Clinician perspectives on the human-animal bond and its impact on levels of compassion and prosocial behavior

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Pear Wilson

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ABSTRACT

Animal-assisted therapy is an increasingly popular mode of therapeutic treatment, supported by a body of research that has grown significantly in the past decade. Thirteen seasoned clinicians utilizing the human-animal bond (HAB) were interviewed about the HAB’s impact on clients at the internal level of experienced compassion and the corresponding external level of pro-social behavior.

Major findings were that clinicians overwhelmingly endorsed the HAB as an effective intervention in increasing client capacity for compassionate mindfulness and engagement with others in a more satisfying and pro-social way. Participants strongly recommended that the field of social work be more inclusive of animal-assisted therapy and proposed investigations of the mental health benefits of the HAB, both in research and inclusion in graduate-level curricula. Additionally, findings brought forth animal welfare as a domain for necessary concern in implementation of the HAB in clinical work as well as the greater field of social work.
Clinician Perspectives on the Human-Animal Bond and its Impact on Levels of Compassion and Prosocial Behavior

Pear Wilson

A project based upon an independent investigation, submitted in partial fulfillment of the requirements for the degree of Master of Social Work.

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ACKNOWLEDGEMENTS

This study is dedicated to all non-human animals, unto themselves as well as for the opportunity they offer to humans to engage more sensitively in relationship. It is also dedicated to the humans (participants of this study included) working to shift the anthropocentric bias of conventional social work ethics towards a more inclusive world where humans might extend their scope for compassion to include all lives.

Great thanks to my thesis advisor, Dr. Beverly Simmons, for her invaluable help and patience in refining my ideas and developing this study.

Thanks also to my cherished Assistant, who is the best only.

The above mentioned, and the friends, family, and mentors I am privileged to have, embody a boundless generosity and affinity for nature that has held, nourished and inspired me.
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Chapter I

Introduction

The purpose of this study is to answer the following question: How do clinicians utilizing the HAB in their clinical work experience it to impact their clients’ levels of compassion and prosocial behavior? The operational definition of the term human-animal bond, or HAB is, for the purpose of this study, any relationship that exists between human and non-human animal that is characterized by benevolent regard, communication, and a mutual sense of safety and connection (Walsh, 2009). The term experienced compassion refers to a feeling state of positive regard and empathy that is either generalized and undirected or mentally and/or emotionally directed towards one’s self or others (Weng et al., 2013).

One reason for conducting this study is because the results have potential to inform two rapidly growing social worker populations in the United States: those interested in compassion-fostering practices as well as those interested in incorporating animals into their clinical work. Animal-assisted therapy, which utilizes the HAB to encourage higher levels of social-emotional functioning, is an intervention that only continues to grow in popularity as there becomes more awareness of its existence and research published on its benefits (Risley-Curtiss et al., 2012). And given that social work also has a developing interest in interventions known to foster higher levels of compassion such as mindfulness practice and guided Buddhist meditation (Davidson et al., 2003) that directly encourages clients to experience compassion in that moment, there is reason to
examine how the HAB may be involved in the treatment of clients where outcomes of higher levels of compassion and the positive, pro-social behaviors that are associated are desired.

The second reason for conducting this study is because it appears there is a dearth of literature that addresses the subject of human/animal relations in psychotherapeutic work, as it has yet to become a widely accepted topic of reflection among theoreticians and clinicians. For instance, the relationship between humans and animals in the mental-health field are most commonly conceptualized through the lens of Attachment Theory (Walsh, 2009), the research on which reflects a limited range of research methodologies and leaves the results-oriented question of how the HAB impacts clients’ fundamental ability to have healthier relationships unexplored. With the purpose of expanding discourse on the phenomenon of the benefits of the HAB as utilized in clinical social work, I will attempt to in my thesis to explore and document the impact of HAB on clients through the lens of theories about learned compassion and contemporary ideas from neuroscience about altruistic behavior. While indeed there is a fair amount of literature about the mental-health benefits of compassion in general, and various scales for measuring it, the research is mostly limited to states of compassion as fostered through the specific tool of mindfulness practice, and of this literature, little if none addresses the intervention of fostering compassion within the realm of psychotherapy. I have yet to find literature that specifically looks at the levels of compassion and prosocial behavior of clients involved in HAB interventions. And furthermore, while the mental-health benefits of having a pet are widely
documented (Walsh, 2009), there is little exploration of the HAB in a more neutral context where the process of human and animal relating with one another is itself the subject of analysis, free from the added dynamic of owner/pet, which surely has a psychological impact which could influence what the human experiences from the interaction.

Strong evidence exists that learned establishment of greater levels of compassion fosters mental health and well-being (David and McEwan, 2012). This pronounced correlation is potentially quite powerful as a factor in clinical intervention and thus necessitates a closer look at compassion in human-animal relationships within therapeutic treatment.

In this way, the purpose of my study will be to seek an answer to the question: How do clinicians utilizing the HAB in their clinical work experience it to impact their clients’ levels of compassion and prosocial behavior?
Chapter II

Literature Review

History of HAB as a Field of Study and Therapeutic Tool

Coined in the early 1970’s by Konrad Lorenz and Boris Levinson, the term human-animal bond (HAB) caught on and was used prominently later that decade in Scotland (Hines, 2003). The human-animal bond is defined by the American Veterinary Medical Foundation (AVMF) as:

A mutually beneficial and dynamic relationship between people and animals that is influenced by behaviors that are essential to the health and well-being of both. This includes, but is not limited to, emotional, psychological, and physical interactions of people, animals, and the environment. (AVMF, 2013)

Levinson was particularly interested in studying the benefit that interacting with animals has for adults and children. Academic discussion on the HAB was initially criticized, dismissed, and poorly funded. However, media coverage of animal-assisted activities such as service-dog training programs and therapy initiatives brought wider attention and interest to the HAB as a field for academic inquiry. The published proceedings of international conferences on the subject of the HAB in the 1970s and 1980s brought further exposure and promoted the value of the construct (Hines, 2003).

One way that human-animal bonding has come to be understood is as a remedy to a general sense of existential despair and loneliness that may be the result of civilization's fundamental effect of alienating humans from nature (Hines, 2003). In connecting with animals, humans can experience and engage in most
primeval and instinctive forms of communication that transcend verbal language and constructed social norms (Hines, 2003). Additionally, the HAB both mirrors and provides aspects of positive human relationships like love and friendship. In the initial establishment of the nomenclature and ideology of the human-animal bond Boris Levinson contended that the HAB is a powerful antidote to the psychological and emotional woes of humans, and that in turning to the animal world a sense of unity, order, and meaning is restored to human lives (Hines, 2003).

Despite the intentions of an interdisciplinary approach to the research and development of theoretical applications of the HAB, leaders in the field of veterinary medicine were the most instrumental in garnering attention and funding to the subject (Hines, 2003). Indeed, it was in veterinary journals that articles acknowledging the importance of the human-animal bond first began to appear in abundance and a wide circulation. These articles and discussions on them in the veterinary lecture circuits (Catanzaro, 2001) emphasized commitment to animal relationships in the form of pet ownership and the inclusion of animals in the consideration of humans’ ethical and moral values.

Additionally, there is an early history of animal-assisted therapy in US military treatment facilities. US military use of animal-assisted therapy was first recorded in 1919 as a therapeutic intervention for psychiatric patients at St Elizabeth’s Hospital in Washington, DC (Chumley, 2012). Another early documented implementation of a HAB program was in the 1940s at Pawling Army Air Force Convalescent Center in Pawling NY where animals were integrated in the treatment of emotionally traumatized veterans (Chumley, 2012).
Social workers have shown increased professional interest in evaluating the multiple roles that the HAB can and does play in clinical work. Some of this rising interest in the HAB in clinical work can be attributed to observations of the relationships that people have with their pets, especially given that the majority of the people living in the US report having at least one pet (Walsh, 2009). Despite increasing professional interest, social work practitioners who include animals as part of their assessment or intervention processes are in the professional minority (Risley-Curtiss et al., 2012). Research conducted by Risley-Curtiss, et al., sought to determine what factors influence social workers in choosing to include animals in their clinical practice. This research also served to highlight the general lack of attention to animal-human relationships in social work education, which is one of the most salient reasons my study is relevant and needed.

Assessment, animal-assisted interventions, and treating clients for animal abuse or grief over the loss of an animal are the most prominent areas wherein clinical social workers consider animals in their work (Risley-Curtiss et al., 2012). The most significant factors found to influence clinicians’ inclusion of animals in these areas are: the familiarity with other social workers practicing as such, client population, and clinicians’ pet ownership and a caring involvement with animals outside of their professional life (Risley-Curtiss et al., 2012).

**Research on the Effects of HAB on Mental Health**

The majority of research I’ve found documenting the benefits of the HAB on mental health primarily examine this phenomenon within the context of the companion-animal or pet-ownership relationship. These studies include in their
purview a demonstration of the positive impact of pets on people coping with chronic physical illness. They also document the power that companion animals have to ameliorate serious mental disorders such as schizophrenia, anxiety and depression (Walsh, 2009).

