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Can therapy dogs evoke awareness of one’s past and present life in persons with Alzheimer’s disease?

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Abstract

Background: Persons with Alzheimer’s disease (AD) sometimes express themselves through behaviours that are difficult to manage for themselves and their caregivers, and to minimize these symptoms alternative methods are recommended. For some time now animals have been introduced in different ways into the environment of persons with dementia. Animal Assisted Therapy (AAT) includes prescribed therapy dogs visiting the person with dementia for a specific purpose.

Aim: This study aims to illuminate the meaning of the lived experience of encounters with a therapy dog for persons with Alzheimer’s disease.

Method: Video recorded sessions were conducted for each visit of the dog and its handler to a person with AD (10 times/person). The observations have a life-world approach and were transcribed and analyzed using a phenomenological hermeneutical approach.
**Results:** The result shows a main theme ‘Being aware of one’s past and present existence’, meaning to connect with one’s senses and memories and to reflect upon these with the dog. The time spent with the dog shows the person recounting memories and feelings, and enables an opportunity to reach the person on a cognitive level.

**Conclusions:** The present study may contribute to health care research and provide knowledge about the use of trained therapy dogs in the care of older persons with AD in a way that might increase quality of life and well-being in persons with dementia.

**Keywords**

Alzheimer’s disease, Caring, Existence, Memories, Phenomenological hermeneutics, Therapy dog.
Summary statement

What does this research add to existing knowledge in gerontology?

- The present study may contribute to the research of older persons with dementia that receive AAT with a therapy dog in a lifeworld perspective and create one aspect of a deep understanding for the person’s situation when the dog is present.
- Therapy dogs might be recommended for some persons with dementia, but should be individually considered and prescribed.

What are the implications of this new knowledge for nursing care with older people?

- These situations may open up possibilities for caregivers and relatives to reach the person with AD in a person-centered way and make a connection soon after the dog’s visit.
- It contributes to caring research into quality of life and well-being in persons with dementia.

How could the findings be used to influence policy, practice, research or education?

- It seemed that the senses of those with AD were stimulated by the dog’s presence and evoked dormant memories were revived, which filled the person with life and evoked feelings about living.
- They seemed to be aware of their sense of “self” in a way that opened up the possibility to regain presence of mind, and behaving in a more confident way in the presence of the therapy dog team.
Introduction

Persons with AD commonly express themselves through behaviours such as reluctance, aggression, anxiety, wandering and crying (Ballard, et al 2009; Cohen-Mansfield, Marx, Thein & Dakheeli-Ali, 2010; Finkel, 2001; Kverno, Black, Nolan & Rabins, 2009; Vasse, Vernooij-Dassen, Spijker, Rikkert & Koopmans, 2009). Caregivers exposed to these behaviors commonly express stress, which affects the caring encounter with the person with AD and other dementias in a negative way (Gates, Fitzwater & Succop, 2003; Pulsford & Duxbury, 2006). To minimize these behaviours and to reduce these symptoms pharmacological treatment is often used. However, these can involve considerable side effects and provide only temporary relief. According to earlier studies, non-pharmacological treatment should always be considered first (Herrmann & Gauthier, 2008; Hogan et al., 2008; Kverno, Black, Nolan & Rabins, 2009). This treatment aims to create a positive environment for persons with dementia, and might include caregivers singing (Hammar Marmstål, Emami, Götell & Engstöm, 2010), validation therapy (Neal & Briggs, 2003, Söderlund, Norberg & Hansebo, 2012), and reminiscence therapy (Woods Spector, Jones, Orrell & Davies, 2005).

