

## Special Article - Psychopathology in Older Adults

## Animal-Assisted Therapy with Institutionalized Elderly

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**Received:** June 15, 2015; **Accepted:** July 30, 2015;

**Published:** August 05, 2015

## Editorial

The animal-assisted therapy is a guarantee of efficiency in the management of elderly and tends to be scientifically proven. It showed many therapeutic effects on aging people with anxiety or depression. Thus, through this medium, we tend to a rigorous approach to raise this non-pharmacological therapy to the status of a real care.

The definition of Animal-Assisted Therapy (AAT) recognized in the scientific world is given by the Delta Society (An organization dedicated to promoting the human-animal relationship). The definition of the AAT, published in Standards of Practice for Animal Assisted Activities and Animal-Assisted Therapy in 1996 (second edition) is "AAT involves a health or human service professional who uses an animal as part of his/her job. Specific goals for each client have been identified by the profession, and progress is measured and recorded [1]. AAT is goal-directed intervention in which an animal that meets specific criteria is an integral part of the treatment process. AAT is directed and/or delivered by a health/human service professional with specialized expertise, and within the scope of practice of his/her profession. AAT is designed to promote improvement in human physical, social, emotional, and/or cognitive functioning (cognitive functioning refers to thinking and intellectual skills). AAT is provided in a variety of settings and may be group or individual in nature. This process is documented and evaluated. There are specified goals and objective for each individual. Progress is measured".

Thus, the animal is part of the therapy and more generally in the environment of the person. It is used as a medium between the patient and the therapist, to ease the occurrence of some mental processes. However, for this activity, the animal must be trained properly and carefully medically monitored. Well conducted this therapy can maintain and/or improve cognitive, psychological, social and emotional potentials.

Within the animal-assisted therapy the place of the animal changes according to sessions, population and duration of the different times of the session. Indeed, according to Parish-Plass [2], this therapy is characterized by two types of interactions: the dyadic relationship and the triangular one. About the dyadic relationship we can describe three interactions:

1. A relationship between therapist and patient, the animal is put aside and in a passive position, which is a communication

around the animal.

2. A relationship between the patient and the animal, the therapist is put aside, he observed the interactions between the animal and the patient, and report relevant and subjective elements.
3. The relationship between the therapist and the animal, the patient is put aside, he observed the relationship between the therapist and the animal. This observation allows the patient to rate the qualities of the psychologist by witnessing his relationship with the animal. But the patient also evaluates if the animal is potentially dangerous or not. So, it is at this point that a relationship of trust is created between the various protagonists.

Regarding those interactions, the patient needs to feel united with the animal, and/or to reduce his fear about it. Furthermore, the presence of the animal promotes the establishment of the therapeutic relationship and achieves faster therapeutic goals set at the beginning of a session. Indeed, Fine [3] states that this emotional connection between the therapist and the animal gives guidance to the patient in the way that the psychologist takes care of others.

## Therapeutic Effect on Anxiety

The TAA is an innovative and interesting therapy for institutionalized elderly with and without dementia. Scientific studies show that this therapy leads to significant therapeutic effects on psycho-behavioral disorders, numerous in this population. Several studies have shown a decrease in agitation, aggression, irritability and disruptive behavior during the session [4-7].

Moreover, the results of some studies find a significant drop in blood pressure and heart rate during the moment of TAA [4]. However, this effect is not permanent and ceases after the session.

These findings are the evidence of a physical and psychic healing. Thus, the presence of the animal induces a calming effect [8]. However, only regular and frequent sessions of TAA lead to those results [9].

## Therapeutic Effect on Depression

In 1977, Corson and O'Leary Corson brought a dog to a geriatric institution, and observe its effects [10]. The dog has allowed a drop of emotional and social deprivations of elderly people. More widely, the AAT has provided a burst of life in the institution, motivating and increasing verbal and nonverbal contact with the animal, but also between patients and between patients and caregivers. The dog is a tool to strengthen social ties in institutions. Nevertheless, the dog does not provide those effects by itself. The professional is there and directs interactions and offers discussion topics around the animal.

Regarding the elderly with Alzheimer's disease, the presence of the animal has a positive impact. In fact, in their study, Batson et al. show an increase in the frequency and duration of smiles, looks,

touch, movements of spontaneous approaches towards the animal and increased body temperature [11]. Fick's [12] observations go in the same direction: there is a significant increase in verbal and nonverbal interactions (double interactions) between people when the animal is around. Thus, he concluded that the dog is a social catalyst for institutionalized elderly population, whatever the disabilities and diseases. Finally, Kohler [13] observed a decrease in feelings of abandonment, loneliness, social exclusion and insecurity.

Furthermore, we can make a connection between pleasure as a therapeutic effect and depression. The elderly with depression has many symptoms: loss of initiative, loss of appetite, withdrawal. Consequently, the elderly invests more their depressive symptomatology than their environment. The effects of pleasure expressed in the animal assisted therapy would bring a third between the disinvested environment and depressive suffering of the elderly. Thanks to the animal and the game played with it, the patient will put aside his depression. The environment would be re-invested as a sensory consistency, allowing the elder person to enroll the moment and get out of narcissistic withdrawal. By repeating these animal assisted therapies, affects of pleasure will part of continuity: from a temporary moment during the workshop to a daily socialization.

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