The compelling nature of this evidence serves to emphasize the need for a greater body of research on the effects of the HAB on mental-health patients within the clinical setting. A longitudinal research study conducted over two decades in Germany (N=9723) and Australia (N=1246) exemplified the beneficial effects of the HAB to be found in pet-ownership (Walsh, 2009). The study found that people who have had long-term exposure to companion-animal relationships were the healthiest in terms of physiological and mental health measures. The group of those who had never owned a pet or no longer have one were found to be the least healthy in terms of the same physical and psychological measures. In these nationally representative surveys the pet relationship was found to be significant after controlling for numerous other specific variables associated with mental and physical health (Walsh, 2009).

The mental-health field has been remarkably slow to recognize the significance of human-animal bonds, given the body of research that exists on their healing power in a multitude of facets of health (Walsh, 2009). Of particular note for continuing research being done on the mental health benefits for owners of companion-animals, the application of attachment theory and self-psychology has been researched and found to be particularly applicable to such relationships. In notable studies, pets were found to be a consistent source of attachment security,
more secure on every measure compared to relationships with romantic partners (Walsh, 2009), and from a self-psychology perspective companion animals were found to provide, in a way that rivaled and even surpassed human-human relationships, important self-object needs such as mirroring, idealization, and twinship (Walsh, 2009).

Peacock, et al. conducted a study that assessed the relationship between attachment to companion animals and vulnerability to psychological distress (2012). The researchers found that the connection between human-companion animal bonds and mental health is complex in the way that past studies have yielded contradictory results. While I’ve described the results that show the benefits for humans of engaging in the HAB with companion animals, below are some of the negative effects that have been documented. The research that contraindicates that relationships with companion animals bolster mental health will be interesting to keep in mind as I study the effects of the HAB outside of a companion animal relationship. Studies looking at the point of relationship between human and their companion-animal from the perspective of their level of attachment to the animal rather than mere ownership have yielded interesting information. Revealing the possible negative effects of the HAB, studies have found that a strong attachment to a companion animal can lead to a host of deleterious effects on mental health. The strength of the attachment, these studies suggest, can lead to pet-owners prioritizing their relationship with their animals over their own well-being, and as a result are susceptible to severe distress when the bond is disrupted for reasons outside their control. These findings suggest that while there are many attachment
benefits to be derived from the HAB with companion-animals, overdependence in the relationship puts mental-health at risk as it can lead to enduring psychological distress (Peacock, et al., 2012). The factor of overdependence may be a danger for one of the very reasons that companion animals have also been found beneficial: They provide a social support for people that otherwise have very few. This means that for people who are otherwise lonely and isolated from other human beings, the HAB with a companion animal may be a double-edged sword. Indeed, in terms of providing social support, reducing psychosocial risk factors in general, and acting as a social lubricant and stimulator, companion animals have benefits for mental health that are confirmed in study after study (Peacock et al., 2012).

From a theoretical perspective, there are two theories that interpret or explain why the human-animal bond exists and plays such a significant role in the lives of humans; these are the biophilia hypothesis and the social support theory (Beck, 2003). The first, biophilia, posits that the human brain is hardwired from time immemorial to be interested in and pay attention to non-human animals. Hunting animals provided physical fitness and food, and observing them was crucial to locating sources of vegetable food and water (Beck, 2003). The second, social support theory, is based on the conclusion that social companionship in myriad forms is beneficial for the quality of life of humans. It posits that humans are naturally drawn to capitalize on relationships with animals as they instinctively seek to bolster the amount of positive social connections in their lives.

The biophilia theory has implications for expanding the examination of mental health benefits of companion animals to include research on the HAB in
broader and more varied contexts of humans within nature. For example, how humans might benefit from interacting with the natural environment in general, and through interactions with animals that include raising farm animals, bird watching, and hunting or fishing.

Similarly, such strong emphasis on the social support theory, especially its focus on companion animals, has obscured research literature suggesting that exposure to animals where there is no bond also improves health status (Beck, 2003). In the literature I’ve reviewed that is focused on the HAB in animal-assisted therapy, I’ve likewise encountered what seems to be a canine-bias in the studies conducted.

In the context of my study on whether the HAB increases levels of compassion in humans, this perspective has interesting implications as to how a general sense of connection to and regard for animals, may in itself be a fundamental source of the benefits brought about by the HAB. Without the need of a reciprocal, bonding-within-relationship experience, the suggestion may be that the mental health benefits humans glean from the existence of animals has much to do with a simple awareness and acknowledgement of their existence.

**HAB in Correctional facilities and its Implications for Child Therapy**

As prison-based animal programs (PAPs) have increased in the past 25 years (Currie, 2008), an in-depth look at the potential of the HAB in the prison setting to act as a rehabilitative agent of change for prisoners is merited. For those who no longer have access to many relationships, services, and meaningful activities that they did previous to incarceration, the HAB could be uniquely therapeutic and
especially welcomed. The use of PAPs provides a service to both animal and human, as these programs tend to involve the prisoners’ engagement in helping to rehabilitate these animals in some manner. Studies have indicated that prisoners benefit as they learn responsibility, patience, coping skills, and vocational skills (Currie, 2008). PAPs may involve a variety of animals such as dogs, other domesticated animals, farm animals, wild animals, and horses, and of 46 states that participated in a national survey, 36 reported having PAPs at 159 sites (Bachi, 2013). While empirical evidence is scarce, a substantial amount of anecdotal reports indicate that some benefits are lower recidivism rates, acquisition of marketable skills, increased self-esteem, trust and self-confidence (Bachi, 2013). However, studies have not given thorough examination to whether the positive results of these animal-assisted interventions are due to the specificities of the training program and how it’s run, the animal, its handler, or the factor of novelty (Currie, 2008). These findings add depth to my study as they illustrate the multifaceted breadth of the HAB’s therapeutic properties. In the case of PAPs, the process of incarcerated peoples caring for, nurturing, and rehabilitating cast aside animals provides a therapeutic opportunity that is uniquely suited to this specific population. It appears that in empathizing with and assigning value to lives that parallel their own, the shared aspects of marginalization and abandonment become a point of sympathy that lends a particular power to the HAB in PAPs interventions. In experiencing love towards an animal whose life mirrors one’s own, it makes sense that the animal might gain power as a symbol for the possibility of redemption and forgiveness. Directing compassion towards the parts of another
that represent what is most painful to reflect upon within one's self provides a process that is two-fold in its therapeutic potential. It allows for the experience of increased compassion towards the self, as well as the benefits that come from directing compassion towards others on the level of emotion and engagement in prosocial action. Curry’s research found that as prisoners took upon the responsibility of caring for and training rescue-dogs, they gained increased levels of responsibility and prosocial behaviors that extended beyond the PAPs intervention (2008).

Beirerl’s 2008 article explores how the HAB as depicted in literature can influence the psyche of the reader in ways that heightens the ability and tendency to be empathetic and compassionate towards both humans and animals. Beirerl contends that as the reader identifies psychologically with the fictional characters, the reader’s “sympathetic imagination” is nurtured and stimulated and the ability to “think ourselves into the being of another” is amplified (2008). This theory is strongly relevant to my study as it implies that simulating a state of empathy towards animals through activities in which an animal’s subjectivity is considered leads to greater levels of compassion. This is relevant to the utilization of the HAB within child therapy, as books and stories involving animals are often appealing to children. It also provides an alternative to animal-assisted interventions that utilize real animals, as some people or children may be wary of them, allergic, or a real animal is simply inaccessible.

Temple Grandin, an activist in the fields of autism/Asperger’s Syndrome awareness and animal rights, is outspoken about her belief, which she arrived at
through personal experience, that it is possible to learn empathy from contact with animals (Bone, 2013). For this reason, she advocates strongly that children be educated in school about the benefits of contact with animals (Bone, 2013). European investigators are in agreement with Temple’s convictions as they determined that animal contact favorably influences the development of communication skills in young children (Beck, 2003).

**Rehabilitative Nature of Increased Levels of Compassion and Altruism**

In seeking an answer to the question of whether compassion can be trained or cultivated, and if so, does it increase altruistic behavior, Davidson & Weng provide some ideas. They postulate that compassion can indeed be cultivated through training. They assert that the process that makes learned compassion possible has to do with the naturally occurring engagement of neural systems during the induced states of compassion that take place in the training. Davidson and Weng theorize that by intentionally engaging these neural systems during specific activities or processes that bring about a felt state of compassion, they become more pronounced and familiar to the brain. They state that repeated activation and increased use of these specific neural systems leads to greater capacity to understand others’ suffering, and effects long-term executive and emotional control (2013).

While their research was conducted in a medically rigorous fashion in terms of the brain imaging and method of studying neurological responses, this study does not take into account an appraisal of effects in groups of people with categorically different brain functioning, such as those on the autism spectrum, and those with
sensory impairment, complex PTSD, or various forms of chronic mental illness. Therefore, the model of brain-change posited is applicable only to an as-yet undefined group of people, presumably those considered neurotypical.