Animals have had an influence on human life for many years. The discourse on human and animal welfare suggests that both species need each other (Nordenfeldt, 2006) and are deeply rooted to each other (Birke & Holmberg 2009). Animal assisted therapy (AAT) includes different animals working in the health care service, and also in the care of the old with AD and other dementias in different controlled situations (Buettner & Fitzsimmons, 2011). According to Bernabei et al. (2013) and Marx et al., (2010) AAT influences persons with
dementia in positive ways reducing agitating behaviors and improving their quality of life. AAT involving therapy dogs has been credited with decreasing blood pressure, minimizing aggression and anxiety, and increasing social behavior for persons with dementia (Churchill, Safaoui, McCabe & Baun, 1999; Filan & Llewellyn-Jones, 2006; Perkins Bartlett, Travers & Rand, 2008; Richeson, 2003; Sellers, 2005) as well as improving physical capacity (Nordgren & Engström, 2012). These studies are few and data was gathered over a relatively shorter period of time, with other aims than those for the present study. However, according to Barnabei (2013) few studies have been conducted to elucidate the possible impact of animals over the course of several sessions for a suitable group of people. In Sweden therapy dogs together with their handlers (DH) are specially trained in therapy dog schools to function well in encounters with persons with AD and other dementias in specific situations. The training takes 18 months and the dog and DH get a diploma on completion (Höök, 2010). The dogs are thoroughly tested , to ensure they can manage interaction with and handle situations with persons with dementia. The visits of the therapy dog team in this study aimed to engage with persons with AD through specific activities. For these therapy dog teams the visits were prescribed for the person and thereby individualized for a particular purpose following a certain prescribed schedule, e.g. to minimize anxiety or increase activity, as well as to provide well-being and quality of life. Each situation involving a person with AD and the therapy dog is unique, and the DH adapts the activity to the situation for both the person with dementia and the therapy dog, and the trained dog knows how to approach the persons with dementia in a gentle way unlike an untrained dog. The activities could vary for each visit depending on the persons prescribed purpose. The
activities could be e.g; close contact with the dog touching its fur, talking and cuddling, or playing by throwing balls and searching for hidden sweets. To the best of our knowledge, few studies have been conducted using video observations (VIO’s) during a longer period, and as far as we know no studies have been conducted to study the lived experience of persons with dementia based on scheduled and structured therapy dog visits. To reach a deeper understanding of the persons’ with AD’s lifeworld with verbal and non-verbal expressions when encountering with a therapy dog might gain knowledge regarding the person’s lived experience on this part of life. Therefore, the aim of this study was to illuminate the meaning of the lived experience of encounters with a therapy dog for persons with AD.

**Method**

In this study a lifeworld approach with focus on how the world is experienced was used to illuminate the meaning of the encounter with the therapy dog. According to Husserl (1992) research depends on an excerpt from reality and thereby enabling the lifeworld perspective. This could be suitable when entering the life of human beings and thereby the life of persons with AD, to reach a part of their view of their lifeworld when encountering with a therapy dog. According to Husserl (1995) the researcher has to be familiar with the phenomenon in order to become familiar with the true nature of the phenomenon. Together the research group has extensive experience from clinical work as well as research for persons with AD and other dementias. The aim is to elucidate and describe the lived experience of one part of the person’s lifeworld in a way that deepens the understanding of the human being and the experience. In this study a phenomenological hermeneutical approach was used to interpret the lived
experience of the persons’ with AD’s lifeworld in encounters with a therapy dog (Lindseth & Norberg, 2004).

Data collection

The present study was carried out in one municipal nursing home in a metropolitan area in Sweden, comprising four inpatient wards. Four women and one man between 89-95 years, and a Mini mental state examination (MMSE) score between 1-17p indicating medium to severe AD (Folstein, Folstein & McHugh, 1975) were included. Inclusion criteria; diagnosed with AD and never had therapy dog visits before. One person was excluded when expressed strong negative reaction for the dog. Data comprised a series of VIO’s capturing persons with AD’s lived experience of encounters with a therapy dog. The first author (AS) recorded the sessions, 10 visits per person, making 50 videos totaling 25 hours in all, and focused especially on the encounter between the person with AD and the therapy dog.

