# The effectiveness of animal assisted therapy to reduce older people's loneliness

**Environment, Animals** 



With an increase in the number of elderly people in the world's population, there as also been an increase in mental health problems, one problem is greater loneliness in on these older people. Within long-term care facilities there has been greater awareness and action to try an improve an older person's quality of life. Some techniques to aid in curbing and improving an older person level of loneliness in a long-term care facility is partaking in group activities to garden or play games together, another is to increase the use of social media to keep in contact with their loved ones (Brimelow & Wollin, 2017). While these are good activities to do, there are others that can be helpful as well. There has been a lot of research done on the benefits of Animal Assisted Therapy (AAT) on reducing older people's loneliness and improving their quality of life, there has not been as much research on whether there is only individual interaction with the animal or if there is group interaction with the animal. Also, there is no research in this area that can be related back to the Australian population directly because most of the research conducted has been done in other countries.

### **Literature Review**

AAT is the use of an animal companion for therapeutic purposes to improve a persons mental, social and emotional functioning (Vrbanac et al., 2013), loneliness is one of the problems that is thought to be improved by this practice (Banks & Banks (2005). Loneliness is one of the issues that have been found to affect older individuals overall perceived health and wellbeing (Paul, Ayis & Ebrahim, 2006; Lindgren, Svardsudd & Tiblin, 1994). There are many studies that suggest that animal intervention can be beneficial to an elderly individual's perceived health and wellbeing and reducing loneliness

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(Banks & Banks, 2005; Brimelow & Wollin, 2017; Ebener & Hunhui, 2017; Gardiner, Glendenhuys & Gott; Vrbanac et al., 2013). While the previous research does suggest that this form of intervention is beneficial, there are also problems regarding the cost, accessibility and the health of the residents (Ebener & Hunhui, 2017) The proposed study will draw on the previous research and is similar to Banks and Banks (2005) which also focused on group and individual AAT and its effects on loneliness in long-term care facilities.

The difference between the proposed study and the previous study, will be that not just a loneliness scale will be used to measure if levels of loneliness have been changed, a scale for perceived health will also be used because elderly people who suffer from loneliness and depressive symptoms also report poor health (Paul et at., 2006). Unlike Ebener & Hunhui (2017), the proposed study will not be using different types of animals and will only use one type of animal because the main focus is not the benefits of the species, but the effectiveness of group and individual AAT. Similar to Banks and Banks (2005), the proposed study will also be using an experimental research design, except instead of choosing participants from multiple longterm care facilities, the proposed study will only have participants from one long-term care facility. The proposed study differs from Banks and Banks (2005) in that it will have a control group as well which will not participate in any sort of AAT, they will continue to do things that they would normally do. Ebener and Oh (2017) evaluated previous research in this area and highlighted the limitation of different interventions used to reduce loneliness

in long-term care facilities, one is accessibility for the older people to the animal, another would be the cost of either keeping the animal in their facility or having it visit at given times. Another important issue to consider would be if any of the elderly people in the long-term care facility have any allergies to the type of animal that is used in AAT. There are many factors to consider before conducting this study to ensure the safety of all of the participants, and also the other residents that may not be participating.

### **Significance and Contribution**

The previous research on reducing loneliness in long-term care facilities focuses on techniques and activities that may help in improving an older person's contentment and reduce their level of loneliness, one of which is AAT. While there is previous research on the effectiveness of AAT, there has not been much research on what environment it would be most effective in, group or individual. This proposed study aims to address this gap and investigate if group AAT or Individual AAT is more effective in reducing loneliness for older people in long-term care facilities. The contribution of this proposed study will be that it would help in improving the current long-term care facilities by informing them of which techniques are more beneficial in reducing loneliness among their residents and therefore improving the resident's quality of life overall happiness.

# **Proposed Research Methodology**

The proposed study will be using a non-random sampling method where the participants sing up to participate in this study from the selected long-term care facility. These participants will then be randomly allocated to either the

control group (C0), experimental group 1 (E1), or experimental group 2 (E2). C0 is the group that participates in AAT, E1 is the group where the participants partake in individual AAT and E2 is the group where the participants are involved in group AAT. Self-selection ensures that participants will be comfortable around animals if they are assigned to either of the experimental groups and is a measure to ensure no individual with an allergy to the animal chosen participates in the study. From the benefits of each animal used (bird, cat, dog, and fish) in the study by Ebener and Oh (2017), the proposed study will be using a visiting dog. This was chosen because it specifically reduces loneliness, and to ensure the time spent around the dog is controlled so each participant in the different experimental groups spends the same amount of time with the dog (Ebener & Oh, 2017). An important benefit mentioned was that a visiting dog improves the quality of life of the residents at the long-term care facility (Ebener & Oh, 2017). Qualitative data collection methods will be used by having a questionnaire that the participants will fill out. Questionnaires will be filled out before they begin AAT and after completion of AAT as a pre-test and a post-test. The questionnaire will first have questions about their general health (hearing, vision, physically wellness, etc. ) and then the questionnaire will have the 20 item Revised UCLA Loneliness Scale (Hughes, Waite, Hawkley, & Cacpioppo, 2004). The reason that the shorter revised version of this scale will be used is to ensure that the participants do not get disengaged and answer the questions as correctly as possible. Mirroring Banks and Banks (2005), the participant in the proposed study will be provided with AAT for 6 weeks.

During the 6 weeks, the participants will spend time with the dog twice a week, E1 will spend the time individually, E2 will spend it with the group and C0 will do their normal activities. There will a professional will them to guide participants while spending time with the dog and guiding them in their activities with the dog. Before the commencement of the study, participants will be informed that they can withdraw at any time and they will also be required to sign a consent form, so they agree to all the things that they study may require them to do. Due to this, extra precaution must be taken to ensure that none of the participants have a condition that prevents them from providing informed consent, such as Alzheimer's.

## **Scope and Problems**

This study focuses specifically on the effect of group and individual AAT on loneliness on older adults in long-term care facilities. Self-selection was used in this study, this may have resulted in self-selection bias, this may have resulted in the participants placed in the experimental groups having lower loneliness levels in the post-test because they really wanted to be in that group, or any other combination resulting in the data being skewed in a way it shouldn't. While random allocation was employed to attempt to overcome this issue, self-selection bias still may have occurred for any reason. Another limitation that may affect the results is the time of the AAT, 6 weeks (12 sessions), this may not be enough time for a noticeable change in the level of loneliness to occur. To attempt to combat this limitation would be to add an 'Always' section after the 'Often' section on the loneliness scale, making it a 5-point scale instead of a 4-point scale (Hughes et al., 2004).