Considering the research that’s continuing to document how positive mental states and socioemotional dispositions are supportive to academic success and prosocial behavior, there is increasing value being placed on knowledge of how to facilitate such positive mental conditions (Davidson, et al., 2012). The findings show, through a variety of means, that compassion and prosocial behavior is like any other learned skill that can be cultivated through sustained and repetitive practice (Davidson, et al, 2012). Davidson and colleagues describe a model in which intentionally invoking or experiencing compassion towards self and others enhances positive behavioral outcomes. They posit that an increased sense of well-being brings with it an increased desire and willfulness to engage in prosocial behavior; that as an individual begins to feel more connected to a larger system of which they are a part, they are more inspired and inclined to contribute to it through selfless, altruistic actions.

The model illustrates that by engaging in behavior that mirrors desired inner states, these actions stimulate and perpetuate the inner benefits of mindfulness, harmony, and compassion such as emotion and attention regulation, empathy and the ability to consider and thoughtfully imagine another’s perspective (Davidson, et al., 2012). The last phrase refers to the ability to think about things from the perspective of another, referring back to learned compassion’s ability to not only help one function better in life but to experience and act from a sense of
interconnectedness with others. The inverse relationship proposed in this model, of a feedback loop wherein altruistic behavior triggers actual felt compassion which in turn increases the impulse to act altruistically, is a compelling idea in application to my research question about how the HAB influences levels of compassion and prosocial behavior. This model suggests that through participation in relationships with animals that are characterized by compassionate feelings and interactions, a positive compassion feedback loop may be instilled in the brain. One of the HAB’s potentials may be to provide the human with the experience of interconnectedness, which as Davidson et al. has shown, neurologically bolsters the brain’s ability and inclination to engage in compassionate, prosocial relationships.

Davidson and Kabat-Zinn further postulate that the neurological and corresponding social-emotional benefits derived from compassionate states and actions have the added potential to strengthen brain function and the immune system, with significantly increased levels of antibodies (2003). The implications of physical resiliency, a healthier, higher functioning brain provide all the more incentive for social workers to invest their work in compassion-fostering practices.

How to foster compassion? The literature has thus far shown it is not difficult, as the inward activity “thinking” about compassion and the outward practice of “acting” out compassion through altruistic action or through relationship, both foster a sense of well-being, peace, and harmony with the world as a being inextricably interconnected with all other beings. Compassion becomes the experiential link that makes this connection with all others possible, and makes the HAB a particularly compelling therapeutic tool to assess for how it may work to
increase levels of inner and outer compassion in those engaged with it. As obtaining and maintaining the compassion-fostering benefits of meditation rely on it being practiced not just once or thrice but repetitively, so it most likely is with practices involving the HAB. Utilized in a therapeutic context, it’s expectable that the HAB is best able to yield benefits associated with higher levels of compassion when it is incorporated into the therapy as an ongoing activity the client can become accustomed to over time through repetitive experience. With an increasing amount of time spent engaged in compassionate interactions with animals, clients may come to associate their positive experiences and affect during those activities with a generalized shift in attitude that is noticeably felt outside of the intervention. As such, the HAB as a tool to increase levels of compassion and prosocial behavior may necessitate that it be repeated and maintained as a practice, such as one might practice meditation for a certain amount of time each week, in order for clients to make progress in most fully embodying the beneficial results.

Davidson and McEwan (2012) contend that the most powerful influence on plastic changes in the brain are social influences. The circuitry that is engaged in and informs social and emotional behavior are most importantly shaped by experience and plays a role in how responses of either vulnerability or resiliency towards adversity are formed. Studies with both animals and humans suggest that intentional interventions designed to create prosocial behavior might lead to plasticity-related alterations in the brain (Davidson and McEwan, 2012). Repetitive interventions involving the HAB may be an appropriate variation of this therapeutic intention. Their article goes on to discuss that exercises which specifically focus on
developing emotions of compassions and kindness definitely increase positive affect while simultaneously decreasing negative feeling states (Davidson and McEwan, 2012). There are many reasons, which I’ve advanced in this literature review, that interventions involving the HAB may be utilized as one of these exercises effective in developing positive affect while decreasing the negative.

This sort of tangible evidence demonstrates why clinical social workers might find it beneficial to employ HAB interventions in order to explicitly facilitate ways the client can modulate the social influences they take in. By developing repetitive practices involving the HAB, the social worker may assist the client in becoming more compassionate and engaged in prosocial action over time.

**Impact of Compassion Towards Animals on Mental Health**

As previous studies referenced in this literature review illustrated, there is evidence that compassion can be learned and promotes a more adaptive response to stress, better physical health, and more prosocial behavior. Arnold’s 2003 study engages the question of what factors lead to humane attitudes toward animals by looking at themes in 30 children associated with “supernurturance” or a strongly empathetic and nurturing stance toward animals. The main finding was that early childhood exposure to engaging in kind, appreciating relationships and interactions with animals led to an established sense of empathy for them and concern for their welfare. These findings correlating gender, personality type, and previous experience with animals to present attitudes are of relevance to my study. They indicate possible influences for the way the clients of the clinicians I interview may
by experiencing the HAB, as the tendency or inclination to relate to animals is formed through the convergence of diverse factors.

Another interesting finding from these studies is that animal protection workers felt more human-directed empathy and more animal-directed empathy than general community members. This demonstrates the possibility that caring for animals in an active way correlates to greater empathy towards humans than a position of not actively caring about the welfare of animals. It emphasizes the need to explore in my study conversely whether the attitudes of human protection workers, or social workers, demonstrate more empathy in their attitudes towards non-human animals than the general community. In any case, in light of Furnham et al.’s study (2003) and the findings that a more empathetic personality in general is linked to empathy towards animals, it seems that a stance of caring towards beings in general will indicate how empathetic one is towards animals. This empathy is valuable in the context of my study in that it corresponds to the compassionate thoughts and behaviors directed towards self and others that are known to be so beneficial to physical, mental, and social-emotional health.
Chapter III

Methodology

The purpose of my study was to examine clinicians’ perspectives on whether the experience of compassion is impacted through the HAB. Drawing on their experience working with clients where the HAB was utilized, I sought to discover what effects they have experienced the HAB to have on their clients’ overall levels of compassion for self and others, as well as their general state of mental health and sense of well-being. After my review of the literature on the effects of the HAB on the social-emotional well-being and development of humans, I was most interested in the way the HAB may be utilized as an intervention designed to promote learned compassion. I proposed that evidence of the benefits of induced and learned compassion renders a closer look at whether interventions involving the HAB would be an appropriate addition to the category of therapeutic interventions which aim to increase levels of compassion and the corresponding increase in prosocial behavior.

In order to fully explore this new phenomenological territory, I created an interview guide containing semi-structured, open-ended questions to gather narrative data from study participants. During interviews, I recorded data by audio recording and note-taking.

Research Method and Design Selected:

My study was conducted with a qualitative approach. I interviewed 13 mental health experts who propose utilizing the HAB in some form as a therapeutic intervention, and posed to them a series of open-ended questions. My purpose in choosing a qualitative design is that I thought it would provide the most in-depth
and explicit insight into the way levels of compassion are related to interventions involving the HAB in the clinical setting than a quantitative method could glean. There is also little qualitative or quantitative data on this subject currently, which supports the use of a qualitative design.

Generalizability of the study was limited by sample size and the qualitative nature of the study. However, it is my hope that this project has highlighted important questions for future study on a larger scale. Since my research involves the subjective responses of social workers about their personal views on whether the HAB induces greater levels of compassion in their clients, these responses may be subject to change over time, which decreases the reliability. I intended for my study to have both internal and external validity; internal has been addressed as I avoided drawing false connections between the data and broader concepts. For instance, the data that suggests a positive correlation between increased levels of compassion in their clients and their experience of the HAB, does not serve as conclusive evidence that there are no other factors playing a role in influencing these compassion levels.

**Sample**

The inclusion criteria required participants to be clinical social workers currently practicing, and utilizing to some extent the HAB in their interventions through animal-assisted activities or bringing the subject of animals into their conversations for therapeutic purposes. My sample was gathered from online research on agencies that employ clinicians who utilize the HAB in their interventions. I then contacted a selected group of them, including a brief
description of my study, and asked if they would be interested and willing to participate. Every participant’s identity has been kept confidential and any quotations will be provided anonymously in the findings.

**Data Collection**

Individuals who met all selection criteria and agreed to participate in the study were emailed a consent form that further described the nature of the study, the risks and benefits of participation, and the federal regulations that would be met to protect their confidentiality. Once individuals signed and returned their consent forms to me, I telephoned them to schedule interviews.

I did over-the-phone, semi-structured interviews, approximately 45 minutes in length. Considering that there is a dearth of literature on the effects of the HAB on levels of compassion, interviewing was an appropriate data collection method for this study. The interviews were semi-structured so that I could ask certain questions to elicit information around themes, while keeping the questions open-ended enough so that respondents could discuss their own individual experiences, reactions, and responses to whatever extent they choose.

