PRACTICE

Matching Animal-Assisted Therapy Techniques and Intentions with Counseling Guiding Theories

Cynthia K. Chandler Torey L. Portrie-Bethke Casey A. Barrio Minton Delini M. Fernando Dana M. O'Callaghan

Animal-assisted therapy (AAT) interventions are often used in mental health practice, yet there are few studies to assist mental health counselors in integrating AAT practice with theoretical foundations. The authors draw upon the literature on AAT intentions and techniques to illustrate how these practices are consistent with a variety of theoretical orientations. Case illustrations are provided.

Animal-assisted therapy (AAT) incorporates animals into the therapeutic process. The therapy animal works in partnership with a counselor to provide compassionate and stimulating counseling to facilitate human client recovery (Chandler, 2005). AAT applications in mental health counseling are increasingly popular because the modality can impact a number of concerns. Researchers have found that AAT is effective in increasing positive social behaviors and decreasing behavior problems (Fick, 1993; Heindl, 1996; Hergovich, Monshi, Semmler, & Zieglmayer, 2002; Redefer & Goodman, 1989; Richeson, 2003; Trotter, Chandler, Goodwin-Bond, & Casey, 2008; Walsh, Mertin, Verlander, & Pollard, 1995); enhancing self- esteem (Walsh &

Cynthia K. Chandler, Torey L. Portrie-Bethke, Casey A. Barrio Minton, and Delini M. Fernando are affiliated with the University of North Texas. Dana M. O'Callaghan is a graduate of the University of North Texas. Correspondence concerning this article should be addressed to Cynthia K. Chandler, Counseling Program, University of North Texas, 1155 Union Circle, # 310829, Denton, TX 76203-5017. E-mail: Cynthia.Chandler@unt.edu.

Mertin, 1994); and decreasing depression and anxiety (Barker & Dawson, 1998; Colombo, Buono, Smania, Raviola, & Leo, 2006; Folse, Minder, Aycock, & Santana, 1994; Hansen, Messinger, Baun, & Megel, 1999; Holcomb, Jendro, Weber, & Nahan, 1997; Shiloh, Sorek, & Terkel, 2003; Steed & Smith, 2002). Other researchers have reported that animal interventions enhance psychophysiological health and healing (Fine, 2006; Friedmann, Katcher, Thomas, Lynch, & Messent, 1983; Friedmann & Thomas, 1995; Odendaal, 2000; Wilkes, Shalko, & Trahan, 1989) and increase client motivation to participate in counseling (Holcomb & Meacham, 1989; Lange, Cox, Bernert, & Jenkins, 2006/2007; Macauley, 2006). Further, interaction with a therapy animal has a calming effect and increases clients' sense of safety (Lange et al.; Levinson, 1997).

It is becoming increasingly clear that AAT can be beneficial, and an expanding research base illustrates the diversity associated with its applications. In a comprehensive literature review O'Callaghan (2008) identified 18 primary techniques and 10 primary intentions or purposes of AAT techniques (Tables 1 and 2; letter and number codes in the next sections can be found in the tables). Given this diversity within AAT approaches, it would seem that an understanding of how AAT can be consistent with different theoretical orientations would help interested counselors conceptualize AAT from within their own theoretical frameworks. The purpose of this article is to illustrate, using case examples, how O'Callaghan's 18 techniques and 10 intentions are consistent with guiding theories of counseling. Since meta-analytical research indicates that relationship factors (e.g., the client's experience of respect, collaboration, acceptance, and validation from the counselor) account for 30% of successful therapeutic outcomes (Asay & Lambert, 1999; Lambert & Ogles, 2004), it is important to begin by discussing how AAT can be used to promote the counseling relationship generally.

AAT AND THE THERAPEUTIC RELATIONSHIP

A number of AAT applications are intended to enhance the counseling relationship (e.g., building rapport [A], enhancing trust [I], and facilitating feelings of safety [J]). O'Callaghan (2008) found that the vast majority of mental health counselors who practiced AAT reported using it to build rapport in the therapeutic relationship (A), often by reflecting on the client's relationship with the therapy animal (1), encouraging the client to interact with the animal (2), and sharing information about the animal (10, 11).

The power of the client-therapy animal relationship for promoting the therapeutic alliance is particularly notable when clients are unable or unwilling to

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		Pers- Cent	Cog- Beh	Beh	Adler- ian	Psy- anal	Gest- alt	Exist- ential	Reality	Sol- Foe
	Counselor reflects/comments on client's relationship with therapy animal	X	X	Х	Х	Х		Х	Х	Х
2	Counselor encourages client to interact with therapy animal by touching or petting therapy animal			X	х		Х		Х	
1	Counselor encourages client to play with therapy animal during session		Х	Х	Х				Х	
	Counselor encourages client to tell therapy animal about client's distress or concerns				Х		х			
;	Counselor and client engage with therapy animal outside of traditional therapeutic environment (e.g., taking animal outside for a walk)			х	Х					
3	Counselor interacts with therapy animal (e.g., asking animal to perform tricks)		х	Х	х					
7	Counselor encourages client to ask therapy animal to perform tricks		Х	Х	Х				х	Х
3	Counselor encourages client to perform commands with therapy animal		Х	Х	Х				Х	Х
)	Counselor comments or reflects on spontaneous client-animal interactions	Х	х	Х	Х	Х			Х	Х
0	Counselor shares information about therapy animal's family history (lineage, breed, etc)				х					
1	Counselor shares other history related to therapy animal				х					
2	Counselor shares animal stories and metaphors									
3	Counselor encourages the client to make up stories involving the therapy animal						Х			
14	Counselor utilizes the client-therapy animal relationship, such as: "If this dog were your best friend, what would he know about you that no one else would know?" or: "Tell Rusty [therapy dog] how you feel and I will just listen"	Х		X				х		
15	Counselor encourages client to recreate/reenact experience where therapy animal plays a specific role	Х		Х				Х	х	
16	Counselor has therapy animal present without any directive interventions	Х			х				х	
17	Counselor creates specific/structured activities with therapy animal		Х	Х	х		Х		х	Х
8	Counselor allows therapy animal to engage with client in spontaneous moments that facilitate therapeutic discussion	Х			Х	х	Х	Х	х	Х

