Animal Assisted Therapy: the inclusion of an animal within a treatment plan to realize a specific goal. These animals undergo specialized therapy training, testing, and certification to insure interactions are not only positive and safe but also non-disruptive to a patient’s well-being.

Animal-assisted therapy (AAT) has received a great deal of attention in recent years for its impact on health outcomes such as Cardiovascular Disease, Fibromyalgia, pain management, Autism Spectrum Disorders, Schizophrenia, Alzheimer’s Disease, Post-Traumatic Stress Disorder, and others. In most cases, this approach which utilizes animals such as dogs, cats, horses, and dolphins, is not a stand-alone therapy, but rather used to enhance current interventions. In a review of current literature, studies indicate positive and significant effects on health outcomes of patients across various settings, species of animal used, and health condition.

Research indicates that the use of animals provides “stress-reducing or stress-buffering social supports” resulting in lowered blood pressure, reduced anxiety, and increased communication efforts. Additionally, studies examining the impact of AAT on children have found that the inclusion of animals during therapy serves as a catalyst in getting them to talk and bond with the therapist.

In a review of empirical research that examined 14 studies that used animals to assist individuals with autism spectrum disorder, the researchers found that overall, studies reported positive outcomes

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including increased social interaction and communication. Additionally, studies showed decreased problem behaviors, autistic severity, and stress.\(^6\)

In a meta-analysis that reviewed 49 AAT studies focused on autism spectrum symptoms, medical difficulties, behavioral problems, and emotional well-being, researchers found that animals impact the *healing process*, noting that the characteristics of the studies and the type of participant included did not result in differential outcomes.\(^7\) In fact, the findings revealed positive and moderately strong effect sizes.

**Considerations**

There a number of positive findings from the impact of AAT on health outcomes, however, it is important to consider the methodological problems that need to be addressed to better inform the field. The implementation of AAT varies across studies including the use of animal type, the health outcome focus, the frequency of interaction, what therapy type it’s used in combination with, the participant demographic, and the setting. Additionally, a lack of consistency across assessment instruments used becomes problematic when comparing findings and examining the evidence.

The lack of a formalized treatment protocol for AAT is also a concern. Across the studies reviewed, there was no consistency in the implementation of AAT, nor the therapy type it was used in conjunction with. This inconsistency makes any chance of replication near impossible as well as the ability to generalize the findings.

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**Mode of therapy**

<table>
<thead>
<tr>
<th>Setting types: physical therapy clinics, mental health clinics, nursing homes, camps, private practice, hospitals, residential facilities, courts, correctional facilities, and others</th>
</tr>
</thead>
<tbody>
<tr>
<td>Animal types: dog, cat, rabbit, aquatic animals, horse, and other farm animals</td>
</tr>
<tr>
<td>Across lifespan: children, adolescents, adults, and the elderly</td>
</tr>
<tr>
<td>Length variations: some as little as 10 minutes others for several hours; some weekly while others monthly</td>
</tr>
</tbody>
</table>