken people’s connection with the natural world.

I have run the project for the past three years, working with residential homes, day care centres, older people’s organisations and NHS services in East London. We deliver outreach animal-assisted activities with guinea pigs, rabbits and bantam hens and run a weekly onsite club where elders help us with small animal care and gardening. I have been amazed at the overwhelming response from participants and care providers: there is a clear need for this type of intervention. My opinion is that this kind of work – animal-assisted interventions, horticultural therapy, all the variations of green care that invite us to take a closer look at nature – should not be needed as an ‘intervention’. I believe it is as natural and necessary as food or exercise and just as essential for healthy living.

A struggle we often encounter is the interpretation of this work as light entertainment - chocolate box moments that involve fluffy animals and cuteness. Whilst animals can certainly be entertaining and endearing they offer us so much more than this. They provide essential physical contact and sensory stimulation; they draw together those who may not otherwise interact; they are an anchor to the present; an opportunity for safe reminiscence and non-verbal communication. Of course, there are people who do not ‘coo’ over animals, who have no desire to hold or own them. That’s fine, some of the most engaging work I have seen has come from merely observing animals or exploring natural materials. The conversations that are sparked just from passing around a goose egg; the life cycle, childhood development, the food we eat, methods of protection and vulnerability. Nature gives us so many ways to explore what it means to be alive.

I knew that in the USA and Israel they were further ahead than us in both breadth and depth of this work. I wanted to meet those who were driving the field forward and creating links with public services to have AAI officially recognised. I wanted to learn from them first-hand so we can move in a similar direction in London and the UK, where there exist so many people yet still so many who feel isolated and alone.
OBJECTIVES

As the saying goes, you don’t know what you don’t know. I began my WCMT application in 2013 with a set of five objectives:

1. to gain a deeper understanding of how animals can be incorporated into residential care to improve quality of life
2. to learn how well-established and successful animal-assisted programmes select and train their animals
3. to understand essential criteria for volunteer training programmes for animal-assisted therapy work
4. to use the above to improve and expand the delivery of animal-assisted activities by Furry Tales in London
5. to establish Furry Tales as a platform in London for sharing knowledge and experience of animal-assisted interactions with other providers and interested parties

Whilst objective I remains the focus of this report, as my Fellowship progressed my understanding of the field developed and I realised that objectives 2-5 would be met by other means.

Regarding objectives 2 & 3
Research institutions, regional societies and international associations, such as ReCHAI, SCAS, ISAZ and IAHAIO have issued guidelines and codes of conduct on establishing AAI programmes, from animal welfare to training protocols (see Appendix I for more information). They can provide quantifiable evidence of the benefits of AAI and are driving forward discussion on how to regulate the field, establishing best practice and ensuring high standards. I strongly recommend that anyone interested in this field starts with these organisations, for they have pooled the knowledge of years worth of experience precisely so that we can learn from it.

Regarding objectives 4 & 5
My Fellowship has had a big impact on my own work at Stepney City Farm, inspiring me to think more deeply about the purpose and future of Furry Tales and the Farm’s therapeutic programme. I will be sharing my report with care providers, NHS networks and VCS organisations and am developing a series of related presentations and workshops based around sharing best practice and supporting others in establishing AAI programmes.
RESEARCH METHODOLOGY

Like lifting up a rock and seeing the microcosm that exists underneath, once I’d started researching AAI abroad I found project after project that warranted a visit. Initial research on the USA and Israel showed me they have:

• some of the longest running AAI programmes in the world (Green Chimneys, Pet Partners)
• successful AAI programmes in residential homes with both visiting animals (PetPals, Mo-Kan, The Nature Connection) and onsite animals (Life Care Center of Nashoba Valley, Tiger Place, Beit HaShemesh)
• health care systems committed to AAI as a medical treatment (Atlantic Health Systems, St. Joseph’s Hospital, Shaare Zedek Hospital)
• government recognition of AAI as a mental health priority (Connecticut State Capitol)
• accredited university courses in AAI – either as an MA, modules of a BA or postgraduate certificate (Hebrew University Magid Institute, University of Missouri, University of Denver Graduate School of Social Work)
• well-developed AAI associations and professional networks (IAHAIO, IAAAP)

For the majority of projects in the USA, a lot of information was available online and places such as Green Chimneys and Atlantic Health Systems had even been visited by WCMT Fellows before me. However, I wanted to know how they had got to this point - what lessons had they learned along the way that we could take from? As for Israel, it was much harder to access information, the majority of it being in Hebrew. From what I picked up through contacts in the UK and USA, they had a strong commitment to animal-assisted psychotherapy and were providing training for hundreds of new students every year. I had also heard time and time again of Residential Home Manager Daphna Golan-Shemesh’s inspiring approach to dementia care and wanted to see it for myself.

From farms to playgrounds, residential homes to hospitals, prisons and the big outdoors, I saw AAI implemented across a huge array of settings, client groups and cultural contexts. Each project had a strength that drew me to it and I didn’t want to limit myself to one area as I’ve often found inspiration in the most unexpected places. My desire was to witness the impact of this work for myself, to collect stories, insight and recommendations. I decided to look at the broadest range of AAI possible and then draw out common denominators from the most successful projects. By extending my range of samples, I felt more confident of finding reliable evidence. Rather than provide a detailed account of each visit, I have structured my report as follows:

• an overview of AAI as it currently stands based upon the 32 projects I saw - What is it? How does it work? What are the benefits?
• a selection of four case studies that demonstrate the evidence for my findings and showcase best practice in the field
• key findings regarding AAI in residential care; impact and implementation
• recommendations for the UK
• further reading and a directory of the projects and contacts visited
PERSONAL REFLECTION

The WCMT Fellowship has been a longer, richer and more fascinating journey than I could ever have imagined. It has stimulated and challenged me, revealing just as much to me about myself as the world of AAI.

With such an open approach to research it was impossible not to get sidetracked at times. I definitely ran the risk of scope creep and found myself overwhelmed by information when I returned to the UK. It took a while to accept that only around 20% of what I learnt during my Fellowship would make it into this final report. The selection process was a long one but it has reassured and excited me to notice how so much of what I saw and heard is reaching beyond this report and informing my ongoing work. Insight gained from my Fellowship continues to shape my work with Furry Tales, Stepney City Farm and the wider healthcare community.

All of the projects I visited exist as a response to difficulty or hardship, with many of the participants coping with loss, trauma and social inequality. Seeing the struggle so many are facing in the light of endless bureaucracy and skewed ideas of worth promoted by a capitalist society regularly triggered feelings of frustration and a huge sense of injustice.

Of course, I could not write this report without addressing my decision to investigate AAI in the Middle East. I believe we can always learn from others and having heard of noteworthy projects taking place in Israel I did not want to miss out on this learning. I was concerned about conducting my research in Israel though; how could I share my findings without making comment on the complex socio-political context they sit within? It is a question I still don’t have an answer to. The Israeli-Palestinian conflict is confusing and mindboggling. There are layers upon layers of narratives all demanding to be heard and, as one woman said to me, with a situation as complicated as this, *’the more you know, the less you understand.’* I believe discussion is essential to human development, but some things are incredibly hard to discuss. Whilst I was in Israel and Palestine so many of my conversations and thoughts were about the conflict, I found it quite impossible to detach my research from the multiplicity of voices and opinions that shaped the projects and people I encountered. Yet I knew it was necessary in my report to do just that, to try and separate my findings about AAI from the chaotic dynamics they had come from.

An entire report could be written about the role culture and religion play in determining human-animal relationships and certainly it is worthy of more investigation. Dr. Brinda Jegatheeson has conducted valuable research on this subject (see Appendix I) and I was keen to visit projects in both Israel and Palestine and to understand Middle Eastern Jewish, Christian and Muslim attitudes towards animals and nature. Nevertheless, I had to remember the objectives of my Fellowship and with limited time focus on established AAI programmes that we could learn from back home. Whilst I heard of many Palestinian arts and culture peace projects, due to the extreme restrictions Palestinians are suffering there is neither the space nor the resources for AAI or nature-based programmes to exist.
When I visited Alrowwad Cultural Centre in Bethlehem’s Aida Refugee Camp to hear about their ‘Beautiful Resistance’ arts programme and their desire to create a garden I was told,

‘There’s an area, a garbage space, we’ve been negotiating on for 7 years. There was a dream to make it an outdoor space, a playground, but the land is so squeezed in: there’s no space and there’s no water.’

> Dr. Abdelfattah Abusrour, General Director

Animals and nature are just as important in Palestine or Israel as they are anywhere in the world. Wherever humans are they have a relationship with animals, if not as pets then as food. We are in a privileged position if we have the physiological security and psychological freedom to more closely examine our relationship with nature and initiate AAI.

Outside the Banksy shop in Bethlehem I noticed a small canary in a cage. I asked who it belonged to and was told by the shop owner’s son,

‘He is my father’s. We don’t let him out but he reminds us where we are – he lives in a prison and we live in a prison. My father says when the wall comes down we will release him.’

INVITATION

What follows is a window into an imaginative and inspiring approach to human wellbeing and a summary of the potential of this work. It is an invitation for discussion, debate and development. I hope that it might inspire others to take a leap and try bringing a little of the outside in.

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www.furry-tales.org.uk
www.stepneycityfarm.org
OVERVIEW

‘An Animal Assisted Intervention is a goal oriented and structured intervention that intentionally includes or incorporates animals in health, education and human service (e.g. social work) for the purpose of therapeutic gains in humans. It involves people with knowledge of the people and animals involved. Animal assisted interventions incorporate human-animal teams in formal human service such as Animal Assisted Therapy (AAT), Animal Assisted Education (AAE) or under certain conditions Animal Assisted Activity (AAA).’