Data analysis

The VIO’s were viewed after each session between the person with AD and the therapy dog, and were then transcribed into a text which included verbal and non-verbal communication such as speech, sounds, laughter, eye contact, smiles and body movements with no further interpretation (Hammar et al. 2010, Hansebo & Kihlgren, 2002).

The phenomenological hermeneutical research method was used to illuminate the meaning of the interaction between the person with AD and the therapy dog (Lindseth & Norberg 2004). The method is inspired by the philosophy of Paul
Ricoeur (1976) and according to Ricoeur (1989) a deepened understanding is reached by raising the essential meaning of the text to another level. The first step of the analysis was a naïve reading, followed by structural analysis and a comprehensive understanding. In the naïve reading the text was read through several times in order to grasp a first understanding of the whole, and then written down. The text was then divided and organized into meaning units and then read through and reflected upon against the naïve understanding, with the aim of the study in mind. Meaning units were condensed, compared for similarities and differences and abstracted into sub-themes. Sub-themes were then abstracted into themes and then further to a main theme, and validated against the naïve understanding. Sub-themes, themes and the main theme together with the naïve understanding and the authors’ pre-understanding were finally reflected upon to form a comprehensive understanding.

**Ethical considerations**

The study was approved by the Regional Board of Research Ethics (2010/220-31/1). The use of the therapy dog team at the nursing home was an ongoing project and the authors got the opportunity to follow their work in this research project. Due to the frailty of those taking part, their next of kin were informed about the project, and were told that their relatives could have dog visits without participating in the research project. Next of kin were also informed in writing about the study, and asked to sign a proxy consent (Karlawish et. al., 2008). Filming the persons with AD placed them in a vulnerable situation, in which they were unable to answer for themselves. During the VIO’s the first author
(AS) watched for any sign that might indicate discomfort for those being filmed, but no signs were shown. The VIO’s were coded and put in a safe to which only the authors had access.

Findings

Naïve reading

The encounter with the therapy dog seemed to elicit joy, laughter, enjoyment, and created a desire to keep the dog close, but also moments of not wanting the dog too close. The persons indicated that they saw the dog like a human being and that the encounter created a moment of calm and tranquility. Loving and protective feelings for the dog arose, and a sense of escape from everyday life, with the dog seeming like a friend at that moment, and the person not wanting to share the moment with anyone else.

The encounter with the therapy dog created a communion and an understanding with the dog. Memories from earlier life returned and were narrated, but there was also fear when memory failed, and words were lost. Switching between joyful and difficult - sad memories seemed to create uncertainty and fear over what was real and true. There was an understanding and admiration of the dog. A sadness and anxiety arose when the visit ended, and a desire was expressed to want to meet the dog again.

Please insert table I about here.
Structural analysis

The lived experience of the persons with AD and the interaction with the therapy dog resulted in one main theme, three themes and nine sub-themes (Table II).

The participants have been given fictitious names.

Table II. Sub-themes, themes and main theme that emerged from the transcript texts.

<p>| Sub-themes                          | Theme                               | Main Theme                               |
|-------------------------------------|                                     |                                        |
| Joy and a desire to have the dog close and to have its attention. In moments of peace in closeness with the dog, and keeping the dog at a distance. Affectionate towards the dog. Escaping from everyday | In harmony with the dog’s presence. Present with the dog in | Aware of one’s past and |</p>
<table>
<thead>
<tr>
<th>life to meet a friend.</th>
<th>communion and understanding.</th>
<th>present existence.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understanding the dog and the situation.</td>
<td>Balancing between memories and reality.</td>
<td></td>
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<tr>
<td>Being sad and wishing to see the dog again.</td>
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<td></td>
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<tr>
<td>Remembering joyful, difficult and sad memories.</td>
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<tr>
<td>Fearing and feeling the insecurity of what is real and true.</td>
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<tr>
<td>Fear when memory fails and words are lost.</td>
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_Aware of one’s past and present existence_