My interview guide began with a few questions that collect demographic data, specifically: professional degree, clinical experience, and history and development of their interest in the field of animal-assisted therapy. Although the sample was too small to examine demographic subgroup variation with any systematic confidence, I was curious to see if there are any trends among subgroups that might be pervasive enough to suggest for further study in the Results section. My questions were broken down into the following themes:
• feelings/thoughts regarding work with animal-assisted therapy and the effects of the HAB on the client (i.e. What are your thoughts on using animals as therapeutic tools? What drew you to this field? How do you understand the HAB as it develops between your client and the animal? How would you describe the qualities of HAB as you've observed it? What are some examples of how you utilize the HAB in therapy, and what are some examples of it being therapeutic? How would you describe its therapeutic value?)

• extent of training to assess and treat this population (i.e. Did you receive any special training before working with this population? If so, did you receive your training in graduate school or elsewhere? Please describe your training.)

• relationship between HAB and levels of compassion (i.e. could you describe the impact of the HAB on levels of compassion with your clients? If there is an impact, what did you attribute to this impact on compassion? How do you see this change in compassion manifesting in your clients’ behaviors and reports of experience? Do you think the HAB works particularly well with any other interventions and if so what are these?)

• do you see the HAB as fully utilized in therapy currently, or do you think there is room for expansion of HAB within the field of clinical social work? If yes or maybe, how do you think the HAB could be expanded within the field? How do you think the HAB will be used in the field of clinical social work in the future?

• how do you perceive the role of the clinician in fostering the HAB and what
aspects of the intervention do you specifically attempt to encourage?

I believe that information on these themes enabled me to answer the study question: How do clinicians utilizing the HAB in their clinical work experience it to impact their clients’ levels compassion and prosocial behavior?

Data Analysis

The results of the interview sequence were analyzed for predominant themes and ideas around clinicians’ associations between levels of compassion and the HAB in clinical work. In analysis of clinicians’ responses to this subject matter I sought to develop a deeper understanding of how effects of learned compassion correspond to the HAB, and how this possible relationship between compassion and the HAB is formulated and applied. This has hopefully lent itself to a greater general knowledge about the attitudes that clinicians hold in regards to the human-animal connection and its possibly myriad usages in therapy.

The study took place in interviews over the phone and the participants were aware that I was recording the interview for transcription. The data was recorded on an excel spreadsheet and kept on my computer anonymously and securely. My data collection plan may have had limitations in the sample size itself, and greater insight into the research question might be provided if it had been increased in number.

The qualitative analysis involved categorizing responses based on the role of the HAB on impacting levels of compassion and prosocial behavior. These were analyzed for commonality in more nuanced aspects of responses around clinical
theory and ideas about how the HAB might be worthy of greater study and inclusion within the field of social work.
Chapter IV

Findings

This research was conducted with the intention to reveal mental health clinicians’ perceptions and experiences of the impact of the HAB on their clients’ levels of compassion and prosocial behavior, as well as to contribute to the growing body of research on animal-assisted therapy. In this study, 13 participants were interviewed, and their responses constitute a body of qualitative data that helps to elucidate various elements of the HAB in terms of its effectiveness as a psychotherapeutic intervention and specifically as one assessed for its potential to amplify clients’ levels of compassion and prosocial behavior. These interviews reveal that participants identified a plethora of aspects of the HAB that create a strong and positive impact on their clients’ levels of compassion and prosocial behavior, and which make it a profoundly therapeutic intervention overall.

One hundred percent of participants said they’ve experienced the HAB in animal-assisted interventions to increase clients’ levels of compassion and prosocial behavior. All of the clinicians interviewed indicated the HAB to be the strongest cause of these particular outcomes. Responses were organized based on their correspondence to exact interview questions and highlight factors of the HAB that participants attributed having the greatest impact in their work with clients. A breakdown of prominent themes and illustrative quotes follow the tables.
Table 1

*What are your general thoughts on implementing the HAB in therapeutic interventions?*

1. Powerful catalyst for therapeutic process and alliance with human therapist
2. Helps establish trust with clients who have difficulty trusting
3. Calms clients’ anxiety levels, making it easier for them to experience therapeutic change
4. Attention needs to be paid to ethics of involving animal: need proper environment and client/animal fit
5. Comfort and preferences of both client and animal need to be taken into account
6. Animals’ sensitivity to clients’ emotions provides clients with direct but nonjudgmental feedback, an opportunity for insight into feeling states that may be hidden or repressed
7. Opportunity for client to practice reciprocity within relationship
8. Relationship formed on perception of unconditional love as well as modifying behaviors and regulating impulses to maintain conditions of relationship

Table 2

*How do you understand the HAB as it develops between your client and the animal?*

1. Facilitates an increase in empathy via experience of mutual empathy between client and animal
2. Client benefits from interactions with a non-human as animal is non-judgmental
3. Learning unconditional love, as well as the ways love is conditional upon respect and proper treatment
4. Animals’ sensitivity to clients’ emotions provides clients with direct but nonjudgmental feedback, an opportunity for insight into feeling states that may be hidden or repressed
5. Relationship formed on perception of unconditional love as well as modifying behaviors and regulating impulses to maintain conditions of relationship
Table 3

*How would you describe the qualities of the HAB as you've observed it?*

1. Facilitates an increase in empathy via experience of mutual empathy between client and animal
2. Grounding, stabilizing, and calming effect
3. Non-verbal communication
4. Relationship formed on perception of unconditional love as well as modifying behaviors to maintain conditions of relationship
5. Emotionally unrestricted relationship; cathartic and mood-lifting

Table 4

*What are some examples of how you utilize the HAB in therapy, and what are some examples of it being therapeutic?*

1. Work with the transference towards animal: client’s interpretation of animal’s moods and behaviors, and identification with past experiences/traumas and life story of animal
2. Development of behavior awareness and modification based on highlighting responses of animal towards client; e.g. therapist points out that when client speaks softly and clearly animal responds
3. Therapist highlights animal’s subjectivity to help client develop compassion and empathy towards others
Table 5

*How would you describe the therapeutic value of the HAB?*

1. Helps client open up and be receptive to therapeutic treatment
2. Interactions with animal a safe way to practice positive, prosocial interactions with humans
3. Grounding, stabilizing, and calming effect
4. Attention to welfare of animal promotes awareness and value of wellness, compassion, and prosocial tendencies
5. Facilitates an increase in empathy via experience of mutual empathy between client and animal
6. Nonverbal communication
7. Emotionally unrestricted relationship; cathartic and mood-lifting
8. Grounding, stabilizing, and calming effect

Table 6

*Have you observed the HAB to have an impact on your clients’ levels of compassion? If so, could you describe the impact and what you attribute it to?*

1. Increased mindfulness of subjectivity of others based on client’s perception of animal’s responses to them
2. Client’s ease in experiencing satisfying, enjoyable bond with animal opens them to feeling sensitive to subjectivity of others in general
Table 7

*How do you see this change in compassion manifesting in your clients’ behaviors and reports of experience?*

1. Increased awareness of other’s needs
2. Increased desire to share with others and be of service to others
3. Increased engagement in social interactions
4. Increased communication skills

Table 8

*Do you think the HAB works particularly well with any other interventions and if so what are these?*

1. Can be used in any standard or traditional psychotherapeutic treatment and incorporated into existing framework
2. Cognitive Behavioral Therapy (CBT) and trauma-focused CBT
3. Play therapy
4. Psychological education, i.e. talking about impact of trauma on animal as a way to help client make sense of and normalize their own experiences in enduring trauma-related symptoms
Table 9

Do you think that there’s a specific client population the HAB has the greatest impact on in terms of compassion levels and increased prosocial behavior? If so what is this population and what reasons do you attribute to this?

1. Has the potential to work with any and all populations
2. Is particularly effective with clients affected by autism
3. Mood issues, social issues, trauma, isolated
4. CBT work, veterans, skill building, at risk adolescents, women/domestic abuse, empowerment, anxiety and depression
5. Prison, hospice, geriatric

Table 10

From your experience, do you think there any diagnoses or clinical factors that affect the HAB's impact on clients, positively or negatively?

1. Depending on the way animal is introduced into the treatment, it can benefit clients with any and all diagnoses or clinical factors with the caveat:
2. If client doesn’t like animals and has minimal ability or motivation to work through these feelings
3. Clients with antisocial, narcissistic, or borderline personality disorder, or clients with conduct disorder, may be ineligible to be left alone with animal for safety of animal, but if monitored client can still benefit from interventions involving the HAB
Table 11

*How do you perceive the role of the clinician in fostering the HAB?*

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<table>
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<tbody>
<tr>
<td>1.</td>
<td>Being attentive to aspects clients might find most useful depending on their level of development and clinical needs</td>
</tr>
<tr>
<td>2.</td>
<td>Working in partnership with the animal to utilize their feedback and behaviors to promote client growth</td>
</tr>
<tr>
<td>3.</td>
<td>Responsible for facilitating positive interactions between client and animal</td>
</tr>
</tbody>
</table>

Table 12

*What aspects of the intervention (HAB) do you specifically attempt to encourage?*

<p>| | |</p>
<table>
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<tbody>
<tr>
<td>1.</td>
<td>Trusting bond and comfort with the animal</td>
</tr>
<tr>
<td>2.</td>
<td>Client’s sense of empowerment and increased confidence as they successfully build a healthy relationship with the animal based on mutuality and receptivity to each other’s independent needs and subjectivity</td>
</tr>
<tr>
<td>3.</td>
<td>Nondirective; free-floating attention and “therapist’s intuition” used to make decisions about when to ask a question that leads in a certain direction</td>
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Table 13

Do you think there is room for expansion of the HAB within the field of clinical social work? If yes or maybe, how do you think the HAB could be expanded within the field?