> IAHAIO, 2014

DEFINING ANIMAL-ASSISTED INTERVENTIONS

Programmes exist all over the world where humans are working with animals to aid human development and wellbeing. The number of variables involved in such programmes is infinite: the training required, the client group worked with, the animals involved, the setting, length and goals of the intervention. This leaves room for debate as to what constitutes best practice. In the process of classifying the programmes I visited, I came to the following conclusions regarding the status of AAI as a professional field:

Defining the profession

There are three overarching areas of AAI, of which IAHAIO’s 2014 White Paper provides a clear and concise set of definitions; Animal-Assisted Therapy, Animal-Assisted Education and Animal-Assisted Activity. These are an excellent starting point for anyone new to the field and I will refer to these classifications throughout this report (see Appendix I for definitions in full). It is worth noting here that I understand AAI to be one strand of the wider field of nature-based therapies, also known as ‘green care’, an excellent review of which has recently been published by Natural England (see Bragg & Atkins, Appendix I).

Diversity of practice

Despite helpful attempts to establish an agreed upon set of definitions and guidelines for AAI, many of the organisations and individuals working in the field adhere to their own protocols. Whilst these may be informed by wider debates, they are often based more closely on personal experience, context and professional background. On the one hand, this allows for innovation, creativity and growth within the field and makes it accessible to people from a variety of backgrounds. On the other hand, it leads to confusion about the level of training needed, the terminology used and the regulations required to guarantee high standards.

Lack of public understanding

This confusion affects public understanding of AAI, potentially weakening the regard with which the work is held. The most obvious example is the frequent misunderstanding of the word therapy: a clear distinction needs to be made between therapy and therapeutic so that people do not equate one with the other. For an excellent clarification on these terms and their implications, I recommend Nancy Parish-Plass’s Order Out of Chaos Paper (see Appendix I).
Further distinctions needed
For many working in the field, the areas of AAA, AAE and AAT are still too broad. A qualified psychotherapist bringing a dog into their practice to work with children recovering from domestic abuse will not require – or necessarily benefit from - the same training, regulations and impact measurement tools as a qualified occupational therapist grooming dogs with older adults in order to rehabilitate motor skills after a stroke. Clearly, further distinctions need to be made within AAT, AAE and AAA. As an initial guide to what this might look like, I recommend HABRI’s Central’s AAI Taxonomy (see Appendix I). To ensure high standards of training, delivery and impact measurement, AAI organisations and professionals need to continue working together to determine expectations and protocols specific to each unique area.

APPLICATIONS: What does it look like?

For the purposes of this report and to give practical examples of the aforementioned definitions, I have drawn on HABRI Central’s taxonomy to classify the interventions I witnessed into the areas outlined below.

**ANIMAL-ASSISTED ACTIVITIES**
Practised and/or supervised by volunteers and/or paid employees with at least introductory training, preparation and assessment

**Volunteer-led pet visitation programmes in care institutions**
A PetPals volunteer takes her pet dog to a nursing home for a weekly ‘meet and greet’ social activity.

**Human-animal interactions in residential institutions where animals live onsite**
At New Mark Care nursing home two cats live onsite so residents can see them everyday and help care for them.

**Facilitated animal-assisted group activities in care institutions**
A program coordinator from The Nature Connection takes a pair of hedgehogs into a pupil referral unit for girls and leads a discussion group around defence mechanisms.

**Therapeutic animal training sessions**
A Green Chimneys intern shows a child how to teach a rescue dog to walk on a leash.
ANIMAL-ASSISTED EDUCATION
Practised and/or supervised by educators (e.g. teachers, educational counsellors, specialised educators, mental health professionals)

Animal-Assisted learning in classrooms or nature rooms
The wildlife teacher at Green Chimneys teaches a class about the environmental needs of reptiles.

Animal-Assisted reading programmes
A READ volunteer visits an elementary school where selected students choose a book to read to her and her dog.

Humane Education programmes to develop empathy and related skills
The headmaster at Nirim Elementary School shows students how brown and albino ferrets live together in a lesson on co-existence.

Animal-Assisted Psychoeducation
A psychotherapist at Alut’s Occupational Center for Autism brings in her rat for a client to feed as part of ongoing work on eating habits.

Animal-Assisted Special Education
In Tira’s Alhanan Tera Special Education School, the school psychotherapist works one-to-one with a child with ADHD so that he can sit calmly and hold a cockatiel.

ANIMAL-ASSISTED THERAPY
Practised and/or supervised by mental health practitioners, physical therapists, clinical psychologists, clinical social workers and psychotherapists

Animal-Assisted Occupational Therapy
The OT at the Life Care Center of Nashoba Valley asks a resident to feed the chickens to practise mobility skills.

Hippotherapy
At Northland Therapeutic Riding Center a physical therapist helps a man with cerebral palsy ride a horse to improve muscle tone and balance.
Animal-Assisted Social Work
The social worker brings her dogs to the dementia carers’ group at Beit HaShemesh to offer participants additional emotional support.

Animal-Assisted Psychological ‘First Aid’
Tails of Joy human-dog crisis response teams are called out to offer comfort to students after a high school shooting.

Animal-Assisted Counselling
At AaTS the LCSW has a one-to-one counselling session with a teen with depression whilst walking the dog through the woods.

Animal-Assisted Play Therapy
At AaTS a teens substance misuse group practise dog agility training to learn the importance of safe play.

Animal-Assisted Psychotherapy
In women’s prison Neve Tirza, the psychotherapist delivers her sessions in the petting zoo area where the women can choose to be and/or work with the animals.

‘It is necessary that AAI professionals are educated not only in their own area but also in animal behaviour, animal welfare, animal emotion, animal cognition and animal ethics.’
> Marie-Jose Enders-Slegers, HAI 2015
CONTENT: What happens?

There are many ways animals can be worked with, many things one can notice, do and explore; this is not necessarily limited to the type of intervention that is being provided. Whether it is an in-depth animal-assisted counselling session or a simple interaction between a child and an animal in a petting zoo, both interventions may involve looking at the animal, feeding the animal and discussing the animal’s behaviour. What differentiates the two is the goal of the intervention and the related skillset and approach of the facilitator. At HAI 2015, Animal-Assisted Psychotherapist Dr. Yoni Yehuda spoke of three levels of engagement within AAI; the passive, the active and the humanised. I have found this a useful way of categorising actions across all levels of animal-assisted activity, education and therapy and would recommend those planning interventions to consider how all three may be incorporated.

PASSIVE TASKS

‘Humans are too often caught up in the past and the future to be in the present. There is a point of view and a way of looking at the world that horses have that can help us expand our view.’

> Roswitha Zink, E-Motion

Watching: observing the animals’ natural behaviour

In Israel’s only women’s prison, Neve Tirza, a small room is painted dark blue with a black-out blind over the window so the room can be made almost entirely dark other than the aquarium housed within it. If one of the women selected for animal-assisted psychotherapy wishes, she can choose to spend all 60 minutes of her session sitting alone in this ‘quiet room’ watching the fish. It is the only time she can ever have true privacy and it offers her the calm, reflective space that is often missing from correctional centres.

‘Being alongside’: being present with an animal, being near them and breathing with them

At hospital-based equine-assisted programme E.Motion in Austria, Psychologist and Horse Expert Roswitha Zink works with clients on understanding how to approach and greet a horse. She shows them how to build trust by breathing with the horse and ‘staying present’, something they can later apply to other situations in their life. (Discussed at HAI 2015)

Noticing: noticing an animal’s behaviour – what calming signals or body language are they showing? What does this mean?

‘One of the best things we can do is learn the language of the animals we’re working with’, says Animal-Assisted Play Therapist and Dog Behaviour Consultant Dr. Rise Vanfleet at HAI 2015. Her sessions teach clients how to understand dog body language so they can build a respectful relationship and create a safe space for play.
Basic care: feeding, grooming, cleaning
At Nirim Elementary School for disadvantaged and immigrant children in Haifa, Headmaster and Paediatrician Dr. Oded Hershko has set up animal enclosures in every available space. Besides animal behaviour and animal-assisted psychotherapy sessions, the students have caretaker duties where they must help feed, groom and muck out the animals. These activities are fully integrated into the rest of the curriculum and have transformed the school, giving students a focus and purpose beyond their usual studies.

Exercise: walking or running with an animal, riding an animal
ReCHAI in Missouri has partnered with three PATH certified riding sites to teach military veterans how to ride. The therapeutic riding programme lasts six weeks and measures the effect of equine-assisted activities on PTSD symptoms, emotional regulation and social engagement. Veterans report feelings of acceptance and an improved experience of readjusting, ‘It’s just a wonderful feeling – it’s like he has a spirit that’s part of my spirit.’

Training: training an animal for good behaviour, agility, service, tricks or play
At AaTs, LCSW and Dog Trainer Chris Patella runs a dog-training group with at-risk youth. Students each work with a dog, practising positive body language, assertiveness, patience, self-control and focus. Eventually they will take the dog on a visit to a nursing home or other care institution where they can then be in a position to give something back to their community.

Making: building enclosures, making enrichment items for the enclosure or treats for the animal, decorating the enclosure or equipment
Animal-Assisted Counsellor Julia Kovac worked with day care centers in Kansas showing elders how to care for chickens. Focusing on retired farmers, builders and those who had DIY skills, she encouraged them to build the enclosure, making the most of skills that were not necessarily being appreciated elsewhere.

Learning, numeracy and literacy: learning about the needs and behaviour of the animal, researching species’ origin and history, working out quantities of food or medicine, reading food ingredients or care manuals, reading to the animal
The READ programme operates across the USA and trains volunteers to take their pet dogs into schools, libraries and community settings where selected children are invited to read to the dog. The programme gives children a motivation to read that they may not have found with a human listener.

