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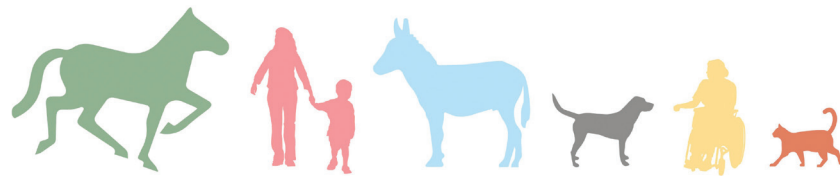
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## Understanding Psychiatric Patients' Experience of Virtual Animal-Assisted Therapy Sessions during the COVID-19 Pandemic

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**Keywords:** animal-assisted therapy, virtual therapy, COVID-19 pandemic

**Abstract** Canine animal-assisted therapy (AAT) can improve the mental health and well-being of incarcerated individuals. An in-person AAT program has been offered at the Regional Psychiatric Center (RPC) in Saskatoon, Canada, since 2014 with St. John Ambulance Therapy Dog Program (SJATDP) dog and handler teams. The program transitioned, for the first time, to a virtual format with the onset of the COVID-19 pandemic in March 2020. This exploratory research examines whether and how a virtual offering of AAT at RPC can provide positive benefits to forensic psychiatric patients. Overall, the findings reveal an understanding of the virtual sessions from patient, handler, and clinician perspectives, including (a) differences between connection in virtual versus in-person facilitation, (b) the role of technology, (c) the unique role of the handler, and benefits for patients, including (d) emotional support, (e) positive effects on mental health, and (f) feelings of hope, normalcy, and deinstitutionalization despite the COVID-19 pandemic. Using an online platform allowed patients who had had preexisting interactions with the therapy dog teams to form or continue their connection/bond and benefit from AAT during the COVID-19 pandemic, a time when in-person contact was not possible. Therefore, this research provides support for the use of web-based video conferencing in facilitating AAT sessions with incarcerated psychiatric patients.

Prison is an isolating environment for most people. Incarcerated individuals often experience physical, mental, emotional, and spiritual disconnection from their community and families (Rodriguez, 2016). This disconnection has been exacerbated by the coronavirus disease 2019 (COVID-19) pandemic.

The COVID-19 pandemic has resulted in increased fear, reduced mental health services, and further isolation within correctional systems (Johnson et al., 2021). These restrictions have been detrimental to the well-being and mental health of those incarcerated (Johnson et al., 2021; Mental Health Commission

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of Canada, 2021). As such, an emergent need exists for research addressing how these concerns may be mitigated.

Increasingly, canine animal-assisted therapy (AAT) is being offered in correctional settings to improve the mental health and well-being of incarcerated individuals (Villafaina-Domínguez et al., 2020). AAT, a documented, evaluated, goal-directed intervention facilitated by health and human services providers in which an animal is a part of the treatment process, is designed to promote improvement in human physical, social, emotional, or cognitive function (American Veterinary Medical Association [AVMA], 2021). According to the IAHAIO White Paper, “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” (Jegatheesan et al., 2018). AAT has been found to provide benefits such as improvements in mental health, emotional control, and empathy in incarcerated populations (Seivert et al., 2018; Villafaina-Domínguez et al., 2020). AAT participants perceive feelings of love and support from the therapy dog teams during AAT sessions, in turn contributing to connection, or the human–animal bond (HAB) (Dell et al., 2019). Love between humans and animals has been described as perceived nonjudgmental presence (Allen et al., 2002). The HAB is defined as a “mutually beneficial and dynamic relationship between people and animals that is influenced by behaviours that are essential to the health and well-being of both” (AVMA, 2018, para. 1).

Because of the COVID-19 pandemic many AAT programs, normally offered in person, have transitioned to a virtual format to ensure the health and safety of clinicians, therapy dogs, therapy dog handlers, and clients. Since this transition, research involving incarcerated populations has not been conducted. However, studies involving student and hospital patients have found interacting with canines virtually provides benefits similar to those received in person, including reduced loneliness, a sense of comfort and love, connection, and support (Dell et al., 2021; Wong et al., 2021).