Being aware of one’s past and present existence is to be aware of one’s senses and memories and reflect upon these things with the dog by showing feelings and remembering present and earlier times in life; enjoying the dog’s presence when playing, cuddling and talking to the dog. At the same time moments of temporary presence of mind show through words and stories in the encounter with the dog. The memories tell of oneself and one’s life, with feelings and
existential thoughts on life and living. Having the dog close in the situation induces activity with the dog, and a new friend is enjoyed for the moment. The dog’s presence brings peaceful moments of harmony and love when sitting together with one’s friend. To be aware of one’s existence reveals feelings and memories involving both pleasure and difficulties that one shows through words and body language, followed by reflections and sometimes uncomfortable feelings during the dog’s visit. Moments of temporary presence of mind present the challenge of balancing between what is real and what is not. A loss of memory is noted and the discomfort this brings is related.

_In harmony with the dog’s presence_

Being in harmony with the dog’s presence is to be aware of feelings of love, peace and joyfulfulness in closeness with the dog, and in a natural way fit for that moment. One is with a beloved friend, just being present for the moment with no obligations. Laughter come to the surface when cuddling and stroking, or when throwing balls or playing games with hidden sweets. To sit by the dog’s side smiling with closed eyes, rocking slowly back and forth in the wheelchair while stroking the dog. Being quiet and just look at the dog by one’s side, sometimes looking for confirmation that the effort made to stroke the dog is a good thing.

_Mrs. Andersson strokes the dog and closes her eyes ... continues to stroke ... strokes for about 4 minutes and closes her eyes ... holds her hand on the dog’s coat quietly with eyes closed .... looks up, continues to stroke ... closes her eyes._
Being aware of the dog and its body, describing how the dog feels with words like; warm, heavy, soft and calm. Brushing the dog’s coat, with a gentle touch, but also uncertain if one is doing it right, sometimes preferring to pat the dog’s coat with the hand rather than with the brush. To keep the dog at a distance and being taken by surprise when the dog comes too close, protecting oneself by moving away from the dog, yet still in physical contact with hands on, stroking the dog. To become affectionate in the dog’s presence, telling stories of a loved friend, with loving words and feelings such as wonderful, beautiful, best friend and a miracle. Showing love and tenderness by caressing and cuddling, often face-to-face with the dog, talking about dogs in general, and its meaning to oneself. Feelings of tenderness appear when protecting the dog from danger with one’s hands like a shield, holding the dog close in one’s arms for fear of danger that the dog might hurt himself.

*The DH takes out a comb to comb the dog, Mrs. Andersson grabs the comb from DH and opens her eyes wide, puts the comb aside and looks at DH saying” No, put the comb far away from the dog”.*

Personal ideas about caring for the dog are shared, perhaps when it is limping, for example encouraging the dog to drink some water and take a rest.

*Present with the dog in communion and understanding*

To be present with the dog in communion and understanding was to be aware of the moment with the dog by one’s side, revealing memories and comprehending one’s role in the situation. By participating in communion with the dog, one can
understand and express one’s own reality and desire to be with the dog, talking in clear understandable words to the dog and the DH about life and living.

Mrs. Carlsson: “Oh oh I, I, I think they, they are strange those ladies, I can’t help it. Because they, they scream and yell and, and don’t like it there at all!”

DH: ”OK, I understand, but then it might be nice to visit us?” Smiles towards Mrs. Carlsson:” Yes, yes.” smiles DH: ”We get along well”

Mrs. Carlsson: “Yes, yes... they, they... well (shakes her head, looks down, does not smile)... and yesterday, I ran away” DH: ”You did”? Mrs. Carlsson: ”Yes, yes, yes... I took my coat and everything (laughs)... and the ladies didn’t come after me ha ha (laughs)... I don’t understand why they can’t speak in a normal tone, they all yell and scream....well they... I haven’t the strength to deal with this horrible screaming” Mrs. Carlsson looks at the dog and reaches her hands towards the dog, caressing the dog.