ACTIVE TASKS

‘It’s very important for our children that they can find something to do for which they can get recognition. There are so many opportunities for them to succeed here – that’s the importance of the animals.’
> Dr. Samuel Ross, Green Chimneys Founder
The emotional aspect of working with humans and animals, it is here where metaphor comes into play. By relating to the animal, a facilitator creates a space to review, explore and question the client’s being and development. Some aspects of this can be done at a surface level but to go safely and professionally into the inner world of the client, appropriate training is essential (see Appendix II). Here are just a few examples of how I saw this done.

**Narrative: reviewing an animal’s / human’s life story**

At Havayot Center, the only clinical animal-assisted psychotherapy farm in Israel, a rescued ferret whose back legs were paralysed was nurtured back to health. Despite the ferret’s disability she was able to reproduce and now lives with her kit at the centre. Staff find this story is a powerful way of talking to physically disabled children about their own challenges and ambitions.

**Relationships and family: how animals / humans relate to others**

At Nof Hamoshava residential home in Israel a reminiscence activity is planned around the home’s rabbits. Rabbits are highly social animals who reproduce often and live in large herds. The facilitator talks to the group about this and uses it as the basis for a discussion group about family, children and parenting.

**Values: how we treat animals / humans**

In Bedouin village Lakiya, Animal-Assisted Psychotherapist Janice Abu Hani teaches local children about animals to promote understanding and prevent animal abuse. She encourages the children to meet the animals up close and draws out similarities, physical and otherwise, to enable them to start feeling empathy and compassion for the animal.
Preconceptions: how we perceive and judge animals / humans
At Shaare Zedek Medical Center the onsite animal-assisted psychotherapist works with bearded dragons to help children overcome their fear of doctors. The children are often intimidated by the lizards at first, ‘they think they look scary but soon learn they are very friendly’, says Hemda Didovski, ‘we can then apply this same lesson to the doctors.’

Needs: what an animal / human needs
At AaT’s Chris Patella gives a riding lesson to a selectively mute child and focuses on giving commands, ‘You need to talk to him or he won’t know what you want him to do.’ Through showing the child what the horse needs from him, she is able to help him understand what humans also need from him.

Qualities and characteristics: what qualities an animal / human embodies
At Green Chimneys students who struggle with anger and aggression are shown how to self-regulate when working with the horses. ‘Within the herd, the leader isn’t always the aggressive one, often it’s the cool and collected one’, says Equine Program Coordinator Christina Russell as she talks to the students about leadership qualities and the importance of staying calm.

Triggers: how an animal / human reacts to a trigger
LCSW Kate Nicoll at Soul Friends works regularly with her pet guinea pig when helping children work through feelings of fear and vulnerability. Guinea pigs are prey animals so are nervous by nature and will freeze or run away when scared. Kate draws on this to help the client speak about past experiences of fear and their instinctive responses.
**BENEFITS: Why does it work?**

Scientific research and academic studies are continuously providing quantitative and qualitative evidence of the impact of animal-assisted interventions (see Appendix I). Furthermore, thanks to media attention certain benefits, such as providing companionship or lowering blood pressure, have become common knowledge. From the information I gathered through interviews, site visits and first-hand research, I have grouped potential benefits into four categories: physical, emotional, social and cognitive. Clearly, these all feed into one another and the effects are often multi-dimensional.

**PHYSICAL**

- Animals provide physical comfort, with opportunities for safe touch and sensory stimulation.
- For someone suffering from depression or isolation, animal companionship - the presence of another living being - can reduce physical agitation and lead to improved sleep.
- Stroking or grooming an animal lowers blood pressure.
- Working on small tasks, such as grooming or cleaning, improves fine motor skills.
- Working on bigger tasks, such as walking or mucking out, draws out mobility skills and full body involvement.
- Animals provide motivation for exercise and subsequent health benefits; weight loss, improved muscle tone and heart rate.
- Horse riding builds muscle tone whilst aligning and correcting posture.

**EMOTIONAL**

- Animals provide emotional comfort, reducing agitation and anxiety.
- Animals provide companionship, a living being to care for and communicate with.
- Animals can be an anchor to the present, providing relief from difficult or distressing situations.
- Working with an animal builds competence, confidence and character; it is an opportunity to contribute, promoting a sense of self-worth; it is an opportunity to achieve, to gain recognition and validation; it fosters care and compassion; it builds and strengthens internal protective factors, teaching patience and resilience.
- Slowing to an animal’s pace can create a space for being present and mindful; for working through grief and loss; for learning how to self-regulate.
- The presence of an animal creates a third-party focus, allowing the client to give voice to previously inaccessible issues in the company of unconditional acceptance.
SOCIAL

- Animals are a social catalyst, a ‘hook’ for interaction and conversation.
- Animals are non-judgemental and thus create a safe space for play, laughter and humour.
- The presence of animals enables a connection with other humans - friends, strangers, family or staff - there is a knock-on effect for all involved.

COGNITIVE

- Animals can motivate learning, an easily distracted student will focus on reading if it relates to their favourite species.
- Research and care tasks, such as finding out about animal welfare or measuring quantities of feed, improve literacy and numeracy skills.
- Animals can stimulate memory and prompt reminiscence, people are reminded of previous encounters and relationships.
- An animal in need can focus attention, motivating someone to engage in a task they may have otherwise thought impossible – walking a dog for example.
CASE STUDY: LIFE CARE CENTER OF NASHOBA VALLEY
USA
Animal-Assisted Activities
Animal-Assisted Occupational Therapy

With over 200 nursing homes across 28 states, Life Care Centers of America are the third largest private care organisation in the USA. I visited the Life Care Center of Nashoba Valley in Littleton, Massachusetts, which has 120 beds and provides long-term care, short-term rehabilitation and post-operative recovery. It has a specialist dementia care unit called the ‘Memory Support Unit’ - a semantic distinction that’s typical of Nashoba’s philosophy, focusing on ability not disability. There are animals onsite every day; llamas and chickens which live there permanently, dogs which are brought in by staff, and visiting pets brought in by residents’ family members. I’d seen a feature in The Boston Globe about the home’s success in integrating animals into the care of residents, so I paid them a visit to see how it all worked. I spent an afternoon with Executive Director Ellen Levinson, who showed me round the remarkable home.

“We don’t have a program, it’s part of the culture here.
To me, normal life contains animals.’

> Ellen Levinson, Executive Director
The Llamas

For twelve years Nashoba has had two llamas – Travis and Vijay – living onsite, in a large enclosure in front of the home. To encourage residents to come outside, a fully accessible pathway rings the enclosure, with a handrail for support. Though the pathway has wheelchair ramps, there are also steps that lead up to it, which I am told are for use with the occupational therapist. Residents sometimes refuse to practise going up and down steps, and may even say it’s impossible. However, if they know they can see and feed the animals, they are more inclined to come outside and try. There’s clear signage around the enclosure for residents and their visitors to find out information on the animals. There’s also a bench to one side so people can sit and enjoy the view. To make sure Travis and Vijay also have their needs met, Ellen sent herself and the Activities Coordinator on a Llama Behaviour course so they would know just what to expect and how best to care for the animals. On a day-to-day basis the llamas are looked after by Nashoba’s caretaker, Marcos. Marcos used to work on a farm in his home country Brazil, so has the perfect skill set and takes pride in his new role. He says he prefers his work here now it includes tending to the llamas and will be out there with them come sun, rain or snow. He also brings Travis (the more inquisitive of the two) into the home each week to meet the residents. I watch as he walks Travis through the home and it’s easy to see the effect. Everywhere they go residents reach out to touch and stroke the llama: a ripple of chatter and laughter follows the pair of them. It’s the first time I’ve ever heard ‘Where did that llama go?’ asked in a residential home. Ellen says the benefit doesn’t just come from the excitement and the sensory stimulation, an important part is the forming of new memories; positive ones that create an emotional connection not just between residents and staff but between residents and the home itself.

The Chickens

The chicken enclosure sits outside the activity room of Nashoba’s Memory Support Unit (MSU), where residents can sit and watch through the room’s floor-to-ceiling windows. Nashoba’s Occupational Therapist Lauren Gaffney tells me that many of the MSU residents live with dementia and head injury, which is often a volatile combination. She’s noticed how watching the chickens peck around and scratch in the dirt relaxes residents and calms their behaviour. It certainly makes a welcome change to the blaring television and disinterested faces I’ve sadly seen in many other care homes. The design of the enclosure was informed by poultry expert Terry Golson, whom Ellen was attending a workshop with when she first had the idea for bringing chickens to Nashoba. Terry bred and selected the chickens, choosing them on the basis of their personality and distinct markings so that residents would be able to tell them apart easily. A poster in the MSU tells residents the names of the chickens and seats outside mean they can venture outdoors to take a closer look. Some residents are able to help with collecting the eggs but what’s particularly special about this animal-assisted intervention is how hands-off it is. Both Ellen and Lauren agree that watching the chickens’ behaviour is profoundly meditative and say it’s important that residents can watch them at any time. There’s no need to ‘do’ anything, just looking out at them becomes an activity in itself. Various staff, both maintenance and carers,
are responsible for cleaning and caring for the chickens. Whilst certain staff naturally fall into the role because of their own fascination with animals, others warm to it once they see how much it benefits the residents and consequently themselves. Ellen now receives job applications from care staff wanting to work at Nashoba precisely because of the animals.

‘Having chickens in the backyard is like looking at the ocean. There’s a lot of movement and at the same time it feels calming. What could be better for memory-loss patients than this constant ebb and flow in which they can engage? It’s a perfect match.’