Table 1. Matching AAT Techniques with Counseling Guiding Theories

		Pers- Cent	Cog- Beh	Beh	Adler- ian	Psy- anal	Gest- alt	Exist- ential	Reality	Sol- Foe
A	Building rapport in the therapeutic relationship	Х	Х		Х				Х	Х
В	Facilitating insight	Х	Х		Х	Х	Х	Х	Х	
С	Enhancing client's social skills		Х	Х	Х			Х	Х	Х
D	Enhancing client's relationship skills		Х	Х	Х			х	Х	Х
Ε	Enhancing client's self-confidence	Х	Х					х	х	Х
F	Modeling specific behaviors		Х	Х						Х
G	Encouraging sharing of feelings	Х	Х		Х	Х	Х	х	Х	
н	As a behavioral reward for client			Х						
I	Enhancing trust within the therapeutic environment	Х	Х		Х				Х	Х
J	Facilitating feelings of being safe in the therapeutic environment	х			х				х	х

Table 2. Matching AAT Intentions	with Counseling	Guiding Theories
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form a relationship with a human counselor. For example, one of the authors counseled a 16-year-old male who sat silently in session with several other counselors. Offered the opportunity to work with the author and her red and white cocker spaniel, Rusty, the young man became motivated to attend sessions, was active in sessions, and frequently talked about his interactions with the therapy animal outside of sessions. He was quite gregarious when playing with the dog for the first and last ten minutes of each counseling session. Between these allotted playtimes, the dog would rest his head on the client's lap, and the client would gently rub the dog's head while communicating with the counselor his painful life experiences. The counselor with the dog was the only counselor with whom the client chose to establish the relationship necessary to facilitate therapeutic progress. In this case, the dog served as a bridge to establish a healing connection between the client and the counselor.

AAT AND COUNSELING GUIDING THEORIES

Since a counselor's theoretical model and intervention techniques account for 15% of a successful therapeutic outcome (Asay & Lambert, 1999; Lambert & Ogles, 2004), AAT applications may be more effective if mental health counselors comprehend how they are consistent with major premises of their guiding theories. In what follows we address how various AAT intentions and techniques (O'Callaghan, 2008) are consistent with several theoretical orientations, using clinical examples to illustrate. Tables 1 and 2 summarize ways in which AAT techniques and interventions correspond to each theoretical orientation.

AAT and Person-Centered Counseling

Person-centered counseling is a nondirective approach in which the counselor reflects and clarifies client communications, verbal and nonverbal, to enhance insight and move clients toward greater self-acceptance (Tudor & Worrall, 2006). Person-centered counselors do not manage or direct a session; nor do they take responsibility for the client. Rather, they help clients to feel safe and open by being congruent, authentic, genuine, caring, accepting, warm, and empathic. With this counseling experience, referred to as *unconditional positive regard*, clients increasingly trust themselves and move toward becoming more self-actualized. Clients free themselves from the past, distort less in the here-and-now, and experience greater self-acceptance as they progress through person-centered counseling (Tudor & Worrall).

In person-centered counseling the counselor-client relationship and the therapeutic atmosphere are considered primary mediums for healing; therefore, any AAT intention or technique that fosters these would be an asset to the therapeutic process. AAT therapeutic intentions of building rapport (A), enhancing trust (I), and facilitating feelings of safety (J) would be appropriate. A friendly, sociable therapy animal who by its warm, lovable, and accepting nature contributes to a client's experience of unconditional positive regard and a safe therapeutic environment may in turn facilitate client insight (B). The person-centered emphasis on reflection of feelings is compatible with AAT therapeutic intentions to encourage sharing of feelings (G) and fosters client self-acceptance or self-confidence (E). Reflecting and clarifying the client's communications are compatible with AAT techniques for reflecting the client's relationship with the therapy animal (1) and reflecting upon spontaneous client-animal interactions (9). The nondirective nature of person-centered counseling is also compatible with AAT techniques such as having a therapy animal be present without any directive interventions (16) and therapeutic discussion of spontaneous interactions between client and animal (18).

The potency of AAT to enhance rapport with a client using a person-centered approach is demonstrated by a nondirective intervention by one of the authors with an adolescent female who was being admitted to a juvenile detention facility. Angry and afraid about being brought to the facility, the adolescent refused to cooperate with the probation officers who were attempting to conduct an intake interview but simply sat with her arms crossed and a scowl on her face. As the counselor and her therapy dog, Rusty, passed by the door where the interview was taking place, one probation officer noticed an abrupt change in the adolescent's facial expression; her face and eyes softened after she noticed the dog passing. The probation officer asked the counselor if she and Rusty would spend a few minutes with the young woman; the two probation officers then withdrew. When the counselor came in with Rusty wagging his tail, the adolescent's face changed to a half smile. Invited to pet Rusty, the young woman slid off her stool and crawled on hands and knees the few feet over to the dog. Rusty crawled into her lap and she embraced him with a gentle hug. The counselor knelt down beside the pair but remained silent to allow their rapport to build. As Rusty leaned into the young woman, tears drifted down her face. As her tears touched his fur, Rusty nuzzled even closer, snuggling his nose up between her neck and shoulder. Feeling Rusty's version of a hug, the adolescent began to sob heavily. The counselor was careful not to interrupt the process and remained very still and quiet as she knelt next to them.

After a few moments, the counselor gently reflected the young woman's distress and how Rusty was comforting her. The young woman replied with a nod to the counselor's interventions. The counselor patiently waited as the adolescent's crying slowed. After wiping her tears on the back of her sleeve, the young woman kissed the dog on the head. She said "thank you" to Rusty and then to the counselor. As the adolescent rose, she confirmed she was ready to speak with the probation officers, and with their re-entrance counselor and dog departed. The probation officers reported later that the young woman had a completely different attitude after the AAT intervention; she no longer demonstrated fear or anger and was very polite and cooperative.