1. Greater body of empirical, evidence-based research
2. Increased presence in academia, i.e. norm established for graduate schools of social work to include training and education around animal-assisted therapy, animal-human relationships, the importance of animal welfare and examining human-animal connections
3. General increased awareness of how to go about ethically and effectively including animals into therapeutic work, i.e. training programs, which organizations to reach out to, education about the difference between service animals and therapy animals

Table 14

How do you think the HAB may come to be used in the field of clinical social work in the future?

1. Greater body of empirical, evidence-based research
2. Increased presence in academia, i.e. norm established for graduate schools of social work to include training and education around animal-assisted therapy, animal-human relationships, the importance of animal welfare and examining human-animal connections
3. General increased awareness of how to go about ethically and effectively including animals into therapeutic work, i.e. training programs, which organizations to reach out to, education about the difference between service animals and therapy animals
The content of the above tables depicts a strong thematic overlap from question to question. Several of the questions being quite broad and similar to one another lead participants to expound in greater depth on their initial thoughts, conceptualizations, impressions, and theories about the way the HAB was operating in their work. From these findings six main themes emerged and are elaborated on below with illustrative quotes:

**Empathy**

Empathy as a quality of the HAB emerged as one of the most important in terms of its therapeutic value in animal-assisted interventions. The modality or the means by which empathy operates within the HAB was posited in various forms and contexts. Thirty-eight percent of participants used the word *nurturance* to describe how a client’s development of a sense of warmth, caring and impulse of caretaking toward the animal creates healthy attitude changes. “Because nurturance is so tied to empathy and empathy is such an important aspect of EQ [emotional intelligence], I think nurturance and empathic understanding [within the HAB] improves relational capabilities and can be transferred.”

Sixty-two percent of participants made reference to the feature of empathic connection within the HAB to lead to a greater ability to practice mindfulness techniques and to check in with inner states, creating improved awareness of connection between thoughts and behavior patterns. “Empathy makes it easier for clients with anxiety to sit with their hand on the animal and work on mirroring their breathing pattern and foster slower, deeper breathing...leads to clients developing coping strategies to self-calm.” Another participant described a client’s experience in...
which her lack of attention to the present moment resulted in a careless action that upset the dog in an animal-assisted intervention. The client reported that observing the dog’s reaction to her led to an increased awareness of how her tendency to have scattered thoughts can impact others, and setting the intention to improve her ability to focus and experience a more centered mental existence, not just for herself but for others in relation to her. This is an example of how the internal state of increased compassion can lead to an increased interest in the feelings of others and a corresponding shift towards more prosocial behavior, representing the external fruition of an inward shift. It is one participant’s experience that “those who have closer relationships with animals do show greater amounts of empathy for others, and also have a greater sense of fairness; they are much more in tune with things that occur to other people they interact with and how fair those things are—how someone acts towards someone else or whether or not someone has benefits that someone else has access to, for example.” This assertion implies the HAB’s potential for increasing empathic awareness may also function as an agent in strengthening one’s inclination to engage with matters of social justice and expand a concern for one’s own welfare to include that of others and an interest in the ethics of societal structures.

**Non-Verbal Communication**

Every participant attributed the aspect of non-verbal communication in the HAB between their client and the animal in animal-assisted therapy to positive effects on their client’s treatment. Participants noted that engaging in nonverbal communication with an animal creates a feeling of safety for their clients as signals
of security, trust, and caring are exchanged. Forty-six percent of participants indicated that as most therapeutic models with human therapists rely so heavily on words and verbal dialogue, animals bring a multi-dimensional depth to the therapeutic relationship between client and animal that is made possible only by the nonverbal communication abilities specific to non-human animals, making them an invaluable co-therapist. “In many cases therapeutic relationship models don’t work as we might want them to work, and people have become lazy communicators when it comes to connection in relationship; we rely heavily on words, and spoken language and written language, and animals use everything but those. So many of the things that allow the client to feel cared for and in turn being able to care for others are associated with things that are nonverbal.”

Participants reported that animals’ tendency to respond with body language to clients’ affect can also be reassuring and soothing for the client. For example, “Dogs pick up on stressors in children and move closer to them when they start talking rapidly to calm them down; the child will pet them and calm by tactile experience.”

Another benefit of navigating a nonverbal relationship with animals is that it can “give greater ability to read body language, facial expression, nonverbal indicators of feelings and well-being, and being more attuned to those things in others.” Clients may develop an increased competency of reading and communicating with body language that can carry over into their relationship with other humans, resulting in a greater ability to connect with others, thereby mitigating social isolation. One participant describes the benefits of clients accruing a non-verbal, more multi-dimensional skill set when it comes to communication: “I think what we’re really
seeing is a broad set of tools for relationship, for secure relationship, and human beings are losing those capabilities; which doesn’t mean they’re not important—just the opposite; as we start to lose recognition of those necessities we have less and less satisfactory relationships with one another; so many people can be connected and still feel lonely for example or isolated right in the middle of work, play, or school environment—those sorts of things—so for the most part, it’s a reminder of these added dimensions of relationship and social support.”

**Relationship as Agent in Behavior-Modification**

The word “relationship” was used a total of 86 times throughout all 13 interviews. As the term “human-animal bond” or “the HAB” for short, has been used to refer to the connection formed between the animal and the client, it’s interesting to note that the word “bond” was used only 23 times throughout the interviews, excluding the several times it was used within the term “human-animal bond”. In two interviews the word bond was completely absent, whereas the word relationship was used by participants in every interview. One remark from a participant highlighted the way the words “bond” and “relationship” may easily be conflated but actually can be used to convey much different meanings: “It’s interesting you keep referring to the human-animal bond, because it encourages me to think about the bond; I usually think in terms of “relationships” which are of a wide variety—we can love or hate within one, and “bond” is helping me stretch what I think... the term bond implies something close and emotional; it’s tight, and it’s sticky.”

This participant’s conceptualization about the difference of meaning inherent between these words highlights the major theme that emerged in participant’s
comments regarding the relationship between the animal and client in animal-assisted therapy: it is not unconditional; while the term “bond” may imply enmeshment, “relationship” connotes a conscious and dynamic participation between individuals, each with their own needs. One participant emphasizes an aspect of therapeutic value a relationship with an animal has compared to relationships between humans: “I think it’s kind of pure; there’s not undercurrents usually, and if you again are really treating them consistently well, they’re always happy to see you, and for the most part available...the relationship doesn’t have the same complexity that human relationships have that can make the relationship less pure.”

Participants noted that animal-human relationships are often touted for humans benefitting from animals’ expression of unconditional love, and while they agreed that animals don’t judge humans with the same set of biases or criteria as other humans do, their love is conditional upon proper treatment. “A lot of people talk about the unconditional love that pets give; I’m not sure that’s the best way to phrase things as it’s not completely unconditional. If you treat them abusively, or others in their presence, the relationship suffers. They don’t care what you look like or how much you make, so in that sense there’s unconditional positive regard.”

Participants regard this feature of conditionality to be of great therapeutic value within the treatment as it provides the client with a safe way to practice healthy interactions in a relationship that involve give-and-take and an awareness of how their actions may impact another. In this way, the conditions brought to the HAB by the animal can serve as a feature of interventions around behavior
modification. As highlighted in participants’ responses, a client’s level of interest and sense of connection to the animal can be a significant component in their process of modifying behaviors: “One client really loves him [the therapy animal], and has a tendency to be quite bossy with him; but through his responses to her, she has learned what’s appropriate and not appropriate, and I know she’s carried this over into her other relationships.” Another participant further explained the way a client’s investment in maintaining the HAB can influence the behavioral choices they make: “The animal’s reaction to them can be very motivating; if they have an interest in the animal, they learn how to have better control of their own behavior because the consequence is if they don’t, the animal won’t want to be around them.”

One participant made the link between increased compassion leading to less selfish, more prosocial behavior through the process of modifying their behavior in response to the animal's needs: “Once they start thinking about what the animal wants before their own needs—that’s a key factor; when client stopped bombarding the animal after realizing it was bothering her [the animal], that was compassion”

**Working With Clients’ Projection and Transference**

One of the most prominent themes to emerge in the responses of participants was that of the HAB as a vehicle for working with clients’ projections and transferential feelings towards the animal. “A lot of times clients will project their feelings onto the animal, like, “oh, [animal] feels sad today...[animal] is angry that I didn’t give her a treat!” and in that interaction you’re allowed to see outside your self.”
Sometimes initiated by the therapist asking questions that encourage the client to identify with the animal and sometimes occurring naturally, the HAB’s potential to help clients go deeper into psychodynamic work is evidenced.