> Terry Golson (in West, 2013)

The Philosophy

Whilst it’s clear that having the financial backing of an organisation such as LCC has been a huge advantage for Nashoba, the philosophy that underlies the place is not an expensive one. There is a creative and compassionate attitude that informs the entire home. There is a liveliness to Nashoba, there’s colour and conversation. There’s a pet-friendly policy so families can bring their animals along, an initiative which costs nothing yet has seen an increase in visits from grandchildren and young people who may otherwise be intimidated. Ellen screens pets before their first visit and clear guidelines are displayed on the wall. In the time I’m there I count at least seven dogs passing through the home, with residents, staff and visitors gathering round to stroke them and chat. Staff also bring their dogs to work with them. Ellen’s two golden retrievers greet people at the entrance and Lauren’s rescue greyhound joins her in the MSU each day;

‘He’s an outlet for nurture for residents here, he’s a real living being for them to swoon over. I pay all his costs myself but when I see the effect he has on my patients, why wouldn’t I?! They truly believe he is their dog and they can take pride in that. That’s where the magic is.’

The MSU has a circular design so that residents who need to pace never end up in a corner and the walls are lined with photographs of animals and bright murals. Benches and accessible seating can be found all through the grounds, inviting people to take a moment to stop and appreciate their surroundings. Memory boxes, filled with photographs and memorabilia, sit outside each resident’s room giving you a clear sense of the characters that live here. The home buys the boxes in bulk so they cost very little and asks family members to fill them, making it a positive and reflective experience for loved ones who are also dealing with a transition. One of the corridors features as an exhibition space, with a different local artist’s work on show every three months. Everywhere you turn, there is something to look at, some detail that makes the place feel homely and welcoming - even in the bathroom there are llama plush toys and framed landscapes on the walls.
Nashoba has been heralded for lowering the usage of anti-psychotic medication, something made possible by a person-centred approach that strives to make each resident as comfortable as possible (Lazar, 2012). The AAI on offer here appears to be something that has developed organically as a result of that process. I ask Ellen how she got permission for the animals in the beginning, when perhaps those above her in LCC may not understand their relevance. Her answer is one I hear many times on my Fellowship,

‘I didn’t ask. I went in with excitement, enthusiasm and certainty. After you’ve tried it once and have positive results, the floodgates open.’

Why was I so impressed?
LCC Nashoba Valley has seamlessly incorporated animals and the natural world into the care environment. It doesn’t feel like a programme, it just feels normal. It makes one question why this is the exception rather than the rule.
Beit HaShemesh, meaning ‘The House of the Sun’ in Hebrew, is a specialist dementia care nursing home in Hod HaSharon, Israel. Founder and manager Daphna-Golan Shemesh is a social worker and expressive arts therapist who set up her own care business with her father-in-law in 1989. Starting with a day care centre in Tel Aviv, they moved to the Hod HaSharon property in 2002 to offer full residential care tailored to people living with dementia. The home has since gained an incredibly positive reputation, thanks to its holistic approach where animals are viewed as an essential part of the environment. Whilst I had heard mention of Daphna’s work many times at training events in the U.K., I had not been able to find any information on the home or its philosophy in English. I spent a few days with Daphna at Beit HaShemesh and her other nursing home, Nof Hamoshava in Petah Tikva, speaking to staff, residents and sitting in on activities.

'It’s important to have lots of different things to do and engage people with, it’s important to use all parts of the mind and body.’

> Daphna Golan-Shemesh
The Design

Every element of Beit HaShemesh has been designed to suit residents’ needs and make life as comfortable and easy as possible. The gated site is made up of 5 bungalows, which all open out on to a circular courtyard. There are no stairs or dead ends and accessible pathways guide residents through the outdoor areas, weaving round trees, a water feature and animal enclosures.

Each of the bungalows is named after the natural world - Sky, Moon, Stars, Sun and Rainbow - and Daphna recognises the need for an engaging environment with plenty of sensory stimulation. At every turn there is something for people to enjoy; flowering plants, ornaments, windchimes, displays of artwork made by residents. Benches and seats are dotted around everywhere, with trees and wildlife always close by. In Hod HaSharon they have the benefit of warm weather and sunshine for plenty of the year. Nevertheless, I visited on a chilly day in December when it had been raining and even then, as soon as the rain stopped, residents were brought outside with coats and blankets to keep them warm. Daphna is adamant about the importance of fresh air and Vitamin D for both residents and staff.

The Animals

In one area of the courtyard is a large animal enclosure, with guinea pigs, rabbits and birds inside. The enclosure is fully wheelchair accessible and has a pathway and handrail running round the outside so residents can walk the whole way round and see the animals. It is built around a tree so the animals have shade and can be obscured with material if they need a hiding area. The calls of the canaries and budgerigars create an auditory backdrop that is quite different to the constant beeping of machines and alarms you hear in some homes. The home also has pet ferrets who are walked regularly in the courtyard so residents can greet and play with them. Again, their enclosure is accessible, sheltered by a small alcove with a bench facing so people can sit and watch them. There are locks on all the enclosures for the safety of the animals but residents are free to wander anywhere they like so they can engage with the animals in their own time. Yael Shirron, the onsite animal-assisted therapist, highlights that animals form a part of daily life here, providing relief not just for residents but for staff and visitors also. I sit in on a support group for the partners and relatives of residents and watch as the facilitator’s dog offers silent comfort to a newcomer. When discussing feelings of loss and grief, having a warm solid being to hold and stroke can be incredibly grounding. Yael supervises trainee AAT students on placements so residents can have one-to-one sessions with the animals, but it’s clear that the animals add depth to the home whether there’s an activity structured around them or not.
Daphna explains that there are many reasons for having animals in a care facility,

‘On a very basic level it’s the touch and the physical contact – people don’t have enough touch, we need more touch! – but it’s also for the psychological benefits, the company, the meaning, the ‘being part of each other.’

This last aspect is something that really develops through having animals and humans living alongside each other, rather than visiting animals that leave after an hour. Daphna emphasises how different the connection can be when residents live with an animal; they get to know them, they can follow their life cycle. When an animal dies, this too can be worked with as it provides a safe space for staff, residents and families to talk about death and related fears or concerns.

The Activities
At Beit HaShemesh there are constant opportunities for residents of all ability to participate, whether through joining a dance and movement group or just being invited to stroke one of the animals. Through working with psychotherapists, arts therapists and physiotherapists, Daphna ensures her staff are able to draw on different creative forms – music, movement, arts and nature – to plan rich and varied sessions. She makes it clear that those planning activities must understand the needs of the group,

‘It’s important to be respectful. For some people, just being asked to pet a rabbit will seem very babyish. On the other hand, people with dementia spend so much time feeling challenged. Don’t challenge them more, they will withdraw from you.’

For those with very advanced dementia a purely sensory experience of holding and stroking animals may be beneficial, but for a higher functioning group different types of stimulation are important. Daphna suggests structuring sessions to include varying levels of engagement. She gives an example of building a session around rabbits; starting with movement exercises mimicking jumpy behaviour or a song with large print lyrics, spending some time handling the animals and being alongside them, then moving on to a discussion about living in groups and family relationships. Daphna has found that people with dementia will talk more in the presence of animals and a multisensory activity such as this gives them many different ways to express themselves.

The Philosophy

‘You have to learn to speak Alzheimers’
> Daphna Golan-Shemesh

Daphna’s entire philosophy speaks of a much wider shift in attitudes towards care. Yes, animals are a part of this, but it’s really about interaction, communication, finding ways of going with the person and creating an environment for people to be at ease together.
The ‘bus stop’ at Beit HaShemesh is a beautiful example of this. Painted on a handmade wooden sign near the home’s entrance, a bench and table form a bus stop seating area where residents can be guided when they feel restless or want to go somewhere. Once at the bus stop and able to pause and look around them at the plants and birds, they often feel satisfied or ready to wander somewhere else. By bringing them here, rather than limiting them with locked doors, carers can enter the resident’s world and go with them on their journey.

Staff are also valued highly and Daphna finds time to stop and engage with everyone working at the home, from the caretakers to the therapists. Having run a day care centre singlehandedly when she first started out, Daphna has worked in every role and recognises the frustrations and challenges of each, ‘It’s so easy to focus wholly on the clients, but you must respect and acknowledge all your staff.’ For the staff to perform their job well they must feel noticed, appreciated and supported. Care work is not a glamorous profession and it can be very challenging. For a home to foster a nurturing environment, everyone must feel valued; residents, staff and visitors. Yael seconds this when she tells me of the home’s ethos regarding residents’ families, ‘We work completely differently – you can call us anytime, there’s always someone to answer.’ The carers, social workers, doctors and management share a WhatsApp group with residents’ families so they can stay informed of their loved one’s progress and see photos of what they’ve been doing. One of the residents in the home was struggling with a lot of trauma, crying frequently and experiencing a lot of anxiety. A while before my visit Yael noticed her playing with the poodle in the courtyard, laughing and talking to the carers. Yael took a photograph and sent it to the lady’s daughter via WhatsApp. Updates like this can transform a relationship, reassuring a family member and building trust.

It’s easy to see the effects - more than 50% of Beit HaShemesh’s residents have moved here from other homes and they have more requests than they have space for. The home is private and one could argue that this places the home in a different league to others, but the approach is not an expensive one. The atmosphere of Beit HaShemesh and the attention to detail - given not only to the people who make up the home but the environment itself – comes from an imaginative person-centred approach, one that challenges accepted notions of institutional care.