AAT & Cognitive-Behavioral Counseling

A primary focus of cognitive behavioral counseling is to identify and challenge irrational client beliefs that contribute to maladaptive feelings and behaviors (McMullin, 1986). Its methods involve identifying and challenging irrational thoughts, changing communication style, modeling and role-playing new behaviors, and completing cognitive homework. Cognitive-behavioral counselors are viewed primarily as teachers and practice partners for clients to challenge self-defeating beliefs, thoughts, and behaviors and to integrate new ways of believing, feeling, and behaving.

Cognitive counselors may use such AAT intentions as building rapport (A) and enhancing trust (I). Similarly, sharing feelings (G) may be helpful for identifying the consequences of rational and irrational thoughts, and developing insight into these patterns (B) may facilitate concrete client change. The development of social and relationship skills (C, D) is a traditional goal of cognitivebehavioral counseling, and mental health counselors may use AAT to help clients role-play and practice these skills. Finally, counselors may model specific behaviors (F) with therapy animals, and successfully interacting with a therapy animal may help to enhance a client's self-confidence (E).

AAT interventions offer a number of practical approaches to helping clients identify and challenge irrational beliefs and self-defeating behaviors. For example, the mental health counselor could use the client-therapy animal relationship to assist in the belief identification process (14) (e.g., "If this dog were your best friend, what would he know about you that no one else would know?"). Clients who struggle to role-play with humans could be guided to practice the dialogue with a therapy animal first (15). Even though an animal may not completely understand a client's words, it may be sensitive to nonverbal content and provide feedback to the client through nonverbal expressions (e.g., approach/avoidance, relaxed/tense, eye contact/aversion, quiet/vocalizing, friendly/ignoring, command compliance/resistance). The counselor may also interact and model behaviors with the animal (6) or ask the client to practice new and more functional behaviors with the animal (7, 8).

Similarly, the therapy animal can be involved in more specific or structured activities (17). Practicing new positive behaviors with an animal first may be much more fun and much less threatening than trying them out on humans who may be quick to criticize or discount a client's attempts at change. The use of humor is an important part of cognitive-behavioral counseling, and all the tasks mentioned can be assisted through encouragement of play during sessions (3). The counselor's feedback on positive client-therapy-animal interactions (1, 9) can reinforce client adaptation of pro-social behaviors.

One of the authors used AAT techniques and intentions in a manner consistent with cognitive-behavioral counseling with a group of adolescent males. One client was watching his peers in the counseling group take turns throwing a ball as Rusty retrieved it with great speed and enthusiasm. When it came to his turn, the client used the ball to draw Rusty close, grasped his collar, and teased him by moving the ball back and forth a few inches from the dog's nose. Rusty signaled his annovance by shifting his body weight and tugging against the grasp on his collar. The mental health counselor had to intervene and direct the client to release the dog and throw the ball. Ordinarily, Rusty would retrieve the ball and drop it in the client's hand, but Rusty returned the ball on the ground just short of the client's reach. When the client stepped forward to pick up the ball. Rusty backed away to stay just out of reach. The client complained to the counselor about Rusty's behavior, and the counselor used the opportunity to explore whether he might have done something to precipitate Rusty's avoidance. Eventually, the client was able to acknowledge that because he had treated Rusty with disrespect, Rusty no longer trusted him. The client was further able to discover that he tried to feel powerful by teasing and bullying others when he felt most inadequate. He committed to a new way of socializing not only with Rusty but also with the other members in his group. Over several weeks, he was seen to gradually modify his social behavior; as he transformed, Rusty began to trust him and allowed the client to hug and pet him.

AAT and Behavioral Counseling

Behavioral counseling is a goal-focused approach to altering behavior that restricts clients' social, occupational, and other important activities, thereby improving their quality of life (Marks, 1986). It involves continual assessment and measurement of client progression toward goals. The role of mental health counselors is to teach clients new skills by providing instructions, modeling new behaviors, designing opportunities for behavioral rehearsal, and providing feedback on client performance (Wilson, Gottfredson, & Najakal, 2001). Within this role, counselors assign homework and self-monitoring to help clients to generalize and transfer what they learn during session to outside situations (Wilson et al.).

AAT intentions related to enhancing clients' social (C) and relationship (D) skills are consistent with the goals of behavioral counseling. Many clients find that petting, playing, or performing with the animal are fun and rewarding, and the use of interactions with a therapy animal as a behavioral reward for the client (H) is consistent with the use of positive reinforcement to increase target behavior. Similarly, removal of opportunities for interaction with the animal may help to decrease target behavior (punishment). For example, one author worked at a juvenile detention center where merit points were granted to residents for pro-social behaviors and accomplishments but points were deducted for misbehavior and failure to complete tasks; only adolescents who achieved and retained enough points were allowed to participate in one of their most popular AAT activities, equine-assisted therapy at an off-site ranch.

Client willingness and motivation to change is essential in behavioral counseling. By encouraging clients to interact with the therapy animal by petting (2), playing (3), or performing tricks or commands (7, 8), a counselor can offer clients opportunities to engage in counseling in entertaining ways. Besides providing entertainment, these interactions may help clients to manage distress, as evidenced by Odendaal's discovery (2000) that just a short visit with a therapy dog was associated with lower levels of human blood-level stress hormones and higher levels of hormones associated with pleasure and healing. Further, the mental health counselor may model social behaviors (F) by demonstrating appropriate touch of the animal, using positive verbal and nonverbal communication with the animal, and having the animal perform tricks (6). At other times, counselor and client may engage with the animal outside the traditional therapeutic environment (5), such as taking the animal for a walk, and working to generalize or transfer what is learned in session to situations outside the counseling room. Finally, the counselor can create specific, structured activities with the therapy animal (17) that allow the client to experience or practice new behaviors. The counselor's feedback on client performance of newly learned behavior is essential for client growth and development and can be facilitated by commenting on client-therapy animal interactions (1, 9).