An in-person AAT program has been offered at the Regional Psychiatric Center (RPC) in Saskatoon, Canada, since 2014 with St. John Ambulance Therapy Dog Program (SJATDP) dog and handler teams. RPC is a multilevel secure forensic psychiatric facility that serves as a federal penitentiary under the terms of the Correctional and Community Release Act in Canada and a hospital subject to legislation and regulation through the province of Saskatchewan. The SJATDP aims to provide love, comfort, and support to individuals through interaction with therapy dog teams. Prior to the COVID-19 pandemic, RPC and the SJATDP accommodated four to six patients a year, offering weekly AAT sessions for a total of 12 to 24 sessions as well as a “booster” session once every three months after completion of the program to maintain beneficial connections between the participants and therapy dog teams. Evaluations of the AAT program offered at RPC have found that AAT sessions were successful in their goal of offering comfort, love, and support to patients, as well as supporting them in their goal-directed correctional plans (Dell et al., 2019). Amid the COVID-19 pandemic the AAT program transitioned to a virtual format. Clinicians and therapy dog teams began meeting weekly with patients through an online video conferencing platform, WebEX. Despite this transition, the program aimed to continue to reach its objectives of providing comfort, love, and support to patients alongside working toward the clients’ correctional plan goals under the direction of their clinician. The intent of the current study was to evaluate whether and how virtual facilitation of the AAT program at RPC during the COVID-19 pandemic could provide positive benefits to psychiatric patient participants.

## Methods

Given that virtual offering of therapy dog teams within a psychiatric facility has not previously been studied in Canada, including in an AAT context, an exploratory case study was employed. A qualitative approach suited the research focus on the

participants' subjective experiences, meanings, and processes (Mason, 2006).

### *Participants*

All study participants were involved in the virtual offering of AAT at RPC from September 2020 until December 2020. This included four psychiatric patients ( $n = 4$ ), clinicians ( $n = 3$ ), and therapy dog/handler teams ( $n = 2$ ). Patients were selected by RPC staff through the usual internal referral process. All patients were male and had previous experience with the in-person offering of AAT prior to the COVID-19 pandemic, ranging from full program participation (12 sessions) and a booster session to 6 sessions before COVID-19 prevented further sessions.

### *AAT Program*

Therapy dog teams met weekly via WebEx with patients and their clinician at RPC. On average, these sessions were 30 minutes in length. Sessions involved a hello to the dog and handler by the participant, followed by an activity such as reading a book, the dog team going for a walk, or learning tricks. The clinician led the session goals for the client, linking the activities to their correctional plans. This occurred both during the session and afterward.

### *Ethical Considerations*

This research was approved at the national level through Correctional Service Canada, Research Branch, and locally by RPC. The incorporation of animals in a therapeutic capacity was approved by the University of Saskatchewan Animal Research Ethics Board (AUP 201330115).

### *Data Collection and Analyses*

Distinct semistructured question guides were developed for each respondent group to add insight and context to the AAT virtual sessions. Interview areas included participants' overall experience with the program; feeling comfort, love, and support from

therapy dog teams; connection with therapy dog teams; and differences between online and in-person therapy dog sessions. Attainment of the session goals was not evaluated in this study.

The lead researcher conducted single semistructured interviews with each patient, one semistructured dyadic interview with the therapy dog handlers, and one focus group with the clinicians. Interviews and focus groups were conducted via a telephone or conference call within a two-month time span following completion of the AAT. Patient interviews ranged between 20 and 30 minutes, while the therapy dog handler dyadic interview and RPC clinician focus group each lasted just over 60 minutes. All interviews and focus groups were audio recorded and transcribed verbatim by the lead researcher.

Thematic analysis applying Braun and Clarke's (2006) guide was conducted concurrently on interview and focus group transcripts to understand reoccurring patterns within the data. This included (1) familiarization with the topic, (2) coding of data into themes, (3) comparison of themes found within the research using a thematic map, and (4) reporting these comparisons (Braun & Clarke, 2006). Coding was done openly by the lead researcher and consisted of multiple reviews of the data. To ensure accuracy, an intercoder reliability check was undertaken with another member of the research team. A theme was ultimately identified based on reoccurrence and emphasis in the data.

## **Results**

Themes were organized into two categories: (1) program insights and (2) patient benefits. Within the program insights category, a total of three themes were developed: (a) comparison of virtual and in-person connection, (b) the role of technology, and (c) the role of the handler. Within the patient benefits category, three themes were developed: (a) emotional support, (b) effects on mental health, and (c) feelings of hope, normalcy, and deinstitutionalization despite the COVID-19 pandemic. Emotional support has three subthemes: love, happiness, and trust. Overall,

results suggest that virtual offering of AAT at RPC benefited patient well-being.

### *Program Insights*

**Theme 1: Comparison of Virtual and In-Person Connection** All patients perceived a connection with the therapy dog teams when meeting with them virtually. Patients described connection as love, engagement, familiarity, and harmony. This connection was fostered through memories of meeting the therapy dog teams in person and engagement with the therapy dogs during video calls, such as perceiving the therapy dog to be recognizing a patient's voice. Patients indicated their moods were influenced by connecting with the therapy dogs; when the dog was happy, they were happy. This connection, however, was often described as "one-sided" or "uni-directional." A patient described that they were benefiting from the AAT sessions more than the therapy dogs were:

While I still get what I get out of seeing the dogs online, it doesn't seem like they're able to maybe get the same connection too because they're not really aware of me being there.