“I often ask, what do you think [animal] is thinking or feeling? which often gets defended clients to think and speak about what they’re thinking or feeling. Foster kids could say what they thought of [animal’s] story of being rescued, which helps them access more of their true feelings about their own story and past trauma, I think.”

One participant explained how identifying with the animal’s response to upsetting things can help therapist with psycho-educational interventions:

“I also think it [the HAB] is a good intervention for kids with trauma and loss because a lot of animal behaviors help normalize human responses to trauma, like fight and flight and freeze and all those things. If the feelings clients are having are normalized they can begin to have compassion towards themselves and others when it’s kind of like, ‘oh, that happens!’”

**The HAB’S Impact on Clinician’s Delivery of Treatment**

Clinicians acknowledged various aspects of what they perceive to be their role in fostering the HAB between client and animal in animal-assisted therapy, which included modeling a healthy relationship between themselves and the animal: “Modeling is one of the best things a clinician can do; modeling what appropriate human-animal relationship looks like.” Another important feature of their role is acting as an interpreter or guide for helping the client to process and understand what they’re experiencing in their interactions with the animal: “I attribute the impact on compassion to basically the animal, client, and clinician; a
client wouldn’t be able to recognize what was going on without clinician and without a therapy dog that could do its own thing; I allow [animal] to remove himself; if I required him to do everything a client asks they wouldn’t be able to help the client learn.” This quote reflects both the role of guide and interpreter as well as modeling a relationship that is healthy in that the animal has agency and their welfare considered. Further commentary on this theme indicates how the therapist may assist the client in recognizing and assimilating benefits that would be useful for them to derive from the HAB: “Innately spending time with animal in therapy or just at home, can help with compassion, but if you’re already struggling with social skills or compassion you need someone to help you recognize what it even is.” This role illustrates the potential for the therapist to consciously maximize the impact of the HAB on clients’ levels of compassion and prosocial behavior.

A common theme in participants’ responses was also their experience of the animal’s and the HAB’s ability to amplify effectiveness of the treatment in ways that are unique and cannot be replicated in human-human therapy relationships: “[The HAB] provides things people can’t get from each other…for people with strained relationships, it allows for comfort and touch that a therapist can’t give to a client; to hug and have the animal respond positively is immeasurable in terms of what they’re getting out.” This quote also touches on the way the HAB can be confidence-building and comfort-inducing for clients that are decompensated or have a poverty of affectionate relationships in their life, or relationships in general.

Another salient theme was that of the animal’s ability to quicken the development of trust between client and human therapist: “The ability to have an
animal in session when appropriate can bring out a lot of things in a client that a therapist can’t...you can get a lot farther with resistant clients; [the HAB] makes it more enjoyable and raises levels of trust; and when you look at the research it’s all about the trust client has with practitioner; [the animal] makes that stronger, which raises outcomes.” One participant gave a specific example of the HAB’s valuable potential for heightening a client’s levels of trust so they might engage with the therapy experience: “A client I work with dealing with abandonment issues, and a lot of anger and frustration; if I don’t bring [animal] he won’t open up at all. If [animal] is there its an immediate hug, a very gentle hug and gentle petting...it’s a really strong bond and helps them to trust. Bringing an animal in helps knock down some of those walls.”

Another participant describes the nature of the therapeutic partnership between clinician and animal: “It depends on the situation; sometimes I’m supporting and the animal is the main focus; sometimes I’m the focus and facilitating, and the animal is the supporting character...it generally shifts from me doing observations and letting things naturally unfold, and then my role becomes more important; we both have equal purpose.”

Animal Welfare

A concern for animal welfare was a topic mentioned by 7 of the participants, both in terms of the specific animal involved in an animal-assisted intervention and for animals in general as they are increasingly involved in various forms of therapy. Posed by one participant as “a new relationship with animals”, all participants having mentioned animal welfare highlighted the role of clinician as ethicist in the
facilitation of animal-assisted interventions, emphasizing the necessity of prioritizing the animal’s basic needs and comfort levels in their interactions with clients. Another dimension of ethics when animals are included in therapy with humans is the way that it impacts the client’s treatment and therapeutic growth, as extolled by one participant: “I think the other part of [attention to the animal’s welfare] is if we’re experiencing well-being in the presence of another individual in that relationship also experiencing well-being as a feature of that interaction, then it genuinely resonates as a useful behavior, or useful set of thoughts or emotions to reproduce and do it again; and so you start to see someone who begins the process of developing new social mechanisms and strategies for themselves, and it’s the basis for recovery in many cases of all different kinds of human health challenges.”

Thirty-one percent of participants emphasized the clinical relevance of gathering information about client’s relationships with animals outside of therapy. Doing so allows the therapist to gain insight into meaningful relationships in the client’s life that might otherwise be overlooked due to the fact it’s with a non-human, and also helps the clinician assess indicators of the client’s mental health that are related to the way they tend to treat animals. “It is of paramount importance to gain this information. One of the things that needs to happen in clinical work is clinicians need to be more cognizant of the importance of these bonds; for those that share their lives with animals it’s a significant relationship for them. I have yet to meet someone not part of the choir [of clinicians that recognize the importance of such lines of inquiry] who routinely asks about pets at intake, and we are missing an important part when we fail to ask. Clients' mindfulness of the welfare of the
animals they come in contact with can be a basic indicator of either maturity and ability to relate with the subjectivity of others, or a potentially pathological deficiency of compassion/empathy: “Depending on the situation it can be a red flag; if someone mentions having an inordinate number of animals at the same time or sequentially there could be an abuse or hoarding situation...there’s so much we can get by investigating at intake that informs the planning of treatment.”

Four participants identified social ecological theory as having usefulness for the field of social work as it moves forward and forms practices that consider and adapt to humans’ positionality in relation to the environment and other species. One participant frames the modern predicament faced by social work as such: “Social-ecological theory backs what I think is an important argument for social workers to be cognizant of the entire environment. What happens when there is a display of callousness and uncaring towards animals and the environment...an important sense of compassion and interconnectedness is lost where it could otherwise be experienced...can repairing and building healthy relationships with animals work to restore this? Yes, I think it’s an imperative.”

Further incentivizing concern for animal welfare in therapeutic interventions is another participant’s postulation that neglecting this aspect of the HAB in animal-assisted therapy may be detrimental for the client’s growth: “If we ignore the animal welfare side of this, somebody could in some ways be not encouraged to take in information on the well-being of the animal and it becomes much more questionable what’s occurred: whether we are teaching someone to be not observant or callous in
some form or fashion; so I believe the relationship with the animal and the animal’s well-being is a necessary vehicle for the transfer of therapeutic change.”

This quote speaks to the way a clinician’s general concern for animal welfare demonstrates and fosters an empathy which can be transformative for the client as they experience and develop their relationship with a specific animal. It also states that disregarding animal welfare can have counter-therapeutic results. This ties into a participant’s conceptualization of humans’ responses to being exposed to the collective violence towards animals and ecological systems that is normalized and mostly accepted in our society: “If you look at the impact of cruelty, even what we would consider low-level animal cruelty, or even cruelty to other people-- there’s even now evidence that could include other living things--so if you’re living next to or regularly observing, which all of us are, an attack, a full-blown hostile or aggressive attack on the environment, you will have an emotional and psychological impact from that experience.” This participant goes on to describe the emotional and psychological response people may be collectively experiencing that indicates a symptomology of collective trauma: “And then, because it often is chronic and constant and in many cases we feel helpless to do anything about it, we learn to minimize it, we learn to become unemotional about it or to even accept it as normative when in fact it is representative of a form of violence and it’s an attack on our ecological system services.” Proceeding, this participant postulates that from a person-in-environment perspective, those system services are part of our biological makeup—thus, the inherent cruelty of the larger structures we live amidst has an
impact on our emotions and psyche similar to that deriving from exposure to more direct and isolated forms of cruelty.

The emphasis placed by participants on the mental health benefits of restoring an empathic response to maltreatment of animals and the environment ties to findings in the section of this chapter entitled Empathy – that the HAB can strengthen the inclination to combat social injustice, increase awareness from individual welfare alone to a larger, more societal purview, and generate interest in the ethics of social structures. These findings indicate that the HAB has the potential to address the sense of helplessness, loss of emotionality, and resignation that can be features of the emotional and psychological response to the collective forms of violence in which our society is embedded.

A participant’s reference to the brain’s “addiction to relationship” harkens to the literature on the way experiences of compassion and engagement in prosocial interactions become a habitually used neural pathway and posits that the HAB can facilitate this adaption of healthy, prosocial relationships: "If you look through the lens of what we know about exposure to cruelty, that’s another way to explain I think the other end of the telescope—which is to start to study what it is that makes safe and supportive and healthy relationship beneficial to us; and what we now know is that the brain is designed to be addicted to relationship, that we seek it out as one of the primary necessities for healthy functioning, so when we’re in a relationship with another human or animal we can see is beneficial to another individual and they enjoy it as well, our brain registers that.”
Offering a direction for social workers to take in their therapeutic approach with human-animal relationships that works towards systemic change, a participant states: “I would argue that we’re not very good pet-owners or animal caretakers or advocates for even the wildlife that surround us, so that’s why I believe that the potential here—if people understand that the therapeutic transfer requires that we have a more responsible and comprehensive relationship with animals—is that we could shift people’s attitudes in thinking about animals; so shelters for example, or animal welfare initiatives all become opportunities to fix ourselves and our society.”