One of the authors frequently observed how her therapy dogs' behavior served as a powerful behavioral model for clients. Therapy dog Dolly, a red and white cocker spaniel, was socialized and trained to work around horses on a ranch that provided equine-assisted counseling. Many adolescents who had no prior experience with horses showed their fear by staying outside the corral and watching others engage with the horses. Those who saw the 25-pound Dolly enter the corral and interact comfortably with the horses would often say, "Well, if Dolly can do it, so can I!" They would move into the corral, stand next to Dolly, and pet the horse. Dolly's behavior around the horses so impressed adolescents from the detention center that they nicknamed her "Daring Dolly."

In another example of modeling behavior, Rusty was trained to wait before retrieving a food treat or dog toy placed just a few inches from him. This exercise greatly impresses upon adolescents the capacity for self-discipline and impulse control. They are further impressed by Rusty's ability to wait patiently for the "take it" command with a food treat lying on the bridge of his nose; when he hears it, he flips the treat up in the air and catches it in his mouth. For weeks following this demonstration, group members reflect in and between counseling sessions upon how Rusty revealed for them their own potential for self-control.

AAT and Adlerian Counseling

The Adlerian view of human nature is that humans are motivated primarily by social relatedness; that is, *inferiority feelings* motivate individuals to *strive for significance* (superiority) within family and community (Dreikurs, 1950). Each individual develops a unique life plan for achieving a sense of social belonging and achievement, and behavior is purposefully enacted to achieve these goals. Striving for social significance and superiority can be manifest in functional or dysfunctional ways, depending upon the individual's perception of life events (Dreikurs). Healthy striving moves a person toward greater social connectedness; unhealthy striving moves a person away from social connectedness (Dreikurs). Perceived frustrations or failures within a social system can result in discouragement, which may compound movement away from social interest. The Adlerian counselor helps clients to understand and adapt the private logic that drives their life style so they can achieve greater social success and satisfaction in the life tasks of work, love, and friendship (Kottman, 2003). The counselor may focus on client perceptions of childhood experiences and interpretations so as to illustrate private logic and empower clients to modify beliefs and reorient their approach to life in a manner that is more satisfying and functional (Kottman).

From an Adlerian perspective an egalitarian therapeutic alliance facilitates client encouragement and movement toward healthier social striving (Adler, 1950). To establish an egalitarian relationship, the mental health counselor can utilize AAT to facilitate rapport (A), trust (I), and feelings of safety (J). Adlerian counseling emphasizes social relatedness, further highlighting its compatibility with AAT applications. An animal qualifies as a therapy animal based on its ability to connect and interact with humans. Though AAT is not limited to canines and equines, dogs and horses are keenly aware of even the most subtle social cues that communicate intention and interaction, and their wide repertoire of vocal, facial, and bodily expressions makes them especially capable social communicators (Gosling, Kwan, & John, 2003; Hill, 2006; Hoffman, 1999; Mistral, 2007; Roberts, 2008). Adlerian counselors may utilize opportunities for social interaction between client, counselor, and therapy animal to facilitate insight (B), enhance client's social and relationship skills (C, D), and encourage sharing of feelings (G).

The highly social nature of both Adlerian counseling and AAT are also consistent with nearly all AAT techniques. For example, all techniques involving interaction with a therapy animal are social (1–9, 14–18). An Adlerian counselor may stimulate clients to share their own family histories by first sharing information about the animal's family history (lineage, breed, species) (10) and other personal history (11). Sharing a therapy animal's history can be especially effective if it is a history with which a client can relate. For example, the Adlerian concept of *organ inferiority* is the discouragement that may result from a personal illness or disability that interferes with life function (Dreikurs, 1950). Children fighting cancer in an oncology unit may become discouraged; however, one of the authors observed that these children were greatly encouraged by a visit from a therapy dog with his handler. This three-legged dog, a black Labrador cancer survivor, made weekly visits to the hospital and lifted spirits and instilled hope in his young clients.

Consistent with Adlerian counseling strategy, Rusty worked with one of the authors to help clients at a juvenile detention center uncover and challenge their self-defeating private logic. Rusty has an impressive repertoire of tricks and commands, and many of the clients were highly motivated to have Rusty respond to their requests for tricks. However, he did not always perform exactly the way the clients expected. Rather, he might respond to requests with a stare and tail wag, or he might use trial and error in an attempt to guess what the client wanted. Discouraged and with very low frustration tolerance, some adolescents quickly concluded that Rusty did not like them or that they were incapable of doing such marvelous things with a dog.

The counselor was able to use the opportunity to explain to the clients that dogs do not understand the "meaning" of words. Rather, they learn to rely on a very specific sound to convey a very specific instruction, and they listen for exact tones and pronunciations to comprehend what is being communicated. Thus, dogs who readily respond to their owner's vocal commands may not as quickly or efficiently respond to a stranger's voice if the command is delivered using a style, speed, or accent that is new to the dog. This explanation allowed the counselor to help the clients understand that the mistaken belief that led them to perceive the outcome as a personal failure was their misperception of self-worth. Encouraged, the adolescents would return to Rusty and practice with him until he understood their vocal commands. Then adolescents and dog would rejoice together about their successful interactions. In essence, the Adlerian counselor used AAT to help individuals who were discouraged understand their self-defeating private logic, create a new productive logic, and experience success with a realistic perspective.

AAT and Psychoanalytic Counseling

Freudian psychoanalytic theory postulates a deterministic view of human nature in that unconscious biological and instinctual drives may result in irrational motivations as the individual evolves through psychosexual stages in the early years of life. Freud proclaimed that a person's internal psyche is comprised of the id (innate instinctual personality at birth); ego (mediator between internal instincts and reality of the external world); and superego (social code, traditional values and ideas), which vie for control over the person's psychic energy (Hall, 1954). According to Freud's psychoanalytic theory, people are mostly unaware of why they feel or act the way they do, and when dysfunction occurs it is usually because either neurotic or moral anxiety has threatened to throw the balance of power more toward the id or the superego (Hall). Through psychoanalytic counseling, clients can gain conscious awareness of the unconscious patterns of their thinking, which enables them to work through trauma and relieve internal pressure (Singer, 1973).