Escaping from everyday life, finding a friend in the dog and talking about thoughts and experiences of the hard everyday life on the ward. Escaping to a meaningful and personal reality with a friend, that one does not wish to share with anyone, and appreciating and preferring the dog to human beings.

Encountering the dog allows a silent moment with each other despite the communication barrier between oneself and the dog. They calm and caress the dog’s body in a mutual understanding, while the dog falls asleep.

The persons understand the dog’s situation when it is frightened, and calm the dog down with slow patting and quiet talk. To become aware and being able tell when the time has come for the dog to leave, and believing and feeling assured
that they will meet the dog again. A sad farewell is expressed in a changed voice and body language as well as through facial expressions.

*Balancing between memories*

Balancing between memories seems like a struggle, with clear moments of temporary presence of mind, remembering one’s past life and feelings. To become fearless of one’s memories when remembering past and present things with the dog by one’s side. Remembering joyful, hard and sad memories and a fear and insecurity of what is real and true. Becoming aware of their life and relationship with other dogs in life during the visit. Recalled stories about relationships, feelings and situations with dogs earlier in life may become clearer when having the dog close.

*Mr. Edwards:* “Yeah ... bark Poppy ...” smiles ... “Yes then, then he barked, why are you barking Poppy ... I had climbed up on ... ehh ... eh, I would pick the fruit from ... so the ladder fell down ... why does Poppy bark?, the ladder has fallen and I can’t get down, I said to Mum.”

The encounter with the dog seems to evoke other memories in life with old friends and significant places involved. Memories of old songs and lyrics back in time become clearer and are narrated.

*Mrs. David:* “Yes, yes ... Sally, I had a dog named that .... Yeah ... it's a long time ago now”. Still looks down towards the floor, looks up and sees the windows, and does not smile, bends her head down again and looks down at the floor Mrs. David: “We lived in
"Värmland", “Värmland you are beautiful you are a lovely county, the crown among Svea kingdom counties (say the words in the song)”. Smiles slightly and looks at DH”

Remembering difficulties might bring feelings of sadness told in words and with body language, vanishing smiles, shaking heads and closed eyes. Sadness also shows in paralyzed staring into thin air or out of the window, and by making repeated movements with one’s body like rocking and moving hands back and forth, while sharing memories.

Sad and difficult memories with dogs are remembered earlier in life. Fear appears when the memory fails and words are lost, reflecting on missing memories told in the present situation. Feelings of insecurity show through body language with facial expressions and with words when memories may appear uncertain or unreal.

Loss of memory occurs, and may arouse feelings of uncertainty and confusion of what is real and true, but also reveals present memories telling of earlier moments with the dog and one’s presence in that situation, for example; ‘Do you remember me?’

To be confident in the dog’s presence with one’s memories, talking clearly with a flow and in whole sentences with the dog, yet feeling uncertain and failing when one tries to talk, and tell stories about the present dog to the DH. When remembering and telling about difficult memories anxiety may arise, shown through serious expressions, sighs, shaking heads and talking incoherently where the words ‘death’, ‘suffered’ and ‘is it true’ are repeated. Through body language and words some horrible memories and thoughts are related.
Mrs. Carlsson looks at the dog: “Yeah, it’s all right ... do you think he knows what’s going to happen?” Dog handler (DH): “No ... what is it going to happen?” Mrs. Carlsson: “Kill him!” DH: “Should they kill him?” Mrs. Carlsson: “No, I mean ... yeah ... “(continues to talk incoherently about something horrible, shaking her head)”

To become upset and finding it hard to calm down after these situations with its difficulties and loss of memory. A feeling of concern might show through their body language and facial expressions sometime after these moments, and occasionally the dog’s presence cannot change feelings of upset for the moment.

**Comprehensive understanding and reflections**

The persons with AD seem to get in touch with existential thoughts and memories and are able to talk about them. According to Marcel (2001) to feel “I” is a fundamental thing in living. Without its senses the body cannot reflect over what the body sees, smells, hears and feels. A human being is a complex organism that through consciousness can experience the phenomena that show through a translation of the world through the body, the senses, through “I”.