Despite some of the positive outcomes with virtual facilitation, many patients missed the in-person engagement (e.g., walking, petting, giving treats) and physical contact with the therapy dogs, which they thought contributed to even greater feelings of connection. Nonetheless, patients as well as handlers and clinicians agreed that the connection patients could make with the therapy dog teams virtually was still important and beneficial to their well-being, particularly when in-person meetings were not possible.

**Theme 2: Role of Technology** Video conferencing created concerns for all participants involved in the virtual AAT sessions. Patients and clinicians reported the video connection was often poor, sometimes resulting in no video at all. Patients found this made engagement with the therapy dog teams very

difficult. Handlers also found that it was hard to hold the therapy dogs' attention throughout the sessions. Despite these limitations, the use of technology was thought to be beneficial overall to patient correctional programming because gaining familiarity with technology is considered an asset in encouraging patients to reintegrate into the community outside of RPC.

**Theme 3: Role of the Handler** Participants identified the handlers as an integral part of virtually facilitated AAT. Handlers provided human interaction for patients during a time when this was extremely limited due to the COVID-19 pandemic. Patients described the handlers as a "connection to the dog," "therapist," and "pet therapy family." One handler indicated that because patients and therapy dogs were unable to physically engage, she became a translator relaying interaction between them. Both handlers and clinicians identified this new role, along with the transition to virtual offering of AAT, as creating a strain on the handler. One handler described the new role as very taxing:

It's extremely tiring in our end to always try and figure all that out and where the natural connection [is], or like, it's like okay, we're over now, like how do you determine that if that person is really quiet and so forth. I find it incredibly tiring.

### *Patient Benefits*

**Theme 4: Emotional Support** Patients expressed that they were always glad to be at an AAT session and were very grateful to be involved with the program. Patients valued the sessions, in particular, because of the love, happiness, and support they felt from the therapy dog teams.

**Love.** All four patients felt love from the therapy dogs during the virtual AAT sessions. The love patients perceived was described as unconditional and comforting. They also described that they felt loved when the therapy dogs engaged with them. Although engagement was limited due to virtual facilitation, one patient notably reported that "just being

there with them” was enough. Another patient found that he felt loved when the therapy dog was able to focus on the screen and pay attention to him. Two patients noted that they felt dogs were able to express love toward humans both through their personalities as well as through facial expressions.

**Happiness.** Patients reported feeling happy to meet with the therapy dog teams during every virtual session. Patients noted this happiness was long-lasting and “charged their batteries” until the next session. For patients, feelings of happiness came from the “silliness” of sessions. One handler explained that there was always laughter in the sessions, and dogs were always fun and happy. A patient described how virtual sessions brought up memories of in-person sessions prior to the pandemic:

I knew them before all of this, I still had that connection with them, they’re familiar to me and even being able to see them, even if they can’t see me, you know, brings back those memories, happiness that I had with them when they were here.

Another patient considered the happiness the therapy dogs brought to be very important because of the restrictive prison environment and the COVID-19 pandemic:

Happiness, comfort, love, you know some things you don’t feel in here unless you get visits from the outside, but since that’s not possible anymore, that’s, you know, that’s in short supply.

**Trust.** Patients trusted the therapy dog teams because of their dependability. One handler described that the virtual AAT sessions were never cancelled, which was important as no other institutional programming was available during the pandemic:

[When] it’s time for the session and that you know that when we’re here we’re going to be here and that in itself is support, I think, like it’s just kind of a given in some ways that the dogs will be available to them.

**Theme 5: Effects on Mental Health** Virtual AAT sessions with the therapy dog teams were described by patients as beneficial to their mental health. Specifically, as described by patients, attending AAT sessions resulted in less stress, anxiety, and depression and helped them better express their emotions.

**Theme 6: Feelings of Hope, Normalcy, and Deinstitutionalization Despite the COVID-19 Pandemic** Meeting with the therapy dog teams during the COVID-19 pandemic provided patients with feelings of hope, normalcy, and a sense of deinstitutionalization, a term that seems to encompass patients’ reports of feelings of freedom, a sense of control, and a sense of autonomy. Patients expressed that seeing the dogs carry out normal activities despite the pandemic was beneficial to them. A clinician further elaborated:

There’s a lot of reassurance like when, especially in the beginning, when [patient] would see [dogs] at home, that they were doing okay, and they weren’t, they weren’t affected from COVID.