Why was I so impressed?
Beit HaShemesh has an atmosphere like no other care facility I have ever been in. The second you walk through the gate, you are in another world. Its circular design and plant filled courtyard creates a setting where one wants to stop, be still and appreciate. Residents are not forced to comply with the rules of a world they no longer understand. Instead, staff and visitors are invited into the world of the residents – a world that contains colour, activity, playfulness and animals. Daphna has drawn on all available resources – high quality training, compassionate staff and her own imagination – to make this a reality.
Established in 1983, The Nature Connection is a non-profit organisation based in Concord, Massachusetts that delivers nature-based activities to people with limited access to the natural world. Working with three main groups - elders, at-risk youth and people living with disabilities - they deliver outreach sessions to elders’ care facilities, special needs schools, psychiatric treatment centres and other specialised institutions. Recommended to me by a contact at HAI 2015, I wanted to learn more about their unique way of incorporating habitat and environment into an animal-assisted programme. I spent a day at their headquarters with Executive Director Sophie Wadsworth, who introduced me to Chair of the Board of Directors Susan Frey and invited me to observe a session.

“We may regard plants as teachers; rocks, rivers and clouds as messengers; and animals as intermediaries.”

> Sarah Seabury Ward, Founder
The Materials

The Nature Connection’s office is full of trinkets, seashells, plants and feathers, with shelves lined with books on art, poetry, flora and fauna. Nearly all of it is free, the materials having been found and collected by staff and volunteers over the years. With similar attention to detail, the programme weaves together nature, the arts and mindfulness to create a rich sensory, social and emotional experience for participants. Each session involves hands-on activities based around a seasonal theme. Using rocks, sand, water or moss, the programme coordinators and volunteers recreate a mini-habitat on the floor or a table. Whether woodland, mountains or the ocean, they bring in animals that live in such a place, creating a microcosm for participants to explore.

The majority of the animals come from volunteers’ homes, domesticated dogs, cats or rabbits for example. However, some are borrowed from local farms (baby chicks or ducks) and others are ‘catch and release’ (i.e. tadpoles or salamanders that may be caught, cared for and then released back into their home environment). They also work with non-releasable rescue birds such as crows or owls, which they have a specific wildlife licence for.

‘Sometimes the smallest creature can help an individual relate to the world, and in turn help us all relate to each other.’

> Kinsey Rosene

The Activities

I shadowed an outreach session at Walden Street School, a residential school for young women aged 12 to 22 who have struggled in traditional educational settings. The Nature Connection visits every other week, working with a group of 8 girls, all of whom are coping with social, emotional or behavioural difficulties, often made manifest though anxiety, depression and mood disorders. Decorating the room with ferns, mosses and wild flowers, Programme Coordinator Kinsey Rosene and volunteer Deborah Gerstein created a woodland scene for the girls to enter into. They set up a pen for a pair of hedgehogs, a terrarium full of snails and an enclosure for a rabbit. Everything was placed according to the needs of each living thing; the rabbit and hedgehog given safe places to hide, an atomiser next to the snails and ferns for misting, and chairs circling the table but also to one side so the girls could sit together or work independently.

Throughout the session Kinsey and Deborah would draw on biology, natural history and animal behaviour to highlight themes relevant to the group. I was later told this ‘telescoping’ is a technique facilitators are trained in by the Nature Connection. For example, Deborah showed the girls the new leaves on the fern, just at the point of unfurling, explaining to them what conditions they would need for this to happen. This led to a conversation about what conditions the girls might need to feel they could open up. It created an interesting contrast to the hedgehogs’ habit of curling up in a ball, what would make them want to curl up and hide?
What options do they have when feeling fearful? It was an incredibly natural and non-judgemental way of discussing vulnerability and self-defence with a group that may usually find these topics difficult. Kinsey marked the session’s beginning and end with a moment of mindfulness, conjuring up the image of a peaceful woodland and highlighting the animals’ needs for a safe, stable setting. This quality of attention, shown repeatedly throughout the session, had a noticeable impact on the girls who became more focused and curious about the materials.

As a practical element to the session, the girls were invited to make their own scent bags using dried herbs and essential oils. Passing around their creations for each other to smell, they giggled at their different choices and talked about taste and preference; one chose eucalyptus to stimulate her senses, another chose lavender to calm her nerves. Reminding me of talismans, each girl left the session with a scent bag that was entirely theirs – a physical manifestation of a lesson in self-regulation and protective factors.

Interestingly, Walden Street School already has a therapy dog on site. There are also local petting zoos that could come in to visit. Yet according to feedback from the school, the Nature Connection offers something unique: regular sessions with a consistent team enable breakthroughs to happen where other programmes have failed. Building resilience through a safe and nurturing environment, these sessions can be the turning point in a girl’s journey.

The Philosophy

‘We connect participants with nature's capacity to teach and to heal.’

There’s something organic about the Nature Connection’s approach: the programme has been researched, evaluated and meticulously planned but there is nothing forced or rigid about it. Listening to a poem about buds in spring, smelling fresh blossom and discussing what it feels like to have butterflies in one’s stomach; sessions move fluidly from the passive, to the active, to the humanised. Though animals form an essential part of the programme, they are not there merely to entertain or distract participants. Rather, they are introduced within a natural context, one that participants are invited to build a deeper connection with through exploration and learning. Staff and volunteers are trained to facilitate with respect for both animals and participants, ensuring all involved are safe and allowing everyone to participate at whatever level they are comfortable with. As Sophie emphasizes, ‘just being in the room is participating.’ The approach is personable, professional and resourceful – a result of over 30 years experience.

Practical Support

As a non-profit, The Nature Connection is funded by foundations, community businesses, council grants and individual donations. Relying on funding requires balancing adaptability with a clear vision and I notice a dedication that is echoed in all the successful projects I visit. The organisation has brought together a broad group of advisors to provide in-kind and professional support, from animal care to strategic planning. They have a Board of Directors with a collective wealth of experience in AAI, healthcare, fundraising, law and policy making. Susan Frey, Chair of the Board, explains how crucial it is to have the right team,
‘You have to have a strategy so people know where to help. You have to know where you want to go and you have to recruit time, talent and treasure to help you get there.’

The Board works together to steer the organisation in the right direction, allowing the staff to focus on delivering consistently high standards. Determined to make the most of all that is available to them, whether found objects for sessions or pro-bono skills from the community, the Nature Connection are committed to changing the environment of care and creating a little wilderness for those who need it the most.

Why was I so impressed?

The Nature Connection demonstrates that this field is not just limited to working with animals. Nature is rich with metaphors to help us better understand our inner worlds. Just as animals live within an environment, our work must sit within a context that is rich and inviting for all participants. Through creating such a context for regular groups the Nature Connection builds trust and fosters imagination, reaching a level of connection that shows the potential visiting programmes can have.
With 30 inpatient departments, 70 outpatient departments and 1000 beds, Shaare Zedek is the largest hospital in Jerusalem. According to the Sick Child Law, passed by the Knesset in 2001, all Israeli hospitals with a paediatric ward must incorporate an educational establishment so children can continue their education. Shaare Zedek is no different, but it has gone one step further. In an impressively clean room inside the school area is a space filled with animal enclosures where the hospital’s AAT programme is based. Known in Israel as a ‘petting zoo’ these types of set up are much more common than in England. Nevertheless, it is surprising to see one in the heart of a hospital, where Health and Safety regulations and infection control are necessarily fastidious. Though a small animal corner formed part of the school since 2000, the respected petting zoo as it exists today was built into the designs when the new children’s hospital was built in May 2015. Run by Animal-Assisted Psychotherapist Hemda Didovski for the past 6 years, it has established itself as a fundamental part of the ward with hospital staff recognising its huge impact on patients’ health. I was invited to visit the programme by Dr. Yoni Yehuda, Head of Animal-Assisted Psychotherapy at the Magid Institute of Hebrew University, where Hemda trained. He was keen for me to see it as a noteworthy example of best practice in AAT.

‘All the animals stay here, like the hospitalized children: they are their animals, not mine.’

> Hemda Didovski
The Animals

At Shaare Zedek they have hamsters, guinea pigs, two types of rabbits, chinchillas, degus, bearded dragons, birds and fish. Hemda realises that for the best possible outcome the animals must live alongside the clients, not only as this reduces transportation stress but because it enables a deeper understanding between the client and the animals, who occupy the same space.

In line with Hemda’s training at the Magid Institute, each of the animals has been selected for a particular need or quality:

- The degu cannot tolerate sugar in its system, making it the perfect animal to teach children about diabetes. For a child who is struggling to come to terms with a recent diagnosis, Hemda can introduce them to the degu and explain what happens if it is given sugar; warning signs such as excessive drinking and urinating tell the carer that it is unwell. The child can feel understood at last, ‘That’s just like me!’ This opens up a space to talk about self-care and medicine.

- Guinea pigs do not naturally produce vitamin C so need to get plenty in their diet. If they do not have enough, they can be given a supplement. This can be incredibly useful when working with a child who is afraid of taking medicine - something that can lead to them staying in hospital longer than need be. Hemda will show the child how to safely give the guinea pig a vitamin C tablet and explain why it is needed. The child is then able to see why they too may need medicine and that it is not something to fear.

- Some children are terrified of medical equipment and will kick or push away anyone trying to use strange-looking apparatus such as a stethoscope or thermometer. In this case, Hemda will work with a rabbit and a ‘doctors and nurses’ play set. By allowing the child to use a stethoscope to listen to the rabbit’s heartbeat, Hemda appeals to their curiosity and enables them to see the benefit of such equipment. Hemda will take photos of the process to later give the family so they can continue referring to this insight when they get home.

The Design

Establishing such a programme in a hospital clearly requires a huge amount of planning. Shaare Zedek’s AAT room has been designed to suit multiple needs:

- The enclosures must provide the best possible space for animal comfort and safety.
- The space must be sterilised and clean at all times so there is no risk of infection.
- The room must be fully accessible and open for people to visit but also provide children with a private space.
All the surfaces are wipe clean and fixtures and furnishings are detachable so everything can be removed and cleaned twice daily. The animal enclosures are on wheels so the floor can be swept and disinfected and a sink nearby ensures everything can be regularly washed. A window lines one wall so families in the waiting area can see through to the animals when Hemda is away, whilst a sturdy blind ensures sessions can be completely closed off. There is a small secure balcony area with astroturf where children can work with an animal outside in summer and in winter they can work in the newly built indoor pen. Both these areas contain hiding places for the animals’ wellbeing and colourful furniture to make it inviting for the patients.

