In 2018, there were 16 million unpaid dementia caregivers in the U.S. whose numbers continue to rise rapidly (Alzheimer’s Association, 2019). Families are tackling enormous challenges providing care for increasingly dependent loved ones (Friedman, Shih, Langa, & Hurd, 2015). Caregivers who struggle to access scarce resources are at risk for burn-out and the loss of ability to keep loved ones in the home (Peluso et al., 2018).

To enhance client welfare and provide a better quality of life for this population, we must develop therapeutic interventions that offer meaningful and relevant group activities that offer social engagement and introduce therapeutic skills to manage both occupational deficits and challenging behaviors. Participation in activities that deliver the “just right challenge” and promote a sense of solidarity with others can reduce caregiver distress and improve attitudes towards dementia (Boots et al., 2015). Ultimately, caregivers who develop new skills and knowledge can achieve a better quality of life for themselves and their loved ones (Nay et al., 2015).

A challenge to delivering these opportunities lies in the fact that clients with Neurocognitive Disorders (NCDs) resist attempts at external engagement. They can become anxious and agitated and refuse to leave the home (Batson, 1988).

Caregivers burdened by competing demands on their time often hesitate to add to existing commitments (Nay et al., 2015). Therefore, it is important to find avenues to encourage participation that are perceived as valuable and enjoyable and provide relevance in a non-judgmental forum.

We hypothesize that providing an Animal Assisted Therapy (AAT) Occupational Therapy (OT) program for clients with NCDs and their caregivers enhances interest in participation in therapy (Peluso et al., 2018). We further hypothesize that modeling therapeutic intervention skills during AAT sessions can carry over to caregivers, and translate to enhanced caregiver abilities delaying nursing home placement and reducing the cost of formal care (Brodaty & Arasartam, 2012).

**Methods**

This exploratory intervention study consisted of OT AAT sessions designed for clients with NCDs who scored at least a 3.0 on the Allen Cognitive Level Screen (ACLS-5) (Allen et al., 2007). A purposive sample was comprised of clients who frequent the Alvin A. Dubin Alzheimer’s Resource Center. Initial information was collected via semi-structured interviews and through demographic questionnaires. Clients and their caregivers then attended a one-hour weekly AAT session over the course of six weeks. OT students documented functional performance during each session on a Behavior Observation Scale (BOS) and kept fieldwork journals. Caregivers participated in weekly feedback sessions with the research primary investigator and completed weekly feedback forms documenting any changes noted in performance at home.

**Results**

Themes from fieldwork journals included increased social participation, interaction, sharing and task completion. Researchers noted increased social functioning during AAT tasks (increased eye contact, touch, vocalization). There was greater interaction and engagement between client/caregiver and among pairs. Pairs made note of how the dogs were reacting to other pairs. Attitudes improved during engagement and socialization when dogs were present. Clients initiated more verbal communication centered around dogs. Agitation and frustration levels decreased over time between caregivers and clients as caregivers began to model therapeutic intervention skills. Qualitative results consisted of caregiver feedback and researcher fieldnotes. Major themes identified by caregivers included increased client cooperation and initiation and implementation of strategies modeled during interventions.

**Behavior Observation Scale (BOS)**

- **Fieldwide Themes**
  - Increased Social Functioning
  - Task Completion
  - Increased Social Interaction among Clients
  - Agitation and Frustration
  - Compliance present
  - Client not innovative without caregiver present
  - Increased cortisol levels

- **Caregiver Themes**
  - Increased interpersonal cooperation
  - Model-directed performance
  - Decreased resistance
  - Distraction resolved
  - Engaging in simple activities
  - Using simple options with client

**Caregiver Quotes**

- “I have been trying to think of ways to break down tasks we can do together similar to the way we did the dog treat task”

- “My wife started folding clothes without me asking”

- “…the client will not leave the house to do anything except to come to the sessions because of the dogs”

**Discussion & Recommendations**

The value and relevance of using AAT as an OT modality with clients diagnosed with NCDs was supported by the 100% participation rate over the course of six weekly sessions. Preliminary results are promising. The qualitative data collected provided detailed insight into motivation factors, level of engagement, importance of social interaction, and effect on quality of life for clients and caregivers alike.

**RECOMMENDATIONS:**

- **Providing pre-session activities (to reduce client anxiety & caregiver stress)** for pairs who arrive 30-45 mins. before sessions. This environmental effect provided a valuable “teaching moment” as caregivers related how they often leave home very early for appointments anticipating delays and often find themselves stressed as clients are left in waiting rooms becoming anxious.

- Recruiting more therapy dogs to ensure greater availability for sessions.

- Stronger emphasis on OT animal handling skills, which could result in more available therapy dogs.

- Implementation of a pre-test-post-test to evaluate caregiver baseline knowledge of NCDs and measure progress.

- Revision of the BOS to improve inter-rater reliability.

**References**