To return a client's internal world to a state of balance, psychoanalytic counselors help clients to bring unconscious processes into conscious awareness so that they may rely on logic instead of being influenced by anxiety. Psychoanalysis is a long-term process whereby clients are encouraged to freeassociate about whatever comes to mind: their feelings, fantasies, experiences, memories, and so forth (Hall, 1954). During this process, clients unconsciously shift to counselors their feelings and fantasies related to significant others in their past; this transference process allows clients to understand and resolve "unfinished business" from past relationships. Because transference and countertransference are pivotal components of psychoanalytic counseling, the role of mental health counselors is often to facilitate recovery by serving as a transitional object.

The presence of an animal during counseling offers additional opportunities for transference. Animals are among the best therapeutic transitional objects:

They are affectionate and responsive, unlike a toy or blanket, and unconditionally accepting and nonjudgmental, unlike most humans. As transitional objects, therapy pets combine the best therapeutic attributes of both toys and humans while avoiding the obvious limitations that toys and humans may present (Chandler, 2005, p. 6).

AAT is further compatible with psychoanalytic theory because counselors' roles are to facilitate insight (B) and encourage sharing of feelings (G). They may do this by reflecting on the client's relationship with the therapy animal (1), on spontaneous client-animal interactions (9), and on how the animal engages with the client in spontaneous moments (18).

An encounter between a young boy and a therapy animal named Tom, a sorrel and white paint horse, illustrates the utility of AAT in understanding transference-countertransference. Of the several therapy horses working that day, Tom was known to be among the most sociable, friendly, and accommodating. During a first counseling session with one 11-year-old male, the horse became skittish and tried to move away whenever the boy approached or tried to interact with him; the boy's equally young therapy partner, however, found Tom to be perfectly calm and gentle when he approached the horse (D. Bond, personal communication, April 2004). The horse's reactions led the first young boy to become increasingly frustrated with and fearful of the horse. The counselor addressed the young boy's experience by exploring what he thought was taking place; the boy explained that he thought the horse did not like him. The counselor explored why the boy thought the horse did not like him, and encouraged the boy to think about his experience over the next week. The following week, the young boy raced up to the counselor with great enthusiasm. He told the counselor he had realized the horse did not like him because he did not like himself. Upon further discussion, the boy concluded that he did not want to feel that way about himself anymore and was going to work on letting go of that belief. With this insight, the boy was able to interact with the horse without the

horse expressing discomfort and without the boy becoming frustrated or anxious. Initially, the boy had transferred his destructive belief about self onto his relationship with the horse, and the horse, a typical equine with a keen perception of subtle social cues, reacted with countertransference. In essence, the horse communicated, "You have an unresolved conflict that leads me to feel very uncomfortable and scared of you." The horse's service as a transitional object helped the boy to become conscious of an anxiety that was impairing his social functioning.

AAT and Gestalt Counseling

A major premise of Gestalt counseling is that unexpressed feelings result in unfinished business, which detracts from feeling whole and interferes with personal growth (Perls, Hefferline, & Goodman, 1980). Clients may reach an impasse, a stuck point, that interferes with life satisfaction or functioning. In the counseling process it is necessary for clients to fully explore an impasse, accept life circumstances, and become fully present and aware in the here and now. Gestalt counselors help clients to become aware of language patterns that are incongruent with feelings and experiences; in essence, clients become free to see things more completely through a genuine authentic counseling relationship. Gaining more complete images of the here and now is to subjectively fill in the "blank spaces" to affect closure through the Gestalt concept of figure and ground. Gestalt counseling often involves exercises and experiments that create opportunities for clients to move toward self-determined goals (Perls et al.).

AAT is a useful tool for facilitating sensory awareness and self-discovery in clients. Mental health counselors who observe clients having difficulty attaching words to internal states may help them to process their bodily sensations and feelings when petting and interacting with the therapy animal (2, 18, B, G). If clients can begin to authentically express less threatening experiences, they may be better able to share more threatening experiences. Further, clients who have difficulty expressing personal challenges and unfinished business may find it easier to first share their distress or concerns with the therapy animal in the presence of the counselor (4). Counselors may help clients to access internal conflicts by requesting that they make up stories about the animal (13). And, counselors can facilitate human-animal interaction activities (17) to enhance self-awareness about dysfunctional body and verbal language patterns.

One of the authors observed an experiential AAT activity designed to increase here and now awareness of self and others through communication processes. In this activity, participants entered a large riding arena with one horse roaming free. The counselor informed the group members that they needed to have the horse pass between two obstacles (rubber cones) in the middle of the arena without talking to each other, touching, or bribing the horse. The participants could talk to one another only during a brief planning session and during infrequent time-outs called by the counselor for group processing. These were the only rules for the activity. There are any number of possible solutions for this task, which may be completed in a matter of a few minutes or take hours or even several sessions. The amount of time and effort it takes a group to succeed in the task is directly related to how client internal states manifest through their communication and interactions with others to either impede or facilitate the task, and how their current level of awareness or unawareness (blank spaces) allows them to generate solutions.

The Gestalt concepts of unfinished business and impasse can also be exemplified by other AAT techniques. In an early stage of equine-assisted therapy, clients are asked to become acquainted with a group of therapy horses wandering loose in an arena, and then select the horse they would like to work with over the next several weeks of counseling. It is common for individuals to choose a therapy horse that reflects parts of their self, even though they may not be consciously aware of it. From a Gestalt perspective, this is likely because people often gravitate toward situations and relationships that reflect unfinished business in their lives; without awareness, they keep repeating the cycle and stay stuck in an unhealthy dynamic.