Hemda also needs to be able to take the animals out to visit patients who cannot come to her. She sees 4 long-term patients a day in the Dialysis Unit of the Paediatric Ward, visiting each child once a week for therapy. The children have dialysis 3 days a week, for 4 hours at a time, whilst they wait for their kidney transplant operation. This wait can take weeks, months or years. Thanks to a well-organised trolley system, Hemda is able to take a selection of animals to them. On the visit I shadow she has a cockatiel, guinea pig and rabbit sitting alongside each other in trays, a hamster in a travel cage and a selection of toys, treats and art materials tucked neatly underneath. This allows her to deliver therapy sessions at the child’s bedside, where staff will give them as much privacy as possible. Hemda tells me she had wanted to draw a curtain round the patient’s bed but, as it’s a critical care unit, no screens or obstructions are allowed. Over time however, the doctors and nurses have come to recognise how important these interventions are and will rearrange check-ups and tests around the session, only disturbing them if really necessary.

‘We still treat it as a one-to-one - this treatment is essential. All morning this child worked with the animals and he was quiet, but now he’s crying again.’

> Nurse on ward

Practical support
The programme is funded by the government’s Educational Department, who cover animal feed, vet’s bills and salary costs. They receive many donations, such as enclosures, toys and furniture, often from families of previous or existing patients. Hemda has a volunteer who helps her every day, cleaning the cages, caring for the animals and looking after children when Hemda is unable to see them.

It’s written into the programme that the vet must come once a month, but Hemda calls him in almost every week. She says she has learnt a huge amount more about animal behaviour and welfare through his visits.

Staff involvement
At Shaare Zedek I see a well-established programme, respected and supported by all hospital staff. Hemda explains that getting to this point has required patience and dedication, not just from her but from the psychotherapists who ran the programme before her. Placing animals inside a heavily regulated institution, where human health is priority, was not seen by all as a good idea to begin with.
Luckily, Hemda’s AAP training prepared her for this. Dr. Yoni Yehuda explains how the Magid Insitute’s course syllabus covers all elements of setting up an AAI programme:

- working within care institutions and alongside existing staff
- putting a case forward for AAI
- drawing on human-animal interaction theory and research
- selecting suitable animals and caring for them appropriately
- working within accepted law and policy for human and animal welfare

Hemda and her predecessors (also graduates from the Magid AAP MA) have put this into practice at Shaare Zedek with the diligence and determination required to eventually gain recognition and respect. Staff have noticed a significant change, with the presence of the animals not only benefitting the children, but alleviating stress and boosting morale for staff and families too.

‘It’s another world here, I come here and everyone is smiling. I come here and I smile.’

> Cleaner

Shaare Zedek was the first hospital in Israel to obtain approval for having animals onsite. There are now at least four others, each with their own AAT programme, most of whom have come to Shaare Zedek to learn from the experts.

‘One of the things that’s so special about this project is that the hospital invested a lot to build this area. We thought it was just a side project for them, but it’s now recognised as a valid type of therapy just as art or music are here.’

> Paediatric Psychiatrist

Why was I so impressed?
Shaare Zedek makes it clear that the often-quoted Health and Safety policies are not an obstacle to this work. With the right combination of research, expertise and dedication, AAI programmes can exist almost anywhere and with hugely beneficial results. The AAP programme here highlights the difference in-depth training and pooled experience can make in changing the world’s healthcare systems.
FINDINGS

AAI programmes offer a myriad of benefits to the individual, which with the right adaptations they can achieve across age group, gender, ability, economic status and culture. As someone who already believes wholeheartedly in these benefits, I wanted to know more about the impact and potential of AAI on an institutional level. I looked for common denominators across the most successful projects I saw and grouped them relating to:

- the benefits of AAI in residential homes
- the ability of AAI to instigate system change

In investigating how these projects achieved this, I also discovered certain repeated traits which are helpful to be aware of in terms of:

- project planning and implementation
- personal attributes of the people behind the programmes

THE BENEFITS OF AAI IN RESIDENTIAL HOMES

It is very clear to me that animals are an element of good care, not a solution to poor care. In all of the projects where animals were included in the care programme, what came first was a person-centred approach where management was entirely focused on creating the right environment for each resident. It then followed that this would include animals and nature as these had been a crucial part of so many resident’s lives. Where possible this was through having animals live in the residence but for homes who weren’t quite ready to make this commitment they found other ways of bringing in animals; through staff, visitors or local AAI providers. Animals motivate people to interact: by drawing people together they can help unlock social isolation. This happens much like a ripple effect, benefitting individuals, organisations and communities.

There is a place for all types of AAA, AAE and AAT in residential care but nursing homes that had animals permanently living onsite were livelier, more stimulating, with staff and visitors more actively involved with the residents. Impromptu activities started up in the corridors and communal spaces as residents gathered to greet cats and dogs or to observe small animals living in enclosures. There was further impact on:

Medication, Recovery and Challenging Behaviours

The presence of animals helped regulate difficult emotions and in some cases led to a reduction in medication. Watching birds or stroking an animal helped calm anxiety and agitation, leading to fewer problems with challenging behaviour. Feeding or playing with an animal motivated people to participate when they’d previously withdrawn, leading to more active residents. Having animals live alongside residents, whether as a private pet or under shared ownership, helped recovery from both physical and emotional trauma by adding purpose and meaning to residents’ daily routines.
Activities

For some residents, just being with the animals was an activity in itself, allowing staff to step back from constant planning and delivery. For other residents, the animals were a stimulus that prompted new discussions and activities, reducing the need for staff to constantly source new materials.

Staff

Having animals in the workplace gave many staff an added incentive, a common interest to share with peers outside of the usual responsibilities and a source of humour in an emotionally challenging environment. In homes where the whole team was involved with the animal care, from kitchen staff and carers through to management, the programme was able to survive the challenges of high staff turnover. Moreover, it gave staff a sense of purpose and identity that did not relate to their place within the organisation's hierarchy. Ultimately, the presence of animals in care settings alleviated stress for staff, leading to higher job satisfaction and better performance, therefore saving time and money.

Visitors

Families and friends were often motivated to visit residents more regularly when they knew there were animals at the residential home. The animals gave relatives something to talk about other than the usual conversations regarding treatments or medication. They also provided residents with something to be proud of, a new story to share with their visitors that showcased their ability rather than their disability. Visiting AAI programmes also helped engage families and friends who could plan their visit around a session and were often given photos or mementos to take away as future reminders of a shared positive experience. Likewise, the animals opened up the homes to a wider community network as they had a new reason to invite nurseries, schools, universities and veterinary departments in. Many programmes relied on work experience or university volunteers to help care for the animals, meaning residents were also engaging with another generation on a regular basis.

THE ABILITY OF AAI TO INSTIGATE SYSTEM CHANGE

Animal-assisted interventions have the potential to change the face of care. Evidence of the positive impact of this work could convince institutions to turn towards preventative rather than reactive measures, to look for holistic rather than medicinal treatments.

By working across international borders and collaborating with other disciplines, many organisations have started gathering experience from therapeutic practitioners, care providers, academics and voluntary and community sector organisations to compile an evidence-base that proves the merits of incorporating animals and nature into care programmes. Much as the various forms of art therapy have now become accepted into mainstream health interventions, many of the people I visited are fighting for the many variations of AAI and, beyond that, green care, to be officially recognized and commissioned within health and wellbeing services.
The AAI community in Connecticut, USA, has been working together over the past three years to ensure the passing of the world’s first AAT Bill. What started as an instinctive response to the devastation caused by the Sandy Hook Newtown high school shootings soon became recognized as a powerful intervention when people started to see the calming effect volunteers and their dogs were having on traumatised citizens. Animal-assisted social workers in the area, recognised the need for these interventions to be regulated so that the wellbeing of all was protected. A series of discussions followed to determine safe measures of working with animals to deliver psychological first aid at times of crisis.

The bill, ‘An Act Concerning Animal-Assisted Therapy Services’ (see Appendix I), calls for a volunteer-led crisis response procedure to be established with local organisations, so that registered human and dog teams can be dispensed in each region of Connecticut within 24 hours of an emergency. It also outlines the structure of an animal-assisted therapy program to be set up by the Department of Children and Families to help children and youths under their care. This includes training DCF staff in the human-animal bond and the benefits of animal-assisted interventions, collaborating with mental health care providers to develop appropriate therapy plans that incorporate animals, and working with the Department of Agriculture to develop outcome measures and a results-based assessment of the work.

‘I want AAT to become an integral part of mental health policy in the State and when we all came together, we saw how much we could achieve if we talked to each other. It’s a critical mass thing.’
>
State Representative Diana Urban

The process has not been a straightforward one and has involved much back and forth between the AAI organisations and government departments involved. It is also culturally specific as it responds to the increasingly common occurrence of public shootings that the USA is facing. Nevertheless, it shows the potential for AAI to be written into government welfare priorities and provides evidence of what can be achieved when grass roots programmes work together. Thanks to the sheer determination and belief of a professional community, in Connecticut at least, AAI has a seat at the government’s table.
PLANNING AND IMPLEMENTATION

‘You have to know what your purpose is, what your focus is, where you’re most likely to get something done.’

> Dr. Rebecca Johnson

Setting up an AAI programme is a complex process that requires thorough planning and constant adaptation. Each participant and animal has their own unique needs that must be listened to and learnt from. Whilst there is no ‘winning formula’ for this, the most impressive programmes all demonstrated the same qualities.