Further endorsing an approach wherein social workers seek to effect change and solutions at a macro level, a participant proffers: “I’m a social worker by training so I think about these systems, models, and small systems through the lens of individual change process, but also at the levels of community or family change, or even global change. I really believe that’s the way this field should approach this; it could not only be helpful to us all involved but is a necessity—that’s the way it really works and so I also think it’s empirically supportable.”
Chapter V

Discussion

With this study, I explored the perspectives of seasoned mental health clinicians working with animal-assisted interventions and the HAB across the United States. The research specifically explored the question: How do mental health clinicians working with the HAB experience it to impact their clients’ levels of compassion and prosocial behavior?

Summary of Findings

As evidenced in the previous chapter, the participants described the HAB to have a variety of therapeutic potentials and effects for their clients. Participants attributed this impact to nuanced and variable factors related to the HAB. Aside from the overall unanimous response that animals and the development of the HAB within treatment can be a powerful therapeutic element, the principal findings of the research were that:

1. The evolution of the HAB from its initial stages of first exposure of the client to animal, evokes a response from the client that seems more instinct-driven, spontaneous, and feeling-based than intellectual or prefrontal.

2. The HAB tends to be able to shift even the most stubbornly dysphoric and/or flat affects and make the client feel at ease, both invaluable components for optimizing progress in treatment.

3. Experience of empathy as elicited by the HAB is one major catalyst for increased levels of compassion and the following external manifestation of increased prosocial behavior.
4. Experiencing compassion and empathy towards the animal within the HAB fosters within the client an increased sensitivity and understanding towards subjectivity of animal(s) and other humans.

5. Currently, there is a dearth of research on the HAB and animal-assisted interventions. Indeed, the relative absence of clinical mental health education and main-stream clinical interest in the subject grows increasingly conspicuous as the field of animal-assisted therapy continues to expand in reputation, virtually bereft of dissent.

**Interpretation of Findings**

In the experience of the clinicians I interviewed, the HAB was viewed as a transformative element in the treatment of their clients. In examining the anecdotal evidence provided by these interviewees I found that clinicians reported a pattern of clients having experienced symptom relief while engaged in the HAB intervention, such as a lifting of mood, decreased symptoms of anxiety, and increased ability to regulate affect. Regarding how participants described the therapeutic value of the HAB, clinicians drew from their observations of their clients’ relationships with animals in animal-assisted therapy in which the client was touched or changed by the relationship. The most transformative quality of that relationship identified was the characteristic of mutually compassionate relating. Many clinicians highlighted nonverbal communication as a strong component to this way of relating, as a great deal of essential therapeutic value arises from the experience of understanding one another without need for words.
Participants’ responses invited comparison of the HAB in treatment to the therapeutic alliance that forms between human therapist and client; characterized by attachment in the transference, ego support, and emotional validation. Thinking of the literature I’ve reviewed which suggests the HAB can be detrimental for people as they can grow overly dependent on the emotional support they’re deriving from the relationship (Walsh, 2009), participants indicated the HAB by and large serves to foster the ability to form emotional and relational connections in general, making it easier to have balanced and less enmeshed relationships with others. Describing experiences of the HAB with clients, clinicians conversely reported that although temporary, a positive experience with the HAB provides clients with relational skills they are able to transfer to their ongoing human relationships in their personal lives. The clinicians interviewed suggest that this impact on client relationships develops through such interconnected factors as the HAB’S impact on the clinician’s delivery of treatment, use of the HAB/relationship as agent in behavioral modification, working with the client’s projections and transference, empathy for the animal and others, use of nonverbal communication, and a focus on animal welfare.

Participants’ responses in this study strongly suggest that the process of becoming attuned to animals’ feeling states and developing an intersubjective space navigated through compassionate communication can bring a plethora of mental health benefits. These findings have implications for the way clinical social work as a field approaches the broad impact of human-animal relationships on the individual’s brain, nervous system, cognitive functions, and psyche, as well as larger systems of interaction.
The evidence in the literature concurs with the findings of this study that the HAB can act as a social lubricant as well as provide a comfortable way for people to practice relating with others--increasing social skills without facing the perceived risks of judgment that come with human-human interactions. Furthermore, the results of this study support evidence in the literature that the process of relating with others engenders a more compassionate and prosocial way of being over time, supporting the efficacy of the HAB as an intervention for those feeling isolated from social relationships or displaying difficulty with relationships in general. Given the findings of this study, the HAB may also be a powerful intervention to address mental health factors that may be contributing to these relational difficulties such as anxiety, depression, low self-esteem, confidence issues, attention deficits, or difficulties reading nonverbal cues.

Along these lines, an effect of the HAB as noted by one participant was that it led clients to be more mindful and aware not only of their own internal state, but increased their awareness of the systems they were operating within, inspiring them to engage in deeper critical thinking about the ethicality and advantages of these larger structures. The findings call to attention a need to examine the HAB in a broader social context, both in terms of its potential to invigorate people to join social causes and bring more awareness to marginalized groups, as well as its potential to shift perspectives on the sanctioned commodification and oppression of animals. Addressing the latter point, the theme of animal welfare was a prominent finding of this study, encompassing participants’ perspectives of it as a necessary element to be considered as a feature of the HAB for purely ethical reasons, and also
for the impact such considerations can have on the client’s mental health and their progress in treatment. As documented in the responses of the interviewed clinicians, the HAB is strongly recommended for both the clinical benefits discussed in this paper as well as in the broadening of socio-ecological perspectives. Clinicians who participated in this study gave responses that suggests that use of the HAB in therapy has facilitated increases in both compassion and prosocial behavior with the clients with whom they have worked.”

**Limitations and Areas for Future Research**

The findings of this study have implications for the HAB to be more commonly utilized as a therapeutic intervention, and considered as an area for expansion in the future of social work education and research. However, it is important to acknowledge inherent limitations of the study that prevent some conclusions from being fully generalized. Small sample size is a limiting condition; 13 clinicians participated, and were hand-selected from widely accessible distribution, perhaps limiting participants by scope of practice.

The professionals interviewed in this paper employed a range of animals primarily comprising canine, equine, and some farm animal categories. These animals are commonly used in HAB cases; however, animals falling outside of these categories may well provide results new to HAB documentation and research. This limitation is, in a way, tied to that of small sample size but emphasizes the specific practices of each participant.

The age ranges of involved clients must also be considered. Participants dealt with children, adolescents, and adults, but the paper does not specifically
differentiate between these groups, instead analyzing results in a homogenous fashion. Studying the HAB as a function of age could provide additional information as to emotional and mental development and maintenance.

The study deals with general mental well-being but does not delve into highly specific disorders, either for children or adults. Thus, the results of the study cannot be generalized to specific medical conditions; the HAB cannot necessarily be said to exist as a solution to individual mental illnesses. This is an area with strong potential for future research.

Another associated corollary for future research is the opposing viewpoint – that of the clients themselves. The provider or overseer may not be able to best describe the impact of the HAB on the client. Thus, the perspectives of the clients could be explored in order to augment the results of this study, which focuses on the perspectives of clinicians only.

Relative to other therapeutic methods, many HAB techniques can still be said to be in their infancy. Until a technique is utilized for long periods of time on a given subset of clients, it is difficult to generalize short-term results to long term findings. This can currently be classified as a limitation of both the paper as well as HAB therapy at large. As therapists continue to use the HAB in this decade and into the next, long-term effects of the HAB as therapy – following children into adolescence, tracking the response to treatment of adults with prolonged mental instability – becomes both a viable and essential topic for additional future research.
Implications for Social Work Practice

The findings of this study may be seen as an invitation to mental health clinicians, policy makers, and scholars in the mental health field to engage and participate more in discussions about the therapeutic potential of incorporating animals and the HAB into clinical work. The exploration of use of the HAB as therapeutic intervention is at a relatively preliminary stage, and there is much research remaining to be conducted in a variety of areas. One hundred percent of participating clinicians implicated current methods and practices for their inherent anthropocentric biases. This finding suggests the position of the HAB within the current status quo of social work practices and ideologies as under-recognized, under-explored, and not yet fully appreciated.

Conclusion

As the field of Human-Animal Bond therapy continues to grow, its utility in therapeutic practice becomes increasingly clear and well-documented. One hundred percent of the clinicians agreed that the HAB needs to be an essential component of graduate education in social work and associated fields of mental health practice. In the field, the HAB has been reported to be a powerful, invaluable tool, frequently irreplaceable by human therapists for the specific situations it is often used to tackle.