For example, one girl chose a horse that she later realized was extremely independent and repeatedly obstinate—which is how the counselors described the girl's behavior at school (D. Bond, personal communication, June 6, 2008). During each session the girl struggled to get close enough to place a halter and lead rope on the horse, get the horse to follow her, and get the horse to lift its foot for grooming. After a particularly frustrating session with the horse, the girl exclaimed, "Now I know what I put my mother through!" The following week the girl's mother asked the counselor what she had done to change her daughter. The counselor inquired cautiously about the reason for the mother's concern. She replied, "There is no concern, it's just that my daughter is a completely different person now; she is polite, does her chores, asks if she can help out around the house, and hugs me and tells me she loves me" (D. Bond, personal communication, June 6, 2008).

AAT and Existential Counseling

A primary goal of existential counseling is to help clients recognize ways in which they are not living fully authentic lives and to make choices that will lead to their becoming what they are capable of being (Cooper, 2003). From an existential perspective, feelings of anxiety, guilt, dread, despair, and unsettledness are responses to the reality of human living. However, individuals try to avoid these uncomfortable experiences by pretending they do not exist; this process is referred to as inauthentic living. This is problematic because at the heart of self-deception is a denial of personal freedom and responsibility. Only through acknowledging the whole life experience can persons live authentically and make the most of their life experiences. Clients are encouraged to accept their freedom to make choices, take personal responsibility for the choices, and decide what fears, feelings, and anxieties they will explore.

The existential approach of *logotherapy* hypothesizes that when clients experience a deep sense of anxiety (fear), emptiness, depression, or neurosis, it is because they have become lost in their pursuit of finding meaning in their lives. Their meaninglessness is created when they have become aware that there is no direction or plan for their life (Yalom, 1980).

The existential goals of enhancing self-awareness and searching for meaning are consistent with the AAT intention facilitating insight (B), and the existential proposition of striving for identity and relationship with others is consistent with AAT intentions of enhancing clients' social and relationship skills (C, D). Client movement toward greater personal freedom and responsibility is achieved by letting go of hindrances resulting from feelings of guilt and anxiety; this can be facilitated by the AAT intention of encouraging sharing of feelings (G). Achieving greater personal freedom and responsibility contributes to the AAT intention of enhanced client self-confidence (E). By allowing spontaneous interactions to occur between client and therapy animal (18) and commenting on the nature of these interactions (1), counselors may help clients become aware of fears or feelings that impair authentic living.

Although the following took place within a demonstration in a counselor education classroom, an existential approach was demonstrated when Rusty and his handler were invited to a doctoral seminar of about 10 people. A student volunteered to serve as a client and joined the counselor and the dog on the floor in front of the classroom. The counselor guided Rusty to lie next to the student as she invited the student to discuss what was on her mind. The student began discussing superficial events and mild stressors in a somewhat rushed yet controlled manner while making quick, repeated strokes from neck to tail down Rusty's back. Within a minute, Rusty stood up, walked in a tight circle, and then lay back down beside the student; he repeated this action two more times over the next few minutes before the student paused and looked at Rusty.

The counselor asked the student what she thought was going on with Rusty. The student replied that she felt Rusty was "unsettled." Asked why she thought Rusty was unsettled, the student said it was because she was unsettled. The student was able to note how her own inner anxiety had impacted the dog, and she elaborated that she felt unsettled because for the past two weeks she had been avoiding addressing some difficult family issues. In essence, Rusty's unsettled behavior mirrored the student's internal anxiety, thereby enhancing her awareness of the detrimental impact of trying to avoid important issues. The student then proceeded to explore the deeper feelings and pressing concerns she had been trying to avoid thinking about for the past two weeks while she gently rubbed the dog's neck and ears, and Rusty drifted off to sleep.

AAT and Reality Counseling

The view of human nature from the choice theory perspective on which reality counseling is based is that humans are born with four genetically coded needs designed for their survival: "love and belonging, power, freedom, and fun" (Glasser, 1999, p. 28). According to choice theory, individuals have a special place in their brains called the quality world in which relationships with honored individuals of importance are emphasized (Glasser). The quality world is the core of our lives, and the most important component of our quality world is people. According to choice theory, all behavior is chosen and purposeful, and individuals work to satisfy needs through total behavior (i.e., "acting, thinking, feeling, and physiology," Glasser, p. 72). Reality counseling emphasizes client choice and responsibility for choosing behaviors that meet client needs.

Several AAT techniques and intentions may facilitate progress from a reality perspective. Clients desire to spend time with the therapy animal for reasons that range from having fun (2, 3, 7, 8) to appreciating the animal's role in easing self-evaluation and change (B, G, I, J). Interactions with the animal may challenge clients in ways very similar to challenges in their life with people; however, these challenges can seem less threatening with animals than they are with people (A, C, D, 1, 9). By examining the consequences of actions, thoughts, feelings, and behaviors when engaged in AAT (14, 15, 16, 17, 18), clients can learn lessons that can be applied with greater confidence (E) to relationships with people.

A reality-based AAT application one of the authors has often observed is an equine activity found to be effective at demonstrating the consequences of negative social behavior and helping clients adapt new, more positive, social behaviors better suited to meet their needs. The exercise involves haltering a horse that is loose in a pasture and leading the horse by rope to the saddle barn. To do this, a person must be sensitive to the horse's self-preservation need and responses and successfully alter his or her own attitude, posture, walking tempo, and approach style so as to instill a feeling of trust and safety in the horse. Persons who have loud, manipulative, or controlling personal characteristics or behaviors have difficulty with the task and need to learn to make adjustments in their interaction style. Social interaction lessons learned with a horse are easily transferrable to interactions with other people. The motivation to learn and practice new social behaviors with a horse is both more entertaining and emotionally safer than first trying these behaviors with other humans.