They set goals
Projects that had a clear goal had a larger impact. They were able to ensure they had the right training, the right team and the right supporters to help them achieve that goal. They were better equipped to not only endure financial or structural challenges but to grow steadily in a specific direction. Projects with a wider set of aims and activities still made a noticeable positive difference to those they worked with, however they lacked the subject area expertise and concentrated focus to instigate change at a systemic level.

They informed themselves
Successful projects knew where and why there was a need for AAI, they knew what they had available to them to establish a programme and what they were missing. They differentiated between types of AAI and determined which discipline was most appropriate for their client group. They spent time researching:

- the animals; needs, traits, behaviour and welfare
- the participants; preferences, abilities, narratives and culture
- the setting; advantages, limitations and requirements
- the community; what already exists, what resources are available
- themselves; strengths, weaknesses and limitations

They managed this through:

- working with outside experts; veterinarians, animal ethologists, mental health experts, Health and Safety regulators, policy makers, and so on
- undertaking relevant training available to them and sharing this with their staff and volunteers
- obtaining all possible certification and accreditation to legitimise their work
- establishing multi-disciplinary boards and committees to steer them
- engaging in an international network of AAI peers and experts
They had an eye for clever design
Clinical and institutional settings are rarely associated with a nurturing and stimulating environment. Many of the projects I visited were working in places with numerous restrictions, having to manage strict health and safety or financial limitations. Furthermore, they had to balance the needs of the humans with the needs of the animals, ensuring high welfare standards for both. It was inspiring to see how many projects tackled this with an imaginative yet practical approach to design.

Murals were painted on residential home walls, recycled car tires used as garden growing beds, old postboxes formed into an outdoor sensory trail, pound-shop tablecloths used as curtains to make corridors of colour in a run down school. Through creative attention to detail environments were transformed and places of healing were made.

PERSONAL ATTRIBUTES

‘All you need is 20 seconds of insane courage and I promise something good will happen.’
— Dr. Yoni Yehuda

Many of the AAI professionals I met were pioneers in the field, making incredible achievements and establishing programmes where others assumed they would fail. I was interested to note a set of carefully balanced qualities amongst these individuals that they then imbued their organisations, staff and students with.

They took risks and thought outside the box
They questioned existing approaches to health and wellbeing and used lateral thinking to establish an alternative.

They had discipline and high standards
They kept records, collected feedback, monitored, measured and evaluated their programmes. They fought for recognition from research bodies, the government and the media.

They were incredibly resourceful
They made the most of what was available to them, starting things on a shoestring if necessary and collecting materials and skills as they grew. They sourced volunteers, community resources, donations and in-kind support.
They sought to share and collaborate
They were open to discussion and learning. They actively sought out other individuals and organisations where they could build symbiotic relationships.

They were determined and persistent
They had sufficient faith in their vision to work independently and navigate challenges without giving up.

They understood self-care as a necessary pre-requisite for looking after the wellbeing of others
They drew on their own resources – family, friends, meditation, art, exercise – and listened to their own needs to ensure they had the support to continue their work.
CONCLUSION AND RECOMMENDATIONS FOR THE UK

With increasingly high levels of depression and isolation and burgeoning demand on the NHS, the UK is in drastic need of a new health and social care model. We are no longer served by a system that compartmentalizes health and prioritises medication, treating each issue in isolation. With its ability to break down barriers and promote healing, there is certainly a place for AAI within the UK care system. It is not the only answer to a broken system but it is an essential part of a healthy one.

In London, the majority of the residential homes and assisted living schemes we work with through Furry Tales do not allow residents to bring their pets with them, neither do they have animals living onsite. I imagine care providers are concerned about the risks and commitment involved yet I cannot help but find this short-sighted. The grief of having to leave a pet behind is an unnecessary addition to an already difficult transition, as is suddenly being cut off from a part of the world you previously had contact with. From the projects I saw in the USA and Israel, it’s clear that policies and regulations can be rewritten for animals to safely enter into and live within care institutions. Moreover, the benefits of having animals onsite clearly outweigh the work that goes into establishing such programmes.

Throughout my Fellowship I was struck time and time again by the adaptability of AAI, there is no one size fits all and with the right planning and evaluation it can be made to work in all number of scenarios. Care providers must be willing to inform themselves and then experiment, to see what works with their community. Care home managers, activities coordinators, maintenance staff, managerial teams and residents need to work together to set up safe and sustainable AAI programmes. All it takes is a small step in the right direction: even just inviting staff and visitors to bring their pets in for a day could lead to surprising results.

AAI offers us an alternative to medication: a wealth of preventative measures with which to build more resilient people, places and communities. Below are my key recommendations for how we can begin such progress in the UK. For recommendations on implementation tailored to a particular project or community, please contact me for details of future presentations and workshops.

Review health and social care policies to include AAI

Whether directly from care providers or through GP referrals to AAI organisations, care plans for elders must start to incorporate animal-assisted interventions and nature-based therapies. Dr. Rebecca Johnson and Jessica Bibbo provide excellent guidelines for AAI with elders in their chapter of the latest edition of Aubrey H. Fine’s *Handbook on Animal-Assisted Therapy* (see Appendix I).

Have a clear goal and plan appropriately

Every facility will have different needs, as will the people living within it. To meet these effectively with an AAI programme, the following questions must be considered;

- What do you want to achieve by working with animals?
- Which animals are most appropriate for this?
- What resources do/don’t you have to make this happen and where will you find them? Consider: people (skills, experience, time), animals (care, equipment, welfare), finance (grant funding, private donations, corporate giving), delivery (equipment, materials, transport), administration (monitoring, documenting, evaluation)
- Who will care for the animals?
• What adaptations to the physical environment need to be made?
• What policies and legislation need to be reviewed / updated?
• Who is best informed to steer the programme and how much time can they give?

Take a top-down AND bottom-up approach
For safe, consistent and successful AAI programmes to be delivered in care institutions, staff across all levels – carers, maintenance staff, managers and head office - and of course residents themselves as well as friends and families must be equally involved in answering the questions above.

The residential homes we work with at Furry Tales are all managed by larger organisations, regional housing associations and national care providers. It can be difficult for home managers and activities coordinators to set up sustainable projects when so much has to be approved by head office, who don’t always understand the day-to-day realities of life in the care home. For visiting AAI projects, having built a relationship with a home’s staff and residents through successful delivery, it seems a shame if other homes managed by the same organisation don’t benefit from the skills and experience gained in the process. Using surveys, interviews, workshops, online platforms and regular focus groups, all staff, residents and care communities can have input on designing a solid programme with achievable goals.

Seek professional training appropriate to your goal and community
Both the USA and Israel are much further ahead than the UK in terms of education and training in AAI (see Appendix II for providers). Though many AAI courses are available in the UK, there are as yet no regulated qualifications and there is continued debate as to the validity of what’s on offer. It is important to do one’s research and fully investigate each course before committing to it; is it appropriate to the discipline or setting you want to work within? One can also:

• Gather research and experience.
  Read up on theory and evidence (see Appendix I), visit and volunteer for existing AAI projects, talk to professionals and learn first-hand.
• Build your own syllabus from introductory and CPD courses.
  As a starting point the SCAS website has very useful advice on available training. For distance learning, IAHAIO have just introduced a new education initiative in collaboration with the Open University of the Netherlands: Modules in Anthrozoology is an online course for both existing professionals and newcomers to AAI. In the UK, People and Animals offer two day practical courses supporting people to set up their own AAI programmes. See Appendix I for links to these.
• Acquire training within an existing discipline relevant to AAI.
  Train in a profession that can then inform your AAI work, e.g. social work, psychotherapy, animal behaviour or veterinary science all play key roles in AAI.
Understand the community and context
This is where it’s better to think small. Any organisation which wants to implement an AAI programme must understand their participants, staff and the historical and cultural context. They must become an expert in their own community.

• Who is your target group?
• What are their needs and preferences?
• What cultural differences are there to be aware of in relation to animals?
• What AAI projects already exist in the area? Is collaboration possible?

Collaborate across sectors
AAI practitioners, veterinarians, NHS staff, carers, social workers, psychotherapists and mental health experts, animal behaviourists, research bodies, government representatives: we need to work together to make this work possible.

Through attending national conferences by UK organisations such as SCAS or People and Animals, or international conferences by IAHAIO or ISAZ, we can start to build networks, gather resources and create opportunities.

Get creative
An AAI programme should not just rely on the animals to stimulate and engage people. There are so many ways of adding colour and creativity to our environment. At HAI 2015 Dr. Marc Bekoff spoke of the need to rewild our hearts, to become enchanted with nature once again. I immediately thought of health and social care institutions, which do not need to look sterile and clinical - by doing so they only continue to intimidate and alienate those within them. With the simplest of gestures, adding flowers, artworks, books and textiles, we can make a place feel more like home.

Start small, think big
With the best research and planning in the world, we will still make mistakes and it is only through making such mistakes that we can learn and evolve. We need to take a bold first step and just get started!

‘You’re trying to make people be in awe of the world. If you’re not in awe, you’re not paying attention.’
> Dr. Marc Bekoff
DISSEMINATION

I will be sharing my report with the following networks:

- residential homes and larger care providers; Anchor, Sanctuary Care and HC-One
- housing associations; Peabody, Gateway and Notting Hill Housing Group
- The NHS; Bromley by Bow Health Partnership, Tower Hamlets Clinical Commissioning Group, East London Foundation Mental Health Trust, Royal College of General Practitioners
- UK Federation of City Farms and Community Gardens
- The Royal Society for the encouragement of Arts, Manufactures and Commerce
- UK AAI organisations; SCAS, People and Animals, Humanima CIC
- Dementia Services Development Centre, University of Stirling
- contacts and hosts from my Fellowship (see Appendix II)

I will also be offering bespoke presentations and workshops, with tailored case studies and recommendations, to all recipients of my report. If you are interested in these, please contact me.