Persons with AD might experience the interaction with the dog as what Marcel (2001) describes as their “I’, through the body, the senses and through their whole as a human being. To feel, see and hear the dog reveals feelings and expressions from a “whole” human being, allowing them to connect with their “I”. Feeling “I” might enable them to connect with memories earlier in life when they were younger and before they contracted AD. Their existence and awareness might be due to the sense of being a “whole” human being with the
dog felt through their senses, which in turn connects with inner feelings and memories that they reveal when the dog is close.

The persons with AD find a balance between memories and reality and reveal their ability to remember past and present memories with and without dogs. This appears to be similar to studies that found Episodes of Lucidity (EL) (Normann et al., 1998). It is suggested that an EL occurs when a person with dementia speaks and seems to function and be aware of the situation in a more adequate way than before. According to Normann et al., (2002, 2005) persons reveal EL in situations where caregivers interact and make conversation in person-centered care alone with the person. This appears similar to when the dog and DH are present together with the person. The dog’s presence seems to open the person’s own inner thoughts and memories, while caressing and telling the dog about memories from the present time and earlier life.

The persons with AD are in a physical closeness with the dog, caressing and talking, revealing feelings and lost memories from life past and the present time. McCormack and McCane (2006) describe different approaches to produce person-centered nursing, with person-centered outcomes such as a feeling of well-being. The encounter with the dog also seems to open up a connection between the person with AD and the dog, similar with the description of person-centred nursing between the person with AD and caregiver described by McCormack and McCane (2006).

As mentioned earlier the encounter with the therapy dog reveals memories in different ways, some good some bad. However, these memories are often connected to a childhood with animals, and also memories involving friends and
places. They can tell stories about childhood and earlier times in life with a detailed explanation of that time, and sometimes with a sad outcome. Reminiscence is also called “memory trigger” when evoking present memories in the care of persons with dementia (Woods, 2005). The presence of the dog seems to act as memory triggers, and also evokes feelings from time and places retold. The memories can also be memory triggers for other memories that open up and are reflected upon in a coherent way.

The dog also appears to provoke feelings of confidence and strength through its presence, when the person shows self-esteem by managing to protect, care and take responsibility for the dog and its safety. Hedman, Hansebo, Ternestedt, Hellström and Norberg, (2012) describe the sense of “self” in persons with mild to moderate AD. It appears that the persons with AD could sense three stages of “self”, meaning that the persons could understand their situation with the disease, and their abilities. When the persons with AD in this study protected and took responsibility for the dog, the persons were aware of their “self”, and put themselves in second place. They showed deep, tender feelings towards the dog, while at the same time it seemed like the dog understood the person’s limitations. It seemed that the senses of “self” and “I” connected together could be interpreted into a healthy, living human being in ones lifeworld, where the lifeworld of the persons with AD, despite the illness, were stimulated by the dog’s presence and dormant memories and EL was evoked, which filled the person with life and feelings in the moment.

Methodological considerations
To illuminate the persons with AD’s lived experience of their encounter with a therapy dog, an observation study was conducted in which it was deemed important to capture both verbal and non-verbal expressions on videotape. It is possible that the results would have emerged in a different way if only interviews had been conducted. Although the observations captured both verbal and non-verbal expressions, most of the participants had speech difficulties because of moderate to severe AD, which probably justified video observations as a suitable method. The visits of the dog and DH to the persons with AD were organised on prescription by Registered Nurses on the ward. The nurses’ view of the therapy dog visits may have affected which persons were prescribed. All of the participants had a relationship with dogs in their past life, and thereby probably had a positive feeling for dogs in general. This might have influenced the result because all had experience of dogs previously, compared to those who had not had that experience, or might not have even liked dogs.