AAT and Solution-Focused Counseling

Solution-focused counseling views humans as competent; its therapeutic emphasis is on what is possible (Macdonald, 2007). A main goal of solutionfocused therapy (SFT) involves helping clients shift from talking about problems to finding solutions. "SFT counselors believe that it is more useful for clients to understand and elaborate these solutions rather than dwell on the problems of the past. Clients are encouraged to believe that positive changes are always possible" (Fernando, 2007, p. 233). Counselors encourage clients to look at what is going right in their lives, what needs to happen to make things better in their lives, and plan the next action steps (Fernando). The therapeutic relationship is terminated once clients arrive at solutions (Macdonald).

As with other counseling orientations, the quality of the relationship between mental health counselor and client is a determining factor in the outcome of SFT. Because SFT is a brief form of counseling, counselors may greatly benefit from AAT techniques and intentions that foster a therapeutic relationship, such as building rapport (A), enhancing trust (I), and facilitating feelings of being safe in the therapeutic environment (J). Therapy animals can be helpful with modeling relationship skills (15, 17, C, D, F), and discussions about client-therapy animal interactions (1, 7, 8, 9, 18), by contributing significantly to the client's comfort, attention, concentration, and skill-building and thereby increase chances for successful practice of new feelings, thoughts, and behaviors that result in enhanced client self-confidence (E).

One of the authors observed how solution-focused AAT generated muchneeded self-confidence in an adolescent at a juvenile detention facility. The client did not believe he was a capable person. He isolated himself from other members of his group. Counselors and staff saw him as intelligent, articulate, and creative, but low self-worth was impeding his achievement. Because the client did not make progress during traditional talk counseling, his caseworker enrolled him in an equine counseling program to improve his self-esteem. The client had never been around a horse before.

From the very beginning of the equine counseling activities he emerged from his protective shell. He enjoyed being around the horses and, sensing his positive attitude, the horses actually gravitated toward him. He accomplished equine counseling activities with much ease and comfort, and his peers reinforced his growth and development with encouraging remarks during group process with the counselor of the equine program. With so much opportunity to succeed and positive encouragement from the counselor, the horses, and his peers, the client began to believe in himself; in a just a few weeks he developed into a competent, caring leader of his peer group. This translated into enhanced achievement in the juvenile detention program; and the client graduated much faster than he would have without equine counseling.

CONCLUSION

Given the large number of potential benefits and ways in which AAT can facilitate the therapeutic process, serious consideration should be given to the value of applying it in mental health counseling. As illustrated, AAT techniques can be used to develop the therapeutic relationship across counseling theories and to support specific theory-based interventions. The preceding discussion is not meant to suggest that a particular AAT technique or intention is limited to practice within a particular theoretical orientation; rather, it serves to demonstrate the versatility of AAT applications.

A word of caution, however: Not all clients are appropriate candidates for AAT, and counseling interventions should not involve a therapy animal when a situation might negatively impact the safety or welfare of any party, including the animal. In addition, not all animals are appropriate for participation in counseling. Therapy animal candidates must be evaluated and approved by a behavior specialist or trained therapy animal evaluator (Chandler, 2005). Counselors, supervisors, and counselor educators who are interested in AAT must be properly trained so as to manage risk, avoid ethical concerns about practicing outside one's bounds of practice, and enhance the potential benefits of AAT. National organizations that provide training and credentialing for AAT include Delta Society (www.deltasociety.org); the Equine Assisted Growth and Learning Association (www.narha.org). Mental health counselors interested in learning more about AAT are advised to consult Chandler (2005), Fine (2006), VanFleet (2008), and Pichot and Coulter (2007).

REFERENCES

- Adler, A. (1950). The practice and theory of individual psychology. London: Routledge & Kegan Paul.
- Asay, T. P., & Lambert, M. J. (1999). The empirical case for the common factors in therapy: Quantitative findings. In M. A. Hubble, S. D. Miller, & B. L. Duncan, (Eds.), *The heart and* soul of change: What works in therapy (pp. 33-55). Washington, D.C.: American Psychological Association.

- Barker, S., & Dawson, K. (1998). The effects of animal-assisted therapy on anxiety ratings of hospitalized psychiatric patients. *Psychiatric Services*, 49, 797-801.
- Chandler, C. K. (2005). Animal assisted therapy in counseling. New York: Routledge.
- Colombo, G., Buono, M., Smania, K., Raviola, R., & Leo, D. (2006). Pet therapy and institutionalized elderly: A study on 144 cognitively unimpaired subjects. Archives of Gerontology and Geriatrics, 42, 207-216.
- Cooper, M. (2003). Existential therapies. Thousand Oaks, CA: Sage.
- Delta Society. (2009). Home page. Retrieved March 1, 2009, from http://www.deltasociety.org
- Dreikurs, R. (1950). Fundamentals of Adlerian Psychology. Chicago, IL: Alfred Adler Institute.
- Equine Assisted Growth and Learning Association. (2009). Home page. Retrieved March 5, 2009, from http://www.eagala.org.
- Fernando, D. M. (2007). Existential theory and solution-focused strategies: Integration and application. Journal of Mental Health Counseling, 29, 226–241.
- Fick, K. (1993). The influence of an animal on social interactions of nursing home residents in a group setting. *The American Journal of Occupational Therapy*, 47, 529–534.
- Fine, A. H. (2006). Incorporating animal-assisted therapy into psychotherapy: Guidelines and suggestions for therapists. In A. H. Fine (Ed.), *Handbook on animal-assisted therapy: Theoretical foundations and guidelines for practice* (2nd ed., pp. 167–206). San Diego: Academic Press.
- Folse, E., Minder, C., Aycock, M., & Santana, R. (1994). Animal-assisted therapy and depression in adult college students. *Anthrozoos*, 7, 188–194.
- Friedmann, E., Katcher, A., Thomas, S., Lynch, J., & Messent, P. (1983). Social interaction and blood pressure: Influence of companion animals. *Journal of Nervous and Mental Disease*, 171, 543–551.
- Friedmann, E., & Thomas, S. (1995). Pet ownership, social support, and one-year survival after acute myocardial infarction in the Cardiac Arrhythmia Suppression Trial (CAST). American Journal of Cardiology, 76, 1213–1217.
- Glasser, W. (1999). Choice theory: A new psychology of personal freedom. New York: Harper/Perennial.
- Gosling, S., Kwan, V., & John, O. (2003). A dog's got personality: A cross-species comparative approach to personality judgments in dogs and humans. *Journal of Personality and Social Psychology*, 85, 1161–1169.
- Hall, C. (1954). A primer of Freudian psychology. New York: World Publishing.
- Hansen, K., Messinger, C., Baun, M., & Megel, M. (1999). Companion animals alleviating distress in children. Anthrozoos, 12, 142–148.
- Heindl, B. A. (1996). The effectiveness of pet therapy as an intervention in a community-based children's day treatment program. *Dissertation Abstracts International*, 57(4-A), 1501.
- Hergovich, A., Monshi, B., Semmler, G., & Zieglmayer, V. (2002). The effects of the presence of a dog in the classroom, *Anthrozoos*, 15, 37–50.
- Hill, C. (2006). How to think like a horse: The essential handbook for understanding why horses do what they do. North Adams, MA: Storey.
- Hoffman, M. (1999). Dogspeak: How to understand your dog and help him understand you. Emmaus, PA: Rodale.
- Holcomb, R., Jendro, C., Weber, B., & Nahan, U. (1997). Use of an aviary to relieve depression in elderly males. *Anthrozoos, 10,* 32–36.
- Holcomb, R., & Meacham, M. (1989). Effectiveness of an animal-assisted therapy program in an inpatient psychiatric unit. Anthrozoos, 2, 259–264.
- Kottman, T. (2003). Partners in play: An Adlerian approach to play therapy (2nd ed.). Alexandria, VA: American Counseling Association.