Importantly, the HAB may be a critical facilitator in the process of learned compassion that currently is not fully realized in the field of clinical social work. The fields of animal-assisted therapy and learned compassion, which also encompass practices of mindfulness, are congruent with research showing strong
links between compassion and increased pro-social behavior and mental and emotional well-being. The reports of the participants in this study suggest that the HAB has a significant impact on client experiences of compassion and prosocial behavior that should be further explored by clinical social workers and researchers in the field of social work.
References


Appendix A
Approval Letter

SMITH COLLEGE

December 19, 2013

Pear Wilson

Dear Pear,

You did a very nice job on your revisions. Your project is now approved by the Human Subjects Review Committee.

Please note the following requirements:

Consent Forms: All subjects should be given a copy of the consent form.

Maintaining Data: You must retain all data and other documents for at least three (3) years past completion of the research activity.

In addition, these requirements may also be applicable:

Amendments: If you wish to change any aspect of the study (such as design, procedures, consent forms or subject population), please submit these changes to the Committee.

Renewal: You are required to apply for renewal of approval every year for as long as the study is active.

Completion: You are required to notify the Chair of the Human Subjects Review Committee when your study is completed (data collection finished). This requirement is met by completion of the thesis project during the Third Summer.

Congratulations and our best wishes on your interesting study.

Sincerely,

[Signature]
Elaine Kersten, Ed.D.
Co-Chair, Human Subjects Review Committee

CC: Beverly Simmons, Research Advisor
Appendix B

Recruitment Letter

Dear Social Work Clinician,

My name is Pear Wilson. I am a Masters in Social Work candidate at Smith College School for Social Work in Northampton, Massachusetts. I am emailing you because your clinical social work experience utilizing the human-animal bond in your therapeutic interventions might greatly add to the knowledge base within social work.

Research is actively shaping the practice environment. It is imperative that the voices of clinical social workers be included in this research, in order to learn how the changing clinical environment is impacting practice for clinicians and their clients.

I would like to invite you to participate in my study, which is an approximately 30-45 minute interview over the phone or over Skype (your preference). During this interview I will ask open-ended questions about your opinions of and experiences with the human-animal bond in clinical interventions, specifically how you’ve experienced it to impact your clients’ levels of compassion and pro-social behavior. The data from the survey will be used in my masters’ thesis and may later be used in additional publications and presentations. You may experience our discussion as interesting or informative and your responses could benefit social work clients, practitioners, educators and researchers.

You are eligible to participate in my research if you have completed a Master of Social Work degree, hold an active license to practice clinical social work in a U.S. state and currently practice psychotherapy with clients in the U.S. in which you utilize the human-animal bond within your clinical interventions to some extent. If you are not eligible, please consider passing this email along to colleagues who are eligible.

Participating in this study is quite easy. If you respond that you are willing to set aside the time for our interview, we can find a time that fits both of our schedules, and after scheduling a date and time I will email you an informed consent form with all the pertinent detailed information of my study and your role in it to look over and send back to me.

If you have any questions about my research or the nature of participation, please feel free to contact me by email at xxxxx or phone at xxxxxx.

Thank you for your time and interest in my research topic.

Sincerely,

Pear M. Wilson

MSW Candidate, Smith College School for Social Work
Appendix C

Interview Form

1. What are your general thoughts on implementing the HAB in therapeutic interventions?
2. What drew you to the field of animal-assisted therapy?
3. How do you understand the HAB as it develops between your client and the animal?
4. How would you describe the qualities of the HAB as you’ve observed it?
5. What are some examples of how you utilize the HAB in therapy, and what are some examples of it being therapeutic?
6. How would you describe the therapeutic value of the HAB?
7. Have you received any special training before incorporating the HAB into your work? If so, did you receive your training in graduate school or elsewhere? Please describe your training.
8. Have you observed the HAB to have an impact on your clients’ levels of compassion? If so, could you describe the impact and what you attribute it to?
9. How do you see this change in compassion manifesting in your clients’ behaviors?
10. How do you see this change in compassion manifesting in your clients’ reports of experience?
11. Do you think the HAB works particularly well with any other interventions and if so what are these?
12. Do you think that there’s a specific client population the HAB has the greatest impact on in terms of compassion levels and increased prosocial behavior? If so what is this population and what reasons do you attribute to this?
13. From your experience, do you think there any diagnoses that affect the HAB’s impact on clients, positively or negatively? For example, the effect of the HAB in treatment of clients with depression dx or schizoaffective d/o dx, or BPD.
14. From your experience, do you think there are any particular clinical factors that affect how the HAB impacts clients, positively or negatively? For example, the
effect of the HAB in treatment of clients with a pronounced attachment style such as insecure, avoidant, or disorganized; or clients with narcissistic personality traits.

15. How do you perceive the role of the clinician in fostering the HAB?

16. What aspects of the intervention (HAB) do you specifically attempt to encourage?

17. Do you think there is room for expansion of the HAB within the field of clinical social work?

18. If yes or maybe, how do you think the HAB could be expanded within the field?

19. How do you think the HAB may come to be used in the field of clinical social work in the future?
Appendix D
Informed Consent Form

Consent to Participate in a Research Study
Smith College School for Social Work • Northampton, MA

Title of Study:

Investigator(s):
Pear Wilson, Smith College MSW candidate

Introduction
- You are being asked to be in a research study of social workers that utilize the human-animal bond in their clinical interventions and how they experience this bond to impact clients’ levels of compassion and pro-social behavior.
- You were selected as a possible participant because you are a clinical social worker who incorporates contact with animals in your use of therapeutic interventions.
- We ask that you read this form and ask any questions that you may have before agreeing to be in the study.

Purpose of Study
- The purpose of the study is to examine how clinicians experience the human-animal bond to impact their clients' levels of compassion and pro-social behavior.
- This study is being conducted as a research requirement for my MSW degree.
- Ultimately, this research may be published or presented at professional conferences.

Description of the Study Procedures
- If you agree to be in this study, you will be asked to do the following things: Participate in one 30-45 minute interview via online video chat, and participate in a subsequent 15-20 minute interview after three months evaluate any new responses or perspectives that may have formed in that time.

Risks/Discomforts of Being in this Study
- There are no reasonable foreseeable (or expected) risks.
Benefits of Being in the Study
- The benefits of participation are to possibly gain new or further insight into the impact of your interventions involving the human-animal bond on your clients’ levels of compassion and corresponding behaviors. It may be an opportunity to explore issues that are of importance to you and possibly be inspired to expand on or utilize them in a new way.
- The benefits to social work/society are: It will assist in determining whether the HAB is a worthwhile intervention to employ when seeking to employ interventions that increase levels of compassion and prosocial behavior. The results have the potential to inform two rapidly growing social worker populations in the United States: those interested in compassion-fostering practices as well as those interested in incorporating animals into their clinical work.

Confidentiality
- Your participation will be kept confidential. Your name and other identifying information will not be shared with anybody else, not even my thesis advisor. In addition, the records of this study will be kept strictly confidential. My transcriptions of our conversations will be stored on my password-protected computer and the audio file will be deleted after I finish transcription. Nobody but my self will have access to the audio recording of our conversation.
- All research materials including recordings, transcriptions, analyses and consent/assent documents will be stored in a secure location for three years according to federal regulations. In the event that materials are needed beyond this period, they will be kept secured until no longer needed, and then destroyed. All electronically stored data will be password protected during the storage period. We will not include any information in any report we may publish that would make it possible to identify you.

Payments/gift
- You will not receive any financial payment for your participation.

Right to Refuse or Withdraw
- The decision to participate in this study is entirely up to you. You may refuse to take part in the study at any time (April 15, 2014) without affecting your relationship with the researchers of this study or Smith College. Your decision to refuse will not result in any loss of benefits (including access to services) to which you are otherwise entitled. You have the right not to answer any single question, as well as to withdraw completely up to the point noted below. If you choose to withdraw, I will not use any of your information collected for this study. You must notify me of your decision to withdraw by email or phone by April 15, 2014.. After that date, your information will be part of the thesis, dissertation or final report.

Right to Ask Questions and Report Concerns
- You have the right to ask questions about this research study and to have those questions answered by me before, during or after the research. If you have any further questions about the study, at any time feel free to contact me, Pear Wilson at pwilson@smith.edu or by telephone at (413) 693-4805. If you would like a summary of the study results, one will be sent to you once the study is completed. If you have any other concerns about your rights as a research participant, or if you have any problems as a result of your
participation, you may contact the Chair of the Smith College School for Social Work Human Subjects Committee at (413) 585-7974.

Consent

• Your signature below indicates that you have decided to volunteer as a research participant for this study, and that you have read and understood the information provided above. You will be given a signed and dated copy of this form to keep.

Name of Participant (print): ________________________________________________
Signature of Participant: ____________________________ Date: __________
Signature of Researcher(s): ____________________________ Date: __________

[if using audio or video recording, use next section for signatures:]

1. I agree to be audio taped for this interview:

Name of Participant (print): ________________________________________________
Signature of Participant: ____________________________ Date: __________
Signature of Researcher(s): ____________________________ Date: __________

2. I agree to be interviewed, but I do not want the interview to be taped:

Name of Participant (print): ________________________________________________
Signature of Participant: ____________________________ Date: __________
Signature of Researcher(s): ____________________________ Date: __________