Introduction to Dog Therapy

Using dogs to help children with autism adapt to social situations has become a much more common practice in the special education world. In general, dogs have been found to help children with autism connect to others and become more socialized. In terms of long-term aid, there are three types of dogs that families with a child who has autism should consider when deciding what kind of dog their child requires. The basic level of dog to get is a companion dog. A companion dog is an untrained dog that provides a calming influence, unconditional love, and friendship for the child. These dogs benefit the child in other areas by giving them an opportunity to get exercise and learn caring behaviors. Companion dogs can also serve as a “social magnet [that] eases conversation with other children” (Service dog or therapy dog: Which is best for a child with autism? 2017). This can help the child to socialize more with non-disabled students that they know.

The second type of dog that families with a child with autism should consider is a service dog. Service dogs receive extensive, personalized training to aid the child they are assigned to. This type of dog is beneficial to children with more extreme behaviors who would need help decreasing anxiety during medical visits, travel, or school situations (Service dog or therapy dog: Which is best for a child with autism?, 2017). These dogs are also beneficial when trying to help prevent the child from self-harming behaviors or from having meltdowns.

The third and most recommended type of dog to get for children with autism is a therapy dog. Therapy dogs receive minimal training and are a major social benefit to the children who have them. Children with autism who have therapy dogs are shown to have decreased anger and anxiety, an increased calmness, and less tantrums. Therapy dogs also help the child to become more social with others and to learn basic skills children without disabilities learn through socialization.

Children with autism can often be socially withdrawn and known to keep to themselves because they are uncomfortable with social interaction. Having a therapy dog “dampen[s] social isolation and withdrawal in children” and leads to an increase in nonverbal and verbal communication with others (Use of Assistance and Therapy Dogs for Children with Autism Spectrum Disorders: A Critical Review of the Current Evidence, 2013, 75). This is shown to occur because the dog helps to relieve the social pressure off of the child by becoming the focus of attention. The actions done by the child while caring for their dog also help them to build their social skills and sense of responsibility. These simple actions can help drive the child “into contingent social behavior” that stays with them throughout their lives (What a Dog Can Do: Children with Autism and Therapy Dogs in Social Interaction, 2010). Examples of these actions can include throwing/fetching a ball, walking together, holding a leash, and giving commands.

Therapy dogs also have been shown to be beneficial to families of children with autism, not just the child. The therapy dogs help to reduce the levels of stress related hormones in the child, which leads to less tantrums and problematic behavior (Use of Assistance and Therapy Dogs for Children with Autism Spectrum Disorders: A Critical Review of the Current Evidence, 2013, 77). This also helps to relieve stress off of the parents and other siblings because they do not have to worry about frequent problematic behavior. Since the therapy dog is playing such a large role in the child’s life, it also becomes a parental figure for the child (What a Dog Can Do: Children with Autism and Therapy Dogs in Social Interaction, 2010). The dog is helping to guide the child into life the same way their parents are. The therapy dog can also help create a sense of security and independence for the whole family that allows them to become more integrated into the community.

Study 2

This study was performed by Olga Soloman in 2010. She worked with a professional animal trainer to bring therapy dogs to the homes of children with autism. She brought one of four different dogs to each child’s home once a week for a maximum of six weeks. Each of her visits lasted about 1-2 hours and involved work with the child and the child’s siblings. In her article, Soloman details the results of the interactions of the therapy dogs with one of the children.

Childone is nine years old and the oldest child in her family. She was diagnosed with autism at age four and has had an IEP (individualized education plan) at her school since she began attending. Her IEP states that she struggles to stay on-task and remain attentive for longer than fifteen minutes. It also addresses how loud noises are distressing to her, she does not interact well with other children, but she does interact well with animals. Childone has two, younger twin sisters with whom she has a minimal relationship with because they do not have disabilities and struggle to understand childone’s reactions to events.

For all the visits to childone’s home, Soloman brought professional animal trainer Susan with her. For their first visit to childone’s home Susan brought Crystal, an Australian shepherd. This visit lasted for close to two hours and Susan taught childone commands for Crystal. Specifically these commands included “down”, “sit”, and “speak”. The command of “speak” was childone’s favorite because it “involved shaking the index finger at the dog, which produces joyful barking” (What a Dog Can Do: Children with Autism and Therapy Dogs in Social Interaction, 2010). This initial visit already showed progress for childone because she was able to stay engaged and interactive with Susan and Crystal for almost two hours. The second and third visits continued to show this same progress. For both of these visits, Susan brought Crystal and another dog, Phantom. Childone remembered the commands she originally learned and practiced them at these visits. At the end of the second and third visits, childone’s twin sisters were brought outside to interact with the dogs too for the last 15min.

The fourth and final visit was when childone showed the most progress and change in her social behavior. For this visit, Susan brought Crystal, Phantom, and a new dog named Lucky. The first major sign of progress occurred when childone, Susan and twinone were sitting with Crystal and Lucky. Childone was brushing Crystal while having a conversation with Susan, when twinone comes over and asks her to brush Lucky too. Childone responds by holding Lucky so her sister can brush him. This is an important interaction because one “can see how powerful and transformative the dogs' presence can be for these children's relationship” (What a Dog Can Do: Children with Autism and Therapy Dogs in Social Interaction, 2010).

During the fourth visit Soloman and Susan took childone, her mother, her twin sisters, and the dogs to the park. While at the park, at young girl who was a stranger to childone saw her using the “speak” command with Crystal. Childone initiated an interaction with the stranger and tried to teach her how to do the “speak” command. She even touched her hand to show her the right way to position her fingers. This was a huge step forward for childone because she generally did not enjoy interacting with others and in this situation she went out of her way to talk to someone else. In this part of Soloman’s study it is clear that the interaction with the therapy dogs greatly helped childone to become more social with her family and her peers.

**Study 4**

This study was conducted by Iva Obrusnikova , Janice M. Bibik , Albert R. Cavalier & Kyle Manley in 2013. It focused on whether therapy dogs helped to increase the physical activity of children with autism. The group for the study came from a sports club in Delaware. Four children in this sports club were autistic and their parents had enrolled them in the sports club in order to make sure their children got physical activity. The article specifically focuses on one of the four children, Sam who was an 11 year old boy with Asperger’s.

Sam was reported as having a fascination with computers and video games. His parents report that he struggles to focus on tasks and has “difficulty communicating with his peers and frequently does not respond when people speak to him” (Integrating Therapy Dog Teams in a Physical Activity Program for Children with Autism Spectrum Disorders, 2013, 37). Sam also often throws tantrums when forced to interact with people he did not like or when people touched him. Sam’s mother often struggled to get him to go to sports club because he did not enjoy it and never wanted to go.

The study began when professional animal trainers brought one therapy dog for each of the four children with autism to sports club. The dogs would participate alongside the children throughout their activities and the children would be able to give the dogs treats. Sam had a female golden retriever therapy dog and working with her increased his motivation to go to sports club. His mother found that if Sam knew the dogs would be there, hoe wanted to go too.

Overall, the study found great improvements in three of the four children with autism in relation to their physical activity and motivation to attend sports club. They believe the fourth child did not improve as much due to the short length of the study, lack of compliance from the parents, and the extreme behavior of the child (Integrating Therapy Dog Teams in a Physical Activity Program for Children with Autism Spectrum Disorders, 2013, 38). Despite this, their conclusion was that using therapy dogs is an effective way to increase the physical activity of students with autism.