- Lambert, M. J., & Ogles, B. (2004). The efficacy and effectiveness of psychotherapy. In M. J. Lambert (Ed.), *Bergin and Garfield's handbook of psychotherapy and behavior change* (5th ed., pp. 39–193). New York: Wiley.
- Lange, A., Cox, J., Bernert, D., & Jenkins, C. (2006/2007). Is counseling going to the dogs? An exploratory study related to the inclusion of an animal in group counseling with adolescents. *Journal of Creativity in Mental Health*, 2, 17–31.
- Levinson, B. (1997). Pet-oriented child psychotherapy (2nd ed.). Springfield, IL: Charles C. Thomas.
- Macdonald, A. (2007). Solution-focused therapy: Theory, research & practice. Los Angeles, CA: Sage.
- Macauley, B. (2006). Animal-assisted therapy for persons with aphasia: A pilot study. *Journal of Rehabilitation Research and Development*, 43, 357-366.
- Marks, I. M. (1986). Behavioral psychotherapy. Bristol, Great Britain: Wright.
- McMullin, R.E. (1986). Handbook of cognitive therapy techniques. New York: W. W. Norton
- Mistral, K. (2007, August). Heart to heart: A quantitative approach to measuring the emotional bond between horses and humans. *Horse Connection Magazine*. Retrieved July 17, 2008, from http://www.horseconnection.com/site/archive/story-aug07.html
- North American Riding for the Handicapped Association. (2009). Home page. Retrieved March 5, 2009, from http://www.narha.org.
- O'Callaghan, D. (2008). Exploratory study of animal assisted therapy interventions used by mental health professionals. Unpublished doctoral dissertation, University of North Texas, Denton.
- Odendaal, J. S. (2000). Animal-assisted therapy-magic or medicine? Journal of Psychosomatic Research, 49, 275-280.
- Perls, F. S., Hefferline, R. F., & Goodman, P. (1980). Gestalt therapy. New York: Bantam.
- Pichot, T., & Coulter, M. (2007). Animal-assisted brief therapy: A solution-focused approach. New York: Haworth.
- Redefer, L. A., & Goodman, J. G. (1989). Brief report: Pet-facilitated therapy with autistic children. Journal of Autism and Developmental Disorders, 19, 461–467.
- Richeson, N. E. (2003). Effects of animal-assisted therapy on agitated behaviors and social interactions of older adults with dementia. American Journal of Alzheimer's Disease and Other Dementias, 18, 353-358.
- Roberts, M. (2008). The man who listens to horses: The story of a real-life horse whisperer. New York: Ballantine.
- Shiloh, S., Sorek, G., & Terkel, J. (2003). Reduction of state-anxiety by petting animals in a controlled laboratory experiment. Anxiety, Stress, and Coping, 16, 387–395.
- Singer, J. (1973). Boundaries of the soul: The practice of Jung's psychology. Garden City, NY: Anchor.
- Steed, H., & Smith, B. (2002). Animal assisted activities for geriatric patients. Activities, Adaptation and Aging, 27, 49-61.
- Trotter, K., Chandler, C. K., Goodwin-Bond, D., & Casey, J. (2008). A comparative study of the efficacy of group equine assisted counseling with at-risk children and adolescents. *Journal of Creativity and Mental Health*, 3, 254–283.
- Tudor, K., & Worrall, M. (2006). Person-centered therapy: A clinical philosophy. New York: Routledge.
- VanFleet, R. (2008). Play therapy with kids and canines: Benefits for children's developmental and psychosocial health. Sarasota, FL: Professional Resource.
- Walsh, P., & Mertin, P. (1994). The training of pets as therapy dogs in a women's prison: A pilot study. Anthrozoos, 7, 124–128.

- Walsh, P., Mertin, P., Verlander, D., & Pollard, C. (1995). The effects of a 'pets as therapy' dog on persons with dementia in a psychiatric ward. Australian Occupational Therapy Journal, 42,161–166.
- Wilkes, C., Shalko, T., & Trahan, M. (1989). Pet therapy: Implications for good health. *Health Education*, 20, 6–9.
- Wilson, D. B., Gottfredson, D. C., & Najakal, S. S. (2001). School based prevention of problem behaviors: A meta-analysis. *Journal of Quantitative Criminology*, 17, 247–272.
- Yalom, I. D. (1980). Existential psychotherapy. New York: Basic Books.

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