Videotape recordings were made at each of the weekly visits with the dog over a period of ten weeks. To capture the person’s lived experience of the therapy dog, it was important to film every visit and not just a few, to assure that both verbal and non-verbal expressions were captured. Observing older persons with AD with video can be an intimidating situation for them. During the visit the first author (AS) sat in a corner behind the camera. Occasionally the persons changed their focus from the dog to the camera and the first author (AS) then stepped in front of the camera to show herself not to be a threat by waving to the person: this might have influenced the data. However, most of the time the person’s focus was on the dog, and sometimes they did not even notice the first author (AS) behind the camera. The DH was present and encouraged the persons with
AD to engage with the dog. The DH may have affected the persons and their mood occasionally when encountering with the dog, and this might have influenced the data, but the DH’s presence was necessary for control during the visit.

The aim of the study was to illuminate the person with AD’s lived experience of their encounters with a therapy dog. When using phenomenological hermeneutics it is important to enter the hermeneutical circle (Ricouer, 1976), with an ongoing movement between the parts and the whole in the text. The structural analysis validated the naïve reading, and with the aim of the study in mind the analysis moved back and forth to get at deeper understanding of the phenomenon.

The first author (AS) transcribed all 50 films in order to capture all possible moments with the person with AD in the encounter with the dog, and to get a view of the data and its contents. Narratives tell their own meaning about being in the world. To create a text through a narrative (in this study from the films) the researcher is always the co-author (Lindseth & Norberg, 2004). When including the lifeworld perspective in research, richness and variation in the gathered data are preferred before quantity (Dahlberg, Dahlberg & Nyström, 2008). With five persons with AD participating, and a total of 50 films, the richness and variation were deemed satisfactory. The analysis process is a difficult and consuming way of acquiring knowledge. To maintain focus on the aim and to be truthful to the data, as well as controlling and clarifying the authors’ preunderstanding, all authors constantly worked with and commented on the data analysis, and the findings were discussed thoroughly in the research group. In addition the co-authors’ different backgrounds may have increased the
trustworthiness of the study. However, it should be mentioned that as a researcher, it is impossible to obtain the person's whole experience of the interaction; it is only possible to get an insight of the lived experience in the person’s world (Lindseth & Norberg, 2004). The interpretations in this study represent one way of interpreting the text through the authors. Other ways are possible in other contexts (Ricouer, 1976). From reading the chosen literature, Comprehensive understanding and reflections, the view of the results gained a deeper meaning of the five persons with AD’s lived experiences of their encounter with a therapy dog, which may be useful for the continued use of therapy dogs. The lived experiences of the encounter of older persons with AD with a therapy dog have emerged, presenting a varying understanding that might be fruitful in other contexts. To transfer the study to other contexts than in Sweden might be possible, while how we relate to dogs in different contexts and cultures can probably influence the lived experience of the encounter with the therapy dog, and needs to be taken into account. The authors’ interpretation of the text represents one interpretation, but the text never has only one meaning; other interpretations are always possible (Ricoeur, 1976). It is not until readers implement the knowledge in their own world that the care will improve (Lindseth & Norberg, 2004).

Conclusion

The encounter with the dog seemed to create an awareness of one’s past and present existence, by fulfilling the persons with AD as a “whole” human being, while they were able to connect with their inner feelings and senses. These
situations may open up possibilities for caregivers and relatives to reach the person with AD in a person-centered way (McCormack & McCane, 2006) and make a connection soon after the dog’s visit. The present study presents one meaning of the lived experience of encounters with a therapy dog through the person’s with AD’s view. The study contributes to the research of older persons with dementia that receive AAT with a therapy dog in a lifeworld perspective and creates one aspect of a deep understanding of the person’s situation in the dog’s presence. This study may provide knowledge and open up possibilities for further use of trained therapy dogs in the care of older persons with AD and other dementias, as well contributing to caring research into quality of life and well-being in persons with dementia.

Contributions to the manuscript

Design: AS, BE, CLH, IF
Data collection: AS
Analysis: AS, BE, CLH, IF
Manuscript preparation: AS, BE, CLH, IF

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