Additionally, virtual AAT contributed to patients feeling as though they were no longer in an institutional environment. Patients expressed that during the virtual AAT sessions they often thought of memories prior to being incarcerated. A clinician recognized that virtual AAT sessions can be a form of escape:

It allows [the patient] not to feel like he’s a patient or an inmate. Like in those moments, and I think it is that it does bring back memories of [how patient] grew up with dogs, and [patient] loves dogs. . . . It does allow [patient] to kind of leave the drama of being on the unit and being in an institution and all the politics and stuff that goes along with that. . . . It’s a checkout, so to speak.

Further, virtual AAT sessions provided a unique opportunity for patients to experience a setting

different from RPC. Through being virtually connected to the handlers' homes, patients were provided with a sense of freedom and autonomy. One handler described these feelings as rare for patients, especially during the pandemic:

I think it's an opportunity to, you know, for some individuals it's been a number of years, and it's an opportunity to come together. . . . Especially during COVID, when they are locked down, like seriously locked down, it's an opportunity to have a little bit of freedom maybe . . . [to] have a bit of control over what you're doing.

Another handler related being in a home setting to a sense of deinstitutionalization:

You're here at my home, you're in my backyard, you're in my living room. . . . There's maybe a benefit in that in reducing the sense of isolation and loneliness in that outside of the institution there [is] someone who cares about them and [that] someone is the dogs . . . for them to hear the birds chirping or see the rabbit running. These are things that they don't get [normally].

## Discussion

The purpose of this research was to determine whether and how virtual offering of AAT offered at RPC with SJATDP dog and handler teams during the COVID-19 pandemic provided positive benefits to forensic psychiatric patient participants. The positive findings are unsurprising as companion animals, especially dogs, have been beneficial for many people throughout the pandemic (Hunjan & Reddy, 2020; Segarra-González & Meléndez-Samó, 2021). Overall, each participant felt connected to the therapy dog teams during the virtual AAT sessions. Further, participants benefited from emotional support provided by the dogs and handlers. They also experienced positive mental health effects, including feelings of hope, normalcy, and deinstitutionalization despite the COVID-19 pandemic. These benefits

are especially significant as incarcerated individuals often experience isolation, familial disconnection, loss of autonomy, and high rates of mental health disorders due to the prison climate (Goomany & Dickinson, 2015; Kouyoumdjian et al., 2016). This has been compounded during the COVID-19 pandemic (Mental Health Commission of Canada, 2021). Programs that are effective in mitigating these outcomes may benefit the overall well-being of forensic psychiatric patients.

A growing body of research, especially expanding because of the pandemic, suggests that providing mental health services through the internet is clinically efficacious for a variety of conditions (Abraham et al., 2021; Sucala et al., 2012). Our study provides support for the use of online-based video conferencing to offer AAT sessions. Virtual AAT can be implemented in correctional facilities where in-person facilitation is not possible, including high-security facilities, or facilities that do not have therapy dog teams nearby. While the current results are promising, additional, more robust research involving incarcerated individuals and the use of AAT to improve their well-being within the prison system is warranted (Villafaina-Domínguez et al., 2020). Next steps should include continued facilitation of virtual AAT sessions to determine if the perceived connection patients formed with the therapy dog teams is sustainable despite an increased time without in-person contact. Additionally, future research should include participants that have never met with a therapy dog team to provide insight into if, and how, a connection with a therapy dog team is possible to achieve completely virtually. Specific research attention should also be paid to the role of the clinician in assisting clients to attain their AAT goals.

## Strengths and Limitations

A high level of quality and rigor was prioritized throughout this study, including multiple reviews of transcripts and an intercoder review process (O'Connor & Joffe, 2020). As this study was conducted during the COVID-19 pandemic, it is unclear

whether the findings are applicable to postpandemic society. Additionally, because of the COVID-19 pandemic, all interviews took place over a telephone call, minimizing the lead researcher's ability to build rapport and assess body language (Bolderston, 2012). There were also delays in data collection potentially affecting participants' memory (Bolderston, 2012). As well, the small sample size prevents the findings from being generalizable, although this is mitigated by the in-depth quality of the data collected (Levitt et al., 2017).

## Conclusion

This exploratory research is unique in that it explores virtual AAT sessions with forensic psychiatric patients. Results of the study provide an understanding of psychiatric patients' experiences as well as the benefits they received. These results need to be considered alongside the fact that the AAT participants had preexisting interactions and likely bonds formed with the therapy dog teams. Further exploration of offering virtual AAT facilitation is warranted.

## Note

1. As RPC serves as a psychiatric facility as well as a correctional facility, the individuals incarcerated within it are referred to as patients rather than inmates or prisoners.

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