Beyond this, my initial action points for disseminating my findings are as follows:

- Present Fellowship findings and share my own experience of AAI at London Environmental Educator’s Forum’s training event in London: Working with Older Clients Outdoors, 12th April 2016.
- Present 10 top tips from my Fellowship at the next People and Animals UK event in Wisbech: Creative Animal-Assisted Programmes for a Brighter Future, 5th September 2016.
- Schedule a Green Care & AAI peer learning event at Stepney City Farm and invite London’s city farms and care providers. Present findings and facilitate focus group on AAI with elders in London.
- Design and deliver workshop for local care staff to facilitate self-guided AAI tours at Stepney City Farm.
- Meet with Anchor’s Service Delivery Consultant re: developing a London-wide AAI programme. Furry Tales has delivered AAA at one of Anchor’s London residential homes for over three years and we are keen to work with them on a larger scale. They are one of the few providers who have a pet-friendly policy and as England’s largest not-for-profit provider of care and housing for older people they are an essential contact.
- Work closely with the Tower Hamlets Green Care Partnership to support and inform the AAI strand of their work across; Stepney City Farm, Spitalfields City Farm, Mudchute Park & Farm, Tower Hamlets Cemetery Park and Women’s Environmental Network.
APPENDIX I: DEFINITIONS AND FURTHER READING

AAI DEFINITIONS AS PROVIDED BY IAHAIO’S WHITE PAPER 2014

Animal Assisted Therapy (AAT): Animal Assisted Therapy is a goal oriented, planned and structured therapeutic intervention directed and/or delivered by health, education and human service professionals. Intervention progress is measured and included in professional documentation. AAT is delivered and/or directed by a formally trained (with active licensure, degree or equivalent) professional with expertise within the scope of the professionals’ practice. AAT focuses on enhancing physical, cognitive, behavioral and/or socio-emotional functioning of the particular human recipient.

Animal Assisted Education (or Animal Assisted Pedagogy): Animal Assisted Education (AAE) is a goal oriented, planned and structured intervention directed and/or delivered by educational and related service professional. AAE is conducted by qualified (with degree) general and special education teacher. Regular education teachers who conduct AAE must have knowledge of the animals involved. An example of AAE delivered by a regular education teacher is an educational visit that promotes responsible pet ownership. AAE, when done by special (remedial) education teachers is also considered therapeutic and a goal oriented intervention. The focus of the activities is on academic goals, prosocial skills and cognitive functioning. The student’s progress is measured and documented. An example of AAE delivered by a special education teacher is a dog-assisted reading program.

Animal Assisted Activity (AAA): AAA is a planned and goal oriented informal interaction and visitation conducted by the human-animal team for motivational, educational and recreational purposes. Human-animal teams must have received at least introductory training, preparation and assessment to participate in informal visitations. Human-animal teams who provide AAA may also work formally and directly with a healthcare, educator and/or human service provider on specific documentable goals. In this case they are participating in AAT or AAE that is conducted by a specialist in his/her profession. Examples of AAA include animal assisted crisis response that focuses on providing comfort and support for trauma, crisis and disaster survivors, and visiting companion animals for ‘meet and greet’ activities with residents in nursing homes.


FURTHER READING ON AAI AND GREEN CARE


ONLINE RESOURCES FOR GUIDELINES, RESEARCH & TRAINING

www.habri.org  www.psychologytoday.com/blog/animal-emotions

www.iahaio.org  www.rechai.missouri.edu

www.isaz.net  www.scas.org.uk

www.peopleandananimals.org.uk
APPENDIX II: DIRECTORY OF VISITS AND CONTACTS

AAI PROVIDERS

Animal-Assisted Therapy Services (AaTs)
Connecticut, USA
www.animalassistedtherapyservices.org

ASPCA
New York
www.aspca.org

Green Chimneys
New York, USA
www.greenchimneys.org

Havayot Center
Gush Etzion, Israel
www.havayot-center.co.il

Mo-Kan Pet Partners
Missouri / Kansas, USA
www.mo-kanpetpartners.org

The Nature Connection
Massachusetts, USA
www.nature-connection.org

Northland Therapeutic Riding Center
Missouri, USA
http://www.northlandtrc.org

The Pawzone
Missouri, USA
www.thepawzone.com

Petpals, Friendship Works
Massachusetts, USA
www.fw4elders.org

Pets For Life
Missouri, USA
www.kcpetsforlife.com

Puppies For Parole
Missouri, USA
http://doc.mo.gov/DAI/P4P.php

Soul Friends
Connecticut, USA
www.soul-friends.org

Tails Of Joy
Connecticut, USA
www.tailsofjoy.org

HEALTH AND SOCIAL CARE INSTITUTIONS WITH AAI PROGRAMMES

Ahava Emergency Shelter for At-risk Children
Kfar Bialik, Israel

ALUT Israeli Society for Autistic Children – Occupational Center
Giv’at Brenner, Israel
www.alutfriends.org

Atlantic Health Systems - Soothing Paws
New Jersey, USA
www.atlantichealth.org/pettherapy

Beit HaShemesh Dementia Home
Hod HaSharon, Israel

Garden Terrace Alzheimer’s Center
Kansas, USA
www.gardenterraceatoverlandpark.com/

Life Care Center of Nashoba Valley Nursing Home
Massachusetts, USA
www.lifecarecenterofnashobavalley.com

New Mark Care Center Nursing Home
Missouri, USA
www.newmarkcare.com
Nirim Elementary School  
Haifa, Israel

Nof Hamoshava Residential Home  
Petah Tikva, Israel

Shaare Zedek Medical Center  
Jerusalem, Israel
www.szmc.org.il/eng/home

St Joseph Medical Center  
Missouri, USA  
www.stjosephkc.com

Thompson Center For Autism & Neurodevelopmental Disorders  
Missouri, USA  
www.thompsoncenter.missouri.edu

Tiger Place Retirement Community  
Missouri, USA  
www.americareusa.net/retirement_community/Columbia_MO/zip_65201/americare/1335

Alhanan Tera Special Education School  
Tira, Israel

**AAI RESEARCH AND TRAINING PROVIDERS**

The Israeli Association Of Animal-Assisted Psychotherapy  
Haifa, Israel  
www.iaapsytherapy.org/index.php/english

School for Animal-Assisted Therapy  
Magid Institute, Hebrew University  
Jerusalem, Israel  
www.magid.huji.ac.il/english

Open University Of The Netherlands / IAHAIO  
Online  
www.ou.nl/web/psychologie/modules-in-anthrozoology

Research Center For Human-Animal Interaction (ReCHAI)  
Missouri, USA  
www.rechai.missouri.edu/

**ADDITIONAL RESEARCH**

2015 Human-Animal Interaction Conference  
New York, USA  
www.greenchimneys.org/upcoming-events/?event=64

Alrowwad Cultural Centre  
Bethlehem, Palestine  
www.alrowwad.org/en

Green Olive Tours  
Israel / Palestine  
www.toursinenglish.com/

Alhanan Tera Special Education School  
Tira, Israel

Connecticut State Capitol  
Connecticut, USA  
www.housedems.ct.gov/urban

Janice Abu Hani  
Lakiya/Rahat, Israel

Neve Tirza Women’s Prison  
Ramle, Israel  
APPENDIX III: PHOTO CREDITS

PAGE

10. Aida Refugee Camp; the Wall; the Banksy shop, Bethlehem, Palestine.
12. Kevin the dog at Pets for Life, Missouri, U.S.A.
13. Mr Moe the monitor lizard and Mr Jingles the rat, both at Green Chimneys, New York, U.S.A.
16. Mucking out syrian hamsters at Havayot Center, Gush Etzion, Israel.
17. Signage at Our Companions Animals Sanctuary, Connecticut, U.S.A.; the school dog at Nirim Elementary School, Haifa, Israel.
18. Diesel the horse at AaTs, Connecticut, U.S.A.; the school goose at a Tel Aviv elementary school.
19. Nancy Parish-Plass’s cockatiel Damage helps me write my notes in Haifa, Israel.
21. Llama enclosure at LCC Nashoba Valley, Massachusetts, U.S.A.
22. Travis and Marcos; the MSU chickens, both at LCC Nashoba Valley, Massachusetts, U.S.A.
24. The garden at LCC Nashoba Valley, Massachusetts, U.S.A.
25. The courtyard at Beit HaShemesh, Hod HaSharon, Israel.
26. Windchimes and the small animal enclosure, both at Beit HaShemesh, Hod HaSharon, Israel.
28. The ‘bus stop’; a seating area; Phoebe the dog; the rainbow house sign, all at Beit HaShemesh, Hod HaSharon, Israel.
29. Sensory materials at the Nature Connection, Massachusetts, U.S.A.
30. Woodland boxes; flowers and ferns, both at the Nature Connection, Massachusetts, U.S.A.
31. Essential oils for an activity at the Nature Connection, Massachusetts, U.S.A.
32. The bookshelves at the Nature Connection, Massachusetts, U.S.A.
33. The animal trolley at Shaare Zedek, Jerusalem, Israel.
34. Degu signage at Havayot Center, Gush Etzion, Israel; the petting zoo enclosures at Shaare Zedek, Jerusalem, Israel.
36. The indoor pen; the dialysis unit; the aquarium, all at Shaare Zedek, Jerusalem, Israel.
38. Feeding time at Nirim Elementary School, Haifa, Israel.
41. Colourful curtains and car tyre flowerbeds at Nirim Elementary School, Haifa, Israel; the donations box at Green Chimneys, New York, U.S.A.
42. Woodland in Connecticut, U.S.A.

Thank you to Rachel Gale for the Furry Tales logo and illustrations.